Neighborhood Assistance Program

FY 2019 Guidelines & Application
July 1, 2018 – June 30, 2019

Round 1 Submission Deadline: April 18, 2018*

Round 2 Submission Deadline: September 5, 2018*

(*Postmark date)

MISSOURI
Department of Economic Development

Business and Community Services
P.O. Box 118 ● Jefferson City, MO 65102
(573) 751-4539 ● FAX (573) 522-4322

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A. Changes in Processing of Tax Credits (Section 135.815, RSMo)

Before tax credits can be issued, the Missouri Department of Economic Development (DED) is required to verify with the Departments of Revenue and Insurance that the applicant does not owe any delinquent income, sales, use, or insurance taxes, as well as interest or penalties on such taxes. If a delinquency exists, the amount of any tax credits issued will be reduced by the delinquent amount. Should any credits remain after satisfying any delinquency, such credits will be issued. Further, any applicant who purposely and directly employs unauthorized aliens will forfeit any credits that have been issued, but not redeemed, and shall repay the amount of any redeemed credits during the period of time any such alien was employed by the applicant.

B. Reporting Requirements (Section 135.805, RSMo)

Pursuant to Section 135.805, RSMo, for a period of three years following the issuance of tax credits, a tax credit recipient shall submit annually to the Department of Revenue, information pertaining to the project for which Neighborhood Assistance Tax Credit Program (NAP) credits were issued. Section 135.805(10) RSMo clarifies that "no person or entity shall be required to make an annual report until at least one year after the credit issuance date"; therefore, a tax credit recipient is likely to only be required to submit two (2) annual reports during the three years following issuance. The approved NAP organization shall report the actual number of jobs created as a result of the tax credits on the last day of the annual reporting period, separated by part-time permanent and full-time permanent for each month of the preceding twelve-month period. Also, because NAP is a community development tax credit, a recipient shall, for the reporting periods, confirm the title and location of the project, the estimated or actual time period for completion of the project, and all geographic areas impacted by the project.

For approved FY2019 projects, the report required by this section shall be due annually on June 30. Because a full year must pass after the issuance of the tax credits before reporting is required, the first report will not be due prior to June 30, 2020.

C. Penalty Provisions (Section 135.810, RSMO)

Once credits have been issued, any failure to meet the annual reporting requirements, or any determination of fraud in the application process, shall be subject to the incremental penalties provided in Section 135.810, RSMo. Failure to report for more than six months, but less than a year, shall result in a penalty of 2% of the value of the credits for each month of that delinquency. Failure to report for more than a year shall result in a 10% penalty for each month of delinquency up to 100% of the value of the credits. Any fraud in the application process will result in a penalty equal to 100% of the credits issued.

D. Closed Records (Section 610.255, RSMo)

Records and documents submitted as part of an application for tax credits to DED are closed records until such time as the information no longer concerns a pending application (i.e., where no credits have yet been authorized). DED retains the authority to close records or documents that "relate to financial investments in a business, or sales projections, or other business plan information which may endanger the competitiveness of a business" or as also provided by law. In the event a document or record contains both open and closed records, DED will provide a redacted version of such record or document in order to protect otherwise closed information.

NEIGHBORHOOD ASSISTANCE PROGRAM

These guidelines will provide you with the information needed to understand the Neighborhood Assistance Program (NAP), eligibility requirements, and complete an application.

Administered by the Department of Economic Development (DED), NAP is a tax credit for contribution program created to help improve endangered communities through a public-private partnership. To administer a project, eligible nonprofit or business organizations/projects must be approved by DED through the NAP application process.

An approved applicant is granted assistance in the form of state tax credits to help attract eligible donors who would be able to, in effect, redirect their Missouri tax dollars to an approved community development project. Under NAP, a tax credit is equal to 50% or 70% of eligible contributions. The tax credit is used to offset an eligible donor's income tax liability and is claimed when the donor files their Missouri tax return. The credit may be used against taxes owed for the year of the donation plus five additional tax periods. This form of assistance is not a grant and does not include the transfer of tax dollars from NAP to approved organizations. Through fundraising efforts, approved organizations assume full responsibility for securing the financial support necessary to implement the NAP project. The State's role is to approve projects, provide project oversight, and issue tax credits to eligible donors that contribute to NAP projects.

The total amount of NAP tax credits available for distribution during FY2019 is $16 million, consisting of an allocation of $10 million in 50% credits and $6 million in 70% credits (pending legislative changes). Seventy percent (70%) credits are reserved for projects located in a city, town or village with populations less than 15,000 or in unincorporated areas (with the exception of Clay, Jackson, St. Charles and St. Louis counties).

NAP PRIORITIES

While many types of projects qualify for the Neighborhood Assistance Program, the Department of Economic Development recognizes as its key priority:

- Highly capable, qualified nonprofits who focus their efforts on awareness, education, treatment and reduction of opioid misuse to targeted audiences.

Priority consideration may also be given to organizations implementing:

- Job training projects that: support the development of a well-trained, well-educated workforce, address the gap between available jobs and qualified workers, align training programs to the needs of the community and its businesses, and/or focus on some level of postsecondary job training; **and/or**,

- Innovative programs or projects that facilitate the transition to the workplace and community of military service members.   Projects should address the range of challenges veterans face in reintegrating to civilian life following return from a combat deployment, including but not limited to: finding employment, transitioning back to work and family life, posttraumatic stress disorder (PTSD), depression, or substance abuse.

Priority projects should (1) articulate need; (2) provide a solution and prove a direct cause and effect between the need and the solution; and (3) prove results.

ELIGIBILITY

There are three types of eligibility requirements under NAP: applicant eligibility; project eligibility; and donor eligibility.

A. Applicant Eligibility

To be eligible for NAP, an applicant must be one of the following:

Missouri Business: A person, firm, partner in a firm, corporation, or a shareholder in an S corporation, doing business in Missouri and subject to state income, conducting a project that:

- Falls outside the company's normal scope of business; and,

- Will address one or more identified needs in the community; and,

- Qualifies under one or more eligible NAP categories.

Nonprofit Organization: An organization located (and incorporated to do business) in Missouri that is:

- Incorporated as a nonprofit corporation pursuant to Chapter 355, RSMo;

- Designated as a community development corporation under Title VII of the Economic Opportunity Act of 1964; or,

- Holds a 501(c)(3) IRS tax exempt ruling (and is incorporated as a nonprofit in Missouri).

If an organization is incorporated on a statewide, regional or national level, or established through Congressional Charter, its local affiliates, chapters, divisions, or branches are each permitted to submit an application, provided that a locally controlled Board of Directors is empowered and assumes all administrative and financial responsibility for the local chapter, division or branch. Local boards that serve in only an advisory capacity are not eligible. DED retains the right to make a final determination of what constitutes a locally controlled board of directors. All NAP donations must be deposited locally and controlled solely by the organization's local board of directors. The parent organization can have no authority over the use of NAP donations beyond defining the general organizational purpose(s) of the local organization.

The applicant must assume full administrative and financial responsibility for an approved project. Applicants may not administer more than one community development project at a time.

Faith-based Organizations may qualify for NAP if all of the following conditions are met:

- The organization meets all nonprofit requirements identified above.

- Organizations may not engage in inherently religious activities, such as worship, religious instruction, or proselytization, as part of the programs or services funded under NAP. If an

organization conducts such activities, the activities must be offered separately, in time or location, from the programs or services funded under NAP.

- The organization **will not** require clients to attend religious services or activities in order to participate.

- Faith-based organizations may not use any portion of NAP funds to promote, encourage, enlist, advocate, or urge any individual to participate in any religious creed, sectarian purpose, or church.

- An organization that participates in the NAP shall not, in providing program assistance, discriminate against participants or prospective participants on the basis of religion or religious belief.

- The project addresses a specific identified need in the community qualifying under one of the eligible NAP project categories and the applicant meets all other eligibility requirements.

B. Project Eligibility

In order for a project to be eligible, it must involve either:

- **Community Services:** Counseling; health or mental health services; child day care services; senior citizen services; recreational opportunities; nutrition services; emergency shelters for persons suffering from physical abuse or rape; services for individuals with disabilities; vocational counseling; substance abuse counseling, or referral services;

- **Crime Prevention**: Services to ex-offenders; civilian services to help prevent crime and/or aid victims of crime; mediation services aimed at resolving conflict; or services to juveniles who have had contact with the court or police;

- **Education**: Literacy programs; adult basic education and high school equivalency programs; educational services for individual with physical or mental health challenges; or educational services for persons otherwise disenfranchised;

- **Job Training**: Activities which provide specific vocational skills including special apprenticeship or on-the-job training programs not otherwise available; or

- **Physical Revitalization**: Downtown/Commercial revitalization; construction or rehabilitation for community or neighborhood revitalization purposes; or nonprofit infrastructure for community purposes. **(See pages 8 and 23)**

C. Donor Eligibility

An NAP donor must be a business or an individual with Missouri business income, filing as shown.

Business Eligibility	Tax Liability Type	Schedule Filed
Corporations	Corporate, Franchise Tax	MO Form 1120
Farm Operation	Individual Income Tax	Federal Form 1040, Schedule F, MO Form 1040
Financial Institution	Financial Institution Tax	MO Financial Tax Return
Individual partner in a Partnership or individual shareholder in an S-Corp	Individual Income Tax	

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Individual reporting income from rental property or royalties	Individual Income Tax	Federal Form 1040, Schedule E, MO Form 1040
Insurance Company	Gross Premium Receipts Tax	Missouri Insurance Tax Return with the MO Dept. of Insurance
Limited Liability Corporation or Partnership	Individual Members Income Tax, Franchise Tax, Fiduciary Tax	MO Form 1120, 1120S or 1065
Charitable Organizations exempt from Federal Income tax	Income Tax-organizations must have unrelated business income	
Partnership	Individual Partners' Income Tax	MO Form 1065
Sole Proprietorship	Individual Income Tax	Federal Form 1040, Schedule C and MO Form 1040
Small Business Corporation (S-Corp)	Individual Shareholders' Income Tax, Franchise Tax	MO Form 1120S

TYPES OF DONATIONS

To qualify for tax credits, donations must be given <u>directly</u> to the approved NAP organization during the authorized project period, and donations must be applied to the NAP project. The value of a donation cannot include sales tax or profit margin.

The following types of donations qualify for tax credits:

- **Cash** - the amount of the cash donation;

- **Materials, Supplies, Equipment** – the lesser of either the fair market value or the cost to the donor (may include the reasonable costs incurred by the donor in receiving the contribution);

- **Professional Services** - standard billing rate;

- **Labor** – employee's hourly wage plus fringe;

- **Real Property** – based on one or more appraisals; the property must be directly used by the organization for the project and be included on the approved NAP budget;

- **Publicly-Traded Stocks** - stock market price upon transfer (organization must sell within a year from the date of contribution before tax credits are approved); and

- **Bonds** – face value. The bond must be mature at the time of transfer (organization must sell the bond within a year from the date of contribution before tax credits are issued).

APPLYING FOR NAP

General Applications
General applications are accepted in two rounds. Applications for Round 1 must be submitted to DED with a postmark no later than **April 18, 2018**. Projects approved for Round 1 are expected to have a July 1, 2018 start date. Applications for Round 2 must be postmarked by **September 5, 2018**. Projects approved for Round 2 are expected to have a January 1, 2019 start date. DED is targeting up to $8 million in approved projects for Round 1 and up to $8 million for Round 2 (pending legislative action). Applications must meet eligibility and minimum score requirements to be approved. There is no application fee to submit a proposal.

Special Opportunity Applications
The DED reserves the right to create additional submission opportunities. All applications, guidelines, and evaluation criteria will be made available to the public in order to assist with the submission of quality, fundable applications.

