Program and Application Guide

Revised: 05/25/23

CALIFORNIA OFFICE OF THE SMALL BUSINESS ADVOCATE

CALIFORNIA GOVERNOR'S OFFICE OF BUSINESS AND ECONOMIC DEVELOPMENT

CALIFORNIA

Supplemental Paid Sick Leave Grant

APPLICATION PORTAL POWERED BY LENDISTRY

Program Overview

CALIFORNIA
Supplemental Paid
Sick Leave Grant
APPLICATION PORTAL POWERED BY LENDISTRY

The California Small Business and Nonprofit COVID-19 Supplemental Paid Sick Leave Relief Grant Program will award grants to **“qualified small businesses and nonprofits”** on a first-come, first-served basis to assist qualified small businesses and nonprofits that have incurred costs for COVID-19 Supplemental Paid Sick Leave following Sections 248.6 and 248.7 of the California Labor Code.

Grant awards can only be used for reimbursement of COVID-19 Supplemental Paid Sick Leave provided between January 1, 2022, and December 31, 2022. Applicants must provide proof of employee payroll records that verify all COVID-19 Supplemental Paid Sick Leave provided by the applicant following the requirements of Sections 248.6 and 248.7 of the California Labor Code that match the amount of the grant request.

Verifiable COVID-19 Supplemental Paid Sick Leave provided by Applicant (January 1, 2022 – December 31, 2022)	Eligible Grant Award Amount
$5,000 up to $10,000	$5,000
$10,000 up to $14,999	$10,000
$15,000 up to 19,999	$15,000
$20,000 up to $24,999	$20,000
$25,000 up to $29,999	$25,000
$30,000 up to $34,999	$30,000
$35,000 up to 39,999	$35,000
$40,000 up to $44,999	$40,000
$45,000 up to 49,999	$45,000
$50,000 or more	$50,000

Definitions

- For the purposes of this Program, **“qualified small business or nonprofit”** means a business or nonprofit that meets all the eligibility criteria (listed here) established in California Government Code Section 12100.965, as confirmed by the California Office of the Small Business Advocate (CalOSBA) or fiscal agent through a review of revenue declines, other relief funds received, credit history (solely for the purposes of verifying Office of Foreign Controls compliance), tax returns, and bank account validation.

- **“Applicant”** means the qualified small business or nonprofit, including, but not limited to, a corporation, nonprofit organization, cooperative, or partnership, that submits an application for the Program.

- **“California Small Business and Nonprofit COVID-19 Supplemental Paid Sick Leave Relief Grant Program”** or **“Program”** means the grant program established in California Government Code Section 12100.975.

Eligibility Requirements

A **“qualified small business or nonprofit”** must satisfy the following criteria to be eligible to receive a grant award under the Program:

1. Must meet the definition of a qualified small business or nonprofit as confirmed by CalOSBA or fiscal agent through review of revenue declines, other relief funds received, credit history, tax returns, and bank account validation (see Definitions)

   A. Must be one of the following:
      i. A “C” corporation, “S” corporation, cooperative, limited liability company, partnership, or limited partnership.
      ii. A registered 501(c)(3), 501(c)(6), or 501(c)(19).

   B. Began operating before June 1, 2021

   C. Is currently active and operating

   D. Had 26 to 49 employees between January 1, 2021, and December 31, 2022, and provides payroll data and an affidavit, signed under penalty of perjury, attesting to that fact
      i. For employers covered by Industrial Welfare Commission Order No. 16-2001 only, the number of employees shall be calculated as the number of full-time employees that have worked for the employer, without any break in employment, for the past 24 months.

   E. Has provided COVID-19 Supplemental Paid Sick Leave following the requirements of Sections 248.6 and 248.7 of the California Labor Code

   F. Provides organizing documents, including a 2020 or 2021 tax return or Form 990, and a copy of official filing with the Secretary of State or with the local municipality, as applicable, including, but not limited to, Articles of Incorporation, Certificate of Organization, Fictitious Name of Registration, or government-issued business license

2. Must have an owner - or in the case of a nonprofit, an officer – identified as the authorized signer on the application that is at least 18 years of age

3. Able to provide acceptable form of identity verification through acceptable government-issued photo ID (i.e., through Lendistry’s designated identification verification service)

4. Applicants with multiple business entities, franchises, locations, etc. are not eligible for multiple grants and are only allowed to apply once. Only one entity from any member of a "controlled group of corporations" as defined in California Revenue and Taxation Code Section 23626 may apply. No more than one entity may apply for the grant that are related under sections 267, 318, or 707 of the United States Internal Revenue Code

Ineligible Businesses

CALIFORNIA Supplemental Paid Sick Leave Grant
APPLICATION PORTAL POWERED BY LENDISTRY

The following small businesses and nonprofit organizations will be deemed ineligible:

- Businesses or nonprofits without a physical presence in the state
- Nonprofit businesses not registered as a 501(c)(3), 501(c)(6), or 501(c)(19)
- Government entities, other than Native American tribes, or elected official offices
- Businesses or organizations 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)
- Passive businesses, investment companies, and investors who file a Schedule E on their tax returns
- Financial institutions or businesses primarily engaged in the business of lending, such as banks, finance companies, and factoring companies
- Businesses or organizations engaged in any activity that is unlawful under federal, state, or local law
- Businesses or organizations that restrict patronage for any reason other than capacity
- Speculative businesses
- Businesses with any owner of greater than 10 percent of the equity interest in it or, in the case of nonprofits, organizations with any officer or board member who meets one or more of the following criteria:
  - (i) The owner, or any officer or board member, 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, or any officer or board member, 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 listed in clause (i).
- Affiliated companies, as defined in Section 121.103 of Title 13 of the Code of Federal Regulations

Required Documents

The following documents are required to apply for this Program:

1. **Applicant Certifications**
   - Complete and upload the Applicant Certifications applicable to your business/organization **only**

2. **Official filing with the California Secretary of State (which must be active) or local municipality**, as applicable, for your business or organization, such as one of the following:
   - Articles of Incorporation;
   - Certificate of Organization;
   - Fictitious Business Name filing;
   - Professional license;
   - Government-issued business license or permit

3. **Proof of Revenue: 2020 or 2021 filed federal business tax filing (complete and unaltered)**
   1. For-profit businesses: 2020 or 2021 IRS Form 1040, 1065, 1120, or 1120-S
   2. Nonprofit organizations: 2020 or 2021 IRS Form 990, 990-N, or 990-Z)

4. **Proof of IRS tax-exempt status (required for nonprofit organizations only)**
   - Copy of IRS 501(c)(3), 501(c)(6), & 501(c)(19) exemption determination letter

5. **Proof of Employee Count and Costs Incurred: 2021 and 2022 Payroll Records**
   - Needed to verify employee count for both 2021 and 2022 and costs incurred for providing COVID-19 Supplemental Paid Sick Leave between January 1, 2022, and December 31, 2022.

6. **Proof of Employee Count: 2021 and 2022 IRS Form W-3**
   - Needed to verify employee count between January 1, 2021, and December 31, 2022

7. **Acceptable Government-Issued Photo ID uploaded via Persona**, which will be embedded in the application. Acceptable forms of government-issued photo ID:
   - Driver's license
   - State ID
   - United States Passport or Foreign Passport

8. **Valid bank account linked via Plaid**, which will be embedded in the application
   - If an applicant does not have an online banking setup, or their bank account cannot be verified through Plaid, the applicant is required to submit the two (2) most recent months of bank statements with transaction history.

This list is not exhaustive. Lendistry may contact you by email, phone, and/or text (if authorized) to request additional documentation to verify the information you submitted in your application.

How to Complete the Applicant Certifications

CALIFORNIA
Supplemental Paid Sick Leave Grant

APPLICATION PORTAL POWERED BY LENDISTRY

Applicant Certifications

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 the Applicant Certifications.

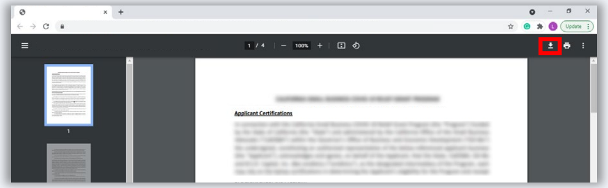
The Applicant Certifications will be available in electronic form for you to download and complete. A signed copy of the Applicant Certifications is a required document in this grant process and will need to be uploaded to the Portal as a PDF file.

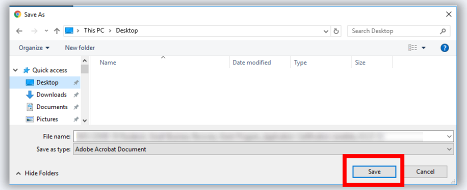
Download the Applicant Certifications and save the file to your device. You can complete the Applicant Certifications electronically or print the file and complete it manually.

How to Complete Your Applicant Certifications Electronically

Step 1

Click the download icon to download the Applicant Certifications and save the file on your device.



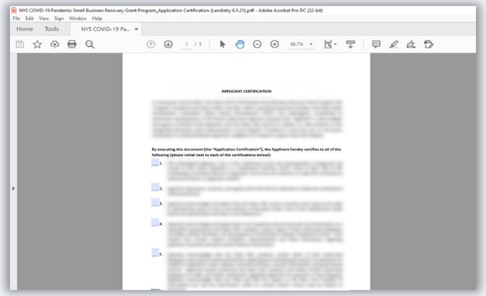


Step 2

Locate the Applicant Certifications on your device and open the file. Your Applicant Certifications will open as a PDF file.

Step 3

Complete the Applicant Certifications by entering your initials next to the numbered items, add your signature, and input business information on the last page.



Step 4

After completing the Applicant Certifications, save the file again by going to File > Save or by pressing CTRL+S on your keyboard.

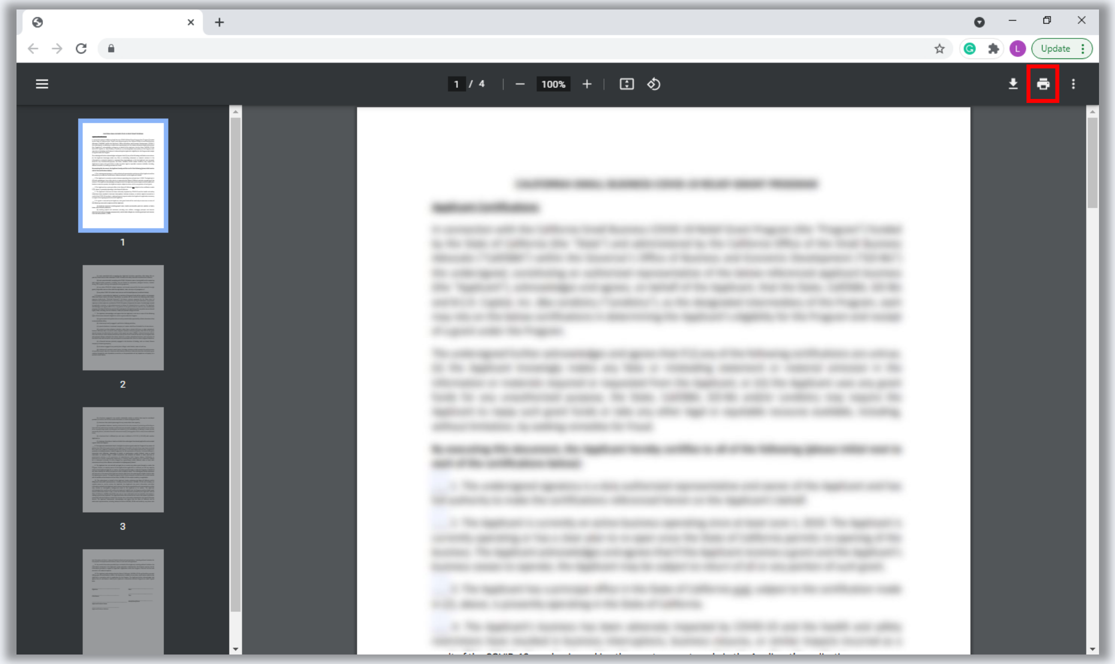
Step 5

Upload the completed Applicant Certifications as PDF file in Lendistry's Portal. See page 44 for reference.

How to Complete Your Applicant Certifications Manually

Step 1

Print the Applicant Certifications by clicking the printer icon which is highlighted by the red box below.



Step 2

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

Step 3

Scan the completed Applicant Certifications and save the file on your device as a PDF.

Step 4

Upload the completed Applicant Certifications as a PDF file in Lendistry's Portal. See page 44 for reference.

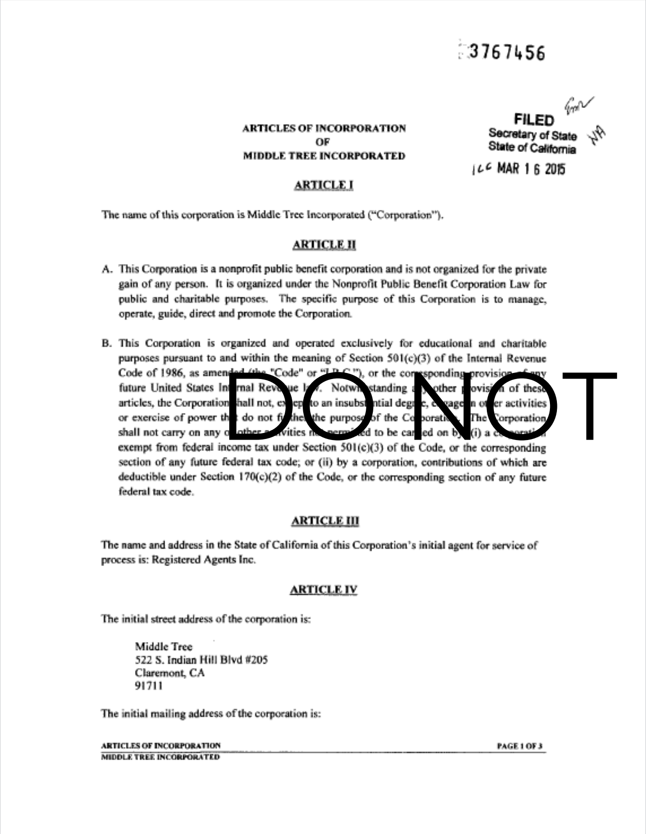
Examples of Required Documents

CALIFORNIA
Supplemental Paid Sick Leave Grant

APPLICATION PORTAL POWERED BY LENDISTRY

Filing with the CA Secretary of State or Local Municipality

Articles of Incorporation


3767456

FILED
Secretary of State
State of California
MAR 1 6 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 purposes 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 — PAGE 1 OF 3
MIDDLE TREE INCORPORATED

DO NOT USE. EXAMPLE ONLY.

Fictitious Name of Registration


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

OFFICE OF THE COUNTY CLERK

FICTITIOUS BUSINESS NAME STATEMENT

COUNTY CLERK'S FILING STAMP

SEE REVERSE SIDE FOR FEES AND INSTRUCTIONS

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

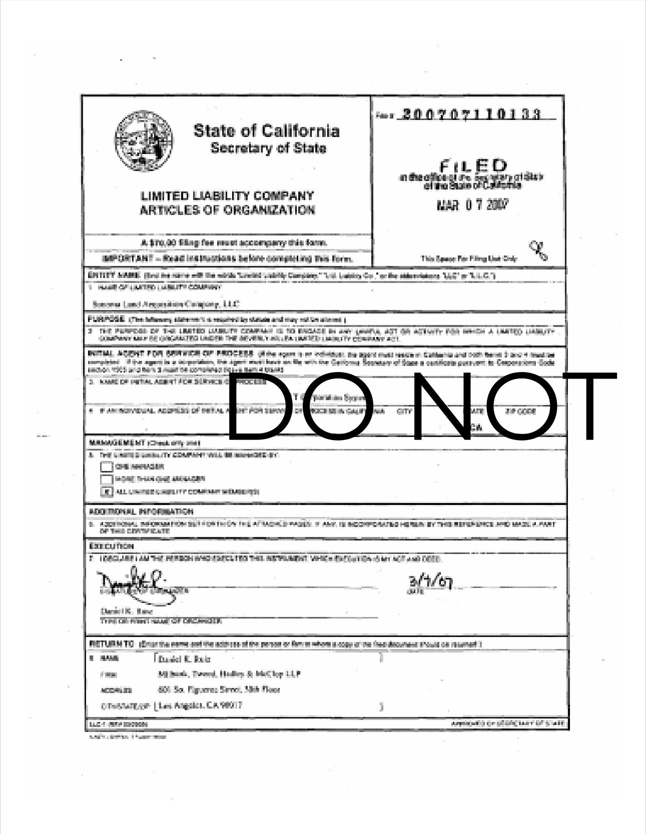
I declare that all the information in this statement is true and correct. (A registrant who declares as true, information which he or she knows to be false is guilty of a crime.)

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

Continued next page.

Filing with the CA Secretary of State or Local Municipality

Certificate of Organization



State of California
Secretary of State

LIMITED LIABILITY COMPANY
ARTICLES OF ORGANIZATION

A $70.00 filing fee must accompany this form.
IMPORTANT – Read instructions before completing this form.

File # 200707110133

FILED
in the office of the Secretary of State
of the State of California

MAR 07 2007

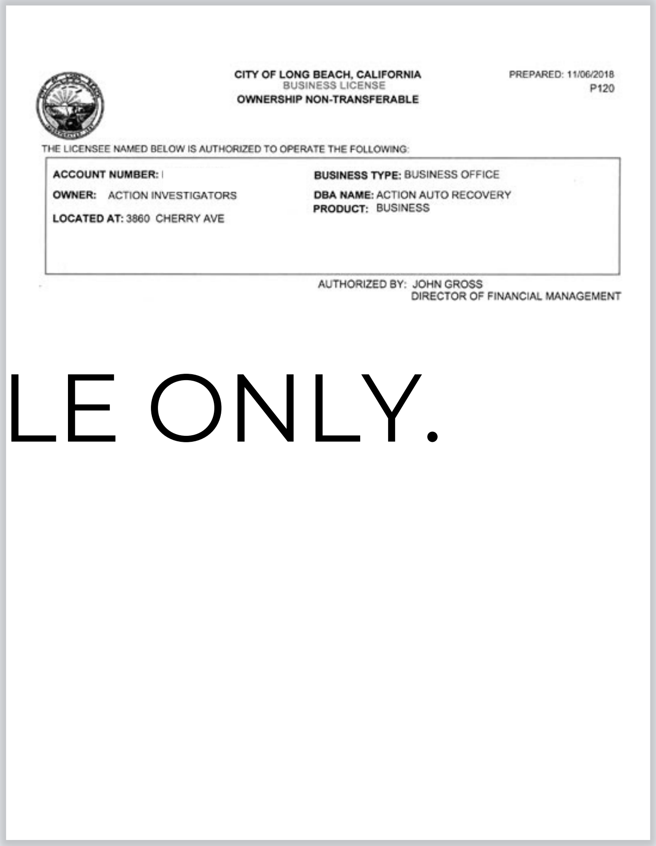
This Space For Filing Use Only

ENTITY NAME
PURPOSE
INITIAL AGENT FOR SERVICE OF PROCESS
MANAGEMENT
ADDITIONAL INFORMATION
EXECUTION

3/7/07

RETURN TO

Government-Issued Business License



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

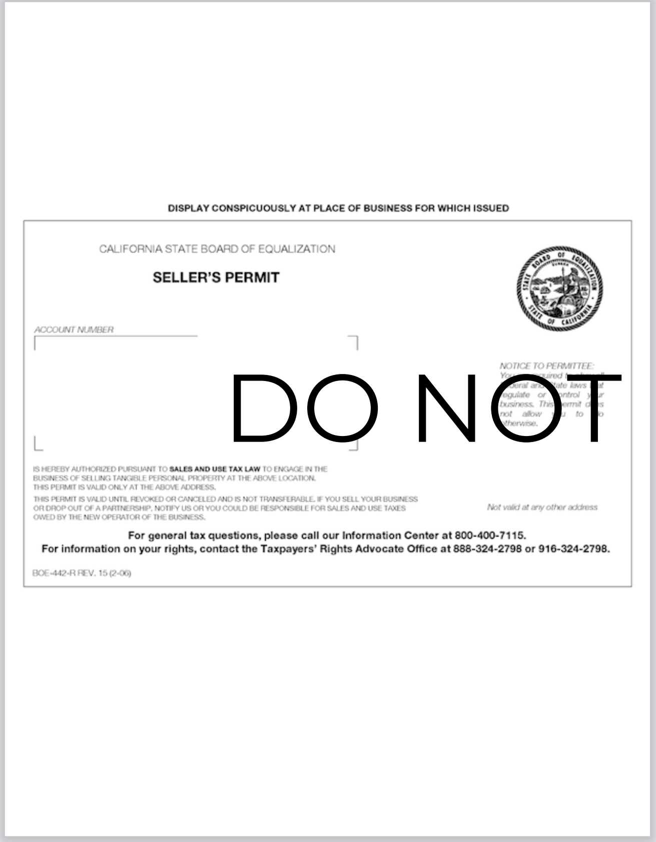
AUTHORIZED BY: JOHN GROSS
DIRECTOR OF FINANCIAL MANAGEMENT

DO NOT USE. EXAMPLE ONLY.

