

SMALL BUSINESS STIMULUS GRANT APPLICATION INSTRUCTIONS

(Located at <https://www.sandiegocounty.gov/stimulusgrant/>)

ABOUT THE SMALL BUSINESS STIMULUS GRANT PROGRAM:

The Small Business Stimulus Grant Program is funded by Board of Supervisors allocated federal CARES Act, American Rescue Plan Act, and General Fund funding. The goal of the Grant Program is to provide economic assistance to help businesses and nonprofit entities impacted by COVID-19 to get them open, keep them open, and help prevent more from going out of business. The Small Business Stimulus Grant funds will be equally distributed by Supervisorial District (\$9.5 million per district). Financial assistance will be allocated to eligible, qualified small businesses and nonprofit entities with final award recommendations made by individual district offices based on the availability of funds, program guidelines, and the submission of all required information and supporting documentation.

The funds may be used towards supporting public health and response activities associated with the COVID-19 pandemic. Eligible expenditures begin March 3, 2021 through the end of the agreement term.

Of note, nonprofit organizations need to ensure they are registered as a charity in good standing with the California Attorney General AND that they can conduct business in the State of California as defined by the California Secretary of State. Specific details for these eligibility criteria are outlined and highlighted below in the Additional Eligibility Criteria sub-section.

Finally, the following are key points to remember when filling out a Small Business Stimulus application:

- **ELIGIBILITY:** private for-profit and non-profit businesses headquartered and operating in San Diego County that experienced financial hardship as a result of COVID-19 may apply; Businesses must have 20 or fewer employees (full-time equivalents) and a minimum one-year operating history as of February 14, 2020.
- **USE OF FUNDS:** Small business stimulus grant funds may NOT be spent on any item not part of the eligible activities in the application; Please fill out the application accordingly.
- **SUBMISSION:** Grant applications are submitted directly on the County of San Diego Small Business Stimulus Grant webpage <https://www.sandiegocounty.gov/stimulusgrant/>

If an organization has business locations in multiple Supervisorial Districts, an application will need to be submitted for each district.

ELIGIBILITY DETERMINATION

Who can apply?

Small businesses and nonprofits operating in San Diego County may apply.

Eligible businesses to be determined by the following criteria:

1. Are you a private for-profit business or non-profit?
2. Do you have twenty (20) or fewer full-time equivalents (FTEs), including sole proprietorships and independent contractors?
3. Are you based and operated in San Diego County, providing local goods and services to the community?
4. Do you have a minimum 1-year operating history as of February 14, 2020?
5. Have you experienced financial hardship as a result of COVID-19? These impacts must be documented, quantifiable, and clearly driven by COVID-19.
6. Have you complied with all state and local public health guidance?
7. Are you located in an incorporated city with its own small business stimulus grant program that is actively accepting applications and awarding grant funds?

Additional Eligibility Criteria

Prior to completing an application, non-profit organizations will need to ensure they are eligible to apply. Eligible applicants must be identified on the Charitable Organization Registry maintained by the California Attorney General (AG) as **CURRENT, EXEMPT**, or provide evidence that they are not required to register or

are in process of being registered. In addition, eligible applicants must have a status of **ACTIVE** with the California Secretary of State or otherwise show that they are authorized to conduct business in the State.

To prove eligibility, non-profit entities must do the following:

- **California Attorney General:** In accordance with the Supervision of Trustees and Fundraisers for Charitable Purposes Act, Government Code § 12580 et seq., most non-profit organizations are required to register with the California Attorney General before soliciting funds. Information regarding the registration process, including the status of already registered charities, is available on the California Attorney General's website at <http://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>. Please provide a copy of the screen shot from the Registry Verification Search Tool on the California Attorney General's website showing a **CURRENT** or **EXEMPT** status or other evidence of compliance with the State's charitable registration requirements managed by the Attorney General. Acceptable evidence includes the following documents (see [Appendix](#) for example):
 - Printed screenshot of Registry Verification showing CURRENT or EXEMPT status
 - Printed screenshot of paid Initial or Annual Registration
- **California Secretary of State:** In order to receive Small Business Stimulus Grant Program funds from the County, non-profit organizations are required to enter into a grant agreement with the County. To enter into a contract and conduct other business activities in the State, an organization must generally be identified as ACTIVE by the California Secretary of State. Information about how to register your organization with the Secretary of State and the status of registered organizations is available on the Secretary of State's website at <https://businesssearch.sos.ca.gov/>. Please provide a copy of the screen shot from the Business Search on the California Secretary of State's website showing an **ACTIVE** status or other evidence of authority to conduct business in the State. Acceptable evidence includes the following documents (see [Appendix](#) for example):
 - Printed screen shot of California Secretary of State Business Search
 - Printed screen shot of payment/transaction at sos.ca.gov domain to establish or renew ACTIVE status

Application Information

Name of Individual Completing Application: The name of the contact person who is part of the organization and can answer questions that may arise during the application process.

What is the legal status of your organization? Please select for profit or nonprofit

Business Name: Enter the name as it appears on the IRS letter for the organization and the Secretary of State Business name. ***This name must match what is submitted on the W-9 form and will be the name that the check (if awarded) will be issued to.***

Social Security Number (SSN) or Tax ID Number (TIN) Please select SSN if you will be using your social security number as your identifying number, or TIN if you will be using your Tax ID Number. ***This must match what is submitted on the W-9 form.***

Social Security Number (SSN)/Tax ID Number (TIN) Please input (without dashes) your identifying number. ***This must match what is submitted on the W-9 form.***

Business Sector: Please select the sector that best describes your organization.

- Construction
- Education and Health Services
- Financial Activities
- Government
- Information
- Leisure and Hospitality (Arts, Entertainment, and Recreation; Amusement, Gambling, and Recreation (including fitness centers); Accommodation and Food Service; Accommodation; Food Services and Drinking Places, Restaurants)
- Manufacturing
- Mining and Logging
- Professional and Business Services
- Trade, Transportation, Utilities (includes Retail)

- Other Services (includes personal care services)

Phone Number: Enter the organization phone number or the phone number of the primary contact person who is part of the organization and can answer questions that may arise during the application process.

Business Address: Enter the physical address of the organization's primary place of business.

Mailing Address: Enter the mailing address for the business. If it is the same as the physical address, please mark the box "Mailing Address is the same as Physical Business Address". ***This must match the address on the W-9, and will be where the check will be sent.***

Email: Enter the email address for the organization or for the organization contact person who can answer questions that may arise during the application process.

Please retype email address: Please confirm the email address you entered above.

Number of Employees: Enter an amount from 1 - 20. The number of employees can include sole proprietorships and independent contractors. Number of employees are full-time equivalents (FTEs).

Prior Year Revenues: Enter the actual amount of revenues recorded for the organization as a whole, not just for the project or activity for which funding is requested. We need financial data for the immediate past year.

Supervisorial District Business is located in: Please select, using <https://gis-portal.sandiegocounty.gov/arcgis/home/webmap/viewer.html?webmap=e75d5c7a59ff4d6a90e862a481c3ba96>, the district that your business is physically located in (use physical address, not mailing address).

Has your business previously received funds from the County? Please select yes if you have received funding from the Small Business Stimulus Grant previously.

How many times have you previously received funds from the County? Please enter the number of grants you were awarded.

Amount of funds previously received from the County? Please enter the total amount of all grants received by the County.

Has your business previously received funds from other sources? Please select yes if you have received funding from other sources, such as a City, State, or Federal program (e.g. PPP).

Amount of funds previously received from the County? Please enter the total amount of all grants received by other sources.

Were you able to open at any time during the shutdown? During any of the shutdown/stay at home orders, was your business able to operate?

Are you a minority, women, or veteran owned business? Please select yes if you meet any of those criteria.

ELIGIBLE ACTIVITIES

Eligible Activities: Activities eligible for funding must be a direct result of supporting public health and response activities associated with the COVID-19 pandemic. The eligible expenditure period begins March 3, 2021 and goes through the end of the agreement term.