DEFINING THE PROJECT

NOTE: Definitions and examples provided **have been abbreviated** and do not include all of the details, research, citations, etc. needed to fully answer the application questions. Your submission should contain details, rather than the brief descriptions and examples provided in these guidelines.

Project Period: The time frame in which **all** activities, including: fundraising, delivery of services, achievement and tracking of outcomes, expenditures, and/or construction related to the project, will be completed, excluding the required final report and audit. Applicants may choose a 1, 2, or 3 year project period.

Project Type: NAP projects are classified as either a **service delivery project** or a **capital campaign project**, and each applicant must choose one of these two classifications. All applications must include budgets that only include expenses allowed under the chosen classification.

A **Service Delivery Project** is one that involves the provision of services, implemented by the applicant, that address a targeted problem or need in a neighborhood. Service delivery expenses should be directly tied to the project's goals and may include expenses such as salaries for direct care/service providers and programming materials. A limited amount of administrative and overhead costs are allowed.

NEW — **Service projects for:** Downtown revitalization activities and statewide community betterment programming should complete the **Physical Revitalization Service Delivery application.**

A **Capital Campaign Project** involves the acquisition, construction, improvement, and/or renovation of real property that will house services that address a targeted problem or need in a neighborhood.

NEW — **Capital projects for:** construction or rehabilitation of community facilities, such as community centers, theaters, or community meeting space, and the rehabilitation of buildings in blighted or distressed neighborhoods will complete the **Physical Revitalization Capital Campaign application**.

Capital Campaign Requirements

- Evidence of site control is required for capital projects (see **Attachment D**).

- All NAP donations and Other Sources of Funding must be secured prior to: the acquisition of property (when NAP donations or credits will be utilized for the acquisition), the start of new construction, and the start of significant renovation projects (where complete renovation is

required to make the facility usable). Projects must submit a Funding Certification form and supporting documentation to DED for approval.

- For new construction and renovation of a facility, a professional, qualified engineer or architect must certify upon project completion (using the Engineer/Architect Certification Form) that all work adheres to specifications, standards, codes, etc.

- For property acquired with NAP credits or donations: Two appraisals, conducted by state-certified or state-licensed appraisers, must be submitted to DED within 10 days prior to closing on the property.   The amount of NAP donations or credits allowed for the acquisition is based on the lesser of two independent appraisals. Appraisals must be performed no more than 18 months prior to date of contribution. *Only one appraisal is required when the property is:

  - Commercial property with appraised value less than $50,000; or
  - Vacant or residential property with appraised value less than $25,000.

- A Phase I Environmental Site Assessment report must be performed and submitted to DED within ten (10) working days prior to closing on all non-residential real estate contributed or purchased using NAP contributions. A Phase I Assessment is a property history and a noninvasive physical assessment of the real property conducted in accordance with American Society for Testing and Materials (ASTM) Standard E.1527 (see www.astm.org).

  - Further testing may be required, based on the results of the Phase I Assessment findings. Any hazardous substances must be properly removed or abated in accordance with applicable regulations.

- Property that is acquired, built, renovated, or improved must be used to carry out the activities of the nonprofit for at least five (5) years after the project facility becomes operational.

- For projects where the approved applicant owns (or is acquiring) the property that will be renovated or constructed, the approved organization must record a **Restrictive Covenant** with the property's deed that prohibits the sale of the property for a period of five (5) years after the project facility becomes operational.

  - Failure to record the restrictive covenant within fifteen (15) days of when the building becomes operational will result in repayment of tax credits.

DEFINITIONS FOR COMPLETING THE APPLICATION

Project Services: The structured and consistent programs or activities that the applicant organization's staff coordinate and implement. Services should provide a measurable benefit to individuals participating in programs or receiving services. Activities should respond to a specific community need and must be directly related to project goals, outcomes, verification tools, and milestones.

Characteristics of Clients/Participants: The traits or identifiers of the individuals the organization will serve that separates them from the community as a whole or increases their need for specific services. Participant characteristic provide a picture of who the organization serves,

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their conditions, and their needs. Whenever possible, characteristics should be presented as the percent of individuals (out of the total served in recent years) that possess each of the characteristics.

Examples:

58% of program participants live below the poverty level

88% of program participants live at 150% of the poverty level

49% of clients are unemployed or underemployed

72% of clients served each year are homeless or at-risk for homelessness.

If the program is new, discuss characteristics of those you will target. Characteristics must be relevant to the services provided as part of the NAP project.

Service Area Description: The service area, its boundaries, and the community statistics that clearly describe the area from which clients are drawn and the project will be implemented. The description may include demographics, economic conditions, crime rates, community health statistics, and/or other neighborhood or environmental data.

NEW **Physical Revitalization projects** should also describe conditions within the service area/neighborhood, such as blight, building vacancies (for downtown projects), etc. to provide a picture of the immediate area.

Data provided in this section should be timely and relevant to the NAP services and outcomes, with reference given to the source from which community descriptors were obtained. Potential resources might include:

http://www.oseda.missouri.edu/
http://www.missourieconomy.org/index.stm
https://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml

Client Need and Evidence of Impact: The reasons why program participants need the services provided. Client need includes the risks clients face without services and the benefits they receive as a result of services.

Evidence of impact is provided by citing studies and research that show measureable improvements or successes for participants in similar programs. Impact may also be shown by a discussion and evaluation of short, medium, and long term outcomes achieved by the applicant in recent years.

Community Need: Demand and need for services in a community. Community need can be demonstrated as: increasing demand for services (discussed), worsening community outcomes/statistics, a community strategic plan, etc. Specific community statistics should be cited and discussed. Community needs surveys and feasibility studies may also help establish need.

Goals: Reflect what an organization would like to accomplish, and can reasonably accomplish, during the defined project period.

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- **For Capital Projects** – Goals are the ultimate aim of the construction, acquisition, or renovation. NAP goals should include: 1) an overview of the construction, acquisition, or renovation and 2) the expansion of services or increased capacity/efficiency of the organization.

- **For Service Delivery Projects** – Broader and more general than outcomes, goals reflect the overarching aims of the proposed services offered by the applicant.

Outcomes: The specific, measureable change clients achieve in working toward their goal; the extent to which goals are achieved. Each goal should have a corresponding outcome.

- **For Capital Projects** – Outcomes reflect the specific work to be completed.

  Capital Campaign Example

  Goal 1: Increase the number of new/renovated facilities in a Missouri community.
  Goal 2: Increase the number of at-risk Missourians with access to job skills training programs.

  Outcome 1: Renovation of the 15,000 square foot job training facility to include: a 5,000 square foot expansion, roof replacement, new HVAC, and security system.
  Outcome 2: Upon completion, 1,500 unemployed or underemployed individuals will receive job skills training annually.

- **For Service Delivery Projects** – Outcomes are a more specific version of goals and should reflect <u>the number</u> (not percent) of unduplicated participants that will achieve the specified goal out of the total number of participants receiving the service(s). Organizations should list 1-4 outcomes in total.

  Service Delivery Example

  Goal: Increase the number of Missourians who earn certificates for completing training in vocational or educational courses.
  Outcome: 85 of 100 people involved in a job training course will successfully complete the course and demonstrate a significant increase in job skills.

Project Verification: Informational tools that track and evaluate progress toward goals and outcomes. Verification includes: a description of the system and tools that will be used for tracking and measurement, how often an evaluation will take place, what will be measured and tracked, who is responsible for collecting data, etc.

Project Milestones: Milestones are essential (and verifiable) activities and steps that must be undertaken by the applicant organization and project participants in order to achieve each outcome. The discussion of milestones should include levels of participation (the number served at various points during the project period), cover the entire timeline for the proposed project, and correspond to the project period.

Capital campaigns should include milestones related to the acquisition, construction or renovation of a property, as well as the date of occupancy, and when services will begin. See the following examples.

Capital Campaign Milestones - 2 year	Period: 7/1/2018 – 6/30/2020
Acquire Property (with non-NAP funds)	By Oct 2018
Site Preparation Completed (with non-NAP funds)	By Dec 2018
All NAP donations & Other Sources of Funding secured – Funding Certification & documentation submitted to & approved by DED	**June 2019**
Groundbreaking	July 2019
Foundation Completed	Aug 2019
Framing Completed	Oct 2019
Plumbing, Electrical, HVAC	Nov 2019-Feb 2020
Finish Work, Construction Completed	Apr 2020
Engineer/Architect Certification form submitted to DED	
Occupancy	May 2020
Full Capacity	June 2020

Service Delivery Milestones – 1 year	Number	Period: 7/1/2018 –6/30/2019
Outreach through mailers and informational sessions in high schools, career centers, etc.	300	150 prior to July 30, 2018 150 prior to Dec 2018
Staff revise curriculum using feedback from previous session	2 staff	July 2018 and Dec 2018
Participants enroll	80	45 by Aug 2018; 35 by Jan 2019
Participants attend classes	50 30 new, 20 from Fall	Daily: Sept 2018-Dec 2018 Daily: Jan 2019-May 2019
Participants earn Job Skills Certification	75	40 by Dec 2018; 35 by May 2019
Graduates will be placed in jobs	50	30 by Jan 2019; 20 by June 2019
Follow up with graduates	70	Monthly

Fundraising Plan – The detailed description of all activities, events, mailings, etc. that will be conducted to solicit donations for which NAP tax credits will be offered, as well as the individuals involved in fundraising, marketing targets, and the time frame for fundraising. Do not provide the agency-wide fundraising plan or include grant, foundation, or other non-NAP proposals or requests.

Fundraising Timeline & Milestones: 2 Year Project, Round 1   7/1/2018 - 6/30/2020

Fundraising Activity	Reach	Timing/Frequency
Each Board Member contacts 2 eligible donors	14 contacts made	Quarterly 2018-2019
Development Director meets with local businesses, Chamber of Commerce to discuss tax credits	At least 3 businesses	Quarterly during fundraising period
Direct mail campaign – new donors	100 letters	Aug 2018
Annual Charity Golf Event	10 business teams @ $2,500	Sept 2018
Contact accountants to market tax credits	20 contacts	Nov 2018
NAP Donations raised as of December 2018		**$150,000**
First Annual Gala & Auction	200 attend; $5,000 table	Apr 2019

NAP Donations raised as of July 2019		$250,000 (cumulative)
Direct mail campaign	100 letters	Aug 2019
Annual Charity Golf Event	15 business teams @ $2,500	Sept 2019
Contact accountants for remaining tax credits	20 contacts	Oct 2019
NAP Donations raised by December 2019		$332,496 (cumulative)

THE NAP BUDGET: CATEGORIES AND EXPENSES

The budget page should include all expenses related to implementation of the NAP project. Expenses or portions of expenses to be funded with NAP fundraising dollars should be entered in the NAP column of the budget page, and should be clearly tied to the activities and outcomes of this proposal. All other expenses budgeted for project implementation should be entered in the "Other Sources" column.

Whether a service delivery project or a capital campaign project, the NAP portion of the budget should be equal to the amount of money and/or in-kind donations that will be raised using NAP tax credits and should include the expenses (or portions of expenses) that will be funded with NAP donations or donated in-kind for credits. The NAP portion of the budget should not exceed $500,000 per project ($250,000 in 50% credits and $350,000 in 70% credits).

Budget expenses should: be itemized and include detailed break downs, be typed, and show donation amounts (not tax credit values) rounded to the nearest dollar. Administrative and general overhead expenses should be prorated to reflect the percentage of the expense related to the programs discussed in the NAP proposal, and then further prorated to 30% or less. DED will screen the expenses for eligibility and may adjust the proposed budget. Applicants will be notified regarding any reduced or disallowed expenses.

Capital Campaign Project Expenses

- **Salaries/Fringe –** Only a portion of one salary will be approved for a capital campaign project (for project oversight). Salaries for fundraising, grant writing, and related activities are not eligible.

