



Community Impact Grants Committee
AGENDA
June 13, 2023 – 3:30 PM
Council Chambers
2020 Hampton Street, Columbia, SC 29204

Jason Branham	Paul Livingston	Gretchen Barron	Jesica Mackey, Chair	Cheryl English
District 1	District 4	District 7	District 9	District 10

- 1. **Call to Order** The Honorable Jesica Mackey, Chair

- 2. **Adoption of Agenda** The Honorable Jesica Mackey

- 3. **Items for Discussion/Action:** The Honorable Jesica Mackey
 - a. **Recommended Use for \$400,000 of ARPA Funds**
[PAGES 2-14]

- 4. **Adjournment** The Honorable Jesica Mackey



COMMUNITY IMPACT GRANT GUIDELINES

FY2024 (July 1, 2023 – June 30, 2024)

Grant Cycle will open July 1, 2023

Application must be submitted in

ZoomGrants Grant Due Date: July 31, 2023

No later than 11:59 PM

PROGRAM DESCRIPTION

Pending budget approval, Richland County Council set aside \$1,780,000 of the General Operating Fund for the Community Impact Grant (CIG) Fund for fiscal year 2024. Sixty percent (\$1,068,000) of CIG funds will be allocated to identified Community Partners listed at the end of this document. Forty percent (\$712,000) will be allocated for competitive grants as described in this document. This program is designed to provide financial support to organizations and agencies that carry out community-based programs and/or services throughout Richland County. In keeping with the mission of Richland County Government, this program attempts to encourage organizations to continue to offer innovative and much needed services that enhance the quality of life for all citizens of this County.

DISCRETIONARY GRANT TIMELINE

Request for Applications:	July - July 31, 2023
Application Due Date:	July 31, 2023, 11:59 pm
Community Impact Grant Committee Meeting	August, 2023 (Date TBA)
Grant Award Notifications:	Late September, 2023
Quarterly Reports:	Due by January 31, 2024, April 30, 2024 (if awarded)
Final Reports:	Due by July 31, 2024 (if awarded)

PROGRAM ELIGIBILITY AND DESIGN

Organizations that are determined as charitable under Section 501(c)(3) of the Internal Revenue Code and nonprofit organizations registered as a charity with the Secretary of State. **Richland County will not award grants to individuals, fraternal organizations and organizations that support and/or endorse political campaigns.**

Religious organizations may receive funding; however, Richland County may not sponsor nor provide financial support to a religious organization in a manner which would actively involve it in a religious activity (i.e. public funds must not be used for a religious purpose). Thus, any funds provided must be solely utilized for secular purposes and the principal or primary goal of the sponsored activity must not be to advance religion.

The program fund is set up as follows

Sixty percent of the annual County allocation shall be distributed to Groups identified by Council as Community Partners. Community Partners must submit an annual application indicating the requested amount and proposed use of funds along with all other application data. Community partners are not eligible for competitive grant funding. Forty percent of the annual County allocation shall be distributed based upon competitive grant applications. Organizations can apply for funding up to \$50,000 for only one project. Projects that focus on multiple impact areas are only eligible for one grant. Organizations may only submit one application annually.

Grant recipient organizations may not re-grant or sub-grant County funds to other organizations. All funds must be spent on direct program expenditures by the organization who is granted the allocation.

PROGRAM REQUIREMENTS

- Organizations must apply to be considered for funding each year.
- Organizations receiving Accommodation Tax or Hospitality Tax funds will not be considered for funding, unless waived by majority vote of Council.
- Richland County Council shall make all awards pursuant to this grant program.

PROGRAM CRITERIA (proposed request must address one of the following)

- The activity meets service-type activities outlined in the organization's mission, long-range plans, goals and objectives.
- The activity, in whole or in part, provides opportunities for underserved populations in Richland County.

- The activity provides solutions by way of systems or approaches that can prevent, mitigate or resolve individual, family, or community problems as outlined in the categories of the application.

THE PROGRAM WILL NOT FUND (however, not limited to):

- Fundraising Projects
- Debt Reduction
- Endowment Development
- Medical Research/Health Related Issues
- Conference Travel
- Conference Underwriting or Sponsorship
- Gift Cards
- Regular budgeted operating expenditures
- Asset purchases
- CIG Awards may be funded in whole or in part by SLFRF funds authorized by the ARPA. As such SLFRF funds cannot be used to replenish financial reserves, satisfaction of settlements or judgements, or undermine CDC guidance and recommendations.

GRANT APPLICATION

The grant application must be submitted in ZoomGrants through Richland County’s website. Make sure all fields are completed as incomplete applications will not be reviewed by the Committee. Contact the Grants Manager if you have any difficulties completing the application. Once complete, save a copy and print for your records.

