

## Veteran Circle Small Business Grant 2020

The Veteran Circle will be awarding 6 - \$750 Small Business Grants for 2020. These Grants will be open to all members of the Veteran Circle program with a \*qualifying small business

To apply please send the following to membership@saluteheroes.org

- Signed Media Release form (Attached)
- Completed Application
- Photograph of Veteran
- Completed W9 Form (See Irs.gov or last page of this application)
- Any additional information you would like to submit in support of your application

**\*Qualifying Business**

- May not be a Multi-Level Marketing business
- May only receive the VC Grant one time.
- Must be at least 50% owned by qualifying veteran
- Must have been established for at least 1 year at the time of application

Grants May not be used for

- Employee Bonus
- Franchise Fees

**\*\***Recipients of the grants will be notified via email. Please include a valid Email address, Telephone number and up to date mailing address in your bio so that we can contact you.

**\*\*\***Photographs and Biographical information or parts of will be made available to **The Coalition to Salute America's Heroes** for future publications and media releases, including mail outs, email, newsletters and the Saluteheroes.org Website.

*For Office and committee Use only*

<i>For Office and committee Use only</i>		
<i>Committee Members:</i>	<i>Committee meet date:</i>	
Verified Member of VC program? <input type="checkbox"/> Yes <input type="checkbox"/> No	Veterans Name:	Veterans Contact Information:
<b>If Required - Supporting Membership Documents: <input type="checkbox"/> DD214 <input type="checkbox"/> VA breakdown letter <input type="checkbox"/> DOD documentation</b>		
Documents Received: <input type="checkbox"/> Completed Application <input type="checkbox"/> Completed Media Release form <input type="checkbox"/> Completed W9 <input type="checkbox"/> Photograph		
Committee decision: <input type="checkbox"/> Granted <input type="checkbox"/> Not Granted <input type="checkbox"/> More Documentation required	If applicable reason for Denial:	Follow up communication sent date: ___/___/___
Check Issued: ___/___/___	Check Mailed/Presented ___/___/___	



# Application for Small Business Grant



Application			
<b>Applicant Full Name:</b>	<b>Legal Name of Business:</b>		
<b>Mailing Address:</b>	<b>Physical Address:</b>	<b>Phone Number:</b>	<b>Email Address:</b>
<b>Website:</b>		<b>Federal ID Number:</b>	
<b>Founding Date of Business:</b>	<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Cooperative <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Other		
<b>No. of Employees</b> Full Time:                      Part Time:	<b>Revenue: \$</b>	<b>Salaries: \$</b>	
<b>Seasonal:</b>	<b>Total Expenses: \$</b>		
<b>Brief Business Description and goals</b>			
<b>Geographic Area Served:</b>		<b>Would you like to be matched with a Small Business volunteer mentor should one be available?</b>	
<b>Please share how a one-time small business grant of \$750 could assist your business meet its goals:</b>			
<b>How has your previous Military Service assisted you in the start up of your small business?</b>			
<b>If given the opportunity how would/are you giving back to the Veteran community through your business?</b>			



# Coalition to Salute America's Heroes

## Small Business Grant Media Release

*Your comments will serve to thank the many thousands of Americans who give to the Coalition in support of our troops wounded in Afghanistan and Iraq. Your comments may inspire additional supports, as well as inform current supporters how they have helped make a difference in the lives of our nation's brave and injured service men and women. Thank you for sharing your story.*

**I Hereby give the Coalition to Salute America's Heroes Foundation permission to publish my name, my business name, the names of my family members participating in the interview or listed in the testimonial or application and photos (if taken or provided) in their press materials, video and written stories, collateral material, website content, advertising material, newsletters, direct mail and fundraising materials, e-mails, public service announcements, and any other of its public awareness campaigns.**

Members Name:

Rank:

Branch:

Phone:

Email:

Address:

City:

State:

Zip:

Are you:  Active Duty  Retired  Reserves

If active duty please provide expected date of release: \_\_\_\_/\_\_\_\_/\_\_\_\_

*Please provide the names of family members included in your application, testimonial or photos – Including spouse/significant other, children, parents or other family*

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Printed Name of Veteran: \_\_\_\_\_

Veterans Signature:

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Please return this form and any documentation to:  
**membership@saluteheroes.org**

## Request for Taxpayer Identification Number and Certification

**Give Form to the  
requester. Do not  
send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	<p><b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.</p> <p><b>2</b> Business name/disregarded entity name, if different from above</p> <p><b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor or single-member LLC     <input type="checkbox"/> C Corporation     <input type="checkbox"/> S Corporation     <input type="checkbox"/> Partnership     <input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____</p> <p style="font-size: x-small;"><b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</p> <p><input type="checkbox"/> Other (see instructions) ▶ _____</p>	<p><b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p style="font-size: x-small;">(Applies to accounts maintained outside the U.S.)</p>
	<p><b>5</b> Address (number, street, and apt. or suite no.) See instructions.</p> <p><b>6</b> City, state, and ZIP code</p> <p><b>7</b> List account number(s) here (optional)</p>	<p>Requestor's name and address (optional)</p>

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
-					-				
or									
Employer identification number									
-					-				

### Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

**Sign Here**

Signature of U.S. person ▶

Date ▶

### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*