DEPARTMENT OF PUBLIC SAFETY

Research and Planning Division

RIGHT TO WORSHIP SAFELY GRANT PROGRAM INVESTMENT JUSTIFICIATION

As part of the Right to Worship Safely (RTWS) Grant Program application, eligible ideology-based/spiritual/religious section 501(c)(3) of the Internal Revenue Code (IRC) of 1986 or exempt from tax under section 501(a) of such code institutions/organizations must develop a formal Investment Justification (IJ) that addresses each initiative proposed for funding to support physical security enhancements and other security activities for the prevention, protection against, preparedness for, and response to terrorist threat(s) or other extremist attack(s). These IJs must demonstrate how proposed projects address high risk terrorist threat(s) and or extremist attack(s). Additionally, the IJ must demonstrate the ability to provide security enhancements consistent with the purpose of the program and guidance provided by the Arkansas Department of Public Safety (DPS). Nonprofit ideology-based/spiritual/religious institution/organization applicants must ensure that the IJ is consistent with all applicable requirements outlined below. Each IJ must be for one facility/location.

Arkansas DPS has developed guidelines that establish the required IJ content and helps ensure that submissions are organized in a consistent manner while addressing key data requirements. This form (Department of Public Safety Research and Planning Division Control Number: FY25 RTWS) may be used by nonprofit ideology-based/spiritual/religious institution/organization applicants to complete and submit their IJ. Failure to address these data elements in the prescribed format could potentially result in the rejection of the IJ from grant review consideration.

Applications should be submitted via email by the nonprofit ideology-based/spiritual/religious institution/organization to the Department of Public Safety Research and Planning Division as a completed Adobe file. Scanned copies will not be accepted. Nonprofit ideology-based/spiritual/religious institution/organization applicants should contact the DPS Research and Planning Division to get information on the application deadline and other application requirements.

PART 1. INSTITUTION/ORGANIZATION APPLICANT INFORMATION					
Identify the following:					
LEGAL NAME OF THE INSTITUTION	ORGANIZATIO:	N			
Please list the physical address of	STREET				
the institution/organization.					
C					
	CITY		STATE	ZIP CODE	COUNTY
One investment justification per					
institution/organization.					
Is the building owned, or are you least	ng/renting?	If lea	sing or ren	ting, do vou have the	owner's permission to make
<i>5</i> , <i>3</i>	the proposed security enhancements?				
□ Own □ Rent/Lease □ Yes □ No					
At the time of application, is the instit	utıon/organızatı	on acti	vely occup	ying and functioning	out of the location listed
above?					
					□ Yes □ No
A 4 1 C'' C' C' C' C' C' A' C 'I' A' I' I' I' O D V D V					
Are you the only nonprofit institution/organization of in/from this facility/building? \Box Yes \Box No					
Note: Only one nonprofit institution/organization can apply per building/facility/physical structure/address. However, the					
request and subsequent security protection enhancements may benefit nonprofit institutions/organizations who					
cohabitate/operate in/from the same location. Multiple requests for state assistance from the same physical					
address/building/facility/structure will be deemed ineligible.					

If "No," please explain how the proposed security enhancements benefit both you and the other institution(s)/organization(s) against terrorist threat(s) and/or extremist attack(s).			
Based on your mission statement, please summarize your institution/o and/or practices that may elevate the organization's risk for terrorist to	organization's mission, and implementation policies threat(s) and/or extremist attack(s).		
Please select the function that best describes the institution:			
☐ House of Worship	☐ Community Center		
☐ Middle School	□ Pre-School		
☐ High School	☐ Post-Secondary Education		
☐ Other Type of Educational Organization	☐ Social Services		
☐ Day Care	□ Camp		
□ Shelter □ Other	☐ Senior Services		
- U Oulei			

□ Jewish □ Christian
□ Hindu
□ Sikh
□ Buddhist
□ Other
Note: Please select the main religious affiliation that describes your institution/organization of faith. If the institution/organization is a denomination of affiliation listed above, please select the corresponding affiliation from the list of options instead of selecting "Other." There is NO scoring preference given to certain affiliations.
If "Other," please describe affiliation.
Eligible institutions/organizations must be registered 501(c)(3) nonprofits and must be described under 501(c)(3) of the Internal Revenue Code (IRC) of 1986 or exempt from tax under section 501(a) of such code. More information on tax-exempt institutions/organizations can be found at: https://www.irs.gov/charities-non-profits/charitable-organizations .
Is the institution/organization described under the 501(c)(3) Internal Revenue Code (IRC) of 1986 or exempt from tax under section 501(a) of such code and eligible to receive RTWS funds?
□ Yes □ No
Has your institution/organization received an active terrorist threat(s) and/or extremist attack(s) in the past 3 years?
□ Yes □ No
If, Yes," please describe the terrorist threat(s) and/or extremist attack(s) below. NOTE: Threats will be verified and evaluated by the Arkansas State Police for credibility. Your threat must be verifiable to be considered for funding.

