



SHELBY COUNTY NON-PROFIT RECOVERY GRANT PROGRAM APPLICATION

* Required

In order to be eligible for a grant, non-profit organizations will be required to provide documentation to verify data provided. Incorrect or incomplete information will result in disqualification of the organization.

Applications will be accepted through 4pm September 30, 2022. Applications can be emailed to ahamberg@shelbycountyrpc.com or dropped off at the Shelby County Annex Building, 129 East Court St., Sidney from 8am to 4pm Monday – Thursday or 8am – 11:30am on Friday.

Organization Name* _____

Director Name* _____

Street Address (No PO Box)* _____

Address Line 2 _____

City* _____ State * _____ Zip Code * _____

Organization Type *: _____

Year Founded*: _____

Director Phone # * _____

Director Email * _____

Preferred method of communication * Email Mail

Federal Tax ID- 9-digit number * _____

Unique Entity ID# (UEI): _____

Effective, April 4, 2022, UEI is the official government-wide identifier used for federal awards. For information on how to acquire a UEI for your organization, see the document '*Transitioning to the New Unique Entity ID (SAM)*'.

https://www.fsd.gov/sys_attachment.do?sys_id=961b05661bf1cd90fe314000f54bcb9a

(The UEI is not required to submit the application but **will be required prior to grant award**).

Ohio Certificate of Good Standing: Find or request <https://www.ohiosos.gov/businesses/business-reports/>
(Certificate is not required to submit the application but **will be required prior to the grant award**.)

1. Is your non-profit entity physically located in Shelby County*? Yes No

2. Has your organization been in operation since January 1st 2020*? Yes No

3. Please enter the number of full-time and part-time employees for each year:

of Full-Time Jobs (2020) * _____ # of Part Time Jobs (2020) * _____

of Full-Time Jobs (2021) * _____ # of Part Time Jobs (2021) * _____

of Full-Time Jobs (2022) * _____ # of Part Time Jobs (2022) * _____

4. How much funding is being requested*? (maximum of \$10,000) _____

5. Please check all that apply on how the requested grant funds will be used*. Expenses must be incurred after March 31st, 2021, but before December 1st, 2023. (Documentation to demonstrate proof of payment for use of these funds will be required at closeout.)

General Expense: Salaries, wages or compensation paid to employees or 1099 workers
Amount: _____

General Expense: Mortgage/Rent (not eligible for organizations that operate out of a personal residence)
Amount: _____

General Expense: Utilities (not eligible for organizations that operate out of a personal residence)
Amount: _____

General Expense: Operating Costs Amount: _____

Prevention measures (purchase of items meant to protect the public and employees during the pandemic, such as protective masks and hand sanitizer, and other costs incurred by installing required safety measures and/or Virus mitigation related to air-quality and ventilation improvements and various other health and safety measures)
Amount: _____

Workforce retention and/or attraction efforts (eligible costs associated with hiring activities needed to address staffing shortages, such as expenses related to job fairs, job posting, employment incentives and eligible costs associated with job training of new employees)
Amount: _____

Technical Assistance Counseling (costs associated with 3rd party consultative services directly tied to recovery from financial hardship caused by COVID-19, includes costs such as financial planning, space planning and configuration for the purposes of health/safety, and marketing)
Amount: _____

6. Has your organization received COVID-19 related grants and loans of any kind? Yes No

If yes, please list the grants and loans received: _____

Negative Economic Impact*:

Please summarize your current situation and how the continuance of the COVID-19 pandemic has impacted your organization (decline in revenue, laying off employees, closures, etc.). Include specific information as to expenses incurred by the organization resulting directly from the continuance of the pandemic. A bullet list is recommended. If you've experienced a decline in revenue, please estimate loss due to COVID-19 during the period March 3, 2021 through the date of this application.

Workforce Impact

If applicable, please summarize how allowable workforce expenses have increased due to COVID-19. Documentation of costs from March 3, 2021 through present compared with similar costs during the same time period in 2019 must be included.

Technical Assistance/Counseling:

Certain costs associated with consultative assistance may be eligible. If you have, or plan to contract for such services, please describe the purpose, its connection to COVID-19 hardship recovery. Please provide documentation such as receipts, invoices or quotes.

Grant Request Summary:

Below, please state the grant amount being requested. Place the specific amount(s) within the appropriate allowable use category. Include documentation (receipts, invoices, quotes, etc.)

Category	Amount
Mortgage/Rent	
Operating Costs	
Utilities (specify by type)	
Benefit Costs	
Job Recruitment/Retention Costs (job posting Costs, employee retention/attraction incentives).	
Training	
COVID-19 Prevention Expenses (masks, gloves, partitions, etc.)	
Technical Assistance/Counseling	
Other	
TOTAL	

Disclosures:

Is the organization delinquent on any federal, state, or local taxes or assessments, direct or guaranteed loans, leases, contracts, grants, or any other obligations?*

Yes

No

If “yes”, please explain.

Does the organization have any outstanding judgements, tax liens, pending bankruptcy proceedings, pending lawsuits against them, or criminal proceedings?*

Yes

No

If “yes”, please explain.

Certification:

If your organization is granted funding, the following documentation will need to be provided:

1. Proof organization has been operational in Shelby County since January 1st, 2020. This can be evidenced at a minimum, by:
 - a. filing(s) with the Ohio State Secretary of State, such as articles of incorporation or other registration documents along with an Ohio Secretary of State Certificate of Good Standing;
 - b. or any other documents that demonstrate that the organization has been in operation as a non-profit since January 1st, 2020.
2. Proof employment does not exceed 50 FTE employees as of December 31, 2021. This can be demonstrated by forms such as:
 - a. 2021 W-3 (Transmittal of Wage and Tax Statement);
 - b. 2021 Form 1096 (Annual Summary and Transmittal of US Information Returns);
 - c. Payroll reports or checks that evidence numbers of workers as of December 31, 2021.
3. Approved applicants will be required to sign a grant agreement within ten (10) days of notification of an approved grant
4. Submit the following Federal documentation:
 - a. Unique Entity ID# (UEI)
 - b. Signed Form W-9 (2022)
5. All grant funds will be distributed via Direct Deposit/ACH. Approved applicants will need to provide the organization's bank account/routing number for grant fund payment
6. At close-out, proof of reimbursable expenditures (receipts, invoices) and a summary of the impact the recovery funds had on the organization and its operations.

I hereby certify that the information on this form is complete and accurate. If selected for grant funding, I will provide all supporting documentation required for verification. Please confirm your understanding of certification by initialing. * _____

Disclaimer:

The submission of an application for the Non-Profit Recovery Grant Program **does not guarantee** an award of funding. The total amount awarded will be based on first-come, first-serve basis and availability of funds. Final authority for approval will be made by the Shelby County Commissioners.

It is the sole responsibility of the applicant to determine or seek independent advice to determine the tax implications to the applicant and its owners. Please confirm your understanding of this disclaimer by initialing. *
