

# RICHLAND COUNTY GRANT WORKSHOP

November 2024

*Matiah Pough, Grant Manager - Office of Budget & Grants Management*



# What to Expect

- ✓ **Pre Award:** Grant Programs and Eligibility
- ✓ Required Documentation
- ✓ Eligible Program Expenses
- ✓ **Post Award:** Payment & Reporting Procedures
- ✓ ZoomGrants Application Walkthrough
- ✓ Tips & Timelines



# Major Grant Programs

Richland County has three major programs to distribute grant funds:

- **Hospitality Tax Program (H-Tax):** funded through the 2% Tax on prepared foods:
  - Program and events that draw tourists into the unincorporated areas of the County.
  - These programs must take place in areas where Richland County collects H-Taxes.
  - These programs must draw tourists who will eat at restaurants and bars.
- **Accommodation Tax Program (A-Tax):** tax-funded through surcharges on hotel/motel rooms:
  - Programs and events that draw tourists into Richland County who will generate overnight hotel sales.
- **Community Impact Grant Program:** funded through Richland County General Fund:
  - Service based projects that help the underserved populations of Richland County.
  - Programs must focus on key impact areas, as determined by Council annually.

# PRE-AWARD

# Who is Eligible?

- Non-profit organizations in existence at least one year before requesting funds.
- Religious organizations may receive funding:
  - County may not sponsor nor provide financial support to a religious organization in a manner that would actively involve it in a religious activity. Funds must be solely used for secular purposes without a goal of promoting the advancement of religion.
- Richland County will not award grant funds to individuals, fraternal organizations, or groups that endorse/support political campaigns.
- Grantee organizations must not re-grant County funds to other organizations
  - All funds must be spent on direct program expenditures by the organization granted the allocation
- All organizations that use a fiscal agent to administer grant funded projects through the H-Tax Program can only do so for one fiscal year

# Project Eligibility Criteria: H-Tax

- At least \$500,000 in funding available
- Projects to be funded by Hospitality Tax funds must result in *the attraction of tourists to Richland County*
- Priority will be given to projects that:
  - Promote dining at restaurants, cafeterias, and other eating and drinking establishments where Richland County collects Hospitality Tax (unincorporated Richland County, Town of Eastover and the Richland County portions of the Town of Irmo)
  - Promote and highlight unincorporated Richland County's historic and cultural venues, recreational facilities and events and the uniqueness and flavor of the local community.

# Project Eligibility Criteria: A-Tax

- Priority will be given to organizations and/or projects that have the following characteristics:
  - Will generate overnight stay(s) in Richland County's lodging facilities;
  - Will promote and highlight Richland County's historic and cultural venues; recreational facilities and events; and the uniqueness and flavor of the local community.
- A-Tax funds *must* be used to attract and provide for tourists, and *must be spent on tourism-related expenditures*.

The committee:

- Defines “travel” and “tourism” as the action and activities of people taking trips outside their home communities for any purpose, except daily commuting to and from work.
- Looks favorably upon projects that generate new hotel room nights sold that replenish the A-Tax fund.

# Project Eligibility Criteria: CIG

- Up to forty percent (\$705,600) of the annual County allocation shall be distributed based upon competitive grant applications.
  - Organizations can apply for funding up to \$50,000 for only one project.
  - Projects that focus on multiple impact areas are only eligible for one grant. Organizations may only submit one application annually.
  
- Proposed program/project must address one of the following:
  - The activity meets service-type activities outlined in the organization's mission, long-range plans, goals and objectives
  - The activity, in whole or in part, provides opportunities for underserved populations in Richland County.
  - The activity provides solutions by way of systems or approaches that can prevent, mitigate or resolve individual, family, or community problems as outlined in the categories of the application.

# Key Impact Areas: FY26 CIG

1. Programs to promote home ownership through education & financial planning
2. Youth activities to reduce community violence, improve safety, and develop workforce skills
3. Programs to create sustainable childcare for working parents to further workforce development
4. Food Insecurity
5. Veterans assistance to improve health and wellness

# Required Documentation: A-Tax and H-Tax

- IRS Determination Letter indicating 501 c (3), nonprofit charitable status
- Proof of **current** registration as a charity with the SC Secretary of State- *must have been completed in the last year*
- List of organization's **current** Board Members/Directors
- Recent 990 tax form or if you file a 990 post-card, you may attach a financial report showing financial status
- **Current** Richland County business license or business license assessment survey form- *must have been completed in the last year*
- Organization's current W-9

# Required Documentation: CIG

- Current organization operating budget for the last **two** years
- IRS Determination Letter indicating 501 c (3), nonprofit charitable status
- Proof of **current** registration as a charity with the SCSOS- *must have been completed in the last year*
- List of organization's **current** Board Members/Directors
- Recent 990 tax form or 990 post-card & financial statement
- **Current** Richland County business license or business license assessment survey form- *must have been completed in the last year*
- Proof of Insurance: W/C and/or General Liability
- Organization's current W-9
- Letter(s) of support from Community Collaboration Partner(s)



State of South Carolina  
Office of the Secretary of State  
The Honorable Mark Hammond

8/13/2020

Columbia, Inc.

