



**REQUEST FOR PROPOSAL (RFP)
FOR
EXTERNAL INDEPENDENT AUDITING SERVICES**

Issued by:

The Greater Miami Convention & Visitors Bureau, Inc.
(GMCVB)

RFP Issue Date:

Monday, June 2nd, 2025

Deadline for Receipt of Response To RFP:

Thursday, July 17, 2025

RFP Award Date:

July 24, 2025

Initial Audit Period:

Fiscal Year October 1, 2024, to September 30, 2025

Submit Responses to:

RFP@gmcvb.com

TABLE OF CONTENTS

1. Introduction
2. Background
3. Scope of Work
4. Proposal Requirements
5. Selection Criteria
6. Proposal Submission
7. Timeline
8. Cone of Silence
9. Conflict of Interest & Ethics
10. E-Verify Compliance
11. Peer-Review Requirement
12. Technology & Audit Portal
13. Insurance & Indemnification
14. Appendices

1. INTRODUCTION

The Greater Miami Convention & Visitors Bureau (GMCVB), a not-for-profit corporation and the official Destination Marketing Organization (DMO) for Miami-Dade County and the City of Miami Beach, hereinafter referred as the “Bureau” is soliciting proposals from qualified certified public accounting firms with the necessary qualifications, expertise and resources to provide independent auditing and tax services and to deliver the services in accordance with the requirements of the agreement as detailed herein. The selected firm will conduct annual financial audits, starting with the fiscal year, October 1, 2024, to September 30, 2025, in accordance with generally accepted auditing standards. Proposals will be accepted from independent certified public accountant firms licensed to practice in the State of Florida and have offices located in Miami-Dade County. (Provide firm address and contact information.)

2. BACKGROUND

The Greater Miami Convention & Visitors Bureau is the official, accredited destination sales and marketing organization for Greater Miami and Miami Beach. A global leisure and business destination that delivers culturally rich, diverse, and innovative experiences inspiring boundless passion in visitors and residents alike. Its mission is to generate travel demand to Greater Miami and Miami Beach, to maximize economic impact to our community, ensure industry resiliency, and elevate the resident quality of life.

The GMCVB is a private, 501 (c) 6 not-for-profit, Florida Corporation. Our funding is derived from both private-sector and public-sector sources. The current year (FY 24-25) operating budget is approximately \$50 million dollars.

The GMCVB undergoes annual independent financial audits to ensure compliance with generally accepted accounting principles, compliance with our interlocal governmental partner contracts and to provide a reasonable assurance that the financial statements are accurate and complete.

The initial audit may begin prior to, or around the end of the fiscal year, and will cover the financial activities of the GMCVB from October 1, 2024, to September 30, 2025, the fiscal year. The initial term of the agreement will be for five (5) years, with options to renew for a subsequent (5) year term. During the entirety of the agreement, the CFO and Finance & Audit Committee may, at their discretion, conduct a periodic performance review of the audit services to ensure

compliance with the agreement and address new issues that may arise during the term of the agreement.

3. SCOPE OF WORK

The selected firm will be responsible for performing the following services:

1. **Annual Audit:** Conduct an independent financial audit in accordance with generally accepted auditing standards promulgated by the American Institute of Certified Public Accountants (AICPA).
2. **Financial Statement Preparation:** Provide an audited financial statement package, inclusive of all required financial statements, the auditor's opinion and all necessary disclosures and footnotes.
3. **Federal Tax Return:** Preparation of annual Form 990 - Return of Organization Exempt from Income Tax and Form 990-T – Exempt Organization Business Income Tax Return and any other forms as required for a complete filing.
4. **Internal Control Evaluation:** Assess the internal control structure based on the auditors' understanding of the control structure and assessment of control risk.
5. **Compliance Review:** Ensure compliance with all Interlocal Agreements and as applicable, federal, and state regulations. In addition, in the event the GMCVB receives a grant, ensure compliance with grant requirements.
6. **Management Letter:** If required, provide a management letter outlining findings, recommendations, and areas for improvement which would be characterized as material in nature.
7. **Required Communication Presentation:** Present audit findings to GMCVB's Finance and Audit Committee.
8. **Finance & Audit Committee:** Attend regularly scheduled meetings as needed or when invited to attend.

