Receiving COVID-19 Relief Funds from the State of South Carolina is a simple online process. This document will help guide you through the steps to submit an application to request relief funding.	 Steps to request COVID-19 Relief Funding: Self-register and login to the portal to answer application questions. Provide required documentation. Submit your application. Resources available for assistance: SC CARES Call Center Help line: 803-670-5170 Open 8:30 a.m–5 p.m, EST Monday–Friday SC CARES Call Center Email: <u>SCCares@admin.sc.gov</u> For program communications, trainings, application, frequently asked questions: <u>https://accelerate.sc.gov</u>
Visit the accelerateSC website. Click on "CARES Act" in the top blue bar. Then click "Applying for SC CARES Act Funds" in the dropdown menu: https://accelerate.sc.gov/cares- act/applying-sc-cares-act-funds	CARES Act Citizens Businesses Face Coverings Guidelines
 Step 1: Scroll through the page for details on the two grant programs — Minority and Small Business Relief and Nonprofit Relief. Scroll to the bottom of the page for details on the two programs; Minority & Small Business Relief and Non-Profit Relief. Review the information in the 	Image: State Stat

Minority and Small Business Relief Grant Program section. Download and complete the "Minority and Small Business Relief Grant Program Calculation Worksheet." You will need to complete this worksheet for your application.	Applicant Agreement: South Carolina Small Business Program Beneficiary Agreement (Posted 10.1720) Nonprofit Relief Grant Program Provides grants to nonprofit organizations to reimburse qualifying expenditures for providing services or revenue loss due to COVID-19. Grant Awards: Will range from \$2,500 to \$50,000 Eligibility Criteria: Destinguised as a 501(c)(3) prografit organization by the Internal Revenue Service
2. After completing the Calculation Worksheet, click on application link under the Minority and Small Business Relief Grant Program heading to begin the application.	2 Application Window: October 19, 2020 – November 1, 2020 Application: <u>Click here for the application.</u>

1

3. Fill out the information on the on the Self-Registration screen.	
NOTE: Y our username must be in the form of an email. (ex: jsmith@example.com)	3 Registration for the SC CARES Minority and Small Business Relief Program and Nonprofit Relief Program Register
 Click on the blue "Submit" button at the bottom. 	* First Name First Name * Last Name
 IMPORTANT: Business owners and providers with multiple TINs must complete one application for each TIN. Each application requires a unique registration and username. Applicants may create multiple usernames under the same email address. However, each username must be unique and must be 	Last Name *Email Enter a valid email *Username (Must be in format of email address) Enter a valid Username Phone Phone Number Phone Phone Number *Business or Nonprofit Name Business or Nonprofit Name" *Business or Nonprofit Name" *Password Pas
(ex. jsmith@example.com).	
5. Upon registering, you will receive a welcome email.	5 Hi Your Name Below is your username for the South Carolina's Small Business COVID Relief Program platform to process your Minority and Small Business or Non Profit Grant. Your Username: Your Username Log in link to return to the site: https://sccares.force.com/SmallBusiness Thanks, State of South Carolina
	Home Applications

6. Click on the "Minority and Small Business Relief Program" button to begin your application.





9. Section I — Identifying Information

Click on the Section I — Identifying Information button to open. Complete information related to your organization. Required fields will be marked with a red asterisk (*)

- A. If payment should be mailed to an address other than your Business Street Address, please check the box, and complete the mailing address information.
- B. Click the blue "Save" button at the bottom of the section. If a red error message occurs, you will need to return to the section and complete the needed field(s). Once satisfied you can click the "X" on the error message to close and click "Save" again.

