

City of Boise 2022 Coronavirus Fiscal Recovery Grant Program Attachment C: Eligibility and Prioritization Criteria

The City of Boise is partnering with United Way of Treasure Valley (UWTV) to disburse minigrants in the amount of \$4,000 to eligible very small businesses in Boise, Idaho.

The majority business owner must complete the following questions. A majority business owner is defined as a single-employer plan, an individual who owns, directly or indirectly:

- (1) The entire interest in an unincorporated trade or business;
- (2) 50 percent or more of the capital interest or the profits interest in a partnership; or
- (3) 50 percent or more of either the voting stock of a corporation or the value of all of the stock of a corporation.

The following information must be collected from grant applicants:

- Applicant Information
 - o Business Name
 - EIN # or Tax ID # (as applicable)
- Contact Information
 - o Phone Number, Email, Business Address, and Mailing Address
- Date and Time of Application

Required Disclosures

Any funding received by a grant recipient will be considered taxable income. A 1099-MISC will be distributed for tax purposes, please consult your tax professional with any questions about tax ramifications.

By submitting an application, the applicant authorizes the release of any and all information provided in this application from United Way to the City of Boise, and/or its agents and consultants, for program monitoring and compliance and for the purpose of verifying the eligibility and prioritization information provided.

Eligibility Criteria Review

UWTV will track and document the information listed below for all program application submissions to satisfy eligibility requirements as defined in the Treasury's <u>Final Rule</u> (31 CFR Part 35) and further defined by the City of Boise.



Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of the United States as to any matter within its jurisdiction. Knowingly supplying false, incomplete, or inaccurate information is punishable under Federal or State laws and may result in prosecution and repayment of assistance.

	General Information								
1	Applicant Information	Business NameEIN # or Tax ID # (as applicable)							
2	Contact Information	 Phone Number Email Address Business Address Mailing Address 							
3	Application Information	Date and Time of Application							

The following questions assess a business's eligibility for City of Boise ARPA funds.

	Eligibility Criteria	
1	Is your business located in Boise? NOTE: This grant program is ONLY available to businesses located within the City of Boise jurisdictional boundaries. The registration address with the IRS is considered the business location. The City of Boise will verify that you are domiciled in Boise. A business license with the City of Boise does not meet the requirement.	
2	Is your business structured as a sole proprietorship, partnership, limited partnership, LLC (limited liability company), or corporation? Note: non-profits and faith-based organizations are not eligible for this funding. (If Yes – Next Question)	(If No - Ineligible for Funding) (If No - Ineligible for Funding)
3	Does your business have less than 20 employees? (Y/N) (If Yes – Next Question)	(If No - Ineligible for Funding)
4	Is your business part of a franchise or MLM (Multi- Level Marketing) business model? (Y/N) (If No – Next Question)	(If Yes - Ineligible for Funding)
5	Are your business's sales less than \$1,000,000 per year? (Y/N) (If Yes – Next Question)	(If No - Ineligible for Funding)



6	Please review the list of qualified business industries	
	and their descriptions. Does your business belong to	
	a qualified industry? If yes, please list the	
	corresponding NAICS code (North American	
	Industry Classification System).	
	(If Yes – Next Question)	(If No - Ineligible for Funding)
7	Does this business operate within a Boise Qualified	
	Census Tract (QCT)? If so, which one?	
	Boise City Limits and Qualified Census Tracts	
	(If No – Next Question)	(If Yes – Eligibility Confirmed)
8	Has your business experienced negative economic	
	impact as a result of the COVID-19 pandemic, such	
	as:	
	 a. Periods of business closure; 	
	 b. Trouble covering payroll costs to retain 	
	employees or support operating costs;	
	 c. An inability to weather financial hardships; 	
	d. and/or general financial insecurity resulting	
	from the COVID-19 public health	
	emergency?	
	NOTE: You must have documentation to	
	demonstrate your business experienced negative	
	economic impact as a result of the COVID-19	
	pandemic. You may be required to provide	
	evidence to substantiate your claim, such as	
	audited financial statements, tax returns, balance	
	sheets, and income statements.	
	(If No – Ineligible for Funding)	(If Yes – Eligibility Confirmed)

If a business is deemed eligible for City of Boise ARPA funds, the applicant must proceed to priority scoring questions. These questions will prioritize your request for funding based on a numeric value. A higher score indicates a higher level of prioritization. The City of Boise anticipates there will be more requests for funding than the dollars available. In other words, it is likely that not all eligible businesses will receive funding. Eligibility should not be mistaken as confirmation that your business will receive grant funding.

	Prioritization Questions
1	Is the business owner's household income: a. At or below 100% of the Federal Poverty Level? b. At or below 125% of the Federal Poverty Level? c. At or below 130% of the Federal Poverty Level? (certification/attestation)
2	Do you identify as Black, Asian, or non-white? (Y/N)



3	Do you have a four-year college degree? NOTE: this excludes associates degrees and trade certifications.
4	Do you identify yourself as female? (Y/N)
5	Has your business received federal, state, or city grant funding to support your business between March 2020 and present? (Y/N)
6	Does your business collaborate with other Boise-based businesses? If yes, please identify the business in the spaces below:
	Yes, my business collaborates with 3 or more other local businesses 1
	2
	Yes, my business collaborates with 2 other local businesses 1 2
	Yes, my business collaborates with 1 other local business 1
	NOTE: Examples include sourcing or purchasing ingredients from a local company or using the services of a Boise-based accountant.
7	Does the majority of your business income originate from the sale or resale of products made outside the USA? (Y/N)
8	Do you live with a disability? NOTE: A disability is defined by the ADA as a physical or mental impairment that substantially limits one or more major life activities, a person who has a history or record of such an impairment, or a person who is perceived by others as having such an impairment.
9	Does your business currently employ a person(s) living with a disability? NOTE: A disability is defined by the ADA as a physical or mental impairment that substantially limits one or more major life activities, a person who has a history or record of such an impairment, or a person who is perceived by others as having such an impairment.