2<sup>nd</sup> St.  
Columbia, SC 29205

RE: Registration Confirmation

Charity Public ID: P

Dear :

This letter confirms that the Secretary of State's Office has received and accepted your Registration, therefore, your charitable organization is in compliance with the registration requirement of the "South Carolina Solicitation of Charitable Funds Act." The registration of your charitable organization will expire on 11/15/2021.

If any of the information on your Registration form changes throughout the course of the year, please contact our office to make updates. It is important that this information remain updated so that our office can keep you informed of any changes that may affect your charitable organization.

If you have not yet filed your annual financial report or an extension for the annual financial report, the annual financial report is still due 4½ months after the close of your fiscal year.

- Annual financial reports must either be submitted on the Internal Revenue Service Form 990 or 990-EZ or the Secretary of State's Annual Financial Report Form.
- If you wish to extend the filing of that form with us, please submit a written request by email or fax to our office using the contact information below. Failure to submit the annual financial report may result in an administrative fine of up to \$2,000.00.

If you have any questions or concerns, please visit our website at [www.sos.sc.gov](http://www.sos.sc.gov) or contact our office using the contact information below.

Sincerely,

Kimberly S. Wickersham  
Director, Division of Public Charities

SC Secretary of State Registration (example)

Richland County, Office of Budget and Grants Management

Form 990-EZ		Short Form		OMB No. 1545-0047	
Return of Organization Exempt From Income Tax		2022		Open to Public Inspection	
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)					
Do not enter social security numbers on this form, as it may be made public.					
Go to <a href="http://www.irs.gov/Form990EZ">www.irs.gov/Form990EZ</a> for instructions and the latest information.					
Department of the Treasury Internal Revenue Service					
A For the 2022 calendar year, or tax year beginning , 2022, and ending , 20					
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		C Name of organization Number and street (or P.O. box if mail is not delivered to street address) Room/suite City or town, state or province, country, and ZIP or foreign postal code		D Employer identification number E Telephone number F Group Exemption Number	
G Accounting Method: <input type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify):				H Check <input type="checkbox"/> if the organization is not required to attach Schedule B (Form 990).	
I Website:					
J Tax-exempt status (check only one) -- <input type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527					
K Form of organization: <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other:					
L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ . \$					
Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)					
Check if the organization used Schedule O to respond to any question in this Part I .					
Revenue		1 Contributions, gifts, grants, and similar amounts received . . . . . 1			
2 Program service revenue including government fees and contracts . . . . . 2		3 Membership dues and assessments . . . . . 3			
4 Investment income . . . . . 4		5a Gross amount from sale of assets other than inventory . . . . . 5a			
b Less: cost or other basis and sales expenses . . . . . 5b		5c Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a) . . . . . 5c			
6 Gaming and fundraising events:		a Gross income from gaming (attach Schedule G if greater than \$15,000) . . . . . 6a			
b Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . . . . 6b		c Less: direct expenses from gaming and fundraising events . . . . . 6c			
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) . . . . . 6d		7a Gross sales of inventory, less returns and allowances . . . . . 7a			
b Less: cost of goods sold . . . . . 7b		c Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a) . . . . . 7c			
8 Other revenue (describe in Schedule O) . . . . . 8		9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 . . . . . 9			
Expenses		10 Grants and similar amounts paid (list in Schedule O) . . . . . 10			
11 Benefits paid to or for members . . . . . 11		12 Salaries, other compensation, and employee benefits . . . . . 12			
13 Professional fees and other payments to independent contractors . . . . . 13		14 Occupancy, rent, utilities, and maintenance . . . . . 14			
15 Printing, publications, postage, and shipping . . . . . 15		16 Other expenses (describe in Schedule O) . . . . . 16			
17 Total expenses. Add lines 10 through 16 . . . . . 17		18 Excess or (deficit) for the year (subtract line 17 from line 9) . . . . . 18			
Net Assets		19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) . . . . . 19			
20 Other changes in net assets or fund balances (explain in Schedule O) . . . . . 20		21 Net assets or fund balances at end of year. Combine lines 18 through 20 . . . . . 21			

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 106421 Form 990-EZ (2022)

990 EZ Tax Form (example)



**RICHLAND COUNTY GOVERNMENT  
COMMUNITY PLANNING & DEVELOPMENT  
BUSINESS SERVICE CENTER**

2020 Hampton Street, Suite 1050, P.O. Box 192, Columbia SC 29202  
T 803-576-2287 | F 803-576-2289 | TDD 803-576-2045  
bsc@richlandcountysc.gov | richlandcountysc.gov/bsc



## Business License Assessment Survey

- This form is intended to help the County better understand where and how your business operates, to assess whether or not a Richland County business license is needed. If a license is needed, our office will work with you to facilitate compliance.
- If you already have a Richland County business license, please provide the number: \_\_\_\_\_.  
If your business does not currently have a Richland County business license, please be aware a license may or may not be needed.

