

# Request for FY 2025 Grant Proposals Small Business Technical Assistance Grant Program

Address:	Massachusetts Growth Capital Corporation 529 Main Street, Schrafft's Center, Suite 201 Charlestown, MA 02129
RFP File Name:	Small Business Technical Assistance Grant Program
Contact Person:	Ari Veloz, <u>aveloz@massgcc.com</u>

Please submit all questions and inquiries via email to the contact person listed above.

# Schedule:

RFP Release Date:	Monday, September 23 <sup>th</sup> , 2024
Deadline for Proposals:	Friday, October 25 <sup>th</sup> , 2024
	Monday, September 30 <sup>th</sup> @10am (FY24 Awardees)
Information Sessions:	
	Monday, September 30 <sup>th</sup> @2pm (FY24 Awardees)
	Friday, October 4 <sup>th</sup> @ 2pm (New Applicants)
	Friday, October 4 <sup>th</sup> @10am (New Applicants)
Applicat	tion via: Submittable Platform accessible on
	www.empoweringsmallbusiness.org
Grants will be	
awarded:	November-December (subject to change)

Information about this RFP will be posted on <u>www.empoweringsmallbusiness.org.</u> Notices will be sent via email to past and current program awardees, State Representatives, and MACDC's members.

# Request for FY 2025 Grant Proposals Massachusetts Growth Capital Corporation Small Business Technical Assistance Grant Program

## ANNOUNCEMENT

The Massachusetts Growth Capital Corporation (MGCC) is pleased to announce that it is accepting grant applications for participation in the Small Business Technical Assistance (SBTA) Grant Program for the Fiscal Year 2025 (July 2024-June 2025). MGCC is seeking proposals for technical assistance to underserved small businesses in Massachusetts. MGCC will accept applications from **not-for-profit organizations** that currently provide technical assistance and training programs to Massachusetts-based small businesses and start-ups under 20 employees.

# Awardees will coordinate with the Commonwealth's upcoming "Business Front Door" process, streamlining resources for Massachusetts-based businesses.

# FY25 PROGRAM UPDATE: STREAMLINED PROCESS FOR QUALIFYING FY24 AWARDEES

For FY25, the SBTA Grant Program will include a streamlined application process for qualifying FY24 Awardees. The streamlined process allows qualifying FY24 Awardees to complete a shortened application and recertification certain components of the FY24 application and Work Plan rather than submitting a traditional full application. Qualifying FY24 Awardees must continue to provide services as approved under the FY24 Work Plan. The streamlined process will continue to include a narrative section, a proposed FY25 budget, proposed FY25 outcomes, and data tracking and reporting. The streamlined process will expedite application review, contracting and award for eligible FY24 Awardees.

The FY25 Application process will be streamlined for organizations meeting all 3 eligibility requirements below:

- 1) Applicants awarded a grant through the FY24 SBTA Grant Program;
- 2) Applicants who have met or exceeded performance measures and satisfied all reporting and financial obligations; and
- 3) Applicant **not** making changes to their FY24 approved application type (individual or joint application). If there is a change in the FY24 Awardee's application type, a full application is required.

Streamlined applications continue to require detailed narrative and data on performance measures in both the SBTA Grant Program application and SBTA Grant Program reports. Past performance and achievement of performance measures, including support of certain business owners, locations and activities, demographics or multilingual specialties and other SBTA Grant

Program initiatives may be considered in determination of FY26 and future grant award amounts.

# **APPLICATION TYPES:**

# > FY24 Program Awardees

- 1. Must be submitted via Submittable midnight by **October 25, 2024.**
- 2. Completed all recertification components
  - a. FY24 final program report submitted
  - b. Work plan and other recertifications
  - c. Summary of continuation of services
  - d. Upload updated documents as applicable

# > New Applicants (Not FY24 Awardee)

- 1. Must submit a full application via Submittable midnight by October 25, 2024.
- 2. Completed all application components
  - a. Narrative questions (1-7)
  - b. Upload all documents identified (8-16)

# **PURPOSE OF GRANT**

The purpose of the SBTA Grant Program is to ensure that start-ups and existing businesses continue their path towards recovery to ensure future economic and entrepreneurial opportunity throughout the Commonwealth. The program seeks to facilitate economic stability and viability for small businesses by helping to improve their ability to navigate business operations, including ability to secure private and public financing, business grants, and microloans. The program is designed to complement and enhance traditional public and private small business assistance networks by providing technical assistance or training programs for under-resourced and disadvantaged businesses with 20 or fewer employees.

