



# Georgia Council for the Arts FY24 Cultural Facilities Grant Management Handbook

## **UNUSED GRANT FUNDS**

**Please let GCA know ASAP if you will not be able to spend all of the grant funds awarded.**

Grantees are strongly encouraged to use all of the funds awarded to complete the project or operations supported by the grant; however, some grantees may be unable to use some or all of the grant funds awarded due to a variety of reasons, such as inability to meet the required income match or the arts programming has been cancelled. If a grantee is not going to spend the full grant amount, GCA must know early enough in the fiscal year to reallocate those funds to another arts project. If GCA is not notified about unused funds until late in the fiscal year (May-June), there is not time to reallocate the money and it must be returned to the state's general fund. In the recent past, unused funds in one year have had a negative impact on GCA's budget in the following year.

**Please help us protect and utilize all of the state's arts appropriation by submitting your Final Report on time and notifying GCA as soon as possible if you believe that you will not utilize all of your grant funds.**

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## INTRODUCTION

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Congratulations on your GCA grant!

This document outlines information regarding your FY24 grant. FY24 grantees are strongly encouraged to review this handbook as some policies have changed from previous years. Also, please review your contract carefully as it contains important information.

### Important Deadlines

<b>Return contract and all associated Documents via GCA's online grant system at <a href="http://gaarts.org/apply">http://gaarts.org/apply</a></b>	November 15, 2023
<b>Submit CRR for first payment (up to 90% of grant award amount)</b>	For grantees with organization budgets above \$500,000 and a requirement of a 100% matching income amount for the grant award, any time after expenses are at least double the amount being requested.  For grantees with organization budgets below \$500,000 and a requirement of a 50% matching income amount for the grant award, any time after expenses are at least 50% more than the amount being requested.
<b>Final Report</b>	All final reports are due no later than 30 days after the end of the funded project. For grant projects ending June 30, 2024, final reports are due no later than July 31, 2024.

Questions about how to complete any of the forms in the contract package should be directed to Delilah Johnson-Brown, Grants Specialist, at [dbrown@gaarts.org](mailto:dbrown@gaarts.org) or 404-962-4837.

Questions about the grant should be directed to Allen Bell, Director of Grants and Research, at [abell@gaarts.org](mailto:abell@gaarts.org) or 404-962-4839,

### General Provisions

All awards are made on a fiscal-year basis according to the state of Georgia fiscal year calendar (July 1, 2023 through June 30, 2024). The arts programming listed in the application must be completed within fiscal year 2024, and all expenses must be incurred within that same fiscal year.

## CONTRACT PACKAGE

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The package will contain:

- the State of Georgia Grant Contract
- FY24 Grant Management Handbook

The package may contain:

- a Corrections and Stipulations (C&S) Memo

### **All Grantees**

**All grantees MUST** complete and return these items to GCA via the Contract Package Return Form in the online grant system at <http://gaarts.org/apply>.

- A signed FY24 Grant Contract

### **New Grantees (those that did not receive a GCA Grant in FY23)**

**All grantees that did not receive a GCA grant in FY23 MUST** complete and return these items to GCA via the Contract Package Return Form in the online grant system at <http://gaarts.org/apply>.

- Supplier Change Request (SCR) Form
- W-9 form
- ADA Checklist
- Residency Verification

**Residency Verification, grantees that did not receive a GCA grant in FY23 MAY** return to GCA:

- If the funded organization is a non-profit organization with employees, you must complete E-Verify registration and a federal work authorization affidavit (Appendix C in the contract).
- If the funded organization is a non-profit organization with no employees, you must submit a copy of a driver's license or Passport of the person signing the contract and complete and submit a form (Appendix D in the contract) certifying that your organization has no employees.
- If the funded organization is an entity of local government, such as a city, county, downtown development authority, public library, or public school, then you do not need to submit residency verification documents.

### **Returning Grantees (those that did receive a GCA Grant in FY23)**

**Returning grantees from FY23 MAY** complete and submit the following only if they have changes:

- Supplier Change Request (SCR) Form – submit if there are changes to your organization name, organization address, or organization banking information
- W-9 Form – submit if there are changes to your organization name or address
- ADA Checklist – submit if your organization moved to a new location or if you completed significant renovations to your facility that had an impact on the accessibility of your facility

## **If Applicable**

Grantees may submit the following, **if applicable**:

- Residency Verification (Nonprofit organizations only) – instructions are included in the Grant Management Handbook and links are available within the Contract Return Form
- A C&S memo response (if you received a C&S memo in your contract package and it requires a response)
- Contractor's Request for Reimbursement (CRR) Form - instructions are on page 13 of the Grant Management Handbook

## **SAM UEI Requirement**

This year, the federal government, including the National Endowment for the Arts (NEA), is transitioning from using DUNS numbers as their unique entity identifier (UEI) to using a new identifier, known as a **SAM UEI**. Because GCA is funded in part by the NEA, we are also required to transition to using the SAM UEI. **Going forward, a SAM UEI is required to process all GCA grant applications, contracts, payments, and final reports.**

If you have not already obtained a SAM UEI and added it to your organization's record in GCA's online grant system, you will need to do so for GCA to process the contract and payments for your grant.

