

*I Mina'trentai Singko Na Liheslaturan Guåhan*  
**BILL STATUS**

BILL NO.	SPONSOR	TITLE	DATE INTRODUCED	DATE REFERRED	CMTE REFERRED	PUBLIC HEARING DATE	DATE COMMITTEE REPORT FILED	FISCAL NOTES	NOTES
393-35 (LS) As substituted in the Committee of the Whole	Amanda L. Shelton	AN ACT TO ADOPT RULES AND REGULATIONS FOR THE 'AYUDA / MANGÁFA' HELP FOR FAMILIES PROGRAM PURSUANT TO PUBLIC LAW 35-94.	8/28/20 2:57 p.m.			8/31/20 Waiver of Public Hearing Requirement			Exhibit A
	<b>SESSION DATE</b>		<b>DATE PASSED</b>	<b>TRANSMITTED</b>	<b>DUE DATE</b>	<b>NOTES</b>			
	8/10/20	AN ACT TO ADOPT RULES AND REGULATIONS FOR THE 'AYUDA / MANGÁFA' HELP FOR FAMILIES PROGRAM PURSUANT TO PUBLIC LAW 35-94.	9/2/20	9/2/20	9/14/20				



COPY

*I MINA'TRENTAI SINGKO NA LIHESLATURAN GUÅHAN*  
Thirty-Fifth Guam Legislature

September 2, 2020

The Honorable Lourdes A. Leon Guerrero  
*I Maga'hågan Guåhan*  
*Ufisinan I Maga'håga*  
*Hagåtña, Guam 96910*

Dear *Maga'håga* Leon Guerrero:

Transmitted herewith are **Bill No. 392-35 (LS)**; and **Substitute Bill No. 393-35 (LS)**, which were passed by *I Mina'trentai Singko Na Liheslaturan Guåhan* on September 2, 2020.

Sincerely,

AMANDA L. SHELTON  
Legislative Secretary

Enclosure (2)

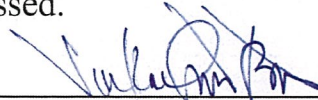
*Recvd  
9/2/2020  
POI W.P. Williams  
Vick O. [Signature]*



***I MINA'TRENTAI SINGKO NA LIHESLATURAN GUÅHAN***  
**2020 (SECOND) Regular Session**

**CERTIFICATION OF PASSAGE OF AN ACT TO *I MAGA'HÅGAN GUÅHAN***

This is to certify that **Substitute Bill No. 393-35 (LS)**, “**AN ACT TO ADOPT RULES AND REGULATIONS FOR THE *AYUDA I MANGÅFA* HELP FOR FAMILIES PROGRAM PURSUANT TO PUBLIC LAW 35-94,**” was on the 2<sup>nd</sup> day of September 2020, duly and regularly passed.



**Tina Rose Muña Barnes**  
**Speaker**

Attested:



**Amanda L. Shelton**  
**Legislative Secretary**

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This Act was received by *I Maga'hågan Guåhan* this 2<sup>nd</sup> day of September, 2020, at 1747 o'clock P.M.



**Assistant Staff Officer**  
***Maga'håga's Office***

APPROVED:

\_\_\_\_\_  
**Lourdes A. Leon Guerrero**  
***I Maga'hågan Guåhan***

Date: \_\_\_\_\_

Public Law No. \_\_\_\_\_

***I MINA'TRENTAI SINGKO NA LIHESLATURAN GUÅHAN***  
**2020 (SECOND) Regular Session**

**Bill No. 393-35 (LS)**

As substituted in the Committee of the Whole.

Introduced by:

Amanda L. Shelton  
William M. Castro  
Régine Biscoe Lee  
Kelly Marsh (Taitano), PhD  
James C. Moylan  
Louise B. Muña  
Tina Rose Muña Barnes  
Telena Cruz Nelson  
Sabina Flores Perez  
Clynton E. Ridgell  
Joe S. San Agustin  
Telo T. Taitague  
Jose “Pedo” Terlaje  
Therese M. Terlaje  
Mary Camacho Torres

**AN ACT TO ADOPT RULES AND REGULATIONS FOR  
THE *AYUDA I MANGÅFA* HELP FOR FAMILIES  
PROGRAM PURSUANT TO PUBLIC LAW 35-94.**

1           **BE IT ENACTED BY THE PEOPLE OF GUAM:**

2           **Section 1. Adoption.** *I Liheslaturan Guåhan* hereby adopts the Rules and  
3 Regulations, as amended and attached, as “Exhibit A” entitled “Rules & Regulations  
4 for the ‘*Ayuda I Mangåfa*’ Help for Families Program Pursuant to Public Law 35-  
5 94.”