These grants are intended to supplement the organization's current and anticipated funding and not to be the primary funding support. If applying organization(s) and any partners currently receives, or will receive, funding from the Commonwealth of Massachusetts for its small business assistance program, articulate how those funds are being used and how funding from the SBTA Grant Program will not be duplicative and describe the incremental results this grant will produce.

# **ELIGIBLE APPLICANTS AND PROGRAMS**

Eligible applicants must have an established small business services program which provides one-on-one technical assistance, cohort-based technical assistance, and training programs to small businesses with 20 or fewer employees. Applicants must be one of the following types of community-based organizations:

- Community Development Corporations (CDCs) certified under chapter 40H of the General Laws;
- 2) Community Development Financial Institutions (CDFIs) certified by the United States Department of the Treasury; or
- 3) Non-profit community-based organizations.

Grant funds are not intended to provide services geared toward prospective ventures. At least 85% of the clients served by the awardee organization with these funds shall be for clients who are already operating an existing business or who are within twelve months of opening a new business. Counseling and training programs should be designed to aid small business owners in stabilizing and growing their businesses in measurable ways through intensive individual counseling/coaching, selective group training, loan packaging, and direct lending or loan guarantees.

Grant proposals should define the communities they serve, the strategy and marketing plan to reach these communities, current and planned programs, and performance benchmarks and metrics. Grant proposals shall identify specific counseling and training programs that assist these small businesses to:

- Prepare financial statements and secure new or increased financing for growth.
- Make a business plan to achieve stability and viability.
- Support the fundamental operations of forming a business
- Support businesses Biz-M-Power platform (MGCC Program)

Priority considerations will be given to proposed programs that:

- Are designed to support small business clients from predominantly socially and economically disadvantaged and historically underrepresented groups, including, minority-owned, women-owned, LGBTQ+-owned, non-native English speaking-owners, small businesses operating in gateway cities, rural communities, low-moderate-income individuals, US Military Veterans, operating as cooperatives, disabled individuals, and/or and those servicing underserved markets.
- Demonstrate **direct high touch interactions** which advance:
  - New business startups
  - Business expansion

- Business stabilization
- Increased access to financing
- Other proposed measurable economic growth

**High touch interactions** are defined as 1) one-on-one or 2) cohort-based technical assistance with supplementary training workshops.

• Offer multilingual program support, especially Spanish.

# **GRANT AMOUNTS AND DISTRIBUTION**

MGCC will endeavor to assure broad geographic diversity among awardees but will not limit the number of grants awarded per region. Awards for single organization proposals will not exceed \$100,000. Awards for joint proposals (2+ non-profit organizations) will not exceed \$175,000.

# ELIGIBILITY

For purposes of the SBTA Grant Program and this Request for Proposal (RFP), only Massachusetts-based, not-for-profit corporations are eligible for program participation. For the purposes of this program, the entity shall:

- 1) Be duly organized under Massachusetts General Laws, Chapter 180 and incorporated as such by the Secretary of State for the Commonwealth of Massachusetts, whose mission includes facilitating a community driven economic development process for small businesses.
- 2) Hold a tax-exempt status under the United States Internal Revenue Code.
- 3) If the applicant cannot meet the first two criteria, then it must have an established fiduciary relationship with an organization that is both incorporated in the Commonwealth of Massachusetts and maintains a tax-exempt status under the United States Internal Revenue Code. Under those circumstances where a fiduciary relationship is in force, a memorandum of agreement signed and dated by the authorized representatives of the two cooperating agencies attesting to the fiduciary relationship, along with copies of the sponsoring organization's tax-exempt certificate and Certificate of Good Standing from the Massachusetts Secretary of State must be submitted with the applicant's proposal.
- 4) Demonstrate an ability to develop and manage programs as reflected in the effective functioning of the Board of Directors, operations managed by a fulltime and experienced management team, involvement of and responsiveness to community residents and constituents.
- 5) Provide evidence of fiscal stability, as documented in prepared financial statements.

# **INELIGIBLE ACTIVITIES**

The SBTA Grant Program will not fund projects or activities that are:

- Resulting in the private profit or benefit of an individual or a select group of individuals.
- Activities primarily intended to serve prospective business ventures, defined as individuals who are more than twelve months from beginning to operate a business.
- Not able to produce measurable status outcomes relating to business stabilization and growth.