### Business Information:

- Corporate Business Name: \_\_\_\_\_
- Name as seen by the public: \_\_\_\_\_
- Local Business Phone: \_\_\_\_\_ Open Date: \_\_\_\_\_
- Specific business activity: \_\_\_\_\_
- 2022 NAICS Code: \_\_\_\_\_ (See <http://www.census.gov/naics/> for help)
- Description of your business: \_\_\_\_\_

### Physical Location Information:

- Business Location (Street, City, State, Zip): \_\_\_\_\_
- If the physical address is not in the County's unincorporated areas, how often does your business go into – or expect to go into – the non-city areas of Richland County:  
Approximately: \_\_\_\_\_ times per (circle one) week month year
- Best person to contact about license requirements: \_\_\_\_\_
- Title: \_\_\_\_\_ Work #: \_\_\_\_\_
- Cell #: \_\_\_\_\_ E-mail: \_\_\_\_\_
- Area where business has been and/or will be conducted by the business: (check all that apply)
  - ☐ Arcadia Lakes ☐ Cayce ☐ Irmo
  - ☐ Blythewood ☐ Forest Acres ☐ non-city limits in Richland County
  - ☐ Columbia ☐ Eastover ☐ outside Richland County entirely

### Owner/Principal Information:

- Owner/Principal(s) Name (no corporate names): \_\_\_\_\_
- Home Address: \_\_\_\_\_
- Mailing Address: \_\_\_\_\_
- Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_
- E-mail: \_\_\_\_\_

### Applicant Certification:

Upon penalties of perjury, I hereby certify and attest to the following:

- All information provided here is true and correct to the best of my knowledge.
- If this location or business activity of this business changes or expands at any time in the future, I will notify the Business Service Center and complete a new Business License Assessment Survey.
- I understand that, if my business is located in or conducts business in the unincorporated areas of Richland County, **I am responsible for complying with all County business requirements**, found at <http://www.richlandonline.com/Government/Ordinances>. I also understand the consequences for failing to comply with these requirements.
- I understand that the Business License Determination shown below is valid until either (1) the information contained of this form changes, or (2) May 1<sup>st</sup>, the date on which all business licenses must be renewed, whichever comes first.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

### Business Service Center Staff Only Business License Determination

☐ Tax district of physical location: \_\_\_\_\_ OR ☐ located outside of Richland County

Based on the information provided above, certified by the applicant as accurate, this business:

- ☐ **DOES NOT** need a Richland County business license at this time  
- Business licenses are not required to submit proposals, bids, job quotes, or applications.
- ☐ **DOES** need a Richland County business license at this time  
- Business license are required if the business is awarded a County bid or job to do work in the non-city areas of Richland County.

Business License #: \_\_\_\_\_ Year: \_\_\_\_\_

Status of County Business License: ☐ Pending (P) ☐ Paid (P) ☐ Issued (I)

**All County business license expire on April 30<sup>th</sup> of each year.**

The License Determination above is valid until: (1) the information on this form changes, or (2) May 1<sup>st</sup>, the date by which all licenses must be renewed, whichever comes first.

Signature of BSC Staff: \_\_\_\_\_ Title: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Revised: 11/18/2022

Page 2 of 2

Efficiency · Effectiveness · Equity · Integrity



# Eligible Expenditures: Hospitality Tax

- Funds must be used on the following items per SC Code of Laws SECTION 6-1-730:
  - Advertising/Promotions/Marketing (including designing, printing, postage for items mailed to attract tourists).
    - At least 70% of marketing expenses must be paid to advertise outside of Richland County.
  - Security/Emergency Services (Fire Marshalls, police, sheriff deputies, etc.).
  - Entertainment/Speakers/Guest Artist Instructor
    - Entertainment expenses should be no more than 50% of the total requested amount of the grant.
  - Venue fees or rentals.
  - Transportation or accommodations.
  - Staging or fencing.
  - 20% of operational and maintenance of tourism related buildings and cultural, recreational, or historic facilities.

# Eligible Expenditures: Accommodations Tax

- Funds must be used on the following items per Title Six (6-4-5) of SC State Law:
  - Advertising and promotion of tourism so as to develop and increase tourist attendance through the generation of publicity.
  - Promotion of the arts and cultural events.
  - Construction, maintenance, and operation of facilities for civic and cultural activities including construction and maintenance of access and other nearby roads and utilities for the facilities.
  - The criminal justice system, law enforcement, fire protection, solid waste collection, and health facilities when required to serve tourists and tourist facilities.
  - Public facilities such as restrooms, dressing rooms, parks, and parking lots.
  - Tourist shuttle transportation.
  - Control and repair of waterfront erosion.
  - Operating visitor information centers.

# Non-Eligible Expenditures: H-Tax and A-Tax

- Food or beverages.
- Promotional products or paraphernalia (e.g., t-shirts, cups, trophies, awards, wristbands, prizes, fans...etc.)
- Insurance or licenses.
- Invoices for expenditures incurred prior to or after the current grant period.
- Salaries for positions other than advertising, promotions, marketing, security, emergency services, or operations and maintenance (as outlined under H-Tax Guidelines- not eligible under A-Tax).
- Decorations for events such as event supplies, holiday ornaments and accessories.
- Gift cards and cash payments.
- Signage and banners used at your event/directional signage.
- Event programs.

