GEORGIA EMERGENCY MANAGEMENT AND HOMELAND SECURITY AGENCY STATE Of GEORGIA

FUNDS FOR PROTECTION OF COMMUNITIES (FPC) GRANT PROGRAM

APPLICATION FORM

The Funds for Protection of Communities (FPC) grant was created by the Georgia General Assembly ito address the growing problem of attacks on nonprofit organizations in communities in Georgia – which far too often have become targets of hate-motivated violence and threats, particularly houses of worship. The FPC grant provides funding for active security measures aimed at defending against and preventing hate crimes, acts of terrorism, and attacks by extremist groups, including the expenses borne by additional security personnel.

The FPC is a competitive grant, and all prospective applicants must develop a formal Investment Justification ("IJ") that addresses each initiative proposed for funding via this FPC application. These IJ must demonstrate how proposed projects address gaps and deficiencies in current security programs and defensive capabilities. Additionally, IJ must demonstrate the ability to provide enhancements consistent with the purpose of the program and guidance set forth in the U.S. Department of Homeland Security's Nonprofit Security Grant Program (NSGP), available at https://www.fema.gov/fact-sheet/department-homeland-security-dhs-nsgp-notice-funding-opportunity-nofo-fiscal-year-2025. Applicants must ensure that IJs are consistent with the guidelines outlined throughout this application.

Eligibility: *Eligible organizations are registered 501(c)(3) nonprofits or otherwise are organizations as described under 501(c)(3) of the Internal Revenue Code (IRC) and tax-exempt under section 501(a) of the IRC, a*nd which have been disproportionately affected by a hate motivated violence and terroristic or violent extremism acts and threats. At the time of the application, the organization must demonstrate that it is a domestic (non-foreign) organization that can legally operate in Georgia, and the facility for which it seeks FPC grant funding is physically located in the State of Georgia. *More information on tax-exempt organizations can be found at: https://www.irs.gov/charities-non-profits/charitable-organizations.*

- This is a reimbursement grant. The period of performance is **October 1. 2026 through June 1, 2027**
- An eligible organization may only apply for one facility/ location. The award cap per applicant is $150,000. Application requesting more the $150,000.00 will not be considered.
- Funds will be allocated competitively based on risk analysis, effectiveness, and integration with broader State and local preparedness efforts. Applications will be reviewed by Georgia Emergency Management and Homeland Security Agency (GEMA/HS) security experts for completeness, adherence to programmatic guidelines, feasibility and how well the described expenditures address identified risk.

The FPC grant mirrors the federal NSGP grant with some key differences:

- Emphasis is placed on houses of worship and their core operations and facilities which may include cultural landmarks and museums, pre-K, K-12 schools, after care programs, and senior living facilities.
- Unlike the federal NSGP grant, the FPC grant allows for the hiring of off-duty state, county, or municipal active law enforcement officers pursuant to the respective state and local regulations or security officers registered and licensed in the State of Georgia. Only costs for security personnel that fit the above description will be eligible for reimbursement under the FPC grant.
- Under special conditions, the use of security personnel may be used for off-site events within the geographic boundaries of the State of Georgia.
- Unlike the federal NSGP grant, institutions may not take 5% Management and Administration (M&A) costs as part of their award. All award costs must go toward essential security needs.

ALL APPLICATIONS MUST BE SUBMITTED TO GEMA/HS AS COMPLETED ADOBE PDF FILES **NO LATER THAN 11:59 P.M. October 30, 2026**. INCOMPLETE OR LATE APPLICATIONS WILL NOT BE ACCEPTED. All applications must be submitted via the ga.emgrants.com portal. Applicants should contact GEMA/HS at HSGrants@gema.ga.gov with any questions.