The audit must be completed, and the full auditors report must be issued on or before December 30 of the audit fiscal year end.

4. PROPOSAL REQUIREMENTS

Interested firms must submit a comprehensive proposal including the following information:

- **Firm Background & Experience:**
 - Overview of the firm, including years in business, size, and relevant experience with not-for-profit organizations.
 - Experience conducting audits of similar size organizations.
 - Experience and details of prior engagements with Destination Marketing Organizations.
 - The firm shall have no less than 5 years' experience working with not-for-profit organizations with operating budgets of \$30 million or greater.
- **Staff Qualifications:**
 - Listing of firm principals and staff assigned to the engagement.
 - Resumes of key personnel assigned to the audit.
 - Qualifications, certifications, and relevant experience of auditors.
 - Description of the firm's approach to professional development and training in non-profit auditing.
- **Audit Approach & Methodology:**
 - Outline of audit procedures and approach to risk assessment.
 - Timeline for audit completion, including key milestones.
 - Use of technology or data analytics in the audit process.
- **References:**
 - The firm shall provide a listing of at least three current or past not-for-profit clients with annual operating budgets similar in size to the GMCVB or with a minimum annual operating budget of \$30 million or greater.

- **Fee Structure:**

- The proposed fee will be inclusive of audit services and all Federal tax filing services.
- Detailed breakdown of proposed fees, including hourly rates, estimated total cost. The fee will be all inclusive and there shall be no added costs.
- Services beyond the scope of this proposal shall be negotiated separately, and independent of the audit and tax services.
- Selected firms will have the opportunity to become GMCVB Corporate partners and to also support the annual BHI HOT Fundraising program at a minimum level of Bronze Sponsorship throughout the entirety of the engagement period.
 - For Information on becoming a GMCVB Corporate Partner see below:
 - https://www.miamiandbeaches.com/getmedia/6f73982d-418f-418e-9588-fb012cd465c9/Corporate_Partner_Benefits.pdf
 - For Information on the BHI please see below:
 - <https://www.miamiandbeaches.com/about-gmcvb/bhi>

- **Conflict of Interest Disclosure:**

- Statement disclosing any potential conflicts of interest with GMCVB.

- **Additional Information:**

- Any other relevant information that demonstrates the firm's qualifications and capabilities.

5. SELECTION CRITERIA

Proposals will be evaluated based on the following criteria:

- Firm's experience with similar audits and organizations. (Up to 20 points)
- Staff qualifications and expertise. (Up to 20 points)
- Audit approach, methodology, and timeline. (Up to 20 points)

- Fee for Audit & Tax Services proposal. (Lowest fee 30 points)
 - Fees will be ranked in proportion to the lowest proposal.
 - Responsiveness, completeness of the proposal and local preference. (Up to 5 points)
 - Becoming a GMCVB Corporate partner and committing to supporting the annual BHI HOT fundraising program throughout the term of the agreement. (Up to 5 points)
-

6. PROPOSAL SUBMISSION

All proposals must be submitted via Dropbox. There shall be one PDF with the audit proposal and a second PDF with the detailed fee proposal. The complete proposal (both the technical and price proposals) must be received by the deadline for receipt of proposals as specified in the RFP timetable.

If there are any questions with this RFP, they may be submitted electronically or in writing by the noted due date.

All expenses involved with the preparation and submission of proposals to the Bureau, or any work performed in connection therewith, shall be borne by the Proposer(s). No payment will be made for any responses received, nor for any other effort required of or made by the Proposer(s) prior to commencement of work as defined by a contract approved by the Bureau.

