

TMF 2023 Stabilization Grant Program - Summer Cycle

The Merchants Fund

Eligibility Screen

Name of Business*

Please enter the DBA. The DBA is the commonly used name for your business. For example, you could have a business with the legal name "Philadelphia Hot Dog Cart LLC" but do business as "Pete's Hot Dog Cart". In this scenario your DBA would be "Pete's Hot Dog Cart".

Character Limit: 250

TMF provides a preliminary screening of applicants to determine the business's eligibility for 2023 funding. Please respond with Yes or No to the following questions.

Please note that TMF verifies all of the below information, and applications that do not fit the criteria are ineligible for funding. If you have questions about eligibility please reach out to grants@merchantsfund.org.

My business is located in Philadelphia.*

Choices

- Yes
- No

My business is independently owned and operated.*

Franchises are eligible only if independently-owned.

Choices

- Yes
- No

My business occupies a storefront, retail, or commercial space.*

This includes food trucks and kiosks.

Choices

- Yes
- No

My business has been in continuous operation for at least two years prior to today's current date.*

Choices

- Yes
- No

My business is in compliance with all local, state, and federal taxes.*

Or is on an approved payment plan or in the process of getting on an approved payment plan.

Choices

Yes

No

My business has the required federal, state, and local licenses and permits to operate legally.*

I am able to provide copies of each.

Choices

Yes

No

My business is my primary source of income.***Choices**

Yes

No

Did your business have \$750,000 or more in total revenue (not profit) last year?*

This is NOT your profit. This dollar amount can be found on line 1 of your Schedule C if you file as a sole proprietorship, Line 1a on your 1065 if you file as a partnership, or line 1a if you file as a corporation on your 1120.

Choices

Yes

No

Did your business have less than \$50,000 in total revenue (not profit) last year?*

This is NOT your profit. This dollar amount can be found on line 1 of your Schedule C if you file as a sole proprietorship, Line 1a on your 1065 if you file as a partnership, or line 1a if you file as a corporation on your 1120.

Choices

Yes

No

Have you applied for a stabilization grant in 2023?*

Regardless of whether the application was funded or denied

Choices

Yes

No

Have you received a grant from TMF in the last 24 months?*

Emergency Grants do not count

Choices

Yes

No

Does your business provide professional services?*

Examples include but are not limited to: banking, accounting, law, medical (including home health care), real estate, architecture, & graphic/web design

Choices

- Yes
- No

Is your business a childcare center?*

Choices

- Yes
- No

Is your business a registered 501c3 non-profit?*

Choices

- Yes
- No

Ineligible

We regret to inform you that based upon your answer to one or more questions above, your business does not meet the eligibility requirements for a 2023 Stabilization grant at this time.

If you believe there's been an error or have further questions regarding your application status, please reach out to Simon at grants@merchantsfund.org.

Eligible for Full Application

Congratulations. Based on your responses, your business is eligible to apply for a Stabilization Grant from TMF.

Would you like to proceed?*

Would you like to proceed and access the full application?

Choices

- Yes
- No

Business Information & Operations

In what year was your business established?*

Character Limit: 4

How far away do you live from your business location?*

Help text: use Google maps to determine the mileage from home to work and select from the options below

Choices

- 0 - .5 miles away
- .6 miles - 1 mile away
- 1.1 - 3 miles away
- 3.1 - 5 miles away
- 5.1 - 10 miles away
- Over 10.1 miles away

If you are not the original owner, in what year did you buy or take over the business?

Character Limit: 4

Briefly describe your business and business activities. (2-3 sentences)*

Character Limit: 10000

Do you hire employees within your community?*

Please let us know if you hire employees from the community in which your business operates

Choices

- Yes
- No

Number of FULL-TIME employees (i.e. works 35 hrs or more per week). Include yourself if applicable*

Help Text: An independent contractor is NOT an employee and is NOT on the company payroll. They are self-employed and contracted to perform work for—or provide services to—another entity as a non-employee. Please do not include these workers in any questions regarding employees.

Character Limit: 250

Number of PART-TIME employees (i.e. works less than 35 hrs per week). Include yourself if applicable*

Help Text: An independent contractor is NOT an employee and is NOT on the company payroll. They are self-employed and contracted to perform work for—or provide services to—another entity as a non-employee. Please do not include these workers in any questions regarding employees.

Character Limit: 250

Number of independent contractors and/or freelance workers paid by the business in 2022.*

Help Text: An independent contractor is NOT an employee and is NOT on the company payroll. They are self-employed and contracted to perform work for—or provide services to—another entity as a nonemployee.

Character Limit: 250

How would you describe the current status of your business?*

Choices

Survival (needs support to stabilize before considering growth or next steps)

Sustain (mature business and/ or has the desire to sustain current size)

Scaling / in growth phase

Is there more than 1 business owner?*

Choices

Yes

No

Business Ownership

How many additional owners are there with at least 20% ownership of the business?*

NOT counting yourself.