Continued next page.

Filing with the CA Secretary of State or Local Municipality

Seller's Permit



DISPLAY CONSPICUOUSLY AT PLACE OF BUSINESS FOR WHICH ISSUED

CALIFORNIA STATE BOARD OF EQUALIZATION

SELLER'S PERMIT

ACCOUNT NUMBER

NOTICE TO PERMITTEE: You [illegible] required [illegible] [illegible]ederal and [illegible]tate laws [illegible] regulate or [illegible]ontrol y[illegible]ur business. This [illegible]ermit d[illegible]s not allow [illegible] to [illegible] otherwise.

IS HEREBY AUTHORIZED PURSUANT TO **SALES AND USE TAX LAW** TO ENGAGE IN THE BUSINESS OF SELLING TANGIBLE PERSONAL PROPERTY AT THE ABOVE LOCATION. THIS PERMIT IS VALID ONLY AT THE ABOVE ADDRESS.

THIS PERMIT IS VALID UNTIL REVOKED OR CANCELED AND IS NOT TRANSFERABLE. IF YOU SELL YOUR BUSINESS OR DROP OUT OF A PARTNERSHIP, NOTIFY US OR YOU COULD BE RESPONSIBLE FOR SALES AND USE TAXES OWED BY THE NEW OPERATOR OF THE BUSINESS.

Not valid at any other address

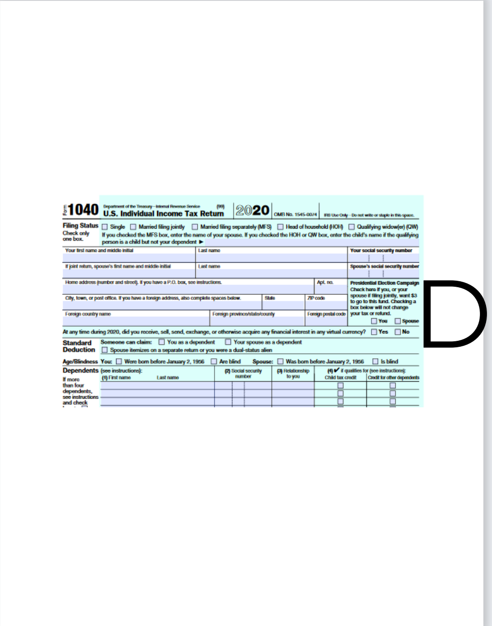
For general tax questions, please call our Information Center at 800-400-7115.
For information on your rights, contact the Taxpayers' Rights Advocate Office at 888-324-2798 or 916-324-2798.

BOE-442-R REV. 15 (2-06)

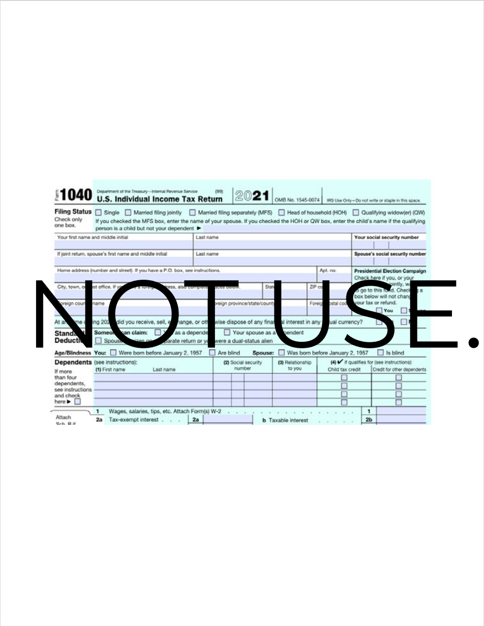
DO NOT USE. EXAMPLE ONLY.

Federal Business Tax Return (For-Profit Businesses)

IRS Form 1040

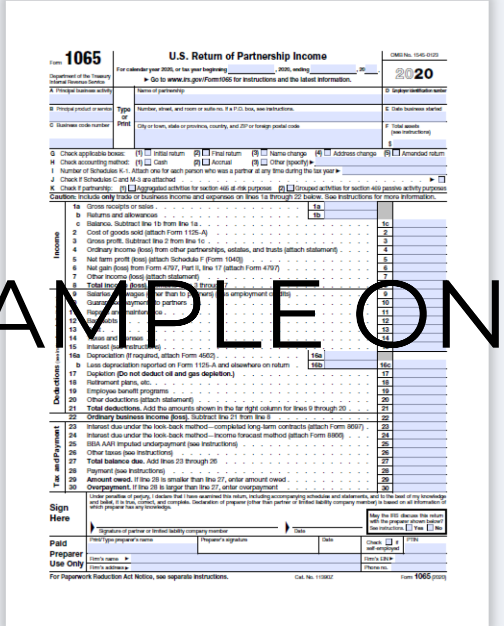


2020

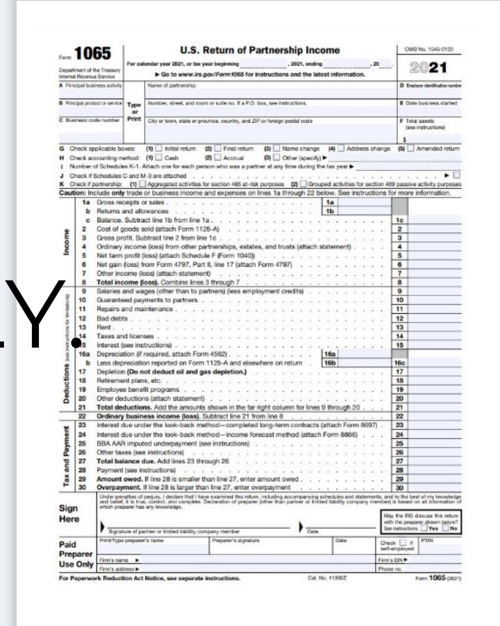


2021

IRS Form 1065



2020



2021

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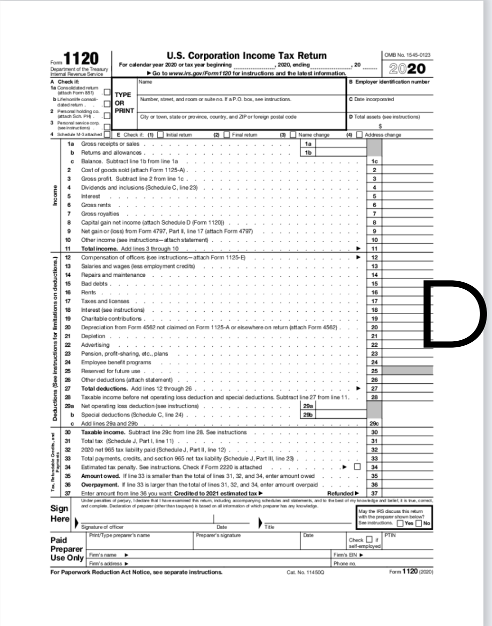
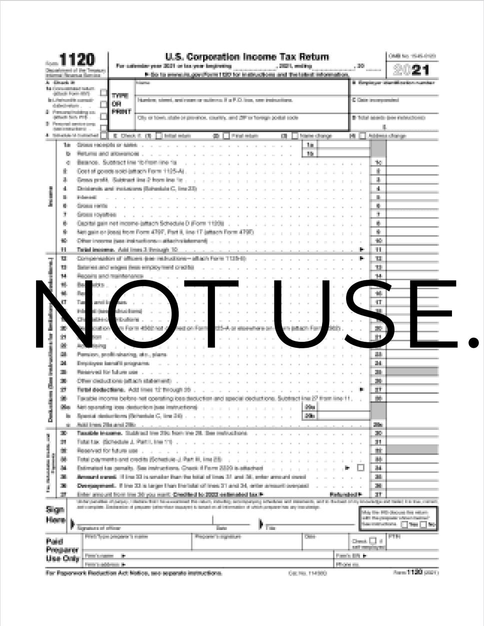
Federal Business Tax Return (For-Profit Businesses)

IRS Form 1120

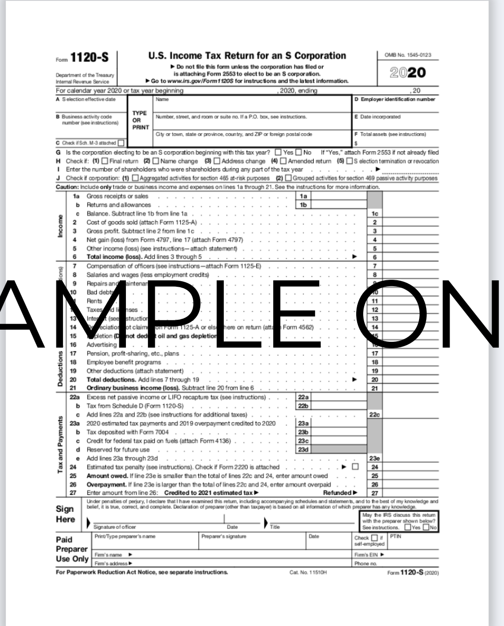


2020

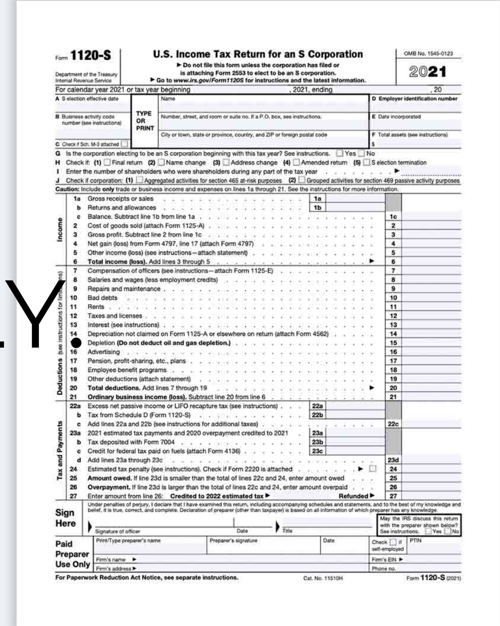


2021

IRS Form 1120-S



2020

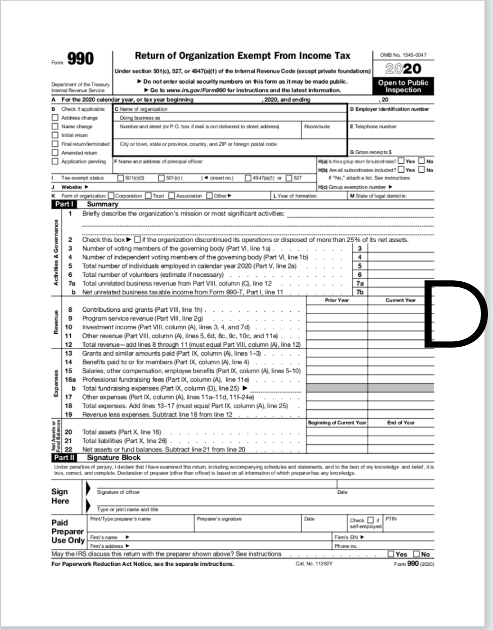


2021

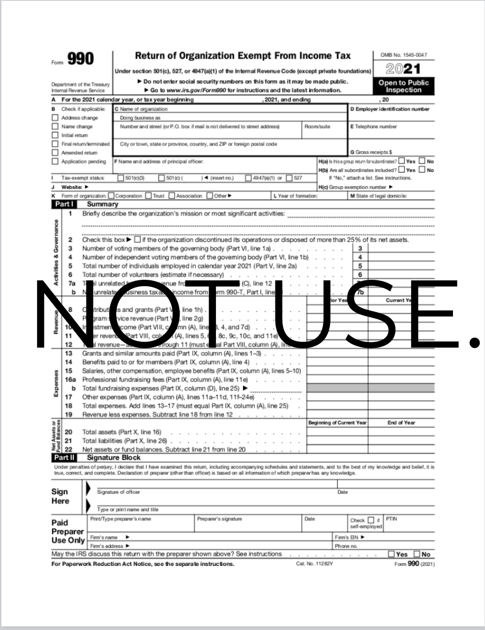
DO NOT USE. EXAMPLE ONLY

Federal Business Tax Return (Nonprofit Organizations)

IRS Form 990

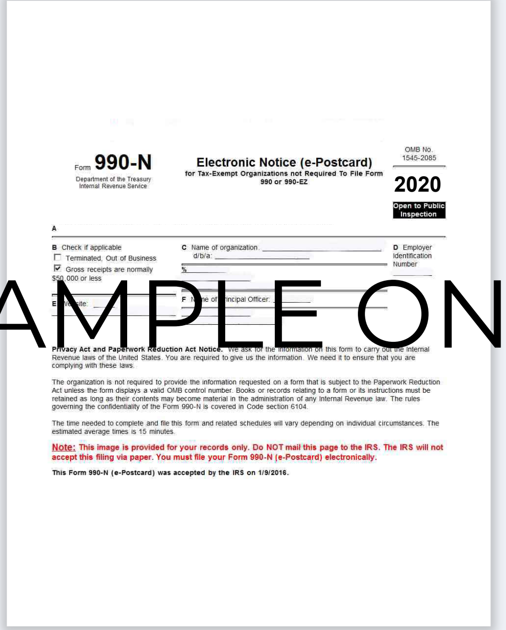


2020

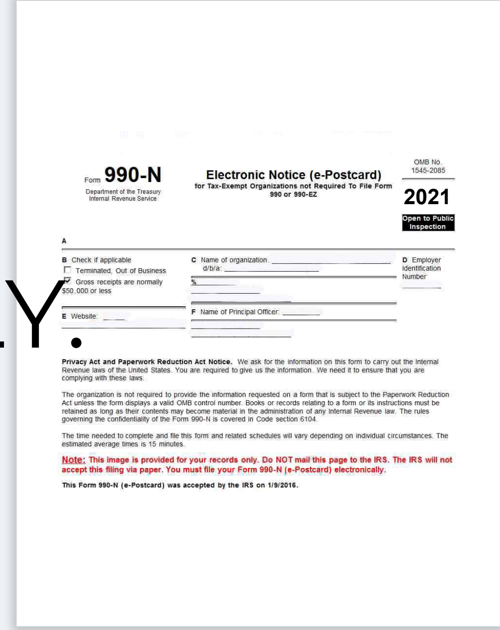


2021

IRS Form 990-N



2020

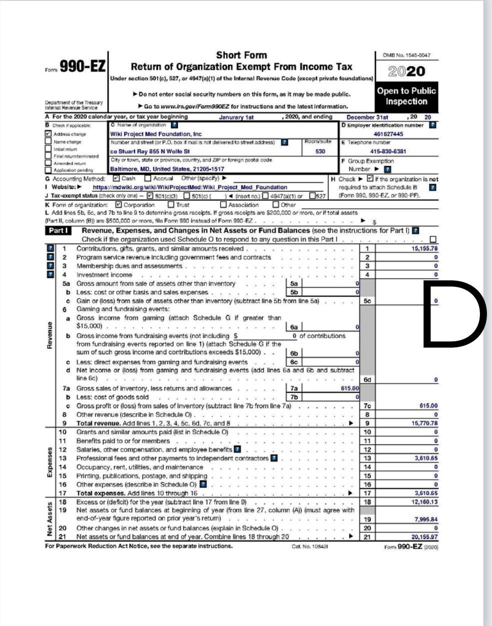


2021

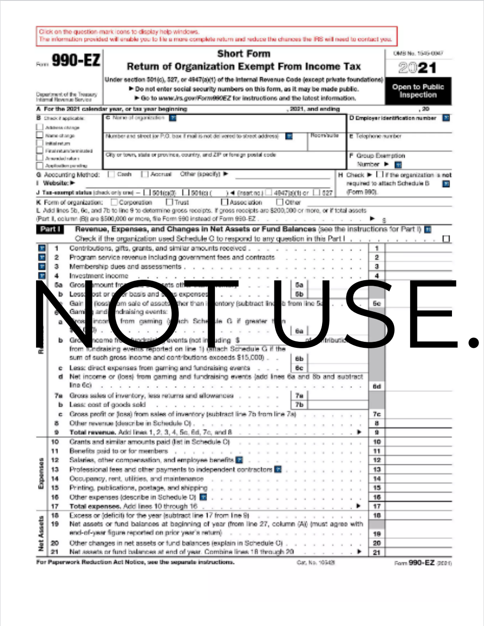
Continued next page.

Federal Business Tax Return (Nonprofit Organizations)

IRS Form 990-Z



2020

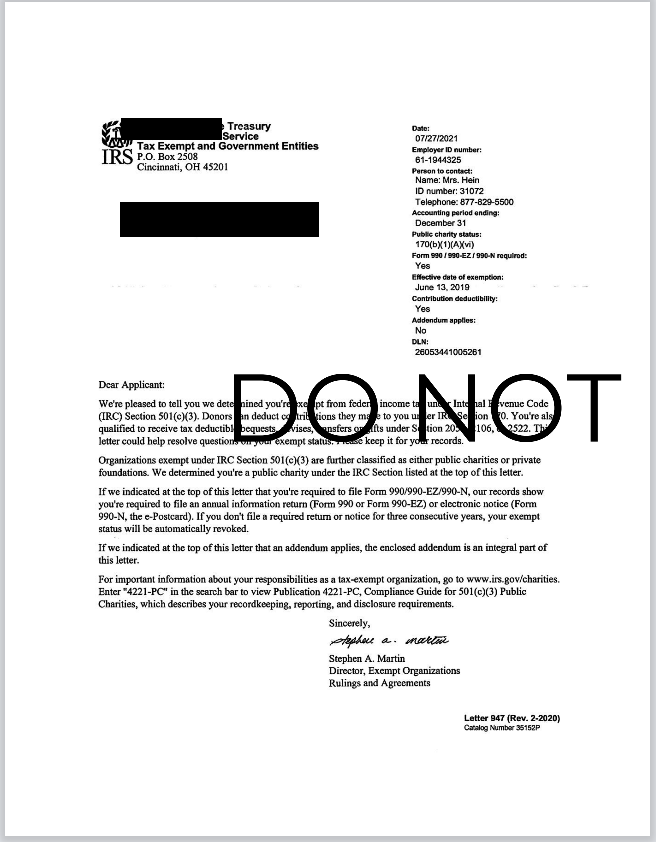


2021

DO NOT USE. EXAMPLE ONLY.

