

Cumberland County
Nonprofit Fiscal Recovery Assistance

VIRTUAL INFORMATION SESSION

Type your questions into the question box during today's session. Questions will be answered in the order received at the end of the presentation.

Questions can also be emailed to
ARPsmb@cumberlandcountync.gov
Email Subject Line:
"NFRAP Question"

An updated FAQ will be compiled and posted on the County website under American Rescue Plan tab following this session.

Today's session is being recorded.

AGENDA

PRESENTATION

- ARPA/CSLFRF Overview
- Purpose of Funds
- Approach
- Application Sections
- Eligible Categories
- Application Review Criteria
- Application Attachments

DISCUSSION

- Q&A

ARPA/CSLFRF FUNDING OVERVIEW
ARPA - American Rescue Plan Act of 2021
CSLFRF - Coronavirus State and Local Fiscal Recovery Funds

- \$1.9 Trillion in ARPA funds
 - \$362 Billion for CSLFRF
 - Cumberland County's portion = \$65,168,690
 - Board of County Commissioners allocated \$3.5 Million for Nonprofit Assistance



PURPOSE OF FUNDS

To be allocated specifically to 501(c)(3) and 501(c)(19) nonprofit organizations in Cumberland County that have been affected by the COVID-19 pandemic and to aid in a strong and equitable recovery.

APPROACH

Cumberland County is committed to investing these funds into nonprofit organizations:

- Identify and directly address a need or negative impact of the COVID-19 on local nonprofits
- Support equitable outcomes for the most impacted populations
- Have a lasting impact
- Are an eligible use of CSLFRF funds, meet a public purpose and are within County authority to fund per NCGS
- Comply with all provisions of the funding contract

APPLICATION SECTIONS

Overview

Application Submission Requirements

Organization Information

Organization Description

Economic Impact

Proposed Use of Funds

Application to Other Forms of Assistance of Funding Sources

Job Hiring/Retention

Conflicts of Interest

Acknowledgement of Required Assurances

Certification



OVERVIEW

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The purpose of the Nonprofit Fiscal Recovery Assistance Program is to provide short-term financial assistance to nonprofit organizations that suffered an economic hardship due to the COVID-19 pandemic. Funding for this program is provided by the U.S. Department of the Treasury (USDT). USDT requires that certain information be obtained from all applicants in order to determine the applicant's eligibility for funding.

All applicants must be determined eligible in order to be awarded funding through the Nonprofit Fiscal Recovery Assistance Program. The organization must be operating within Cumberland County. Certain organization types are ineligible to apply.

Complete all applicable spaces on this document and be sure to sign the sections and attach all applicable documents. Incomplete applications will cause delays in the approval and contract process. Submission of this application does not guarantee that you will receive funding. For questions, please contact the ARP Team at ARPsmb@cumberlandcountync.gov.

Project Scope

Funds are made available by the U.S. Department of Treasury through Coronavirus State and Local Fiscal Recovery Funds (CSLFRF) and are administered by the Cumberland County ARP Staff Committee. The goal is to provide up to \$50,000 in financial assistance to nonprofit organizations that experienced detrimental impacts due to the pandemic. For the purpose of this program, Cumberland County has defined a nonprofit organization as a 501(c)3 or 501(c)19 organization.

For the purposes of this program applicants are permitted to request funds to be reimbursed for:

- Payroll, which includes wages and associated payroll taxes; and
- Occupancy, which includes rental lease payments, mortgage (for organization property), and utilities.

The organization must have been incorporated on or before March 3, 2021.

Funds under this Program may not be used for any purpose other than reimbursement of payroll and occupancy expenses.

For more information about the policy for this program [click here](#).

APPLICATION SUBMISSION REQUIREMENTS

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PLEASE READ CAREFULLY AND FULLY

The attachments listed below must be submitted with the application. Cumberland County reserves the right to request additional information as needed to complete the application process for eligibility and award for funding. Other information requested may include, but is not limited to, employee income verification, bank statements, sources of other assistance received, job creation/retention report, and other documents necessary to complete the process for eligibility and award for funding.