	Identifying Information
Business Name (As Shown in Tax Records):	DBA(Doing Business As) / Trade Name
Sample Business	Sample Business
Is this business registered with the South Carolina Secretary of State?	*Business ID# (EIN/TIN/SSN)(No Dathes)
Yes	▼ 570324929
UNS Number (if known):	
123456456	
City of Primary Location Within SC:	County of Primary Location Within SC:
Abbeville	▼ S Abbeville County
	Begin typing the name of the county, and select from the resulting list
Business Street	*Business State
123 Anywhere St	23
	SC
Business City	*Business Zip
Business City Abbeville	Business Zip 20236
Business City Abbeville f payment remittance address is different than business address check the bo ayment will be sent.	*Business Zip 20236 x and provide address where
Business City Abbeville fpayment remittance address is different than business address check the bo sayment will be sent. Remittance Address treet P.O. Box 497, 2669 Kinard Street	*Business Zip 20236 x and provide address where State SC
Business City Abbeville f payment remittance address is different than business address check the bo ayment will be sent. Remittance Address street P.O. Box 497, 2669 Kinard Street	Business Zip 20236 x and provide address where State SC
Business City Abbeville f payment remittance address is different than business address check the bo ayment will be sent.	State State Zip
Business City Abbeville f payment remittance address is different than business address check the bo ayment will be sent.	Business Zip 20236 x and provide address where State SC Zip 29108
Business City Abbeville f payment remittance address is different than business address check the bo ayment will be sent. CA Remittance Address Etreet P.O. Box 497, 2669 Kinard Street Etty Newberry	State State SC Zip 29108
Business City Abbeville f payment remittance address is different than business address check the bo ayment will be sent. CA Remittance Address Street P.O. Box 497, 2669 Kinard Street Sity Newberry	Sc *Business Zip 20236 x and provide address where State SC Zip 29108
Business City Abbeville f payment remittance address is different than business address check the bo ayment will be sent. Remittance Address treet P.O. Box 497, 2669 Kinard Street City Newberry First Name Bob	State State SC SC SC Zip 29108
Business City Abbeville fpayment remittance address is different than business address check the bo ayment will be sent. Compared to the sent of the s	State State SC Zip 29108
Business City Abbeville f payment remittance address is different than business address check the bo ayment will be sent. A Remittance Address itreet P.O. Box 497, 2669 Kinard Street City Newberry First Name Bob Phone	State State SC Zip 29108



10. Section II — Ownership Information

Required fields will be marked with a red asterisk (*).

- A. All owners with 20% or more interest in the business are required to be listed on the application. Enter the owner information in the top eight (8) fields and click **Create Owner**.
- B. The owner will be added to the list, and the fields will be cleared to add another owner if needed (see B below).
- C. For "Type of Business" select the closest option from the menu or "Other Services."
- D. For the question, "...Subject to Governor's executive orders...," select the business category or "Not Applicable."
- E. Click the blue "**Save**" button at the bottom of the section. If a red error message occurs, you will need to return to the section and complete the needed field(s).

