



Economic Opportunity Grant Program

Microbusiness Grants

Round 1

Funded in part through a Grant from the California Office of the Small Business Advocate.

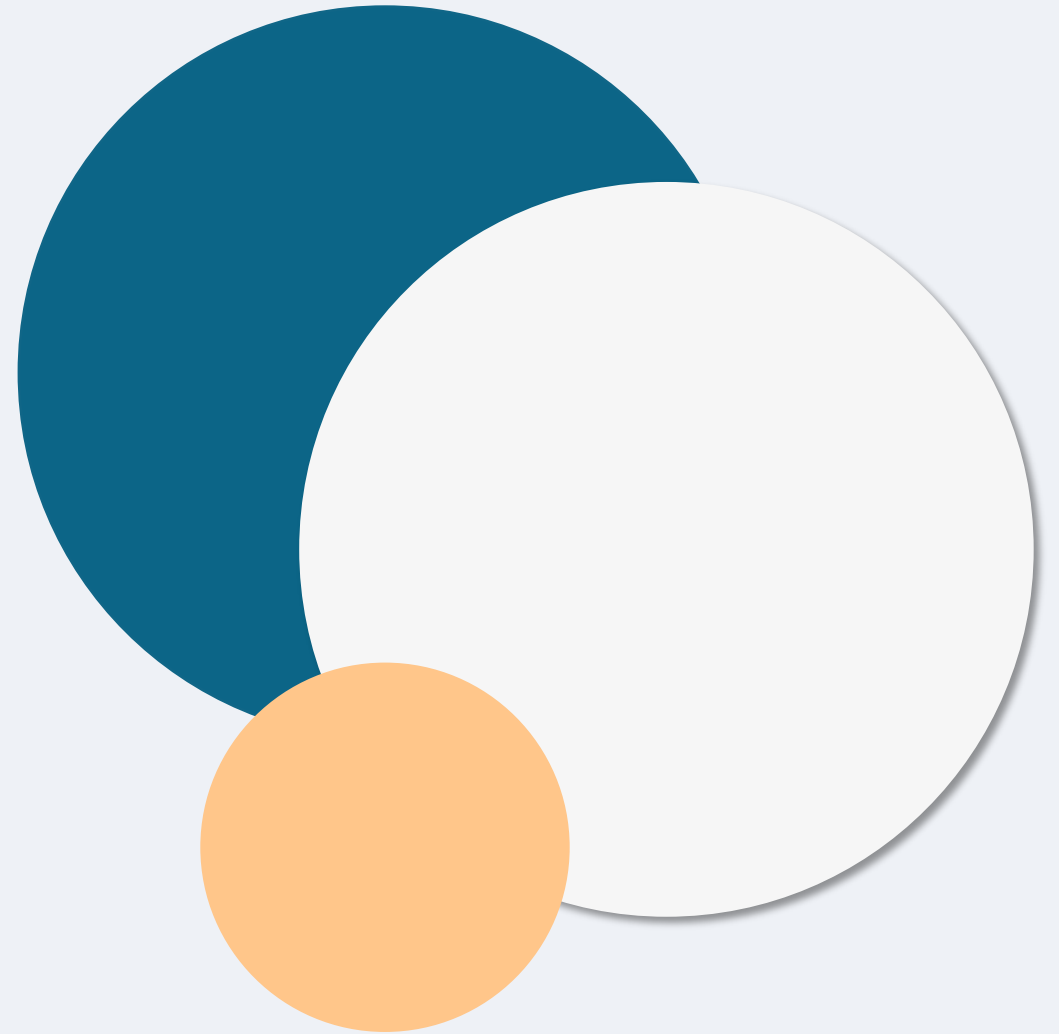
Program and Application Guide

Revised 01/24/23



Microbusiness Grants Round 1

Approximately 4,600 grants of \$2,500 will be administered to **qualified microbusinesses** throughout Los Angeles County, including City of Los Angeles, that face barriers to access to capital resources.



Eligibility Requirements



“Qualified microbusiness” means a **for-profit business entity** that meets and self-certifies, under penalty of perjury, all the following criteria:

1. The microbusiness must have a physical location and is headquartered in Los Angeles County, California, including the City of Los Angeles.
2. The microbusiness is currently active and operating since at least December 2019.
3. The microbusiness was significantly impacted by the COVID-19 pandemic.
4. The microbusiness had **less than \$50,000** in revenue in the 2019 taxable year.
5. The microbusiness currently has fewer than five full-time equivalent employees and had fewer than five full-time equivalent employees in the 2019 and 2020 taxable years as based on tax filings by self-attestation on a valid application.
6. The microbusiness is not a business excluded from participation in the California Small Business COVID-19 Relief Grant Program, as specified in paragraph (2) of subdivision (g) of Section 12100.82.
7. The microbusiness owner must provide an acceptable form of government-issued photo ID such as:
 - Driver’s License
 - State ID
 - Passport
8. The microbusiness owner applying for the grant must be the majority-owner and manager of the qualified microbusiness and the owner’s primary means of income in the 2019 taxable year.
9. The microbusiness owner must not have received a grant under the California Small Business COVID-19 Relief Grant Program.

Ineligible Businesses



Notwithstanding the eligibility requirements listed [here](#), “*qualified microbusiness*” shall not include entities that satisfy any of the following:

1. Businesses without a physical presence in the state and not headquartered in the State of California;
2. Businesses primarily engaged in political or lobbying activities, regardless of whether the entity is registered as a 501(c)(3), 501(c)(6), or 501(c)(19);
3. Passive businesses, investment companies, and investors who file a Schedule E on their tax returns;
4. Financial institutions or businesses primarily engaged in the business of lending, such as banks, finance companies, and factoring companies;
5. Businesses engaged in any activity that is unlawful under federal, state, or local law;
6. Businesses that restrict patronage for any reason other than capacity;
7. Speculative businesses;

8. Businesses with any owner of greater than 10 percent of the equity interest in it who meets one or more of the following criteria:
 - i. The owner has, within the prior three years, been convicted of or had a civil judgment rendered against the owner, or has had commenced any form of parole or probation, including probation before judgment, for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a federal, state, or local public transaction or contract under a public transaction, violation of federal or state antitrust or procurement statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.
 - ii. The owner is presently indicted for or otherwise criminally or civilly charged by a federal, state, or local government entity, with commission of any of the offenses enumerated in clause (i).
9. Affiliated companies, as defined in Section 121.103 of Title 13 of the Code of Federal Regulations; or

Continued next page

Ineligible Businesses



10. Other businesses determined by California Office of the Small Business Advocate (CalOSBA), consistent with the limitations and exclusions set in previous rounds of the [COVID-19 Relief Grant Program](#).

Eligible Uses of Funds



A microbusiness owner who is a recipient of a grant pursuant to this Program must self-certify that grant funds will be used for one or more of the following eligible uses:

1. The purchase of new certified equipment including, but not limited to, a cart.
2. Investment in working capital.
3. Application for, or renewal of, a local permit including, but not limited to, a permit to operate as a sidewalk vendor.
4. Payment of business debt accrued due to the COVID-19 pandemic.
5. Costs resulting from the COVID-19 pandemic and related health and safety restrictions, or business interruptions or closures incurred as a result of the COVID-19 pandemic, as defined in subdivision (l) of Section 12100.83.

Required Documents to Apply



The following documents are required to apply for this Program:

1. Applicant Certification
2. Signed and unaltered Federal 2019 tax returns (Upload ALL pages)
3. Official filing with the California Secretary of State (which must be active) or local municipality, as applicable, for your business such as one of the following
 - Articles of Incorporation;
 - Certificate of Organization;
 - Fictitious Business Name Filing;
 - Professional License;
 - Government-Issued Business License.
 - If current license is not available, expired business license with proof of renewal payment made.
4. Government-Issued ID uploaded via Persona, which will be embedded in the application. Acceptable forms of government-issued ID:
 - Driver's License
 - State ID
 - Passport
5. Valid banking account which must be linked via Plaid, which will be embedded in the application.



