

U.S. DEPARTMENT OF AGRICULTURE

Rural Development

STRATEGIC ECONOMIC AND COMMUNITY DEVELOPMENT (SECD)

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a) and the Paperwork Act of 1995, as amended. The authority for requesting the following information is Section 9001 of the Agricultural Act of 2014 (Public Law 113-79). This information may be provided to other agencies, Internal Revenue Service, Department of Justice, or other State and Federal law enforcement agencies, and in response to a court magistrate or administrative tribunal. The provisions of criminal and civil fraud statutes, including 18 USC 286, 287, 371, 641, 1001; 1014, 15 USC 714m; and 31 USC 3729, may be applicable to the information provided.

Attached to this form are detailed instructions, the Forms Manual Insert (FMI), for each section. Please refer to the FMI when completing this form for guidance. Use attachments as necessary.

I. Applicant Information

A. Applicant Legal Name:

B. Applicant telephone number:

C. Applicant email address:

D. If applicable, type of Government entity (check all that apply):

State County Municipal Tribal Not applicable

II. Strategic Community Investment Plan (the Plan) Information

A. Name of the Plan:

B. Plan Date:

1. Effective date of the Plan:

2. Dates Plan is in effect:

C. Plan Contact Information (if more rows are needed, please provide an attachment with the requested information):

Name:	Telephone Number:	Email Address:
Organization:		
Title:		
Name:	Telephone Number:	Email Address:
Organization:		
Title:		
Name:	Telephone Number:	Email Address:
Organization:		
Title:		

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0570-0068. The time required to complete this information collection is estimated to average 8 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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D. Describe the jurisdiction of the Plan. In lieu of providing your own description, you may submit an excerpt from the Plan that describes the Plan's jurisdiction. If you are submitting an excerpt, please check this box:

E. Web site link for the Plan (if one is available):

III. Project Information:

A. Project Name:

B. In order to be eligible for SECD, the project must be "carried out in a rural area." Please answer both of the following questions. Note that the definition of "rural area" depends on the specific program you are applying for.

Is your project physically located in a rural area? Yes No

Do all of the beneficiaries of the services provided by the Project either reside in a rural area, if they are individuals, or are located in a rural area, if they are businesses? Yes No

C. If you are one or more of the Government entity types identified in Block I.D. above, attach a letter from the appropriate entity(ies) indicating that the Project is consistent with the Plan and that the Plan has been Adopted.

IV. Scoring Information for SECD:

A. Scoring of the Proposed Project

For each of the Plan's objectives that the proposed project directly supports, complete Attachment A. Information provided in Attachment A will be used to determine how many SECD points will be awarded in accordance with §1980.1020.

B. Scoring of the Plan.

Attach documentation that addresses each of the five areas described below. Information provided will be used to determine how many SECD points will be awarded in accordance with §1980.1020.

1. The Plan presents evidence of participation of multiple stakeholders in the jurisdiction of the plan, including local and regional partners
2. The Plan demonstrates leveraging of applicable resources
3. The Plan includes investments from strategic partners, such as private organizations, cooperatives, other government entities, Indian tribes and philanthropic organizations.
4. The Plan includes a variety of activities to facilitate the vision of rural communities for the future and has elements indicating a comprehensive and strategic approach to rural economic development
5. The Plan contains clear objectives with the ability to establish measurable performance metrics

V. Agency Coordination

A. Program area(s) for which SECD is being requested (check all that apply):

- Business and Cooperative Development - Rural Business Development Grant Program:
- Rural Community Facilities - Community Facilities Grant Program:
- Rural Community Facilities - Community Facility Loans:
- Rural Community Facilities - Community Programs Guaranteed Loans:
- Rural Utilities - Water and Waste Disposal Programs Guaranteed Loans:
- Rural Utilities - Water and Waste Disposal Loans and Grants:

B. Multiple Program Applications (if applicable). If you are submitting two or more program application for SECD in the same Federal fiscal year, provide the following information on each program application(s).