Tax-Exempt Status (Nonprofit Organizations Only)

501(c)(3) Tax Determination Letter



[redacted] Treasury
[redacted] Service
Tax Exempt and Government Entities
P.O. Box 2508
Cincinnati, OH 45201

[redacted]

Date:
07/27/2021
Employer ID number:
61-1944325
Person to contact:
Name: Mrs. Hein
ID number: 31072
Telephone: 877-829-5500
Accounting period ending:
December 31
Public charity status:
170(b)(1)(A)(vi)
Form 990 / 990-EZ / 990-N required:
Yes
Effective date of exemption:
June 13, 2019
Contribution deductibility:
Yes
Addendum applies:
No
DLN:
26053441005261

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

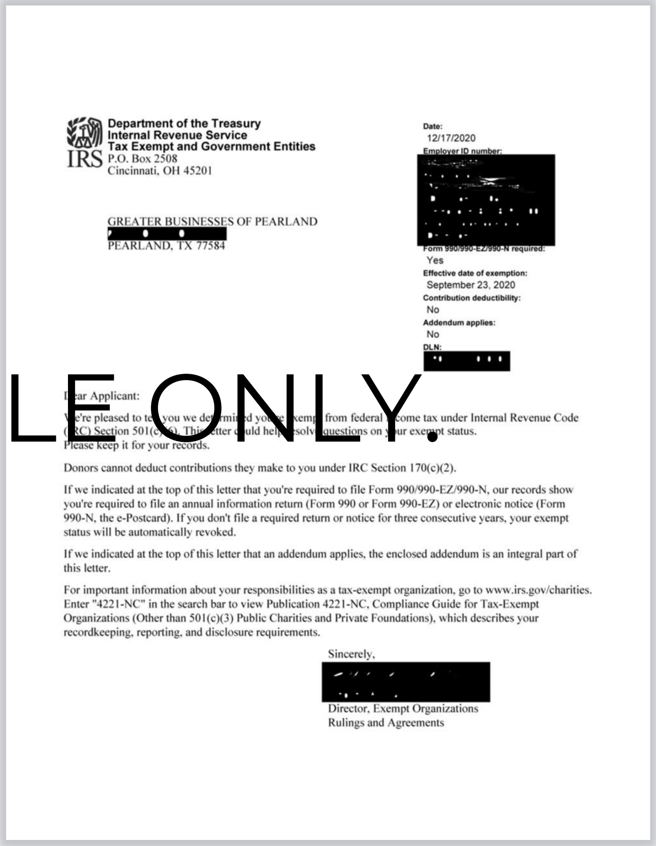
For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

Stephen A. Martin
Director, Exempt Organizations
Rulings and Agreements

Letter 947 (Rev. 2-2020)
Catalog Number 35152P

501(c)(6) Tax Determination Letter



Department of the Treasury
Internal Revenue Service
Tax Exempt and Government Entities
P.O. Box 2508
Cincinnati, OH 45201

GREATER BUSINESSES OF PEARLAND
[redacted]
PEARLAND, TX 77584

Date:
12/17/2020
Employer ID number:
[redacted]
Form 990/990-EZ/990-N required:
Yes
Effective date of exemption:
September 23, 2020
Contribution deductibility:
No
Addendum applies:
No
DLN:
[redacted]

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(6). This letter could help resolve questions on your exempt status. Please keep it for your records.

Donors cannot deduct contributions they make to you under IRC Section 170(c)(2).

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-NC" in the search bar to view Publication 4221-NC, Compliance Guide for Tax-Exempt Organizations (Other than 501(c)(3) Public Charities and Private Foundations), which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

[redacted]
Director, Exempt Organizations
Rulings and Agreements

Continued next page.

Tax-Exempt Status (Nonprofit Organizations Only)

501(c)(19) Tax Determination Letter

Department of the Treasury
Internal Revenue Service
Tax Exempt and Government Entities
[redacted]

THE UNITED STATES ARMY WARRANT OFFICERS ASSOCIATION
[redacted]

Date:
05/24/2021
Employer ID number:
52-0992682
Person to contact:
Name: Ms Chien
ID number: 32071
Telephone: (877) 829-5500
Accounting period ending:
December 31
Form 990/990-EZ/990-N required:
Yes
Effective date of exemption:
February 24, 2021
Contribution deductibility:
Yes
Addendum applies:
No
DLN:
29053062305021

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(19). This letter could help resolve questions on your exempt status. Please keep it for your records.

We based this determination on your representation that at least 75 percent of your members are past or present members of the Armed Forces of the United States. We also based it on your representation that substantially all of your other members, if any, are individuals who are cadets, or are spouses, widows, or widowers of past or present members of the Armed Forces of the United States or of cadets (see IRC Section 501(c)(19)).

Based on your representation that you're organized and operated primarily for purposes consistent with an auxiliary to a post of war veterans described in IRC Section 170(c)(3) and meet the membership requirements for deductibility, donors can deduct contributions they make to you or for your use. If, in the future, your purposes, character, or method of operation changes or you don't meet the membership requirements for deductibility, donors cannot deduct contributions they make to you or for your use, as provided by Section 170.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, thee-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

Letter 948 (Rev. 3-2020)
Catalog Number 35151 E

DO NOT USE. EXAMPLE ONLY.

Payroll Records

2021

PRF Feb 7 | PRF Feb 21 | PRF Mar 6 | PRF Mar 20 | General Journal | General Ledger

This is Prevosti's payroll register for 02/07/2020 pay date. There is nothing to be completed on this tab.

Run Date	02/07/2021	Company Name:	Prevosti Farms and Sugarhouse
P/R end date	02/07/2021	Check Date:	02/12/2021

Name	Filing Status	Dependents	Hourly Rate or Period Wage	No. of Regular Hours	No. of Overtime Hours	No. of Holiday Hours	Commissions	Gross Earning	401(k)	Section 125	Child Care	FSA	Educational Assistance	Life Insurance	Long-term Care	Taxable Wages for Federal W/H	Taxable Wages for FICA
Thomas Millen	MJ	3 <17; 1 Other	$ 24.17582	35				$ 846.15	$ 25.38	$ 185.00						$ 635.77	$ 661.15
Avery Towle	S	None	13.40000	35				469.00	23.45	170.00						275.55	299.00
Charlie Long	MJ	2 <17	12.90000	35	5			[illegible]	10.97	185.00						[illegible]	363.25
Mary Shangraw	S	1 Other	10.70000	20	1			230.05	6.90	170.00						53.15	60.05
Kristen Lewis	MJ	2 <17; 1 Other	20.54945	35				719.23	28.77	[illegible]						505.46	[illegible]
Joel Schwartz	MJ	2 <17	15.65934	35			[illegible]	716.08	35.80	[illegible]						[illegible]	546.08
Toni Prevosti	MJ	3 <17; 2 Other	31.64835	35				[illegible]	66.46	[illegible]						[illegible]	922.69
Student Success	S	None	13.94505	35				488.08	9.76	170.00						308.32	318.08
Totals								$ 5,124.53	$ 207.49	$ 1,420.00						$ 3,497.04	$ 3,704.53

Name	Gross Earning	Taxable Wages for Federal W/H	Taxable Wages for FICA	Federal W/H Tax	Social Security Tax	Medicare W/H Tax	State W/H Tax	Garnishment	United Way	Gym	Total Deductions	Net Pay	Check No.
Thomas Millen	$ 846.15	$ 635.77	$ 661.15	$ 0.00	$ 40.99	$ 9.59	$ 21.30				$ 282.26	$ 563.89	6628
Avery Towle	469.00	275.55	299.00	0.00	18.54	4.34	9.23				225.56	243.44	6629
Charlie Long	548.25	352.28	363.25	0.00	22.52	5.27	11.80				235.56	312.69	6630
Mary Shangraw	230.05	53.15	60.05	0.00	3.72	0.87	1.78				183.27	46.78	6631
Kristen Lewis	719.23	505.46	534.23	0.00	33.12	7.75	16.93				271.57	447.66	6632
Joel Schwartz	716.08	510.28	546.08	0.00	33.86	7.92	17.09				264.67	451.41	6633
Toni Prevosti	1,107.69	856.23	922.69	0.00	57.21	13.38	28.68				350.73	756.96	6634
Student Success	488.08	308.32	318.08	0.00	19.72	4.61	10.33				214.42	273.66	6635
Totals	$ 5,124.53	$ 3,497.04	$ 3,704.53	$ 0.00	$ 229.68	$ 53.73	$ 117.14				$ 2,028.04	$ 3,096.49	

< PRF Feb 7 | PRF Feb 21 >

DO NOT USE. EXAMPLE ONLY.

2022

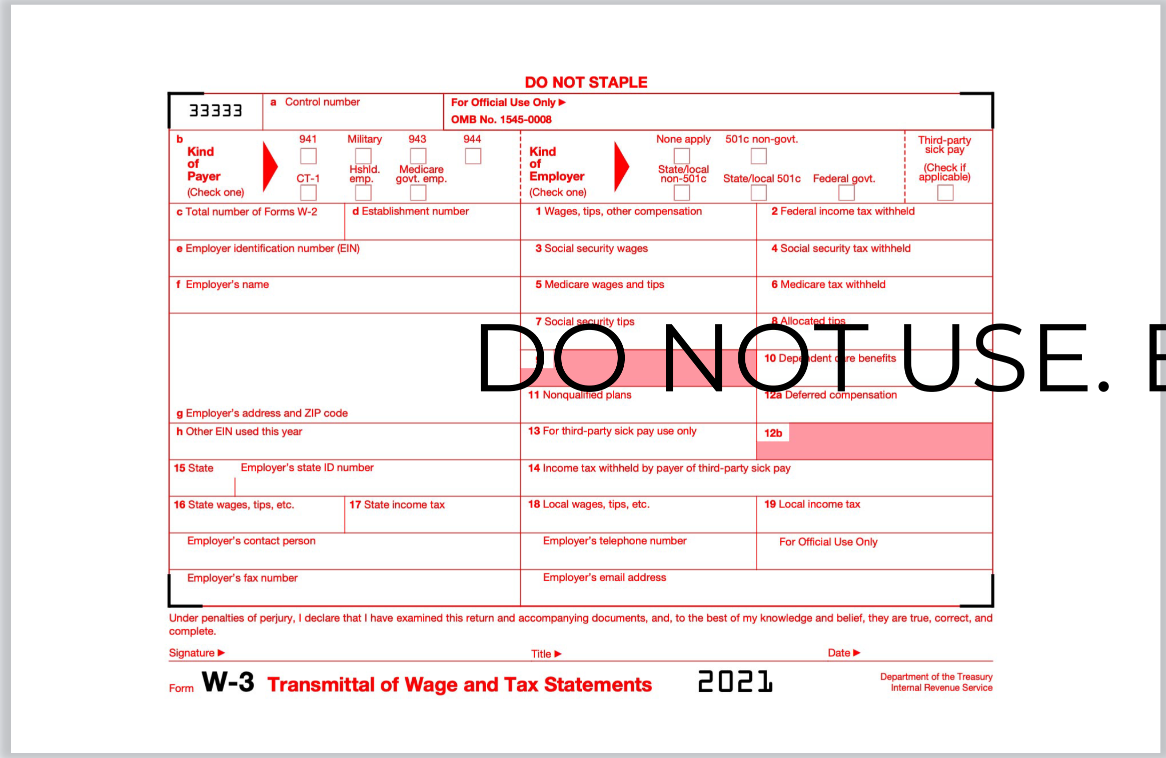
Payroll Register Template

					Total Hours							Withholdings & Deductions						
Payment Date	Pay Period	Employee Number	Last Name	First Name	Reg. Hrs	Reg. Hrs Rate	O.T. Hrs	O.T. Hrs Rate	Total Reg. Pay	Total O.T. Pay	GROSS PAY ($)	State Tax	Federal Income Tax	Social Security	Medicare	Total Tax Withheld	Insurance Deduction	NET PAY ($)
31/Oct/2016	1/10/16-31/10/16					$ 20.00		$ 40.00				7.00%	15.00%	6.20%	1.45%		3.00%	
31/Oct/2016	1/10/16-31/10/16	1	Name1	Name1	36	720.00	15	600.00	25,920.00	9,000.00	34,920.00	2,444.40	5,238.00	2,165.04	506.34	10,353.78	1,047.60	23,518.62
31/Oct/2016	1/10/16-31/10/16	2	Name2	Name2	25	500.00	5	200.00	12,500.00	1,000.00	13,500.00	945.00	2,025.00	837.00	195.75	4,002.75	405.00	9,092.25
31/Oct/2016	1/10/16-31/10/16	3	Name3	Name3	30	600.00	10	400.00	18,000.00	4,000.00	22,000.00	1,540.00	3,300.00	1,364.00	319.00	6,523.00	660.00	14,817.00
31/Oct/2016	1/10/16-31/10/16	4	Name4	Name4	15	300.00	2	80.00	4,500.00	160.00	4,660.00	326.20	699.00	288.92	67.57	1,381.69	139.80	3,138.51
31/Oct/2016	1/10/16-31/10/16	5	Name5	Name5	22	440.00	5	200.00	9,680.00	1,000.00	10,680.00	747.60	1,602.00	662.16	154.86	3,166.62	320.40	7,192.98
31/Oct/2016	1/10/16-31/10/16	6	Name6	Name6	40	800.00	5	200.00	32,000.00	1,000.00	33,000.00	2,310.00	4,950.00	2,046.00	478.50	9,784.50	990.00	22,225.50
31/Oct/2016	1/10/16-31/10/16	7	Name7	Name7	56	1,120.00	10	400.00	62,720.00	4,000.00	66,720.00	4,670.40	10,008.00	4,136.64	967.44	19,782.48	2,001.60	44,935.92
31/Oct/2016	1/10/16-31/10/16	8	Name8	Name8	56	1,120.00	10	400.00	62,720.00	4,000.00	66,720.00	4,670.40	10,008.00	4,136.64	967.44	19,782.48	2,001.60	44,935.92
31/Oct/2016	1/10/16-31/10/16	9	Name9	Name9	56	1,120.00	10	400.00	62,720.00	4,000.00	66,720.00	4,670.40	10,008.00	4,136.64	967.44	19,782.48	2,001.60	44,935.92
31/Oct/2016	1/10/16-31/10/16	10	Name10	Name10	56	1,120.00	10	400.00	62,720.00	4,000.00	66,720.00	4,670.40	10,008.00	4,136.64	967.44	19,782.48	2,001.60	44,935.92
31/Oct/2016	1/10/16-31/10/16	11	Name11	Name11	56	1,120.00	10	400.00	62,720.00	4,000.00	66,720.00	4,670.40	10,008.00	4,136.64	967.44	19,782.48	2,001.60	44,935.92
31/Oct/2016	1/10/16-31/10/16	12	Name12	Name12	56	1,120.00	10	400.00	62,720.00	4,000.00	66,720.00	4,670.40	10,008.00	4,136.64	967.44	19,782.48	2,001.60	44,935.92
[illegible]	[illegible]	13	Name13	[illegible]	56	[illegible]	10	400.00	[illegible]	[illegible]	[illegible]	4,670.40	10,008.00	4,136.64	967.44	19,782.48	2,001.60	44,935.92
Total		COUNT 13			560	11,200.00	112	4,480.00	541,640.00	44,160.00	585,800.00	41,006.00	87,870.00	36,319.60	8,494.10	173,689.70	17,574.00	394,536.30

IRS Form W-3

CALIFORNIA Supplemental Paid Sick Leave Grant
APPLICATION PORTAL POWERED BY LENDISTRY

2021


DO NOT STAPLE

33333 | a Control number | For Official Use Only ▶ OMB No. 1545-0008

b Kind of Payer (Check one): 941, Military, 943, 944, CT-1, Hshld. emp., Medicare govt. emp.

Kind of Employer (Check one): None apply, 501c non-govt., State/local non-501c, State/local 501c, Federal govt.

Third-party sick pay (Check if applicable)

c Total number of Forms W-2 | d Establishment number | 1 Wages, tips, other compensation | 2 Federal income tax withheld

e Employer identification number (EIN) | 3 Social security wages | 4 Social security tax withheld

f Employer's name | 5 Medicare wages and tips | 6 Medicare tax withheld

7 Social security tips | 8 Allocated tips

10 Dependent care benefits

11 Nonqualified plans | 12a Deferred compensation

g Employer's address and ZIP code

h Other EIN used this year | 13 For third-party sick pay use only | 12b

15 State | Employer's state ID number | 14 Income tax withheld by payer of third-party sick pay

16 State wages, tips, etc. | 17 State income tax | 18 Local wages, tips, etc. | 19 Local income tax

Employer's contact person | Employer's telephone number | For Official Use Only

Employer's fax number | Employer's email address

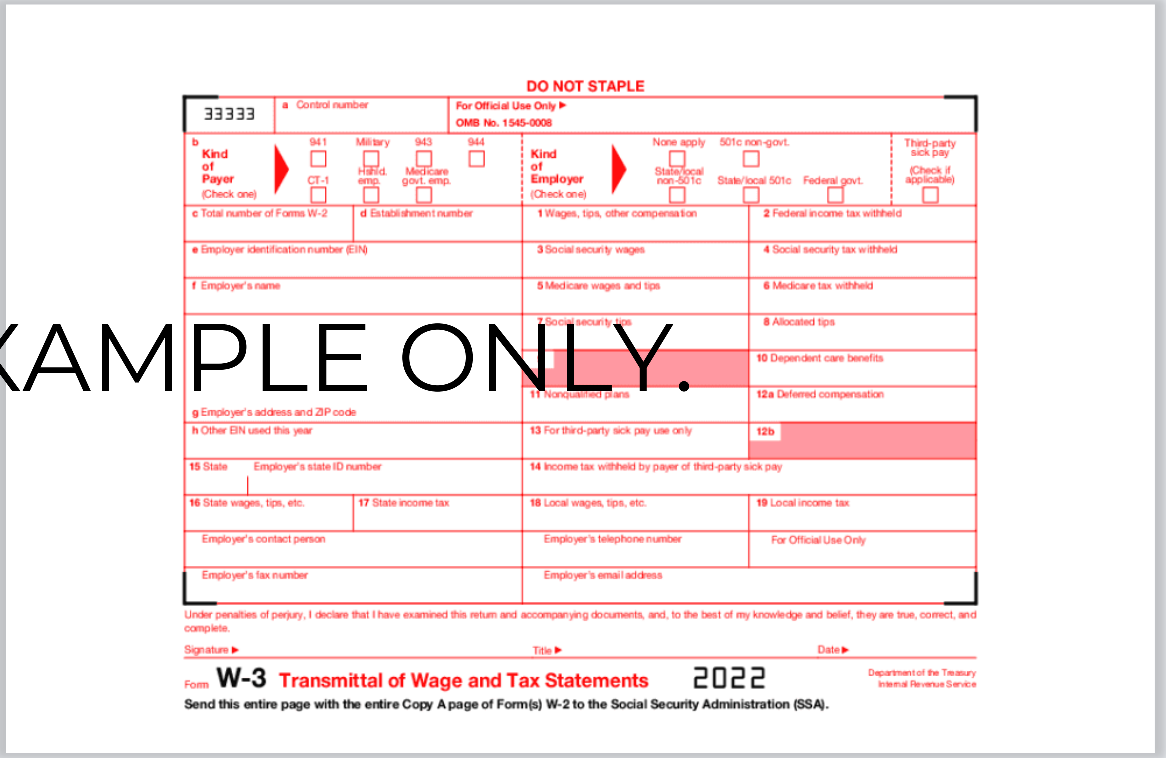
Under penalties of perjury, I declare that I have examined this return and accompanying documents, and, to the best of my knowledge and belief, they are true, correct, and complete.

Signature ▶ Title ▶ Date ▶

Form **W-3** Transmittal of Wage and Tax Statements 2021

Department of the Treasury Internal Revenue Service

2022


DO NOT STAPLE

33333 | a Control number | For Official Use Only ▶ OMB No. 1545-0008

b Kind of Payer (Check one): 941, Military, 943, 944, CT-1, Hshld. emp., Medicare govt. emp.

Kind of Employer (Check one): None apply, 501c non-govt., State/local non-501c, State/local 501c, Federal govt.

Third-party sick pay (Check if applicable)

c Total number of Forms W-2 | d Establishment number | 1 Wages, tips, other compensation | 2 Federal income tax withheld

e Employer identification number (EIN) | 3 Social security wages | 4 Social security tax withheld

f Employer's name | 5 Medicare wages and tips | 6 Medicare tax withheld

7 Social security tips | 8 Allocated tips

10 Dependent care benefits

11 Nonqualified plans | 12a Deferred compensation

g Employer's address and ZIP code

h Other EIN used this year | 13 For third-party sick pay use only | 12b

15 State | Employer's state ID number | 14 Income tax withheld by payer of third-party sick pay

16 State wages, tips, etc. | 17 State income tax | 18 Local wages, tips, etc. | 19 Local income tax

Employer's contact person | Employer's telephone number | For Official Use Only

Employer's fax number | Employer's email address

Under penalties of perjury, I declare that I have examined this return and accompanying documents, and, to the best of my knowledge and belief, they are true, correct, and complete.