How to Complete the Applicant Certification



Applicant Certification



As part of the application process, you will be required to self-certify the truthfulness and accuracy of the information you provide in the web application and supporting documents by signing an Applicant Certification.

The Applicant Certification will be available in electronic form for you to download and complete. A signed Applicant Certification is a required document in this grant process and will need to be uploaded to the Portal as a PDF file.


You can complete the Applicant Certification in two ways:

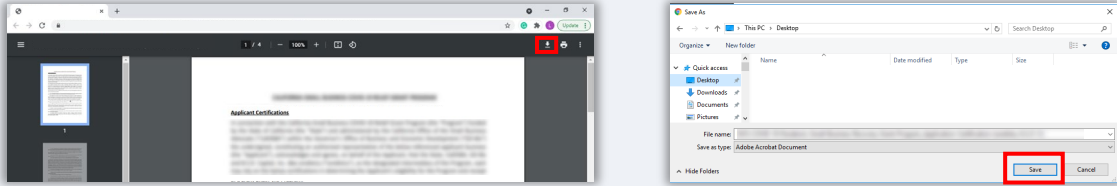
1. Download and sign the certification electronically or
2. Print and complete the form by hand.

How to Complete Your Applicant Certification Electronically



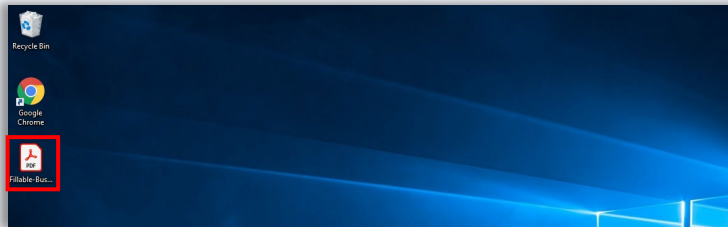
Step 1

Click the download  icon to download and save the Applicant Certification your device.



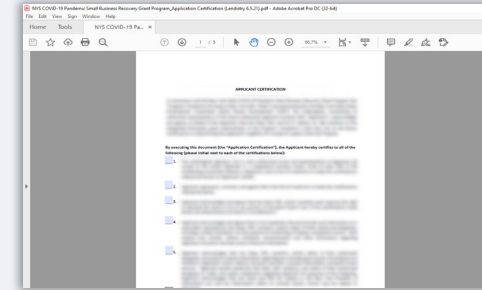
Step 2

Locate Applicant Certification on your device and open the file from there. Your Applicant Certification will open as a PDF file.



Step 3

Complete the Applicant Certification by entering your initials next to all numbered items and then entering your signature and business information on the last page.



Step 4

After completing the Applicant Certification, save it again by going to File > Save or pressing CTRL+S on your keyboard to save your fully executed Applicant Certification.


Step 5

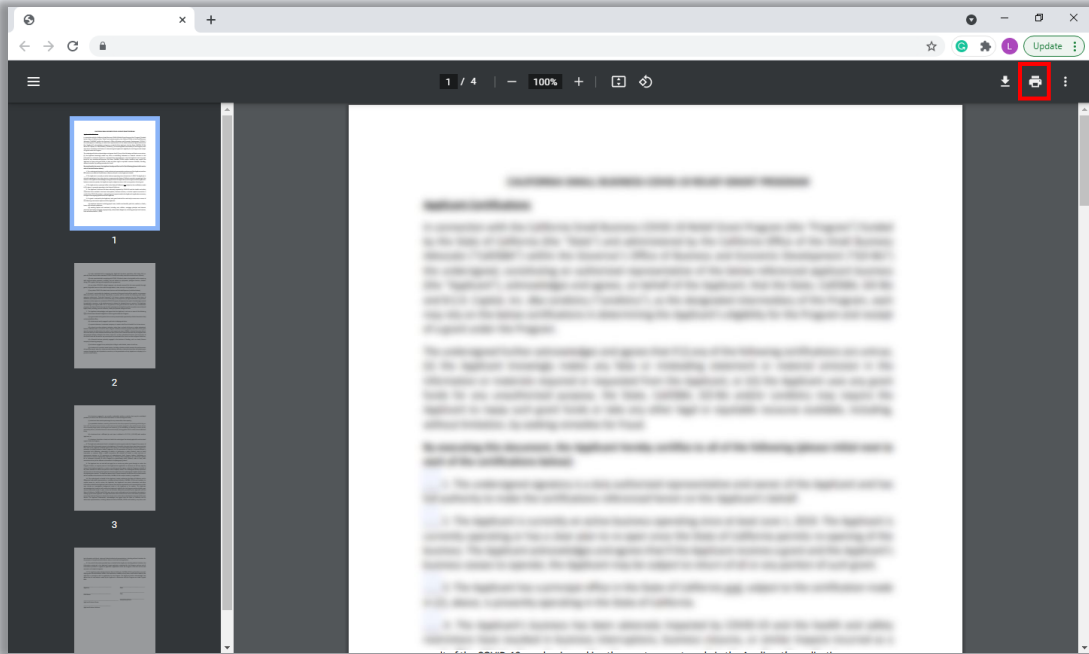
Upload the completed Applicant Certification as PDF file in the Portal during the application process.

How to Complete Your Applicant Certification Manually



Step 1

Print the Applicant Certification by clicking the printer  icon.



Step 2

Fill out the Applicant Certification using a dark pen and legible handwriting.

Step 3

After completing the Applicant Certification, save it again by going to File > Save or pressing CTRL+S on your keyboard to save your fully executed Applicant Certification.

Step 5

Upload the completed Applicant Certification as PDF file in the Portal during the application process.



Examples of Required Documents



2019 Federal Tax Returns



Form 1120

1120-S U.S. Income Tax Return for a S Corporation (OMB No. 1545-0045) **2019**

Department of the Treasury Internal Revenue Service

Do not file this form unless the corporation has filed or is filing Form 2553 to elect to be an S corporation.

For calendar year 2019 or tax year beginning 2019, ending 20

A If resident effective date: **Name:** _____ **B** Single identification number: _____

C Business activity code (see instructions): **TYPE OR PRINT:** _____ **D** EIN (see instructions): _____

E Business code number: _____ **F** IRS office (see instructions): _____

G Check if tax is self-assessed: **H** Is the corporation electing to be an S corporation beginning with this year? Yes No If "Yes," attach Form 2553 if not already filed.

I Check if: Final return Name change Address change Amended return S election termination or rescission

J Enter the number of shareholders who were shareholders during any part of the tax year: _____

K Check if corporation: Aggregated activities for section 468 at-risk purposes Aggregated activities for section 468 passive activity purposes

Caution: Include only trade or business income and expenses on lines 1a through 19. See the instructions for more information.