Detailed instructions for obtaining and entering a SAM UEI are included on pages 14-15 of the Grant Management Handbook.

## CONTRACT PACKAGE RETURN FORM

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The Contract Package Return Form in GCA's online grant system will contain links to the Supplier Change Request (SCR) Form, the W-9 Form, the ADA Checklist, the E-Verify federal work authorization affidavit, the form for certification of no employees, and the CRR form.

**These items must be submitted online through the Contract Package Return Form in GCA's online grant system no later than November 15, 2023.** If the items are not returned by the deadline, the contract may be cancelled and the grantee may not receive the FY24 award. In addition, FY24 grant panels will be informed that the contract was not returned, and they will take this into consideration when scoring.

If extenuating circumstances will prevent you from returning the contract by the deadline, contact Grants Specialist Delilah Johnson-Brown ([dbrown@gaarts.org](mailto:dbrown@gaarts.org)) to request an extension.

All required documents must be submitted through the Contract Package Return Form for the contract and contract package in GCA's online grant system, the same system where you submitted your FY24 Cultural Facilities Grant application: <http://gaarts.org/apply>.

To submit the forms online:

- Log in to your online GCA grant account at <http://gaarts.org/apply>
- Click on the home icon
- Click on the Active Requests tab
- Locate the listing for your FY24 Cultural Facilities Grant application
- Under the application, look for a green bar that says, Contract Package Return Form
- Click EDIT to the far right to access the online Contract Package Return Form
- Complete and upload the required forms and click SUBMIT

### Contract

The contract will be sent via email. Grantees will sign the contract and upload it through the online grant system. The contract will be signed by GCA when it is received by grantees, so once it is signed by your authorized official, you will be able to upload a fully executed copy.

The contract must be signed by one of the two authorized officials listed in the original application. If both of those people have left the organization, please complete a Change of Information Form via GCA's online grant system at <http://gaarts.org/apply> and submit it at the same time that you send the contract.

### Supplier Change Request (SCR) Form

Grantees must complete a Supplier Change Request (SCR) Form if:

- Your organization did not receive a GCA grant in FY23.
- Your organization received a GCA grant in FY23, but has changes to the organization name, organization address, or organization banking information.

You will find a link to this form within the Contract Package Return Form or you can download the form here: <https://www.dropbox.com/scl/fi/2tndps2rd4eclpn72i0mu/SCR-Form-10.1.23.pdf?rlkey=c24bxvp1vausw9dcwfi6hdy3b&dl=0>. You must use the form you find via the link and not a copy of one that you have submitted in previous years. Read the instructions carefully as errors will cause the state to return the form for corrections, which will delay any payments.

### **Supplier ID Number**

Leave the Supplier ID Number blank. This section is for the use of State of Georgia personnel only. If you complete this section of the form, the form will be returned and you will have to complete the form again.

### **Section 1 – Supplier Identification**


- **FEI Number** - Enter the organization's Federal Employment Identification (FEI) Number. DO NOT enter a Social Security Number for an individual.
- **Supplier Name** - Enter the name of the organization.
- **Doing Business As (DBA)** – If the organization uses an alternate name, please enter that name here.
- **Physical Address** - This address MUST match the legal address for the organization.
- **Additional Address** – If your organization has a P.O. Box, enter the P.O. Box address here.
- **Contact Email** – This should be the email address for the person signing the Supplier Change Request (SCR) Form.
- **Primary Phone Number and Secondary Phone Number** – This should be the best phone numbers to reach the person signing the SCR Form. The State Accounting Office (SAO) will call these numbers to verify the organization's banking information. If SAO is unable to reach someone by phone to verify the organization's banking information, then the grant payment will be sent by check to the address on the SCR Form and will not be direct deposited to the organization's bank account.
- **Driver's License Number and State** – Organizations receiving GCA grants can leave the Driver's License Number and State blank.