			Ownership	Informati				
me of Rusiness	Owners (include a	ll owners/investor	s with over 20	0% share)				
	owners (include a	in owner synnes tor	5 With Over 20					
Bob				Last Name Sample				
Gender				Percent Own	ership			
Male			•	75%				
owner a US Citizen?				Is the owner a	a veteran?			
Yes			•	Yes				
oes this owner own	sinesses applying for th	ne grant program?		Which of the	following best identi	fies your racial/ethnic identity?		
No			•	African Ar	merican			
Create Owner								
First Name	Last Name	Percent	Gender		Citizen	Veteran	Race	
ny owner currently incar o any owner currently subj : five years?	cerated or on any form of supe	ervised release (e.g. parole or p information, arraignment, or o	probation)? ther means by which t	formal criminal	charges are brought	in any jurisdiction; or has any ov	wner been convicted of a fe	elony within
ny owner currently incar o any owner currently subj : five years?	cerated or on any form of supe	ervised release (e.g. parole or p	brobation)? ther means by which 1	formal criminal	charges are brought	in any jurisdiction; or has any ov	wner been convicted of a fe	elony within
o any owner currently incar the set of the s	cerated or on any form of supe	ervised release (e.g. parole or p information, arraignment, or o	probation)? ther means by which !	formal criminal	charges are brought	in any jurisdiction; or has any ov	wner been convicted of a fe	elony within
o any owner currently incar t five years? No	cerated or on any form of supe	ervised release (e.g. parole or p	probation)? ther means by which i	formal criminal	charges are brought	in any jurisdiction; or has any ov	wner been convicted of a fe	elony within
ny owner currently incar o any owner currently subj t five years? No	cerated or on any form of supe	ervised release (e.g. parole or p	brobation)? ther means by which i	formal criminal	charges are brought	in any jurisdiction; or has any o	vner been convicted of a fe	elony within
ny owner currently incar o any owner currently subj five years?	cerated or on any form of supe	ervised release (e.g. parole or p	probation)?	formal criminal	charges are brought	in any jurisdiction; or has any ou	wner been convicted of a fe	elony within
ny owner currently incar o any owner currently subj five years? No	cerated or on any form of supe ect to an indictment, criminal i ng one of the below general cat	ervised release (e.g. parole or p information, arraignment, or o tegories	ther means by which i	formal criminal	charges are brought	in any jurisdiction; or has any ou	wner been convicted of a fo	elony within
ny owner currently incar any owner currently subj five years? No pose type of business usir Construction	cerated or on any form of supe iect to an indictment, criminal i ng one of the below general cat	ervised release (e.g. parole or p information, arraignment, or o tegories	orobation)?	formal criminal	charges are brought	in any jurisdiction; or has any o	vner been convicted of a fe	elony within
ny owner currently incar o any owner currently subj five years? No Sose type of business usin Construction	eerated or on any form of supe ect to an indictment, criminal i ng one of the below general cat	tegories	probation)?	formal criminal	charges are brought	in any jurisdiction; or has any o	vner been convicted of a f	elony within
ny owner currently incar o any owner currently subj five years? No pose type of business usir construction planation of Business We build Midrange hom	cerated or on any form of supe iect to an indictment, criminal i ng one of the below general cat	tegories	ther means by which t	formal criminal	charges are brought	in any jurisdiction; or has any ou	wner been convicted of a f	elony within
ny owner currently incar o any owner currently subj five years? No cose type of business usir construction splanation of Business We build Midrange horr	recrated or on any form of supe iect to an indictment, criminal i ng one of the below general cat nes	tegories	ther means by which i	formal criminal	charges are brought	in any jurisdiction; or has any ou	wher been convicted of a fr	elony within
ny owner currently incar any owner currently subj five years? No bose type of business usir Construction planation of Business Ve build Midrange hom business was subject to o Not Applicable	ecrated or on any form of supe ect to an indictment, criminal i ng one of the below general cat nes ne of the Governor's executive	e orders, please indicat	stype below. If busi	formal criminal	charges are brought	in any jurisdiction; or has any ou	vner been convicted of a fe	elony within