Income	Amount	Amount
1a Gross receipts or sales	1a	1a
b Returns and allowances	1b	1b
c Balance. Subtract line 1b from line 1a	1c	1c
d Cost of goods sold (attach Form 1125-A)	2	2
e Gross profit. Subtract line 2 from line 1c	3	3
f Net gain (loss) from Form 4797, line 17 (attach Form 4797)	4	4
g Other income (loss) (see instructions—attach statement)	5	5
6 Total income (loss). Add lines 3 through 5	6	6
7 Compensation of officers (see instructions—attach Form 1125-4)	7	7
8 Salaries and wages (less employment credits)	8	8
9 Repairs and maintenance	9	9
10 Real estate	10	10
11 Rents	11	11
12 Taxes and licenses	12	12
13 Interest (see instructions)	13	13
14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	14	14
15 Depreciation (do not deduct oil and gas depletion)	15	15
16 Advertising	16	16
17 Pension, profit-sharing, etc., plans	17	17
18 Employee benefit programs	18	18
19 Other deductions (attach statement)	19	19
20 Total deductions. Add lines 7 through 19	20	20
21 Ordinary business income (loss). Subtract line 20 from line 6	21	21
22a Excess net passive income or LIFO recapture tax (see instructions)	22a	22a
b Tax from Schedule D (Form 1120-ES)	22b	22b
22c Add lines 22a and 22b (see instructions for additional taxes)	22c	22c
22d 22 is estimated tax payments and 2019 employment credit to 2019	22d	22d
23 Tax deposited with Form 7000	23	23
24 Credit for federal tax paid on fuels (attach Form 4136)	24	24
25 Refund for future use	25	25
26 Add lines 22c through 25	26	26
27 Refundable tax penalty (see instructions). Check if Form 2220 is attached	27	27
28 Amount owed, if the 22c is smaller than the total of lines 22c and 24, enter amount owed	28	28
29 Overpayment, if the 22c is larger than the total of lines 22c and 24, enter amount overpaid	29	29
30 Total overpayment. Add lines 27 through 29	30	30
31 Enter amount from line 30. Credited to 2019 estimated tax	31	31

Sign Here

Signature of officer: _____ Date: _____ File _____

Preparer (Use only if prepared by someone other than the taxpayer): _____ Date: _____ File _____

Preparer (Use only if prepared by someone other than the taxpayer): _____ Date: _____ File _____

For Paperwork Reduction Act Notice, see separate instructions. OMB No. 1545-0045 Form 1120-S 2019

Form 1065

1065 U.S. Return of Partnership Income (OMB No. 1545-0045) **2019**

Department of the Treasury Internal Revenue Service

Do not file this form unless the partnership has filed or is filing Form 1065-B to elect to be a partnership.

For calendar year 2019, or tax year beginning 2019, ending 20

A Federal business activity: **Name of partnership:** _____ **B** Department number: _____

C Principal business activity: _____ **D** EIN (see instructions): _____

E Business code number: _____ **F** IRS office (see instructions): _____

G Check applicable boxes: Initial return Final return Name change Address change Amended return

H Check accounting method: Cash Accrual Other (specify) _____

I Number of partners: 1 2-50 51 or more (attach Form 990 for each partner who was a partner at any time during the tax year)

J Check if partnership: Aggregated activities for section 468 at-risk purposes Aggregated activities for section 468 passive activity purposes

K Check if partnership: Aggregated activities for section 468 at-risk purposes Aggregated activities for section 468 passive activity purposes

Caution: Include only trade or business income and expenses on lines 1a through 20. See the instructions for more information.

Income	Amount	Amount
1a Gross receipts or sales	1a	1a
b Returns and allowances	1b	1b
c Balance. Subtract line 1b from line 1a	1c	1c
d Cost of goods sold (attach Form 1125-A)	2	2
e Gross profit. Subtract line 2 from line 1c	3	3
f Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)	4	4
g Net farm profit (loss) (attach Schedule F (Form 990) or 990-SS)	5	5
h Net gain (loss) from Form 4797, Part I, line 17 (attach Form 4797)	6	6
7 Other income (loss) (attach statement)	7	7
8 Total income (loss). Combine lines 3 through 7	8	8
9 Salaries and wages (other than to partners) (less employment credits)	9	9
10 Guaranteed payments to partners	10	10
11 Repairs and maintenance	11	11
12 Bad debts	12	12
13 Rent	13	13
14 Taxes and licenses	14	14
15 Interest (see instructions)	15	15
16a Depreciation (if required, attach Form 4562)	16a	16a
b Less depreciation reported on Form 1125-A and elsewhere on return	16b	16b
17 Depreciation (do not deduct oil and gas depletion)	17	17
18 Retirement plans, etc.	18	18
19 Employee benefit programs	19	19
20 Other deductions (attach statement)	20	20
21 Total deductions. Add the amounts shown in the far right column for lines 9 through 20	21	21
22 Ordinary business income (loss). Subtract line 21 from line 8	22	22
23 Interest due under the look-back method—completed long-term contracts (attach Form 8887)	23	23
24 Interest due under the look-back method—income forecast method (attach Form 8806)	24	24
25 OSA AMT imposed underpayment (see instructions)	25	25
26 Other taxes (see instructions)	26	26
27 Total business tax. Add lines 23 through 26	27	27
28 Payment (see instructions)	28	28
29 Amount owed, if line 28 is smaller than line 27, enter amount owed	29	29
30 Overpayment, if line 28 is larger than line 27, enter overpayment	30	30

Sign Here

Signature of partner or other authorized person: _____ Date: _____ File _____

Preparer (Use only if prepared by someone other than the taxpayer): _____ Date: _____ File _____

Preparer (Use only if prepared by someone other than the taxpayer): _____ Date: _____ File _____

For Paperwork Reduction Act Notice, see separate instructions. OMB No. 1545-0045 Form 1065 2019

Form 1040

1040 U.S. Individual Income Tax Return (OMB No. 1545-0045) **2019**

Department of the Treasury Internal Revenue Service

Do not file this form unless you are required to file.

For calendar year 2019 or tax year beginning 2019, ending 20

A Filing Status: Single Married filing jointly Married filing separately (MFS) Head of household (HOH) Qualifying widow(er) (QW)

B Check only one box: If you checked the MFS box, enter the name of spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent.

C Your first name and middle initial: _____ **D** Last name: _____ **E** Your social security number: _____

F If past return, spouse's first name and middle initial: _____ **G** Last name: _____ **H** Spouse's social security number: _____

I Home address number and street. If you have a P.O. box, see instructions. Apt. no. _____ **J** Presidential Election Campaign Code (see instructions): _____

K City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). Foreign country name: _____ Foreign province/state/country: _____ Foreign postal code: _____

L Check if you are: Someone who claims: You as a dependent Your spouse as a dependent Spouse filer on a separate return or you were a dual-status alien

M Age/Blindness: Yes No Was born before January 2, 1955 Are blind Spouse: Was born before January 2, 1955 Is blind

N Dependents (see instructions): (1) First name: _____ Last name: _____ (2) Social security number: _____ (3) Relationship to you: _____ (4) Is eligible for (see instructions): Child for credit Credit for other dependents

Standard Deduction	Amount	Amount
1a Tax-exempt interest	1a	1a
2a Qualified dividends	2a	2a
3a IRA distributions	3a	3a
4a Pensions and annuities	4a	4a
5a Social security benefits	5a	5a
6a Capital gain or (loss). Attach Schedule D if required. If not required, check here	6a	6a
7a Other income from Schedule 1, line 9	7a	7a
8a Add lines 1, 2a, 3a, 4a, 5a, 6a, and 7a. This is your total income	8a	8a
9a Adjustments to income from Schedule 1, line 22	9a	9a
10a Subtract line 9a from line 8a. This is your adjusted gross income	10a	10a
11a Standard deduction or itemized deductions from Schedule A	11a	11a
12a Qualified business income deduction. Attach Form 8995 or Form 8995-A	12a	12a
13a Add lines 9 and 10	13a	13a
14a Taxable income. Subtract line 11a from line 13a	14a	14a

Sign Here

Signature of taxpayer or other authorized person: _____ Date: _____ File _____

Preparer (Use only if prepared by someone other than the taxpayer): _____ Date: _____ File _____

Preparer (Use only if prepared by someone other than the taxpayer): _____ Date: _____ File _____

For Paperwork Reduction Act Notice, see separate instructions. OMB No. 1545-0045 Form 1040 2019

Example: Filing with the CA Secretary of State or Local Municipality



Articles of Incorporation

3767456

FILED
Secretary of State
State of California
16 MAR 16 2015

ARTICLES OF INCORPORATION
OF
MIDDLE TREE INCORPORATED

ARTICLE I

The name of this corporation is Middle Tree Incorporated ("Corporation").