### **Section 2 – Bank Account Information**

- **Check Boxes** – If you prefer to receive a paper check, rather than a direct deposit to a bank account, then check the first box. If this is a new bank account, or if your organization is a new grantee, then check Add New Bank Account. If your organization is an existing grantee, then check Change Bank Account.
- **Routing Number and Bank Account Number** - These should be the organization's routing number and bank account number where the grant payment should be direct deposited. If you prefer for the payment to be sent by check, then you may leave the routing number and bank account number blank. If you prefer to receive a check for the grant payment, be sure to confirm that the organization address listed on the SCR Form matches the organization address included in the Contract.
- **Payment Remit Email Address**- This should be the email address(es) for the person(s) who should be notified when grant payments are made. You may enter up to two (2) email addresses to receive notification of grant payments.



- **Printed Name of Company Officer, Signature, and Date** – The name and signature of the company officer should be the person who provided driver’s license, phone number, and email information in Section 1.



## SUPPLIER CHANGE REQUEST FORM

Agency Supplier Liaisons **MUST** complete the Agency Liaison Use Only sections **AND** ensure the supplier has completed sections 1 - 3, the Supplier Use Only sections prior to submitting this form to SAO.

NEW     
  EXISTING     
 SUPPLIER ID NUMBER: Agency Use Only

0	0	0	0						
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Leave blank - for GCA use

### SECTION 1: SUPPLIER IDENTIFICATION

FEI/SSN/TIN 

--	--	--	--	--	--	--	--

Must enter the organization's FEIN here

Supplier Name:

Doing Business As (dba): if applicable

<p style="text-align: center; margin: 0;"><b>PHYSICAL ADDRESS</b> <small>DO NOT enter a P.O. Box</small></p> <p>Address 1: <input style="width: 90%;" type="text" value="Enter the street address for the organization."/></p> <p>Address 2: <input style="width: 90%;" type="text"/></p> <p>City: <input style="width: 90%;" type="text" value="City"/></p> <p>State: <input style="width: 50px;" type="text" value="State"/> Postal Code: <input style="width: 50px;" type="text" value="ZIP"/></p>	<p style="text-align: center; margin: 0;"><b>ADDITIONAL ADDRESS</b></p> <p>Address 1: <input style="width: 90%;" type="text" value="Enter PO Box for the organization (if applicable)"/></p> <p>Address 2: <input style="width: 90%;" type="text"/></p> <p>City: <input style="width: 90%;" type="text" value="City"/></p> <p>State: <input style="width: 50px;" type="text" value="State"/> Postal Code: <input style="width: 50px;" type="text" value="ZIP"/></p>
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Contact Email: Required

Primary Phone #:  Ext:   Landline  Cell Used for Identity Verification

Secondary Phone #:  Ext:   Landline  Cell Used for Identity Verification

Driver's License #: For individuals only  DL State:

### SECTION 2: BANK ACCOUNT INFORMATION

Check any that apply. Required for New and Reactivating suppliers to add/change bank information to receive payments via ACH.

I do not wish to provide banking information and understand all payments made to me will be via check.

Replace Remittance Address at Loc #  With Addr ID #

Replace Invoicing Address at Loc #  With Addr ID #

Add New Bank Account     Change Bank Account    Enter Loc #  Agency Liaisons are required to complete items on this line for bank changes

ROUTING #

Enter bank routing no.      Last Four Digits of Previous Bank Account # For changes only

Check here if General Bank Account can be used by ALL State of Georgia agencies making payments.

Check here if this account can only be used for a SPECIFIC PURPOSE

DESCRIBE SPECIFIC PURPOSE

### ACCOUNTS RECEIVABLE NOTIFICATION

PAYMENT REMIT EMAIL ADDRESS:

PAYMENT REMIT EMAIL ADDRESS:

I authorize the State of Georgia to deposit payment for goods and/or services received into the provided bank account by the Automated Clearing House (ACH). I further acknowledge that this agreement is to remain in full effect until such time as changes to the bank account information are submitted in writing by the vendor or individual named below. It is the sole responsibility of the vendor or individual to notify the State of Georgia of any changes to the bank account information. The State of Georgia independently authenticates bank account ownership.

<input style="width: 95%;" type="text" value="Print name of person completing this form."/>	<input style="width: 95%;" type="text" value="Ink or time-stamped digital signature."/>	<input style="width: 95%;" type="text" value="Enter date."/>
Printed Name of Company Officer	Signature of Company Officer	Date



**Section 3** is divided into three subsections – **Business Certifications, Minority Business Enterprise,** and **Veteran-Owned Small Business.** For each subsection, check the appropriate boxes. If none of the options apply, check “Not Applicable”. If you prefer not to disclose this information, check “Prefer Not to Disclose”.

Please skip Sections 4 and 5 on page two (2) of the Supplier Change Request (SCR) Form. Also, please DO NOT COMPLETE OR SIGN the signature section in Section 5 at the bottom of page two (2), as this section is for state agency use only.