Signature ▶ Title ▶ Date ▶

Form **W-3** Transmittal of Wage and Tax Statements 2022

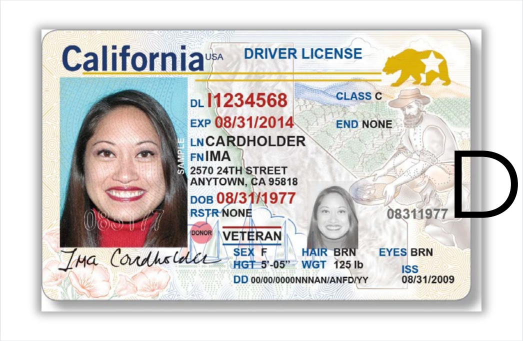
Department of the Treasury Internal Revenue Service

Send this entire page with the entire Copy A page of Form(s) W-2 to the Social Security Administration (SSA).

DO NOT USE. EXAMPLE ONLY.

Government-Issued Photo ID

Acceptable Government-Issued Photo ID



Driver's License

United States
Passport

DO NOT USE. EXAMPLE ONLY.

Acceptable forms of government-issued photo ID:

- Driver's license
- State ID
- U.S. passport or foreign passport

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

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

Tips for Applying

CALIFORNIA
Supplemental Paid Sick Leave Grant

APPLICATION PORTAL POWERED BY LENDISTRY

Tip #1: 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

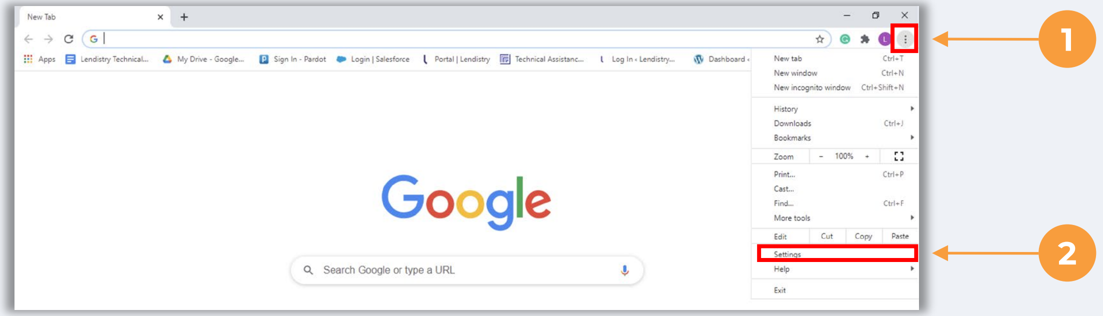
Our application includes multiple pop-up messages that are used to confirm the accuracy of the information you provide. You must disable the pop-up blocker on Google Chrome to see these messages.

Continued next page.

How to Clear Your Cache

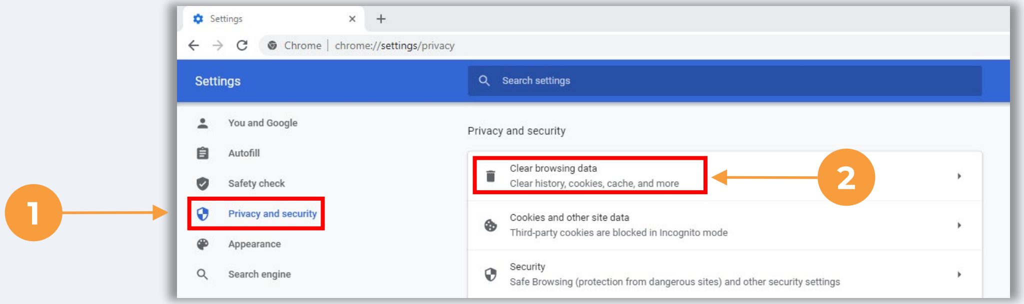
Step 1

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



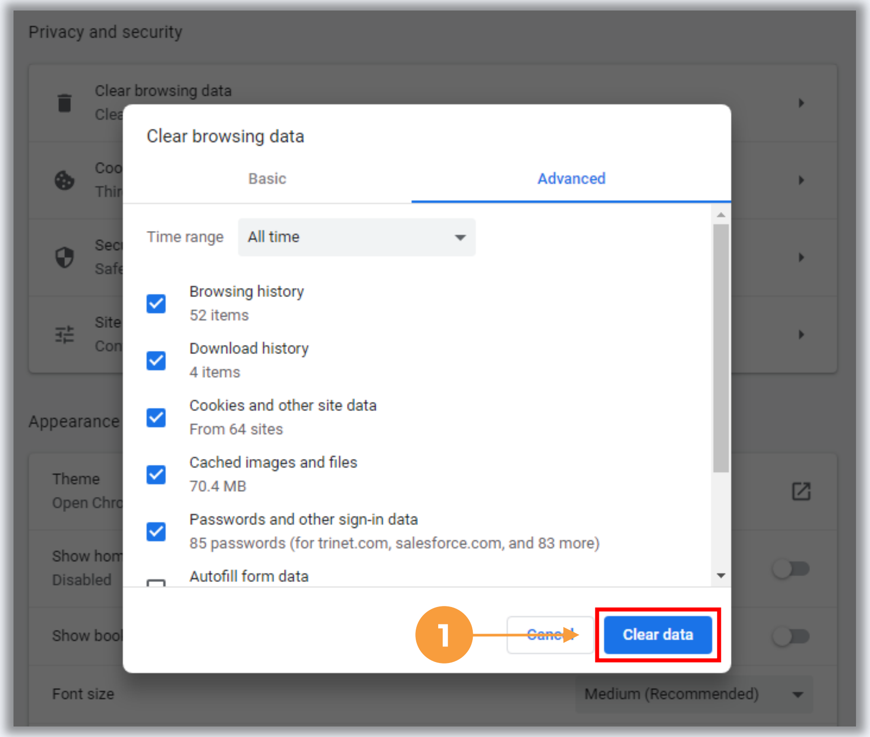
Step 2

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



Step 3

Select “**Clear Data**.”

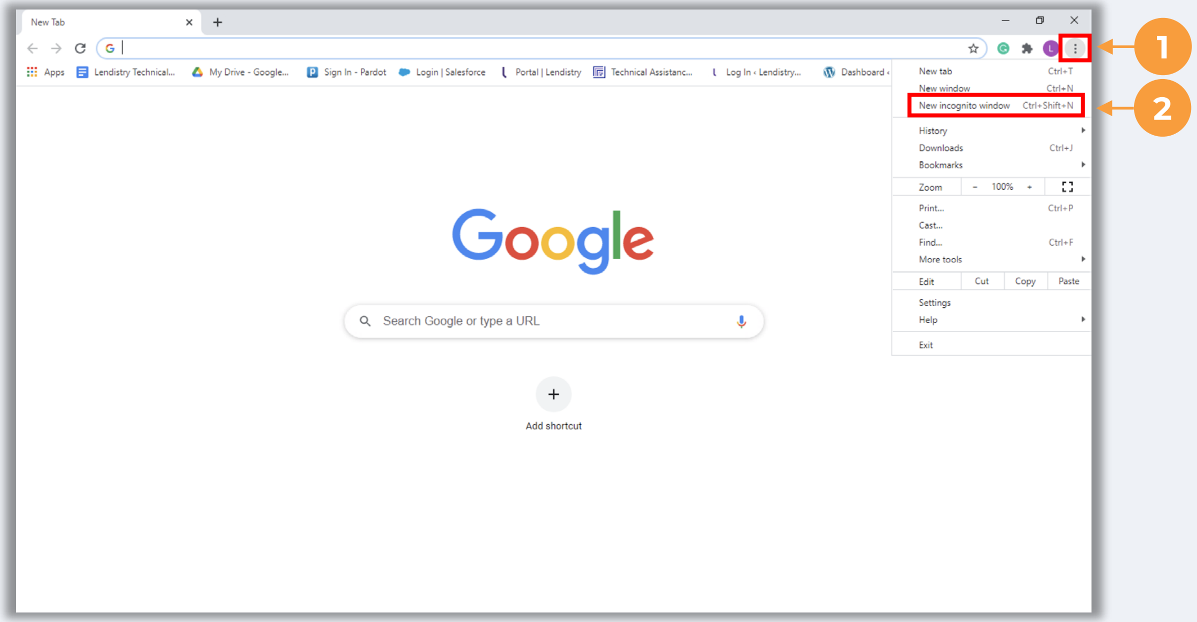


Continued next page.

CALIFORNIA Supplemental Paid Sick Leave Grant
APPLICATION PORTAL POWERED BY LENDISTRY

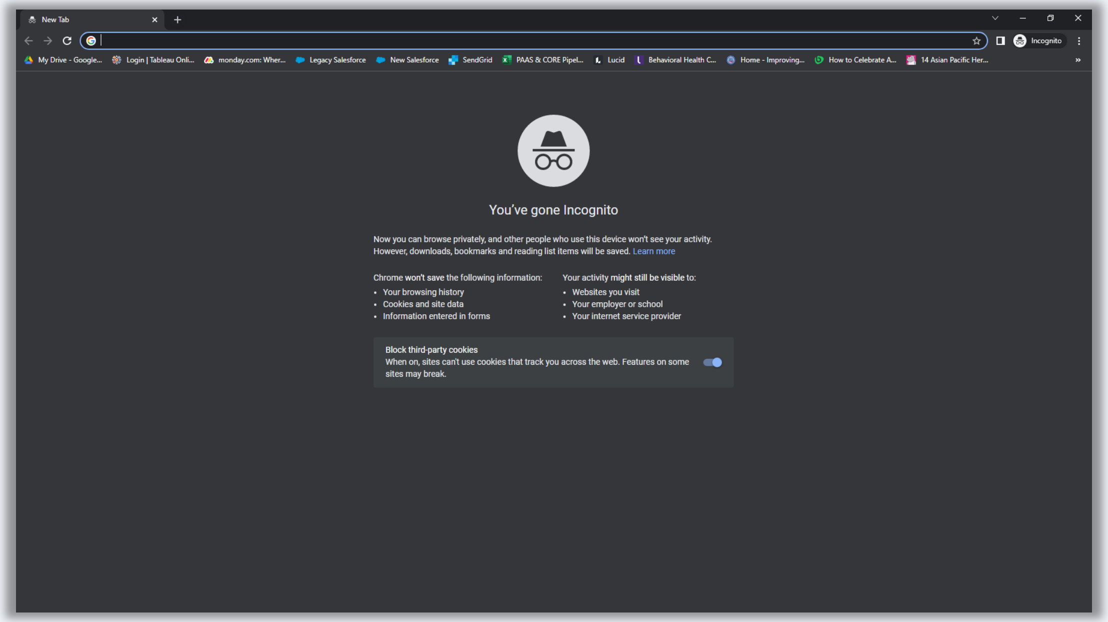
Step 1

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.



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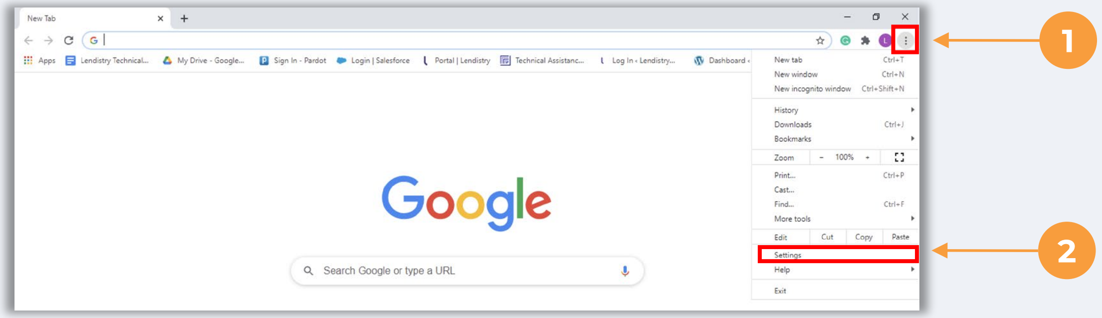
How to Disable Pop-Up Blockers

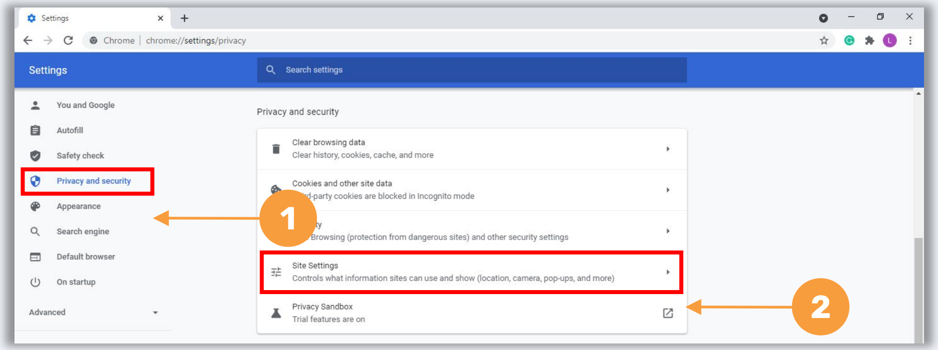
Step 1

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



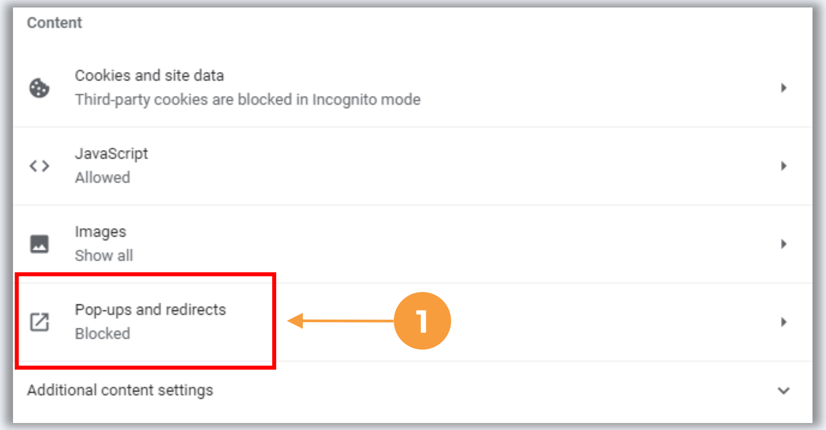
Step 2

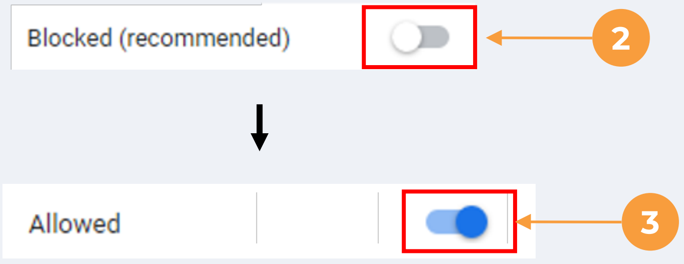
Go to “**Privacy and Security**”, and then select “**Site Settings**.”



Step 3

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





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.

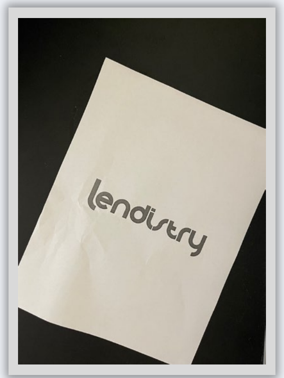
Genius Scan
Apple | Click Here to Download
Android | Click Here to Download

Adobe Scan
Apple | Click Here to Download
Android | Click Here to Download

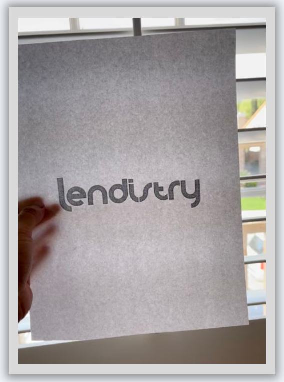
Sample: Correct Upload

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: Use a Valid Email Address

CALIFORNIA Supplemental Paid Sick Leave Grant
APPLICATION PORTAL POWERED BY LENDISTRY

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.

If you used an incorrect or invalid email address in your application, please contact our Customer Experience Center at 1-888- 208-0015, Monday through Friday (7:00 a.m.-7:00 p.m. PDT) to update your information.

DO NOT submit a new application. Submitting multiple applications may be detected as potential fraud and disrupt the review process for 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 #4: Review Best Practices to Successfully Complete Persona

CALIFORNIA Supplemental Paid Sick Leave Grant
APPLICATION PORTAL POWERED BY LENDISTRY

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 check.

- 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
    - State ID
    - U.S. Passport or Foreign Passport

- 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.

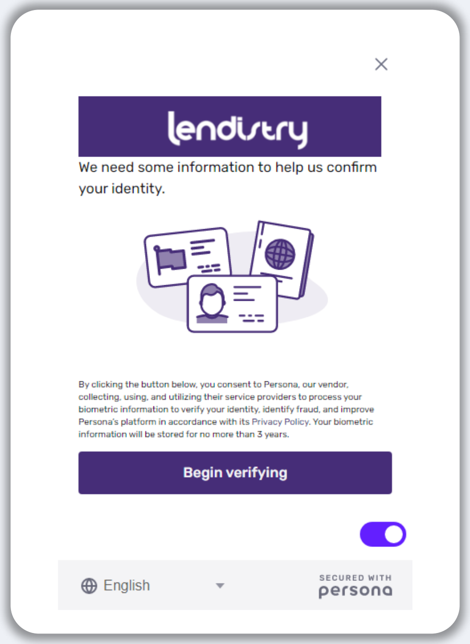
3. When taking your selfie, use adequate lighting pointed toward your face while avoiding bright light sources from behind.
    - Stand in front of a blank wall or door and avoid busy backgrounds.
    - Do not use flash as it may cause a glare.

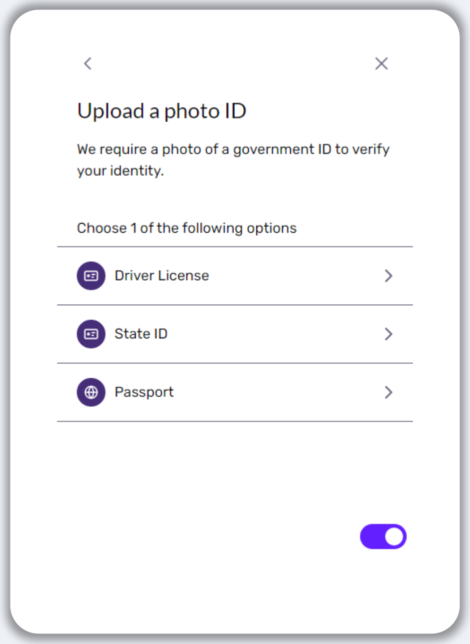
Continued next page.

Tip #4: Review Best Practices to Successfully Complete Persona

Step 1

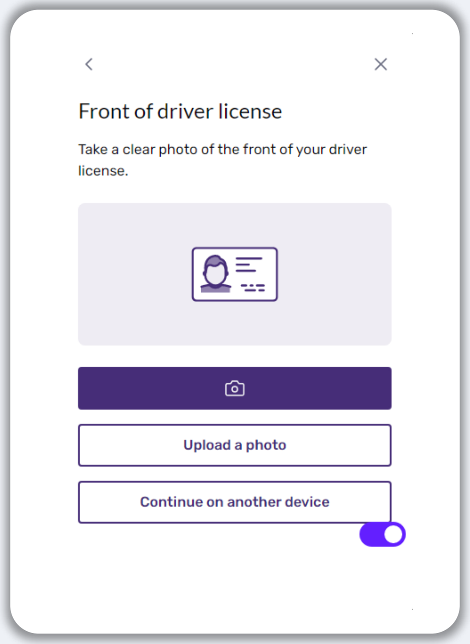
Click on "**Begin Verifying**," and then select the type of government-issued ID you will use to verify your identity.