# **“EXHIBIT A”**

*Rules & Regulations for the ‘Ayuda I Mangafa’ Help for Families  
Program Pursuant to Public Law 35-94*

1 *Ayuda I Mangafa Help for Families Program Proposed Rules and Regulations*

2  
3 **NOTE:** Pursuant to Section 3 of Guam Public Law 35-94, the Director of the  
4 Department of Revenue and Taxation (DRT) shall formulate rules and  
5 regulations for the implementation and administration of the Ayuda I Mangafa  
6 Help for Families Program.

7 **I Liheslaturan Guahan** finds that the federal and local government have  
8 provided direct cash payments to assist individuals and businesses. These aid  
9 packages, however, have left out substantial categories of individuals, leaving  
10 many families without the assistance that is needed, as these aid packages do  
11 not provide direct stimulus payments to families with dependents over the age  
12 of sixteen (16) years old. The current federal language also unjustly omits  
13 stimulus payments for individuals with disabilities over the age of sixteen (16)  
14 who are claimed as dependents by families.

15 It is, therefore, the intent of I Liheslaturan Guahan to provide funding  
16 assistance to Guam families with young adults, students, and disabled  
17 individuals who are claimed as dependents of these families.

18 The Director of the Department of Revenue and Taxation shall administer the  
19 Ayuda I Mangafa Help for Families Program (the Program) and the  
20 distribution of payments to families. In the case of an eligible individual, there  
21 shall be allowed a payment equal to the product of Five Hundred Dollars  
22 (\$500) multiplied by the number of eligible qualifying children within the  
23 family. Eligible individuals shall submit an application for approval by the  
24 Department of Revenue and Taxation.

25

1       **Section A. Who is an Eligible Individual:**

- 2           1. An eligible individual is a Guam taxpayer who has:
- 3               a. Filed a Guam Form 1040 Individual Income Tax Return for
- 4               tax year 2019, or
- 5               b. Received a Form SSA-1099 or Form RRB-1099 for Social
- 6               Security Benefits for calendar year 2019 and is not required
- 7               to file a Guam income tax return for tax years 2019 or 2018,
- 8               or
- 9               c. Not filed a Guam income tax return for tax years 2019 or 2018
- 10              since he or she did not meet the income threshold and is not
- 11              required to file a tax return for tax years 2019 or 2018, and
- 12           2. Must be a Guam resident in 2020, and
- 13           3. Has a qualifying child, as defined under Section B, who was claimed
- 14              as a dependent on their Guam Form 1040 individual income tax
- 15              return for tax year 2019 or their application filed with the
- 16              Department of Revenue and Taxation in the form as prescribed by
- 17              the Director under Section G, and
- 18           4. Whose adjusted gross income meets the threshold amount as stated
- 19              in Section D.

20       **Section B. Who is a Qualifying Child:**

21           A qualifying child is a child who must meet the relationship test, residency

22           test, age requirement, support test and joint return test for tax year 2019 as

23           described in subsections 1 through 5 in this Section and is claimed as a

24           dependent on the taxpayer's Guam Form 1040 individual income tax

25           return for tax year 2019 or the application filed with the Department of

26           Revenue and Taxation under Section G.

1           1. **Relationship Test:** The child must be your:

2           a. Son, daughter, adopted child, stepchild or a descendent of any  
3           of them, such as your grandchild, or

4           b. Brother, sister, half-brother, half-sister, stepbrother, stepsister  
5           or a descendant of any of them, such as a niece or a nephew,  
6           or

7           c. Foster Child - a child is an eligible foster child if the child is  
8           placed with the taxpayer by an authorized placement agency  
9           or by judgment, decree, or other order of any court of  
10          competent jurisdiction.