- **Contracts –** Paid services necessary for construction, renovation, and NAP compliance, including: legal, architectural, engineering, and the NAP audit (required if organizations use $25,000 or more in tax credits). If your project budget includes an audit, only the cost of the one-time NAP project audit may be included for tax credits.

- **Equipment –** The purchase of equipment, furnishings, appliances, and other related items that will be used at the project facility. Costs should reasonable and correspond to market values.

- **Construction –** New construction, expansion and/or renovation of a building. All construction cost figures should be reasonable and based on prevailing costs in the community or geographic area. Provide a breakdown of construction costs.

- **Property Acquisition –** Land and/or structures that will be acquired to complete the NAP project. Cost should be based on recent appraisal(s).

- **Other Costs –** Phase I Environmental Assessment (required for projects acquiring property with NAP donations or credits), appraisals, permits, inspections, etc.

Service Project Expenses

- **Salaries/Fringe –** Includes full and part-time staff members who are implementing the NAP project, with amounts prorated to reflect the approximate percentage of time devoted to the delivery of project services. NAP donations should be allocated to direct care staff salaries, with limited amounts allowed for administrative and supervisory salaries. Indicate the amount of each salary that NAP funds will cover **and** the amount to be funded by other sources. Salaries for fundraising and related activities are not eligible.

- **Contracts –** Paid services required for the NAP project that are not compatible with the hiring of staff. Out-sourced fundraising services are not eligible. If your project budget includes an audit, only the cost of the one-time NAP project audit (required if organizations use $25,000 or more in tax credits) may be included for tax credits.

- **Travel –** Client transportation; Staff travel costs may include expenses required to participate in professional training. Staff travel is generally considered administrative in nature and should be prorated.

- **Equipment –** The purchase, lease, or rental of equipment, furnishings, appliances, and other related items that will be used in the proposed NAP project. Costs should reasonable and correspond to market values. NAP funding of the lease/rent of equipment may be limited or prorated. Applicants must differentiate between equipment for staff use versus equipment for client use.

- **Supplies –** Supplies (program and office) that are necessary to implement the project. Applicants should separate program supply expenses from office supply expenses. Office supplies, such as paper, postage, toner cartridges, etc. should be calculated at a reasonable use and should be limited to 30% of the total cost of office supplies. Use a separate figure for any unusually large supply needs that relate the NAP project.

- **Building Space –** Rent or lease of facilities used during the NAP project period, for program services. Costs should be comparable to the fair market value for rent in the community or geographic area and should be prorated to reflect only the space used for the NAP project, and then limited to 30% that amount. Mortgage expenses are not eligible.

- **Other Costs –** Other items essential to a NAP project that do not fit into one of the provided categories, such as utilities, phones, building and vehicle maintenance, and insurance (overhead costs should be prorated for NAP purposes).

Capital Projects:

DED reserves the right to provide capital projects qualifying for 50% tax credits an award of credits in excess of $250,000 in tax credits. DED staff will determine the need for additional investment once all applications have been received and scored, subject to availability of credits. Applicants scoring high in the evaluation process will be considered, and may be asked to submit additional information related to demand/need for services in the community, project need (financial), and ability to utilize tax credits.

Service Projects:
DED reserves the right to provide service delivery projects qualifying for 50% tax credits an award of credits in excess of $250,000 in tax credits. DED staff will determine the need for additional investment once all applications have been received and scored, subject to availability of credits. Applicants scoring high in the evaluation process will be considered, and may be asked to submit additional information related to demand/need for services in the community and ability to utilize tax credits.

Service Delivery Budget – partial example

NAP BUDGET LINE ITEM & COST BREAKDOWN	NAP BUDGET	OTHER SOURCES OF FUNDING	TOTAL PROJECT COST
Salaries			
Project Director ($45,000 x 20% of time) $9,000	$9,000	$36,000	$45,000
Vocational Instructor ($35,000 x 65% of time) $22,750	$22,750	$12,250	$35,000
Equipment			
Computers (new, for client training) 2 @ $3,000	$5,000	$1,000	$6,000
Equipment $7,000	$4,000	$3,000	$7,000
File Cabinet (1 @ $250) $250		$250	$250
Contract - Audit $2,000	$ 2,000		$2,000
Supplies			
Office Supplies $3,000 x 25% for NAP	$750	$2,250	$3,000
Program Manuals and educational materials $800	$800		$800

Capital Campaign Budget – partial example

NAP BUDGET LINE ITEM & COST BREAKDOWN	NAP BUDGET	OTHER SOURCES OF FUNDING	TOTAL PROJECT COST
Property Acquisition - $60,000 (City donating other cost)	$35,000	$25,000	$60,000
Site Work - $22,500			
Excavation ($15/cu yd @ 500 yd) $7,500	$15,000	$0	$15,000
Asphalt paving $10,000	$17,500	$5,000	$22,500
Concrete (covered by private, non-NAP donations)			$15,000
Floor Coverings - $25,000			
Vinyl Tile $5,000; Base and Carpet $10,000			
Other costs covered by private donations	$15,000	$10,000	$25,000
Project Administrator Salary - oversight of credits and construction, 10% of time ($50,000 x 10%)	$5,000	$0	$5,000

Cost per beneficiary is the amount of money it costs your organization to provide project services for one client/participant. Calculated for Community Service, service delivery projects only.

For service delivery projects, cost per beneficiary is the estimated Total Project Cost per year of the project period, divided by the average number of clients to receive services per year of the project.

$$\text{Cost per Beneficiary} = \frac{\textbf{Total annual cost of implementing project services}}{\textbf{\# of unduplicated clients/participants that will receive services annually}}$$

Return on Investment and Economic Impact: Return on investment is the benefit or gain generated on investment in a program or programs relative to the amount of the investment. ROI is usually expressed as a percentage or a ratio and can be used to help determine efficiency of programs and the long term benefits of investment as a preventative measure. Economic impact is the short and/or long term effect of the project and services provided on the economic activity in a given area or on select individuals. Economic impact can only be established if the applicant has provided evidence to prove services will have a direct and measureable impact on program participants and the community.

Economic Impact Examples: ROI ratios or $ amount benefit per $1 investment, $ amounts saved by the community or state as a result of services, $ amounts of potential increases to the community or state, etc. as a result of services.

A specific example: If programming is focused on crime and recidivism prevention, discuss the costs associated with juvenile crime in the community, costs to the state to care for a juvenile offender, etc. Be sure to cite sources, as well as discuss details of research or studies as necessary.

Other Sources of Funding: All non-NAP funds that will be needed and utilized to implement and complete the proposed project. Other sources should equal or exceed the dollar amount listed for Other Sources on the NAP budget. If other sources of funding exceed the dollar amount needed, explain why.

Capital Campaign example:

Source Name/Amount	Status	Restrictions	Comments
CDBG $200,000	Secured	Facility construction	More grant requests have been submitted than needed. Assumption that certain amounts/grants will not be approved.
Casey Grant $50,000; Mathews Found Grant $35,000	Pending; Award expected July 2018	Restricted to equipment expenses	
Donations/Corporate Sponsors $100,000	$35,000 Secured; $65,000 Pending	For acquisition and construction expenses	
City/County Gov't. $15,000	$10,000 Secured $5,000 Pending	Project management	
Organization reserves	$20,000 Secured		

Total Project Cost: $717,912   Secured funding to date: $265,000
Less NAP request: $332,496   Pending other sources: $155,000

Amt. from Other Sources needed: $385,416   **Other Sources:** $420,000

APPLICATION ATTACHMENTS

All attachments must accompany the application at the time of submission. Applications received with missing or incomplete attachments may be disqualified.

1. **Attachment A – Current Members of the Board, Council, or Commission –** List ALL individuals who are presently serving as members of the applicant's Board. In addition, provide each member's: name, day phone, occupation, and position on the board, and indicate whether the individual is a resident of the project area.

2. **Attachment B – Letters of Support –** Applicants are required to provide letters of support from a State Representative and a State Senator. If conducting a capital campaign, the letters should be provided from the Representative and Senator representing the district in which the construction/renovation will be conducted. For service delivery projects, letters should be provided from the Senator and Representative representing the district in which the applicant's headquarters is located.

   To identify your legislators, utilize the Senate's "Legislator Lookup" search at: http://www.senate.mo.gov/LegisLookup/Default.aspx

   Applicants may also submit letters of support from individuals (other than members of the organization's board and staff), partner agencies, and/or clients. Additional letters are optional. Letters of support should be **dated within six months** of submission of the application.

3. **Attachment C – Local Government Certification -** NAP requires that each applicant submit a local government certification stating that the project does not interfere with existing city plans or ordinances. This is not an endorsement by local government.

4. **Attachment D – Site Control Document -** If your proposal involves any construction, property acquisition, renovation/improvement, or physical expansion, evidence must be provided to indicate that your organization has control over the site where the proposed project will take place. For organizations that will lease property, documents must show proof that your organization will lease the facility for a minimum of five years after the project period end date. Review and complete this attachment and submit it with the appropriate documentation.

5. **Attachment E – Applicant Certification -** This form certifies that the information contained in the application is true, correct, and complete, and that your organization: has read and understands the Guidelines; does not employ unauthorized workers; does not have any unpaid federal, state, or local taxes; etc. The Certification form must be signed (by the Executive Director of the organization or by a person duly authorized to represent the applicant organization) and notarized.

6. **E-Verify MOU -** All applicants must: 1) enroll in E-Verify, and 2) provide supporting documentation. All applicants must complete this form and attach a copy of the E-Verify memorandum to be eligible for NAP.

   The E-Verify Program, conducted jointly by the U.S. Citizenship and Immigration Services (USCIS) Verification Division and the Social Security Administration (SSA), is designed to provide employment status information to determine the eligibility of applicants for

employment. E-Verify requires that participating companies use the automated Verification Information System (VIS) to verify the employment authorization of ALL newly hired employees. An employer's participation in E-Verify is currently free. To access E-Verify, go to: http://www.uscis.gov/e-verify or contact the E-Verify toll free Help line at (888) 464-4218.

To retrieve a copy of your electronically signed MOU:

- After receiving a confirmation email that your organization is successfully enrolled, log back into the Account

- Click on "Edit Company Profile" in the left menu

- Click on "View MOU" button

- ONLY the Program Administrator can access the electronically signed MOU

SUBMITTING THE APPLICATION

The **narrative section** of the application should:

- Number and type each question prior to the corresponding response.

- Insert page numbers, starting with page number 1.

- Be **single-sided**, typed in **12-point font**, and have **1-inch top margins.**

- Contain original signatures.

- Be submitted unbound.

- **Page Limit:** Generally, the application narrative itself (the responses to questions) should be **no more than 30 pages total**. The average length of response per question is approximately 1 page, though some responses may be much longer and others shorter. You are not limited to 30 pages, but should use this as a guideline for presenting the most relevant, factual, and persuasive information.

NEW

Submit **only one** copy of the application to DED's Jefferson City office at:

MO Department of Economic Development
Business & Community Services - NAP
301 West High, Room 770
Jefferson City, MO 65101

Applicants will be notified of receipt of the application via mail or e-mail.

NAP APPLICATION ASSISTANCE

As a partner in community development, DED is committed to assisting nonprofit organizations and businesses with the NAP application process by offering technical assistance. Application workshops are conducted periodically during the year to assist organizations in preparing an application. The workshops are free and open to the public. Dates and registration forms are posted on the NAP website at: https://ded.mo.gov/programs/community/NAP

SCORING THE APPLICATION

DED is looking for well-thought out and organized proposals that:

- Articulate an identified need or problem in a neighborhood;

- Offer a solution to that need or problem with targeted outcomes;

- Present a reliable and accurate method for verifying those outcomes; and

- Offer a sound plan for sustainability.

More specifically, however, applications will be graded pursuant to the applicable scoring criteria. The DED reserves the right to utilize discretion in scoring submitted applications.