If you are requesting payment by check, and you want the check to be made out to an organization name other than the Supplier Name entered in Section 1, such as a DBA organization name, enter the organization name you would like the check to be made out to in the **Payment Alt Name** line in Section 4.

When you scan and upload the SCR Form, you must include **both pages** of the form.

**SECTION 3: DIVERSITY IDENTIFICATION (Check ALL That Apply)**

Check all that apply. At least one option must be checked.

**BUSINESS CERTIFICATIONS**

GA Small Business\*     Women Owned  
 GA Resident Business\*\*     Minority Business Certified  
 Not Applicable     Prefer Not to Disclose

**MINORITY BUSINESS ENTERPRISE (51% ownership)**

Check all that apply. At least one option must be checked.  
 Hispanic – Latino     African American  
 Native American     Asian American  
 Pacific Islander     Not Applicable  
 Prefer Not to Disclose

\*Based on Georgia law (OCGA 50-5-21)(3) "Small Business" means any business which is independently owned and operated. Additionally, such business must either have 300 or less employees OR \$30 million or less in gross receipts per year.  
\*\*Georgia resident business is defined as any business that regularly maintains a place from which business is physically conducted in Georgia for at least one year prior to any bid or proposal to the state or a new business that is domiciled in Georgia and which regularly maintains a place from which business is physically conducted in Georgia, provided, however, that a place from which business is conducted shall not include a post office box, a leased private mailbox, site trailer, or temporary structure.

**VETERAN-OWNED SMALL BUSINESS (Check ALL That Apply)**    Check all that apply.

Nonveteran-owned Small Business     Veteran-owned Small Business     Service Disabled VOSB     Prefer Not to Disclose

**SECTION 4: REQUESTED CHANGE(S) – (Check ALL That Apply)**    LEAVE THE REMAINDER OF THIS FORM BLANK. GCA WILL COMPLETE SECTIONS 4 AND 5 BELOW.

Business Name Change

1099 Eligible Cannot change to non-eligible if supplier is already 1099 eligible

1099 Addr ID # Agency Liaisons are REQUIRED to enter the Addr ID # where to mail 1099

1099 – M Enter Code (Required for Form 1099 – M)

1099 – N    Code 01 (01 is the only code available for the 1099 – NEC)

Reactivate Supplier Profile

Deactivate Supplier Profile (Agency Liaison MUST attach written justification from the supplier with the SCR.)

Add Additional Business Address (Enter additional address in Section 1)

Change Existing Business Address

Change/Add Payment Alt Name to an existing address (if payable to a different name. DO NOT enter the DBA).

Enter Addr ID # to change:     Payment Alt Name:

Classification Change: (Agency Liaisons are required to check one for Classification Changes.)

Attorney     HCM     Student     Supplier Non-minority

Gov Non-State of GA     Non-Supplier     Supplier Minority

Statewide Contract (DOAS Use Only)

HCM Vendor

Other (Provided details in the Comments section below)

Comments

**AGENCY USE ONLY SECTION 5: AGENCY LIAISON CERTIFICATION (REQUIRED)**

By my signature below, I certify that all reasonable effort has been made to submit information that is complete, accurate, true, and is associated with the supplier's name and Tax ID listed above.

AGENCY LIAISON NAME    AGENCY LIAISON SIGNATURE    DATE    B/U#

Revised 9/2023

### **Voided Check or Bank Letter**

With the SCR Form, you will also need to upload a **voided check** for the bank account listed on the SCR Form. This serves to confirm the bank information provided. The address on the check must match the address provided on the SCR Form. If your checks are outdated and the current address does not match, we will also accept a **letter from your organization's bank** including the account information and address connected to the account.

### **Street Address Verification**

For new grant recipients, or for returning grant recipients with address changes, **address verification** is required to accompany the SCR Form. Eligible documentation includes a lease or deed, an invoice, a legal document, or a screenshot from the organization's registration with the Secretary of State.

### **P.O. Box Verification**

For new grant recipients with a P.O. Box entered on the SCR Form, or for returning grant recipients with P.O. Box changes, P.O. Box verification is required to accompany the SCR Form. The only eligible documentation is a copy of the **lease for the P.O. Box**.

### **W-9 Form**

All grantees that did not receive a grant in FY23, or returning FY23 grantees with organization name or address changes, must complete a W-9 Form.

You will find a link to the W-9 form within the Contract Package Return Form or you can download the form here: <https://www.irs.gov/pub/irs-pdf/fw9.pdf>. You must use the form you find via the link and not a copy of a form that you have submitted in previous years. Complete the form and upload it within the Contract Package Return Form.

In **section 1**, enter the name of the organization. Make sure that the name you enter exactly matches the organization name entered on the contract, the Supplier Change Request (SCR) Form, and the federal employment authorization affidavit.