11          2. **Residency Test:** The child must have lived in the same main home  
12          as the taxpayer (or spouse if filing a joint return) on Guam for more  
13          than half of taxable year 2019,

14          a. In the case of temporary absences, the child is considered to  
15          have lived with the taxpayer during the periods when either  
16          the child or the taxpayer, or both, are temporarily absent from  
17          the home due to special circumstances. A nonpermanent  
18          failure to occupy the home by reason of illness, education,  
19          business, vacation, military service or a custody agreement  
20          under which the child is absent for less than 6 months in the  
21          tax year with the taxpayer, shall be considered temporary  
22          absence due to special circumstances.

23          3. **Age Requirement:**

24          a. At the end of 2019, the child must be younger than the  
25          taxpayer (or spouse if filing a joint return) and at least 17 and  
26          under 19 years of age, or



1 b. At the end of 2019, the child must be younger than the  
2 taxpayer (or spouse if filing a joint return) and at least 19 and  
3 under 24 years of age, and a full-time student, or

4 i. Full-time student shall mean a child who during each  
5 of the five calendar months during the calendar year in  
6 which the taxable year begins is a full-time student at  
7 an education organization or is pursuing a full-time  
8 course of institutional on-farm training under the  
9 supervision of an accredited agent of an educational  
10 organization.

11 ii. Education organization shall mean an organization  
12 which normally maintains a regular faculty and  
13 curriculum and normally has a regularly enrolled body  
14 of pupils or students in attendance at the place where  
15 its educational activities are regularly carried on.

16 c. At the end of 2019, the child must be permanently and totally  
17 disabled, regardless of age.

18 i. Permanently and totally disabled means an individual  
19 who is unable to engage in any substantial gainful  
20 activity by reason of any medically determinable  
21 physical or mental impairment which can be expected  
22 to result in death or which has lasted or can be expected  
23 to last for a continuous period of not less than twelve  
24 months. An individual shall not be considered  
25 permanently and totally disabled unless the individual  
26 furnishes proof of the existence thereof in such form

1 and manner, and at such times, as the Director may  
2 require as provided under Section H(6)(d).

3 4. **Support Test:** The child must have not provided over one-half of  
4 his or her own support for taxable year 2019,

5 a. The total amount of support provided by the child is compared  
6 to the total amount of support that the child received from all  
7 sources for tax year 2019. Support includes amounts spent to  
8 provide food and clothing, lodging, medical and dental care,  
9 education, and similar items.

10 5. **Joint Return Test:** The child must not be filing a joint return with  
11 their spouse for taxable year 2019.

12 **Section C. Qualifying Child of More than One Taxpayer:**

- 13 1. A child can meet the relationship test, residency test, age  
14 requirement, support test and joint return test to be a qualifying child  
15 of more than one taxpayer as defined under Section B. Although  
16 the child is the qualifying child of each of these individuals, only  
17 one eligible individual can treat the child as a qualifying child for  
18 payment under the Program. There shall only be one payment made  
19 for each qualifying child and there shall be no duplicate payments  
20 for the same qualifying child under the Program. If there are two or  
21 more taxpayers who claim the same qualifying child, determination  
22 of who will be entitled to receive payment for the qualifying child  
23 shall be based on the tiebreaker rules in subsection 2 of this Section.
- 24 2. To determine which individual can treat the child as a qualifying  
25 child to qualify for payment under the Program, the following  
26 tiebreaker rules under (a) through (e) of this Section shall apply.

- 1 a. If only one of the individuals is the child's parent, the child is  
2 treated as the qualifying child of the parent.
- 3 b. If the parents file a joint return or application together and can  
4 claim the child as a qualifying child, the child is treated as the  
5 qualifying child of the parents.
- 6 c. If the parents do not file a joint return or application, but both  
7 parents claim the child as a qualifying child, DRT will treat  
8 the child as the qualifying child of the parent with whom the  
9 child lived for the longer period of time during the year. If the  
10 child lived with each parent for the same amount of time,  
11 DRT will treat the child as the qualifying child of the parent  
12 who had the higher adjusted gross income (AGI) for the year.
- 13 d. If no parent can claim the child as a qualifying child, the child  
14 is treated as the qualifying child of the individual who had the  
15 highest AGI for the year.
- 16 e. If a parent can claim the child as a qualifying child but no  
17 parent does so claim the child, the child is treated as the  
18 qualifying child of the individual who had the highest AGI for  
19 the year, but only if that individual's AGI is higher than the  
20 highest AGI of any of the child's parents who can claim the  
21 child.