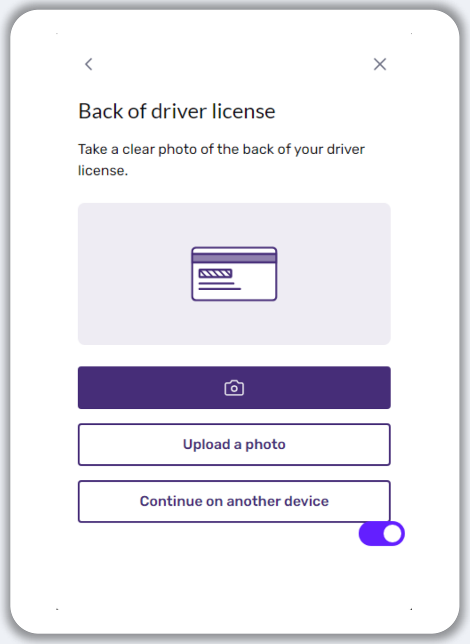




Step 2

Take or upload a picture of the **front** side of your ID. Select "Use this File" to continue. See page 31 for best practices on how to complete this step.



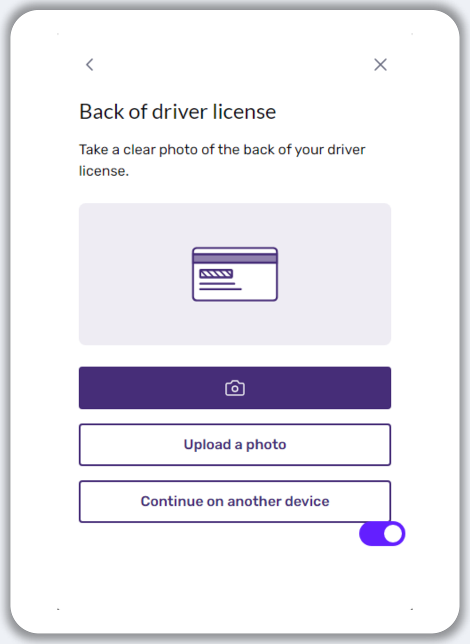


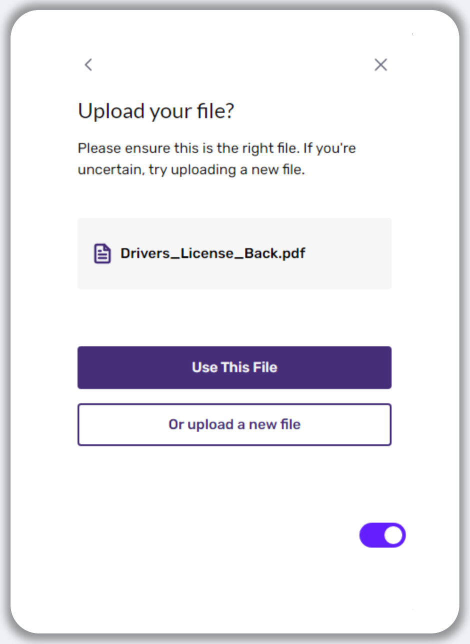
Continued next page.

Tip #4: Review Best Practices to Successfully Complete Persona

Step 3

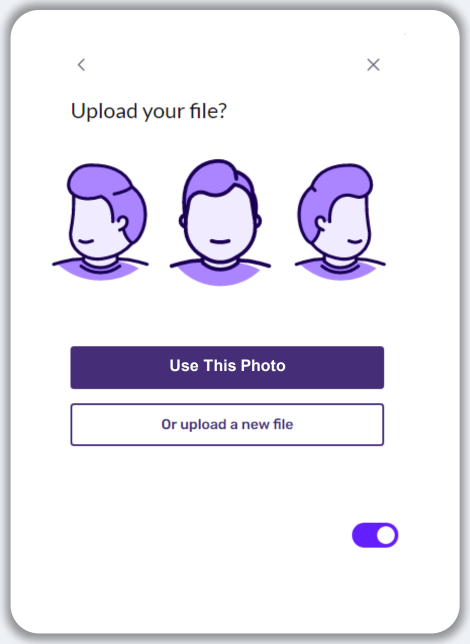
Take or upload a picture of the **back** side of your ID. Select “Use this File” to continue. See page 31 for best practices on how to complete this step.

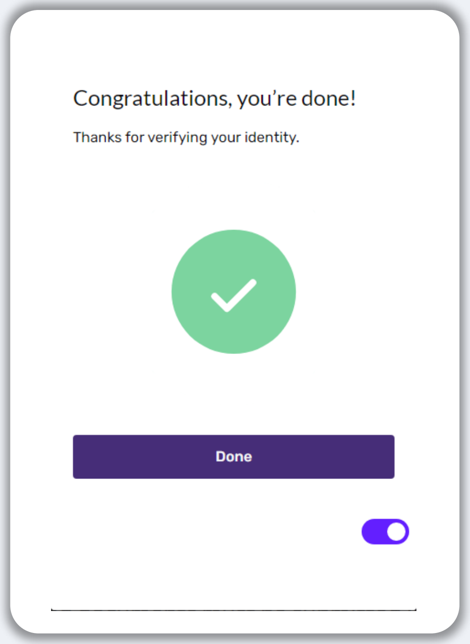




Step 4

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 31 for best practices on how to complete this step. Once complete, select “Done” and you will be redirected to the application.





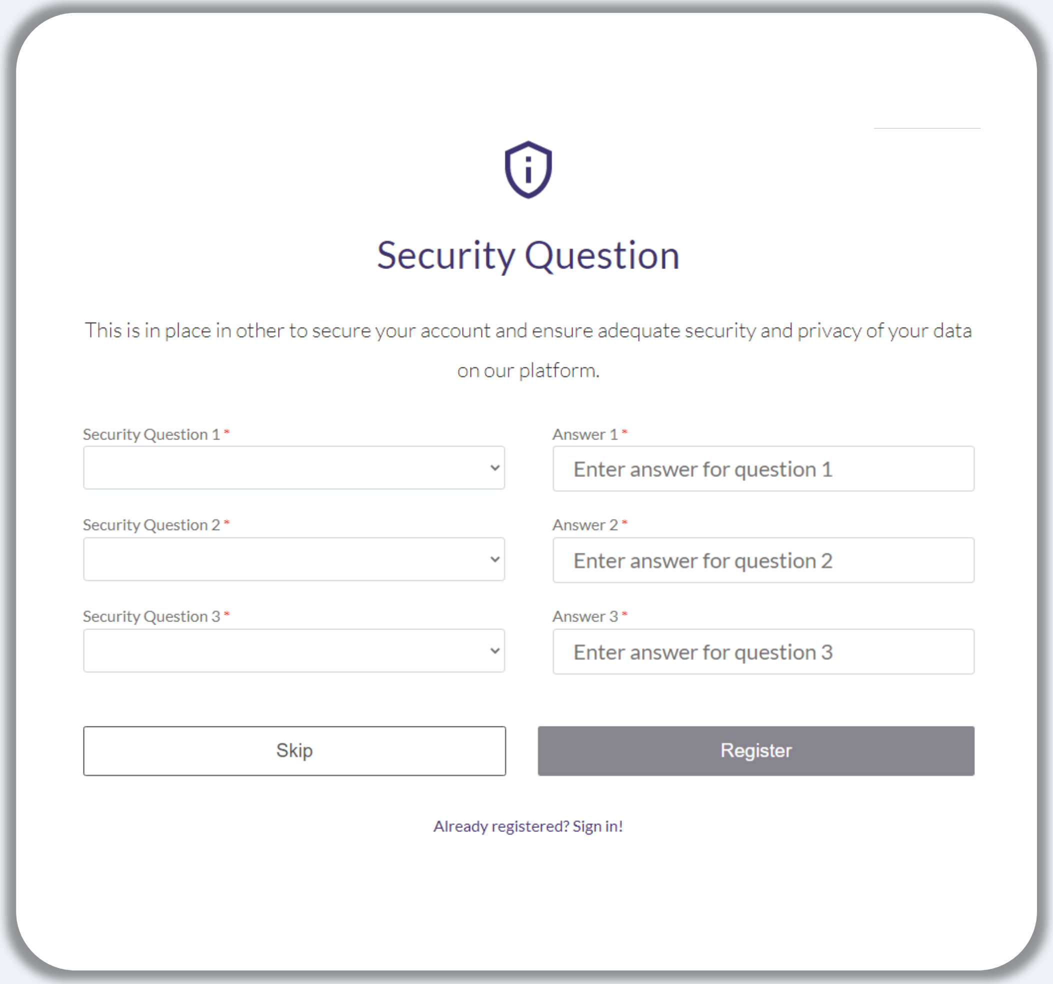
Tip #5: Set Your Security Questions in Lendistry's Portal

Lendistry's Portal for the Program has a feature that allows you to set a series of security questions to protect and allow you to unlock your account when there are too many failed attempts to access it.

The security questions are meant to prevent unauthorized access to your portal account. You can select any question available in the drop-down menu; however, we **strongly** recommend you choose questions with answers that are personal to you or only you will know.

Make note of the answers to your security questions. They are case-sensitive, and you will need to enter them exactly as you set them when unlocking your account.

Review pages 52-56 for instructions on how to troubleshoot or unlock your account.



How to Start an Application

CALIFORNIA
Supplemental Paid Sick Leave Grant

APPLICATION PORTAL POWERED BY LENDISTRY

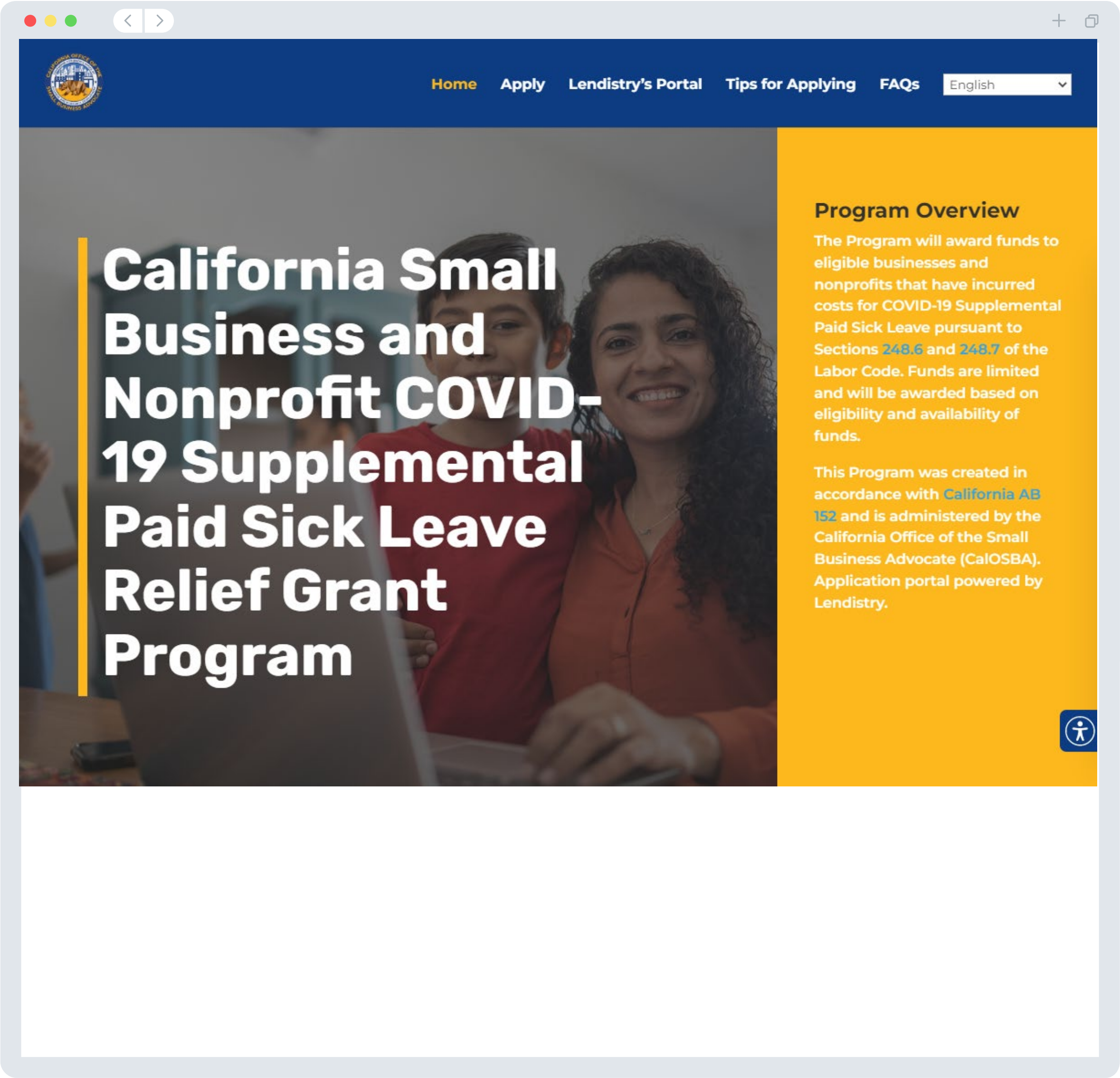
Where to Apply

You can start an application by visiting the Program's website at www.caspsl.com.

1. To start a new application, select "**Apply**" from the menu. You will be redirected to Lendistry's Application Portal.
2. You will be able to access and manage your application at any time by clicking "**Lendistry's Portal**."

The Program's website also contains various resources to help guide you through the entire application process. Resources include:

- Guidelines for the Program
- Program and Application Guide
- Applicant Certifications Download
- Customer Experience Center Number and Hours
- FAQ
- Tips for Applying



Lendistry's Portal

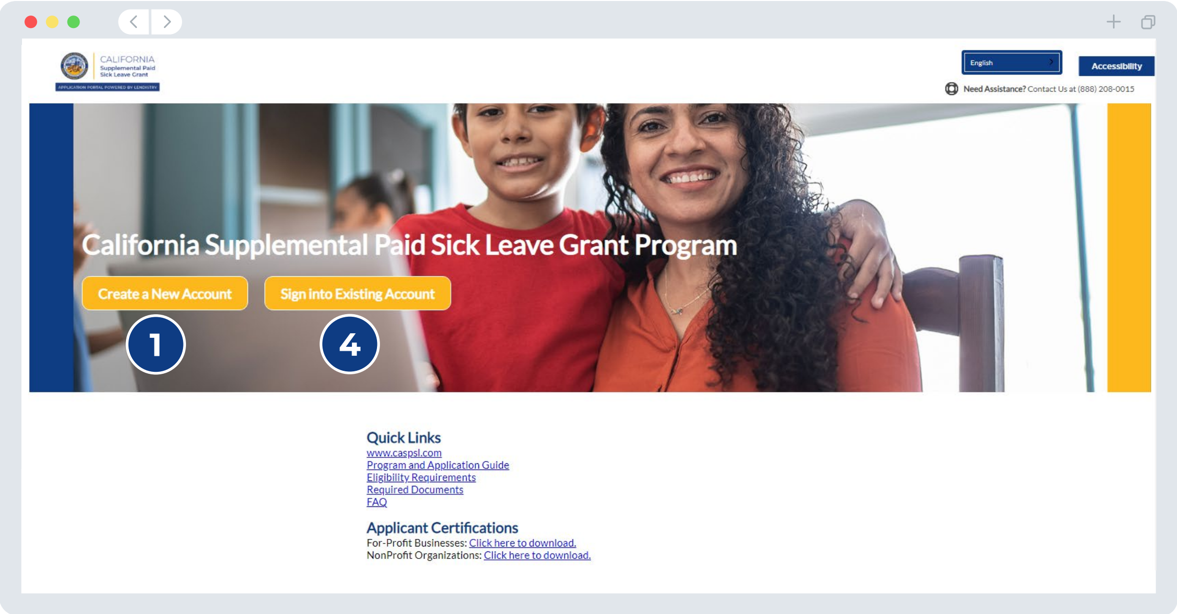
1. To start an application, you will need to "**Create a New Account**."

2. Register the primary email address used by the owner of the entity for which you are applying. This is where you will receive important information and updates regarding your application.

3. Signing into Lendistry Portal requires a Multi-Factor Authentication. Each time you sign in, a confirmation code will be sent to the mobile number you register. You will need to enter this code to access your Portal account.

4. You can access your application at any time by clicking "**Sign into Existing Account**." Once signed in, you will see the status of your application.

If you need assistance with creating or accessing your portal account, please contact Lendistry's dedicated Customer Experience Center at 1-888-208-0015, Monday through Friday (7:00 a.m.-7:00 p.m. PDT).



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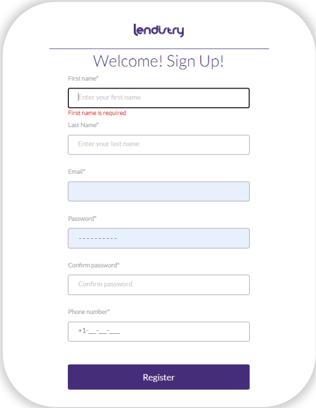
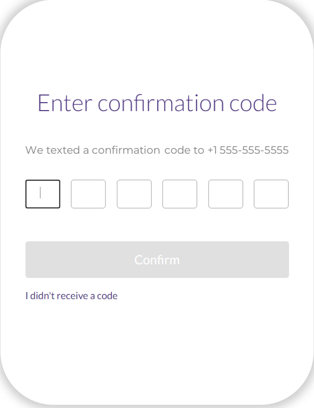


Register your email and phone number.

3



Enter the confirmation code.

The Application Process

CALIFORNIA
Supplemental Paid Sick Leave Grant

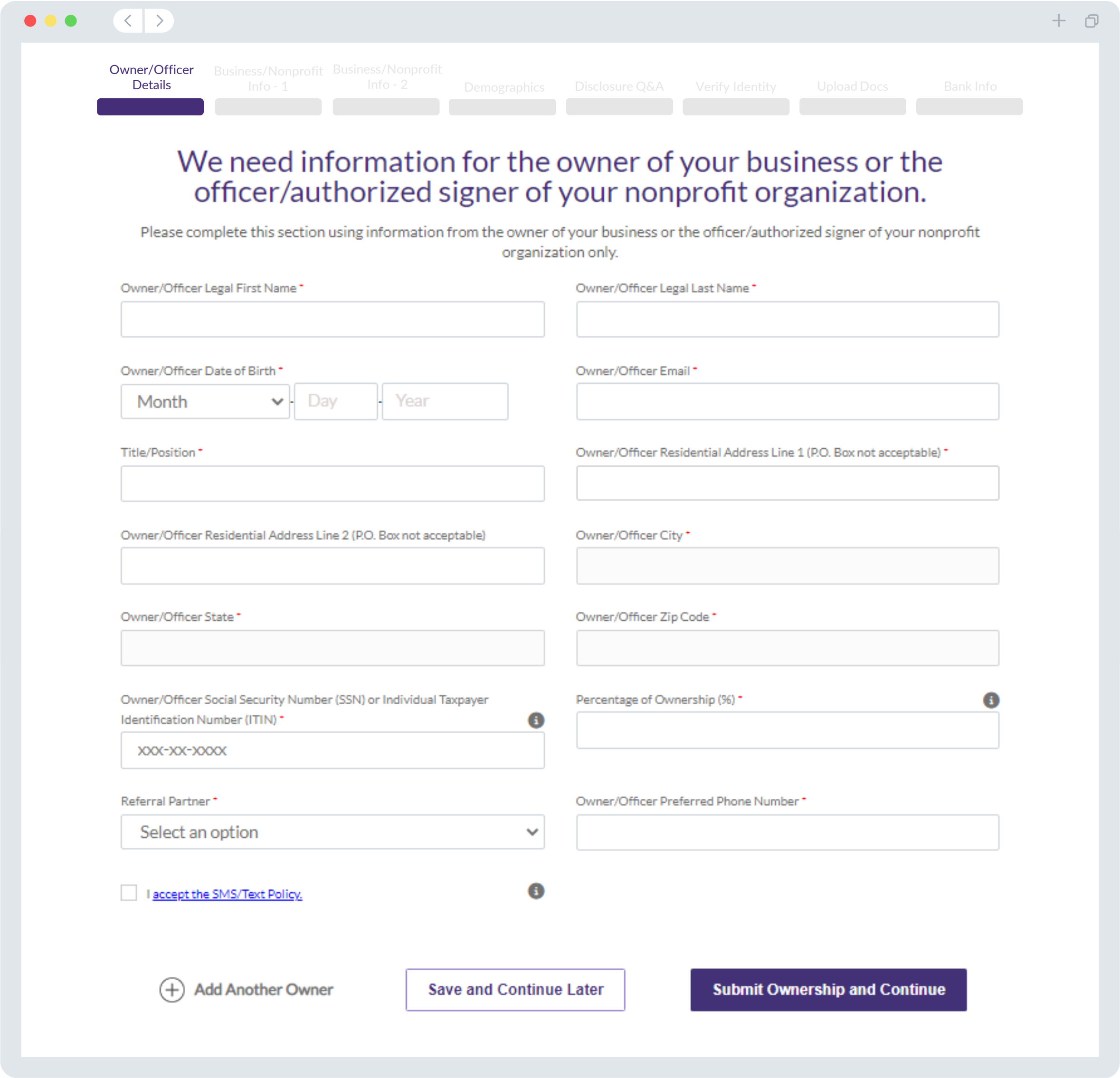
APPLICATION PORTAL POWERED BY LENDISTRY

Section 1: Owner/Officer Details

We need information for the owner of your business or the officer/authorized signer of your nonprofit organization.