ARTICLE II

A. This Corporation is a nonprofit public benefit corporation and is not organized for the private gain of any person. It is organized under the Nonprofit Public Benefit Corporation Law for public and charitable purposes. The specific purpose of this Corporation is to manage, operate, guide, direct and promote the Corporation.

B. This Corporation is organized and operated exclusively for educational and charitable purposes pursuant to and within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (the "Code" or "I.R.C."), or the corresponding provision of any future United States Internal Revenue law. Notwithstanding any other provision of these articles, the Corporation shall not, except to an insubstantial degree, engage in other activities or exercise of power that do not further the purpose of the Corporation. The Corporation shall not carry on any other activities not permitted to be carried on by: (i) a corporation exempt from federal income tax under Section 501(c)(3) of the Code, or the corresponding section of any future federal tax code; or (ii) by a corporation, contributions of which are deductible under Section 170(c)(2) of the Code, or the corresponding section of any future federal tax code.

ARTICLE III

The name and address in the State of California of this Corporation's initial agent for service of process is: Registered Agents Inc.

ARTICLE IV

The initial street address of the corporation is:

Middle Tree
522 S. Indian Hill Blvd #205
Claremont, CA
91711

The initial mailing address of the corporation is:

ARTICLES OF INCORPORATION
MIDDLE TREE INCORPORATED

PAGE 1 OF 3

Fictitious Name of Registration

LARRY W. WARD
COUNTY OF RIVERSIDE
ASSESSOR-COUNTY CLERK-RECORDER
OFFICE OF THE COUNTY CLERK

P.O. Box 751, Riverside, CA 92502-0751 - (951) 480-7000
92473 Hwy. 78, Bldg. 311, Indio, CA 92521 - (760) 840-4732

FICTITIOUS BUSINESS NAME STATEMENT

CLERK'S USE ONLY

SEE REVERSE SIDE FOR FEES AND INSTRUCTIONS

THE FOLLOWING PERSON(S) IS (ARE) DOING BUSINESS AS:

1a. Fictitious Business Name: (If any that can be used same as name address - Attach Supplemental Sheet)

1b. Lic COMPLETE Physical Business Address (No P.O. Boxes or Postal Facilities)

1c. NAME OF COUNTY in which business is located

Mailing Address (if Different from business address - Optional)

2a. Registrant Information (only for state of Calif LLC filing as such)

Full Name of Registrant - Spell out First, MIDDLE and last names (no initials)

Residence Address

City State Zip

2b. Registrant Information (only for state of Calif LLC filing as such)

Full Name of Registrant - Spell out First, MIDDLE and last names (no initials)

Residence Address

City State Zip

2c. Registrant Information (only for state of Calif LLC filing as such)

Full Name of Registrant - Spell out First, MIDDLE and last names (no initials)

Residence Address

City State Zip

2d. Registrant Information (only for state of Calif LLC filing as such)

Full Name of Registrant - Spell out First, MIDDLE and last names (no initials)

Residence Address

City State Zip

3. This business is conducted by: (check all that apply) Individual Trust Corporation General Partnership Limited Partnership Co-partnership Joint Venture Limited Liability Company Limited Liability Partnership An Unincorporated Association - other than a partnership State or Local Registered Domestic Partnership

4. Registrant has not yet begun to transact business under the fictitious business name(s) listed above. Registrant commenced to transact business under the fictitious business name(s) listed above on _____

I declare that all the information in this statement is true and correct. (A registrant who declares as true, information which he or she knows to be false is guilty of a crime.)

5. Signature(s) (Only one is required)

Typed or Printed Name(s)

If Limited Liability Company/Corporation, Title

QC'D BY:

THIS STATEMENT WAS FILED WITH THE COUNTY CLERK OF RIVERSIDE COUNTY ON DATE INDICATED BY FILE STAMP ABOVE

NOTICE-IN ACCORDANCE WITH SUBDIVISION OF SECTION 17800, A FICTITIOUS BUSINESS NAME STATEMENT GENERALLY REMAINS IN EFFECT FOR FIVE YEARS FROM THE DATE ON WHICH IT WAS FILED IN THE OFFICE OF THE COUNTY CLERK, EXCEPT AS PROVIDED BY PARAGRAPHS 5b OR 5c OF SECTION 17800. ANY CHANGES TO THE INFORMATION CONTAINED IN THIS STATEMENT PURSUANT TO SECTION 17800 OTHER THAN A CHANGE IN THE RESIDENCE ADDRESS OF A REGISTRANT, OR A NEW FICTITIOUS BUSINESS NAME STATEMENT MUST BE FILED BEFORE THE EXPIRATION OF THE TERM OF THIS STATEMENT. THIS STATEMENT DOES NOT CONSTITUTE AN AFFIDAVIT. THE USE OF THIS STATEMENT OF FICTITIOUS BUSINESS NAME IN VIOLATION OF THE RIGHTS OF ANOTHER FEDERAL, STATE OR COMMON LAW OR SECTION 17800 ET SEQ., BUSINESS AND PROFESSIONS CODE.

I HEREBY CERTIFY THAT THIS COPY IS A CORRECT COPY OF THE ORIGINAL STATEMENT ON FILE IN MY OFFICE.

LARRY W. WARD
RIVERSIDE COUNTY CLERK

By: _____ Deputy

Example: Filing with the CA Secretary of State or Local Municipality



Certificate of Organization

State of California Secretary of State

File # **200707110138**

FILED
in the office of the Secretary of State
of the State of California
MAR 07 2007

LIMITED LIABILITY COMPANY ARTICLES OF ORGANIZATION

A \$10.00 filing fee must accompany this form.
IMPORTANT! - Read instructions before completing this form. This Space For Filing Use Only

ENTITY NAME: (Enter the name with the words "Limited Liability Company," "LLC" or "L.L.C.")
1. NAME OF LIMITED LIABILITY COMPANY
Sovereign Land Acquisition Company, LLC

PURPOSE: (The following statement is required by statute and may not be altered.)
2. THE PURPOSE OF THE LIMITED LIABILITY COMPANY IS TO ENGAGE IN ANY lawful ACT OR ACTIVITY FOR WHICH A LIMITED LIABILITY COMPANY MAY BE ORGANIZED UNDER THE PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT.

INITIAL AGENT FOR SERVICE OF PROCESS: (If the agent is an individual, the agent must reside in California and both level 2 and 4 must be completed. If the agent is a corporation, the agent must have an office with the California Secretary of State a certificate pursuant to Corporations Code Section 15001.202 and a completed form on file.)
3. NAME OF INITIAL AGENT FOR SERVICE OF PROCESS
C.T. Corporation Systems

4. IF AN INDIVIDUAL, ADDRESS OF INITIAL AGENT FOR SERVICE OF PROCESS IN CALIFORNIA: CITY STATE ZIP CODE
CA

MANAGEMENT: (Check only one)
5. THE LIMITED LIABILITY COMPANY WILL BE MANAGED BY:
 ONE MANAGER
 MORE THAN ONE MANAGER
 ALL LIMITED LIABILITY COMPANY MEMBERS

ADDITIONAL INFORMATION:
6. ADDITIONAL INFORMATION SET FORTH ON THE ATTACHED PAGES, IF ANY, IS INCORPORATED HEREIN BY THIS REFERENCE AND MADE A PART OF THIS CERTIFICATE.