MGCC reserves the right to reject any and all submitted proposals and any or all parts of a proposed activity.

## **GRANT AGREEMENT**

All proposals become public documents, to the extent required under the public records law. If a proposal is approved for funding, the proposal and the attached work plan and budget shall become the basis for grant award determinations including the precise project scope, budget and use of funds enumerated in any Grant Agreement.

Grant Agreements will contain a requirement that Awardees release names and contact information of clients served for the purposes of outcome verification. Awardees also agree to cooperate with any third-party evaluation that MGCC may decide to undertake of this program. Reporting requirements and deadlines will be contained in the Grant Agreement.

# USE OF FUNDS – LIMITATION OF ADMINISTRATION COSTS

Administrative costs associated with the SBTA Grant Program may not exceed 10% of the proposed budget.

# **SELECTION CRITERIA**

A Review Committee will confirm applicant and project eligibility and evaluate proposals seeking those that most completely meet the established criteria.

Applications must demonstrate the ability to meet the following small business assistance priorities in order to receive funding:

- 1) Provide a strategy for addressing small business needs in your target market.
- 2) Provide a minimum of 5 hours of direct services to small business clients from target populations.

- 3) Implement coordinated services that magnify the delivery of services in efficient, economical, and effective ways. Preference will be given to agencies that can demonstrate strong collaborations with micro-lenders or whose funding will support micro-loan fund clients.
- 4) Enhance and complement government service providers, such as the Small Business Development Centers.
- 5) Collect and report on specific outcomes achieved that can be attributed to services provided in terms of business starts, financing made or facilitated, businesses stabilized, jobs created or retained, and/or revenue growth.

# SCORING MATRIX

CRITE	RIA		<u>Maximum</u>
			<u>Points</u>
1.	Mission & Services alignment		10
2.	Community Knowledge		10
3.	Experience & Capacity		10
4.	Proposed Program		20
5.	Client Engagement		15
6.	Work plan Integration		15
7.	Budget Alignment		10
8.	Credible Outcomes		10
9.	Multilingual Services		10
		Total points	110

# **PROGRAM REPORTING**

MGCC will require a mid-year and final report on performance, demographic, and outcome data. See Appendix B to the Application. All reports and files must be submitted through Submittable.

Mid-year and final reports will include the following elements (subject to modification):

• Narrative that references proposal Workplan and answers: What worked well, what did you learn, and what were the challenges in providing assistance to your small business clients and achieving your goals?

- Description of methodology used for verifying outcome data, including which indicators were used to validate business start-up, stabilization, growth, job creation and retention, and how follow-up was conducted (phone, internet, face to face; survey, interview, document verification, etc.)
- Changes in key staff or organizational changes that impact the small business program during the grant period. (Resumes for key staff to be required)
- Description of partnerships developed with other organizations (i.e. other MGCC awardees, financial institutions, funders, peer-to peer, city programs, etc.) during the grant period.
- List of media attention received or organized events related to this grant. Media refers to: print (newspaper, newsletter, flyers, etc.), TV, radio, social media (Facebook/twitter/LinkedIn).
- Professional development that the business technical assistance provider(s) attend during the grant period.
- Business success story that illustrates a business in start-up, stabilization or growth stage and the economic impact of the provision of technical assistance services. It should include a brief description and relevant history of the business and the business owner, challenge, technical assistance solution and the economic impact.

# SUBMISSION GUIDELINES

Any materials submitted will become the property of MGCC and must be made available for reproduction and may not be copyrighted. Application submissions will be accepted via Submittable Platform accessible on <u>www.empoweringsmallbusiness.org</u>

An application will not be considered if it fails to meet the minimum requirements. The requirements are as follows:

## **APPLICATION TYPE**

# FY24 Program Awardees

- 3. Must be submitted via Submittable mid-night by October 25, 2024.
- 4. Completed all recertification components
  - a. FY24 final program report submitted
  - b. Work Plan and other recertifications
  - c. Summary of continuation of services

d. Upload updated documents as applicable

# > New Applicants

- 3. Must submit a full application via Submittable mid-night by October 24, 2024.
- 4. Completed all application components
  - a. Narrative questions (1-7)
  - b. Upload all documents identified (8-16)



# FY25 PROGRAM APPLICATION: FY24 SBTA AWARDEE

# WORK PLAN RECERTIFICATION

Applicant hereby certifies that it will continue to provide small businesses with the services already approved on the FY24 application.