# Non-Eligible Expenditures: CIG

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

# POST-AWARD

# Payment Procedures

- Up to 75% of the allocated funding can be provided upfront:
  - The remaining 25% or the balance of the allocation will be provided once a **Final Report** is submitted, reviewed and approved by the Grants Manager.
- Organizations requesting allocated funding upfront must include price quotes for the planned expenditures:
  - All invoices, quotes and proofs of payment must equate to the amount being requested and approved upon review by the Grants Manager.
- Payments will **not** be processed until all required information is submitted to the Budget & Grants Office:
  - Signed grant agreement required.
  - Required information includes the completed payment request form, a W-9 form, a detailed list of expenditures and a current balance sheet for the organization.
- Payments will be processed within **30 days** of request.\*

# The Payment Request Form



## Hospitality Tax Grant Payment Request Form

Organization: \_\_\_\_\_

Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Amount Requested\*: \_\_\_\_\_

\* Per Richland County Policy, up to 75% of the allocated funding will be provided upfront. The remaining 25% or the balance of the allocated will be provided once a Mid-Year report is submitted, reviewed and approved by the Grants Manager.

Budget Item	Amount Approved	Amount Previously Drawn	Amount Requested this Draw	Remaining Balance
Total Amount Requested:			\$	

### REQUIRED ATTACHMENTS (your payment will not be processed until the following documents are received)

1. List of Grant Expenses - Please attach an itemized list of expenditures. The total should match the total amount of funds you are requesting. The list should include vendor name, amount and expense category (Entertainment, Marketing or Security).

2. A current balance sheet, which is defined as a financial "picture" of a company at a given date in time that lists a nonprofit's assets, liabilities, and the difference between the two, which is the nonprofit's equity, or net worth. It can also be defined as an itemized statement which lists the total assets and the total liabilities of a given business to portray its net worth at a given moment of time.

For organizations who received a FY22 H-Tax Grant, Richland County must have a completed final report form for your 2021-2022 projects/programs on file prior to releasing FY23 funds.

### ORGANIZATION SIGNATURE:

Provide signature of the Authorizing Official within organization, verifying accuracy of above statements and attachments.

Name \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

For questions, please call Matiah Pough, Grants Manager at 803.576.5459.

Richland County Budget and Grants Management P.O. Box 152 Columbia, SC 29202 Fax: 803.576.2236 Email: [grantsmgr@richlandcountysc.gov](mailto:grantsmgr@richlandcountysc.gov)



# Procurement Requirements for H-Tax

Only affects all organizations receiving \$50,000 or more

- For Invoices \$1,499 or less
  - No extra documents
- For Invoices \$1,500 to \$14,999
  - Three Written Quotes
- For Invoices \$15,000 to \$100,000
  - Requires a formal solicitation which must be publically advertised
  - The solicitation, whether an Invitation for Bid (IFB), Request for Proposal (RFP), Request for Qualifications (RFQ), or any other type of bidding method must allow for a minimum advertising time of 10 days before the solicitation can be formally opened

# Reporting Requirements: A-Tax and H-Tax

- **Mid-Year Financial Report**

- Due January 31, 2026
- Must submit an itemized list of all expenses and copies of invoices/proof of payment for all grant activity between July 1 and December 31, 2025.
- To be exempt, organizations must submit a completed final report prior to January 31, 2026.
- Note on the report if no activity has taken place prior to December 31, 2025.

- **Final Report**

- Due no later than July 31, 2026
- Must submit copies of all invoices and proof of payment for all funds expended through this grant from January 1 – June 30, 2026 (only if full a Mid-Year Report was submitted)
- Attach all related marketing samples that include acknowledgement of Richland County support.

**No payment will be remitted until reporting requirements have been met and approved.**

# Reporting Requirements: CIG

## ▪ Quarterly Financial Reports

- Due October 31, 2025 [Q1] - January 31, 2026 [Q2] – April 30, 2026 [Q3]
- Must submit an itemized list of all expenses and copies of invoices/proof of payment for all grant activity during the most recent quarter of the grant period
- To be exempt, organizations must submit a completed final report prior to the upcoming quarter's due date.
- Note on the report if no activity has taken place prior to that quarter's end date.


## ▪ Final Report

- Due no later than July 31, 2026
- Must submit copies of all invoices and proof of payment for all funds expended through this grant from July 1, 2025 – June 30, 2026
- Attach all related marketing samples that include acknowledgement of Richland County support.

- Must be compliant with timely quarterly reporting in all quarters to be eligible for funding in a following fiscal year.