The method for reviewing applications is as follows:

Initial Screening - Applications will be initially screened to determine if basic eligibility requirements are met and the application is complete. For applicants that have previously been approved for NAP and/or YOP credits, it should be noted that past performance will also be considered in determining project approval. Further, all organizations must be in good standing with the Secretary of State when applying to NAP. To find out if your organization is in good standing, call (573) 751-4153 or visit the Secretary of State Business Entity Database at https://bsd.sos.mo.gov/BusinessEntity/BESearch.aspx?SearchType=0

Reviewing the Application - Once an application has met all basic eligibility requirements, DED will review and score the written responses and the submitted budget.

Points may be deducted from proposals if the applicant has a history of underutilization, failure to meet reporting requirements, and/or failure to meet outcomes. Bonus points may be awarded to applicants that establish a substantial, identified need in the community and provide services specifically designed to meet that need.

NOTIFICATION OF APPROVAL/DISAPPROVAL

Awards will be made and Agreements (contracts) will be sent to organizations selected for NAP approval. Organizations that are not approved will receive a denial notification in writing. NAP Rules provide an appeals process for applicants (12 CSR 85-2.020). The appeal must be submitted in writing to the Department Director within ten (10) business days after receipt of the denial notice.

Approved organizations will be required to attend an administrative training workshop. The workshop will provide information on the contractual obligations of approved NAP organizations as well as the reporting (content) requirements for the program.

REPORTING REQUIREMENTS

For approved NAP projects, organizations are required to submit the following items:

- Biannual reports, due 15 days after the end of each 6 month period (detailing progress);

- Proposed changes to the project, such as budget revisions, outcomes, project periods, etc;

- A Final Report (in lieu of the final biannual report) is due within 30 days of the end of the project;

- A Final Budget is due within 30 days of the end of the project (if actual expenditures differ from the original approved budget);

- An audit is due within 6 months of the end of the project period if $25,000 or more in tax credits are utilized; and

- Tax Credit Accountability Annual Report.

UTILIZING TAX CREDITS

NAP tax credits may be claimed against a variety of state tax liabilities, but must be claimed in the following order: (1) Gross Premium Receipts Tax; (2) Financial Institution Tax; (3) Corporate Franchise Tax; (4) Corporate and Individual Income Tax; and (5) Gross Receipts Tax.

Further, the amount of the tax credit claimed by a taxpayer shall not exceed the amount of such taxpayer's liability for the tax year in which the credit is claimed. While the tax credits are not refundable or transferable, they may be carried forward for up to five years.

RESTRICTIONS ON CONTRIBUTIONS

Certain restrictions apply to some donations. The DED reserves the discretion to determine the scope of the following restrictions:

1. **Real Property**:

   - Title must be held free and clear by the donor to be eligible;

   - Tax credits will be prorated to reflect only the portion of the land used for the NAP project;

   - Except for costs associated with required environmental assessments and appraisals, transaction costs related to real estate acquisition, construction and renovation are ineligible.

   - Credit is based on the lesser of two independent appraisals conducted by state-certified or state-licensed appraisers. Appraisals must be performed no more than 18 months prior to date of contribution. Only one appraisal is required when the property is:

     - Commercial property with appraised value less than $50,000; or

     - Vacant or residential property with appraised value less than $25,000.

   - Tax credits cannot be used for contributions made to cover the costs of the removal or abatement of hazardous materials;

2. **Non-Cash Donations**: In order to receive materials and other tangible items, the applicant should specifically list any such items on the budget submitted to DED. Also, only food bank organizations will be permitted to offer NAP tax credits on donated food items (the value of donated items will be based on a formula approved by DED).

3. **Miscellaneous:**

    *   Taxes must be paid on the income from the sale of goods and services to qualify as an in-kind donation;

    *   Donations applied toward fundraising activities do not qualify for NAP tax credit. When a donation results from the purchase of an event ticket, its value is the difference between the cost of the ticket and the cost paid by the donor (per IRS guidelines);

    *   Tax credits may be issued for the value of targeted employee training but not for wages provided for work performed that directly benefits the business; and

    *   Membership fees paid to nonprofit organizations are not eligible for tax credits.

REPAYMENT AND DISPOSITION

If an organization fails to complete the approved project or is found to be non-compliant with NAP requirements, the organization may be required to reimburse the State a monetary sum equal to the value of the tax credits issued.

If, during the **five years** after the project (facility) becomes operational, an organization disposes of land, buildings, vehicles or equipment that was purchased or donated with assistance of NAP credits (including leasehold improvements), a percentage of tax credits approved for the project must be repaid to the State (see schedule below).

During Year	Percent of NAP Tax Credit to be Repaid
1	100%
2	80%
3	60%
4	40%
5	20%

Or, if the facility is sold earlier than the five (5) years, the sale price must be at least 90% of the fair market value, with proceeds applied either toward a replacement facility for the nonprofit or some other activity approved by DED, or repayment of tax credits as outlined above may be required.

Applications must be submitted by the applicant organization's director/president (as listed on the application cover page). The NAP retains the right to accept, reject, or negotiate any or all applications, and the right to vary the provisions set forth herein at any time prior to the execution of a contract, where NAP deems such variance to be in the best interest of NAP. This Guidelines and Application is designed to solicit potential projects that meet the targeted outcomes of NAP, to provide information to allow for a fair selection of projects, and to facilitate the monitoring and evaluation of, and assistance to, the projects which are selected.
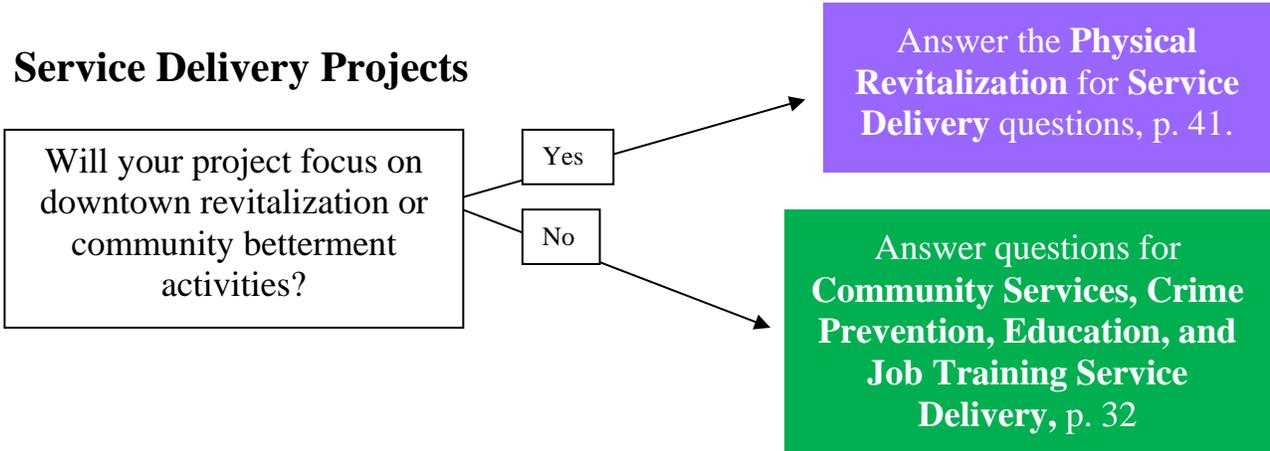
Tips for Writing a Successful NAP Application

1) We've reordered and revised questions in an effort to make it easier to understand what NAP staff are looking for in the narrative section of the application. Make sure your numbered responses correspond to the correct question numbers and your responses align with any adjustments we've made to the questions.

2) **READ THE GUIDELINES** before you start working on the application. The guidelines contain examples, definitions, and details that should be helpful in preparing your application narrative.

3) Talk to us. Whether you have questions about eligibility, documentation requirements, or what we're looking for in response to a question, please feel free to email or call us.

4) **ANSWER EVERY QUESTION** and follow directions. Some numbered questions consist of several questions or statements. Be sure to respond to each one.

5) Be clear, succinct, and accurate. If your application narrative (responses to project profile and administrative capacity questions) is longer than 30 pages, you may have written too much.

6) Make the case for your project in your own way, but include up to date, precise data and cite resources and studies as requested. Avoid technical jargon.

7) Proofread your application! Make sure numbers add up and are consistent, remove typos, and make sure the application flows and makes sense. Avoid repetitiveness.

8) After you finish writing your narrative, give it to a friend who doesn't know anything about your nonprofit. That person should be able to understand what you do and what you're proposing.

9) Include all attachments, make sure each attachment is completed in full, and completed by the appropriate person. If you have questions about who should sign the Local Government Certification or who your legislators are, please contact us.

10) If you hire a grant writer (not required), remember, you are in control and ultimately responsible for carrying out the project as proposed in your application. Be sure you review the completed application thoroughly.

Don't know if your project fits in the Physical Revitalization category?

Check the chart below to determine which application questions you should answer.

Service Delivery Projects

Will your project focus on downtown revitalization or community betterment activities?

Yes → Answer the **Physical Revitalization** for **Service Delivery** questions, p. 41.

No → Answer questions for **Community Services, Crime Prevention, Education, and Job Training Service Delivery,** p. 32

Capital Campaign Projects

Will your project involve the construction or renovation of a community center, theater, meeting space, or similar community facility?

Yes → Answer the **Physical Revitalization** for **Capital Campaign** questions, p. 37.

No →

Will your project involve renovation of a distressed building in a downtown or major corridor, or the elimination of blight?

Yes → Answer the **Physical Revitalization** for **Capital Campaign** questions, p. 37.

No → Answer questions for **Community Services, Crime Prevention, Education, and Job Training Capital Campaign**, p. 27.

Truman State Office Building
301 West High Street, Room 770
PO Box 118
Jefferson City MO 65102

Telephone: 573-751-4539
Fax: 573-522-4322
E-mail: NAP@ded.mo.gov
Web: www.ded.mo.gov

NEIGHBORHOOD ASSISTANCE PROGRAM
FY2019 APPLICATION (Section 32.100, 32.115, RSMo)

Applicant (Official/Legal Name as Registered)	NAICS*(required)	MO Tax ID	FEIN

Project Title (Optional)	**Project Location - Street, City, County, 9-digit Zip Code (Required)

Contact Person/Project Administrator (First Name, Middle Initial, Last Name, Title)

Mailing Address - Street Address, P.O. Box, City, State, **9-digit** Zip Code (Required)

Day Phone (include extension) ( )	Fax Number ( )	E-mail Address

Agency Director (First Name, Middle Initial, Last Name)	Date of Birth (Required)

Title	Day Phone (include extension) ( )

Proposed Project Period (Choose only one)	Project Type (Choose one)	Number of Employees
☐ 12 Months ☐ 24 Months ☐ 36 Months	☐ Service Delivery	☐ < 100
The project period is the time frame in which all activities, i.e. fundraising, service delivery, expenditures, and/or construction, related to the proposed project must be completed.	☐ Capital Campaign	☐ 100-500
		☐ >500

*NAICS, North American Industry Classification System, is the industry classification system used by the statistical agencies of the United States. NAICS replaces the 1987 Standard Industrial Classification (SIC). The NAICS is used for classifying business establishments to assist with gathering data related to measuring productivity, unit labor costs, and the capital intensity of production, employment and other information. Missouri businesses are assigned a NAICS when the company files a "Report to Determine Liability Status" with the Missouri Department of Labor and Industrial Relations to determine Unemployment Tax Liability. Normally, a general business employer becomes liable for the tax and responsible for providing unemployment insurance for its workers when it:

- Pays $1,500 in wages (cash and in-kind) in a calendar quarter, or
- Has an employee in some portion of a day in each of 20 different weeks, or
- Becomes liable under the Federal Unemployment Tax Act (FUTA) and employs a worker in Missouri, or
- Acquires and continues without interruption substantially all the business of a liable employer.

If you don't know your NAICS code please call (573) 751-3340. If your organization is not required to have an UI account and NAICS code, please indicate N/A on this form.