Applicant Entity Type:

 $\Box$  CDFI

 $\square \ \mathsf{CDC}$ 

□ Non-profit Community-based Organization, explain:

Has your approved program work plan changed?

□ No changes in approved FY24 Work Plan

□Yes, explain:

Changes in the areas below:

□ Changes in our one-on-one technical assistance offerings, explain:

□ Changes in our cohort-based technical assistance offerings, explain:

□ Changes in our training programs, explain:

□ Changes in Application type- Joint vs. Individual

\* note: If there is a change in your application type, you will need to submit a full application.

Has your approved Service Population changed?

□ No

□Yes, explain:

What geographic regions does your Work Plan serve?

- Statewide
- $\square$  Western MA
- Northeast
- □ Greater Boston
- Central MA
- □ Southeast, Cape Cod & Islands
- □ MetroWest

Has your approved outreach strategy changed?

🗆 No

□Yes, explain:

Does your organization help prepare financial statement for small businesses?

□ No

□Yes, explain:

Request Amount:

□ Individual organization application, up to \$100,000

□ Joint application, up to \$175,000

Have all FY24 Grant Funds been expended as outlined in the FY24 Organization Budget Form?

□ No

🗆 Yes

Were more than 10% of the FY24 Grant Funds expended on administrative costs?

□ No

□Yes

# Narrative: Summary of Continuation of Services

- 1. Briefly summarize how you will implement the continuation of your prior year approved work plan.
- 2. List all languages served

# APPLICATION REQUIRED DOCUMENTS FOR FY24 SBTA AWARDEE APPLICANT (UPLOADS)

## **REQUIRED:**

- 1. Proposed Organizational Budget Form for FY25 (See Appendix A)
- 2. FY25 Performance Data & Outcomes Table (See Appendix B)
- 3. 2024 Certificate of Good Standing from the Secretary of the Commonwealth (one for each agency participating in the grant)
- 4. Most recent Audited Financial Statement or Review

# UPDATES, AS APPLICABLE:

- 5. Resumes of key personnel delivering direct service
- 6. Current Board of Directors list
- 7. U.S. IRS Tax Exempt Certification/ Determination Letter
- 8. Memorandum of Understanding from fiscal sponsorship agency

## END: FY25 PROGRAM APPLICATION: FY24 SBTA AWARDEE



## FY25 PROGRAM APPLICATION: NEW APPLICANT

#### New Applicant

My organization will provide at least 5hrs total of services to business owner(s) in order to address identified challenges. When appropriate, business owner(s) may be referred to partners to resolve and/or better position business to thrive.

Check all proposed services that apply:

□ One-on-one technical assistance

- □ Cohort-based technical assistance
- □ Training programs

## **Request Amount**

□ Individual organization application, up to \$100,000

□ Joint application, up to \$175,000

About the joint Applicants:

Check all proposed services that apply:

□ One-on-one technical assistance

- Cohort-based technical assistance
- Training programs

Applicant Entity Type:

 $\Box$  CDFI

 $\Box \ \mathsf{CDC}$ 

□ Non-profit Community-based Organization, explain:

## Does your organization help prepare financial statement for small businesses?

□ No

□Yes

What geographic regions does your Work Plan serve?

- □ Statewide
- $\square$  Western MA
- □ Northeast
- Greater Boston
- Central MA
- □ Southeast, Cape Cod & Islands
- □ MetroWest

## NARRATIVE QUESTIONS

1. Overview

Describe the mission of the applicant organization, the community it serves, and its outreach strategy. Describe the various ways by which the applicant organization first engages clients, triages the services they require, and refers them to other service providers if unable to assist them. Also describe how the applicant organization moves clients forward once they have received all available services.

## 2. Business Community Challenges

Based on the applicant's client profile, describe the issues they face with business development, securing financing and achieving financial viability. Describe the organization's technical assistance role, training and counseling programs, or other initiatives with the small business community that create, maintain, and grow the business's financial viability, ability to obtain private or public financing and/or create jobs.

3. Staff Qualifications

Describe the professional qualifications of the small business assistance professionals on staff and consultants regularly used for client referrals.