**No payment will be remitted until reporting requirements have been met and approved.**

# The Report Form

**Community Impact Grant Quarterly Financial Report**  
**Due: October 31, 2024** - for grant funds expended July 1 – September 30, 2024  
**Due: January 31, 2025** - for grant funds expended October 1 – December 31, 2024  
**Due: April 30, 2025** – for grant funds expended January 1- March 31, 2024

Organization:

Contact:

Phone:  Email:

**Report Notes:**

- Agencies receiving FY25 CIG funds must complete and submit this form even if no FY25 CIG funds were spent prior to the quarterly end date outlined above.
- If your program/event ended prior to the current quarter's reporting date, you must submit a Community Impact Grant Final Report in lieu of the Quarterly Report.

**CHECK ONE:**  
☐ 1<sup>st</sup> Quarter (July, August, September)  
☐ 2<sup>nd</sup> Quarter (October, November, December)  
☐ 3<sup>rd</sup> Quarter (January, February, March)

**FY25 COMMUNITY IMPACT GRANT QUARTERLY FINANCIAL ACTIVITY**  
\$  Amount of FY25 CIG Grant funds spent in the most recent quarter. **This number must equal the total of amount of expenses listed on your itemized list of expenditures that is a required attachment to this report.**  
\$  Amount of FY25 CIG Grant funds requested from Richland County in the most recent quarter. Reminder that all County grant funds must be expended and requested by June 30, 2025.

**REQUIRED ATTACHMENTS**  
☐ **Grant Expenses List** - Please attach an **itemized list of grant expenditures** that includes vendor name, amount, expense purpose, and date paid. Grantees must submit an itemized list of all Community Impact Grant expenses from the most recent quarter.  
☐ **Copies of valid invoices and proof of payment for each item in the itemized Community Impact Grant Expenditure list.** Proof of payment is a copy of a cancelled check, bank statement showing a cleared check or credit card receipt. All grant expenses must tie to expenses outlined in the application budget.  
Failure to produce completed, accurate reports may result in withholding of future grant allocations.

**ORGANIZATION SIGNATURE:**  
Provide signature of the Authorizing Official within organization, verifying accuracy of above statements and attachments.  

<input type="text"/>	<input type="text"/>
Name	Title
<input type="text"/>	<input type="text"/>
Signature	Date



# ZOOM GRANTS & TIPS

# A New Account

**Existing ZoomGrants™ Users:** Email  Password

☐ Stay logged in? (Admins and Reviewers only) **Login**

[Forgot password?](#)

[HELP](#) [RESOURCES](#) [A▲▼](#)

**Search**

**Richland County Government**

[Open Programs](#)

[How do I do this?](#)

**Open Programs**

**FY20 Richland County Hospitality Tax Program**  
Administration  
12/10/2019 - Organizations Only

**Apply** **Preview**

**New ZoomGrants™ Account**

Email

Password

First Name


Last Name

Account Type ☒ Organization

**New Account**

• Password must be 8-16 characters and contain at least 1 letter and 1 number

# Logged In



Welcome, Tyler Kirk   Not Tyler Kirk?

HELP   RESOURCES   FULL SCREEN   LOGOUT   A▲▼

My Account Home / My Applications   Account Profile

Search   Search

Richland County Government

Open Programs

Open Programs

FY20 Richland County Hospitality Tax Program

Administration


12/10/2019 - Organizations Only

Apply

Preview



# Your New Application



Welcome, Tyler Kirk   Not Tyler Kirk?

HELP   RESOURCES   FULL SCREEN   LOGOUT   ▲▼

My Account Home / My Applications   Account Profile

My Account Home > Applications >

Thank you. Your application has been created. You may get started now.

Richland County Government  
Administration

FY20 Richland County Hospitality Tax Program

Deadline 12/10/2019

OPEN PROGRAMS

 | 

FUNDING PRIORITIES

ORGANIZATION ELIGIBILITY REQUIREMENTS

PROCUREMENT NOTICE

LIBRARY

CONTACT ADMIN

ANNOUNCEMENTS 3

Funding Priorities [\[hide this\]](#)

Priority will be given to projects that:

- Promote dining at restaurants, cafeterias, and other eating and drinking establishments where Richland County collects Hospitality Tax Unincorporated Richland County
- Generate overnight stay in unincorporated Richland County's lodging facilities; and
- Promote and highlight unincorporated Richland County's historic and cultural venues, recreational facilities and events, and the uniqueness and flavor of the local community.

Organization Eligibility Requirements [\[hide this\]](#)

- Applicant organizations must have been in existence for at least one (1) year prior to requesting funds.
- Applicants must provide proof of their non-profit status or fall into one of the following categories:  
Organizations exempt from federal income tax under Section 501(C)(3) of the Internal Revenue Code and whose primary goal is to attract additional visitors through tourism promotion. The letter of exemption from the Internal Revenue Service must accompany your proposal.