- Owner/Officer Legal First Name
- Owner/Officer Legal Last Name
- Owner/Officer Date of Birth
- Owner/Officer Email
- Title/Position
- Owner/Officer Residential Address Line 1 (P.O. Box not acceptable)
- Owner/Officer Residential Address Line 2 (P.O. Box not acceptable)
- Owner/Officer Residential City
- Owner/Officer Residential State
- Owner/Officer Residential Zip Code
- Owner/Officer Social Security or Individual Taxpayer Number (SSN or ITIN)[1]
- Percentage of Ownership (%)
- Referral Partner[2]
- Owner/Officer Preferred Phone Number
- SMS/Text Policy[3]

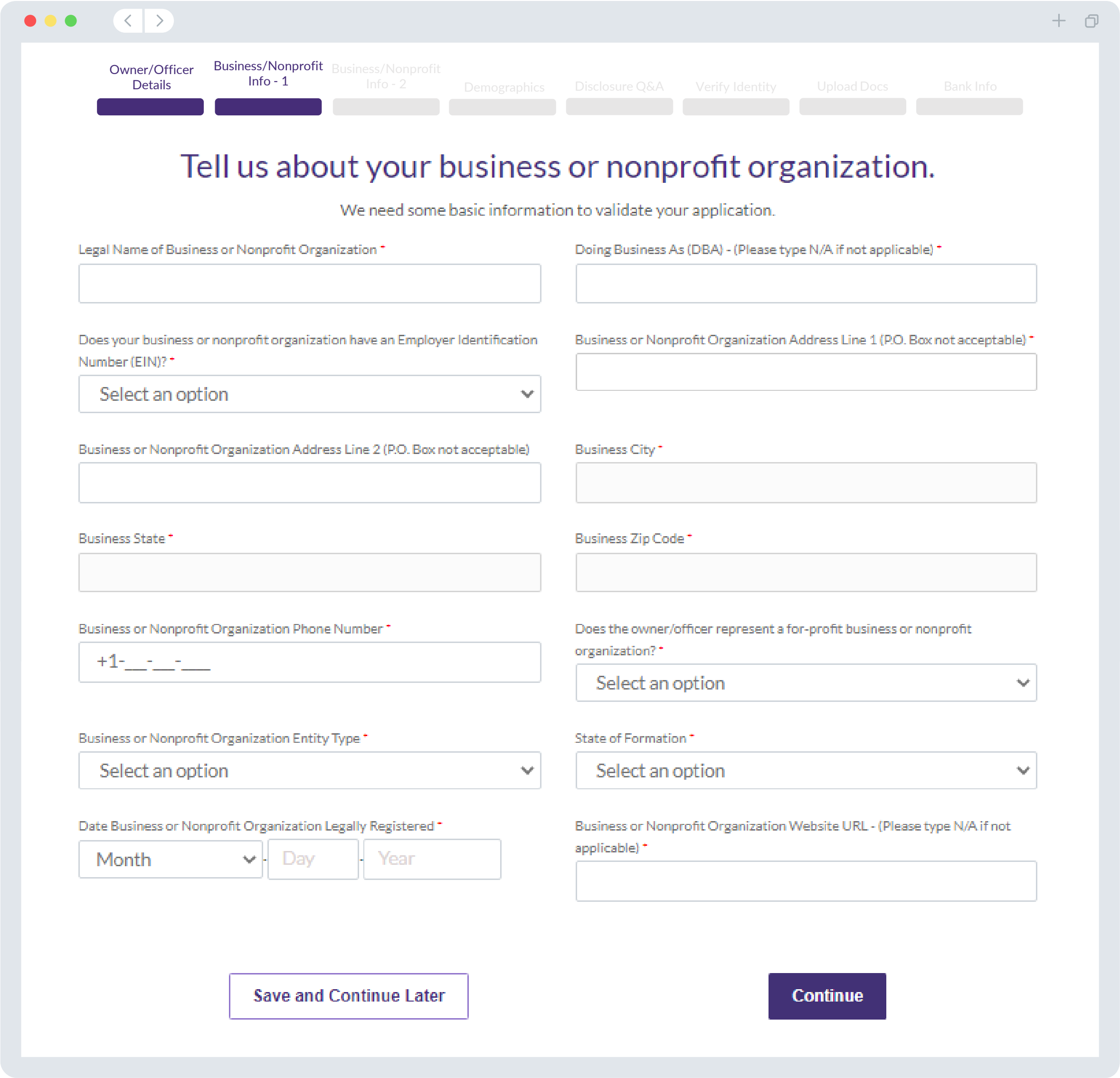
[1]Required to make sure applicant is not on the OFAC list.
[2]The referral partner you choose will not affect your application.
[3]Check the box if you would like to receive updates on your application during the review process via SMS/Text.



Section 2: Business/Nonprofit Info - 1

Tell us about your business or nonprofit organization.

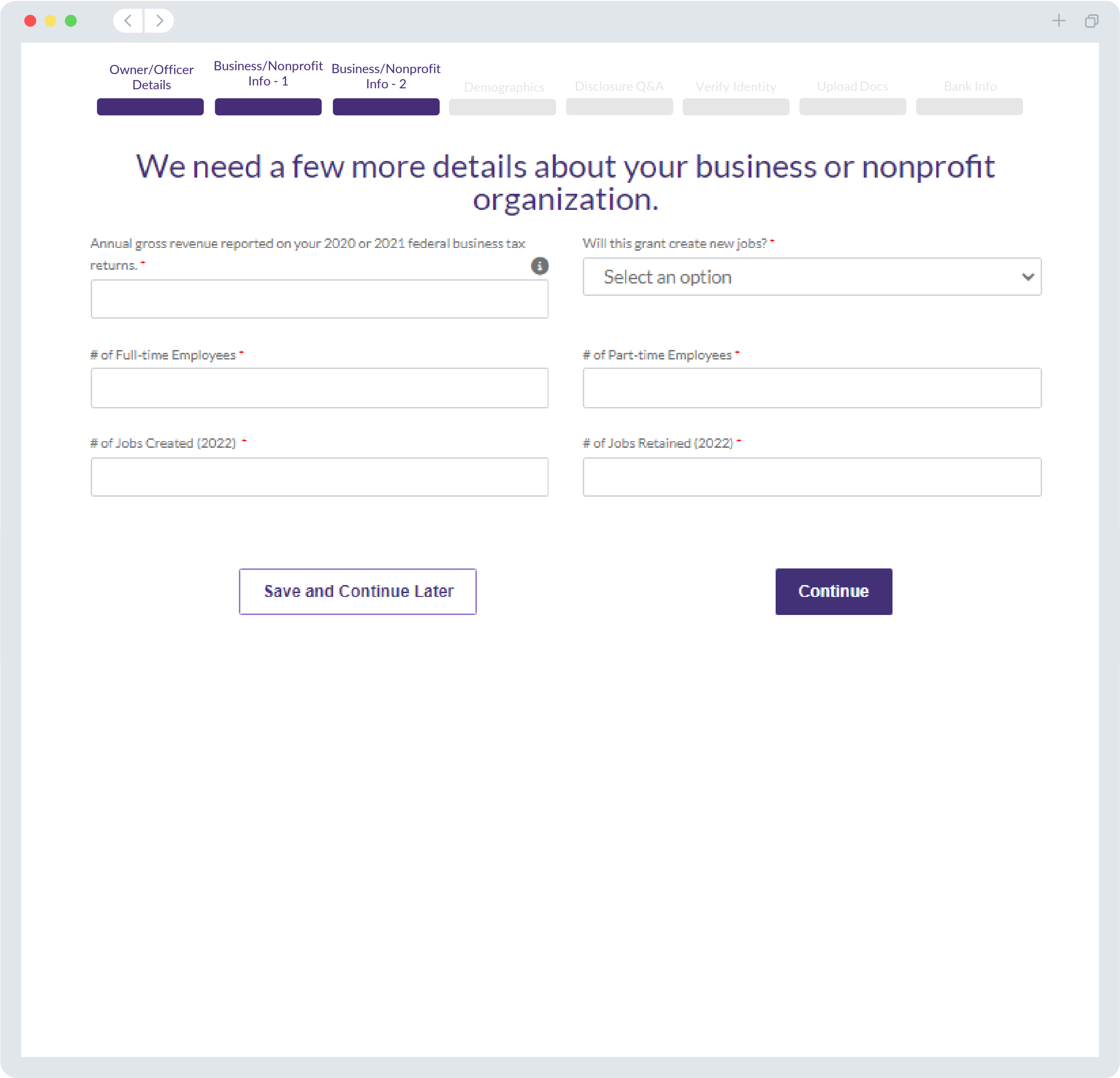
- Legal Name of Business or Nonprofit Organization
- Doing Business As (DBA) - (Type N/A if your business does not have a DBA.)
- Does your business have an Employer Identification Number (EIN)?
- Business or Nonprofit Organization Address Line 1 (Please enter physical address of business)
- Business or Nonprofit Organization Address Line 2 (Please enter physical address of business)
- Business or Nonprofit Organization City
- Business or Nonprofit Organization State
- Business or Nonprofit Organization Zip Code
- Business or Nonprofit Organization Phone Number
- Are you a Non-Profit or For-Profit business?
- Business or Nonprofit Organization Entity Type
- State of Formation
- Date Business or Nonprofit Organization Legally Registered
- Business or Nonprofit Organization Website URL - (Type N/A if your business does not have a website.)



Section 3: Business/Nonprofit Info - 2

We need a few more details about your business or nonprofit organization.

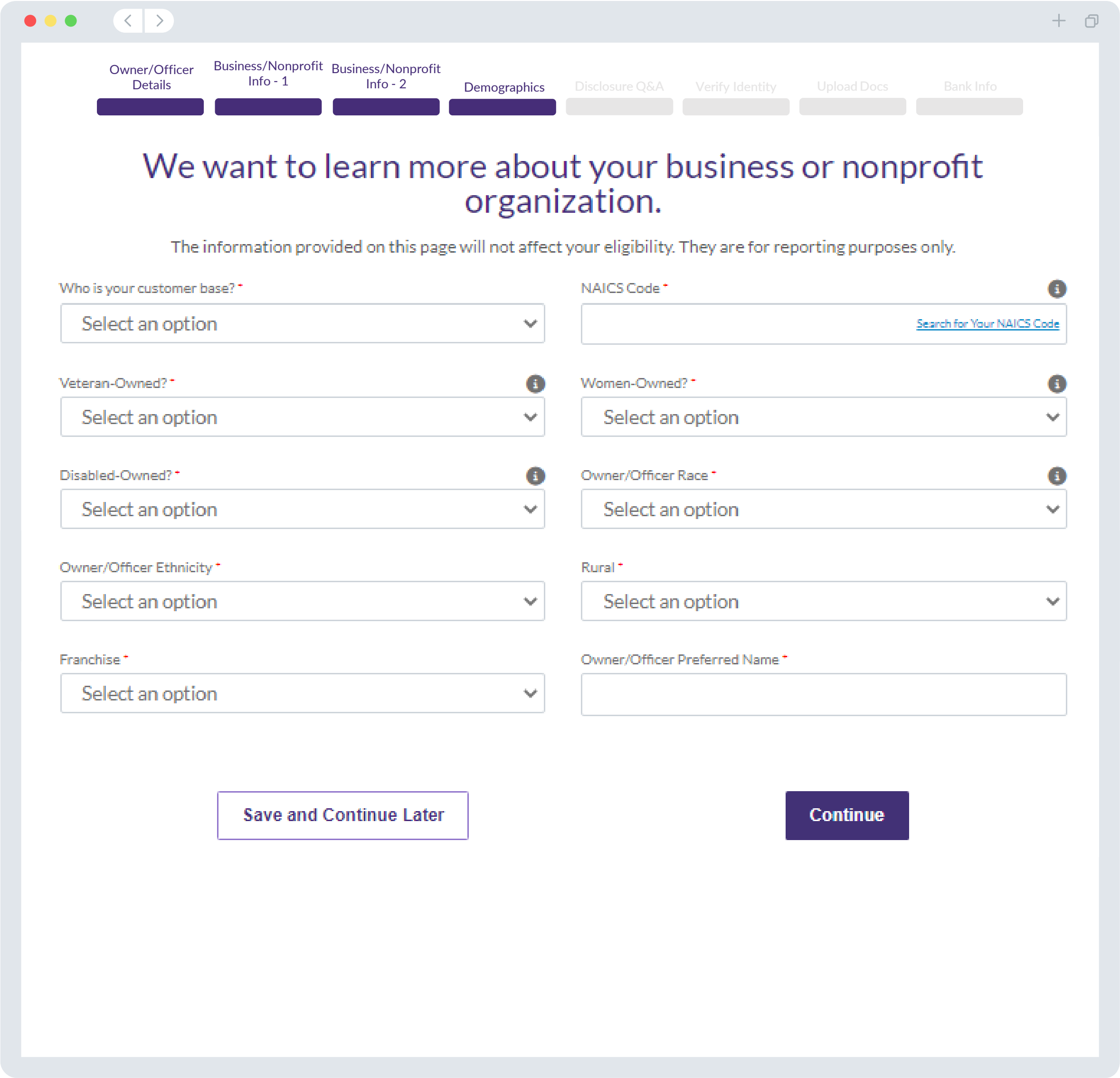
- Annual gross revenue reported on your 2020 or 2021 federal business tax returns.
- Will this grant create new jobs?
- # of Full-time Employees
- # of Part-time Employees
- # of Jobs Created (2022)
- # of Jobs Retained (2022)



Section 4: Demographics

We want to learn more about your business or nonprofit organization.
The information provided on this page will not affect your eligibility. They are for reporting purposes only.

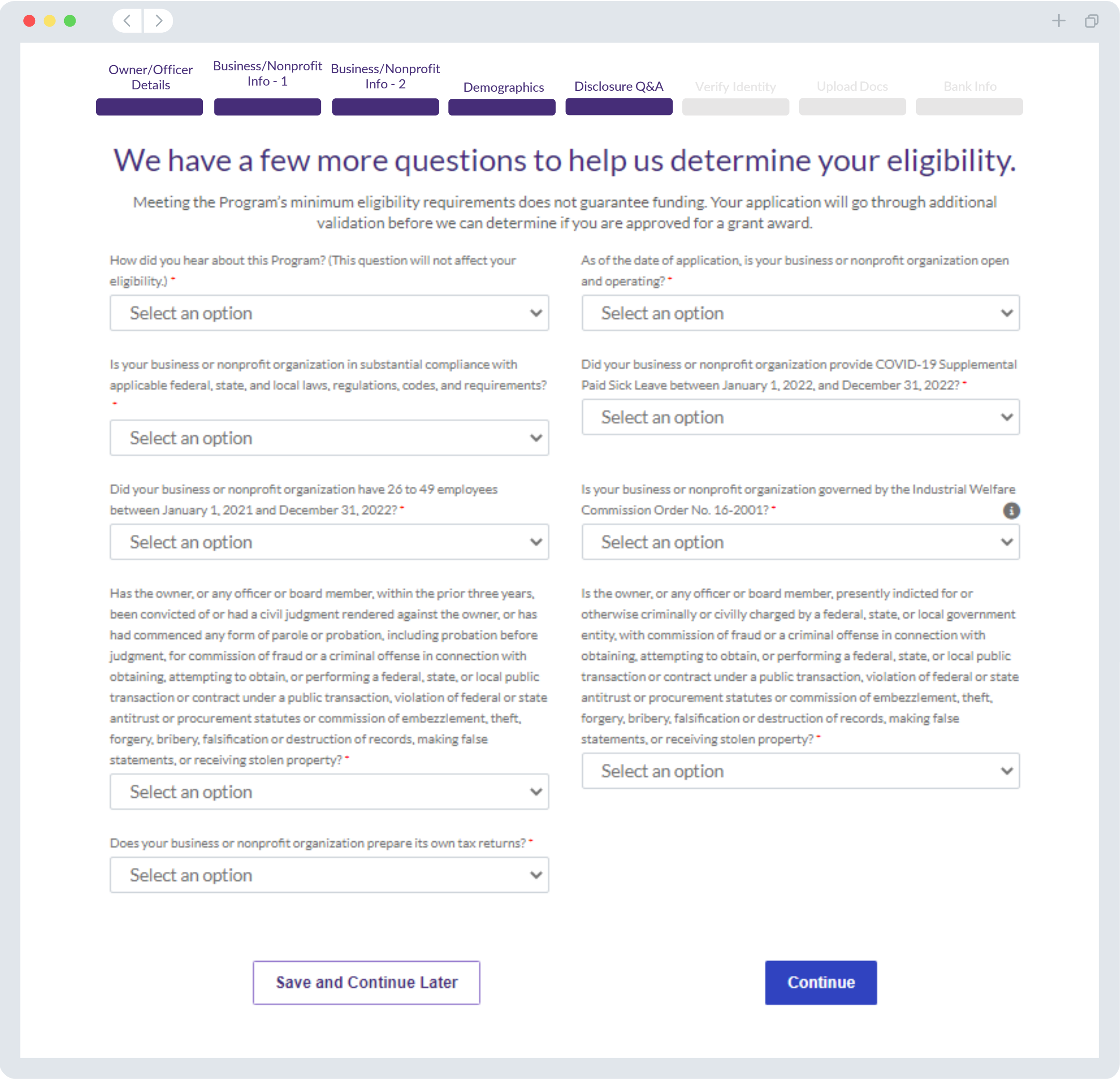
- Who is your customer base?
- NAICS code
- Women-Owned?
- Veteran-Owned?
- Disabled-Owned?
- Owner/Officer Race
- Owner/Officer Ethnicity
- Rural
- Franchise
- Owner/Officer Preferred Name



Section 5: Disclosure Q&A

We have a few more questions to help determine your eligibility.

- How did you hear about this Program? (This question will not affect your eligibility.)
- As of the date of application, is your business or nonprofit organization open and operating?
- Is your business or nonprofit organization in substantial compliance with applicable federal, state, and local laws, regulations, and requirements?
- Did your business or nonprofit organization provide COVID-19 Supplemental Paid Sick Leave between January 1, 2022, and December 31, 2022?
- Did your business or nonprofit organization have 26 to 49 employees between January 1, 2021, and December 31, 2022?
- Is your business or nonprofit organization governed by the Industrial Welfare Commission Order No. 16-2001?
- Has the owner, or any officer or board member, 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 judgement, 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?
- Is the owner, or any officer or board member, presently indicted for or otherwise criminally or civilly charged by a federal, state, or local government entity, with 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?
- Does your business or nonprofit organization prepare its own tax returns?



