



GUAM ECONOMIC DEVELOPMENT AUTHORITY  
*Qualifying Certificate  
Community Contribution*  
**GRANT PROGRAM**

***SERIES 8***

The Guam Economic Development Authority (GEDA) has established a Qualifying Certificate Community Contribution (QCCC) Grant Program and is encouraging eligible applicants to support our local community by providing annual grant funding to be used to support eligible projects that will benefit our island community.

THIS APPLICATION WORKBOOK CONTAINS 6 TABS

**TAB 1 - Applicant Information**

**TAB 2 - Mission Statement**

**TAB 3 - Organizational Capacity**

**TAB 4 - Use of Funds**

**TAB 5 - Project Description**

**TAB 6 - Form W-9**

Eligible applicants for the Qualifying Certificate Community Contribution Grant Program are encouraged to apply by filling out this application and attaching all required documents. QC beneficiary, Guam Regional Medical City, is providing the funding for this grant series. **All grants are discretionary and subject to the availability of funds.**

**TAB 1 - APPLICATION**

This Grant Program is exclusively available to **NON-PROFIT ORGANIZATIONS** and **GOVERNMENT OF GUAM DEPARTMENTS OR AGENCIES**. **Application deadline is Thursday, June 04, 2026 at 5:00 pm**

Date of Application:	
Legal Name of Organization:	
Funding Request Amount:	
Year Founded:	
Mailing Address:	

Phone Number:	Tax Identification Number/Employer Identification Number (EIN):
Email Address:	
Website:	

<b>Grant Point of Contact Information</b>	<b>President/Executive Director Information</b>
Name (First, Last):	Name (Last, First)
Phone Number:	
Email Address:	

The following documents must be attached when submitting this application.

<b>FOR NON-PROFIT ORGANIZATIONS</b>	<b>FOR GOVERNMENT OF GUAM DEPARTMENTS &amp; AGENCIES</b>
<ul style="list-style-type: none"> <li>• 501 Certificate</li> <li>• Most Recent Form 990</li> <li>• Form W-9</li> </ul>	<ul style="list-style-type: none"> <li>• Form W-9</li> </ul>

Select a category this grant will be used for:

Health Care  
  Public Safety  
  Economic Development  
  Higher Education  
  Cultural Preservation

**Please ensure application is complete and required documents are attached.  
INCOMPLETE APPLICATIONS WILL NOT ADVANCE IN THE REVIEW PROCESS.**

**CERTIFICATION:** I hereby certify, I am the responsible signatory for the organization this application is for, and to the best of my knowledge, the provided information is true and correct.

\_\_\_\_\_  
 PRINT FULL NAME & TITLE

\_\_\_\_\_  
 SIGNATURE (Signature also required on TAB 4)

\_\_\_\_\_  
 DATE

## TAB 2 - MISSION STATEMENT

*Should you need additional space, attach as Appendix A.*



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Large empty rectangular box for the mission statement.

# TAB 3 - ORGANIZATIONAL CAPACITY

*Should you need additional space, attach as Appendix B.*



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# TAB 4 - USE OF FUNDS



*If the proposed project includes other funding, identify all sources and amounts.*

DETAILED PROJECT BUDGET:		
CATEGORY	DESCRIPTION	COST
ADMINISTRATION		
	<b>SUBTOTAL</b>	
TRAINING		
	<b>SUBTOTAL</b>	
SUPPLIES		
	<b>SUBTOTAL</b>	
SERVICE		
	<b>SUBTOTAL</b>	
FACILITY/ VENUE FEE		
	<b>SUBTOTAL</b>	
MARKETING & PROMOTIONS		
	<b>SUBTOTAL</b>	
OTHER EXPENSES		
	<b>SUBTOTAL</b>	
<b>TOTAL PROJECT BUDGET</b>		

I certify and acknowledge that the foregoing:

- 1) Represents how much the project will cost and how the money will be used.
- 2) The recipient shall obtain prior approval from GEDA for any budget or project revisions.

\_\_\_\_\_  
 PRINT NAME & TITLE

\_\_\_\_\_  
 SIGNATURE

# TAB 5 - PROJECT DESCRIPTION

*Should you need additional space, attach as Appendix C.*



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# Request for Taxpayer Identification Number and Certification

Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

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

**Before you begin.** For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

<b>See Specific Instructions</b>	<p>1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)</p> <hr/> <p>2 Business name/disregarded entity name, if different from above.</p> <hr/> <p>3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.</p> <p> <input type="checkbox"/> Individual/sole proprietor            <input type="checkbox"/> C corporation            <input type="checkbox"/> S corporation            <input type="checkbox"/> Partnership            <input type="checkbox"/> Trust/estate  <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) .....          Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.  <input type="checkbox"/> Other (see instructions) .....       </p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____</p> <p style="text-align: right;"><i>(Applies to accounts maintained outside the United States.)</i></p>
	<p>3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions..... <input type="checkbox"/></p>	
	<p>5 Address (number, street, and apt. or suite no.). See instructions.</p> <hr/> <p>6 City, state, and ZIP code</p> <hr/> <p>7 List account number(s) here (optional)</p>	<p>Requester's name and address (optional)</p>

## 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.

<b>Social security number</b>										
<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> </tr> </table>										
<b>OR</b>										
<b>Employer identification number</b>										
<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> </tr> </table>										

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

## Part II Certification

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.

**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.

<b>Sign Here</b>	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](http://www.irs.gov/FormW9).

## What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

## Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they