



DAYTON

City of Dayton, Ohio
Department of Procurement, Management & Budget

The City of Dayton Cultural Support Relief Fund

NOTICE OF FUNDING OPPORTUNITIES (NOFO) No. 20-017PMB
SEPTEMBER 2020

SECTION 1 – PROPOSAL INSTRUCTIONS

1.01 COMMUNICATIONS REGARDING THIS PROJECT. Please direct all communications regarding the NOFO process to:

City of Dayton, Procurement Division
Melissa A. Wilson, CPPB
101 West Third Street
Dayton, Ohio 45402
Telephone: (937) 333-4039
E-Mail: Melissa.Wilson@daytonohio.gov

All communications/questions concerning this NOFO must be submitted via email referencing the specific paragraph and page number.

A copy of this NOFO proposal and any additional documentation may be found at the City’s website at:

<http://daytonohio.gov/bids.aspx>

1.02 SCHEDULE. The following is the anticipated schedule for the NOFO Process:

Issue NOFO:	September 25, 2020
Due Date for Proposals:	10:00 AM local (Dayton OH) time on October 12, 2020
Notice of Intent to Award:	Anticipated in October, 2020
Grants are Awarded:	Anticipated in October, 2020
Project Completion Date:	December 28, 2020

1.03 PRE-PROPOSAL MEETING. This is not applicable due to the nature of this project.

1.04 SITE VISIT. This is not applicable due to the nature of this project.

1.05 SUBMITTING A PROPOSAL. Each Vendor seeking consideration for performance of services related to this NOFO must submit a proposal. All proposals shall be submitted as a PDF via electronic submission to bids@daytonohio.gov. The City has a 20meg limit for incoming e-mail message sizes (20meg includes e-mail itself and any attachments total). Should your company’s proposal document exceed this limit, your company will have to submit its document in multiple parts (emails). Should bid document require multiple emails, please designate in the “Subject” line of each email sent: NOFO 20-017PMB- The City of Dayton Cultural Support Relief Fund, NOFO 20-017 Part 1, NOFO 20-017 Part 2, and so forth.

The bid opening will be facilitated using ZOOM with the following login information:

Topic: NOFO 20-017PMB The City of Dayton Cultural Support Relief Fund
Time: October 12, 2020 at 10:00 AM Eastern Time (US and Canada)

Join Zoom Meeting
<https://us02web.zoom.us/j/83239427136>

Meeting ID: 832 3942 7136
One tap mobile
+13017158592,,83239427136# US (Germantown) 13126266799,,83239427136# US
(Chicago)

Dial by your location
+1 301 715 8592 US (Germantown)
+1 312 626 6799 US (Chicago)
+1 929 436 2866 US (New York)
+1 253 215 8782 US (Tacoma)
+1 346 248 7799 US (Houston)
+1 669 900 6833 US (San Jose)

Meeting ID: 832 3942 7136
Find your local number: <https://us02web.zoom.us/u/kcD8RE5aVz>

Sealed proposals must be received in the Procurement bid email in-box (BIDS@DAYTONOHIO.GOV) by 3:00 PM on the date indicated in Section 1.02 (Schedule). Proposals received after the scheduled date/time will not be considered. All supporting materials and documentation must be included with the proposal. The responsibility of timely delivery lies solely with the proposer.

The City reserves the right to reject any and all proposals, to waive any irregularities in a proposal, or to accept the proposal(s) which in the judgment of proper officials, is in the best interest of the City. The City reserves the right to accept a part or parts of a proposal unless otherwise restricted in the NOFO or issue subsequent NOFOs. The City reserves the right to approve or reject any sub-Firms proposed for work under this proposal or waive any minor irregularities

The City reserves the right to select the successful vendor once all proposals are received, without seeking further information for clarification from proposers. Upon review of proposals, the City may designate the most qualified proposals as finalists. These finalists may be invited to make oral presentations and participate in a question and answer session with the City. The City shall have the right to visit selected user sites, should this be deemed necessary.

All federal, state, and local laws regarding competitive bidding, anti-competitive practices, and conflict of interest shall be applicable to this NOFO. The City does not guarantee that any contract will be awarded because of this NOFO. If a contract award is made but the contract is not executed, the City does not guarantee that the contract will be re-awarded.