If Cumberland County determines, in its sole discretion, that it is necessary to revise any part of the application or guidelines, an addendum, supplement, or amendment to this application will be posted at <http://www.cumberlandcountync.gov>. It is the responsibility of the applicant to check the website or contact Cumberland County for any such addendums, supplements, or amendments made to the application or guidelines.

If you have questions, please contact the ARP Team at ARPsmb@cumberlandcountync.gov.

Before proceeding with completing the full application, please make sure you have all the following documents ready:

- Articles of Incorporation for Nonprofit
- Tax Exempt Status Information
- Form 990 (for calendar years 2021 & 2020)
- Current payroll register
- Current Property Lease agreement or Mortgage document
- Current W9 with Organizations Legal Name

ORGANIZATION INFORMATION

ORGANIZATION INFORMATION

Organization Name*

Assumed Name registered with the NC Secretary of State (if applicable):

Mailing Address*

Street Address

Address Line 2

City

State / Province / Region

Postal / Zip Code

Telephone*

(XXX) XXX-XXXX

Email*

Street Address of Operations (if different):

Street Address

Address Line 2

City

State / Province / Region

Postal / Zip Code

Federal EIN*

XX-XXXXXXX

Incorporation Date*



Nonprofit Status*

Is the organization currently in bankruptcy?*

Yes No

Has the organization ever been subjected to criminal or civil fines and penalties including from County code or regulatory violations?*

Yes No

Tenancy Information*

Select which category applies to you

Building Owner Tenant

What type of insurance does your organization currently have?*

ORGANIZATION DESCRIPTION

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Indicate the nature of the organization and the types of services you provide: *

ECONOMIC IMPACT

ECONOMIC IMPACT

Please describe the degree to which your organization has been impacted by the COVID-19 pandemic; list specific examples; and whether your organization had to close.*

Please describe the degree to which your organization has been able to maintain employees during the COVID-19 pandemic and whether the award will help your organization do so.*

Please describe how your organization has equitably provided services and inclusively engaged with the Cumberland County community.*

PROPOSED USE OF FUNDS

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Define the Use of Funds Based on the Categories

	Payroll (wages & associated taxes) *	Occupancy (rent or mortgage) *	Occupancy (utilities) *
Amount Requested	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>

Total Amount Requested (maximum amount available: \$50,000)

\$

APPLICATION TO OTHER FORMS OF ASSISTANCE OR FUNDING SOURCES

Have you received prior Federal, State, or Local aid related to COVID-19? *

Yes No

APPLICATION TO OTHER FORMS OF
ASSISTANCE OR FUNDING SOURCES

JOB HIRING/ RETENTION

JOB HIRING / RETENTION

According to program requirements and as a condition of the award, your organization will be required to make available jobs for persons whose household incomes are at or below the income limits established by the U.S. Department of the Treasury (USDT). Using the chart below, please indicate the number of Full-Time Equivalent (FTE) jobs that will be created and/or retained by the organization and that will be available for low to moderate income persons. Refer to program guidelines for detailed information regarding job creation / retention for low to moderate income persons. The organization will be required to submit a Job Creation / Retention Report periodically.

2022 HUD Income Limits for Cumberland County

Total Persons in the Household	1	2	3	4	5	6	7	8
Annual Income at or below:	37,350	42,650	48,000	53,300	57,600	61,850	66,100	70,400

Applicant may be required to provide income information on current employees prior to executing a contract.

Estimated number of FTE jobs to be

(Must be a number)

**created for low to
moderate income
persons ***

**retained for low to
moderate income
persons ***

Person/Persons

CONFLICTS OF INTEREST & ACKNOWLEDGEMENT OF REQUIRED ASSURANCES

CONFLICTS OF INTEREST

No employee* may participate in the selection, award, or administration of a contract supported by a federal award if he or she has a real or apparent conflict of interest. Such conflict of interest would arise when the employee, or any member of his or her immediate family, his or her partner, or an organization which employs or is about to employ any of the parties indicated herein, has a financial or other interest in or a tangible personal benefit from a firm considered for a contract. The employees may neither solicit or accept gratuities, favors, or anything of monetary value from contractors or parties to subcontracts. (Reference § 2 CFR200.318(c)(1)).