PART II. BACKGROUND INFORMATION (5 POSSIBLE POINTS OUT OF 40)
Please describe (if applicable) this ideology-based/spiritual/religious institution/organization(s) justification as a highly recognized state institution/organization that renders it a high-risk target of terrorist threat(s) and/or other extremist attack(s).
attack(s).
Please select (if applicable) the current, ongoing, or recent (last 3 years) event(s) in which your institution/organization has been involved in prevention, protection, response, and/or recovery:
☐ Terrorist threat(s)
☐ Extremist attack(s)
□ Other
Please describe the institution/organization's role in prevention, protection, response, and/or recovery, specifically highlighting the efforts that demonstrate integration of nonprofit preparedness with broader state and local preparedness efforts.
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PART III. RISK (15 POSSIBLE POINTS OUT OF 40)

Department of Public Safety 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: In considering a threat, please describe the identification and substantiation of specific threats or attacks against the nonprofit ideology-based/spiritual/religious institution/organization or a closely related organization, network, or cell. Description can include findings from a threat or risk assessment, police report(s), and/or insurance claims specific to the location being applied for including dates of specific threats. B) Vulnerabilities: Please describe the institution/organization's susceptibility to destruction, incapacitation, or exploitation by a terrorist or other extremist attack. C) Potential Consequences: Please describe the potential negative effects on the institution/organization's assets, systems, and/or function if damaged, destroyed, or disrupted by a terrorist or other extremist attack.

PART IV.	FACILITY H.	ARDENING (9 POSSIBI	LE POINTS OUT OF 40)

Section IV-A: In this section, describe each proposed activity or investment (as selected in Section IV-B), identify the vulnerability that it addresses, and detail the cost associated with the activity or investment. For each activity/investment, include the quantity, estimated hourly rate or estimated price per unit, and proposed usage.

Note: This section should include narrative information about all costs listed in Section IV-B. The objective is for the information contained in this section to allow reviewers to validate the need of all costs in Section IV-B.

Allowable costs include facility hardening activities, such as planning and exercise related costs, contracted security personnel, and security-related training courses and programs limited to the protection of critical infrastructure key resources. Funding can also be used for the acquisition and installation of security equipment on real property (including buildings and surrounding property) owned or leased by the nonprofit ideology-based/spiritual/religious institution/organization, specifically in prevention of and/or in protection against the risk of terrorist or other extremist attack.

Section IV-B: In this section, list all proposed facility hardening equipment, projects, or activities as allowable per the Arkansas Legislative Council (ACL) Authorized Equipment List (AEL) and RTWS Grant Program (listed below). Provide the AEL category and title, list the vulnerability the equipment/project/activity addresses, and enter the estimated funding requested (round up to the nearest dollar).

Approved Equipment List (See below):

- Category 1: Security/Police presence/Contract Security Personnel
- Category 2: Security cameras/video cameras/lighting/motion sensors
- Category 3: Perimeter Protection (Gate/Fence)
- Category 4: Access control to buildings
- Category 5:Trip Wire Alarms
- Category 6: Vehicle Barriers

AEL CATEGORY & TITLE – EQUIPTMENT	VULNERABILITY TO BE	FUNDING
	ADDRESSED	REQUESTED
		(Round to nearest dollar)
	Total Funding Requested:	

PART V. MILESTONE (5 POSSIBLE POINTS OUT OF 40)

Provide descriptions and associated key activities that lead to the milestone event over the RTWS Grant Program period of performance.

Start dates should reflect the start of the associated key activities and end dates should reflect when the milestone event will occur. Milestones should reflect considerations for Enhanced Security against terrorist threat(s) and extremist

will occur. Milestones should reflect considerations for Enhanced Sec attack(s) when applicable.	urity against terrorist t	hreat(s) and extremist
(10 milestones maximum)		
KEY ACTIVITIES & CORRESPONDING MILESTONES	START DATE	COMPLETION DATE
PART VI. PROJECT MANAGEMENT (2 POS		
Who will manage the project? Include the name, phone number, email	l address, and experier	ce of the project manager(s).
Please assess your project management plan/approach. Assessment co	ould include challenges	to the effective
implementation of this project and the coordination of the project with		
PART VII. IMPACT (4 POSSIBLE P		
Please describe the measurable outputs and outcomes that will indicate	e that this investment	s successful at the end of the
period of performance.		

If the nonprofit ideology-based/spi		NG HISTORY itution/organization	has received federal security related		
grant funding in the past, provide t					
Has the institution/organization recei	ved federal security	related grant funding	in the past? \square Yes \square No		
If "Yes," please provide the most reco			ology-based/spiritual/religious		
institution/organization received fede	ral security related	grant funding.			
	NOTE: You must list the year(s), amount(s), and Project(s)/Investment(s) in the boxed provided below. (Example: FY20/\$150K/CCD Camera System and Lighting.)				
Federal Award Name	FY Award Year	Funding Amount	Project(s)/Investment(s)		
NOND	DOEIT ADDI ICA	 NT CONTACT INF(OPMATION		
NONE	ROFII AFFLICA	NI CONTACT INFO	ORMATION		
This application was written by (Plea	se select one of the	following options):			
☐ An employee of the aforemention	ed nonprofit ideolog	y-based/spiritual/relig	gious institution/organization		
☐ Consultant on behalf of the nonpro	ofit ideology-based/	spiritual/religious inst	titution/organization (at no-cost)		
☐ Contractor/grant-writer on behalf	of the nonprofit idea	ology-based/spiritual/	religious institution/organization		
☐ Affiliated volunteer on behalf of the	ne nonprofit ideolog	y-based/spiritual/relig	gious institution/organization		
By checking this box, I certify that I am an employee or affiliated volunteer on behalf of the nonprofit ideology-					
based/spiritual/religious institution/organization or have been hired by the nonprofit ideology-					
based/spiritual/religious institution/organization to apply on their behalf for the Right to Worship Safely Grant					
Program.					
FULL NAME		POSITION/TITLE	E		
EMAIL	MAIL WORK PHONE				