EXECUTION:
7. I DECLARE I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED.
[Signature] DATE: 2/7/07
Daniel K. Balc
TYPE OR PRINT NAME OF ORGANIZER

RETURN TO: (Enter the name and the address of the person or firm in whose custody a copy of the filed document should be returned.)
8. NAME: Daniel K. Balc
FIRM: Mitchell, Tamel, Hadley & McCoy LLP
ADDRESS: 600 So. Figueroa Street, 18th Floor
CITY/STATE/ZIP: (Los Angeles, CA 90017)

LLC# 200707110138 APPROVED BY SECRETARY OF STATE

Government-Issued Business License

For Sole Proprietors Only

CITY OF LONG BEACH, CALIFORNIA
BUSINESS LICENSE
OWNERSHIP NON-TRANSFERABLE

PREPARED: 11/06/2018
P120

THE LICENSEE NAMED BELOW IS AUTHORIZED TO OPERATE THE FOLLOWING:

ACCOUNT NUMBER: 1	BUSINESS TYPE: BUSINESS OFFICE
OWNER: ACTION INVESTIGATORS	DBA NAME: ACTION AUTO RECOVERY
LOCATED AT: 3860 CHERRY AVE	PRODUCT: BUSINESS

AUTHORIZED BY: JOHN GROSS
DIRECTOR OF FINANCIAL MANAGEMENT

Example: Government-Issued Photo ID



Acceptable Forms of Government-Issued ID



Passport



Drivers License

The following forms of ID will **NOT** be accepted:

- Expired IDs
- Bus Passes
- School IDs
- Union IDs
- Job Badges
- Library Cards



Tips for Applying



Tip #1: Use a Valid Email Address



Please make sure you are using a valid email address and that it is spelled correctly in the application.

- Updates and additional guidance for your application will be sent to the email address you provide. Certain email addresses cannot be recognized in Lendistry's system and may cause delays in communication regarding your application.

Invalid Email Addresses

The following email addresses will not be accepted or recognized in our system:

Emails *beginning* with **info@**

Example: info@mycompany.com

Emails *ending* with **@contact.com** or **@noreply.com**

Example: mycompany@contact.com

Example: mycompany@noreply.com

Tip #2: Prepare Your Documents in PDF Format



All required documents must be uploaded to the Portal in PDF format only. The documents must be clear, aligned straight, and contain no disruptive backgrounds when uploaded.

Important Notes for Uploading Documents:

1. All documents must be submitted in PDF format (Government-issued ID may be submitted as a PDF or JPEG).
2. File size must be under 15MB.
3. The file name CANNOT contain any special characters (!@#\$%^&*()_+).
4. If your file is password protected, you will need to enter it in.

Don't have a scanner?

We recommend downloading and using a free mobile scanning app.

Genius Scan

Apple | [Click Here to Download](#)
Android | [Click Here to Download](#)

Adobe Scan

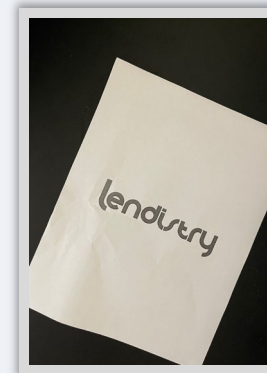
Apple | [Click Here to Download](#)
Android | [Click Here to Download](#)

Sample: Correct Upload

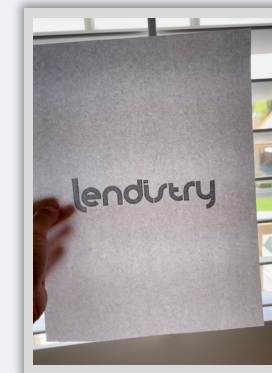


Document is clear and aligned straight.

Sample: Incorrect Upload



1



2

1. Document not aligned straight.
2. Document is in front of window (busy background) and a hand is seen in the photo.

Tip #3: Review Best Practices to Successfully Complete Persona



What is Persona?

Persona is a third-party platform utilized by Lendistry in its fraud prevention and mitigation process. The Persona platform enables Lendistry to verify an individual's identity and protect against identity spoofing by automatically comparing the individual's selfie to their ID portrait with a 3-point composite and biometric liveness checks.

- Applicants will be required to verify their identity using Persona by uploading a picture of a valid government-issued photo ID.
 - Acceptable forms of government-issued photo ID include:
 - Driver's License;
 - United States Passport; and
 - State ID.
- Applicants will also need to take a selfie using a device with a front-facing camera to complete the Persona verification.

Best Practices to Successfully Complete Persona

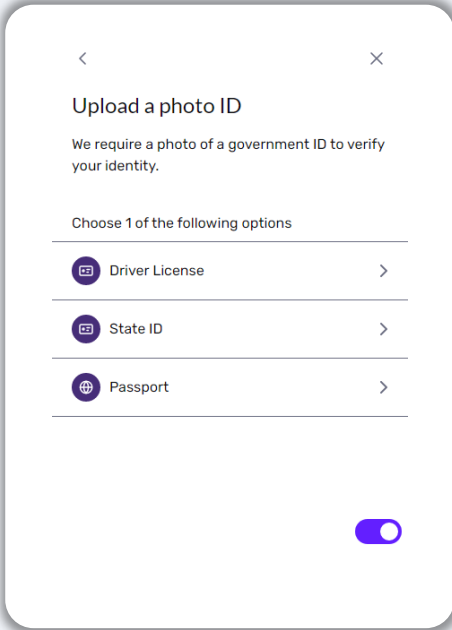
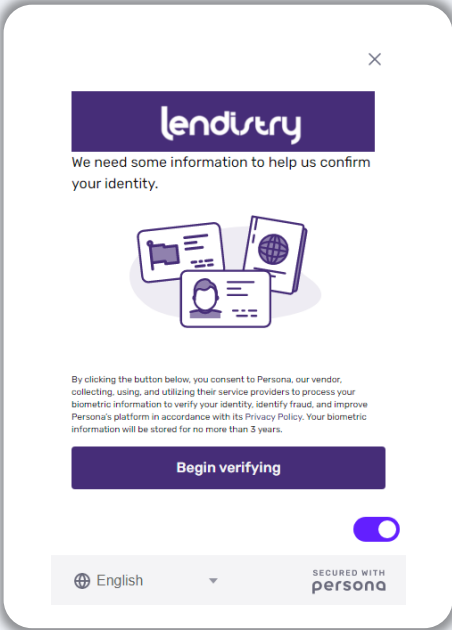
1. Use a front-facing device. If you work on your application on a laptop or computer that does not have a camera, you will be given the option to complete Persona using a mobile device at any time by clicking "Continue on another device" and scanning the QR code provided or requesting a link via SMS or Email.
 - Once you complete Persona on your mobile device, you will be automatically redirected to your application on your laptop or computer.
2. Take a picture of the front and back of your government-issued ID *before* starting Persona and save it on the device you will use to take your selfie to be efficient.
 - Place your government-issued ID on a plain white surface and use adequate lighting.
 - Do not use flash as it may cause a glare.
3. When taking your selfie, use adequate lighting pointed toward your face while avoiding bright light sources from behind.
 - Stand in front of a blank wall or door and avoid busy backgrounds.
 - Do not use flash as it may cause a glare.

How to Complete Persona



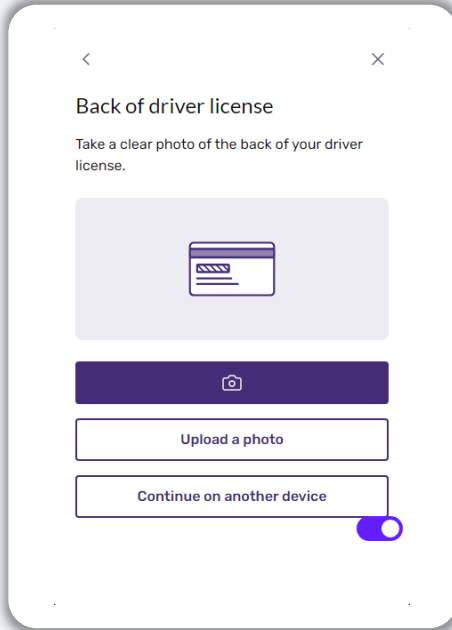
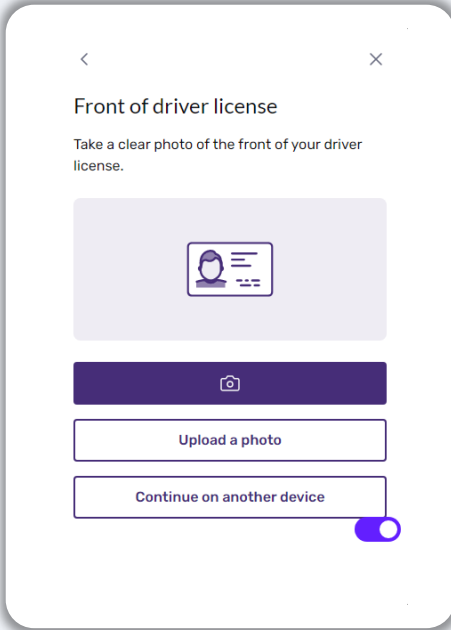
Step 1

Click on “**Begin Verifying**,” and then select the type of government-issued ID you will use to verify your identity.