****Provide the physical location where your project will take place. If your project takes place at more than one site, submit the addresses for all sites (street, city, county, 9-digit zip). You can find the 9-digit Zip code at: www.usps.com Click on Quick Tools, then Look Up a ZIP Code.

ORANIZATION ELIGIBILITY

Mark your organization's eligibility and attach supporting documents. Choose only one.

☐ Incorporated in the state of Missouri as a domestic not-for profit corporation under Chapter 355 RSMo on the following date:_____. Attach Articles of Incorporation

☐ Incorporated under the laws of another state and allowed to operate in Missouri as a foreign not-for-profit corporation under Chapter 355 RSMo on the following date: _____. Attach Articles of Incorporation.

☐ Not incorporated separately but operating as a local chapter, branch, or division of the following "parent" organization (see guidelines for specific requirements). Attach parent organization's Articles of Incorporation.

Parent Organization		
Street Address		
City	State	Zip
Contact	Title	
Day Phone	Fax	

☐ Business operating in Missouri. Attach your Articles of Incorporation.

☐ Tax Exempt 501(c)(3) status with the Internal Revenue Service (IRS). Must also be incorporated to operate in Missouri and be in Good Standing. **Attach a copy of your tax exempt letter from the IRS and Articles of Incorporation.**

PROJECT CATEGORY

Which category does your project qualify under primarily? Choose only one. (See Guidelines, p. 6)

☐ Community Services   ☐ Crime Prevention   ☐ Job Training

☐ Education   ☐ Physical Revitalization

FAITH BASED ORGANIZATIONS

☐ Yes ☐ No   Are services rendered to clients without discrimination?

☐ Yes ☐ No   Does your organization conduct any religious or partisan activities? If yes, attach a detailed description of those activities/services.

☐ Yes ☐ No   Does your organization require participation in any religious or faith based activities in order to receive services? If yes, provide a description of structured/alternate activities that clients may participate in should they chose not to participate in religious activities.

LITIGATION HISTORY

1) **Organization:**

   a. Has the organization ever been convicted of a violation of any state and/or federal laws?

   ☐ Yes   ☐ No

   b. **If yes**, provide the date, the Court, the charges at disposition and the case number. Attach as a separate sheet if additional space is required.

2) **Principal** (CEO, CFO, Principal, Managing Partner, and Executive Director):

   a. Has the "principal" ever been convicted of a violation of any state or federal law?

   ☐ Yes   ☐ No

   b. **If yes**, provide the date, the Court, the charges at disposition and the case number. Attach as a separate sheet if additional space is required.

3) **Contact:**

   a. Has the "contact person" or project administrator ever been convicted of a violation of any state or federal law?

   ☐ Yes   ☐ No

   b. **If yes**, provide the date, the Court, the charges at disposition and the case number. Attach as a separate sheet if additional space is required.

Revised 03/2018

Community Services, Crime Prevention, Education, and Job Training

Capital Campaign Projects

Revised 03/2018

Community Services, Crime Prevention, Education, Job Training Capital Campaign Projects

Project Profile

Construction, Services, Targeted Clients (21 points)

1. Describe the proposed project. Provide a detailed narrative explaining property acquisition, construction, and/or renovation included as part of this project. Be sure to include a description of **ALL** construction/renovation work that needs to be done. Discuss square footage, space use, percent of space used by applicant versus other organizations, rooms, etc.

   Attach a copy of existing and proposed floor plans.

2. What services will the agency provide at the facility once construction, renovation, or property acquisition is completed?

   - Provide a detailed description of all activities, programs, classes, etc., that will be provided at the facility and implemented by your organization.

   - Discuss frequency and intensity of services, as well as average duration of services.

   - Discuss key features of services, special curriculum/methods, unique qualifications of staff, etc.

3. How many participants have been served monthly/annually in recent years? How many monthly or annual participants will be served upon completion of this project (construction/renovation)? How did you determine this number?

   Will capacity be increased as a result of this project?

   What are the characteristics of the individuals who will receive services at the completed facility? Characteristics should be drawn from past client/participant data and should relate to the services being provided and need in the community.

   - Participant characteristics <u>might</u> include: the percent of participants without a high school diploma or equivalency, the percent clients who are low income or living below the poverty level, the percent of participants who have minority status, etc. Other characteristics may include age, gender, employment status, involvement with the juvenile or judicial system, etc.

   - If the program is new, discuss characteristics of those you will target.

   Provide a description of the project's service area, including a geographic description and data relevant to the project. Other descriptors may include: demographics, crime rates, educational attainment, etc. Cite the sources from which your service area descriptors were obtained.

Participant and Community Need and Other Facilities (23 points)

4. What participant needs will be met by the services provided upon completion of this project? Provide evidence (in the form of studies or research) to show the impact of services on program participants. How will the services/programs provided in the facility ensure participants will be better able to become successful? What negative outcomes may participants face without services/intervention? Provide evidence of effectiveness of programming. Cite studies and research.

   To what extent are the needs prevalent in the community? Does the project address a specific need identified by your community and/or is it part of a larger community or state plan? Discuss who

identified the need, how the need was identified, and when. Cite and discuss community research, statistics, or other objective evidence that demonstrate need for services in the community

Why is this acquisition, construction, or expansion of this facility needed? Are there health or safety hazards present in the existing facility that necessitate renovation, acquisition, and/or construction? Is there a need to expand, based on demand in recent years? Discuss program wait lists, increasing demand for services in the community, etc.

To what extent have customers been involved in planning the project (surveys, community meetings, etc.) and what input did they provide? How will participants be involved in ongoing program change?

5. Identify (by name) the nearest facilities or organizations providing similar services or some of the services provided by your organization. Discuss distance to each of the other facilities, the programs offered at each, etc.

Do the targeted participants have access to the facilities? Are there barriers (such as physical or financial) to participation in programs?

Goals and Outcomes, and Project Milestones (8 points)

6. List and discuss your project goals and outcomes. Capital projects will have two goals which will be tied to 1) project renovation, construction and/or acquisition and 2) the services provided at the facility upon completion of the NAP project. The first outcome should define the specific acquisition, renovation, and/or construction that will be completed. The second outcome should provide the number of clients that will receive services or participate in programs offered at the new/renovated facility upon completion of the project.

7. List and discuss the milestones your agency must complete in order for the project to be successful. Be sure to include a detailed breakdown of construction activities and use, such as acquisition, bidding, construction (foundation, framing, electrical, etc.), occupancy, and when you will be at full capacity.

Administrative Capacity

Past Project, Key People, Fundraising Plan (29 points)

8. Discuss your agency's history, including when and why the organization was established and the evolution of services.

Identify all other services offered by your agency that are not part of the NAP project, and provide a brief summary of each.

Summarize two of your organization's recent past projects. The projects discussed should have a defined time frame and be similar in scope/size to the proposed NAP project. You may discuss recent NAP and YOP projects.

- **Include a discussion of:** any services provided as part of the project, fundraising and performance goals that were set, sources of funding and total project costs, and the extent to which you achieved fundraising goals and performance outcomes in the expected time frame.

- If recent NAP or YOP projects have been unsuccessful in: fundraising, achieving outcomes, reporting, or completing the project in the expected time frame; OR had audit findings or compliance issues, describe the corrective plan implemented to avoid future problems.

Revised 03/2018

- If your organization has not implemented and completed any similar previous projects, you may discuss projects implemented and completed by those who will be key individuals in this project. Be sure to discuss their roles in the previous project(s).

9. Identify the individuals who will have the most responsibility for making this project successful.

   - Who will oversee construction? Who are the individuals responsible for operational oversight, recruiting participants &/or service partners, planning & developing programming, and implementation of services once construction/renovation is completed.

   - What are their day to day roles in the organization and in the implementation of the project? Focus on job duties and capacity.

   Provide a detailed description of any agencies partnering in completion of the proposed project. Identify organizations that will assist with construction as well as those assisting with services after construction has been completed.

10. Provide a detailed description of fundraising plan your agency will implement to ensure utilization of NAP tax credits. Non-NAP fundraising activities, grant applications, etc. **should not** be included.

    - Discuss all events and activities at/through which NAP credits will be marketed to donors. Identify how many donors will be reached through each activity.

    - Identify the individual(s) who will oversee fundraising efforts, as well as the individuals who will be involved in various fundraising activities.

    - To whom will your agency market the tax credits?

    Provide a timeline for NAP activities AND establish fundraising milestones. Be sure the fundraising timeline corresponds to property acquisition and/or commencement of construction.

Budget Efficiency, Other Sources, Sustainability (19 points)

11. Provide a detailed breakdown of each line item on the proposed budget.

    Attach construction/ renovation estimates or bids from your contractor, engineer, or architect. If you have not yet obtained bids or estimates, explain how you determined construction/renovation costs.

    What is the expected Return on Investment (ROI) and/or economic impact for the community?

    - Economic Impact should be expressed in **dollar amounts**, and can be measured by: job creation, increases to personal income and/or the local tax base, and other measures that show benefit to the local economy.

    - Economic Impact can also be shown as cost associated with not providing services to clients/community, and/or savings to the community or state as a result of providing services.   If the circumstances of participants are likely to deteriorate without services (as proven for question 4), discuss costs associated with those negative outcomes.

12. If NAP will be used to support only a portion of the cost of the proposed project, identify **all** other sources of funding to be used to implement the project, such as grant or foundation funding, program revenues, non-NAP donations, client/program fees, private insurance, etc. **For each "Other" funding source specify**: the amount of funding expected, the status of the request, funding restrictions, and expenses to be funded.

- Be sure to discuss any federal, state, and/or local funding or reimbursements. Provide agency name, program name, the amount of funding expected, and restrictions on the use of funds.

13. Explain how the proposed NAP project will be supported once the NAP project has been completed. What steps are being taken, or will be taken, to diversify funding sources and sustain long term operations? Discuss plans for moving your organization toward self-reliance. Will there be fees associated with programming or events?

What is the estimated annual operating cost/budget for the first year after completion? Provide a breakdown to show that all operating costs have been included. What are projected first year revenues? Provide a breakdown of revenues and projected amounts from each type. If there is an existing facility, will post-construction operating costs be higher or lower than pre-construction costs? Discuss.

Community Services, Crime Prevention, Education, and Job Training

Service Delivery Projects

Community Services, Crime Prevention, Education, Job Training Service Delivery Projects

Project Profile

Services, Participant, & Need (30 points)

1. Describe the proposed project and the services offered to the targeted participants. Provide a detailed description of all activities, classes, etc. that will be offered as part of the NAP project.

    - Discuss frequency of programming, intensity, and duration of services.

    - Identify the key features of the project, special curriculum or methods, unique qualification of staff, etc.

    - Discuss the comparative advantages of the services provided by your organization over those provided by other agencies in your service area. Services should directly impact outcomes.

2. Identify the number of participants/clients the project has served in recent years and the unduplicated number of participants to be served during the proposed project period.

    What are characteristics specific to the participants receiving services? Characteristics should be drawn from past client/participant data and should relate to the services being provided and need in the community.

    - Participant characteristics, based on recent organization service data, might include: the percent of participants without a high school diploma or equivalency, the percent clients who are low income or living below the poverty level, the percent of participants who have minority status, etc. Other characteristics may include age, gender, employment status, involvement with the juvenile or judicial system, etc.

    - If the program is new, discuss characteristics of those you will target.

    Provide a description of the project's service area. Include a geographic description as well as demographics, socio-economic data, etc. Data specifically related to services (such as poverty levels, crime rates, dropout rates, abuse rates, etc.) should be provided. Cite sources.

3. What participant needs will be met by the services provided upon in this project? Provide evidence (in the form of studies or research) to show the impact of services on program participants. How will the services/programs provided ensure participants will be better able to become successful? What negative outcomes may participants face without services/intervention?