In **section 2**, if applicable, enter the alternate or DBA name for your organization. Make sure that the name you enter exactly matches the alternate or DBA name entered on the Supplier Change Request (SCR) Form.

In **section 3**, if your organization is a non-profit organization or a government entity, check Other, and then enter either "nonprofit organization" or the type of local government entity – such as public library, public school, downtown development authority, main street agency, city government, county government, etc.

Skip **section 4**.

In **sections 5 and 6**, enter the address for your organization. This should exactly match the address

entered on the Supplier Change Request (SCR) Form.

Skip **section 7**.

In the section labeled **Part I**, you should enter the Employer Identification Number, or FEIN, for your organization. Do not enter a Social Security Number.

In **Part II**, sign and date the form. The signature must be an actual signature or a date-stamped signature using the Adobe Sign & Certify tool. The date must be current. Forms older than 30 days than the date entered on the form will not be processed and you will be asked to complete the W-9 form again.

Once the W-9 form is completed, please save the form and upload it to the W-9 section of the Contract Package Return Form.

<b>Form W-9</b> (Rev. October 2018) Department of the Treasury Internal Revenue Service		<b>Request for Taxpayer Identification Number and Certification</b>		<b>Give Form to the requester. Do not send to the IRS.</b>		
<b>▶ Go to <a href="http://www.irs.gov/FormW9">www.irs.gov/FormW9</a> for instructions and the latest information.</b>						
<b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.						
<b>2</b> Business name/disregarded entity name, if different from above						
<b>Print or type.</b> <b>See Specific Instructions on page 3.</b>	<b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.				<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):	
	<input type="checkbox"/> Individual/sole proprietor or single-member LLC	<input type="checkbox"/> C Corporation	<input type="checkbox"/> S Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Trust/estate	Exempt payee code (if any) _____
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____	<b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.				Exemption from FATCA reporting code (if any) _____
	<input type="checkbox"/> Other (see instructions) ▶ _____					<small>(Applies to accounts maintained outside the U.S.)</small>
<b>5</b> Address (number, street, and apt. or suite no.) See instructions.			Requester's name and address (optional)			
<b>6</b> City, state, and ZIP code						
<b>7</b> List account number(s) here (optional)						
<b>Part I Taxpayer Identification Number (TIN)</b>						
Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> , later.						
<b>Note:</b> If the account is in more than one name, see the instructions for line 1. Also see <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.						
<b>Part II Certification</b>						
Under penalties of perjury, I certify that:						
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and						
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and						
3. I am a U.S. citizen or other U.S. person (defined below); and						
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.						
<b>Certification instructions.</b> You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.						
<b>Sign Here</b>		Signature of U.S. person ▶		Date ▶		

## ADA Checklist

All grantees that did not receive a grant in FY23, or returning FY23 grantees that moved to a new facility or conducted major renovations to their facility that impacted accessibility of the facility, must complete the ADA Checklist.

You will find a link to this form within the Contract Package Return Form or you can download the form here: <https://www.dropbox.com/s/o7jpyacdfwvx8u/FY22%20ADA%20Checklist%20-%20GCA%20Grants-%20updated.pdf?dl=0>.

You must use the form you find via the link and not a copy of a form that you have submitted in previous years. Complete the form and upload it within the Contract Package Return Form.

## Residency Verification

This year, GCA's Residency Verification instructions have changed.

- If your non-profit organization received a GCA grant in FY23, you were required to submit a Residency Verification. You do not need to submit another Residency Verification this year.
- If your non-profit organization has employees and did not receive a GCA grant in FY23, the organization must register with E-Verify and submit an affidavit (Appendix C in your contract) certifying that the grantee uses the federal work authorization program.
- If your non-profit organization does not have employees and did not receive a GCA grant in FY23, then you must complete and submit a form (Appendix D in your contract) verifying that your organization does not have employees and submit a copy of a driver's license or Passport for the person who signs the contract.
- If your organization is a government entity, a school, a public library, or a public college or university, you do not have to submit any type of residency verification

## Residency Verification for Non-Profit Organizations with Employees

E-Verify registration instructions:

- Go to: <https://www.e-verify.gov/>
- Click on "I am an employer"
- Click on "learn how to enroll" if you are not already registered
- Click on "enroll now" and follow the steps to enroll in E-Verify

Complete the Contractor Affidavit form at [Georgia Department of Audits : Information/Resources](#).