Total amount request : $_____ **FPC has a maximum award of $150,000.00 Application requesting more the $150,000.00 will not be considered.**

Does the applicant meet the eligibility requirements detailed above? ◉ Yes ○ No

PART I. NONPROFIT ORGANIZATION APPLICANT INFORMATION

Identify the following:

LEGAL NAME OF THE ORGANIZATION

Please list the physical address of the facility. *One investment justification per facility.*	STREET			
	CITY	STATE	ZIP CODE	COUNTY

Is the building owned, or are you leasing/renting?
☐ Leasing ☐ Renting ☐ Owned

If leasing or renting, do you have the owner's permission to make the proposed security enhancements? ☐ Yes ☐ No

At the time of application, is the organization actively occupying and functioning out of the location listed above? ☐ Yes ☐ No

Are you the only nonprofit operating in/from this facility/building? ☐ Yes ☐ No

Note: Only one nonprofit can apply per building/facility/physical structure/address. However, the request and subsequent security enhancements may benefit nonprofits who cohabitate/operate in/from the same location. Multiple requests for FPC funding from the same physical address/building/facility/structure will all be deemed ineligible.

If "No," please explain how the proposed security enhancements benefit both you and the other organization(s).

Based on your mission statement, please summarize your organization's mission, ideology, and/or beliefs.

What is the primary organization type?

Please select one of the following Ideology-based/ Spiritual/ Religious organizations:

If "Other," please describe the type of organization below.

Please select the function that best describes the organization:

Please select the organization's primary affiliation:

Note: Please select the main religious affiliation that describes your organization. If the organization is a denomination of an affiliation, please select the corresponding affiliation from the provided list instead of "Other." If your organization has NO religious affiliation, please select "None/ Unaffiliated." There is NO scoring preference given to certain affiliations or lack thereof.

If "Other," please describe affiliation.

Does the organization have a Unique Entity ID (UEI) Number? ☐ Yes ☐ No

If "Yes," please provide the UEI Number for the organization: _____

*A nonprofit organization does not need to have a valid UEI at the time of application but **must** have a valid UEI at the time grants are awarded in order to receive FPC funds.*

State funding requested under the FCP:

PART II. BACKGROUND INFORMATION (20 POSSIBLE POINTS OUT OF 50)

Please describe (if applicable) this location's symbolic value as a highly recognized local or historic institution/ landmark that renders the site as a possible target of terrorism or other extremist attack. (10 Points)

Is the nonprofit entity affiliated with a house of worship or otherwise defined as an ideological/spiritual/religious organization? Yes/No (5 points)

YES ◉ NO ○

Will the FPC grant be utilized for the protection of the house or worship or their core operations and facilities which may include pre-K, K-12 schools, after care programs, and senior living facilities? Yes/No (5 points)

YES ◉ NO ○

PART III. RISK (15 POSSIBLE POINTS OUT OF 50)

GEMA/HS defines risk as the product of three principal variables: **Threat**, **Vulnerability**, and **Consequence**. In the space below, describe the risk(s) faced by your organization specifically in terms of the A) Threats, B) Vulnerabilities, and C) Potential Consequences of an attack.

A) **Threat**: Defined as an "action that has or indicates the potential to harm life, information, operation, and property." In considering Threat, the applicant should discuss the identification and substantiation of prior threats or attacks specifically against the organization for which this application seeks to support, to include closely related organizations by either type, location, population served, facility characteristics, events or activities or shared ideology or mission. Prior threats and attacks of closely related organizations may include those that are located inside of the State, nationally, or internationally.

Descriptions should include findings from an independent threat assessment or risk assessment; police reports from any material security incidents that were reported; and any insurance claims specific to the location being applied for including dates of specific threats.

Please describe the current, ongoing, or recent event(s) within the past 3 years in which your organization has been disproportionately affected by a material increase in illegal acts of hate-motivated violence and terrorist or violent extremism acts and threats based both on events abroad and domestically, including, but not limited to, increased number of credible bomb threats, physical assaults, vandalism, and forms of illegal harassment creating a fear for safety and well-being. (3 points)

Please detail whether the organization has received a specific threat to the organization via mail, email, social media or phone calls. (2 points)

Please detail whether a hate crime or hate motivated act has been taken against the organization which has negatively impacted its security in the past 3 years. (2 points)

B) **Vulnerabilities**: Defined as "physical features or operational attributes/practices that render an organization open to threat". Please describe the organization's susceptibility to destruction, incapacitation, or exploitation by a terrorist or other extremist attack. (4 points)

Describe the organization's security-focused Emergency Operation Plan with an overview of elements of the plan. The plan may be requested in its entirety as part of the application review process.