Please select each of the following eligible activities that were driven by the direct response to COVID-19 and put the amount requested for each activity selected:

1. Innovation to promote outdoor business to protect employee and public health.
2. Payroll/employee retention or supporting employees, including but not limited to Workers Comp Insurance premium and Unemployment Insurance premium increases related to COVID-19, employee paid leave due to COVID-19 illness.
3. Purchase of Personal Protective Equipment (PPE) to protect employee and public health and efforts to sanitize the business environment.
4. Rent or mortgage payments (excluding property tax payments).
5. Addressing temporary COVID-19 related restrictions on business activity.

6. Increasing technology capacity to enable alternative work forms.
7. Creating new marketing campaigns or business plans.
8. Paying vendor invoices.
9. Facility cleaning/restoration.
10. Costs associated with additional training or virtual learning to implement COVID-19 safety measures.
11. Expenses required to plan for a safe reopening such as expert assessments and/or to conduct research or market surveys.

The list below provides examples of ineligible activities or costs covered:

- a. Expenses for the State share of Medicaid.
- b. Damages covered by insurance.
- c. Reimbursement to donors for donated items or services.
- d. Workforce bonuses other than hazard pay or overtime.
- e. Severance pay.
- f. Legal settlements.

Total Grant Amount Requested: The total grant amount requested will be automatically calculated here. The grant amount requested will equal the grant amounts requested next to the eligible activity above.

Please describe your business and the products and/or services you provide in San Diego County: Please provide a brief description of your business and the products and/or services that are provided in San Diego County.

Please describe what you will be using the funds for in further detail and the impact COVID-19 has had: The brief description should indicate how the funds would be spent if you were to be awarded a grant for activities impacted by COVID-19. This information will be used to help evaluate your request. **The grant funds may not be spent on any item that is not part of the activity description in this application.** Further, the amount of grant funds that may be spent for each activity will be limited to the lesser of the amount requested or the amount awarded for each activity. Because the grant may be for less than the total amount requested, be careful to list the proposed activities in order of importance, with activity number 1 being the highest priority. If awarded, all activities must take place within the established grant period.

How does your business serve the local community? Please describe any activities or ways you serve the local community.

ADDITIONAL BUSINESS AND FINANCIAL INFORMATION

Please attach documentation for each of the following:

Business License: Provide a copy of your business license. This is not required for businesses in the unincorporated areas or nonprofits.

Attorney General Proof of Eligibility: For nonprofits, please provide a copy of the screen shot from the Registry Verification Search Tool on the California Attorney General's website showing a **CURRENT** or **EXEMPT** status or other evidence of compliance with the State's charitable registration requirements managed by the Attorney General. Acceptable evidence includes the following documents (see [Appendix](#) for example):

- Printed screenshot of Registry Verification showing CURRENT or EXEMPT status
- Printed screenshot of paid Initial or Annual Registration

Secretary of State Proof Eligibility: For nonprofits, please provide a copy of the screen shot from the Business Search on the California Secretary of State's website showing an **ACTIVE** status or other evidence of authority to conduct business in the State. Acceptable evidence includes the following documents (see [Appendix](#) for example):

- Printed screen shot of California Secretary of State Business Search
- Printed screen shot of payment/transaction at sos.ca.gov domain to establish or renew ACTIVE status

Prior Year Applicant Tax Return: Provide a copy of the most recently submitted business Federal Tax Return. If business taxes are reported on personal tax return, the business related sections must be reported.

Letter from IRS Showing Federal Tax Identification Number (TIN) aka Employer Identification Number (EIN): Please attach the IRS letter showing the organization's federal tax identification number or employer identification number. If not available, please attach a page of the tax return that shows this information.

Monthly Financial Statements: Include the monthly financial statements, including the Balance Sheet and Income Statement, internally prepared as of February 14, 2020. Include the monthly financial statements for each month after the conclusion of your fiscal year or each month following the reporting period reported on your corporate tax return. If the 2019 tax return was provided, please provide monthly financial statements from January 1, 2020 to February 14, 2020 only. Financial statements would be preferably completed in accordance with Generally Accepted Accounting Principles (GAAP), but not required.