If you cut and paste information from Word, make sure your information is not cut off. The application components are as follows:

- Mission Statement – Include the organization’s mission statement as found in your bylaws. You may also include any long-range plans and goals for your agency as a whole.
- Geographic information – what areas of Richland County will be the project focus. Please note census tracts if possible.
- Project Impact Priority – Which County-wide strategic priority the project helps to accomplish
- Organization Background – Demonstration of recent accomplishments and success with programs similar to the one in your application.
- Project Description – This is the “meat” of the application where you describe your project – who, when, what, why and where as specifically as possible including characteristics of the community or individuals that will directly benefit from the project.
- Benefit to the Community – Detail who is being served by your project, geographic location of your audience, how the project impacts the community. Please be as specific as possible about target population.
- Sustainability – How will the program be sustained in years following any award from the County?
- Collaborative Partners/Efforts – Describe how your organization will work with others on this project. What are partner’s roles and are they on board?
- Outcomes – Share what result do you want to achieve and how will you measure success?

PROGRAM BUDGET

A budget section is provided for you as part of the application. This section applies only to the project outlined in the application. Please note that all grant funds must be expended by the recipient organization. Re-granting or sub-granting of funds is not allowed.

Expenditures must be consistent with the application budget. Only goods and services that comply with the Discretionary Guidelines are permitted. The budget should reflect in financial terms the actual specific costs of achieving the objectives of the project(s) you propose in your application.

Amounts listed in the Community Impact Grant Request column should total the amount of funds requested in the

Community Impact Grant Fund Distribution

application. Please make sure that all expenses in –Community Impact Grant column relate to the proposed project outlined in the Project Description.

Note that there are blank spaces in the budget section of the application to provide additional expense categories as all budgets are not the same. Feel free to use these additional blank expense spaces for other categories not listed. For example, your project may have a transportation component. You can add a budget category these types of expenses.

Under project revenues, list known and anticipated funding sources, including any that are pending. Also include any in-kind contributions under project revenues. This section shows the Committee if your organization or others are contributing to the project outlined in the application. Attach copies of pending grants documentation (grant award letters) in the documents section of the grant application.

Please do not include agency administrative costs or organizational overhead expenses in your grant budget. All expenses should directly relate to the project or program that is outlined in the application.

Budget Narrative (Grant Funds Only) - Please include a brief 1-2 sentence description for each category included in the program budget. Make sure expenses are reflected in the project description. For example:

Contractual – 2 consultants to work 10 hours at \$25/hour to conduct 5 financial training workshops

Program expenses - \$500 for financial training workshop curriculum, \$500 rental fee for training space

APPLICATION PACKAGE

In order to be considered for funding, applicants must submit a complete application package for the –Community Impact grant program in ZoomGrants. Incomplete applications will not be considered. Complete applications include:

- 1) Completed and electronically initialed application. You can complete the application at:
<https://zoomgrants.com/gprop.asp?donorid=2236>
 - Answer all questions and complete each section. “N/A” and “See Attached” are not valid responses.
 - Electronic Initials by board chair or the executive director is requested in ZoomGrants - If your organization does not have an Executive Director, please note this in the application.
- 2) Project Budget and Narrative (form included with the application)
- 3) Required Attachments:
 - Current organization operating budget for the last two years reflecting sources and amounts of income and expenditures for the organization as a whole, not just the program outlined in the application.
 - IRS determination letter indicating the organization’s 501 c 3 charitable status
 - Proof of current registration as a charity with the SC Secretary of State’s Office.
 - Current list of board of directors
 - Most recent 990 tax return. If you file a 990 post-card please also attach a financial report showing financial status.
 - Pending grant award documents such as grant award letters, emails or correspondence from the grantor.
 - Richland County business license or business license assessment survey form (this form shows that a business license is not needed for your organization).
 - Proof of Insurance: WIC (required if there are 4 or more employees and payroll exceeds \$3,000 and/or General Liability).

Attachments MUST be submitted in ZoomGrants along with the proposal in order to be considered complete.

APPLICATION EVALUATION

Grant applications are reviewed by the Community Impact Grant Committee. The Committee will use the following evaluation criteria to evaluate applications and proposed projects. The individual factors are important in project evaluation, as they are an indication of the degree to which the proposed project will contribute to the citizens in Richland County. Make sure these factors are incorporated into your application. These factors, with their corresponding point values, are:

Project Summary: (Up to 35 Points)

- Does the proposal state an objective and does the objective fit the mission and long-range plans, goals and objectives of the organization?

- Does the proposal provide a strong sense of need for the project/program and does it state what the funds will be used for?
- Does the proposal address who will be served and how many?
- Does the proposal state what will be the benefit to persons served?
- Does the proposal state a targeted underserved population?
- Does the proposal provide a program to prevent, mitigate or resolve individual, family, or community problems?
- Does the proposal state how the program will be evaluated once completed?