*As per the Personnel Ordinance Section 501 (c) "employee" means: All officials, officers, members, and employees, whether elected or appointed and whether paid or unpaid, of the government of the county and all of its agencies.

ACKNOWLEDGEMENT OF REQUIRED ASSURANCES

By submitting the accompanying application and signing this document, I/We understand and agree that any award resulting from this solicitation will require compliance with the signed agreement and with the regulations, requirements, and policies identified below, including but not limited to:

- Compliance with the Nonprofit Fiscal Recovery Assistance Program Application Guidelines;
- Compliance with ordinances and policies of Cumberland County;
- Compliance with federal and state laws requiring the safeguarding and disclosure of confidential information;
- Maintaining program and financial records for audit review, and providing access to documentation upon request by the County and or USDT;
- Submission of program and financial reports, as required by the County and/or USDT;
- Certification that the applicant is a nonprofit organization registered in the State of North Carolina in good standing;
- Certification that the organization, association, corporation, or any person in a controlling capacity or any position involving the administration of federal, state, or local funds is not currently under suspension, debarment, voluntary exclusion, or a determination of ineligibility by any agency; has not been suspended, debarred, voluntarily excluded, or determined ineligible by any agency within the past three (3) years; does not have a proposed debarment pending; has not been indicted, convicted, or has not had a civil judgment rendered against said person, organization, association, or corporation by a court of competent jurisdiction in any matter involving fraud or misconduct with the past three (3) years;
- Certification that the organization is not bankrupt or under an administration appointed by the Court, or under proceedings leading to a declaration of bankruptcy; and provide any pending or known legal actions against the organization;
- All pending or known litigation/court action(s) have been disclosed in the application; and
- Certification that the organization applicant/ organization will use the requested funds, if awarded, in the manner through which it has requested them in the attached application. Cumberland County reserves the right to exercise all legal authority available to it to recapture the awarded funds should the funding be used in a manner other than that which was presented in this application.

CERTIFICATION

Certification

The undersigned hereby represents and certifies to the best of their knowledge and belief that the information contained on this statement and any exhibits or attachments hereto are true and complete and accurately describe the proposed project(s). The undersigned further understands that any false statement in this application may disqualify the applicant/organization from participation in the program. I/We also understand that this is a formal application for financial assistance. I/We understand that additional information (e.g., tax filings, bank account statements, etc.) may be requested. Verifications may be obtained from other sources.

The undersigned understands that no funding amount will be distributed until the County of Cumberland has issued a notice of award or notice to proceed. The undersigned agrees to promptly inform Cumberland County of any changes in the program which may occur. The County of Cumberland has the right to terminate any agreement under the Nonprofit Fiscal Recovery Assistance Program if an applicant/organization is found to be in violation of any conditions set forth in the application guidelines.

I/We understand that it may be a federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under the provisions of the United States Criminal Code.

Application Approval and Signature: The signatory declares that the undersigned is an authorized official of the applicant organization, is authorized to make this application, is authorized to commit the organization in financial matters, and will assure that any funds received as a result of this application are used for the purposes set forth herein.

Authorized Representative Name *

Title of Authorize Representative *

ELIGIBLE CATEGORIES

Eligible

- Payroll
- Mortgages
- Rent
- Utilities

Non-Eligible

- Any purpose other than reimbursement of payroll and occupancy expenses.

APPLICATION REVIEW CRITERIA

- Does the organization employ LMI FTE positions paying less than \$37,350?
- Does the organization have a valid EIN?
- Is the organization registered and in good standing with the NC Secretary of State?
- Does the organization carry sufficient general liability insurance?
- Has the organization been in operation on or before March 3, 2021?

QUESTIONS?

<https://www.cumberlandcountync.gov/ARP>



CUMBERLAND
COUNTY

NORTH CAROLINA