    What community needs are met by the programs and services provided as part of this project. To what extent are the needs prevalent in the community? Discuss program wait lists, increasing demand for services in the community, etc. Cite and discuss community research, statistics, or other objective evidence that demonstrate need for services in the community.

    Does the project address a specific need identified by your community and/or is it part of a larger community or state plan? Discuss who identified the need, how the need was identified, and when. Cite reports or studies.

    To what extent have customers been involved in planning the project (surveys, community meetings, etc.) and what input did they provide? How will participants be involved in ongoing program change?

Goals, Outcomes, Verification, and Milestones (25 points)

4. List and discuss the goals for your proposed project. Explain why you have chosen these goals, their relevance to your target participants, and what your organization will do to impact these goals.

5. For each goal identified, list one or more meaningful outcome to reflect the number of clients/participants that will successfully attain the project goal(s). Discuss why you have chosen these outcomes rather than setting higher or lower outcomes. As a general rule, 1-4 outcomes should be chosen.

6. Discuss how you will evaluate progress toward outcomes and verify the extent to which your outcomes have been accurately measured and achieved during the project period.

   - Describe the tools, tests, computer systems, etc. that will be used to meet NAP reporting requirements.

   - Discuss what information will be measured and collected.

   - How often will evaluation(s) take place and who will collect and report the data.

7. List and discuss the steps your agency and targeted participants must take to successfully achieve outcomes. Discuss the level of participation required of staff and participants as they progress through the steps, provide milestone points, and provide a timeline for steps and milestones that reflect the project period.

Administrative Capacity

Past Projects, Key People, Fundraising Plan (28 points)

8. Discuss your agency's history, including when and why the organization was established and the evolution of services.

   Identify all other services offered by your agency that are not part of the NAP project, and provide a brief summary of each.

   Summarize two of your organization's recent past projects. The projects discussed should have a defined time frame and be similar in scope/size to the proposed NAP project. You may discuss recent NAP and YOP projects.

   - **Include a discussion of:** any services provided as part of the project, fundraising and performance goals that were set, sources of funding and total project costs, and the extent to which you achieved fundraising goals and performance outcomes in the expected time frame.

   - If recent NAP or YOP projects have been unsuccessful in: fundraising, achieving outcomes, reporting, or completing the project in the expected time frame; OR had audit findings or compliance issues, describe the corrective plan implemented to avoid future problems.

   - If your organization has not implemented and completed any similar previous projects, you may discuss projects implemented and completed by those who will be key individuals in this project. Be sure to discuss their roles in the previous project(s).

9. Identify the individuals who will have the most responsibility for making this project successful.

- Be sure to include the individuals: recruiting participants and/or service partners, planning & developing programming, providing direct services, evaluating programs, and overseeing implementation of the project.

- What are their day to day roles in the organization and in the implementation of the project? Are they working directly with clients/participants? Focus on job duties and capacity.

You must discuss all individuals whose salaries will be funded with NAP donations.

Discuss outside organizations or individuals you partner with to implement the services provided as part of this project. Provide a detailed description of their roles in carrying out the project.

10. Provide a detailed description of fundraising plan your agency will implement to ensure utilization of NAP tax credits. The plan should be specific to soliciting donations for which NAP tax credits will be offered. Other, non-NAP fundraising activities, grant applications, etc. **should not** be included.

Discuss all events and activities at/through which NAP credits will be marketed to donors. Identify how many donors will be reached through each activity.

Identify the individual(s) who will oversee fundraising efforts, as well as the individuals who will be involved in various fundraising activities.

To whom will your agency market the tax credits?

Provide a timeline for NAP activities AND establish fundraising milestones.

Budget Efficiency, Other Sources, Sustainability (17 points)

11. Provide detailed breakdowns of items on the proposed budget and explain how each relates to the project and outcomes.

What is your agency's cost per beneficiary for the proposed NAP services?

- Cost per beneficiary should be calculated by dividing the expected annual cost of implementing services by the number of unduplicated individuals that will receive direct services annually. Show calculation. (Details on page 16)

What is the expected Return on Investment (ROI) and/or economic impact for the community?

- Economic Impact should be expressed in **dollar amounts**, and can be measured by: job creation, increases to personal income and/or the local tax base, and other measures that show benefit to the local economy.

- Economic Impact can also be shown as cost associated with not providing services to clients/community, and/or savings to the community or state as a result of providing services. If the circumstances of participants are likely to deteriorate without services (as proven for question 3), discuss costs associated with those negative outcomes.

12. If NAP will be used to support only a portion of the cost of the proposed project, identify **all** other sources of funding to be used to implement the project, such as grant or foundation funding, program revenues, non-NAP donations, client/program fees, private insurance, etc. **For each "Other" funding source specify**: the amount of funding expected, the status of the request, funding restrictions, and expenses to be funded.

- Be sure to specifically discuss **any federal, state, and/or local funding or reimbursements**. Provide agency name, program name, the amount of funding expected, and restrictions on the use of funds.

13. Explain how the proposed NAP project will be supported once the NAP contract has expired. Will there be fees associated with the programming? How are you diversifying your funding sources? Discuss plans for moving this project toward self-reliance.

    Discuss how your agency ensures that the tax credits are used to expand your donor base and continue to garner increased donations each year. How do you continue to use the tax credit tool effectively and avoid any circumstance that may diminish its value?

Physical Revitalization

Capital Campaign Projects

Revised 03/2018

Project Profile

Construction, Services, Targeted Clients (21 points)

1. Describe the proposed project. Provide a detailed narrative explaining property acquisition, construction, and/or renovation included as part of this project. Be sure to include a description of **ALL** construction/renovation work that needs to be done. Discuss square footage, space use, percent of space used by applicant versus other organizations, rooms, etc.

   Attach a copy of existing and proposed floor plans.

2. What services will your organization provide once the new construction, renovation, or property acquisition is completed?

   - Provide a detailed description of all activities, programs, classes, etc., that will be provided at the facility and implemented by your organization.

   - Discuss frequency and duration of activities. Provide a sample calendar of activities when possible.

3. How many participants have been served monthly/annually in recent years? How many participants will be served upon completion of this project? How did you determine this number?

   Who will services be targeted to at the new or renovated facility? How will you market programs to this population?

   Provide a detailed description of the project's service area, including a geographic description, demographics, and socio-economic data. Descriptors may include: demographics, crime rates, educational attainment, etc., as they apply to the services provided by the applicant.

   Be sure to also describe conditions associated with revitalization, such as blighted neighborhoods, vacant buildings, etc. Cite the sources from which your service area information was obtained.

Participant and Community Need, Impact, and Other Facilities (22 points)

4. What community needs will be met as a result of this new construction or renovation? To what extent is there need in the community for the services that will be provided at the facility? Discuss program wait lists, increasing demand for services in the community, etc. Cite and discuss local research, statistics, or other objective evidence used to demonstrate need in the community.

   Why is the acquisition, construction, or expansion of the project facility needed? Are there health or safety hazards present in an existing facility that necessitate renovation, acquisition, and/or construction? Is there a need to expand, based on demand in recent years? Will the project reduce blight or improve property values?

   Does the project address a need identified by your community in a strategic plan and/or is it part of a larger community or state plan? Cite the plan and the year it was adopted, discuss how the need was identified, how your project will meet plan objectives, and the impact of the project on the community.

   To what extent has the community been involved in planning the project (surveys, community meetings)? What input was provided? How will the community be involved in ongoing program change?

Describe how the project, and the services provided at the new or renovated facility, will impact individual participants, increase private investment in the community, and attract and retain residents, visitors, and businesses. Or, explain how the project makes conditions more favorable for the community to attract and retain residents, visitors, and businesses.

5. Identify (by name) the nearest facilities or organizations providing similar services or some of the services provided by your organization. Discuss distance to each of the other facilities, the programs offered at each, etc.

   Do the targeted participants have access to the facilities? Are there barriers (such as physical or financial) to participation in programs?

Goals and Outcomes, and Project Milestones (9 points)

6. List and discuss your project goals and outcomes. Capital projects will have two goals which will be tied to 1) project renovation, construction and/or acquisition, and 2) the services provided at the facility upon completion of the NAP project. The first outcome should define the specific acquisition, renovation, and/or construction that will be completed. The second outcome should provide the number of clients that will receive services or participate in programs at the new/renovated facility upon completion of the project.

7. List and discuss the milestones your agency must complete in order for the project to be successful. Be sure to include a detailed breakdown of construction activities and use, such as acquisition, bidding, construction (foundation, framing, electrical, etc.), occupancy, and when you will be at full capacity.

Administrative Capacity

Past Project, Key People, Fundraising Plan (29 points)

8. Discuss your agency's history, including when and why the organization was established, the evolution of services, mergers or name changes, etc.

   Identify all other services offered by your agency that are <u>not</u> part of the NAP project, and provide a brief summary of each. Be sure to specify if NAP services are the only services your organization implements.

   Summarize two of your organization's recent past projects. The projects discussed should have a defined time frame and be similar in scope/size to the proposed NAP project. You may discuss recent NAP and YOP projects.

   - **Include a discussion of:** services provided as part of the project, fundraising and performance goals that were set, sources of funding and total project costs, and the extent to which you achieved fundraising goals and outcomes in the expected time frame.

   - If recent NAP or YOP projects have been unsuccessful in: fundraising, achieving outcomes, reporting, or completing the project in the expected time frame; OR had audit findings or compliance issues, describe the corrective plan implemented to avoid future problems.

   - If your organization has not implemented any similar projects, you may discuss projects implemented and completed by those who will be key individuals in this project. Be sure to discuss their roles in the previous project(s).

9. Identify the individuals who will have the most responsibility for making this project successful.

- Who will oversee construction? Who are the individuals responsible for operational oversight, recruiting participants &/or service partners, planning & developing programming, and implementation of services once construction/renovation is completed.

- What are their day to day roles in the organization and in the implementation of the project? Focus on job duties and capacity.

Provide a detailed description of agencies partnering in the implementation of the project, as well as those assisting with services after construction has been completed.

10. Provide a detailed description of fundraising plan your agency will implement to ensure utilization of NAP tax credits. The plan should be specific to soliciting donations for which NAP tax credits will be offered. **Non-NAP** fundraising activities, grant applications, etc. **should not** be included.

- Discuss all events and activities at/through which NAP credits will be marketed to donors. Identify how many donors will be reached through each activity.

- Identify the individual(s) who will oversee fundraising efforts and individuals involved in various fundraising activities.

- To whom will your agency market the tax credits?

- Provide a timeline for NAP events/activities, establish fundraising milestones, and provide dates. Be sure the fundraising timeline corresponds to property acquisition and/or commencement of construction.

Budget Efficiency, Other Sources, Sustainability (19 points)

11. Provide a detailed breakdown of each line item on the proposed budget. Attach construction/ renovation estimates or bids from your contractor, engineer, or architect. If you have not yet obtained bids or estimates, explain how you determined construction/renovation costs.

What is the expected Return on Investment and/or economic impact of the project? Economic Impact should be expressed in **dollar amounts**, and can be measured by: job creation, increases to property values and/or the local tax base, business attraction, and any other measure that would indicate benefit to the local economy.

12. If NAP will be used to support only a portion of the cost of the project, identify <u>**all**</u> other sources of funding to be used, such as grant or foundation funding, program revenues, non-NAP donations, client/program fees, private insurance, etc. **For each "Other" funding source, specify**: the amount of funding expected, the status of the request, funding restrictions, and expenses to be funded.

- Be sure to discuss any federal, state, and/or local funding or reimbursements. Provide agency name, program name, the amount of funding expected, and restrictions on the use of funds.

13. Explain how the proposed NAP project will be supported once the NAP project has been completed. What steps are being taken, or will be taken, to diversify funding sources and sustain long term operations? Discuss plans for moving your organization toward self-reliance. Will there be fees associated with programming or events?