Detailed Payroll Report as of February 14, 2020 (For businesses with paid employees): Please provide payroll summary from 4th quarter 2019 to February 14, 2020 only.

W-9 Form: This form needs to be completed for businesses that will receive funding. To expedite the process after funding approval, businesses are requested to fill out the form. The information in this form must match the business name, mailing address, and SSN/TIN information in the application.

GRANT ADMINISTRATOR

This is the primary person who would be responsible for overseeing the expenditure of the funds and authorized to sign the Small Business Stimulus grant agreement on behalf of your business.

Administrator Name: The name of the primary contact person who will be authorized to sign the grant agreement.

Administrator Phone Number: Enter the phone number of the primary contact person who will be responsible for the grant agreement.

Administrator Email Address: Enter the email of the primary contact person who will be responsible for the grant agreement. This will be the email address where the grant agreement will be sent to.

SUBMISSION PROCESS

Verify all the required fields and attachments are completed above. Click '**Submit**' to submit your grant application. An email will be sent to you with verification that your application successfully come through. **Please save the email address, business name, and confirmation number was used to submit your application.**

Please note, if your small business has locations in more than one Supervisorial District, a separate grant application will need to be completed for each Supervisorial District with the information required above.

For funding questions: Contact the Board of Supervisors offices at:

- District 1 (Supervisor Nora Vargas) – (619) 531-5511; District1grants@sdcounty.ca.gov
- District 2 (Supervisor Joel Anderson) – (619) 531-5522
- District 3 (Supervisor Terra Lawson-Remer) – (619) 531-5533; District3grants@sdcounty.ca.gov
- District 4 (Supervisor Nathan Fletcher) – (619) 531-5544; D4stimulusgrants@sdcounty.ca.gov
- District 5 (Supervisor Jim Desmond) – Candyce Yee: (619) 531-5555; candyce.yee@sdcounty.ca.gov

For general or technical questions: Please email stimulusgrant@sdcounty.ca.gov.

IN SUMMARY

Please ensure all the information entered and documentation attached is correct before submitting. Applications will be reviewed to determine eligibility with program activities as noted above under Eligibility

Determination and Eligible Activities.


Final award information will be made available online at:

<https://www.sandiegocounty.gov/stimulusgrant/grantinfo.html>. Successful applicants will be required to enter into a grant agreement with the County.

Appendix

Samples of Attorney General Proof of Eligibility:

Current Status

State of California Department of Justice		 Office of the Attorney General				
Home	About the AG	In the News	Careers	Services & Information	Programs A - Z	Contact Us
Registrant Details						
Entity Type is either the Corporate Class as registered with the Secretary of State or based on founding and registration documents submitted to the Registry.						
Organization Name:	SAN DIEGO BLOOD BANK	IRS FEIN:	951696732			
Entity Type:	Public Benefit	SOS/FTB Corporate/Organization Number:	0248124			
RCT Registration Number:	006228	Registration Type:	Charity Registration			
Program Type:	Charity	Renewal Due Date:	11/15/2018			
Issue Date:	6/30/2006	Date This Status:				
Registry Status:	Current					
Date of Last Renewal:	7/10/2018					
Mailing Address						
Street:	3636 GATEWAY CENTER AVENUE, #100					
Street Line 2:						
City, State Zip:	SAN DIEGO CA 92102					
Annual Renewal Data Reported to the Registry						
Status of Filing:	Accepted					
Accounting Period Begin Date:	6/30/2002					
Accounting Period End Date:	6/30/2002					
Total Assets:	\$11,465,075.00					
Total Revenue:	\$26,052,525.00					
Filing Received Date:	10/7/2002					
Complete IRS Form 990 Received (Y/N):	N					
Online Submission (Y/N):	N					
Status of Filing:	Accepted					
Accounting Period Begin Date:	6/30/2003					
Accounting Period End Date:	6/30/2003					
Total Assets:	\$11,042,696.00					
Total Revenue:	\$26,944,257.00					
Filing Received Date:	10/24/2003					
Complete IRS Form 990 Received (Y/N):	Y					
Online Submission (Y/N):	N					
Status of Filing:	Accepted					
Accounting Period Begin Date:	6/30/2004					
Accounting Period End Date:	6/30/2004					
Total Assets:	\$11,316,087.00					
Total Revenue:	\$30,129,712.00					
Filing Received Date:	10/26/2004					
Complete IRS Form 990 Received (Y/N):	Y					
Online Submission (Y/N):	N					
Status of Filing:	Accepted					
Accounting Period Begin Date:	6/30/2005					
Accounting Period End Date:	6/30/2005					
Total Assets:	\$11,380,855.00					
Total Revenue:	\$21,313,577.00					