ny owner currently incar o any owner currently subj five years? No cose type of business usin construction iplanation of Business We build Midrange hom business was subject to o Not Applicable	eerated or on any form of supe eet to an indictment, criminal i ng one of the below general cat tes ne of the Governor's executive	eorders, please indicat	sorobation)? ther means by which f ther means by which f stype below. If busing	formal criminal	charges are brought	in any jurisdiction; or has any ou	wher been convicted of a fe	elony within
ny owner currently incar o any owner currently subj five years? No cose type of business usir construction uplanation of Business We build Midrange hom business was subject to o Not Applicable	ecrated or on any form of supe ect to an indictment, criminal i ng one of the below general cat nes ne of the Governor's executive	e orders, please indicat	ther means by which i	formal criminal	charges are brought	in any jurisdiction; or has any ov	vner been convicted of a fe	elony within
ny owner currently incar o any owner currently subj five years? No bose type of business usin Construction construction construction we build Midrange hom business was subject to o Not Applicable	ecrated or on any form of supe ect to an indictment, criminal i ng one of the below general cat nes ne of the Governor's executive	evised release (e.g. parole or p information, arraignment, or o tegories	ther means by which the means by	formal criminal	charges are brought	in any jurisdiction; or has any ou	vner been convicted of a fe	elony within
ny owner currently incar o any owner currently subj five years? No cose type of business usin construction co	ecrated or on any form of supe ect to an indictment, criminal i ng one of the below general cat nes ne of the Governor's executive	e orders, please indica:	ther means by which there is the state of	formal criminal iness was not su	charges are brought bipect to any of the G	in any jurisdiction; or has any ou	wher been convicted of a fe	elony within
ny owner currently incar o any owner currently subj five years? No cose type of business usir construction splanation of Business We build Midrange hom business was subject to o No No as any owner been exclud	ecrated or on any form of supe ect to an indictment, criminal i ng one of the below general cat nes ne of the Governor's executive	e orders, please indica te or federal program?	ther means by which 1	formal criminal ness was not su If Yes, explain	charges are brought	in any jurisdiction; or has any ov	vner been convicted of a fe	elony within
ny owner currently incar o any owner currently subj five years? No bose type of business usin Construction co	ecrated or on any form of supe ect to an indictment, criminal i ng one of the below general cat ne of the Governor's executive led or suspended from any stat	e orders, please indica te or federal program?	ther means by which i ther means by which i	formal criminal	charges are brought bipiect to any of the G	in any jurisdiction; or has any ou	vner been convicted of a fe	elony within
ny owner currently incar any owner currently subj five years? No cose type of business usir construction splanation of Business We build Midrange hom business was subject to o Not Applicable No as any owner been exclud No he owner's gross revenue	ecrated or on any form of supe ect to an indictment, criminal i ng one of the below general cat ne of the Governor's executive led or suspended from any stat	e orders, please indication te or federal program?	ther means by which i	formal criminal iness was not su If Yes, explain If Yes, explain	charges are brought bipect to any of the G	in any jurisdiction; or has any ov	vner been convicted of a fe	elony within
ny owner currently incar any owner currently subj five years? No bose type of business usir Construction iplanation of Business We build Midrange hom business was subject to o Not Applicable No as any owner been exclud No he owner's gross revenue o	ecrated or on any form of supe ect to an indictment, criminal i ng one of the below general cat ne of the Governor's executive led or suspended from any stat eled or suspended from any stat	e orders, please indica te or federal program?	stype below. If busi	formal criminal ness was not su If Yes, explain If Yes, explain	charges are brought charges are brought	in any jurisdiction; or has any or	vner been convicted of a fe	
ny owner currently incar o any owner currently subj five years? No bose type of business usin construction (planation of Business We build Midrange hom business was subject to o Not Applicable Samy owner been exclud No as any owner been exclud No Pe owner's gross revenue D	ecrated or on any form of supe ect to an indictment, criminal i ng one of the below general cat ne of the Governor's executive led or suspended from any stat !less than \$350,000?	e orders, please indicat	ther means by which i	formal criminal	charges are brought charges are brought bipect to any of the G charges are brought	in any jurisdiction; or has any ou	vner been convicted of a fe	