	General Information	
1	Conflict of Interest: No employee, officer, or agent	
	shall participate in the selection, award, or	
	administration of a contract supported by Federal	
	funds if a real or apparent conflict of interest would	
	be involved. Such a conflict would arise when an	
	employee, officer, or agent, any member of his or	



her immediate family, his or her partner, or an organization which employs or is about to employ any of the parties indicated herein, has a financial or other interest in the firm selected for an award. No person who is an employee, agent, consultant, officer, or elected official or appointed official of the recipient or subrecipient that are receiving federal funds and (1) who exercises or has exercised any functions or responsibilities with respect to activities assisted with federal funds; or (2) who is in a position to participate in a decisionmaking process or gain inside information with regard to these activities, may obtain a financial interest from a federally funded activity, or have any themselves or those with whom they have family or business ties, during their tenure or for one year thereafter.

Have you read and understand what a conflict of interest is? (Y/N)

(Required Certification)

- Conflict of Interest: Please review the questions listed below.
 - A. Are any employees, agents, consultants, officers, family members, or elected officials of the organization requesting funds in a position to gain inside information regarding approval of this application?
 - B. Will any employees, agents, consultants, officers, family members, or elected officials of the organization requesting funds obtain a financial interest or substantial benefit from this activity?
 - C. Will any employee, agent, consultants, officers, family members, or elected officials of the organization requesting funds have any interest in any contract, subcontract, or agreement with respect to funding this application, either for themselves or those with whom they have family or business ties during the life of the loan?

Did you answer yes to any of the above questions? If so, a letter must be submitted with the application that includes the following information:

 A disclosure of the nature and the extent of the conflict.



	 A description of how public disclosure will be made. A qualified attorney's opinion that the conflict of interest does not violate federal, state, or local law. 	(Required Certification)
3	 By digitally signing below, I attest the following: I understand the City of Boise will rely on this application and certifications as a material representation in making a disbursement of funds to the applying entity. By submitting this application, I certify that, to the best of my knowledge, I'm an eligible small business as defined in the Treasury's Final Rule (31 CFR Part 35). therefore, certify that all information submitted in this request is true and accurate. Please print your name below. 	

By submitting an application, the applicant certifies under penalty of perjury that all information provided is true and correct.

RESOURCES

Federal Poverty Guidelines 2022 https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines/prior-hhs-poverty-guidelines-federal-register-references/2021-poverty-guidelines

Census Bureau NAICS Codes https://www.census.gov/naics/

American Disabilities Act https://www.ada.gov/

Majority business owner is defined as:

Majority owner means, with respect to a contributing sponsor of a single-employer plan, an individual who owns, directly or indirectly (taking into account the constructive ownership rules of section 414 and (c) of the Code) -

- (1) The entire interest in an unincorporated trade or business;
- (2) 50 percent or more of the capital interest or the profits interest in a partnership; or
- (3) 50 percent or more of either the voting stock of a corporation or the value of all of the stock of a corporation.

Federal Poverty Levels 3/2022-3/2023

Annual Income											,
		100%	125%	130%	138%	150%	185%	200%	235%	250%	300%
Family Size: 1		13,590	16,988	17,667	18,754	20,385	25,142	27,180	31,937	33,975	40,770
	2	18,310	22,888	23,803	25,268	27,465	33,874	36,620	43,029	45,775	54,930
	3	23.030	28.788	29.939	31.781	34.545	42.606	46.060	54,121	57.575	69.090



4	4	27,750	34,688	36,075	38,295	41,625	51,338	55,500	65,213	69,375	83,250
5	5	32,470	40,588	42,211	44,809	48,705	60,070	64,940	76,305	81,175	97,410
6	6	37,190	46,488	48,347	51,322	55,785	68,802	74,380	87,397	92,975	111,570
7	7	41,910	52,388	54,483	57,836	62,865	77,534	83,820	98,489	104,775	125,730
3	8	46,630	58,288	60,619	64,349	69,945	86,266	93,260	109,581	116,575	139,890
Each add'l person,											
add:		4,720	5,900	6,136	6,514	7,080	8,732	9,440	11,092	11,800	14,160
auu.		4,720	3,300	0,130	0,314	7,080	0,732	3,440	11,092	11,600	14,100
Monthly Income											
		100%	125%	130%	138%	150%	185%	200%	235%	250%	300%
Family Size: 1		1,133	1,416	1,473	1,563	1,699	2,095	2,265	2,663	2,831	3,398
2	2	1,526	1,907	1,983	2,106	2,289	2,823	3,052	3,586	3,815	4,578
3	3	1,919	2,399	2,494	2,648	2,879	3,550	3,838	4,509	4,798	5,758
4	4	2,313	2,891	3,006	3,191	3,469	4,278	4,625	5,436	5,781	6,938
5	5	2,706	3,382	3,517	3,734	4,059	5,006	5,412	6,359	6,765	8,118
6	6	3,099	3,874	4,028	4,277	4,649	5,733	6,198	7,283	7,748	9,298
7	7	3,493	4,366	4,540	4,820	5,239	6,461	6,985	8,208	8,731	10,478
8	8	3,886	4,857	5,051	5,362	5,829	7,189	7,772	9,132	9,715	11,658
Each add'l person,											
add:		393	492	511	543	590	727	786	924	983	1,179