Choices

1

2

3

Owner #2's First & Last Name

Character Limit: 250

Owner #2 Ownership Percentage

Character Limit: 250

Email Address

Character Limit: 254

Owner #3's First & Last Name

Character Limit: 250

Owner #3 Ownership Percentage

Character Limit: 250

Email Address

Character Limit: 254

Owner #4's First & Last Name

Character Limit: 250

Owner #4's Ownership Percentage

Character Limit: 250

Email Address

Character Limit: 254

Grant Request

2023 Stabilization Grants are designed to help small businesses with a clear and specific project-based grant to assist operations in the face of economic challenges, changes, opportunities, and crises.

The grant is a one-time infusion of capital to help the business:

- *Stabilize - recover from a specific deficit/challenge (e.g. replace a failing HVAC system, repair the storefront after a disaster, etc.)*
- *Grow - take advantage of an opportunity to increase sales, profits, or decrease expenses (e.g. purchase a piece of equipment that will improve productivity, improve the interior of the store, expand to wholesale/e-commerce, etc.)*

Please note: Stabilization Grants cannot be used for working capital, day to day expenses, or to bolster cash reserves. (E.g. pay employee salaries, pay past due debts that have been accrued due to lack of profitability, pay rent, increase the cash in your bank account, etc.) Businesses that are not profitable and that have no clear path to profitability are not likely to be funded.

In very specific circumstances, TMF Stabilization Grants can be used to pay off past due debts or purchase inventory. Specific instances can include: accrued debt used to continue operations during a disaster (flood, road closures, fire, etc.), purchasing bulk inventory to save on costs or prepare for a large event, assisting a sustainable business in paying debts that were accrued when the business was struggling, etc.

Please indicate the grant size request for your business at this time -- up to \$10,000.*

Character Limit: 20

Please describe your grant request in order of priority.

For Example:

Priority 1: \$5,500 for HVAC repair to replace our broken system;

Priority 2: \$1,500 to replace a failing refrigerator;

Priority 3: \$2,000 for two new slicers;

Total: \$9,000 (should be the total amount of grant request)

NOTE: Not all priorities need to be used

PRIORITY #	DESCRIPTION	AMOUNT NEEDED
PRIORITY # 1		
PRIORITY # 2		
PRIORITY # 3		
PRIORITY # 4		
PRIORITY # 5		
Total		

How will this grant help you to improve or stabilize your business?*

Will it enable you to make or save more money? Will it enable you to better serve your current customers or expand to serve new customers?

If the project requires more than \$10,000 to complete, please explain where the remainder of the money will be coming from.

Character Limit: 10000

Follow Up / Site Visit*

I understand that TMF staff or a representative of TMF will contact me with additional questions about my business and may request a site visit as phase two of the application process.

Choices

Yes

No

Translation Services Needed?*

I will need translation services if I'm selected for a site visit or TMF staff have additional questions about my application.

Choices

Yes

No

Language Spoken

Which language do you need translation services?*

Choices

Arabic

Chinese (Cantonese)

Chinese (Mandarin)

French

German

Haitian Creole

Hindi

Italian

Japanese

Korean

Other

Persian (Dari)

Persian (Farsi)

Polish

Portuguese

Russian

Spanish

Tagalog

Urdu

Rent / Own

Do you rent or own the location of the business?*

Choices

Rent

Own

Rent Questions

Do you have a current, signed lease?*

Choices

Yes

No

How much time do you have remaining on your lease?*

Character Limit: 250

How much do you pay in rent per month?*

Character Limit: 20

Commercial Property Questions

When did you purchase the commercial property?*

Character Limit: 10

How much did you pay for the building?*

Character Limit: 20

What is the balance on the commercial mortgage?*

Character Limit: 20

What is your monthly mortgage payment for the commercial property?*

Character Limit: 20

Is the building used as collateral for any other loans or lines of credit?*

Not including the primary mortgage on the property

Choices

Yes

No

2022 Financial Snapshot

What were the total SALES for your business in 2022? (i.e. Gross Receipts or Total Revenue)

This is NOT your profit. This dollar amount can be found on line 1 of your Schedule C if you file as a sole proprietorship, Line 1a on your 1065 if you file as a partnership, or line 1a if you file as a corporation on your 1120.

Character Limit: 20

Wages/Salaries in 2022 ONLY for employees and contractors*

Include all payroll taxes and other payroll fees

Character Limit: 20

Wages/Salaries in 2022 ONLY for owners*

Include all payroll taxes and other payroll fees

Character Limit: 20

Total of all other expenses incurred while operating the business*

Schedule C - Line 26 / 1120-S Line 8 / 1065 - Line 9 / 1120 - 13

Character Limit: 20

2023 Financial Snapshot

What are the total SALES for your business in 2023 up to the last month of business?*

i.e Gross Receipts or Total Revenue

For example, if the application is submitted on March 15, 2023, please share with us the total sales from January 1 through February.

Character Limit: 20

Cost of Goods Sold (COGS), if applicable

These are the direct costs associated with producing your product or service. For example if you own a food business, this would be ingredients, packaging, etc.