# Summary Page

Summary

Application Questions

Budget

Tables

Required Attachments

Summary

(answers are saved automatically when you move to another field)

Application Title/Project Name

TestProgram 2021

Amount Requested

\$ 5,000

Applicant Information

First Name

Tyler

Last Name

Kirk

Telephone

(XXX) XXX-XXXX

Email

TylerTempGrants@gmail.com

Organization Information

(changes to this data will be reflected on all other applications for this organization)

Organization Legal Name/Entity Name

TestGrantee

Address 1

123 Not Real St.

Address 2

City

Test

State/Province

Non-US

# Application Questions

Summary

Application Questions

Budget

Tables

Required Attachments

## Application Questions

Instructions [Show/Hide](#)

1. Incorporation date

11/13/2017

Maximum characters: 255. You have 245 characters left.

2. Federal ID Number

N/A

Maximum characters: 255. You have 252 characters left.

3. Mission Statement

The TestGrantee Organization is dedicated to providing a method for answering questions on grant applications without providing the personal information of any persons, places, or things.

Maximum characters: 65000. You have 64813 characters left.

The logo for Richland County, South Carolina, is a circular seal. It features a map of South Carolina in the center, with the words "RICHLAND COUNTY" at the top and "SOUTH CAROLINA" at the bottom of the circle.

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# Project Information

## Project Information

### 4. Project Title

TestProgram 2021

Maximum characters: 255. You have 239 characters left.

### 5. Project Start Date

7/1/2020

Maximum characters: 255. You have 247 characters left.

### 6. Project End Date

1/3/2021

Maximum characters: 255. You have 247 characters left.

### 7. Total Project Cost

\$15,000

Maximum characters: 255. You have 248 characters left.

### 8. Total Amount Requested

\$5,000

Maximum characters: 255. You have 249 characters left.

## Project Information

### 3. Project Title

Maximum characters: 255. You have 255 characters left.

### 4. Which District(s) is the geographic focus of this project?

Please select all that apply, if focus is not countywide. All County wide programs must include documentation of methods for dissemination of information to the community.

- ☐ Countywide (All)
- ☐ District 1
- ☐ District 2
- ☐ District 3
- ☐ District 4
- ☐ District 5
- ☐ District 6
- ☐ District 7
- ☐ District 8
- ☐ District 9
- ☐ District 10
- ☐ District 11

### 5. Which impact area will your project primarily serve?

Must select one.

- ☐ Programs to promote home ownership through education & financial planning
- ☐ Youth activities to reduce community violence, improve safety, and develop workforce skills
- ☐ Programs to create sustainable childcare for working parents to further workforce development
- ☐ Food Insecurity
- ☐ Veterans assistance to improve health and wellness



# Project Description\*

## Project Description and Goals

### 9. Describe the project and its tourism mission

*Include a thorough, but concise description. Include who, what, when, where and why. Include information about innovative ideas, community support and partnerships. Describe coordination that has been completed or will be needed with other organizations.*

The TestGrantee Organization will host a Hospitality Day Event on 11/13/2020 in partnership with Local Cultural Organization. The event will include free entry to Local Cultural Organization's facility at 1234 Totally Real Place, as well as entertainment provided by Generic Band. This will serve to highlight Richland County's unique local artists and food.

Several Food Trucks from yet to be determined local restaurants with be invited to attend. We are currently discussing best practices with Local Restaurant Association.

Maximum characters: 65000. You have 64469 characters left.

### 10. Program Locations

*Please list the street address (full address) of all program locations that will be funded through H-Tax Grant funds. Please indicate if the program will be held on County property.*

Our event will be at 1234 Totally Real Place. We are currently Discussing the feasibility of cordoning off a section of Totally Real Place with Local Government

Maximum characters: 65000. You have 64840 characters left.



## Benefit To The Community

### 13. Project Description

*Describe your project in terms of who, when, what, why and where.*

Maximum characters: 65000. You have 65000 characters left.

## Sustainability

**14. Describe the benefit of this project to the community. Please include number of persons served, demographics of the audience served and the geographic location of those served.**

Maximum characters: 65000. You have 65000 characters left.

## Partnerships/Community Support

**15. What efforts are being made to increase the sustainability of this project/program and decrease the reliance on County Community Impact Grant funds? Please describe detailed plans to sustain the project after one year of funding.**

# Tips on Project Design

- The project description should answer the question “Why care?”
- When possible, use data and information from authoritative sources
  - Facts and research are more impactful than theories and opinions.
- **Benefit to Tourism** weighs the most in application evaluation (H-Tax)
  - Will it attract visitors, build new audiences and encourage tourism expansion? How?
  - Will it increase awareness of the County’s amenities, history, facilities, and natural environment? How?
- **Marketing/Reliable Tracking Mechanisms**
  - H- & A-Tax: Are at least 70% of the ads or other marketing expenses targeted outside the Columbia/Richland County area? How will visitors and tourists would be tracked? (surveys, wristbands, ticketing, registration, etc.)
  - CIG: How will the program will be evaluated once completed? How will your organization market its expansion of services as a result of the grant? (website, mailers, commercials- television and/or radio, etc.)
- Tell your organization’s story – Avoid using whiny language
  - Less “need/want”, more “will/intend to”

## Marketing Plan

### 19. Outline your project's marketing plan (Include how you plan to reach tourists and work with local restaurants. Also include tracking mechanism used to determine tourist attendance)

Outline your marketing, advertising and promotional plans for your program. How will you track visitors and overnight stays? What methods are you using to track all visitors and count the number of tourists?