This form asks you to confirm that your organization is registered with and utilizing E-Verify, a web-based system that allows enrolled employers to confirm the eligibility of their employees to work in the United States. By signing the form, grantees are confirming that:

- The organization is using and will continue to use E-Verify for the duration of the grant contract
- The organization will notify GCA if it ceases to use E-Verify
- The organization will only use subcontractors who are approved by E-Verify
- The organization will provide documentation to the state of Georgia regarding the legal status of employees or subcontractors if requested by the state.

For additional information, go to <https://law.justia.com/codes/georgia/2010/title-13/chapter-10/e/13-10-91>.

Affidavit instructions:

- Use Appendix C attached to the contract or click the link to access the affidavit certifying that the grantee uses the federal work authorization program: [https://www.audits2.ga.gov/wp-content/uploads/2021/10/Contractor\\_Affidavit\\_-\\_Updated\\_December\\_2018\\_-\\_Final.doc](https://www.audits2.ga.gov/wp-content/uploads/2021/10/Contractor_Affidavit_-_Updated_December_2018_-_Final.doc).
- Download and save the affidavit.
- Read and sign the affidavit and have the document notarized at the time it is signed.
- “Name of Contractor” is the name of your organization.
- “Name of Public Employer” is Georgia Council for the Arts.
- “Name of project” should be the name of the grant that you are receiving – FY24 Cultural Facilities Grant.
- Upload the signed and notarized affidavit to the online contract package return form.

### **Residency Verification for Non-Profit Organizations without Employees**

If your organization is required to submit Residency Verification and your organization has no employees, the person who signs the contract should submit a copy of his/her driver’s license, Passport, or other authorized document, and complete and submit a form certifying that your organization has no employees, which can be found in Appendix D attached to the contract or at the following link:

<https://www.dropbox.com/s/2uv7sxgkhkn9vwt/Certification%20of%20No%20Employee%20-%202022.pdf?dl=0>.

### **Corrections and Stipulations Memo (C&S Memo)**

If a grantee’s application has errors, omissions, and/or provides incomplete or confusing information, that grantee will receive a C&S Memo which details the information that must be provided to GCA before the grant contract will be executed. The C&S Memo and the grantee’s response will become part of the binding contract with the state. If the C&S Memo states that no response is needed, then the applicant does not have to return anything to GCA with the contract related to the C&S Memo.

### **Contractor’s Request for Reimbursement (CRR) Form**

In order to receive grant funds, a grantee must submit a Contractor’s Request for Reimbursement (CRR) Form. Grantees may request 90% of the grant during the grant year, and the final 10% will be requested when the Final Report is submitted.

For grantees with organization budgets above \$500,000 and a requirement of a 100% matching income amount for the grant award, any time after expenses are at least double the amount being requested.



For grantees with organization budgets below \$500,000 and a requirement of a 50% matching income amount for the grant award, any time after expenses are at least 50% more than the amount being requested.

CRR Forms submitted for Cultural Facilities Grants must include receipts equal to the total expenses incurred for the contract to date.

You will find a link to the CRR Form within the Contract Package Return Form. The CRR Form also can be found online: <https://gaarts.org/what-we-do/grants/cultural-facilities-grant/>.

Please note the following:

- The address on the CRR Form must match the address that was submitted on the Supplier Change Request (SCR) Form.
- The CRR Form may be submitted along with the contract as long as enough expenses have been accrued to meet the requirements detailed above.
- CRR Forms should be e-mailed to Director of Grants and Research Allen Bell at [abell@gaarts.org](mailto:abell@gaarts.org).
- The CRR Form for the final grant payment should be submitted along with the final report.
- No CRR Form will be processed if requirements from the preceding fiscal year, the Contract Package, or the Final Report are outstanding.

## REQUIREMENT TO OBTAIN A SAM UEI

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This year, the federal government, including the National Endowment for the Arts (NEA), is transitioning from using DUNS numbers as their unique entity identifier (UEI) to using a new identifier, known as a **SAM UEI**. Because GCA is funded in part by the NEA, we are also required to transition to using the SAM UEI. **Going forward, a SAM UEI is required to process all GCA grant applications, contracts, payments, and final reports.**

**GCA CANNOT ISSUE ANY FY24 GRANT PAYMENTS OR FINALIZE FY24 GRANT CONTRACTS UNTIL YOUR ORGANIZATION HAS ENTERED A VALID SAM UEI IN GCA'S ONLINE GRANT SYSTEM.** We urge you to go ahead and sign up for a SAM UEI to prevent any delay in grant payments.

**If you attempt to register for a SAM UEI and are required to file an incident report, please let GCA know by forwarding the email confirmation of your incident report to your grants manager. In the case that there is a delay in obtaining your SAM UEI, this documentation will be required to move forward with processing FY24 grant payments.**

All GCA grant recipients are required to register for a SAM UEI through <http://SAM.gov> and enter that number in the appropriate section for the organization's account in GCA's online grant system at <http://gaarts.org/apply>.