1.06 REQUIRED PROPOSAL CONTENTS. All brochures and supplemental documentation shall be included with the original and all copies. If not, the proposal may be considered as non-responsive. Proposers are required to submit the following information in their proposal:

- **EXHIBIT A:**
 - **Letter of Transmittal.** The proposer shall provide a transmittal letter with authorizing signature for the proposal. The letter must briefly summarize the vendor's ability and willingness to perform the services required by the NOFO. The letter must be on the form provided in Exhibit A.
 - **Key Personnel Information.** Provide the name, title, mailing address, telephone number and e-mail address of the persons who will function as the City's primary contact and back-up contact person. Complete Form found in Exhibit A.
 - **Company Profile and Background.** Provide the following information as it relates to Section 2.03:
 - ◆ **Location** – The street address of the proposer's company headquarters.
 - ◆ **Local Office of Proposer** – Provide the location of the proposer's office nearest to Dayton, Ohio. Include the local office, a contact name, address, telephone, and fax numbers.
 - ◆ **Company's Primary Business** – State the proposer's primary business, the number of years in the proposer's industry, and the number of employees assigned to these related activities.
 - ◆ **State the legal make-up** of your company: sole proprietorship, partnership, corporation, etc.
 - ◆ **Please list any Lawsuits that you are currently engaged in.** Please provide any and all suits either with the City of Dayton or any other Municipalities (include, but not limited to Federal, State, Local or other Municipalities and Governmental agencies).
- **EXHIBIT B:**
 - **Grant Application.** This is a required submittal. Please fill out and submit.
- **EXHIBIT C- Vendor Compliance Form**
- **EXHIBIT D- Business Income**
- **City Vendor Application and W9**
- **Questionnaire Proposal Response** as per Section 2.

1.07 ITEMS THAT DISQUALIFY A VENDOR IMMEDIATELY.

- Incomplete or non-responsive proposal

1.08 CRITERIA. The selection committee will evaluate each proposal submitted based on the following criteria. After receipt and review of the written proposal, the City may elect to have the proposal presented in person, or clarifications submitted in writing.

Proposers shall not assume that any information shared with the City prior to this NOFO will be considered in the evaluation process of this NOFO. Evaluation team may or may not have prior knowledge of any discussions and processes. **Evaluation will be completed on the information submitted in response to the NOFO only, unless a presentation or clarification is requested. Should this occur, all of these factors will be used to determine the outcome.**

The highest scoring vendor will be contacted to work through /negotiate/navigate details of their response in order for the City and the Firm to come to a mutual agreement. If this is not successful with the highest scoring vendor, the City will move to the next highest scoring vendor and restart the process and the initial vendor will no longer be considered as a responsive option.

REVIEW CRITERIA

Peer reviewers will use the following criteria to review applications in this program:

- The degree to which the proposed funding would retain cultural jobs threatened by the coronavirus pandemic or create new jobs, and the qualifications and level of involvement of the relevant personnel dedicated to the cultural organization
- The importance of the proposed cultural organization's activities to the applicant's mission, to the cultural sector, and/or to the general public
- The reasonableness of the proposed request in relation to the proposed activities, the applicant's capacity to administer the received funding, and the long-term viability of the organization
- The adherence of the cultural organization to use the funding received to address specific cultural needs within the City of Dayton and provide impactful services to the community
- The number of individuals served aligns with the requested funding amount and services provided by the cultural organization

1.09 MISCELLANEOUS ITEMS.

- **All Firms submitting a proposal will be notified, upon final determination by the City, of the Firm or Firms selected to perform the requested work.**

SECTION 2 – SCOPE OF PROJECT

2.0 PURPOSE AND NEED / PROJECT DESCRIPTION.

The City of Dayton Cultural Support Relief Fund (“the Fund”) was developed in response to the economic crisis facing our community due to the COVID-19 pandemic. The goal of the Fund is to mitigate the negative economic impact on cultural organizations in The City of Dayton. The Fund will provide grants to cultural entities who were impacted by the business interruption due to COVID-19, to assist with payroll, mortgage, utility, and other business operating expenses. Cultural organizations is a broad term for organizations that exist to promote and develop artistic expression. They preserve our cultural heritage through media including exhibitions and performances. Staffed by volunteers and professionals with a passion for the arts, these charity organizations play a vital role in shaping the City of Dayton’s culture. Cultural organizations encourage education and appreciation of numerous artistic disciplines including painting, sculpture, writing, photography, puppetry, film, theater, opera, dance, and music. For this fund, the definition of a cultural organization is the following:

- Business/organization entity must be a 501 (c)(3) non-for-profit in good standing
- The organization must provide programming to the City of Dayton community, for this fund, programming is defined as:
 - Performing and Visual Arts
 - Examples include: Ballets, Operas, Community Theaters, and Art Councils
 - Libraries, Museums, and Cultural Institutions
 - Examples include: Libraries, Museums, Cultural Institutions, Art Education Charities

The intended use of these CSRF funds is to provide financial assistance to cultural organizations and cultural community venues that have canceled or postponed public programming and/or have experienced significant declines in visitors and patrons because of the economic conditions and executive orders associated with the COVID-19 pandemic. Applications will be considered from cultural (arts, history, heritage and humanities) organizations and cultural community venues and organizations that had an economic burden caused by COVID-19.

2.1 SCOPE OF WORK / PROJECT REQUIREMENTS.

The City of Dayton has received funds through the Coronavirus Aid, Relief, and Economic Security Aid, also known as CARES Act. The CARES Act established the \$150 billion Coronavirus Relief Fund, which will be used to assist states and local governments impacted by the COVID-19 pandemic.

The U.S. Department of the Treasury issued the money to states and certain local governments. The amount issued to each entity is based upon the population as provided in the CARES act. The funds can only be used to cover costs that-

1. Are necessary expenditures incurred due to the public health emergency with respect to the Coronavirus Disease 2019;
2. Were not accounted for in the budget most recently approved as of March 27, 2020; and
3. Were incurred during the period that begins on March 1, 2020, and ends on December 30, 2020.¹

U.S Treasury guidance provides that eligible expenditures may include expenditures related to the provision of grants to reimburse the costs of business interruption caused by required closures due to the COVID-19 public health emergency.

2.1.1 ELIGIBILITY REQUIREMENTS

- Business/organization entity must be a 501 (c)(3) non-for-profit in good standing
- Physical location and operating within the city limits of Dayton, Ohio
- In business for the entire calendar year 2019 as a nonprofit
- No outstanding tax liens or judgements, excluding 2019 property taxes
- Business must certify to and provide supporting documentation of the business’s negative economic impact due to COVID-19
- Grant award funds shall not be used for any damages that are covered by insurance.
- Funds received through this grant must be spent on programs or services in the City of Dayton and/or to support City of Dayton residents.

¹ U.S. Department of the Treasury. June 30 2020. Coronavirus Relief Fund, Guidance for State, Territorial, Local, and Tribal Governments, <https://home.treasury.gov/system/files/136/Coronavirus-Relief-Fund-Guidance-for-State-Territorial-Local-and-Tribal-Governments.pdf>

2.1.2 INELIGIBLE ORGANIZATIONS

- Businesses located outside of the eligible geographic area
- Organizations that are not registered as a 501 (c)(3) non-for-profit
- Businesses engaged in illegal activities under federal, state or local laws
- Businesses otherwise prohibited by federal or Ohio laws
- Businesses ineligible or precluded to receive federal or State of Ohio funding due to federal laws (including but not limited to the CARES Act) or Ohio laws
- Owners or partners currently undergoing bankruptcy proceedings
- Governmental entities
- Businesses with the following concerns:
 - Real estate holding businesses
 - “Side gig” or “hobby” businesses (not your primary source of income)
 - Gambling businesses, including casinos, racing operations or other activities whose purpose involves gambling
 - Lobbying organizations and political organizations subject to Internal Revenue Code 527
 - Sexually Oriented Businesses (live performances, product sales, items or materials)
 - Pawn Shops, Pawn Broker, Secondhand Goods Dealer

2.2 REQUIREMENTS AND LIMITATIONS

The vendor response must not exceed 25 pages, not included in the page count will be: cover letter, table of contents, forms and cost proposal. The cost proposal must be separate from the technical proposal. Proposal submissions must include the following sections in their proposals.

2.2.1 REQUIREMENTS AND LIMITATIONS

Only one application per cultural organization or cultural entity. No matching funds are required.