We are going to use the new tourism funds to place ads through Facebook, interstate billboards, and radio. We plan to place radio ads through local NPR affiliate station. We are also contacting Local Regional Tourism Board for assistance in making the Test Program better know.

We will collecting attendee information via sign in sheets held by volunteers at the event. We will track meals sold by requesting that information from the food trucks that will be at the event.

Maximum characters: 65000. You have 64527 characters left.

## Performance Measurements

### 20. What performance measures will you use to determine the success of advertising and marketing efforts for this project?

Facebook and online ads can provide data regarding the number of hits an ad has generated. We will also include a field for visitors to list how they learned of the event on the sign in sheets.

Maximum characters: 65000. You have 64807 characters left.

### 21. Provide evidence of success for similar programs/events and the capacity to make this project successful.

The FY20 Test program used the exact same marketing and entertainment model. It was considered a great success.

Maximum characters: 65000. You have 64890 characters left.



Sustainability



14. Describe the benefit of this project to the community. Please include number of persons served, demographics of the audience served and the geographic location of those served.

Maximum characters: 65000. You have 65000 characters left.

Partnerships/Community Support

15. What efforts are being made to increase the sustainability of this project/program and decrease the reliance on County Community Impact Grant funds? Please describe detailed plans to sustain the project after one year of funding.

Maximum characters: 65000. You have 65000 characters left.

Outcomes

16. Describe your partnership efforts with similar organizations in Richland County for this project that assist in furthering the mission of your organization (List names of partnering organizations if applicable):

*Describe how your organization will work with others on this project.*

# Budget- Income

## Summary

### Application Questions

## Budget

## Tables

### Required Attachments

[Print Budget](#)

## Budget

(answers are saved automatically when you move to another field)

Instructions [Show/Hide](#)

### Income Sources

List the income sources for your program or project below. Include the amount requested in this application.

Item Description	Amount	Pending	Receiving
FY21 Richland County H-Tax Request	\$ 5000	\$ 5000	\$
Donations	\$ 8000	\$	\$ 8000
Assistance from Local Restaurant Associati	\$ 1000	\$	\$ 1000
Project Specific Fund Raising Events	\$ 1000	\$	\$ 1000
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	Total \$ 15000.00	Total \$ 5000.00	Total \$ 10000.00



# Budget- Expenses

**Expense Category**

List the expenses for your project below. Add expense categories in the blank lines below, if needed.

Item Description	County H-Tax Request		Other Sources	
Advertising/Marketing/Promotion/Billboards	\$	3000	\$	9500
Advertising/Marketing Related Salary	\$		\$	
Municipal Services/Security	\$	1000	\$	
Entertainment/Speakers/Guest Artists	\$	1000	\$	500
Event Rentals	\$		\$	
Supplies	\$		\$	
Consultants/Contractors	\$		\$	
	\$		\$	



# Budget Narrative

**Budget Narrative** (Discuss the items and amounts you entered above.)

Provide a detailed narrative of expenses in the H-Tax Grant Request expense column.

The majority of our request (\$3,000) will be spent purchasing radio and Facebook ads.  
\$1,000 will be spent ensuring that there is adequate security at the event from local police.  
The final \$1,000 Requested will be to hire Generic Band to perform at the Event

Maximum characters: 65000. You have 64739 characters left.

# Tips on Budget Development

- Only request what is reasonable for your organization & the project proposed
- Consider all possible income sources & expenses
  - The income chart should include confirmed and requested amounts
  - Research ahead of time to avoid rough estimates of expense items & budget padding
  - Post-award budget amendments are subject to approval
- **Reasonable Cost/Benefit Ratio** weighs most in budget evaluation
  - Does the benefit of the project (i.e. number of tourists estimated; expected revenue) exceed the cost of the project?
  - Does the budget incorporate any in-kind cost participation? Is there another confirmed source of revenue to assist with this program?
- The budget narrative should be as detailed as possible
  - Specific cost/hours for marketing personnel or contractors; List of program supplies to include quantities and purchase locations; Intended use of consultants; Anticipated speakers/entertainers
  - How will County funds be spent versus other listed income sources?

# Tables



## Organizational Funding History

Total amount contributed by Richland County (all sources):

Source	H-Tax	A-Tax	Discretionary	Other
FY19	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
FY20	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
FY21	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Total	\$ 0	\$ 0	\$ 0	\$ 0



# Required Documents

[Summary](#)[Application Questions](#)[Budget](#)[Tables](#)[Required Attachments](#)

## Required Attachments

[Instructions](#) [Show/Hide](#)

### Documents Requested \*

Required?

