

MWBE APPLICATION GENERAL INSTRUCTIONS FOR NON-PROFITS

1. **FILLING OUT FORM**: Attached in **blue** you will find the instructions for the application. Each question on the application has a corresponding explanatory sentence in the 'Application Instructions.' Please fill out the application pursuant to the guidance contained in the 'Application Instructions.'
2. **DOCUMENTS**: Please note that the application includes documents that must be provided with the application. The application will not be considered complete and will not be reviewed unless all of the documents that must be filed with the application are submitted. Upon receipt of a completed application, the Finance and Administration Cabinet (FAC) will confirm its receipt by email via the application portal.
3. **INTERVIEW**: Upon submission of the application, staff from the FAC will conduct an application intake review and schedule an interview (if necessary). The purpose of the interview is to review additional documents to be submitted prior to the interview and to confirm that the applicant satisfies all criteria, particularly control, expertise and independence. The applicant should be prepared to provide the necessary documents and to answer any and all questions that FAC personnel may have.
4. **CERTIFICATION COMMITTEE**: After the application intake review is completed and the interview (if necessary) is completed and all documents have been deemed to be in order, the application will then be submitted for review to the Kentucky Business Certification Committee (Certification Committee) of the FAC. The Certification Committee shall review the application and the recommendation from the certification staff. The committee will certify, deny or defer the application. When the committee defers an application, certification staff shall respond to the questions posed by the Certification Committee.
5. **APPROVAL**: If the Certification Committee approves the application, then your Non-Profit will be certified as a Minority or Women Business Enterprise (MWBE) by the FAC for three (3) years from the date of approval. If the Certification Committee denies the application, you may appeal pursuant to number 6 (below) or reapply at a later date.
 - a. Annually on the anniversary date of the date of the certification, each certified Business shall send a document to the FAC representing there have been no material changes to the Business that would disqualify it from the certification program.
6. **APPEAL RIGHTS**: If your Non-Profit is decertified or denied certification and you believe that the decision is erroneous, you can appeal to the Secretary of the Finance and Administration Cabinet. You will need to file your appeal with the Office of Equal Employment Opportunity (EEO) and Contract Compliance of the FAC within 30 days of the denial of certification in order for your appeal to be accepted. An appeal form may be downloaded from the Kentucky Minority and Women Business Enterprise Certification website at mwbe.ky.gov and should be mailed, along with any supporting documentation to:

Attn: MWBE Appeals Processing
Office of EEO and Contract Compliance
200 Mero Street, 5th Floor
Frankfort, KY 40622

The Secretary of the Finance and Administration Cabinet will issue a Final Order based on the appeal form and supporting documentation you submit. The Secretary's Final Order may accept, reject, or modify a denial of certification, or other decision, issued by the Certification Committee. The Secretary's Final Order is the final determination of the Finance and Administration Cabinet, which may be appealed to the Franklin Circuit Court.

7. **OPEN RECORDS**: Please be advised that the application of your Non-Profit and any other documentation that you file with the FAC MAY be subject to disclosure to anyone who makes a proper request to the FAC under the "Open Records Act", KRS 61.800, et seq. Generally speaking, portions of your application and other documents that are considered "personal" (KRS 61.878(1)(a) or portions that may be "Confidential or Proprietary" MAY BE WITHHELD BY THE FAC. (See 10-ORD-001 & 99-ORD-220) The Office of General Counsel and the Office of EEO and Contract Compliance will attempt to rely on any DESIGNATION OF CONFIDENTIALITY OR PROPRIETARY INFORMATION made by you in responding to a valid Open Records request. Thus, you should clearly designate any information that you deem personal, confidential or proprietary as such, PRIOR to filing your application with the FAC. The FAC will also contact you to make you aware of any Open Records' requests that are made for your file. Please be further advised that the statements contained in this paragraph are general restatements of the law and are for informational purposes only.
8. **LEGAL ADVICE**: Please understand that there is no substitute for good counsel from your attorney of choice PRIOR TO FILING YOUR APPLICATION. Only an Attorney hired by your Non-Profit and acting on its behalf can render your Non-Profit timely and appropriate legal advice that can be relied upon by your Non-Profit.
9. **APPLICATION PROCESSING**: Only applications submitted via the online application portal will be processed. Paper application submissions are no longer accepted.

The Finance and Administration Cabinet treats all applicants in the same manner to ensure equal, fair treatment. For this reason, your completed application will be reviewed and processed in the order of its receipt. Failure to provide all necessary information and documentation as required shall constitute the basis for denying certification.