Section 6: Verify Identity

ID Verification

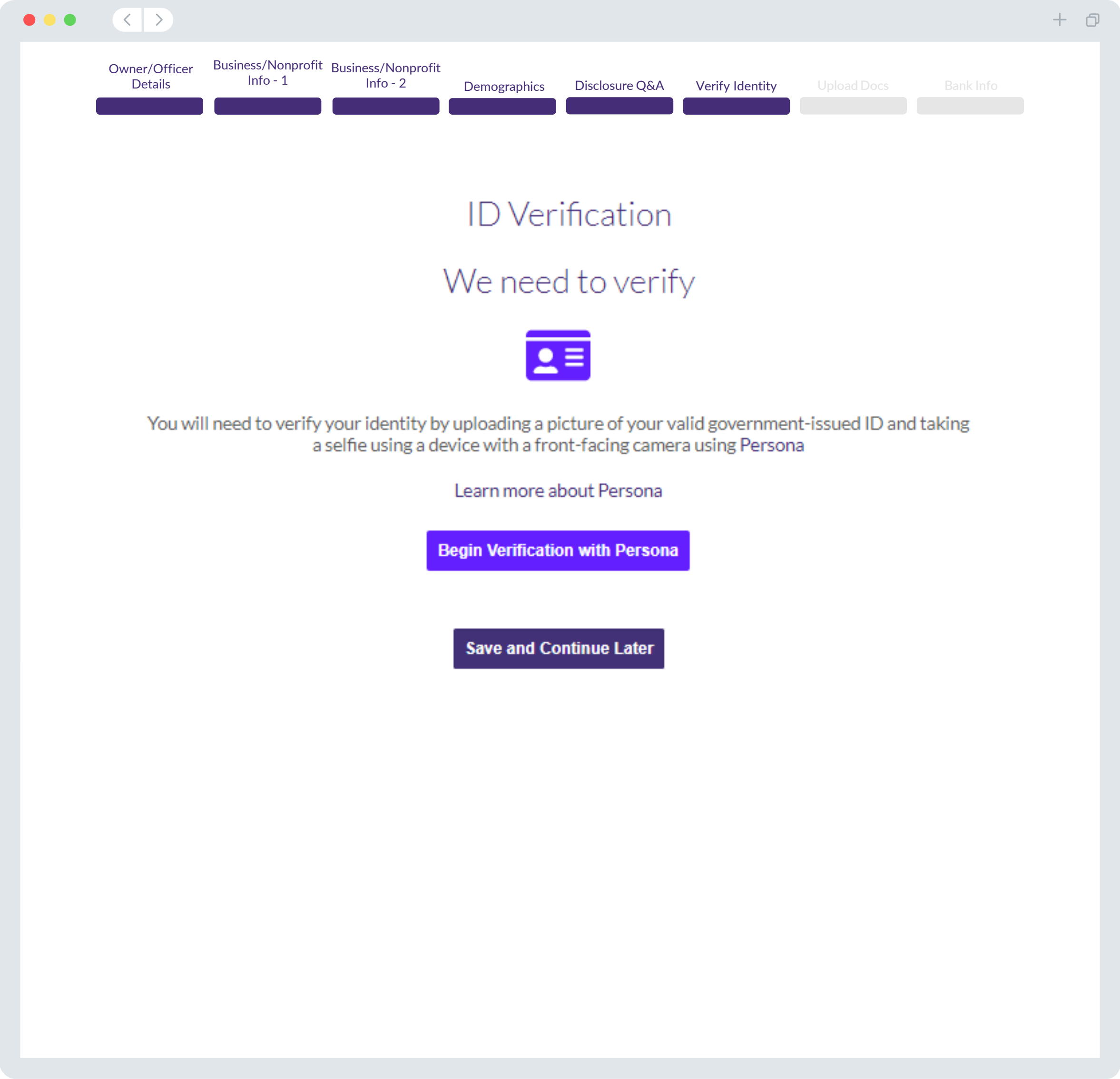
In this section, you will need to verify your identity using Persona by uploading a picture of your valid government-issued ID. Acceptable forms of government-issued ID include:

- Driver's License
- State ID or Foreign Matricula Card
- U.S. Passport or Foreign Passport

You will also need to take a selfie using a device with a front-facing camera. Review slides 31-33 for 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 check.



Section 7: Upload Docs

Step 1

Select the upload icon to locate the document file on your device or drag and drop the file onto the icon.

Step 2

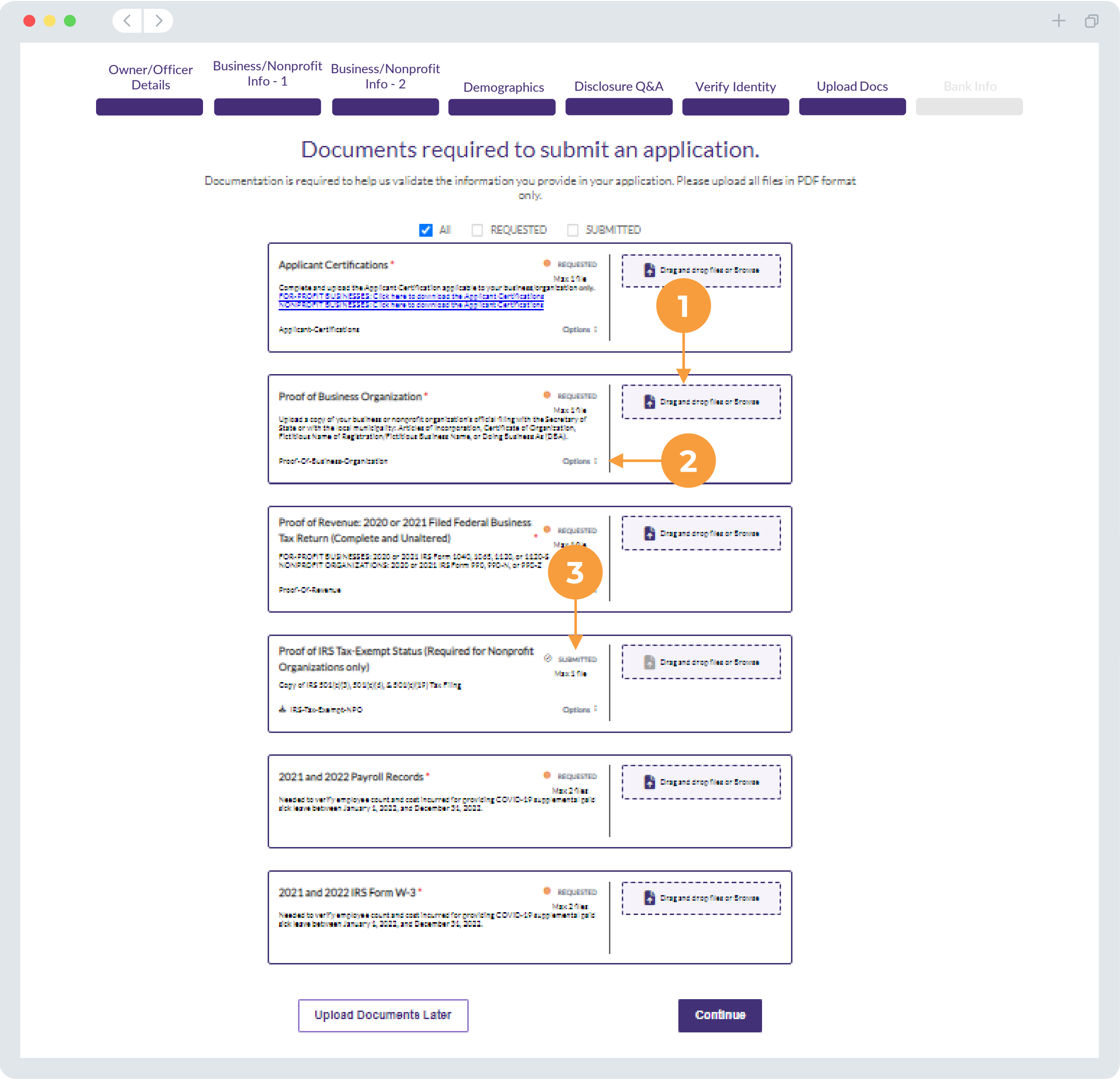
If your file requires a password to be viewed, click on the three dots next to "**Options**" and select "**Set Password**" to enter the password. You can also click on the three dots to view, replace, or delete the file.

Step 3

Once your file has been uploaded, its status will change from "**Requested**" to "**Submitted**."

Step 4

Repeat the steps above until all required documents have been uploaded.



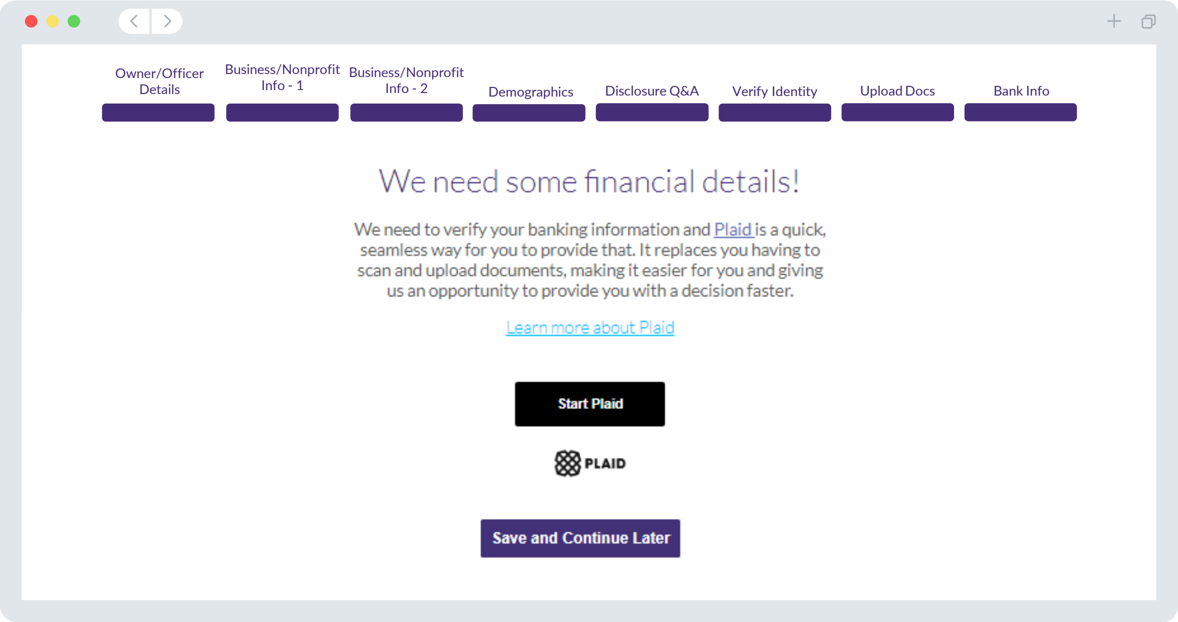
Section 8: Bank Info

Why is your banking information needed?

Lendistry uses a third-party technology (Plaid) to verify your bank account and set up ACH transfers by connecting accounts from any bank or credit union in the U.S. to an app like Lendistry's Portal. The third-party does not share your personal information without your permission and does not sell or rent it to outside companies.

This method of bank verification is preferred but will not always work if your banking institution is not available through the provider. In this case, you can verify your bank account by reaching out to Lendistry's dedicated Customer Experience Center at 1-888- 208-0015 , Monday through Friday (7:00 a.m.-7:00 p.m. PDT).

Important Note: The bank account must be for the primary owner of the business.



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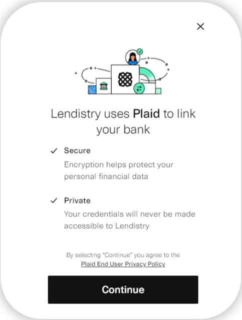
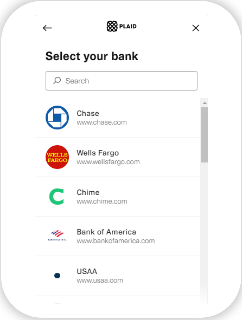


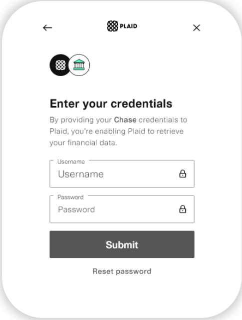
Continue to Plaid.

2



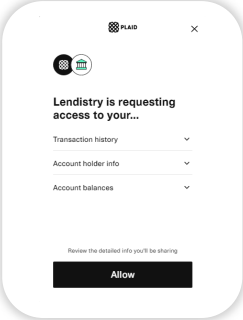
Locate your banking institution.

3



Sign into your online banking account.

4



Confirm permission.

Section 9: Review Your Application Before Submission

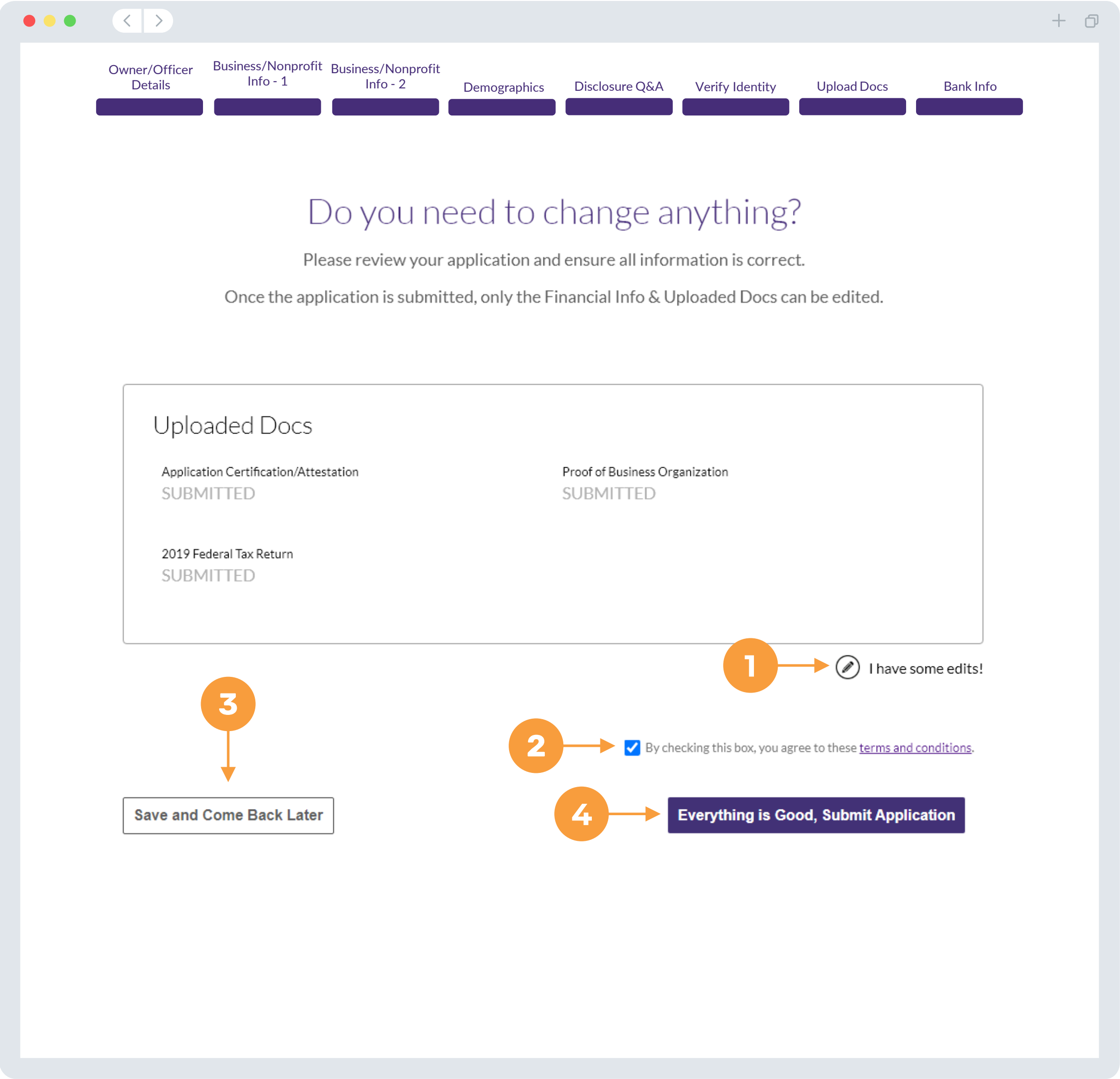
Before submitting your application, review all your responses and documentation for accuracy. **Once you submit your application, you will <u>NOT</u> be able to make edits.**

For your application to be reviewed by Lendistry, you must submit a complete application that includes:

1. All fields in the application form completed;
2. All required documents uploaded;
3. Your bank account connected via Plaid; and
4. Your identity verified via Persona.

Reviewing Your Application

1. If you need to edit your application, click on “**I have some edits!**” and fix all errors.
2. Read [Lendistry’s Terms and Conditions] and check the box to agree.
3. If you would like to review and submit your application later, click on “**Save and Come Back Later**.” You can sign into the Portal at any time to complete your application and check for status updates.
4. After you have reviewed your application and confirmed that all information you have provided is accurate, click on “**Everything is Good, Submit Application**” to submit your application.



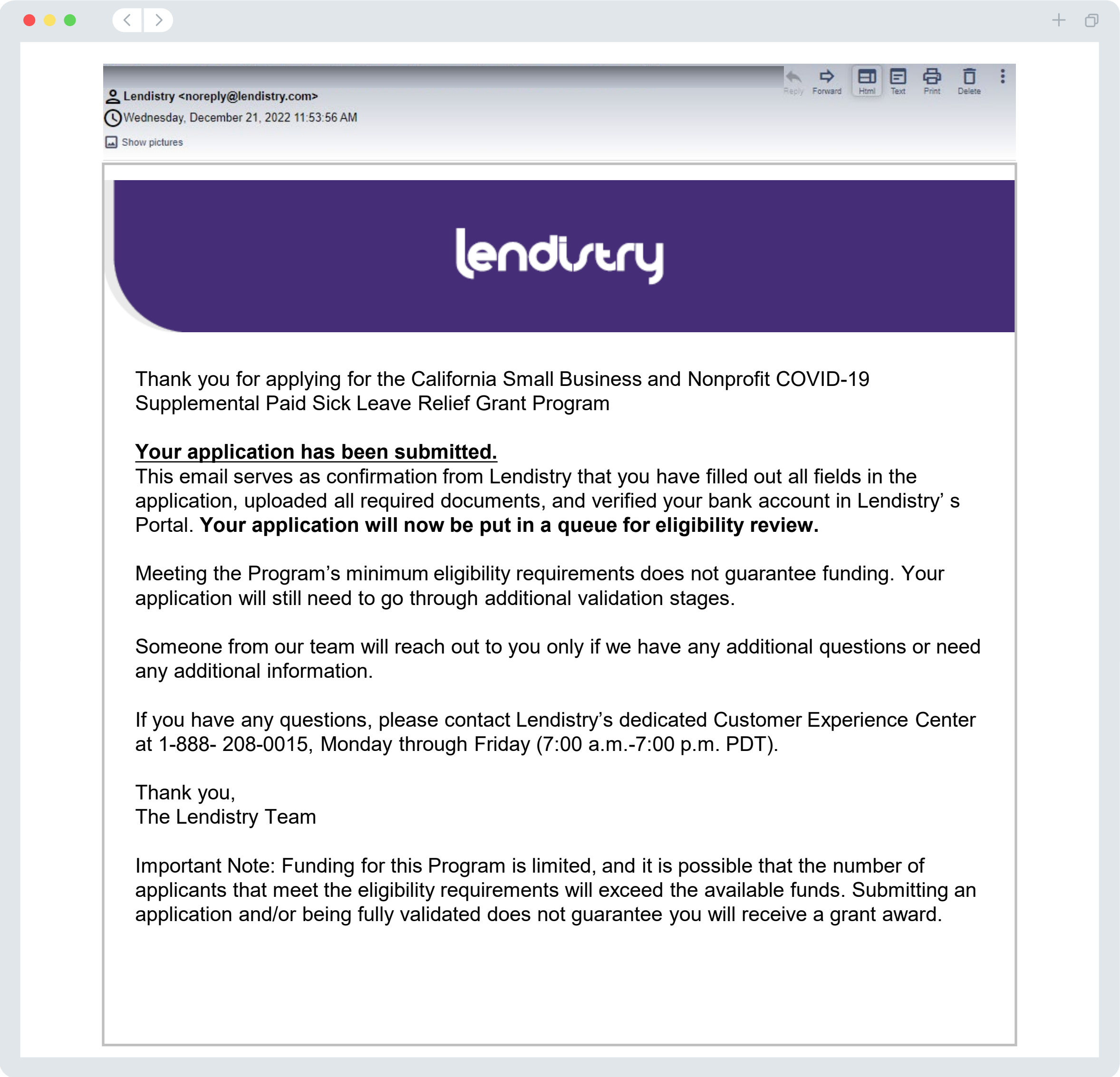
Application Submission

You will receive a confirmation email from Lendistry at noreply@lendistry.com to confirm your application has been received. If you did not receive a confirmation email after submitting your application, please check your spam folder for emails from noreply@lendistry.com and add the email address to your email account's safe sender list.