Uploaded Documents \*

IRS Determination Letter indicating 501 c 3, nonprofit charitable status

Required

-none-

Proof of current registration as a charity with the SC Secretary of State

Required

-none-

List of organization's current Board Members/Directors

Required

-none-

Recent 990 tax form or if you file a 990 post-card attach a financial report showing financial status

Required

-none-

Richland County business license or business license assessment survey form (this form shows that a business license is not needed for your organization)

Required

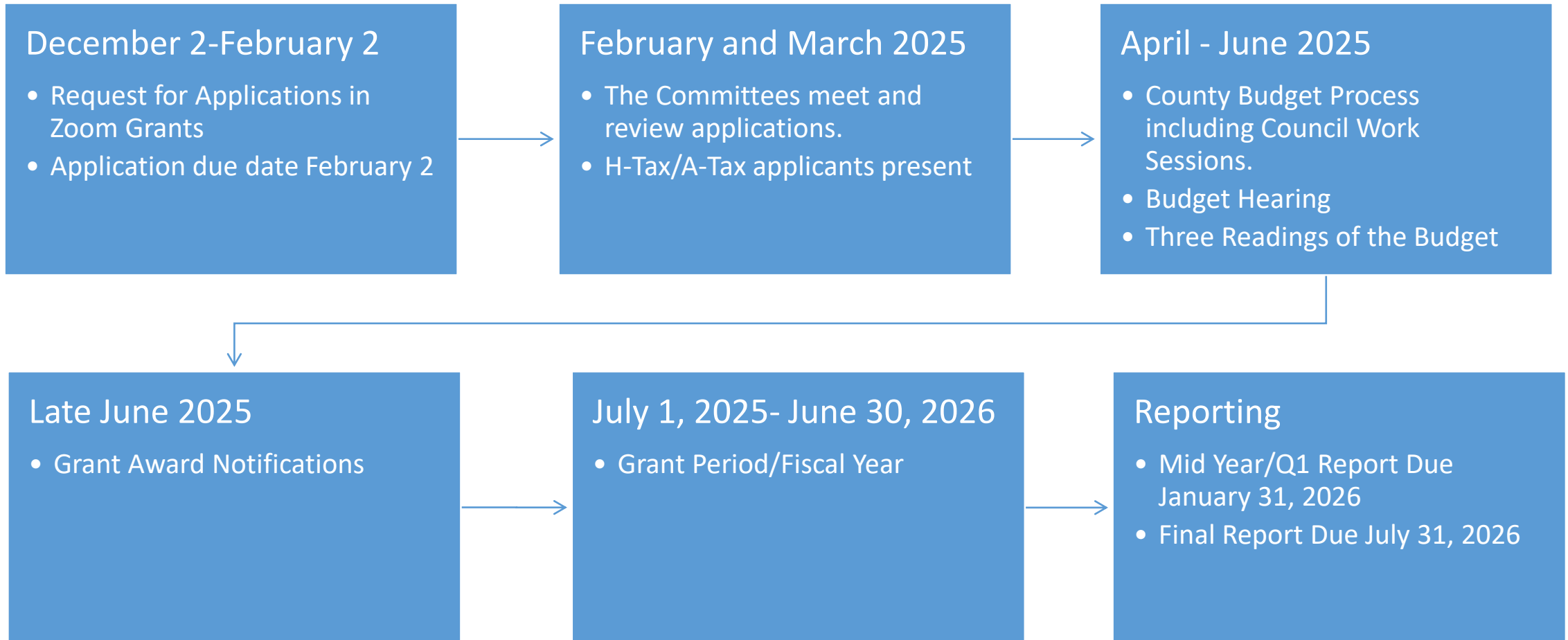
-none-

Organization W-9

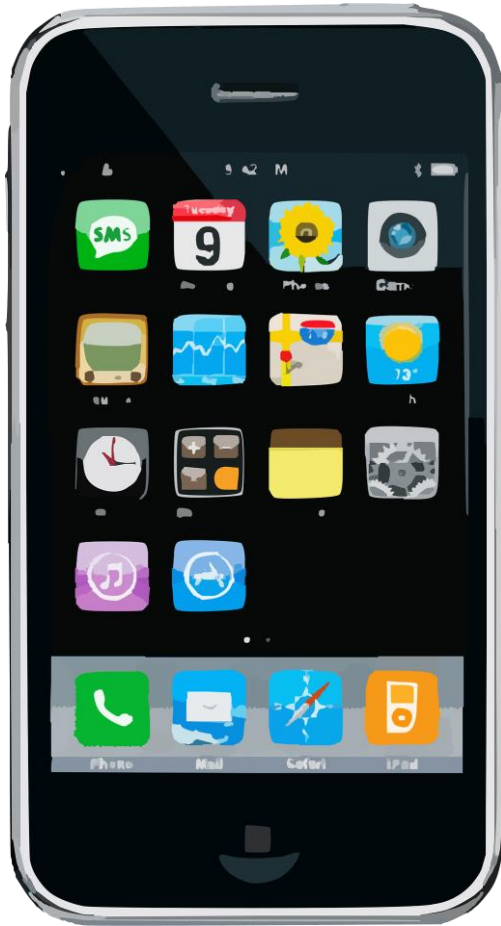
Required

-none-

# Timeline



# THANK YOU!



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