14. What is the estimated annual operating cost/budget for the first year after completion? Provide a breakdown to show that all operating costs have been included. What are projected first year revenues? Provide a breakdown of revenues and projected amounts from each type. If there is an existing facility, will post-construction operating costs be higher or lower than pre-construction costs? Discuss.

Physical Revitalization
Service Delivery Projects

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Revised 03/2018

Project Profile

Services, Participants, & Need (31 points)

1. Describe the proposed project and the services offered to project participants. Provide a detailed description of all activities, classes, etc. that will be offered as part of the NAP project. Be sure to discuss frequency and duration of services and activities, as well as special methods or curriculum.

   Discuss the comparative advantages of the services provided by your organization over those provided by similar agencies in your service area.

2. Identify the number of participants the project has served in recent years and the unduplicated number of participants to be served during the proposed project period.

   Who will services be targeted to? How will you market programs to this population? What participant needs will be met by the services provided upon in this project?

   Provide a detailed description of the project's service area, including a geographic description, demographics, and socio-economic data. Descriptors may include: demographics, crime rates, educational attainment, etc, as they apply to the services provided by the applicant.

   Be sure to also describe conditions associated with revitalization, such as blighted neighborhoods, vacant buildings, etc. Cite the sources from which your service area information was obtained.

   Cite the sources from which your service area information was obtained.

3. What community needs are met by the programs and services provided as part of this project? To what extent are the needs prevalent in the community? Discuss program wait lists, increasing demand for services in the community, etc. Cite and discuss community research, statistics, or other objective evidence that demonstrate need for services in the community.

   Does the project address a specific need identified by your community and/or is it part of a larger community or state plan or revitalization effort? Discuss who identified the need, how the need was identified, and when. Cite reports or studies.

   Describe how project services will impact individual participants, increase private investment in the community, and attract and retain residents, visitors, and businesses. Or, explain how the project makes conditions more favorable for the community to attract and retain residents, visitors, and businesses. Will the project reduce blight or improve property values?

   To what extent has the community been involved in planning the project (surveys, community meetings, etc.) and what input was provided? How will the community be involved in ongoing program change?

Goals, Outcomes, Verification, and Milestones (25 points)

4. List and discuss the goals for your proposed project. Explain why you have chosen these goals, their relevance to your target participants, and what your organization will do to impact these goals.

5. For each goal identified, list one or more meaningful outcome to reflect the number of clients/participants that will successfully attain the project goal(s). Discuss why you have chosen

these outcomes rather than setting higher or lower outcomes. As a general rule, 1-4 outcomes should be chosen.

6. Discuss how you will evaluate progress toward outcomes and verify the extent to which your outcomes have been accurately measured and achieved during the project period.

   - Describe the tools, tests, computer systems, etc. that will be used to meet NAP reporting requirements.

   - Discuss what information will be measured and collected.

   - How often will evaluation(s) take place and who will collect and report the data.

7. List and discuss the steps your agency and targeted participants must take to successfully achieve outcomes. Discuss the level of participation required of staff and participants as they progress through the steps, provide milestone points, and provide a timeline for steps and milestones that reflect the project period.

Administrative Capacity

Past Project, Key People, Fundraising Plan (28 points)

8. Discuss your agency's history, including when and why the organization was established and the evolution of services.

   Identify all other services offered by your agency that are not part of the NAP project, and provide a brief summary of each.

   Summarize two of your organization's recent past projects. The projects discussed should have a defined time frame and be similar in scope/size to the proposed NAP project. You may discuss recent NAP and YOP projects.

   - **Include a discussion of:** any services provided as part of the project, fundraising and performance goals that were set, sources of funding and total project costs, and the extent to which you achieved fundraising goals and performance outcomes in the expected time frame.

   - If recent NAP or YOP projects have been unsuccessful in: fundraising, achieving outcomes, reporting, or completing the project in the expected time frame; OR had audit findings or compliance issues, describe the corrective plan implemented to avoid future problems.

   - If your organization has not implemented and completed any similar previous projects, you may discuss projects implemented and completed by those who will be key individuals in this project. Be sure to discuss their roles in the previous project(s).

9. Identify the individuals who will have the most responsibility for making this project successful.

   - Be sure to include the individuals: recruiting participants &/or service partners, planning & developing programming, providing direct services, evaluating programs, and overseeing implementation of the project.

   - What are their day to day roles in the organization and in the implementation of the project? Are they working directly with clients/participants? Focus on job duties and capacity.

   You must identify and discuss all individuals whose salaries will be funded with NAP donations.

Discuss outside organizations or individuals you will partner with to implement the services provided as part of this project, such as Chambers of Commerce, local government entities, and other nonprofits. Provide a detailed description of each agency's role in carrying out the project.

10. Provide a detailed description of fundraising plan your agency will implement to ensure utilization of NAP tax credits. The plan should be specific to soliciting donations for which NAP tax credits will be offered. Other, non-NAP fundraising activities, grant applications, etc. **should not** be included.

- Discuss all events and activities at/through which NAP credits will be marketed to donors. Identify how many donors will be reached through each activity.

- Identify the individual(s) who will oversee fundraising efforts, as well as the individuals who will be involved in various fundraising activities.

- To whom will your agency market the tax credits?

- Provide a timeline for NAP events/activities, establish fundraising milestones, and provide dates.

Budget Efficiency, Other Sources, Sustainability (16 points)

11. Provide a detailed breakdown of each line item on the proposed budget and explain how each relates to the project and its outcomes.

What is the expected Return on Investment and/or economic impact of the project? Economic impact should be expressed in **dollar amounts**, and can be measured by: job creation, increases to property values and/or the local tax base, business attraction, and any other measure that would indicate benefit to the local economy.

12. If NAP will be used to support only a portion of the cost of the proposed project, identify **all** other sources of funding to be used to implement the project, such as grant or foundation funding, program revenues, non-NAP donations, client/program fees, private insurance, etc. **For each "Other" funding source specify**: the amount of funding expected, the status of the request, funding restrictions, and expenses to be funded.

- Be sure to discuss any federal, state, and/or local funding or reimbursements. Provide agency name, program name, the amount of funding expected, and restrictions on the use of funds.

13. Explain how the proposed NAP project will be supported once the NAP project has been completed. What steps are being taken, or will be taken, to diversify funding sources and sustain long term operations? Discuss plans for moving your organization toward self-reliance. Will there be fees associated with programming or events?

Discuss how your agency ensures NAP tax credits are used to expand the donor base and garner increased donations each year. How do you continue to use the tax credit fundraising tool effectively and avoid any circumstance that may diminish its value?

NAP BUDGET PAGE - All Projects

Budget Category – Provide a detailed breakdown of expenses, showing amounts to be funded by NAP and amounts to be funded by other sources. See pages 12-14.	NAP Budget	Amount from Other Sources	Total Projected Cost*
Salaries			$ -
Contract			
Travel			
Equipment			
Supplies			
Building Space			
Construction			
Property Acquisition			
Other Costs			
GRAND TOTAL	$ -	$ -	$ -
Credit Eligiblity ☐ 50% ☐ 70%	Credit Amount:	Number served during project period:	

*The Total Project Cost column should reflect all budget expenses necessary to implement the project, listing the total cost of each line item. For service delivery projects, the Department actively seeks to apply NAP funds to direct care and direct program expenses. NAP funding for administrative salaries and general overhead expenses should be limited.

CURRENT MEMBERS OF THE BOARD, COUNCIL OR COMMISSION
ATTACHMENT A

List all members. DED staff may contact one or more Board member to discuss their role on the Board, their general level of support for the project, and knowledge of this application. Make copies of this form if necessary.

BOARD CHAIR/PRESIDENT	DAY PHONE	EMAIL ADDRESS
RESIDENT OF PROJECT AREA? ❑ YES ❑ NO	OCCUPATION	
MAILING ADDRESS	BOARD TERM (From <u>mo./yr.</u> to <u>mo./yr.</u>)	
NAME	DAY PHONE	
BOARD POSITION	OCCUPATION	
RESIDENT OF PROJECT AREA? ❑ YES ❑ NO	BOARD TERM (From <u>mo./yr.</u> to <u>mo./yr.</u>)	
NAME	DAY PHONE	
BOARD POSITION	OCCUPATION	
RESIDENT OF PROJECT AREA? ❑ YES ❑ NO	CURRENT BOARD TERM (From <u>mo./yr.</u> to <u>mo./yr.</u>)	
NAME	DAY PHONE	
BOARD POSITION	OCCUPATION	
RESIDENT OF PROJECT AREA? ❑ YES ❑ NO	CURRENT BOARD TERM (From <u>mo./yr.</u> to <u>mo./yr.</u>)	
NAME	DAY PHONE	
BOARD POSITION	OCCUPATION	
RESIDENT OF PROJECT AREA? ❑ YES ❑ NO	CURRENT BOARD TERM (From <u>mo./yr.</u> to <u>mo./yr.</u>)	
NAME	DAY PHONE	
BOARD POSITION	OCCUPATION	
RESIDENT OF PROJECT AREA? ❑ YES ❑ NO	CURRENT BOARD TERM (From <u>mo./yr.</u> to <u>mo./yr.</u>)	
NAME	DAY PHONE	
BOARD POSITION	OCCUPATION	
RESIDENT OF PROJECT AREA? ❑ YES ❑ NO	CURRENT BOARD TERM (From <u>mo./yr.</u> to <u>mo./yr.</u>)	

Revised 03/2018

LETTERS OF SUPPORT
ATTACHMENT B

A minimum of **two** letters of support must be submitted. NAP staff may contact the persons listed below to verify their support for the project. Letters of support will only be accepted as part of the application at the time of submittal.

Instructions:

1. Letters of support from both a State Representative and a State Senator are required.

   - For a **capital campaign**, the letters should be from the Representative and Senator representing the district where the acquisition/construction/renovation will be conducted.

   - For **service delivery** projects, letters should be provided from the Senator and Representative representing the district in which the applicant's services occur; or in the case of multiple service locations, from the district where the applicant's headquarters is located.

   To identify your legislators, use the Missouri Senate's "Legislator Lookup" search at:
   http://www.senate.mo.gov/LegisLookup/Default.aspx

2. Letters should refer specifically to the proposed project.

3. Letters must be dated within six (6) months prior to submission of the application.

4. **Optional** - Applicants may also provide letters from individuals, organizations, or institutions identified in the proposal as support or partner agencies that assist in outcome attainment. Letters of support from members of the applicant's Board, staff, or volunteers are not acceptable.

Name	Organization	Title or Position

Revised 03/2018

LOCAL GOVERNMENT CERTIFICATION
ATTACHMENT C

By law, NAP projects are required to obtain local government endorsement. DED's Local Government Certification form must be used for this purpose. **Applications submitted without a local government certification cannot be approved.**

NAP applicants will complete and submit the Local Government Certification form to the county/city in which the project will take place. If the proposed project involves the provision of services in more than one county or municipality, the certification should come from the municipality where the primary service site is located. If the project does not take place in an incorporated area, certification should be obtained from the presiding body of the county. If the project will take place in any of the following locations, certification must be obtained from the designated contact.