- For grantees and applicants that already receive funding directly from the federal government, your organization already has a SAM UEI. Log in to <http://SAM.gov>, copy the organization's SAM UEI, and enter that number into the SAM UEI field for the organization's registration within GCA's online grant system.
- For grantees and applicants that do not already have a SAM UEI, go to <http://SAM.gov> and register your organization.

There may be a delay in the process to obtain your SAM UEI if your organization is not already in the SAM.gov system, so **please do not put off beginning the process to obtain a SAM UEI.** Please note, as you create a SAM.gov registration, GCA requests that you select the option to make your record public so that we can view your record and confirm that your SAM UEI is correct.

Registering in SAM.gov and obtaining a SAM UEI is free. You should never have to pay to obtain a SAM UEI. If an entity proposes charging your organization to obtain a SAM UEI, it is likely to be a scam and you should cease communicating with that entity.

**Once you obtain a SAM UEI for your organization, enter that number into the SAM UEI field for the organization's registration in GCA's online grant system** at <http://gaarts.org/apply>. Once you log in, go to the Applicant Dashboard. To the far right, you will see a pencil icon within the Organization information section. Click on the pencil icon and scroll down to the UEI/SAM Number field to enter your SAM UEI. After entering the SAM UEI, click on the Save button at the bottom of the page.

If you need assistance, you can refer to [How Organizations Can Obtain a SAM-UEI Number](#), which includes more specific details and instructions.

**If your organization needs technical assistance with obtaining a SAM UEI or resolving an incident report**, contact the [Federal Service Desk](#) (FSD.gov) by phone (866-606-8220) or online through "Live Chat" or "Create an Incident". Hours of operation are Monday-Friday, 8 a.m. to 8 p.m. ET. Please note that there may be a wait time for phone and Live Chat assistance.

If you have questions, please reach out to Allen Bell, Director of Grants and Research, at [abell@gaarts.org](mailto:abell@gaarts.org) or 404-962-4839.

Thank you in advance for obtaining a SAM UEI and entering the identifier into your organization's record in GCA's online grant system. This will help GCA continue to provide grant funding to your organization and to support arts programs throughout the state.



## DURING THE YEAR

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This section addresses things that you should keep in mind during the grant year.

### **Change of Information**

Keeping your online account information up-to-date is important to ensure that you are receiving notifications from GCA regarding your grant and that your grant payments are sent to the correct location.

Grantees must complete a Change of Information Form if there are any changes to an organization's:

- Phone number
- Address
- Contact person
- Authorized officials

Grantees should complete the Change of Information Form within GCA's online grant system at <http://gaarts.org/apply>. After logging in, click on the Apply tab at the top of the page and scroll down to the Change of Information Form and click on the Apply button.

Please allow up to four weeks for GCA to make the changes in your account. We will notify you if we have questions and when the changes have been made.

### **GCA Logo and Crediting Requirements**

#### **Printed Credit**

GCA requires all grantees to recognize GCA in all materials, publications, and programs that are supported by state funds and in which other funders are credited. This includes programs, newsletters, brochures, fliers, ads, calendars, posters, press releases, films, videotapes, websites and all electronic transmissions.

The GCA logo must be reproduced in the same size and proportion as that of other sponsors. It must be reproduced as it is provided, without alteration.

If there is no printed material associated with a program, oral credit must be given. The statement below must be provided before the event or performance, and during any radio broadcast or audiotape for the hearing impaired.

*"This program is supported in part by Georgia Council for the Arts through the appropriations of the Georgia General Assembly. Georgia Council for the Arts also receives support from its partner agency – the National Endowment for the Arts."*

## GCA Logo Links

- [GCA Logo, Black- hi-res, .jpg file](#)
- [GCA Logo, Color \(RGB\)- hi-res, .jpg file](#)
- [GCA Logo, Color \(CMYK\)- hi-res, .jpg file](#)

## NEA Credit

GCA receives significant funding from the National Endowment for the Arts. Grantees should recognize the NEA on their materials in addition to, but not instead of, the GCA logo. Visit the [NEA website](#) for access to the logo.

## Letters to the Governor and State Legislators

GCA wants the Governor and our state legislators to be aware of the work of our grantees, as well as the impact of your GCA grant. All FY24 GCA grantees are required to write a letter to the Governor and both of their state legislators (one State Senator and one State House Representative) which includes the following information:

- the number of people served by the organization
- the ways that the organization serves its community
- the ways that the GCA grant will better enable the organization to serve its community
- an invitation to the funded program(s) (if applicable)

Letters to the Governor should be addressed to:

Governor Brian P. Kemp  
206 Washington Street  
Suite 203, State Capitol  
Atlanta, GA 30334

If you need contact information for your state legislators, go here:

[https://openstates.org/find\\_your\\_legislator/](https://openstates.org/find_your_legislator/). On this page, enter the physical address for the organization receiving the grant, including street address, city, state, and zip code, and then click Search by Address. The results will include your State Representative (lower chamber) and your State Senator (upper chamber). Click on the elected official's name to access their mailing address and email address.