C) **Potential Consequences**: Defined as the "effect of an event, incident, or occurrence." Please describe the potential negative effects on the organization's assets, systems, and/or function if damaged, destroyed, or disrupted by a terrorist or other extremist attack. Make note of when the consequences would be of greatest concern (specific times of the week, month, or year, or high-profile events) where additional security personnel would be most needed. The applicant should consider potential consequences in the following areas: life safety, interruption or suspension programs, services, meetings, worship services, educational activities, or community activities, damage or destruction of buildings, equipment, vehicles, security systems, or other essential property, increased security, and recovery, effects on individuals and communities that depend upon the organization's services, programs, facilities, or resources, fear, trauma, reduced confidence, or a perception that the organization or surrounding community is no longer safe, potential cascading impacts resulting from prolonged closure, displacement of personnel, interruption of services, loss of access to the facility, or disruption of community activities. (4 points)

PART IV. IMPACT - USE OF SECURITY PERSONNEL (10 POSSIBLE POINTS OUT OF 50)

Section IV: In this section, describe how FPC funds will be used for: (1) the hiring of new, or additional, off-duty state, county, or municipal active law enforcement officers pursuant to the respective state and local regulations; or, (2) security officers registered and licensed in the State of Georgia. The use of other personnel for security purposes that do not fit the above description is ineligible for this program, particularly the use of security personnel for municipally required traffic control services in and out of the organization's facility. (5 points)

Each row (below) should represent the use of "1" resource whether it is full time or part time.

For the responses below, please provide the name/ address/ contact person/ and contact information for the municipal agency (or agencies) that would be utilized with the awarded FPC grant funds. The information provided in this section shall be used as the "approved provider(s)".

NEW/ ADDITIONAL	VULNERABILITY TO BE ADDRESSED	HOURS/ WEEK	WEEKS/ YEAR	AVERAGE RATE	TOTAL COST
				TOTAL	

PROJECT MANAGEMENT

Who will manage the project? Include the name, phone number, email address, and experience of the project manager(s) (2 points).

Please assess your project management plan/approach. Assessment could include challenges to the effective implementation of this project and the coordination of the project with State and local homeland security partners.

PART VI. IMPACT (3 POSSIBLE POINTS OUT OF 50)

Please describe the measurable outputs and outcomes that will indicate that this Investment is successful at the end of the period of performance. (3 points)

FUNDING HISTORY AND PROJECT MANAGEMENT (5 POSSIBLE POINTS OUT OF 50)

If the nonprofit organization has previously received funding through the federal NSGP, provide the funding amount, funding year, and the investment type. (5 points)

Has the organization received federal NSGP funding in the past? ☐ Yes ☐ No

NOTE: The fact that an organization previously received federal NSGP funding will not prohibit that organization from receiving FPC funding, but it will be used to ensure that the organization is qualified for and has received prior vetting for security funding from other organizations or a government entity. A prior history of misuse of federal grant funding will result in a 15-point deduction on the overall grade of this application and if the misuse was severe may result in disqualification.

Please provide the MOST RECENT fiscal year in which the nonprofit received federal NSGP funding: _____

If "Yes," please list the year(s), amount(s), and Project(s)/Investment(s). (Example: FY20 / $150K / CCD Camera System and Lighting.)

APPLICANT CONTACT INFORMATION
This application was completed by:

☐ By clicking this box, I certify that I am an employee or affiliated volunteer on behalf of the nonprofit organization or have been hired by the nonprofit organization to apply on their behalf for the Funds for Protection of Communities Grant Program.	
FULL NAME	POSITION/TITLE
EMAIL	WORK PHONE