Once satisfied you can click the "X" on the error message to close and click "Save" again.

				L	ast Name				
				_					- 1
Gender				F	Percent Owners	ship			
None				•					
s owner a US Citizen?				1	s the owner a ve	eteran?			
None					None				•
Does this owner own n	nultiple businesses appl	the grant program?		•	Which of the foll	lowing best identifies your r	acial/ethnic identity?		v
Create Owner									
Create Owner First Name	Last Name	Percent	Ge	nder	(Citizen	Veteran	Race	

11. Section III — Funding and Eligibility	11 III. Funding and Eligibility Inform
5 5	*How many permanent, full- or part-time employees (those issued a W-2) did the business employ on March 1, 2020?
Information for these fields	
will be taken from your	*Was your business closed, partially closed, or required to reduce capacity due to the COVID-19 pandemic public health emergency?
"Minority and Small	None
Business Relief Grant	Explain for which months and for how long?
Program Calculation	
Worksheet."	
	Was the business in operation on September 13, 2019?
If you have not completed	None
the worksheet, click here to	*Actual Gross Revenue (Mar 1, 2019 - Dec 1, 2019)
download a copy. Complete	Enter value from calculation worksheet
the worksheet before	*Actual Gross Revenue (Mar 1, 2020 - Sep 30, 2020)
proceeding with Section III.	
A. Click the blue "Save"	Enter value from calculation worksheet
button at the bottom	*Projected Gross Revenue (Oct 1, 2020 - Dec 1, 2020)
of the section. If a red	
error message occurs,	Enter value from calculation worksheet
you will need to return	*Actual Qualifying Expenditures (Mar 1, 2020 - Sep 30, 2020):
to the section and	Futer value from calculation worksheet
complete the needed	*Drainstad Qualifying Evanditures (Oct 1 2020, Dec 1 2020);
field(s). Once satisfied	
you can click the "X"	Enter value from calculation worksheet
on the error message	*Maximum Grant amount for which your Business may be eligible (Enter Total Request Value from Calculation Worksheet). Final grant amo
to close and click	between \$2,500 and \$25,000
"Save" again.	Enter value from calculation worksheet
-	

11 III. Funding and Eligibility Information
nt, full- or part-time employees (those issued a W-2) did the business employ on March 1, 2020?
losed, partially closed, or required to reduce capacity due to the COVID-19 pandemic public health emergency?
nths and for how long?
peration on September 13, 2019?
•
ue (Mar 1, 2019 - Dec 1, 2019)
ulation worksheet
ue (Mar 1, 2020 - Sep 30, 2020)
ulation worksheet
enue (Oct 1, 2020 - Dec 1, 2020)
ulation worksheet
penditures (Mar 1, 2020 - Sep 30, 2020):
ulation worksheet
Expenditures (Oct 1, 2020 - Dec 1, 2020):
ulation worksheet
ount for which your Business may be eligible (Enter Total Request Value from Calculation Worksheet). Final grant amounts will be determined by the evaluation panel. Grant award amounts will be
ulation worksheet



12. Section IV — Additional Aid	12 IV. Additional Aid
Complete the three questions. A. Click the blue " Save " button at the bottom of the section. If a red error message occurs, you will need to return to the section and complete the needed field(s). Once satisfied you can click the "X" on the error message to close and click "Save" again.	Federal COVID-19-related assistance includes, but is not limited to, amounts received under any of the following: Approxe: Provestion Program (PEPP) from SBA: Accelerated and Advance Payment: Program (rom HHS/OK): Accelerated and Advance Payment: Program (rom HHS/OK): Families First Connavirus Response Act accredits for required paid leave by small and midsize businesses; ARES Act employee retention tax credits for resulted paid leave by small and midsize businesses; CARES Act assistance for non-profits from the National Endowment for the Arts; or Hild spyments to health care providers and facilities for testing and treatment of uninsured individuals. *Individuals received any Federal, State or other grants or loans to assist with business interruption du *Did your business receive ArivY funding under the Paycheck Protection Program (PPP)? No *Did your business receive ArivY funding under the Paycheck Protection Program (PPP)? No *Did your business receive ArivY funding under the Paycheck Protection Program (PPP)? If yes to either of the prior two questions, Explain type of assistance and funding amount(s): Tree to either of YES Above Care Care Saro
13. Section V — Attachments	13 V. Attachments Attachments are needed to prove and verify certain claims made in the application. Each needed attachment has a justification behind it. Applications lacking correct documentation or missing information may be deemed incomplete and ineligible for funding. To upload all required documents use the Files upload at the bottom of your application home page. Once you have uploaded all the required documents, you will need to acknowledge completion in
Documents listed in this section will need to be uploaded to the website under "Files" to complete your application. Make note of the needed documents.	Required Documents Minority and Small Business Relief Program Eligible Grant Amount Calculation Form Documentation of registered business: *W-9 Government Issued ID (Driver's License, Passport, or other Government issued ID) for business owner(s) with 20% or more ownership
A. Click CANCEL in the white box at the bottom of the section to see the "Files" upload tool.	Documentation of business operations: *Copy of Business License, Sales Tax License, County Business Registration, Secretary of State Registration, or Schedule C (if a sole proprietorship) Documentation to validate priority for grant distribution: Proof of Citizenship (if Minority Business Enterprise) for each owner to show 51% ownership *Documentation of Qualifying Expenditures (below are examples of documents to be provided, please only attach the documents that are relevant to your application.) For Revenue Loss (Section 3 of application worksheet): • 2019 tax filings and 2020 tax filings (if available) and one (1) of the following: • Profit/Loss Statement Ledger • Schedule C • Schedule C

