Business Owner/Applicant Information

1. Business Owner's Legal Name*
2. What name do you prefer to be called?*
3. Business Owner Cell Phone Number*
4. Please Confirm Business Owner Phone Number*
5. Business Owner Email*
6. Please Confirm Business Owner Email*
   a. Please use an email that you will check for updates. This is where you will be notified if you are a finalist or grant winner.
7. Business Owner Gender*
8. Business Owner's Date of Birth*
9. Please upload a photo of the business owner(s) with their storefront. *
   a. By uploading a photo and submitting your application, you acknowledge that this photo can be used for promotional material by National ACE if selected as a grant recipient.
10. Business Owner's Ethnicity*
11. Are you a U.S. veteran?*
12. Are you completing this application on behalf of the business owner?*
    a. If you are completing the application on behalf of the business owner, please provide your first and last name.*
    b. What is your relation to the business or business owner?*
    c. What is your email?*
       i. Note: Please use an email that you will check for updates. This is where you will be notified if you are a finalist or grant winner.
    d. What is your cell phone number?*

Business Information

1. Business Legal Name *
2. Business Name (DBA/Storefront Name/Operating Name)*
3. Business Street Address*
4. Business City*
5. Business State*
6. Zip Code*
7. What percent of the business do you own?*
8. Does your business have a website?*

a. Business Website/URL
9. Do you have social media accounts for your business?*
   a. If applicable, please list your social handles here.
10. When did you start your business?*
    a. If you don't remember the exact date, that's ok. We are focused on the month and year.
11. Please upload a copy of your state or local business license.*
12. What is your gross revenue for 2023?
    a. Less than $250k
    b. $250k-$500k
    c. $500k-$1M
    d. $1M-$5M
    e. $5M+
13. Please provide documentation for the most recent 12 months of business revenue. We will accept tax filings as submitted to the IRS and/or an income statement from your accountant or accounting software system.*
    a. Acceptable Documents include: 2023 Profit and Loss Statements, 2023 Tax Filings, Most recent fiscal year Profit and Loss Statement (ex. April 2023 to March 2024)
14. Is your restaurant a MBE (minority business enterprise)-certified business?*
15. Number of full-time employees, not including the owner(s)*
16. Number of part-time employees*
17. What is the legal form of your business?*
    a. Please upload your certificate of good standing.*
18. In which state is your business formally registered?*
19. Do you offer delivery services for your restaurant?*
    a. Which delivery service providers do you use?*
    b. Why do you not offer a delivery service?*
20. Is food delivery a big part of your business?*
21. Do you see food delivery becoming a bigger part of your business in the future?*

Tell Us About Your Business

The following questions are intended to help us better understand your motivation for starting your business and your aspirations.

1. Please describe your business. Tell us about what you offer, your customers, why you started your business, what makes your business unique. Use this space to tell your personal story*
2. What are your goals or aspirations for your business?*
3. Describe the role your business plays in your community. How does your business give back or engage with the community?*
4. How will you use this grant to help your business?*
5. How do you plan to use the award and how would the award help your business, if selected?*
6. Is there anything else you would like us to know about your business?

Data Questionnaire

The following questions are for National ACE to better understand the current conditions of the AAPI business community. Your answer to these questions will not affect your grant application.

1. Do you think it's a good time to be a restaurant owner?
2. Do you have plans to expand or reduce operations for your business in the next 12 months?
3. How confident are you in your ability to achieve all of your business objectives?
4. What are the biggest barriers to you growing your business and operations?
    a. limited or inconsistent cash flow
    b. insufficient capital (bank loans, friends/family, personal savings, SBA-backed loans, private equity, etc.)
    c. lack of a relationship with a financial institution
    d. tax compliance
    e. lack of a rainy day fund
    f. unable to find workers
    g. slow foot traffic
    h. lack of digital presence
    i. lack of high quality, affordable broadband access
    j. unaware of resources available
    k. language Barriers
    l. none of the above
    m. Other
5. What is your main source of capital for either starting, retaining, or scaling your business?
    a. Personal funds
    b. Family and friends

  c. Loans and credit from traditional financial institutions

  d. Loans and credit from local, community-based financial institutions

  e. Venture capital

  f. Government grants

  g. Non-governmental grants

  h. Crowdfunding

  i. Other

6. How often do you utilize the following digital tools for your business operations?

  a. E-Commerce Platforms (Squarespace, BentoBox, etc.)*

  b. Restaurant Website*

  c. Contactless / Tap Payments*

  d. Social Media*

  e. Artificial Intelligence*

  f. Email Marketing*

  g. Accounting and Invoicing*

  h. Chat and Collaboration (Slack, Google Drive, Salesforce, etc.)*

7. What is the status of your ability to provide the following benefits to your employees?

  a. Health Insurance

  b. Dental Insurance

  c. Life Insurance

  d. Paid Time-Off for Vacation and Sick Days

  e. Paid Parental Leave

  f. Family and Medical Leave

  g. Retirement Plans

How did you learn about this grant opportunity?*

National ACE

Referred by an organization

Referred by another business owner

Saw a post on social media

Other

By submitting this application you acknowledge that you will be added to the mailing list of National ACE, from which you can unsubscribe at any time.*

By checking this box you acknowledge and accept our waiver, hold harmless and release statements: The grant applicant acknowledges that the ACTIVITY of completing the grant application does not guarantee being awarded the grant. The grant applicant hereby waives

any and all claims against National ACE and ACE Foundation, its board of directors, officers and employees including its independent contractors, donors, business affiliates/partners, agents or insurers, its board of directors, officers and employees including its independent contractors, donors, business affiliates/partners, agents or insurers ("Released Parties") from any and all claims which may arise from participation in this ACTIVITY. This is regardless of whether or not caused in whole or part by the negligence of the Released Parties. The grant applicant releases and forever discharges the Released Parties from all such claims. The grant applicant agrees to indemnify and hold the Released Parties harmless from all losses, liabilities, damages, costs or expenses (including but not limited to reasonable attorneys' fees and other litigation costs and expenses) incurred by any of the Released Parties as a result of any claims or suits that the grant applicant (or anyone claiming by, under or through the grant applicant) may bring against any of the Released Parties to recover any losses, liabilities, costs, damages, or expenses which may arise during or result from the participation in this ACTIVITY, regardless of whether or not caused in whole or in part by the negligence or other fault of any of the Released Parties. The applicable laws of the District of Columbia shall govern this Agreement. The grant applicant has carefully read and reviewed this Waiver, Release and Hold Harmless Agreement. The grant applicant understands it fully and executes it voluntarily.