<p>1a. Project Name:</p>	<p>2a. Program Area(s) for which SECD is requested (check all that apply):</p> <p>Business and Cooperative Development <input type="checkbox"/></p> <p>Rural Community Facilities: <input type="checkbox"/></p> <p>Rural Utilities: <input type="checkbox"/></p>	<p>3a. Date application submitted:</p>
<p>1b. Project Name:</p>	<p>2b. Program Area(s) for which SECD is requested (check all that apply):</p> <p>Business and Cooperative Development <input type="checkbox"/></p> <p>Rural Community Facilities: <input type="checkbox"/></p> <p>Rural Utilities: <input type="checkbox"/></p>	<p>3b. Date application submitted:</p>
<p>1c. Project Name:</p>	<p>2c. Program Area(s) for which SECD is requested (check all that apply):</p> <p>Business and Cooperative Development <input type="checkbox"/></p> <p>Rural Community Facilities: <input type="checkbox"/></p> <p>Rural Utilities: <input type="checkbox"/></p>	<p>3c. Date application submitted:</p>

C. Previous Program Application Information: If you previously submitted one or more program applications for SECD, provide Attachment B for each previous program application.

VI. Certification of Documentation and Acceptance:

CERTIFICATION AND ACCEPTANCE

I certify that, to the best of my knowledge and belief, the information included with this Form RD 1980-88, including all attachments, are true and correct.

Signature

By: _____ (Officer, Member, Partner, Proprietor)

Title:

Date:

ATTACHMENT A – PLAN OBJECTIVES

Fill out Attachment A for each Plan objective that the proposed project directly supports. Make copies as needed.

I. Name of Plan Objective that the proposed project directly supports.

II. Description of Plan Objective. You may either describe the objective or attach excerpts from the Plan that describe the objective. If you are submitting excerpts, please check this box:

III. Description of how the proposed project directly supports the objective.

ATTACHMENT B – PREVIOUS PROGRAM APPLICATIONS

Fill out Attachment B for each program application previously submitted for SECD. Make copies as needed.

I. Date Application Submitted:	II. Project Name:	III. Program Area(s) for which SECD was sought (check all that apply): Business and Cooperative Development <input type="checkbox"/> Rural Community Facilities: <input type="checkbox"/> Rural Utilities: <input type="checkbox"/>	
IV. Was the project selected for funding? (check applicable box) <input type="checkbox"/> Yes. If you check this box, complete Block V <input type="checkbox"/> No. If you check this box, do not complete Block V			
V. Funded Project Information			
i. Name of program(s) that provided the funding.	ii. Date of Award	iii. Amount of Award	iv. Did any portion of the funding come from SECD reserved funds?
			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure

I. Date Application Submitted:	II. Project Name:	III. Program Area(s) for which SECD was sought (check all that apply): Business and Cooperative Development <input type="checkbox"/> Rural Community Facilities: <input type="checkbox"/> Rural Utilities: <input type="checkbox"/>	
IV. Was the project selected for funding? (check applicable box) <input type="checkbox"/> Yes. If you check this box, complete Block V <input type="checkbox"/> No. If you check this box, do not complete Block V			
V. Funded Project Information			
i. Name of program(s) that provided the funding.	ii. Date of Award	iii. Amount of Award	iv. Did any portion of the funding come from SECD reserved funds?
			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure

INSTRUCTIONS FOR FORM RD 1980-88

The following information is based on the programmatic requirements for the Strategic Economic and Community Development found in 7 CFR 1980, subpart K.

Form RD 1980-88 - Strategic Economic and Community Development

- Block I.A, B, and C Self-explanatory. If you are submitting this form at the same time as the program's application, to the extent this information is contained in the application for the program for which SECD is requested, please be sure to be consistent with that information.

- Block I.D The purpose of this question is to identify whether the applicant or any of the co-applicants are classified as one of these four government types. This information is needed because the authorizing statute requires such entities applying for SECD to include an indication of consistency with an adopted regional economic or community development plan. If you check one or more the government type blocks, then Block III.D. applies to you. If you and all co-applicants (if any) are not one of the four government types, check the Not Applicable box.

- Block II.A Provide the name of the strategic community investment plan (the Plan) that the project supports.
- Block II.B.1 Provide the date the Plan was put into effect.
- Block II.B.2 If the Plan is effective over a specified period of time, identify the time period. If the Plan is "open ended," leave this block empty.