Cape Girardeau
Molly Mehner, Deputy City Manager
401 Independence
Cape Girardeau, MO 63703
(573) 339-6320

Greene County
Bob Cirtin, Presiding Commissioner
1433 N. Robberson, 10th Floor
Springfield, MO 65802
(417) 868-4112

Columbia
Mike Matthes, City Manager
701 E. Broadway, Box 6015
Columbia, MO 65205
(573) 874-7214

Springfield
Mary Lilly Smith, Director, Planning & Dev.
840 Boonville Ave, 2nd Floor
Springfield, MO 65802
(417) 864-1031

Independence
Zachary Walker, City Manager
111 E. Maple
Independence, MO 64050
(816) 325-7170

St. Joseph
Gerald McCush, Community Dev. Mgr.
1100 Frederick Ave, Rm 101A
St. Joseph, MO 64501
(816) 271-4646

St. Louis County
Jim Holtzman, Dept. of Planning
41 South Central, 5th Floor
Clayton, MO 63105
(314) 615-4140

St. Louis City
Don Roe, Director, Planning & Urban Design
1520 Market Street, Suite 2000
St. Louis, MO 63103
(314) 657-3848

St. Charles County
Jennifer George, Assistant Director Administration
100 North 3rd Street
St. Charles, MO 63301
(636) 949-7520

*Kansas City
Coleman McClain, Neighborhood & Housing Services
City Hall
Kansas City, MO 64106
(816) 513-3008 (direct line)

*Attention Kansas City Applicants: The city of Kansas City requires the submission of additional information with the required NAP form. You must contact Coleman McClain to obtain information about the certification process and the list of supplemental questions.

NAP ATTACHMENT C
LOCAL GOVERNMENT CERTIFICATION

Instructions
Law 32.110 RSMo requires a local government certification for all projects submitted to the Department of Economic Development, Neighborhood Assistance Program (NAP). All applicants, as part of their proposal, must submit this completed form. Applications submitted without a completed Local Government Certification form will be denied. NAP applicants must complete Sections I, II, III, and IV of this form before forwarding to the appropriate government authority (see page 48). Local governments must complete section V, and may, at their discretion, require supporting documentation and/or a copy of the actual NAP proposal as a condition for their endorsement. Such requests should be directed to the applicant, NOT the Department of Economic Development. This form does not signify approval of a proposed NAP project by the local unit of government. This form serves only to certify that the proposed NAP project is not in conflict with the existing plans and ordinances approved, enacted, or enforced by the local unit of government.

Section I. Applicant Information	
LEGAL NAME OF APPLICANT	
OFFICIAL AGENCY ADDRESS	
NAP CONTACT PERSON/TITLE	
DAYTIME TELEPHONE NUMBER	EMAIL ADDRESS

Section II. Description of the Proposed Project
Briefly summarize the project you intend to submit for participation in NAP. Describe the goals and NAP program outcomes you plan to achieve as well as the function and operation of the project.

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Section III. Service Area and Populations Served

Briefly define and describe the geographic service area of this project and the targeted populations the project will serve. Attach a map showing the boundaries of the service area and project location.

Section IV. Statement of Intent & Notarization

Statement of Intent to submit the application to the Missouri Department of Economic Development, NAP: I have examined this request in its entirety and believe it to be an accurate description of the project to be submitted by this organization for the purpose of securing support through the Neighborhood Assistance Program administered by the Missouri DED. In the event that the proposed project is significantly altered and information contained herein is no longer accurate, I understand that a new Local Government Certification will be required.

MUST BE SIGNED IN PRESENCE OF NOTARY	Signature of Executive Director ➔	Date

STATE OF_____

COUNTY OF _____   ss.

On this ____ day of _____in the year 20____ before me, _____, a Notary Public in and for said state,

personally appeared _____[name of Corporate Officer/ Member], _____ [Official Title],

_____[Name of Corporation/ Agency], known to me to be the person who executed the within Agreement in behalf

of said company and acknowledged to me that he or she executed the same for the purposes therein stated.

_____

Notary Public

My commission expires _____

Section V. Local Government Certification

On behalf of the following unit of government:_____,
                                                                            (Community)

I, _____,   have determined, based upon the information presented herein, that the project**:**

❏ **does not** ❏ **does** appear to conflict with the existing plans and ordinances approved, enacted, or enforced by this body.

NAME		TITLE	
AGENCY		TELEPHONE	EMAIL
SIGNATURE ➔		DATE	

NAP ATTACHMENT D: SITE CONTROL

Your organization must be able to demonstrate existing control, or the ability to secure control, of the site where the proposed capital campaign project will take place. Attach the required site control documents to this page.

☐ 1. Evidence that the applicant owns the property (Original title not required)

    ☐ Mortgage Insurance Statement
    ☐ Title or Warranty Deed

☐ 2. A copy of an executed lease agreement. The lease term must extend for the duration of the **project period plus five (5) years** after the project end date. A draft document will not satisfy this requirement.

☐ 3. A legal option to purchase/lease the property from the present owner. The option language should stipulate the terms of the purchase or lease (timing, price, etc), but may stipulate various options if dependent on the approval of NAP credits. A draft document will not satisfy this requirement.

☐ 4. A contingency contract with the current owner stipulating that the property will either be contributed outright or sold to the organization at a discount if, and when, the project receives NAP approval. The contingency contract must include the agreed upon purchase or donation price, the offer time frame, and any other relevant terms. The document must be signed by both parties and notarized. A draft document will not satisfy this requirement.

    - If credits are to be awarded on the amount of discount offered by the owner, the value of the property must be based on the lesser of the two qualified independent appraisals (i.e. conducted by state-certified or state-licensed appraisers.) Only one appraisal is required if it is either commercial property appraised at less than $50,000, or residential property appraised at less than $25,000.

For property acquisition using NAP donations or credits, the following documentation must be submitted to DED prior to closing:

- One or two qualified independent appraisals--The value of the property must be based on the lesser of the two appraisals conducted by state-certified or state-licensed appraisers

- A Phase I Environmental Site Assessment is required on all non-residential real estate contributed for NAP credit or purchased using NAP contributions. (Does not pertain to property that will be leased.)

_____

Building Usage
Will any other entities/organizations/tenants occupy any portion of the facility?   Yes ☐   No ☐

If yes, use the space below to identify the tenant, indicate if they are involved in the implementation of the project, and to describe the services provided or business conducted by the tenant. Indicate the square footage or percent of facility space that will be utilized by other organizations. The nonprofit organization administering the NAP project must occupy at least 50% of the building space.

Revised 03/2018

NAP ATTACHMENT E: CERTIFICATION

I, the undersigned, acting on behalf of the Applicant named below, hereby certify and agree to the following:

1. The information submitted by the Applicant to DED in connection with the Project is true and correct and such information is consistent with documents provided to lenders, other government programs, or investors. The Applicant hereby authorizes DED to verify such information from any source;
2. Neither the Applicant, nor any person actively engaged in the management of the Applicant:
    a) Has committed a felony, is currently under indictment for a felony, or is currently on parole or probation;
    b) Is delinquent with respect to any non-protested federal, state or local taxes or fees;
    c) Has filed (or is about to file) for bankruptcy, unless otherwise disclosed to DED; or
    d) Has failed to fulfill any material obligation under any other state or federal program;
3. There are no pending or threatened liens, judgments, or material litigation against the Applicant or any person identified on the application which is likely to have a material impact on the Applicant's viability;
4. Neither the operations of the Project itself nor the receipt of incentives for the Project would violate any existing agreement;
5. The Applicant has obtained or is capable of obtaining all necessary federal, state and local permits and licenses for the Project;
6. I certify that the applicant does NOT knowingly employ any person who is an unauthorized alien and that the applicant has complied with federal law (8 U.S.C. § 1324a) requiring the examination of an appropriate document or documents to verify that each individual is not an unauthorized alien;
7. I certify that the applicant is enrolled and will participate in a federal work authorization program as defined in Section 285.525(6), RSMo., with respect to employees working in connection with the activities that qualify applicant for this program. I certify that the applicant will maintain and, upon request, provide the Department of Economic Development documentation demonstrating applicant's participation in a federal work authorization program with respect to employees working in connection with the activities that qualify applicant for this program;
8. I certify that the Applicant shall include in any contract it enters with a subcontractor in connection with the activities that qualify applicant for this program, an affirmative statement from the subcontractor that such subcontractor is not knowingly in violation of Section 285.530.1, RSMo, and shall not be in violation during the length of the contract. In addition the Applicant will receive a sworn affidavit from the subcontractor under the penalty of perjury, attesting that the subcontractor's employees are lawfully present in the United States. I certify that the Applicant will maintain and provide the Department of Economic Development and Department of Revenue access to documentation demonstrating compliance with this requirement;
9. I understand that, pursuant to section 285.530.5, RSMo, a general contractor or subcontractor of any tier shall not be liable under section 285.525 to 285.550 when such general contractor or subcontractor contracts with its direct subcontractor who violates section 285.530.1, if the contract binding the contractor and subcontractor affirmatively states that the direct subcontractor is not knowingly in violation of section 285.530.1 and shall not henceforth be in such violation and the contractor or subcontractor receives a sworn affidavit under the penalty of perjury attesting to the fact that the direct subcontractor's employees are lawfully present in the United States;
10. I understand that if the applicant is found to have employed an unauthorized alien, applicant maybe subject to penalties pursuant to Sections 135.815, 285.025, and 285.535, RSMo;
11. I understand that if the applicant is found to have employed an unauthorized alien in Missouri and did not, for that employee, examine the document(s) required by federal law, the applicant shall be ineligible for any state-administered or subsidized tax credit, tax abatement or loan for a period of five years following any such finding;
12. I attest that I have read and understand the Neighborhood Assistance Program guidelines;
13. I will inform DED if, at any time before project completion, there is any change to any of the certifications made herein;
14. I hereby agree to allow representatives of the Department of Economic Development (DED), Department of Revenue, or either of their designated representatives, access to the property and applicable records as may be necessary for the administration of this program; and,
15. I certify under penalties of perjury that the above statements and information contained in the application and attachments are complete, true, and correct to the best of my knowledge and belief.

I certify that I am a Corporate Officer/Member of the Applicant and have the proper authority to execute this document on behalf of the Applicant. I am authorized to make the statement of affirmation contained herein. I also realize that failure to disclose material information regarding the Applicant, any owners or individuals engaged in the management of the Applicant, or other facts may result in criminal prosecution.

Applicant Signature	Printed/Typed Name	Title	Date

STATE OF_____)

COUNTY OF _____)   ss.

On this ____ day of _____ in the year 20____ before me, _____, a Notary Public in and for said state, personally

appeared _____ [name of Corporate Officer/ Member], _____ [Official Title],

_____ [Name of Corporation/ Agency], known to me to be the person who executed the within

Agreement on behalf of said company and acknowledged to me that he or she executed the same for the purposes therein stated.

_____

Notary Public

My commission expires _____

---

[1]If more than one representative signs use a copy of this page for each signatory.

NAP APPLICATION CHECKLIST

Review your application to ensure all required information and attachments are included. Failure to submit required documentation may result in the disqualification. A complete proposal consists of **one** copy of each of the following:

Application

☐ Initial application pages (all projects) – pages 24-26

☐ Responses to questions for:

- **Community Services, Crime Prevention, Education, and Jobs Training Capital Campaign;**
- **Community Services, Crime Prevention, Education, and Jobs Training Service Delivery**;
- **Physical Revitalization Capital Campaign**; OR,
- **Physical Revitalization Service Delivery**

☐ NAP Budget Page

   ☐ Attach bids/estimates for construction projects

☐ A complete copy of the **Articles of Incorporation** and **501(c)(3) tax exempt letter** from the IRS

Attachment A: Current Board Members

☐ A copy of the form provided

Attachment B: Letters of Support

☐ Complete and use the form provided

☐ Two letters of support required – State Senator and State Representative

Attachment C: Local Government Certification

☐ (Use form provided) - Executive Director's original signature and notary required. Make sure the **"does not"** box was checked by local government official.

☐ Map of service area and project location

Attachment D: Site Control - Only required for acquisition, construction and/or renovation.

Include: ☐ a copy of the form provided

          ☐ a copy of the required supporting documentation

          ☐ floor plans

Attachment E: Certification

☐ Use form provided - Must have the Executive Director's original signature and notary stamp.

Attachment F: E-Verify

☐ Copy of page 1 of the E-Verify MOU Memorandum of Understanding, in addition to the company summary and signature page.

Faith Based Organizations

☐ Attach a description of religious activities/services offered and participant alternatives