Step 2

Take or upload a picture of the **front** side of your ID. Select “Use this File” to continue. See [page 20](#) for best practices on how to complete this step.

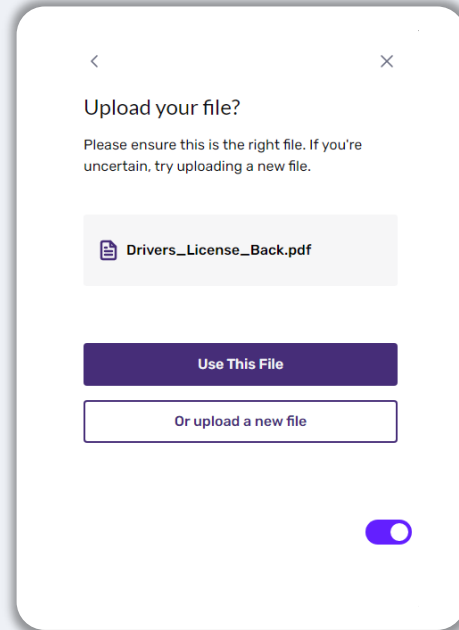
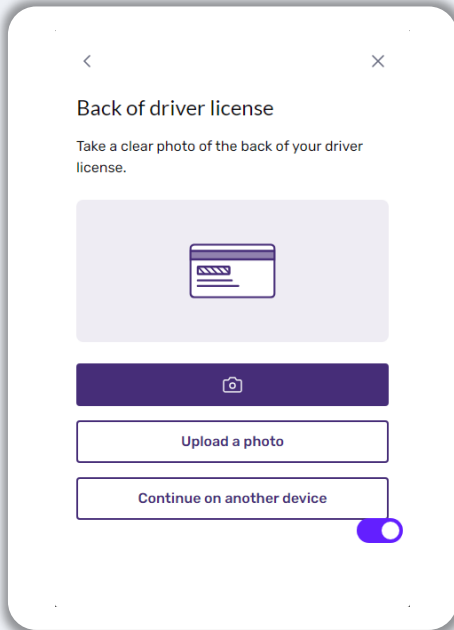


How to Complete Persona



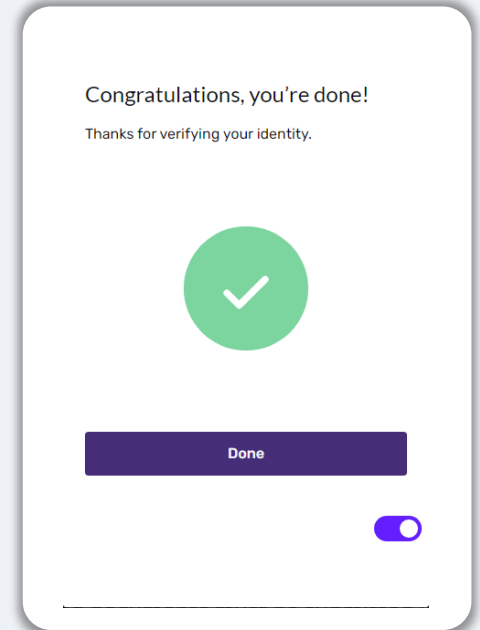
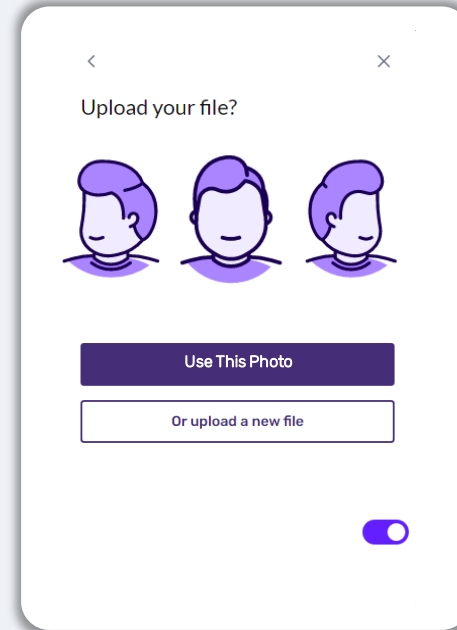
Step 3

Take or upload a picture of the **back** side of your ID. Select “Use this File” to continue. See [page 20](#) for best practices on how to complete this step.



Step 4

Using a **front-facing** device with a camera, follow the prompt on the screen to take a selfie by looking forward, left, and then right. See [page 20](#) for best practices on how to complete this step. Once complete, select “Done” and you will be redirected to the application.



Tip #4: Use Google Chrome



For the best user experience, please use Google Chrome throughout the entire application process.

Other web browsers may not support our interface and can cause errors in your application.

If you do not have Google Chrome on your device, you can download it for free at <https://www.google.com/chrome/>.

Before you begin the application, please do the following on Google Chrome:

- 1. Clear Your Cache**
- 2. Use Incognito Mode**
- 3. Disable Pop-Up Blocker**

Clear Your Cache

Cached data is information that has been stored from a previously used website or application and is primarily used to make the browsing process faster by auto-populating your information. However, cached data may also include outdated information such as old passwords or information you have previously entered incorrectly. This can create errors in your application and may result in it being flagged for potential fraud.

Use Incognito Mode

Incognito mode allows you to enter information privately and prevents your data from being remembered or cached.

Disable Pop-Up Blocker

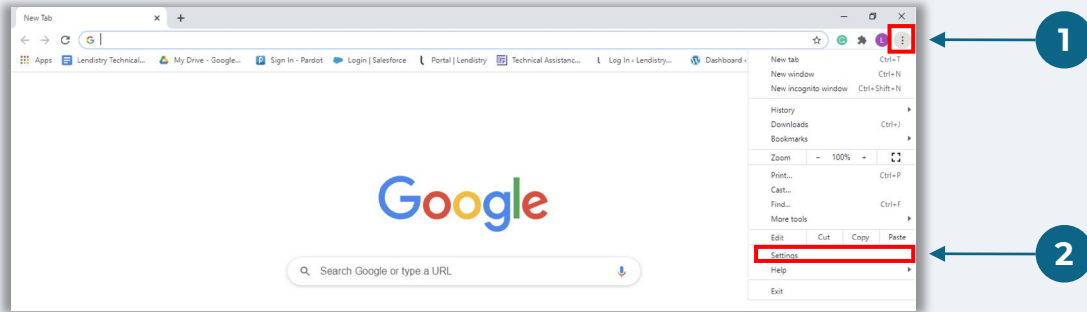
Our application includes multiple pop-up messages that are used to confirm the accuracy of the information you provide. You must disable the pop-up blocker on Google Chrome to see these messages.