## 4. Partnerships and Collaboratives

Detail partnerships and collaborations that support the applicant's program, including but not limited to, how the applicant partners with their regional SBDC and other providers, including legal, accounting, tax professionals, marketing specialists, private and government lenders, and micro-lenders. Please use the Partners Form to provide this information.

Partnering Organization Type	Name of Partnering Organization	Description of Collaboration
Regional Small Business Development Center		
Legal Aid		
Tax Professionals		
Marketing Specialists		
Private Government Lenders		
CDFI or CDCs Lenders		
Municipalities		

## 5. <u>Specific Grant Program & Activities</u>

Describe the proposed program and its related activities. The proposal must include a program description that is reflected in the work plan, and which clearly explains the proposed budget.

Activity	Outcome	Staff involved in this activity from Lead Organization	Staff involved in this activity from Partner organization(s) (joint apps)	Consultant(s) involved in this activity (if applicable)

## 6. Languages

List all languages served.

# 7. <u>Budget</u>

Describe how Small Business Assistance Grant Program funding will be used to support the proposed program. SBTA funds are intended to supplement current and anticipated funding and not to be the primary funding support. If funding from the Commonwealth of Massachusetts will support the proposed program, please articulate how SBTA funding will not be duplicative. *See Appendix A for Organizational Budget Form.* 

8. Data Collection and Outcome Measures Plan

Outline how the applicant expects to define outcomes relating to business start-ups, stabilization and expansion, what indicators will be used to determine outcomes, and the methodology for collecting and reporting on performance, demographic, and outcome data.

• See Appendix B for Performance Data & Outcomes Form.

## **APPLICATION REQUIRED DOCUMENTS (UPLOADS)**

- 8. Proposed Organizational Budget Form (See Appendix A)
- 9. Performance Data & Outcomes Form (See Appendix B)
- 10. Resumes of key personnel delivering direct service
- 11. 2024 Certificate of Good Standing from the Secretary of the Commonwealth (one for each agency participating in the grant)
- 12. Current Board of Directors list
- 13. U.S. IRS Tax Exempt Certification/ Determination Letter
- 14. Most recent Audited Financial Statement or Review
- 15. Current year-to-date organizational Financial Statement: Income & Expense/Balance Sheet
- 16. Memorandum of Understanding from fiscal sponsorship agency (if applicable)

END: FY25 PROGRAM APPLICATION: NEW APPLICANT

# **APPENDICES**

# Appendix A: Organizational Budget Form

Cost Elements (1-4)	Lead Agency Annual Project Budget	MGCC Funding Request		
1. List below Direct Personnel Costs Staff (% of staff time on project)				
Total Staff	\$	\$-		
2. List below Consultants (include pay rate)				
Total Consultants	\$ -	\$		
3. Non-Personnel Cost (Program related materials, supplies,	food, and travel)			
Total Non-Personnel Costs	\$ -	\$		
		Ý		
Total Direct Costs (1+2+3)	\$ -	\$ -		
	Υ	· ·		
4. Administrative Overhead/ Indirect Costs (e.g. utilities, rea	nt, audit, admin staff )			
Utilities, rent, audit, admin staff				
	<u>^</u>	A		
TOTAL PROJECT COST (1+2+3+4)	\$-	\$-		
FUNDING SOURCES/REVENUE ELEMENTS	Lead Agency Amount (\$)	Award Date		
Identified Funding Sources		Award Date		
Projected Fees				
Matching Funds				
Contributions				
Contracts/ Grants (list separately)				
Total Organizational Funding	\$ -			
MGCC Request	\$ -			
TOTAL PROJECTED FUNDING/REVENUE	\$ -			
Funding Gap or Revenue	\$ -			