Criteria to receive funding include:

- Applicant has cancelled or will cancel or postpone public programming because of economic conditions and executive orders associated with the COVID-19 pandemic
- Applicant has demonstrated revenue loss since March 1, 2020
- Applicant has articulated and demonstrated an appropriate use of the funding in accordance with the stated purpose of the City of Dayton guidance
- Applicant agrees to the accountability of accepting and using the CSRF with appropriate financial document and fiscal oversight.

The City of Dayton Cultural Support funds can only be used to cover expenses during the period that begins on March 1, 2020, and ends on December 30, 2020, and that are necessary expenditures incurred due to the COVID-19 public health emergency.

Eligible expenditures must align with Federal CRF guidelines; see the [Coronavirus Relief Fund Guidance and Frequently Asked Questions](#) for more information.

2.2.2 ELIGIBLE EXPENDITURES

Per the [US Treasury Guidelines](#), funds can be used to cover expenses incurred by the public health emergency (COVID-19) that were not accounted for in the organization’s budget prior to March 1, 2020 but were incurred between March 1, 2020 and December 30, 2020. These include:

- Loss of income due to canceled or postponed public programming due to executive orders associated with the COVID-19 pandemic
- Expenses incurred due to executive orders associated with the COVID-19 pandemic; including
 - PPE and sanitation supplies, and related COVID-19 expenses
 - Facility alterations, cleaning expenses/PPE to meet reopening guidelines
 - Purchase of durable goods or services previously unbudgeted, such as staff telecommuting expenses, hard costs associated with move to virtual programming, etc.
- Payroll costs for permanent employees. This includes:
 - Salary, wages, commissions or tips
 - Payments required for the provisions of group health care benefits including insurance premiums
 - State and local taxes assessed on compensation

- For a sole proprietor or independent contractor: wages, commissions, and income or net earnings from self-employment on an annualized basis
- Operating costs
- Contract labor
- Supplier payments
- Rent, lease or mortgage payment (for real property used for business purposes, like storefront or warehouse, excluding personal residence)
- Rent, lease or purchase payment for business equipment (e.g., delivery vehicle; food truck; kitchen equipment; technology, payment, and communications systems and equipment)
- New or expanded technology applications and Wi-Fi services
- Utility payments for business properties (excluding personal residence)
- Cost of critical business operations (raw materials, marketing expenses, etc.)
- Interest on other business debt obligations incurred after March 13, 2020, excluding personal debt obligations

2.2.3 INELIGIBLE EXPENDITURES

In addition to eligibility requirements, there are clear limitations to the use of CRF. Funds may not be used for:

- Previously budgeted costs incurred outside of the covered period (March 1, 2020 to December 30, 2020)
- Performance or delivery of a good or service received prior to or after the covered period
- Damages covered by insurance
- Reimbursement to donors for donated items or services
- Expenses that have been or will be reimbursed under any federal program such as the reimbursement by the federal government pursuant to the CARES Act of contributions by States to State unemployment funds
- Workforce bonuses other than hazard pay or overtime
- Property taxes
- Capital improvement projects, if not a necessary expenditure incurred due to COVID-19
- Severance pay
- Legal settlements

2.3 APPLICATION AND DOCUMENTATION PROCESS

Organizations that would like to apply to receive funding must complete the application template provided (Attachment A), and email their completed application to BIDS@DAYTONOHIO.GOV. Organizations **must not** modify “The City of Dayton Cultural Support Relief Fund Application” template, they may only provide their responses within the template. **Any incomplete forms will not be considered.**

2.3.1 DOCUMENTATION

Documentation needed to complete the CSRF Application Process (all that are applicable to applicant):

- DUNS number
- Employer Identification Number
- Previous year federal business tax return (2019 if filed or 2018 if last year’s filing has not been completed)
- Expenses that the funds will be used for: rent, mortgage interest, payroll, inventory, operating expenses and working capital
- All applications for funding must be received no later than 10am EST on October 12th, 2020.

2.3.3 REPAYMENT

Funding from this grant program is subject to federal, state and local audit. If a determination is made that these grant funds were used in a manner inconsistent with program guidelines, for an ineligible expense or for expenses reimbursed by another federal, state or local grant program then the business or business owner will reimburse The City of Dayton or the federal government these funds.