How to Clear Your Cache



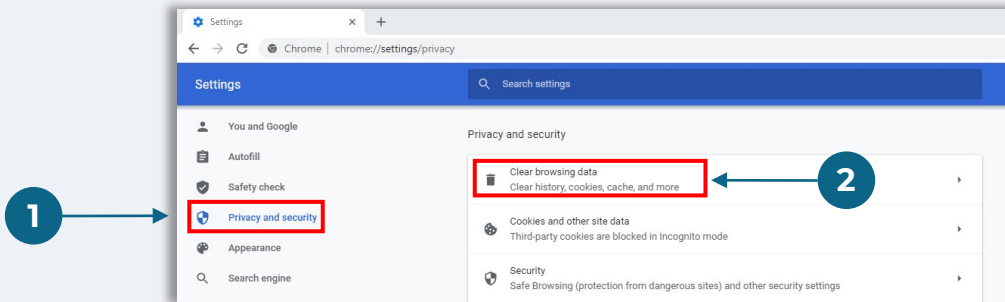
Step 1

Open a new Google Chrome window, click the three dots in the upper right corner, and then go to **“Settings.”**



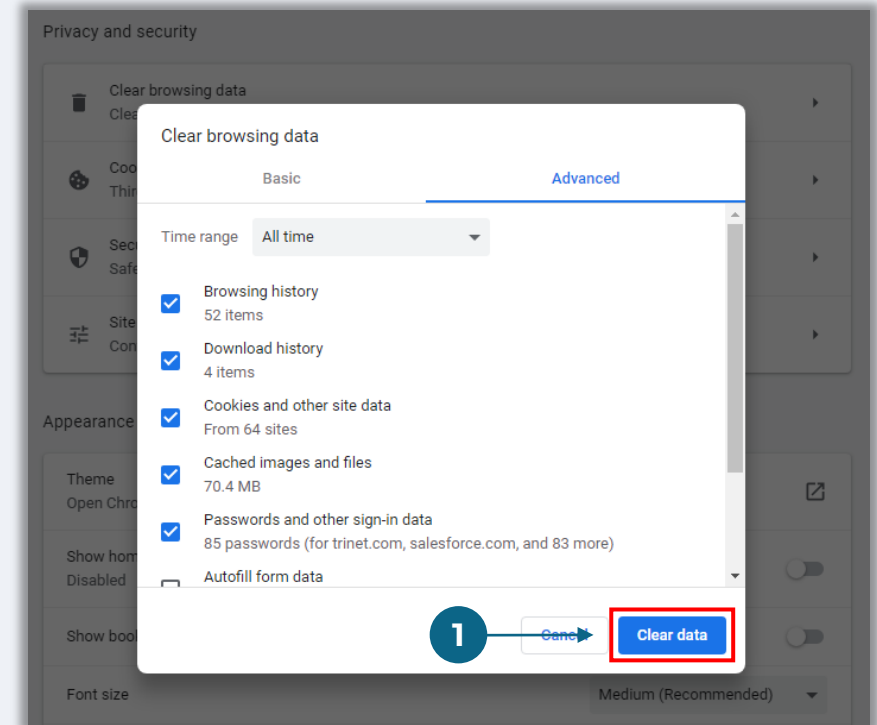
Step 2

Go to **“Privacy and Security”**, and then select **“Clear Browsing Data.”**



Step 3

Select **“Clear Data.”**

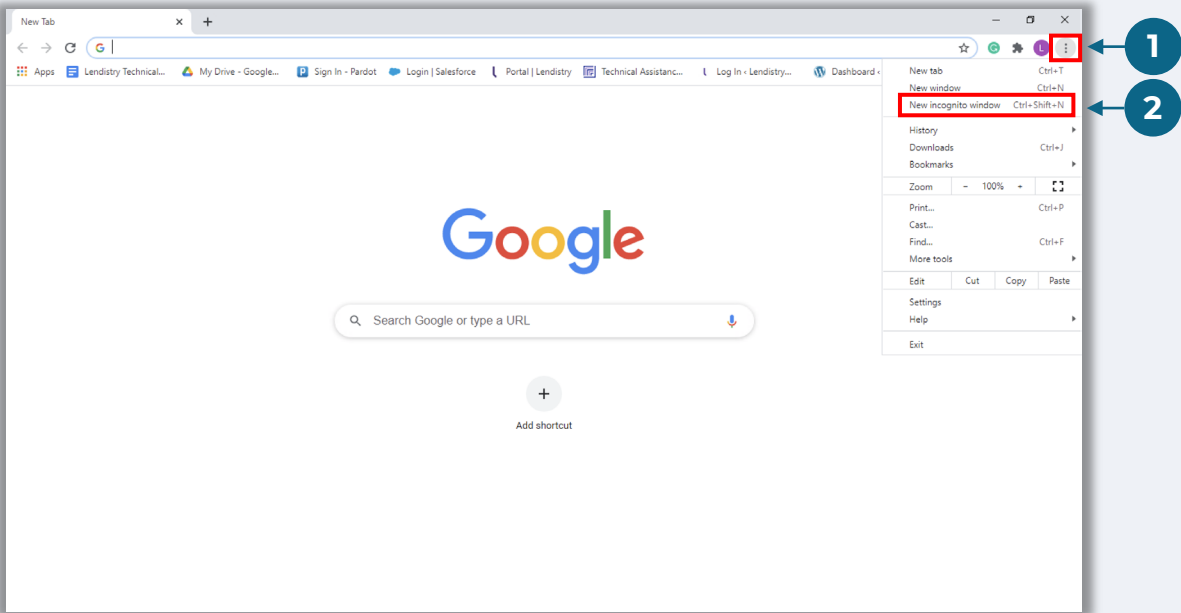


How to Use Incognito Mode



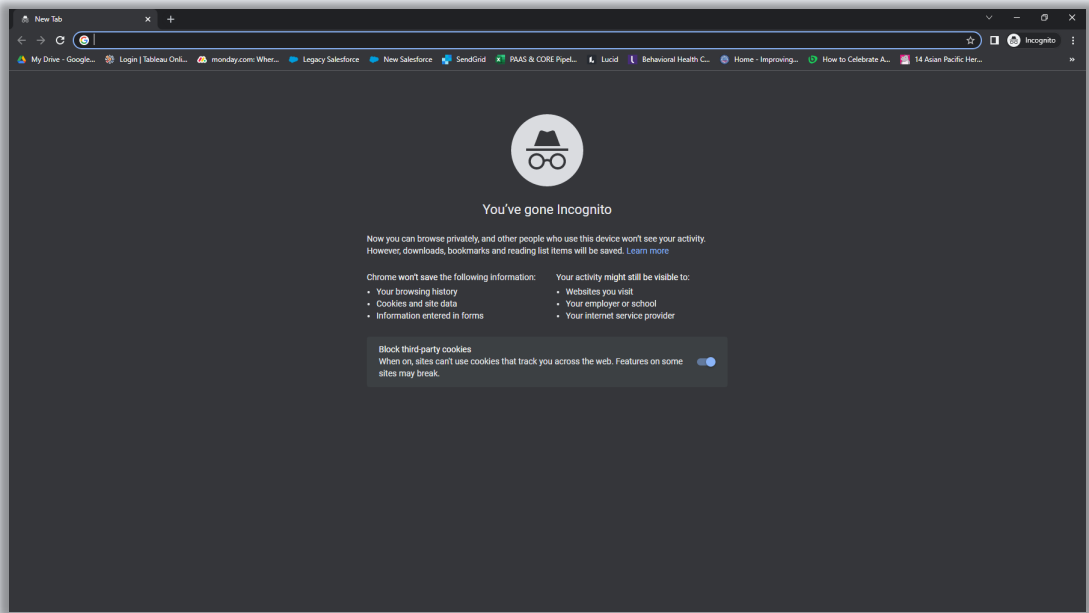
Step 1

Click the three dots in the upper right corner of your web browser, and then select **“New incognito window.”**



Step 2

Your browser will open a new Google Chrome window. Use incognito mode throughout the entire application process.