APPLICATION INSTRUCTIONS

Section I. Program Eligibility

1. Majority control means at least 51% owned by a woman or racial/ethnic minority (note: racial/ethnic minorities are African American, Hispanic American, Asian Pacific American, Subcontinent Asian American or Native American).
2. Please verify that the minority and/or women directors are citizens of the United States or Lawfully Admitted Permanent Residents of the United States.
3. Please verify that the Non-Profit is located in Kentucky.

4.
 - a. Has the non-profit been operational for at least one full year (365 days)? If so, check 'yes'.
 - b. Enter the date operations started.
5. Has the Non-Profit been continuously operating at least one year (365 days), either calendar or fiscal, as evidenced by federal tax returns and other Non-Profit records? If so, check 'yes'.
6. Have the minority or women directors filed a federal Non-Profit tax return consisting of one full year (365 days), either calendar or fiscal? If so, check 'yes'.

Section II. General Information

1. Please list the official, legal name of the Non-Profit (as filed with the Secretary of State) and any assumed name/DBA you wish to use for certification.

Please list the principal Non-Profit address and any mailing address, email address, phone, and website (if applicable).

Please list the primary contact for the application.
2. Please indicate under which legal structure your Non-Profit operates, i.e. Limited Liability Corporation, Corporation, Trust, Association, or Other (Please provide an explanation.)
3. Number of full and part-time employees employed by the Non-Profit.
4. Please list any additional locations for the Non-Profit.
5. Please indicate who stated the Non-Profit.
6. Please state why the Non-Profit was started.
7. Please indicate the primary type of Non-Profit (only one may be selected).
8. Briefly List of products or services of the Non-Profit if certified.
9. Please list your firm's 'North American Industry Classification System' code (also known as the 'NAICS' code). For a complete list of NAICS codes, please refer to the following link: <https://www.census.gov/naics/>
10. Identify the type of federal tax return filed by the Non-Profit for each of the last three (3) years, i.e. 990, 990EZ, 990N, or 990PF.
11. Please list your Federal Employer Identification Number (FEIN). **Do not list your social security number.**

Section III. Control

1. Please list the officers of the Non-Profit, race/ethnicity, gender and date of appointment.
 - The "Add+" button will allow you to add additional officers for each category.

2. Please list the Non-Profit Board of Directors.
 - The “Add+” button will allow you to add additional officers for each category.

Section IV. Affidavit of Certification.

This form must be completed and signed by the program eligible person holding the highest office in the non-profit.

Section V. Documents Checklist

A. Documents that must be provided with the Application

The “Add+” button will allow you to upload additional documents.

1. Please provide the Non-Profit’s Mission Statement or Purpose.
2. Please provide the appropriate corporate papers to provide evidence regarding who is running the non-profit organization, including but not limited to the Operating agreement, the Non-Profit By-laws, and any Organizational minutes.
3. Please provide a cover letter explaining the following:
 - Who set up the non-profit? (include race/ethnicity and gender of the founder(s))
 - Services provided
 - Beneficiaries
 - Makeup of the board of directors or controlling members to include race/ethnicity, gender, length of time on the board, date term expires
4. Compensation: Please provide the Annual Compensation of Officers, Directors, Trustees, Key Employees, Five (5) Highest Compensated Employees (other than an officer, director, trustee or key employee), and Independent Contractors, Officers, directors, trustees that include/may be individuals or organizations.

Refer to IRS Form 990 instructions for a definition of key employee.

5. Please provide the current resumes/curriculum vitae for all individuals claiming racial/ethnic minority or female status who serve as officers and directors of the Non-Profit. At a minimum, the resume/curriculum vitae must cover the past five (5) years and include places of ownership/employment with corresponding dates. **A biographical sketch will not be accepted.**
6. Please provide proof of racial/ethnic minority or female status for each officer and director of the Non-Profit, e.g. birth certificate, passport, tribal record/card, or driver’s license.
7. Please provide current documentation reflecting U.S. citizenship or permanent residency for each officer and director, e.g. passport, birth certificate or residency documents.
8. List the average hours per week worked by Officers, Directors, Trustees, Key Employees, Five (5) Highest Compensated Employees and Independent Contractors.
9. Copy of 501(c)(3) Determination Letter from the U.S. Internal Revenue Service.

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If you have any questions, please call us at 502-564-2874; for the hearing impaired, please call the Kentucky Relay Service at 800-648-6056 or 711.

Email inquiries can be sent to: Finance.MWBE@ky.gov