22 **Section D. Adjusted Gross Income Threshold Amounts:**

- 23 1. Taxpayers whose Adjusted Gross Income reported on the Guam  
24 Form 1040 individual income tax return for tax year 2019 exceeds  
25 the following maximum adjusted gross income shall not be eligible  
26 for this Program:

- 1 a. \$150,000 or more in the case of a joint return
- 2 b. \$112,500 or more in the case of a Head of Household; or
- 3 c. \$75,000 or more in the case of a taxpayer not described in
- 4 subsection a. or b. above.

5 **Section E. Filing of a Tax Return:**

6 Eligible individuals, who are required to file a Guam Form 1040 individual  
7 income tax return for tax years 2019 or 2018, must have filed a tax return  
8 with a qualifying child as defined under Section B and meet the AGI  
9 threshold requirements under Section D(1) to qualify for payment under  
10 the Program. Eligible individuals must file the Form 3594GU application  
11 under Section G and submit the required documents under Section H to  
12 qualify for payment under the Program.

13  
14 Eligible individuals who did not file a Guam income tax return since they  
15 did not meet the income thresholds and are not required to file a tax return  
16 for tax years 2019 or 2018, but do have a qualifying child for tax year 2019,  
17 must file the Form 3594GU application under Section G and submit the  
18 required documents under Section H to qualify for payment under the  
19 Program.

20 **Section F. Social Security Benefit (SSB) Recipients with a Qualifying**  
21 **Child:**

22 SSB recipients who are not required to file a Guam Form 1040 individual  
23 income tax return for tax years 2018 or 2019, but do have a qualifying child  
24 for tax year 2019, must submit their Form SSA-1099 or Form RRB-1099  
25 statements for calendar year 2019 along with the Form 3594GU  
26 application under Section G and the required documents under Section H

1 to qualify for payment under the Program. The AGI threshold  
2 requirements in Section D(1) will still apply to determine AGI eligibility.

3 **Section G. How to File a Claim for Payment:**

4 Form 3594GU application – Eligible individuals must register at the  
5 website specified by the Director of the Department of Revenue and  
6 Taxation to fill out and submit the application online, along with the  
7 required documents pursuant to Section H or must file an application and  
8 submit the required documents in such other form as prescribed by the  
9 Director.

10 **Section H. Additional Documents to be submitted along with Form**  
11 **3594GU application:**

12 The following documentation must be submitted with your Form 3594GU  
13 application to qualify for payment under the Program. Additional  
14 documentation may be required, as deemed necessary, upon verification of  
15 your completed application and the supporting documentation listed  
16 below. Other documents may be accepted if it establishes that your child  
17 meets the qualifying child requirements under Section B. These  
18 documents will be subject for review and verification.

- 19 1. Completed Form 8821, *Tax Information Authorization*, to authorize  
20 the Department of Revenue and Taxation to inspect and receive your  
21 Guam Form 1040 individual income tax return and return  
22 information for tax years 2019 and 2018 for the purpose of  
23 administering the Program, and  
24 2. Copy of your Form SSA-1099 or Form RRB-1099, Social Security  
25 Benefit Statement, for calendar year 2019, if you are an SSB

1 recipient who is not required to file a tax return for tax years 2019  
2 or 2018, and

3 3. Social Security number card(s) for you and each qualifying child,  
4 and

5 4. If your child was at least 17 and under 19 years of age as of  
6 December 31, 2019:

7 a. Birth Certificate(s) to verify your relationship to the child,

8 b. Court order or letter from an authorized placement agency, if  
9 claiming a foster child or adopted child, and

10 c. Guam Mayor's certification to show that you and the child  
11 lived together at the same address for more than half of tax  
12 year 2019.