Project Impact: (Up to 30 Points)

- Is the proposal clear about how the project will work?
- Is there a timeframe outlined in the proposal; is the project ready to start?
- Are all aspects of the project feasible?
- Does the project provide a solution for the identified problem?
- Is the project innovative and provides solutions to problem?

Organization Background: (Up to 20 Points)

- Historical or current program experience indicated.
- Historical experience with targeted population addressed.
- Evidence of other successful experience relevant to the success of this proposal.
- Evidence of capable staff to carry out program/project.
- Does organization history indicate collaborative efforts with other entities?

Budget: (Up to 15 Points)

- Is the budget detailed and understandable?
- Is there another confirmed source of revenue to assist with this project/program?
- Is the project cost reasonable?
- Does budget incorporate any in-kind cost participation?
- Does the budget expense detail section include detailed cost calculation data (e.g., specific cost/quantity for personnel, supplies, travel) and information showing how County grant funds will be spent?

DEADLINE

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AWARD NOTIFICATION

The Grants Manager will notify all applicant organizations of the funding outcome in writing in September, 2023. Awards will be available for reimbursement beginning October, 2023. Final reports for the previous fiscal year, if applicable, must be received before payments are released. Non-compliance in all reporting periods may disqualify applicants for future funding opportunities until an applicant is fully compliant.

REPORTING REQUIREMENTS

Richland County requires grantees to complete quarterly reports as outlined above during the award period. At the completion of the grant funded project, Richland County requires grantees to complete a final report for Community Impact Grant funds. Grantees are required to show proof of grant expenditures (invoices and proof of payment). Grantees are asked to report on attendance/impact numbers, program success or failure as well as the impact on Richland County. Each grantee will receive a copy of or a link to the reporting documents with their award packet and reports will also be sent via email.

Grantees must acknowledge the receipt of Community Impact funding by including the Richland County Government logo, or by listing "Funding Provided by Richland County Government" on program/project advertising, marketing and promotional materials, website or in the organization's annual report. Examples of this must be included in your final report.

FREEDOM OF INFORMATION ACT NOTICE

Please be advised that all materials submitted on behalf of the Community Impact Grant Funds program are subject to disclosure based on the Freedom of Information Act (FOIA).

- No person, based on race, color, national origin, religion, age, sex, ancestry, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, veteran status, military discharge status, citizenship status or reprisal or retaliation for prior civil rights activity should be excluded from participation in be denied the benefit of or be otherwise subjected to discrimination under the program or activity funding in whole or in part by Discretionary grant funds.
- Employment made by or resulting from Community Impact Grant funding shall not discriminate against any employee or applicant on the basis on race, color, national origin, religion, age, sex, ancestry, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, veteran status, military discharge status, citizenship status or reprisal or retaliation for prior civil rights of handicap, age, race, color, religion, sex, or national origin.
- None of the funds, materials, property, or services provided directly or indirectly under Community Impact Grant funding shall be used for any partisan political activity, or to further the election or defeat of any candidate for public office.

QUESTIONS

Please call Ms. Matiah Pough, Grants Manager at (803)576-5459 or email Pough.Matiah@richlandcountysc.gov.

FY 2024 COMMUNITY PARTNERS

1. Senior Resources
2. MIRCI
3. Community Relations Council
4. Palmetto AIDS Life Support
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- Employment made by or resulting from Community Impact Grant funding shall not discriminate against any employee or applicant on the basis on race, color, national origin, religion, age, sex, ancestry, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, veteran status, military discharge status, citizenship status or reprisal or retaliation for prior civil rights of handicap, age, race, color, religion, sex, or national origin.
- None of the funds, materials, property, or services provided directly or indirectly under Community Impact Grant funding shall be used for any partisan political activity, or to further the election or defeat of any candidate for public office.

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SLFRF Project Scope of Work Development Form

Purpose: The purpose of this form is to assist project managers and reviewers evaluate and communicate the scopes of work of projects proposed to be funded by the County’s SLFRF payment in terms adopted by the US Treasury. The US Treasury defines a project as a grouping of closely related activities that together are intended to achieve a specific goal or are directed toward a common purpose and that projects should be scoped to align to a single Expenditure Category and include only closely related activities directed toward a common purpose.

Instructions: Use the tables below to concisely describe the elements of the project’s scope of work.