Submission Deadline: July 17, 2025

Submission Format: Proposals must be submitted electronically in PDF format using Dropbox: RFP@gmcvb.com

7. TIMELINE

- **RFP Issuance: June 2, 2025**
- **Deadline for receipt of questions: June 23, 2025**
- **Pre-proposal conference & Location: GMCVB Offices, July 14, 2025**
- **Proposal Submission Deadline: July 17, 2025**
- **Evaluation/Selection process: July 18, 2025**
- **Oral presentations, if conducted: July 22, 2025**
- **Firm Selection and Notification: July 24, 2025**
- **Audit Commencement: Prior to, or after end of fiscal year, September 30, 2025**
- **Final Report Delivery: December 30, 2025**

8. Cone of Silence

To ensure fairness, all communications regarding this RFP must be directed to the designated RFP contact. A “Cone of Silence” is in effect from the date of issuance until the award is announced. No prospective proposer shall lobby, contact, or communicate with any GMCVB Board member, evaluation committee member, or staff about this procurement during that period. Any violation may result in disqualification.

9. Conflict of Interest & Ethics

All proposers must disclose any actual or potential conflicts of interest. GMCVB may disqualify any firm whose professional relationships pose a conflict with the independence required for this engagement. Ethics rules of the AICPA and Florida law apply.

10. E-Verify Compliance

GMCVB requires that all firms, contractors, and subcontractors register with and use the U.S. government's E-Verify system to verify the employment eligibility of new employees, per §448.095, Florida Statutes. Please label and attach as Appendix A.

11. Peer-Review Requirement

Proposers must provide their most recent AICPA peer-review report with a "pass" rating. Please label and attach as Appendix B.

12. Technology & Audit Portal

The selected firm must possess a secure, web-based portal or collaborative platform to exchange workpapers, schedules, and draft reports with GMCVB staff. Describe your system, security protocols, and experience integrating with ERP. Please label and attach as Appendix C.

13. Insurance & Indemnification

Please provide Certificate of Insurance showing evidence of coverage for Commercial General Liability Insurance on Occurrence form with limits of no less than \$ 1 million per Occurrence and \$ 3 Million Annual Aggregate, including Bodily Injury and Property Damage, both covering Premises and Operations and Products and Completed Operations. Policies must be Primary and Non-Contributory and include a Waiver of Subrogation in favor of GMCVB. Firm must hold GMCVB harmless of any liability arising out of the negligence of firm. GMCVB is to be named as Additional Insured.

b-) Firm must provide evidence of coverage for Professional Liability with limits of no less than \$ 1 Million per incident and \$ 3 Million Annual Aggregate. Defense Cost must be outside the limit. If policy is on Claims Made Form, please provide Retroactive Date. GMCVB must be listed as Certificate Holder.

c-) Firm must provide evidence of Workers Compensation Insurance in accordance with Florida Statutes 440 and Employer Liability limit of no less than \$ 1 Million / \$ 1 Million / \$ 1 Million. GMCVB must be listed as Certificate Holder.

Before contract execution, submit certificates of insurance. Please label and attach as Appendix D.

14. Appendices –

- **Appendix A:** E-Verify Registration Proof
- **Appendix B:** AICPA Peer-Review Report
- **Appendix C:** Audit Portal / Technology Description
- **Appendix D:** Certificate of Insurance
- **Appendix E:** GMCVB Draft Engagement Letter (for review)

We appreciate your interest in providing auditing and tax services to the Greater Miami Convention & Visitors Bureau. We look forward to reviewing your proposals.

APPENDIX A

E-VERIFY REGISTRATION UNDER SECTION 448.095, FLORIDA

1. Definitions:

“Contractor” means a person or entity that has entered or is attempting to enter into a contract with a public employer to provide labor, supplies, or services to such employer in exchange for salary, wages, or other remuneration. *“Contractor”* includes, but is not limited to, a vendor or consultant.

“Subcontractor” means a person or entity that provides labor, supplies, or services to or for a contractor or another subcontractor in exchange for salary, wages, or other remuneration.

“E-Verify system” means an Internet-based system operated by the United States Department of Homeland Security that allows participating employers to electronically verify the employment eligibility of newly hired employees.

2. Effective January 1, 2021, Contractors shall register with and use the E-Verify system in order to verify the work authorization status of all newly hired employees.