SECTION 3 – SAMPLE GRANT AGREEMENT

THIS SECTION WILL BE RELEASED VIA ADDENDUM NO. ONE.



City of Dayton, Ohio
 Department of PMB
 The City of Dayton Cultural Support Relief Fund
 RFP No. 20-017PMB
 September 2020

EXHIBIT A – LETTER OF TRANSMITTAL

The undersigned hereby certifies that items furnished as a result of this proposal will be in full accordance with the City of Dayton specification applying thereto unless exception are stated above.

The Proposer’s name and address exactly as it would appear in a contract:

Entity Name: _____

Street Address: _____

City, State, Zip: _____

Proposer’s Phone Number: _____

Proposer’s Fax Number: _____

Proposer’s E-mail Address: _____

Form of Ownership Sole Proprietorship Franchise Partnership Corporation
 Joint Venture LLC Other (Specify): _____

If a corporation, state of incorporation: _____

Federal Identification Number (or SSN if sole proprietorship): _____

Please include your IRS Form W9 with your proposal.

I certify the proposing entity complies with City of Dayton Ordinance #30829-09 and the City’s Revised Code of General Ordinances Section 35.70 through 35.74 regarding Living Wages. Yes No

SIGNATURE: _____

PRINTED NAME AND TITLE: _____

By signing this page, you state that you are an authorized representative, and have reviewed and are presenting this proposal on behalf of your business entity. Please continue completing this exhibit on the next page.

EXHIBIT A – LETTER OF TRANSMITTAL (continued)

COMPANY PROFILE AND BACKGROUND

Name of Proposing Company: _____

Company’s Primary Business - State the proposer’s primary business, the number of years in the industry, and the number of employees assigned to these related activities:		
Primary Business	# of Years	# of Employees Assigned

If a corporation, state of incorporation: _____

Current Pending Lawsuits: Please provide all suits either with the City of Dayton or any other Municipalities and Government Agencies; including, but not limited to Federal, State, Local or other Municipalities and Governmental Agencies:

Local Office of Proposer: Office in/nearest to Dayton, Ohio: _____

Federal Identification Number (or SSN if sole proprietorship): _____

Key Personnel:

Name	Title	Contact Information: Mailing address, telephone number, fax number and email address	Designated as Primary Contact for the City of Dayton? YES / NO



City of Dayton, Ohio
 Department of PMB
 The City of Dayton Cultural Support Relief Fund
 RFP No. 20-017PMB
 September 2020

EXHIBIT B – GRANT APPLICATION

Instructions: Organizations must complete the application below in its entirety, *any incomplete forms will not be considered.* Organizations *must not* modify the application template and may only provide their responses with the template.

****Note:** For venues and programs owned by *State or Local Government* that had budgeted for operating costs prior to the pandemic, CARES Act Funds cannot be used as revenue replacement and usual operating expenses are not eligible.

<i>City of Dayton Cultural Support Relief Fund Application</i>	
PART I	
1. Organization Name (as registered with IRS – W9)	
2. DBA Organization Name (if applicable)	
3. Employer Identification Number	
4. DUNS Number	
5. Is the organization registered with System Award Management (SAM)	Yes/No
6. Is the organization registered as a 501(c)(3) non-for-profit?	Yes/No
7. Street Address	
8. City	
9. State, Zip	
10. County	
11. Website	
12. Primary Contact	
13. Role/Title	
14. Phone	
15. Email	
16. Secondary Contact	

17. Role/Title	
18. Phone	
19. Email	
20. Provide a brief overview of the organization, including an overview on the cultural activities. Please include the number of years the organization has been in operation as part of the overview.	
21. Provide a brief overview of the impacts of COVID-19 on your organization.	
22. How many people does the organization serve/impact annually?	
PART II	
23. Total revenue reported on 2019 tax return (2018 if last year's filing has not been completed)	\$
24. Total expenses on 2019 tax return (2018 if last year's filing has not been completed)	\$