- Block II.C Provide the name, telephone number, and email address of the primary contact of the Plan identified in Block II.A. If there are multiple contacts, please provide this information for each. Use additional sheets if necessary.

- Block II.D Describe the jurisdiction(s) covered by the Plan. Alternatively, you may submit an excerpt from the Plan that describes the Plan's jurisdiction. If you elect to submit excerpts from the Plan, please be sure to check the box in this block. This information is necessary because the criterion for collaboration is based, in part, on the collaboration of stakeholders within the jurisdiction of the plan.

- Block II.E Self-explanatory.
- Block III.A Self-explanatory.
- Block III.B Please answer both questions. At least one of the questions must be a "Yes" in order to be considered for SECD. See table below for cross-references to the definition of "rural area" in each underlying program.

The first question focuses on the physical location of the project and without regard as to who will benefit from the project. For example, a hospital built entirely in a rural area would meet this criterion regardless if it provides health care services to non-rural residents. In this scenario, you would check the "Yes" box. However, if any portion of this hypothetical hospital lies outside a rural area, then you would check the "No" box.

The second question focuses on who benefits (individuals or businesses) from the project and not the project's physical location. For example, consider a project designed to provide water to only residents of a rural area, where part of the project is located in a non-rural area and part of the project is located in a rural area. For this water project, you would check the "No" box to the first question because part of the project is located in a non-rural area. However, for this water project, you would check the "Yes" box to the second question because the beneficiaries of the services (in this case, the individuals) all reside in a rural area. If, however, some of the beneficiaries reside in a non-rural area, then this project would not be an eligible project under either metric.

Your program application should provide sufficient information for the Agency to determine the accuracy of your responses to these questions. If your program application does not provide sufficient information, the Agency may request you to provide such information in order to be considered for SECD.

Program	Rural Area Definition Cross-Reference
Community Facility Loans (7 CFR 1942, subpart A)	7 CFR 1942.17(b)(2)
Community Facilities Grant Program (7 CFR 3570, subpart B)	7 U.S.C. 1991(a)(13)
Community Programs Guaranteed Loans (7 CFR 3575, subpart A)	7 U.S.C. 1991(a)(13)
Water and Waste Disposal Programs Guaranteed Loans (7 CFR 1779)	7 CFR 1779.2
Water and Waste Loans and Grants (7 CFR 1780, subparts A, B, C, and D)	7 CFR 1780.3
Rural Business Development Grants (7 CFR 4280, subpart E)	7 CFR 4280.403 (see 7 U.S.C. 1991(a)(13)(A) and (D) <i>et seq.</i>)

Block III.C Provide a letter from the appropriate entity/entities who approved the Plan. Such entity may include an elected or appointed official. This block is only applicable to applicants who checked one of the government entity types in Block 1.D.

“Adopted” means that the Plan has been officially approved for implementation by the appropriate entity or entities in the jurisdiction(s) affected by the Plan (for example, a State, Indian Tribe, county, city, township, town, borough, etc.).

Block IV.A Self-explanatory

Block IV.B Attach descriptions on each of these areas. You may provide this information by submitting copies of the relevant pages from the Plan or providing your own descriptions. This information is particularly important because these areas are the five criteria, as set by the authorizing statute, by which the Agency will evaluate and score the Plan for purposes of assigning SECD points. Failure to provide this information or failure to provide sufficient detail may result in a lower SECD score.

“Philanthropic organization” means an entity whose mission is to provide monetary, technical assistance, or other items of value for religious, charitable, scientific, literary, or educational purposes.

Block V.A Self-explanatory.

Block V.B If you submit more than one program application for SECD in a single Federal fiscal year, you must fill out this block. In addition, you must submit a separate Form RD 1980-88 for each program to which you are or will be applying. If you are only submitting one program application for which you are requesting SECD points in a fiscal year, do not fill out this block.

Guidance for 1a, 2a, and 3a

A. If this form is submitted prior to submitting the program application:

- B.1a Enter the name of the project.
- B.2a Check the applicable Program Area. Refer to Block V.A. to identify the appropriate program area.
- B.3a Indicate the anticipated date the program application will be submitted. If you do not know when the program application will be submitted, enter “TBD”.