Contractor shall register for and utilize the U.S. Department of Homeland Security’s E-Verify System to verify the employment eligibility of:

- a) All persons employed by a Contractor to perform employment duties within Florida during the term of the contract; and
- b) All persons (including sub vendors/subconsultants/subcontractors) assigned by Contractor to perform work pursuant to the contract with the GMCVB. The Contractor acknowledges and agrees that registration and use of the U.S. Department of Homeland Security's E-Verify System during the term of the contract is a condition of the contract with the GMCVB; and
- c) Should vendor become the successful Contractor, by entering into the contract, the Contractor shall comply with the provisions of Section 448.095, Fla. Stat., "Employment Eligibility," as amended from time to time. This includes but is not limited to registration and utilization of the E-Verify System to verify the work authorization status of all newly hired employees. Contractor shall also require all subcontractors to provide an affidavit attesting that the subcontractor does not employ, contract with, or subcontract with, an unauthorized alien. The Contractor shall maintain a copy of such affidavit for the duration of the contract.

3. Contract Termination

- a) If the GMCVB has a good faith belief that a person or entity with which it is contracting has knowingly violated s. 448.09 (1) Fla. Stat., the contract shall be terminated.
- b) If the GMCVB has a good faith belief that a subcontractor knowingly violated s. 448.095. (2) Fla. Stat., but the Contractor otherwise complied with s. 448.095 (2) Fla. Stat. shall promptly notify the Contractor and order the Contractor to immediately terminate the contract with the subcontractor.

Company Name:
Authorized Signature:
Print Name:
Title
Date:
Phone:

STATE OF _____) COUNTY OF _____)

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this ____ day of _____, _____, by _____ on behalf of _____. He/she is personally known to me or has produced.

_____ as identification.

NOTARY PUBLIC

(Name of Notary Typed, Printed or Stamped)

Title or Rank

Serial number if any

APPENDIX B

AICPA Peer-Review Report

Please provide a copy of the latest AICPA Peer Review report.

APPENDIX C

Audit Portal / Technology Description

Describe your system, security protocols, and experience integrating with ERP.

Certificate of Insurance

Sample Certificate of Insurance CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YYYY) 06/02/2025
THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.		
IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).		
PRODUCER Producer Information Address Address State FL 12345	CONTACT Agency Contact PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS: INSURER(S) AFFORDING COVERAGE NAIC #	
INSURED Accounting Firm's Name Address Address State FL 12345	INSURER A: Insurance Name INSURER B: Insurance Name INSURER C: Insurance Name INSURER D: Insurance Name INSURER E: Insurance Name INSURER F: Insurance Name	
COVERAGES		CERTIFICATE NUMBER: CL256240953 REVISION NUMBER:
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.		
LINE LTR	TYPE OF INSURANCE <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	ADDL INSD INSD Y Y
POLICY NUMBER	POLICY EFF (MM/DD/YYYY) Effective Date	POLICY EXP (MM/DD/YYYY) Expiring Date
LIMITS	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (EA occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADY INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 WORKERS - COMP/OP AGG \$ 3,000,000 AUTOMOBILE LIABILITY ANY AUTO OWNED \$ AUTOS ONLY \$ HIRE \$ AUTOS ONLY \$ SCHEDULED AUTOS \$ NON-OWNED AUTOS ONLY \$ UMBRELLA LIAB \$ EXCESS LIAB \$ OCCUR \$ CLAIMS-MADE \$ DED \$ RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in FL) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N Y N/A Y POLICY NUMBER Effective Date Expiring Date E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000 Annual Aggregate Per Occurrence \$ 3,000,000 1,000,000	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Greater Miami Convention & Visitors Bureau, Inc. must be included as an additional insured when required by written contract and be Primary and Non-Contributory. A Waiver of Subrogation with reference to the General Liability and Workers' Compensation policies. 30 days notice of cancellation except for 10 days for non-payment of premium shall be given to the certificate holder.		
CERTIFICATE HOLDER Greater Miami Convention & Visitor Bureau, Inc. DBA: GTR Miami CV 201 S Biscayne Blvd Suite# 2200 Miami FL 33131		CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Agents Insurance Signature

APPENDIX E

Draft Engagement Letter

Please attach a typical client engagement letter that would be similar to what the GMCVB and firm would enter into.