PART III
The following questions assist organizations in determining the amount of funding the cultural organization may be eligible for. All expenses must fall within the covered period of March 1, 2020 to December 30, 2020. This section must be completed.
1a. Has, or will, your organization experience business interruption caused by required COVID-19 closures and/or reduced operations? If yes, continue to 1b. If no, STOP your organization is not eligible to receive funding.
1a Answer:
1b. If yes, what is the reimbursement cost of business interruption?
Calculate the costs of business interruption to your organization, including costs incurred such as payroll expenses, rent or mortgage payments for venue facilities, and operating costs. (Enter dollar figure below in 1b.)
1b Answer: \$

1c. Detailed description for costs of business interruption to your organization:
1c Answer:
2a. Is your organization incurring costs associated with venue reopening, alterations to facilities to meet reopening guidelines, extra cleaning costs or supplies, and the purchase of employee personal protective equipment (PPE)?
2a Answer:
2b. If yes, what is the reimbursement cost of reopening? (Enter dollar figure below in 2b.)
2b Answer: \$
2c. Detailed description for costs of reopening?
2c Answer:
3a. Has or will your organization transition services to alternative means or methods (i.e. online services or outdoor or limited attendance performances)?
3a Answer:
3b. If yes, what is the reimbursement cost of transiting services? (Enter dollar figure below in 3b.)
3b Answer: \$
3c. Detailed description for cost of transiting services:
3c Answer:

4a. Has or will your organization purchase durable goods or services during the covered period that were previously unbudgeted? These must be necessary expenses incurred due to the COVID-19 public health emergency.
4a Answer:
4b. If yes, what is the unbudgeted amount for these purchases? (Enter dollar figure below in 4b.)
4b Answer: \$
4c. Detailed description for the purchase of durable goods or services that were previously unbudgeted, and a necessary expense incurred due to the COVID-19 public health emergency?
4c Answer:
5. Total Amount of necessary expenditures incurred during covered period of March 1, 2020 to December 30, 2020? (add lines 1b + 2b + 3b + 4b and enter total below)
5 Answer: \$
6. Funds your organization received or accounted for as approved in the March 27, 2020 CARES Budget (if applicable – includes all sources including but not limited to PPP, NEA, NEH) Identify the source(s) and amount(s) below.
6 Answer: \$
7. Total Eligible Amount (subtract Line 6 from Line 5 and enter total below)
7 Answer: \$
8. Total Requested Amount from The City of Dayton Cultural Support Relief Fund (Line 7 and Line 8 may be the same)
8 Answer: \$
9. If Line 7 and Line 8 are different, list and describe additional costs
9 Answer:

PART III

In the space below this table, insert a copy of only the first page of the organization's 2019 tax return (Form 990). Submit 2018 if last year's filing has not been completed.

Figure 1 illustrates the first page of the organization's 2019 tax return (Form 990) that the organization must submit. Instructions: Delete the example (Figure 1) below and insert the organization's first page of the 2019 tax return in place

Form 990
 (Rev. January 2020)
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax
 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 www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2019
 Open to Public Inspection

A For the 2019 calendar year, or tax year beginning _____, 2019, and ending _____, 20

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
 Doing business as
 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
G Gross receipts \$ _____

F Name and address of principal officer:
H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)
H(c) Group exemption number ▶ _____

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ _____

K Form of organization: Corporation Trust Association Other ▶ _____ **L** Year of formation: _____ **M** State of legal domicile: _____

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: _____		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	
	6 Total number of volunteers (estimate if necessary)	6	
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	
b Net unrelated business taxable income from Form 990-T, line 39	7b		
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)		
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		
	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ _____		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)			
19 Revenue less expenses. Subtract line 18 from line 12			
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)		
	22 Net assets or fund balances. Subtract line 21 from line 20		

Part II Signature Block
 Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here
 Signature of officer _____ Date _____
 Type or print name and title _____

Paid Preparer Use Only
 Print/Type preparer's name _____ Preparer's signature _____ Date _____ Check if self-employed PTIN _____
 Firm's name ▶ _____ Firm's EIN ▶ _____
 Firm's address ▶ _____ Phone no. _____

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form 990 (2019)



City of Dayton, Ohio
 Department of PMB
 The City of Dayton Cultural Support Relief Fund
 RFP No. 20-017PMB
 September 2020

EXHIBIT C – PRODUCT MANUFACTURE LABOR STANDARDS: VENDOR COMPLIANCE FORM

By informal resolution 301-97, the City of Dayton is prohibited from purchasing, leasing, renting or taking on consignment goods for use or for resale by the City which were produced under sweatshop conditions.