13 5. If your child was at least 19 and under 24 years of age and was a  
14 full-time student as of December 31, 2019:

15 a. Birth Certificate(s) to verify your relationship to the child,

16 b. Court order or letter from an authorized placement agency, if  
17 claiming a foster child or adopted child, Guam Mayor's  
18 certification to show that you and the child lived together at  
19 the same address for more than half of tax year 2019, and

20 c. Official school records to show that the child was a full-time  
21 student for at least five months of tax year 2019 (the months  
22 do not have to be consecutive). The official school records  
23 must include the child's name, address of record and the dates  
24 the child attended the school during tax year 2019.

25 6. If your child was any age and was permanently and totally disabled  
26 as of December 31, 2019:

27 a. Birth certificate(s) to verify your relationship to the child,

- 1                   b. Court order or letter from an authorized placement agency, if
- 2                   claiming a foster child or adopted child,
- 3                   c. Guam Mayor’s certification to show that you and the child
- 4                   lived together at the same address for more than half of tax
- 5                   year 2019, and
- 6                   d. Official statement from a qualified physician obtained within
- 7                   the last three years certifying that the child is permanently and
- 8                   totally disabled. The child is permanently and totally
- 9                   disabled if both of the following apply: (1) the child cannot
- 10                  engage in any substantial gainful activity because of a
- 11                  physical or mental condition, and (2) it is medically
- 12                  determined that the condition has lasted or can be expected to
- 13                  last for a continuous period for at least a year or lead to death.

14                  **Section I. Deadline to Submit Application and Required Documents:**

15                  The application period for eligibility under the Program shall end 30 business  
16                  days after the date of implementation of the Program. Such date shall be  
17                  prescribed by the Director. Individuals who submit their applications after  
18                  the application period shall not qualify for payment under the Program.  
19                  Required documents must be submitted with the application to qualify for  
20                  payment under the program. Applications without required documents will  
21                  not be considered complete. No payment shall be made or allowed under the  
22                  Program after March 31, 2021.

23                  **Section J. Amount of the Payment:**

24                  A one-time payment of \$500 shall be allowed for each qualifying child  
25                  claimed as a dependent by the eligible individual (and spouse if filing

1 jointly) on their Guam Form 1040 individual income tax return for tax year  
2 2019 or their Form 3594GU application. Eligible individuals shall not  
3 include on the Form 3594GU application and shall not receive payment  
4 under the Program for qualifying children who have not attained age 17  
5 which the taxpayers received or are eligible to receive the recovery rebate  
6 credit (or economic impact payment) for these children pursuant to  
7 §6428(a)(2) of the Coronavirus Aid, Relief, and Economic Security  
8 (CARES) Act of 2020.

9 **Section K. Alternate Tax Year:**

10 If the taxpayer (and spouse if filing a joint return) has not filed a Guam  
11 Form 1040 individual income tax return for tax year 2019 at the time of  
12 submitting the application, said taxpayer may qualify for this Program if  
13 they filed a Guam Form 1040 individual income tax return for taxable year  
14 2018. The taxpayer may substitute tax year 2018 for tax year 2019 to  
15 determine eligibility for this Program and must file the Form 3594GU  
16 application under Section G and submit the required documents under  
17 Section H to qualify for payment under the Program.

18 **Section L. Funding**

19 The maximum amount allowed to be paid under the Program, not including  
20 administrative costs, is Ten Million Dollars (\$10,000,000).

21  
22  
23  
24





Office of the Speaker  
**TINA ROSE MUÑA BARNES**  
*I Mina' Trentai Singko Na Liheslaturan Guahan*



August 31, 2020

**MEMORANDUM**

**TO: All Senators**  
**FROM: Speaker Tina Rose Muña Barnes**  
**SUBJECT: Waiver of Public Hearing Requirement – Bill No 393-35 (LS)**

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Dear Colleagues:

*Buenas yan Håfa Adai!* Pursuant to Section 1.02(b)(1)(ii) of our Standing Rules, I hereby certify that emergency conditions exist involving danger to public health and safety.

Furthermore, the public hearing requirement for Bill No. 393-35 (LS) is waived in accordance with 2 GCA § 2103(a).