Grantees will be required to submit copies of the letters to the Governor and State Legislators with their Final Reports.

## Unused Funds

Grantees may be unable to use some or all of the grant funds awarded due to a variety of reasons, such as inability to meet the required income match or the arts programming has been cancelled. Regardless of the reason, **GCA must be notified by March 1, 2024, about funds that will not be utilized.** With enough advance notice, GCA may reallocate the funds for other arts programming. If GCA is not informed about unused funds well in advance of the end of the fiscal year on June 30,

2024, then our agency must return the funds to the state and may not reallocate the funds to another arts organization.

## **Project Changes**

If the project and/or goals that were outlined in your original application change significantly during the grant year, contact your grant manager to discuss the changes. GCA understands that sometimes the scope of a project changes. While this is not always problematic, sometimes the changes take the project too far away from what was approved by the panel in the application.

**Discussing changes with GCA early in the process will allow time to make any adjustments needed** to avoid penalties for not fulfilling the project as outlined in the application.

## **Grant Change Form**

Organizations that need to make changes to their funded projects should complete the FY24 Grant Change Form within GCA's online grant system. A change form must be assigned by GCA staff. If you need to change your funded project, please contact the appropriate grant manager.

While GCA will allow changes to the program, the revised program must still serve the same audience and purpose as the original program, and must meet the same financial requirements as the original grant, such as matching income and minimum expenses.

GCA will consider the following requests for changes:

- **Change of Date:** Grantees may change the date of their project as long as it is completed by June 30, 2024.
- **Change of Vendor or Contractor:** GCA will consider requests to change the vendor or contractor; however, the project must continue to fulfill the original project described in the application.
- **Cancellation:** If the funded project cannot take place, and the option is not available to postpone the project or work with a new vendor or contractor to complete the work, the grantee can cancel the project. Grantees that cancel a project will not be able to receive any funds from the grant as the funds will be reallocated to other projects.

Once the change form is submitted, GCA will be in touch to notify the organization whether or not the change is approved.

## **FINAL REPORT**

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**This section addresses your Final Report and other things you should keep in mind at the end of the year.**

Final Reports are required of all GCA grantees. All final reports are due 30 days after the completion of the project. For grantees with project completion dates of June 30, 2024, the final report is due no later than July 31, 2024, which is 30 days after the end of the funding period.

Final report instructions will be available on GCA's website on the page for each grant type: <https://gaarts.org/what-we-do/grants/cultural-facilities-grant/>.

If the Final Report is not submitted by the deadline, grant panels in the following year will be notified that the grantee did not fulfill the terms of the grant contract.

### **Goals**

In the Final Report, grantees will report on the progress they made accomplishing the goals that were outlined in the application.

### **Match Requirements**

For grantees with organization budgets above \$500,000 and a requirement of a 100% matching income amount for the grant award, total project expenses must be at least double total grant award.

For grantees with organization budgets below \$500,000 and a requirement of a 50% matching income amount for the grant award, total project expenses must be at least 50% more than the total grant award.

The matching funds must be received by the grantee by June 30, 2024.

Failure to raise the cash match results in cancellation of the unmatched portion of the award.

In-kind contributions of goods, services, or space are not allowed to be included as part of the match.

### **Total Expenses**

GCA will not reimburse an organization more than 50% of total expenses for FY24 Cultural Facilities Grant recipients with organization budgets above \$500,000. For instance, if an organization is awarded a Cultural Facilities Grant of \$10,000, but the final report shows that the organization only had a total of \$18,000 in expenses, the organization will only receive \$9,000 of the total grant amount.

GCA will not reimburse an organization more than two-thirds (2/3) of total expenses for FY24 Cultural Facilities Grant recipients with an organization budget of less than \$500,000. For instance, if an organization is awarded a Cultural Facilities Grant of \$5,000, but the final report shows that the organization only had a total of \$6,000 in expenses, the organization will only receive \$4,000 of the total grant amount.

## **QUESTIONS**

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Please contact **Director of Grants and Research Allen Bell** ([abell@gaarts.org](mailto:abell@gaarts.org) or 404-962-4839) if you have any questions about your FY24 Cultural Facilities Grant. We know that there are a lot of steps involved with the grant process and we are happy to answer any questions that you have.