The City of Dayton requests the following information concerning the products you intend to provide to the City because of this bid. This information will allow us to determine your products’ compliance with the standards outlined in informal resolutions 301-97.

We require that you make a good faith effort to ascertain the following about the factories which manufacture the products you intend to supply to the City and that you make information available to us for our verification of your claims.

Child Labor. The factory or producer does not employ anybody younger than the legal age as established by the jurisdiction in which such factory or producer is located for children to work or participate in the production.

Forced Labor. The factory or producer does not use forced labor of any kind-prison labor, indentured labor or bonded labor. However, goods produced by prisoners and/or patients as part of a formal rehabilitation or treatment program shall not be considered “forced labor” under the terms of this section.

Wages and Benefits. The factory or producer pays and/or provides at least the minimum wages and/or benefits as required by law in the jurisdiction in which the factory or producer is located.

Hours of Work. Employees are not required to work more hours than the maximum allowed by law for the jurisdiction in which the factory or producer is located.

Worker Rights. The factory or producer makes available to its employees such rights and procedures as required by law for the jurisdiction in which the factory or producer is located.

Health and Safety. The factory or producer provides at least the minimum safe and healthy working environment as required by law for the jurisdiction in which the factory or producer is located.

Notice to Employees. The factory or producer provides all applicable notices to its workers as required by law for the jurisdiction in which the factory or producer is located.

This compliance form must be submitted with your bid. If at any time your products are found to be out of compliance with these standards, or if you refuse to provide information to the City for our verification of compliance, the City reserves the right to terminate contracts for those products.

City of Dayton Ref. No.: _____
 Bidding Company: _____
 Address: _____

 Signature/Title: _____
 Federal I.D.#: _____
 Phone No.: _____
 Fax No.: _____



EXHIBIT D- BUSINESS INCOME TAX QUESTIONNAIRE

Business Income Tax Questionnaire

The following information is required to determine your City of Dayton, Ohio income tax liability, if any, and to setup your account if required.



Type of Tax Filing: (check all that apply)

- 1. Employee Withholding FEIN #
2. Corporate Earnings FEIN #
3. Individual Ownership Earnings SSN #
4. Partnership Earnings FEIN #

Company Name Phone #

Mailing Address City St. Zip

Local Business Address City St. Zip

Check the jurisdictions that we administer that you operate in:

- Dayton City Limits Dayton Wright Brothers Airport Dayton International Airport NONE

Date Business Started in Our Taxing Jurisdiction

Your Accounting Period? Calendar Year or Fiscal Year ending on

Withholding Information *Quarterly Withholding cannot exceed \$600.00

Do you have employees? Yes or No Date First Employee Started Working in Our Jurisdiction

Do you submit withholdings QUARTERLY* or MONTHLY?

Is this a courtesy withholding for your employees who are residents of the above cities only? Yes or No

Do you rent or sublease property or space in the Dayton jurisdiction to another business or individual? Yes No

If so list Names, Addresses, and Tax ID below. If Yes, do they have employees working at that location? Yes No

Do you use Subcontractors? Yes No If so list Names, Addresses, and FEIN or Social Security Numbers below.

If you have filed returns with our office before, show Name and Tax ID #s used, and for what tax years you filed.

Full name of Owner of Company

If this is a change of ownership, please provide the date of change, the name, address, and phone number of former owner

If you are not liable to pay taxes in our jurisdiction, please explain why.

Signature Title Date

Thank you for your cooperation in this request. For more tax information is available at www.daytonohio.gov

Please return by MAIL or by FAX to: City of Dayton, Division of Revenue & Taxation, 101 West 3rd Street, P.O. Box 2806, Dayton, Ohio 45401 (937) 333-3500 ~ Fax (937) 333-4280

CS-25c



INSTRUCTIONS FOR COMPLETION

Parties interested in doing business with the City of Dayton are encouraged to complete the following registration forms to register that interest with the City.

This process allows potential bidders and suppliers to be registered and entered into our system along with the Commodities and/or Services they can provide. This information is used to develop and maintain current and accurate lists of potential Suppliers to the City. To accomplish this task, we request that you complete the Vendor Application Form and the Commodity/Service List and return to the address or fax number provided below.