Appendix B: Performance Data & Outcome Form

Organization Name:	Massachu	setts Growth Capital Corporation
Mid-Year and Final Performance Data & Outcome Report Form	(over short with our	Reporting Template tomated addition and percentage calculations)
How many businesses received technical assistance/ Cohort based technical		tomated addition and percentage calculations)
assistance? (primary grant service) 5hrs+		
THIS REPORT WILL FOCUS ON OUTCOMES ONLY FOR BUSINES	SSES THAT RECEIVED 5 H	RS+ OF TECHNICAL ASSISTANCE
Percentage of businesses that received 5hrs + technical assistance		
What were the business stages of the	0 businesses t	hat received technical assistance?
Prospective business owners (>1 year from starting a business)		%
Pre-Start-Up clients (within 1 year of start-up)		%
Start-Up clients (business operating/generating revenue)		%
Established business clients (is/was profitable and employing at least 1 FTE)		%
You did not count		This number must be 0. You need to count every
	business. If	this number is negative you are overcounting.
You are reporting	0 businesses n	ot in operations (prospective + pre-start-ups).
You are reporting	0 businesses in	n operations (start-ups + established).
What were the outcomes for the	0 businesses t	hat received technical assistance?
Total # new businesses created		%
Total # businesses stabilized		%
Total # businesses that grew/increased revenue as a result of services		%
Total # businesses that didn't experience a positive outcome		%
You did not count		This number must be 0. You need to count every this number is negative you are overcounting.
Job Creation & Preservation		
What were the jobs outcomes for the	0 businesses t	hat received technical assistance?
FTE jobs created as a result of technical assistance		%
FTE jobs preserved as a result of technical assistance (applies to businesses stabilized)		%
Total # FTE jobs created and preserved	0	

Outcomes- Access to Financing & Grants			
What were the financing outcomes for the	0 businesses th	nat received technical assistance?	
# of Direct loans (you are a CDFI or CDC)		%	
# of Indirect loans (loan packaging- you helped a business put their documents togther in order to apply for a loan)		%	
Total # of businesses receiving financing	0		
\$ Value of direct loans		%	
\$ Value of indirect loans		%	
Total value of loans closed	\$0		
\$ Value of smallest loan closed			
\$ Value of largest loan closed			

Target Populations Served			
Gender			
Total # women-owned businesses		%	
Ethnicity			
What were the ethnicities of the	0 businesses th	nat received technical assistance?	
Total # African American-owned businesses		%	
Total # Latino-owned businesses		%	
Total # Asian-owned businesses		%	
Total # Native American-owned businesses		%	
Total # African-owned businesses		%	
Total # Arab-owned businesses		%	
Total # Black/Caribbean-owned businesses		%	
Total # Multiracial-owned businesses		%	
Total # Non-minority businesses		%	
Total # Unknown/other		%	
You did not count		his number must be 0. You need to count every nis number is negative you are overcounting.	
You provided technical assistance to	0 BIPOC busine	esses (Black Indigenous & People of Color)	

% of technical asssiantce provided went to BIPOC businesses.

Gender & BIPOC		
Total # women & BIPOC-owned businesses		#DIV/0!
Total # men & BIPOC-owned businesses		#DIV/0!
You did not count gender for	BIPOC busine	sses. This number must be 0. You need to count

every business overcounting.

BIPOC businesses. This number must be 0. You need to coun every business. If this number is negative you are overcounting.

Other attributes of the	0 businesses th	nat you provided technical assistance to
Total # LGBTQ-owned businesses		%
Total # of immigrants/non-native English speakers		%
Total # US Military Veterans		%
Total # owners that started businesses as a result of being unemployed		%
Total # Low/Moderate income business owners (use HUD guidelines)		%
Total # disabled business owners		%
Total # businesses located in gateway communities		%
Total # businesses located in rural communities		%
Total # businesses located in low/moderate income community (as defined by HMDA/CRA – use: www.ffiec.gov/geocode)		%

Cooperatives		
Total # of businesses structured as Cooperatives		
	% of technical assista	nce services was provided to Cooperatives
Types of Cooperative		
Total # worker-Owned Cooperatives		%
Total # consumer-Owned Cooperatives		%
You did not cou		This number must be 0. You need to count every
	business. If	this number is negative you are overcounting.
Cooperative Ownership		
Total # of worker-owners served		#DIV/0!
Total # of consumer-owners served?		#DIV/0!
Total # of owne	rs 0	
Cooperative Ownership Range		
# of members for smallest cooperative?		
# of members for largest cooperative?		
Conversition Undersonand Communities		
Cooperative Underserved Communities Total # of worker-owners who were women		%
Total # of BIPOC worker-owners		70 %
	% of technical assista	nce services provided to worker-owned Cooperative
	went to BIPOC-owne	
	%	nce services provided to worker-owned Cooperative
	went to women-owr	lers
Management Training		
Total # of worker-owners who completed governance and participatory		%
management training?		/0