Name of Proposing Entity:	
Application ID and/or Title:	
Proposed Award Amount	
In 2-3 sentences, please summarize why SLFRF funding for the project is needed.	
Please select the option that best categorizes the need for funding for the project.	
<input type="checkbox"/> Create new or expanded services <input type="checkbox"/> Increase access to existing services <input type="checkbox"/> Preserve existing services <input type="checkbox"/> Other, please explain:	

Project Scope of Work Identification	
In 2-3 sentences, please summarize the specific purpose of the project. What will the project specifically accomplish?	
In 2-3 sentences, please summarize how the project will be executed. What is the Scope of Work?	
Please select the option that best categorizes the intended purpose of the project.	

- COVID–19 mitigation and prevention in a manner that is consistent with recommendations and guidance from the Centers for Disease Control and Prevention
- Medical expenses related to testing and treating COVID–19 that are provided in a manner consistent with recommendations and guidance from the Centers for Disease Control and Prevention
- Behavioral health care, including prevention, treatment, emergency or first-responder programs, harm reduction, supports for long-term recovery, and behavioral health facilities and equipment
- Preventing and responding to increased violence resulting from the public health emergency
- Assistance for food; emergency housing needs; burials, home repairs, or weatherization; internet access or digital literacy; cash assistance; and assistance accessing public benefits
- Paid sick, medical, or family leave programs, or assistance to expand access to health insurance
- Childcare, early learning services, home visiting, or assistance for child welfare-involved families or foster youth
- Programs to address the impacts of lost instructional time for students in kindergarten through twelfth grade
- Development, repair, and operation of affordable housing and services or programs to increase long-term housing security
- Financial services that facilitate the delivery of Federal, State, or local benefits for unbanked and underbanked individuals
- Benefits for the surviving family members of individuals who have died from COVID–19
- Assistance for individuals who want and are available for work
- Services to address health disparities of the disproportionately impacted household, population, or community*
- Housing vouchers and relocation assistance*
- Investments in communities to promote improved health outcomes and public safety such as parks, recreation facilities, and programs that increase access to healthy foods*
- Capital expenditures and other services to address vacant or abandoned properties*
- Services to address educational disparities*
- Technical assistance to small businesses or nonprofits
- Other, please explain:

Population Identification	
In 2-3 sentences, please summarize the specific population that will be served by the project.	
In 2-3 sentences, please summarize how beneficiaries of the project will be identified.	
Please select the option that best categorizes the intended population of the project.	
<ul style="list-style-type: none"> <input type="checkbox"/> Households or populations that experienced: unemployment; experienced increased food or housing insecurity <input type="checkbox"/> Households or populations that qualify for the Children’s Health Insurance Program (42 U.S.C. 1397aa et seq.), Childcare Subsidies through the Child Care and Development Fund Program (42 U.S.C. 9857 et seq. and 42 U.S.C. 618), or Medicaid (42 U.S.C. 1396 et seq.); if funds are to be used for affordable housing programs, qualify for the National Housing Trust Fund (12 U.S.C. 4568) or the Home Investment Partnerships Program (42 U.S.C. 12721 et seq.) <input type="checkbox"/> Students who did not have access to in-person instruction for a significant period of time <input type="checkbox"/> Low- and moderate-income households and populations <input type="checkbox"/> The general public (only select if the purpose of the project is to provide COVID-19 prevention or mitigation or behavioral health care) <input type="checkbox"/> Households and populations residing in a qualified census tract* <input type="checkbox"/> Households and populations receiving services provided by Tribal governments* <input type="checkbox"/> Households that qualify for Temporary Assistance for Needy Families (42 U.S.C. 601 et seq.), the Supplemental Nutrition Assistance Program (7 U.S.C. 2011 et seq.), Free and Reduced Price School Lunch and/or Breakfast programs (42 U.S.C. 1751 et seq. and 42 U.S.C. 1773), Medicare Part D Low-income Subsidies (42 U.S.C. 1395w–114), Supplemental Security Income (42 U.S.C. 1381 et seq.), Head Start (42 U.S.C. 9831 et seq.), Early Head Start (42 U.S.C. 9831 et seq.), the Special Supplemental Nutrition Program for Women, Infants, and Children (42 U.S.C. 1786), Section 8 Vouchers (42 U.S.C. 1437f), the Low-Income Home Energy Assistance Program (42 U.S.C. 8621 et seq.), Pell Grants (20 U.S.C. 1070a), and, if SLFRF funds are to be used for services to address educational disparities, Title I eligible schools* <input type="checkbox"/> Small businesses operating in a qualified census tract, operated by Tribal governments or on Tribal lands, or operating in the territories* <input type="checkbox"/> Nonprofit organizations operating in a qualified census tract, operated by Tribal governments or on Tribal lands, or operating in the territories* <input type="checkbox"/> Other, please explain: 	

Project Budget

In 2-3 sentences, please summarize how the proposed expenses are necessary and related to the project's Scope of Work.

In the space below, please provide a line-item budget for the project