- Bank Statement
- Tax Returns
- Quarterly Sales Tax Return
- Certified Accountants Statements

For Qualifying Expenditures (only submit documentation for those requested in Section 4 of application worksheet):

- Certified Payroll Records
- Activity log/description of work done by employees
- Invoices(s)/receipt(s) of purchase
- Contract(s) and/or purchase order(s)
- Fixed Cost Documentation
- Rent, lease or mortgage statements for real property (not to include personal residence)
- Rent, lease or purchase statement for business property (not to include personal residence)
- Utility bill(s) (not to include utilities for personal residence)

	Documentation required by state to pay applicant if grant funds are awarded:	
--	--	--

*Electronic Payment Enrollment Form

*Grant Agreement	nt
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heet

Calculation Spreads	*Cal	cul	ation	Spr	read	sŀ
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21	an	IC /	٩gr	ee	me	nτ

	A
Cancel	Save

7

16. To upload the required documentation, click on "Add Files" in the "Files" section.	I. Identifying Information II. Ownership Information III. Funding and Eligibility Information IV. Additional Aid V. Attachments Acknowledgement V. Agreements and Signatures Submit To upload all required documents use the Files upload below. Once you have uploaded all the required documents, you will need to acknowledge completion by completing the acknowledgement section VI. Attachments above.
	E Files (1)
	Title Owner Last Modified Size
17. Click on " Upload Files."	17 Select Files
	▲ Upload Files
	Owned by Me You don't have any files here. Try a different filter, or upload a file.
	Shared with Me
	Following
	0 of 10 files selected Cancel Add
18. Select the file(s) you want to upload.	 > This PC > Documents > Test v folder
19. Click on " Open " <u>or</u> double click on the file name. You can also select multiple files at once to upload.	Intrin Name Status Date modified Type Size Size Size O 10/11/2020 1:10 PM Microsoft Word Doc
20. Once the file has successfully uploaded, click on " Done ." Repeat the upload steps to upload all the required documents.	Upload Files