B. If this form is submitted with the program application:

- B.1a Enter the name of the project. Be sure that this name matches that in the program application.
- B.2a Check the applicable Program Area. Refer to Block V.A to identify the appropriate program area.
- B.3a Insert date the program application is being submitted.

Guidance for 1b, 2b, and 3b and subsequent rows

Complete these additional rows for each additional program application(s) that you submit or plan to submit during the same fiscal year. For example, suppose you submit on February 28, 2024, an application for a Rural Business Development Grant (RBDG) to assist a business and you are planning on submitting an application for a Community Facilities grant for a library in March 2024. In this instance, you will fill out 1a, 2a, and 3a with the information on the RBDG project and you will fill out the second row (1b, 2b, 3b) for the Community Facilities project. This would look something like what is shown below.

<p>1a. Project Name: Business</p>	<p>2a. Program Area(s) for which SECD is requested (check all that apply): Business and Cooperative Development <input checked="" type="checkbox"/> Rural Community Facilities: <input type="checkbox"/> Rural Utilities: <input type="checkbox"/></p>	<p>3a. Date application submitted: February 28, 2024</p>
<p>1b. Project Name: Library</p>	<p>2b. Program Area(s) for which SECD is requested (check all that apply): Business and Cooperative Development <input type="checkbox"/> Rural Community Facilities: <input checked="" type="checkbox"/> Rural Utilities: <input type="checkbox"/></p>	<p>3b. Date application submitted: March 2024</p>

If you do not know if you will be submitting two or more program applications during the same fiscal year for SECD, you do not need to fill out Block V.B. when submitting this form the first time in a fiscal year. However, if you do submit at a later date another program application for SECD, you must fill out Block V.B to show each prior program application submittal. To illustrate, suppose you submit a Water and Waste Disposal grant application for a water treatment facility on December 14, 2023 for SECD and at that time you do not plan on submitting another program application for SECD. However, in early 2024, you decide to submit a Rural Business Development Grant

(RBDG) application for a drug store project and submit that application on February 22, 2024. Block V.B. in this form would look something like this:

1a. Project Name: Drug store	2a. Program Area(s) for which SECD is requested (check all that apply): Business and Cooperative Development <input checked="" type="checkbox"/> Rural Community Facilities: <input type="checkbox"/> Rural Utilities: <input type="checkbox"/>	3a. Date application submitted: February 22, 2024
1b. Project Name: Water treatment facility	2b. Program Area(s) for which SECD is requested (check all that apply): Business and Cooperative Development <input type="checkbox"/> Rural Community Facilities: <input type="checkbox"/> Rural Utilities: <input checked="" type="checkbox"/>	3b. Date application submitted: December 14, 2023

Block VI. Original signature in blue ink required. Agency reserves the right to ask for additional information to determine project and applicant eligibility.

Attachment A – Plan Objectives

- Block I From the most current version of the Plan identified in Block II.A., provide the name of the Plan's objective that the proposed project directly supports.
- Block II From the most current version of the Plan identified in Block II.A., provide a description of the Plan's objective (as identified in Block I of Attachment A) that the proposed project directly supports. In lieu of filling out this block, you may submit copies of the relevant page(s) from the Plan that describe the objective. If you elect to submit excerpts from the Plan, please be sure to check the box in this block.
- Block III For the objective identified in Block II., provide a description of how the project directly supports the objective. Failure to provide sufficient information to demonstrate direct support of the objective may result in a lower SECD score.

Attachment B – Previous Program Applications

If you have submitted one or more program applications in a prior Federal fiscal year for SECD, provide the information in this attachment for each such previously submitted program application. Attach additional sheets as necessary.

- Blocks I and II Self-explanatory.
- Block III Check the applicable Program Area. Refer to Block V.A. to identify the appropriate program area.
- Block IV Self-explanatory.
- Block V.1 Enter the specific name(s) of the program(s) from which funds were provided. See Block V.A. for the specific program names.
- Block V.ii and iii Self-explanatory.
- Block V.iv Projects seeking SECD may have been funded using SECD reserved funding or using non-reserved funds from the program for which SECD is requested, or a combination of both. If the project received any funds from SECD reserved funds, check the "Yes" box. If the project was funded wholly from non-reserved funds of the program for which SECD is requested, check the "No" box.