If more information or documents are needed, Lendistry may contact you by email, phone, and/or text (if authorized) to verify the information you submitted. **You must respond to all requests to keep your application in the review process.**

To avoid disruptions in the review process, please be sure to look out for communication from Lendistry and make sure you have all required documents readily available.

TIP: Place "Lendistry" in the search bar of your email.



Lendistry <noreply@lendistry.com>
Wednesday, December 21, 2022 11:53:56 AM

lendistry

Thank you for applying for the California Small Business and Nonprofit COVID-19 Supplemental Paid Sick Leave Relief Grant Program

Your application has been submitted.
This email serves as confirmation from Lendistry that you have filled out all fields in the application, uploaded all required documents, and verified your bank account in Lendistry' s Portal. **Your application will now be put in a queue for eligibility review.**

Meeting the Program's minimum eligibility requirements does not guarantee funding. Your application will still need to go through additional validation stages.

Someone from our team will reach out to you only if we have any additional questions or need any additional information.

If you have any questions, please contact Lendistry's dedicated Customer Experience Center at 1-888- 208-0015, Monday through Friday (7:00 a.m.-7:00 p.m. PDT).

Thank you,
The Lendistry Team

Important Note: Funding for this Program is limited, and it is possible that the number of applicants that meet the eligibility requirements will exceed the available funds. Submitting an application and/or being fully validated does not guarantee you will receive a grant award.

The Review Process

CALIFORNIA
Supplemental Paid Sick Leave Grant

APPLICATION PORTAL POWERED BY LENDISTRY

Review Process

CALIFORNIA Supplemental Paid Sick Leave Grant
APPLICATION PORTAL POWERED BY LENDISTRY

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://caspsl.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://caspsl.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
Incomplete	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.
Inactive	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 Customer Experience Center at 1-888-208-0015, Monday through Friday 7:00A.M.-7:00P.M. PDT.
Application Submitted	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.
Application submitted, but additional docs required.	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.
Application under review for minimum eligibility requirements.	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.
Your application is INELIGIBLE because it does not meet the program's minimum eligibility requirements.	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 Customer Experience 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 stand, and your file will be closed.
Your application meets the Program's minimum eligibility requirements and will move to the next validation stage.	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.

Continued next page.

Application Status

Status	What it Means	Action Required by Applicant
Additional documents are needed in order for your application to continue through the validation stage.	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.
Application Declined	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 Customer Experience 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 permanent, and your file will be closed
Application Approved	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.
Application Approved, Grants Docs Pending	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.
Grant Docs Received	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.
Grant Funded	You have been fully funded for your eligible grant award.	No further action is required by you. Your file is now closed.

How to Troubleshoot or Unlock Your Account

CALIFORNIA
Supplemental Paid Sick Leave Grant

APPLICATION PORTAL POWERED BY LENDISTRY

Email Cannot Be Found

What should you do if your email address cannot be found in Lendistry's Portal?

If your email address cannot be found in Lendistry's Portal, you may not have an account, or you may be using the incorrect email address to sign in.

1. To start an application, you are required to create an account in Lendistry's Portal as well as register an email address and mobile phone number. **See page 37 for reference**. If you have not created an account, please do so by clicking "**Don't have an account? Sign up!**".

2. If you already have an account but your email address cannot be found, you may have used the incorrect email to sign in. Please make sure you are spelling your email address correctly or try a different one. **If this problem persists, please contact our dedicated Customer Experience Center at 1-888- 208-0015, Monday through Friday (7:00 a.m.-7:00 p.m. PDT)**.

   To retrieve your email address from Lendistry's Customer Experience Center, you will be required to verify information, which may include but is not limited to your full name, date of birth, business name, and the last four digits of your Social Security Number.

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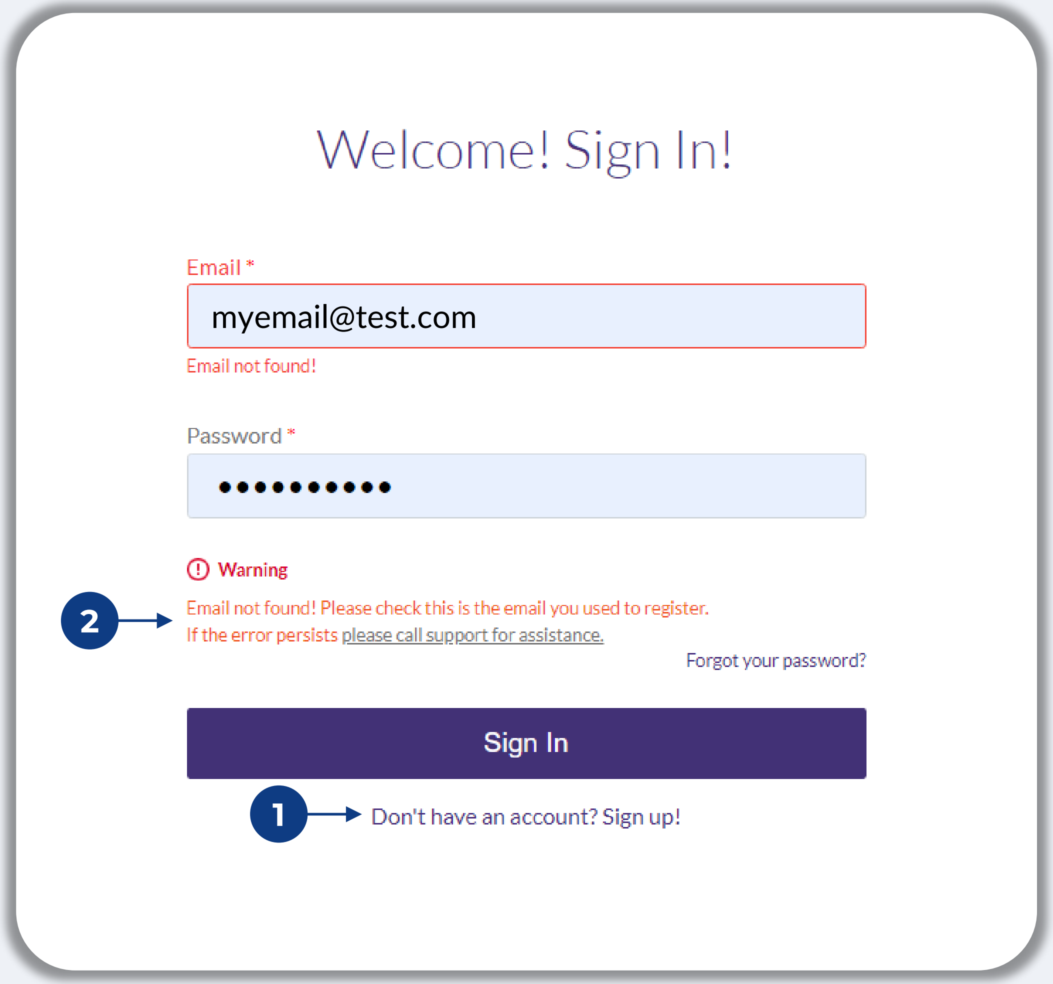

Incorrect Password

What should you do if your password is incorrect?

If the password you entered is incorrect, please check its spelling and try again. You have five attempts to use the correct password before your account is locked.

We strongly recommend that you reset your password immediately after your second failed attempt.

<u>How to Reset Your Password:</u>

1. Click on "Forgot your password?"
2. Enter the email address registered to your account.
3. A six-digit confirmation code will be sent to the phone number you registered. Enter the code to confirm your account.
4. Enter and confirm your new password.

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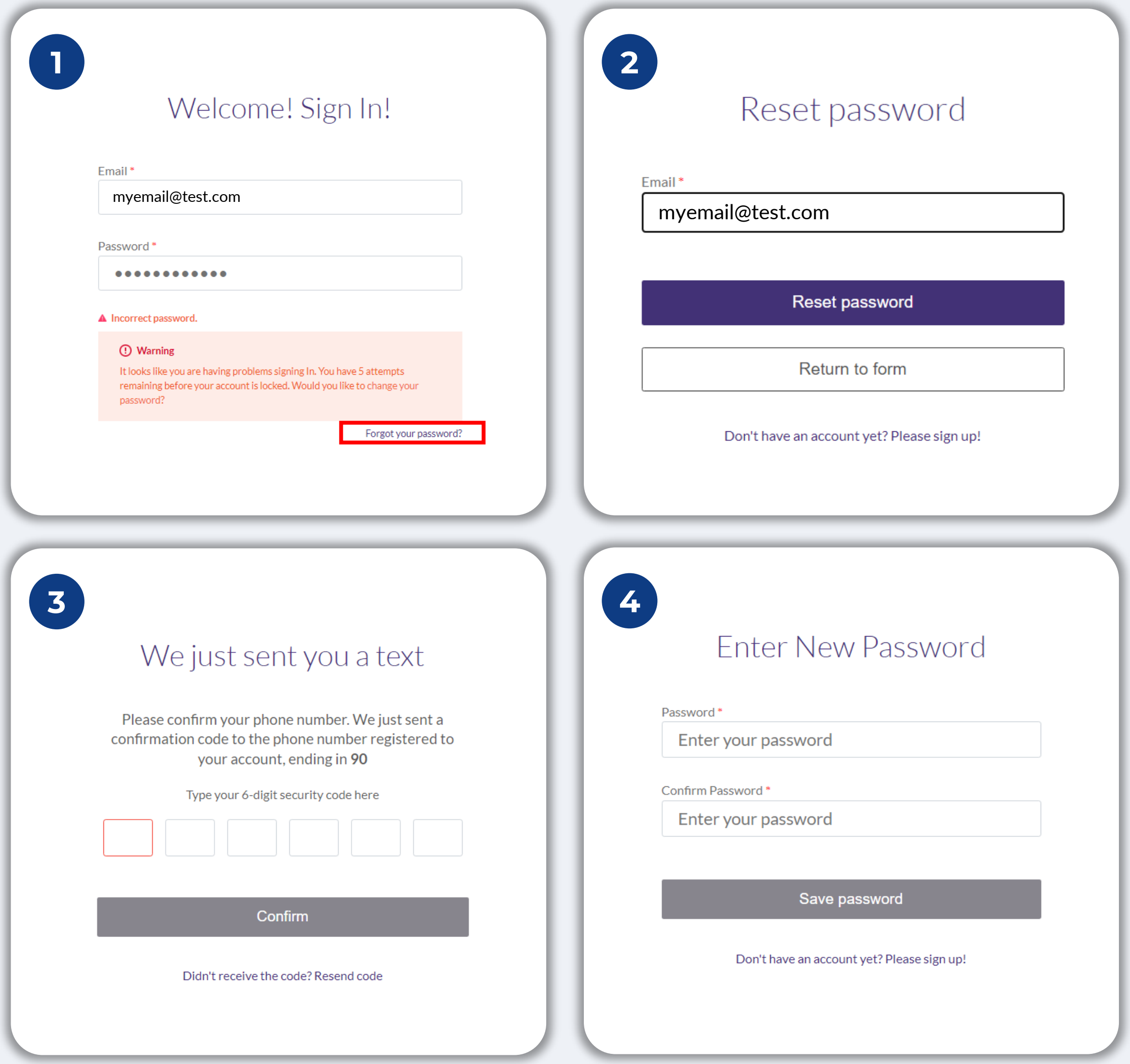


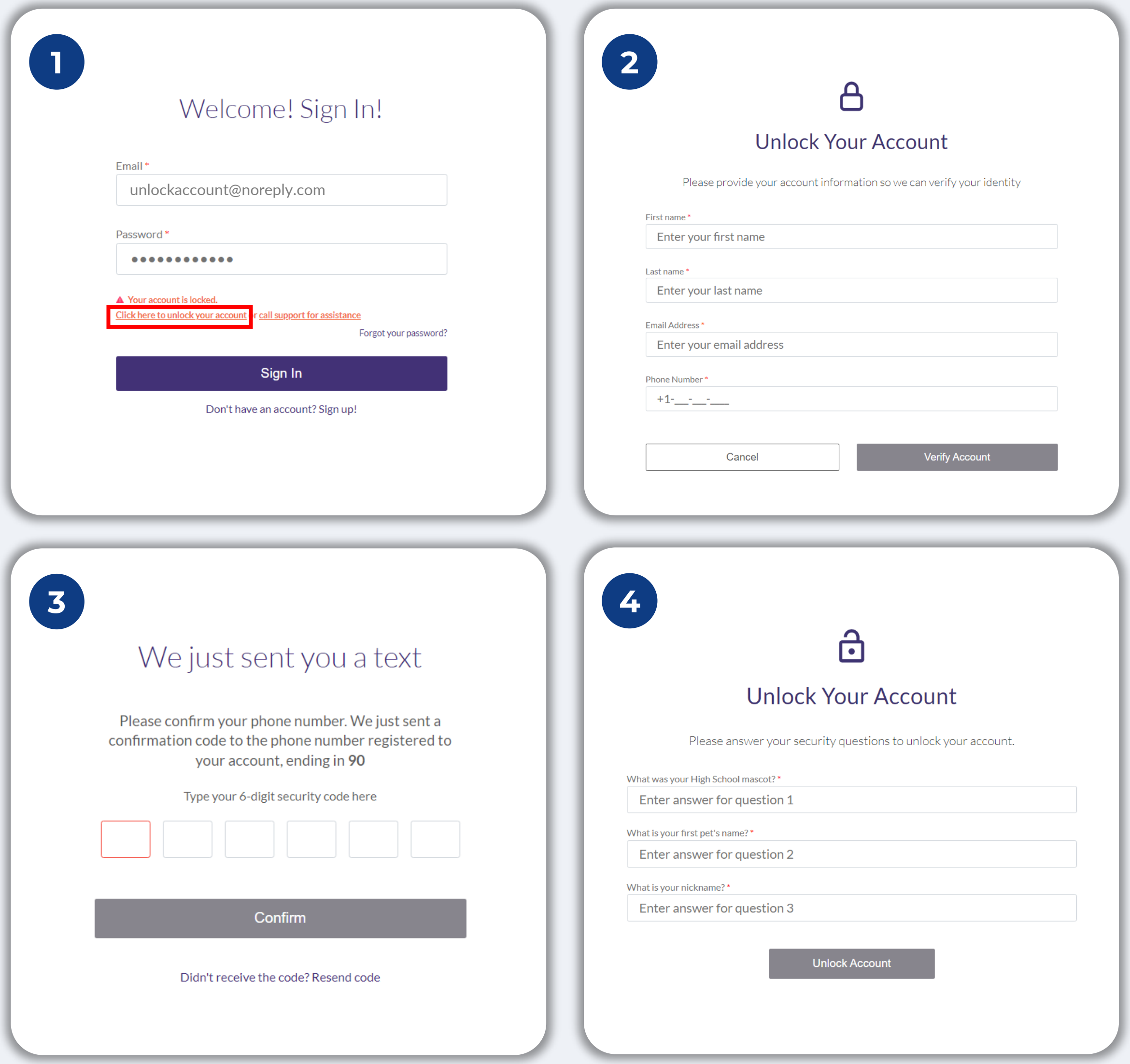
Your Account is Locked

What should you do if your account is locked?

Your account will be locked after five failed attempts to sign in. You can unlock your account by answering your security questions.

How to Unlock Your Account

1. Select "Click here to unlock your account."
2. Enter the first name, last name, email address, and phone number registered to your account. This information must be provided correctly for you to proceed. If you need assistance verifying your account information, please contact our dedicated Customer Experience Center.
3. A six-digit confirmation code will be sent to the phone number you registered. Enter the code to confirm your account.
4. Answer the security questions correctly to unlock your account. If you are unable to provide the correct answers, please contact our dedicated Customer Experience Center to reset your security questions. To reset them, you will be required to verify information, which may include but is not limited to your full name, date of birth, business name, and the last four digits of your Social Security Number.



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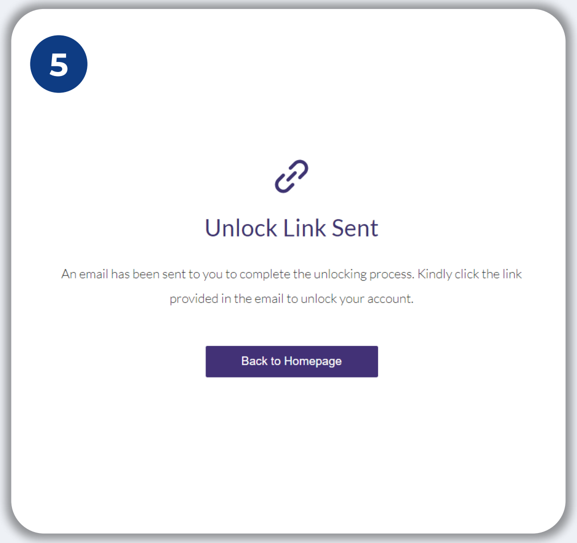
Your Account is Locked

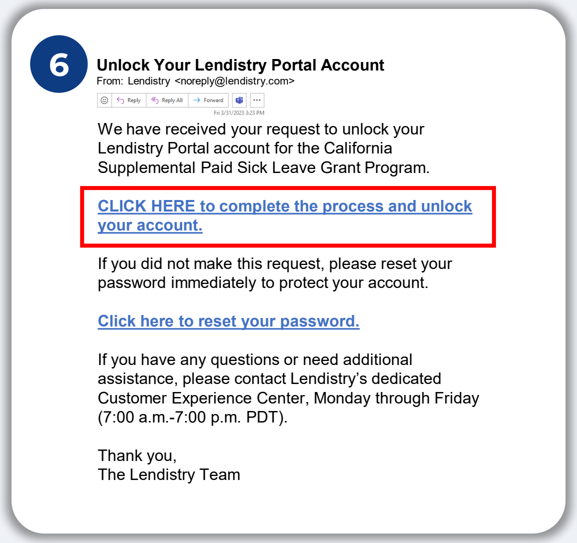
How to Unlock Your Account

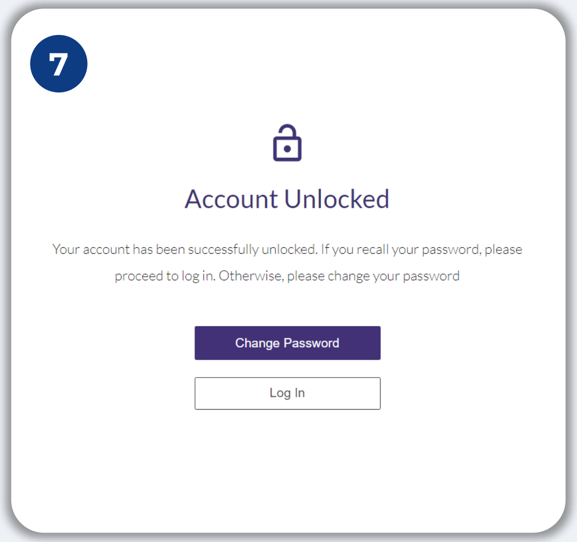
5. Once the security questions have been answered correctly, a link to unlock your account will be sent to your email.

6. Click on the link to unlock your account.

7. After you unlock your account, you will have the option to sign into Lendistry's Portal using your existing password or to reset it. We strongly recommend you reset your password to prevent your account from getting locked again.







Customer Experience Center

1-888-208-0015
Monday - Friday
7:00 a.m.-7:00 p.m. PDT

Quick Links