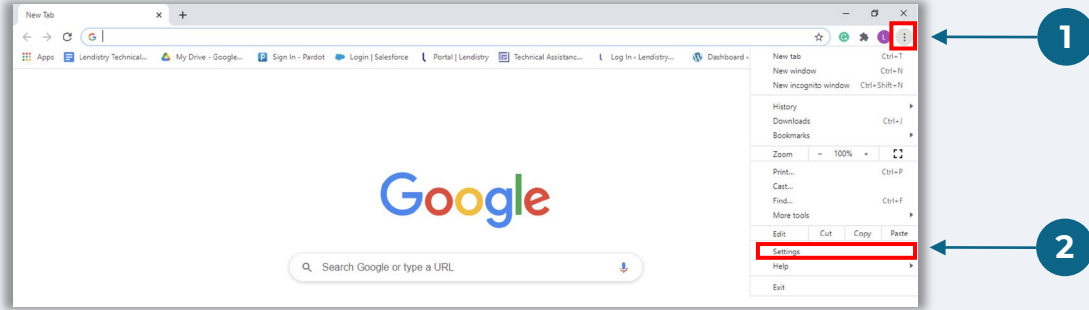


How to Disable Pop-Up Blockers



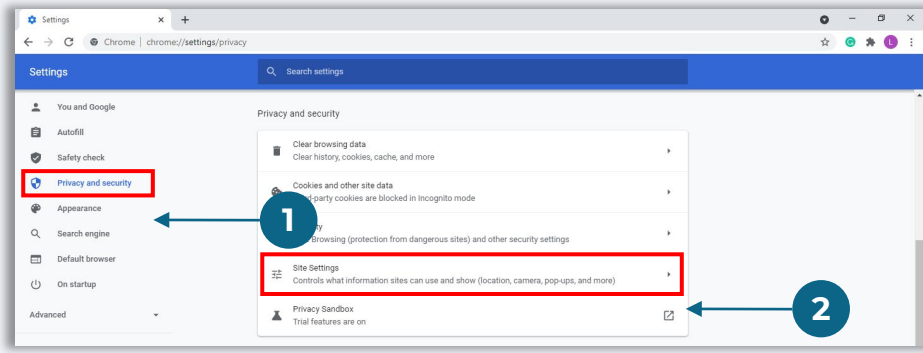
Step 1

Open a new Google Chrome window, click the three dots in the upper right corner, and then go to **“Settings.”**



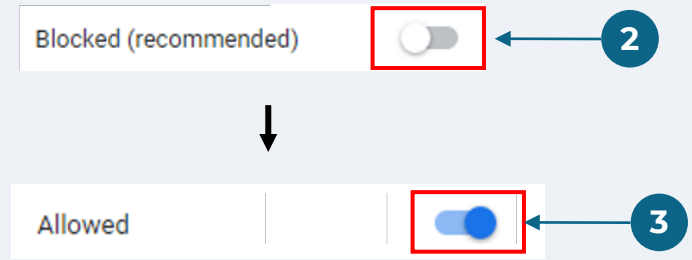
Step 2

Go to **“Privacy and Security”**, and then select **“Site Settings.”**



Step 3

Select **“Pop-up and Redirects.”** Click the button so that it turns blue and the status changes from **“Blocked”** to **“Allowed.”**





The Review Process





How will I know if I was awarded a grant?

The application process for this program contains multiple stages of validation. You must first meet the program's minimum eligibility requirements in order to be considered for a grant. **Important Note: Meeting the minimum eligibility requirements does not guarantee a grant award.**

Once you are determined to be eligible for this program, your application will then go through final validation to determine if you are approved or declined for funding. As part of this validation process, **you will be required to confirm certain information live over the telephone.** A member of Lendistry's team will reach out to you directly to complete this process.

Once your application is fully validated, you will receive an email from Lendistry to notify you if you have been approved or declined for grant funding.

How do I check the status of my application?

You can check the status of your application at any time by signing into Lendistry's Portal using the username, password, and mobile number that you registered. Once signed in, the status will appear on the dashboard.

Sign into Lendistry's Portal

here: <https://lacountyeog.mylendistry.com/landing>

My documents and bank information has been fully validated and I have been approved for funding. When will I receive funding?

Once your application has been fully validated and approved for grant funding, your grantee agreement and W-9 form will become available to you as a **DocuSign document** in Lendistry's Portal. Please sign in and follow the instructions from DocuSign to initial, sign, and date both documents.

Sign into Lendistry's Portal

here: <https://lacountyeog.mylendistry.com/landing>

Important Note: Your funds will not be released until this is complete.

Application Status



Status	What it Means	Action Required by Applicant
<i>Incomplete</i>	You have started an application but have not submitted it.	Complete all sections of the application within 30 days of starting it. Incomplete applications will not be reviewed or considered for a grant.
<i>Inactive</i>	Your application has been incomplete for more than 30 days and has been withdrawn from the review process.	If you would like to reinstate your inactive application, please contact our dedicated Call Center
<i>Application Submitted</i>	You have completed all sections and submitted an application.	No further action is required by you. Lendistry will reach out to you only if additional information or documents are needed.
<i>Application submitted, but additional docs required.</i>	You have submitted an application, but additional documentation or information is needed for Lendistry to process it.	Sign into Lendistry's Portal and upload all new documents or information that were requested. Your application cannot be processed until this is complete.
<i>Application under review for minimum eligibility requirements.</i>	Your application and documentation have been processed. Your application is now under review for eligibility.	No further action is required by you. Lendistry will reach out to you once we determine if you are eligible or ineligible for a grant.
<i>Your application is INELIGIBLE because it does not meet the program's minimum eligibility requirements.</i>	Your application did not meet the Program's minimum eligibility requirements and will not be considered for a grant award.	You will be notified via email if you are ineligible for this grant program. If there was an error in your web application form or in the documentation provided as part of your application, please contact our dedicated Call Center within five (5) days of receiving this email. Please note that this will not guarantee a reversal of your ineligibility. Additional documents and information may be requested to further validate your application. If Lendistry does not hear from you within this timeframe, your ineligibility will be sustained, and your file will be closed.
<i>Your application meets the Program's minimum eligibility requirements and will move to the next validation stage.</i>	Your application meets the Program's minimum eligibility requirements and will go through validation to determine if you are approved or declined for a grant award.	No further action is required by you. Lendistry will reach out to you only if additional information or documents are needed.

Application Status



Status	What it Means	Action Required by Applicant
<i>Additional documents are needed in order for your application to continue through the validation stage.</i>	Additional documents or information are needed to fully validate your application.	Sign into Lendistry's Portal and upload all new documents or information that were requested. Your application cannot be validated until this is complete.
<i>Application Declined</i>	Your application has been declined for a grant award.	You will be notified via email if you are declined for a grant award. If you believe you were declined in error, please contact our dedicated Call Center within five (5) days of receiving this email. Please note that this will not guarantee a reversal of your ineligibility. Additional documents and information may be requested to further validate your application. If Lendistry does not hear from you within this timeframe, your decline determination will remain permanently, and your file will be closed.
<i>Application Approved</i>	Your application has been approved for a grant award.	Your Award Disbursement Agreement and W-9 will be made available as a DocuSign document in Lendistry's Portal. You will need to sign in and follow the instructions from DocuSign to initial, sign, and date both documents.
<i>Application Approved, Grants Docs Pending</i>	Your Award Disbursement Agreement and W-9 are available as a DocuSign document in Lendistry's Portal.	Sign into Lendistry's Portal and follow the instructions from DocuSign to initial, sign, and date both documents. Important Note: Your funds will not be released until this is complete.
<i>Grant Docs Received</i>	Lendistry has received your fully executed Award Disbursement Agreement and W-9. Your banking information will go through one last validation before funding. You will receive funds via ACH.	No further action is required by you. Lendistry will only reach out to you if there are issues setting up an ACH transfer to your bank account.
<i>Grant Funded</i>	You have been fully funded for your eligible grant award.	No further action is required by you. Your file is now closed.