Send to:

City of Dayton
Division of Procurement
PO Box 22
Dayton OH 45401

-or-

Fax (937) 234-1600

-or-

Purchasing@daytonohio.gov

Reminders:

- Remittances should include both the Vendor Application and the Commodity/Service List forms.
- It is the Vendor's responsibility to maintain approved status in the City of Dayton's Affirmative Action Assurance (AAA) program. Once your Vendor Application is processed, you will receive an email notification from our online vendor portal (www.citybots.com) with a link to complete your AAA application and submit it for approval.
- It is the Vendor's responsibility to notify the City of Dayton at the address shown above of any changes to the Vendor's application.

If you have any questions concerning this form, you may contact the Division of Procurement at (937) 333-4030.

Copies of the Vendor Application and W-9 forms may be found on the City's web site at <http://www.daytonohio.gov/bid>. Please take the time to search for your commodity code(s).

It is the policy of the City of Dayton to promote full and equal business opportunity for all persons doing business with the City, and to promote commerce by assisting Minority Business Enterprises, Women's Business Enterprises (MBEs, WBEs), and Small Business Enterprises (SBEs) to actively participate in the City's procurement process for goods, services and construction. If you are a currently certified MBE, WBE, and/or SBE with the City of Dayton Human Relations Council, please include a copy of your certification letter with this application. If you are not certified and would like to apply for certification as MBE, WBE, and/or SBE please begin at <http://daytonhrc.org/business-technical-assistance/affirmative-action-assurance/affirmative-action-assurance-application/> and click on the Certification Packet link.



Melissa A. Wilson
Purchasing Agent

VENDOR APPLICATION

DATE: _____	BUSINESS PHONE NUMBER: _____	FEDERAL ID # OR SOCIAL SECURITY #: _____
E-MAIL ADDRESS (For Purchase Orders and Notifications): _____		FAX NUMBER: _____
1. APPLICANT'S NAME AND MAILING ADDRESS (for Bid Forms and Purchase Orders) _____ Company Name _____ Street Address _____ City, ST, Zip _____		2. MAILING ADDRESS FOR PAYMENTS <input type="checkbox"/> Check here if same as Bid Address _____ Company Name _____ Street Address _____ City, ST, Zip _____
3. VENDOR COMMODITIES HANDLED: See Commodity Code(s) from list located online at http://www.daytonohio.gov/DocumentCenter/View/587 and enter as many codes as needed separated by commas (i.e. 22222, 33333, 44444) <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div>		
4. PERSONS AUTHORIZED TO SIGN BIDS, QUOTATIONS, PROPOSALS (indicate if Agent) CONTRACTOR: Contractor acknowledges its employees are not public employees for purposes for Ohio Public Employees Retirement System ("OPERS") membership.		
NAME	OFFICIAL CAPACITY	TELEPHONE NO.
_____	_____	_____
_____	_____	_____
_____	_____	_____
5. Your equal opportunity "Affirmative Action Assurance" (AAA) application must be submitted online via www.citybots.com and approved status must be maintained with the City of Dayton's Human Relations Council (HRC). For information about your AAA status, please contact the HRC at (937) 333-1403. If you are a currently certified MBE, WBE, and/or SBE with the City of Dayton Human Relations Council, please include a copy of your certification letter with this application. If you are not certified and would like to apply for certification as		
6. MBE, WBE, and/or SBE please begin at http://daytonhrc.org/business-technical-assistance/certification/procurement-enhancement-program , and then click on the Certification Packet link.		
PROCUREMENT DIVISION USE		
<input type="checkbox"/> ONLY ADD	<input type="checkbox"/> REMOVE	<input type="checkbox"/> CHANGE
		DATE: _____
<input type="checkbox"/> PROCUREMENT: ADD COMMODITY CODE HEADER (###): _____		INITIALS: _____

**Request for Taxpayer
 Identification Number and Certification**

**Give Form to the
 requester. Do not
 send to the IRS.**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

Individual/sole proprietor or single-member LLC

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____

Note: 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 **not** 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.

Other (see instructions) ▶ _____

C Corporation

S Corporation

Partnership

Trust/estate

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

Requester's name and address (optional)

6 City, state, and ZIP code

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

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 *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number											
				-			-				
or											
Employer identification number											
				-							

Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. 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.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.