*Saina Ma'åse'*

**Tina Rose Muña Barnes**  
Speaker, 35<sup>th</sup> Guam Legislature



Address: 163 W. Chalan Santo Papa Hagåtña, GU 96910

Phone: (671) 477-2520/2521 / Email: [speaker@guamlegislature.org](mailto:speaker@guamlegislature.org) / Website: [www.guamlegislature.org](http://www.guamlegislature.org)



Office of the Speaker  
**TINA ROSE MUNA BARNES**  
*I Mina'Trentai Singko Na Liheslaturan Guahan*



**REQUEST FOR PUBLIC HEARING WAIVER**

**Bill No:** 393-35(LS)

**Authored By:** Amanda L. Shelton

**Bill Title** AN ACT TO ADOPT RULES AND REGULATIONS FOR THE 'AYUDA I MANGAFA' HELP FOR FAMILIES PROGRAM PURSUANT TO PUBLIC LAW 35-94.

**Does this Bill directly benefit the response efforts of the Government of Guam in its effort to protect the Health and Safety of the People of Guam from COVID-19?**

Yes  \_\_\_\_\_ No \_\_\_\_\_

**Does this Bill directly benefit residents of Guam during this economic crisis due to COVID-19?**

Yes  \_\_\_\_\_ No \_\_\_\_\_

**Does the enactment of this measure have a cost associated with it?**

Yes  \_\_\_\_\_ No \_\_\_\_\_

**If so, please provide the following:**

**Anticipated Cost:** TEN MILLION (\$10,000,000)

**Funding Source:** FY 2020 GENERAL FUND APPROPRIATIONS; FY 2020 SPECIAL FUND APPROPRIATIONS; 2% GENERAL FUND DEPOSIT REQUIREMENT PURSUANT TO 22904 OF ARTICLE 9, CHAPTER 22, TITLE 5 GCA; OR ANY FUNDS RECEIVED PURSUANT TO 13.101 OF ARTICLE 13.1, CHAPTER 1, TITLE 5, GCA

**Based on PL 35-36 will current government revenues/operations be impacted by the reduction of the anticipated funding source?**

NO  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Address: 163 W. Chalan Santo Papa Hagatna, GU 96910  
Phone: (671) 477-2520/2521 / Email: speaker@guamlegislature.org / Website: www.guamlegislature.org



Office of the Speaker  
**TINA ROSE MUÑA BARNES**  
 I Mina' Trentai Singko Na Liheslaturan Guahan



If so, please identify the estimated dollar amount reduction in revenues and a corresponding aggregate amount in appropriation reductions in PL35-36. Such reductions shall be specifically identified by fund source, by department/agency, and/or by program or miscellaneous appropriation. Is there consent or support from its respective Directors on this measure?

N/A

Should we need to assemble in the Committee of the Whole, have the respective directors and stakeholders been contacted? (Please list each individual party separately):

Name/Title	Agency	Yes/No
DAFNE MANSAPIT-SHIMIZU	DRT	YES

**OFB/BBMR:**

1) Does the Office of Finance and Budget **OR** the Bureau of Budget Management and Research concur that the statements made regarding the fiscal impact of this proposed measure are accurate?

Yes \_\_\_\_\_ No <sup>x</sup> \_\_\_\_\_

2) Are funds available in the specified funding source to support this measure?

Yes <sup>x</sup> \_\_\_\_\_ No \_\_\_\_\_

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Name & Signature of Certifying individual from BBMR or OFB:

Name	Agency & Title	Signature & Date

*Should this section be unattainable, please submit documentation that demonstrates an effort was made.*



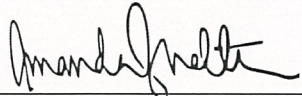


Office of the Speaker  
**TINA ROSE MUNA BARNES**  
*I Mina' Trentai Singko Na Liheslaturan Guahan*



The above information is true and correct. This bill addresses an immediate emergency and I am requesting that the public hearing be waived.

Name of Main Author/Senator Making a request to waive Public Hearing Amanda L. Shelton

Signature 

Date 08/27/2020

*Note: Public concerns/comments that have been received with regards to this measure, or any other pertinent document/information can be attached to this document.*

*Attachments:*

A. \_\_\_\_\_

B. \_\_\_\_\_

C. \_\_\_\_\_



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