21. Click on Section VI — Attachments and Acknowledgements.		Home	Applications	Θ			
	SMALL BUSINESS APPLICATION						
	Application Number Application Sta SA-0490 New	atus	Application Created Date 7/26/2020, 8:58 PM				
	I. Identifying In	oformation					
	II. Ownership Ir	nformation					
	III. Funding and Eligib	bility Information					
	IV. Addition	nal Aid					
	V. Attachments Ack	nowledgement					
	VI. Agreements ar	nd Signatures					
	Subm	lit .					
22. Complete the section	22 V. Attac	chments					
support documents have been uploaded to your application.	Attachments are needed to prove and verify certain claims made in the application. Each needed attach may be deemed incomplete and ineligible for funding. To upload all required documents use the Files upload at the bottom of your application home page. O this section by checking the checkboxes. Required D Minority and Small Business Relief Program Eligible Grant Amount Calculation Form	ment has a justification behind it. Applica Once you have uploaded all the required OCCUMENTS	tions lacking correct documentation or mi	ssing information			
Certify by clicking the check box below each document. A. Click the blue " Save "	Documentation of registered business: *W-9 Government Issued ID (Driver's License, Passport, or other Government issued ID) for business owner(s) wit	th 20% or more ownership					
button at the bottom of the section. If a red error message occurs,	Documentation of business operations: *Copy of Business License, Sales Tax License, County Business Registration, Secretary of State Registration, or Schedule C (if a sole proprietorship)						
you will need to return to the section and complete the needed	Documentation to validate priority for grant distribution: Proof of Citizenship (if Minority Business Enterprise) for each owner to show 51% ownership						
field(s). Once satisfied you can click the "X" on the error message	 Documentation of Qualifying Expenditures (below are examples of documents to be provided; please only at For Revenue Loss (Section 3 of application worksheet): 2019 tax filings and 2020 tax filings (if available) and one (1) of the following: Profit/Loss Statement Ledger Schedule C 	ttach the documents that are relevant to you	ur application.)				

to close and click "Save" again.

- Form 940 or 941
- Bank Statement
- Tax Returns
- Quarterly Sales Tax Return
- Certified Accountants Statements

For Qualifying Expenditures (only submit documentation for those requested in Section 4 of application worksheet):

- Certified Payroll Records
- Activity log/description of work done by employees
- Invoices(s)/receipt(s) of purchase
- Contract(s) and/or purchase order(s)
- Fixed Cost Documentation
- Rent, lease or mortgage statements for real property (not to include personal residence)
- Rent, lease or purchase statement for business property (not to include personal residence)
 Utility bill(s) (not to include utilities for personal residence)

Documentation required by state to pay a	applicant if grant funds are awarded:
--	---------------------------------------

*Electronic Payment Enrollment Form	n		
*Grant Agreement			
*Calculation Spreadsheet			

A

Cancel Save



25. Once all sections have been completed (all are 0 Home Applications green), and all required documents have been uploaded, click on the blue SMALL BUSINESS APPLICATION "Submit" button under all the sections to submit your **Application Status** Application Created Date Application Number SA-0490 7/26/2020, 8:58 PM application. I. Identifying Information II. Ownership Information III. Funding and Eligibility Information IV. Additional Aid V. Attachments Acknowledgement VI. Agreements and Signatures 25 Submit To upload all required documents use the Files upload below. Once you have uploaded all the required documents, you will need to acknowledge completion by completing the acknowledgement section VI. Attachments above. Files (1) Add Files Title Owner Last Modified Size 26 Hello Your Name, 26. Once you submit your application, you will receive Thank you for submitting your application to the South Carolina an email confirmation from M inority and Small Business Relief Program/Nonprofit Relief Program. SC Grants. Your application will be reviewed, and our review team will contact you if additional information or clarification is required. You can monitor the status of your application by logging in with the credentials used to submit your application. Please visit https://accelerate.sc.gov/cares-act/applying-sc-cares-actfunds for relevant information including frequently asked questions,

training videos, and any other important announcements and status updates.

If you have any additional questions, you can reach our call center at: (803) 670-5170 (available from 8:30AM – 5PM Eastem) or email us at <u>SCC ares@admin.sc.gov</u>

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Thank you! SC Cares

27. If you exit your application prior to submitting, you can log back into the portal (<u>https://sccares.force.com/S</u> <u>mallBusiness</u>) and continue your application.

Log in and click on the "**Applications**" tab at the top of the page. NOTE: **Do not** click on the blue "Minority and Small Business Relief Program" button at the bottom of the screen.

You can also follow these steps to check your application status once it has been submitted.

28. Once you click on the "Applications" tab at the top of the page, your application(s) will be listed.

To open and view an application, click on the ID number (SA-0000).



29. If your "Application Status" is set to "New," you can make updates to your application sections and submit the application.



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