Exempt Status

State of California Department of Justice				Office of the Attorney General	
Home About the AG In the News Careers Services & Information Programs A - Z Contact Us					
Registrant Details					
Entity Type is either the Corporate Class as registered with the Secretary of State or based on founding and registration documents submitted to the Registry.					
Organization Name:	GROSSMONT COLLEGE	IRS FEIN:	956006652		
Entity Type:	Public Benefit	SOS/FTB Corporate/Organization Number:			
RCT Registration Number:	CT0137190	Registration Type:	Charity Registration		
Program Type:	Charity	Renewal Due Date:			
Issue Date:	3/5/2008	Date This Status:	3/5/2008		
Registry Status:	Exempt				
Date of Last Renewal:					
Mailing Address					
Street:	8800 GROSSMONT COLLEGE DR				
Street Line 2:					
City, State Zip:	EL CAJON CA 92020				
Annual Renewal Data Reported to the Registry					
Related Documents					
No Related Documents					
Prerequisite Information					
Prereq Type:	Prerequisite	Relationship:	Charity		
Registrant:	GRANT WRITING SPECIALISTS				
Registration No:	E0001664	Registration Type:	Fundraising Event	Registration Status:	Complete
Date Established:	3/6/2008	Association Date:	1/8/2008	Expiration Date:	2/8/2008


Sample of Secretary of State Proof of Eligibility:

Active Status

Skip to Main Content | Skip to Footer



Alex Padilla California Secretary of State



Home About Business Notary & Authentications Elections Campaign & Lobbying State Archives Registries News Contact

Business Entities (BE) **Business Search - Entity Detail**

The California Business Search is updated daily and reflects work processed through Wednesday, December 5, 2018. Please refer to document [Processing Times](#) for the received dates of filings currently being processed. The data provided is not a complete or certified record of an entity. Not all images are available online.





C0248124 SAN DIEGO BLOOD BANK

Registration Date: 09/11/1950
Jurisdiction: CALIFORNIA
Entity Type: DOMESTIC NONPROFIT
Status: **ACTIVE**
Agent for Service of Process: DAVID WELLIS
3636 GATEWAY CENTER AVE, STE 100
SAN DIEGO CA 92102

Entity Address:
3636 GATEWAY CENTER AVE, STE 100
SAN DIEGO CA 92102

Entity Mailing Address:
3636 GATEWAY CENTER AVE, STE 100
SAN DIEGO CA 92102

A Statement of Information is due EVERY EVEN-NUMBERED year beginning five months before and through the end of September.

Document Type	File Date	PDF
SI-COMPLETE	07/20/2018	
SI-COMPLETE	06/26/2017	
MERGER	06/30/2007	
AMENDMENT	11/09/1995	

Online Services

- File LLC Statement of Information
- File Corporation Statement of Information
- Business Search
- Current Processing Dates
- Disclosure Search
- Service Options
- Name Availability
- Forms, Samples & Fees
- Statements of Information (annual/biennial reports)
- Filing Tips
- Information Requests (certificates, copies & status reports)
- Service of Process
- FAQs
- Contact Information
- Resources
 - Business Resources