Character Limit: 20

Wages/Salaries in 2023 ONLY for employees and contractors*

Include all payroll taxes and other payroll fees

Character Limit: 20

Wages/Salaries in 2023 ONLY for owners*

Include all payroll taxes and other payroll fees

Character Limit: 20

Total of all other expenses incurred while operating the business*

Character Limit: 20

Assets & Liabilities

Business Bank Account - Checking*

Please make sure this number is accurate, as any incorrect information may slow down the evaluation process

Character Limit: 20

Business Bank Account - Savings*

Please make sure this number is accurate, as any incorrect information may slow down the evaluation process

Character Limit: 20

Estimated value of commercial property? (ONLY input if you own the building)

Do not input the value of the property if you rent your commercial space from a landlord.

Character Limit: 20

DEBT SCHEDULE

In this section you will list out all the current business debt. Please complete in as full detail as possible. Please do not hesitate to contact us if you have any questions

COMMERCIAL MORTGAGE: Only complete if you own the commercial property you are operating your business in.

GOVERNMENT LOANS: This would include any SBA EIDL loans, PPP loans that were not forgiven, etc.

DEBT TYPE	ORIGINATIO N DATE	ORIGINA L AMOUN T OF LOAN	CURREN T AMOUN T OF LOAN	INTERES T RATE OF LOAN	MONTHL Y PAYMEN T
COMMERCIA L MORTGAGE					
FAMILY & FRIENDS					
BANK LOAN 1					
BANK LOAN 2					
GOVERNMEN T LOAN 1					
GOVERNMEN T LOAN 2					

CREDIT CARD 1					
CREDIT CARD 2					
VENDOR DEBT					
AUTO SUM					

Do you have any other loans?

If yes, please list the loans, their original amounts, current amounts, monthly payments, and interest rates.

Character Limit: 10000

Does your business have any past due payments, bills, and/or debt?

Choices

Yes

No

If yes, what types of payments, bills, and/or debt are past due and please explain?

Character Limit: 10000

Attachment Uploads

Signed W-9 for business*

Get a fillable W9 here: <https://www.irs.gov/pub/irs-pdf/fw9.pdf>

File Size Limit: 4 MB

2022 Federal Tax Return for Business OR 2022 P&L*

Please upload your most recently filed tax return for your business.

If a corporation, be sure to include Form 1120S is included.

If an LLC or Sole Proprietor, be sure to include Schedule C.

File Size Limit: 4 MB

2021 Federal Tax Return for Business*

If a corporation be sure Form 1120S is included; if a LLC or Sole Proprietor, include Schedule C.

File Size Limit: 4 MB

Correct Documents Attached?*

Choices

Yes

No

Partial

2022 Federal Tax Returns - Personal (If available)

File Size Limit: 4 MB

2021 Federal Tax Returns - Personal*

File Size Limit: 4 MB

2023 P&L*

File Size Limit: 4 MB

Demographics

Do you and your business identify as any of the following: (where ownership is based on 51% or more)*

Please select all that apply.

Choices

Disability-Owned Business

Immigrant-Owned Business

LGBTQ+ Owned Business

Minority-Owned Business

Spouse-Owned Business (50/50 ownership)

Veteran-Owned Business

Woman-Owned Business

N/A

What is your annual household income (i.e. the gross amount before taxes reported on your taxes)?*

This is not business income. This is the total household income as listed on your personal tax returns.

Choices

Under \$10k

\$10k - 50k

\$51k - \$100k

\$101k - \$150k

Over \$150k

Choose not to answer

What is your marital status?*

Choices

- Single
- Married
- Domestic partnership
- Seperated
- Divorced
- Choose not to answer

Median Household Income (percentile)

Look up via: <https://www.opportunityatlas.org/>

Percentile of Median Household Income in 2012-16 for all households/residents living in the area

(Neighborhood characteristics and characteristics of current residents in each area)

Character Limit: 250

Poverty Rate (percentage)

Look up via: <https://www.opportunityatlas.org/>

Poverty Rate in 2012-16 = Fraction of residents below the federal poverty line in 2012-16

(Neighborhood characteristics and characteristics of current residents in each area)

Character Limit: 50

Date of Birth

Character Limit: 10

TMF Grantee

Choices

- Yes
- No
- Not Sure

Grantee info

What year did they receive a grant?*

Character Limit: 250

How much was the grant for?*

Character Limit: 250

Is there anything else that you would like for us to know?

Is there anything else that you would like for us to know?

Character Limit: 10000

How did you hear about this grant / Who referred you?

Character Limit: 250

Did you complete this application on your phone, tablet, or computer?*

Choices

Phone

Tablet

Computer

Certification

I hereby certify that everything contained within this application is true and accurate to the best of my knowledge. I understand that providing false or misleading information will eliminate my business from consideration for funding both now and in the future. I understand that if inaccuracies are detected after an application has been approved, the approval will be revoked.

I grant permission for agents of The Merchants Fund to discuss the information contained in this application with agents from the organization that recommended my business to TMF.

Signature*

Character Limit: 250

Date*

Character Limit: 10