

## • EMPLOYEE RETENTION TAX CREDIT SURVEY

### COMPANY OVERVIEW INFORMATION

- Legal Entity Name of a Business \* \_\_\_\_\_
- Legal Entity Address \* \_\_\_\_\_
- DBA (if applicable) \_\_\_\_\_
- CEO Name \* \_\_\_\_\_
- Primary - One Email Only \* \_\_\_\_\_
- Contact Phone \* \_\_\_\_\_

Do you contract with a PEO for your employees? \*

☐ YES ☐ NO

- |  |   |
|--|---|
| 1. Number of Employees   Q2 – 2020 * _____ | 10. QTR Payroll Amount   Q2 – 2021 * _____        |
| 2. QTR Payroll Amount   Q2 – 2020 _____    | 11. Number of Employees   Q3 – 2021 * _____       |
| 3. Number of Employees   Q3 – 2020 * _____ | 12. QTR Payroll Amount   Q3 – 2021 * _____        |
| 4. QTR Payroll Amount   Q3 – 2020 * _____  | 13. <i>Owner's Wages Paid</i>   Q2 - 2020 * _____ |
| 5. Number of Employees   Q4 – 2020 * _____ | 14. <i>Owner's Wages Paid</i>   Q3 – 2020 * _____ |
| 6. QTR Payroll Amount   Q4 – 2020 * _____  | 15. <i>Owner's Wages Paid</i>   Q4 – 2020 * _____ |
| 7. Number of Employees   Q1 – 2021 * _____ | 16. <i>Owner's Wages Paid</i>   Q1 – 2021 * _____ |
| 8. QTR Payroll Amount   Q1 – 2021 * _____  | 17. <i>Owner's Wages Paid</i>   Q2 – 2021 * _____ |
| 9. Number of Employees   Q2 – 2021 * _____ | 18. <i>Owner's Wages Paid</i>   Q3 – 2021 * _____ |

## • WAGES EARMARKED FOR PPP FORGIVENESS

1. 1st Round PPP | Amount Received \* \_\_\_\_\_
2. 1st Round PPP | Amount Towards Wages \* \_\_\_\_\_
3. 2nd Round PPP | Amount Received \* \_\_\_\_\_
4. 2nd Round PPP | Amount Towards Wages \* \_\_\_\_\_
5. What cover period was used when applying for forgiveness of the 1st PPP Loan? Start Date \_\_\_\_\_
6. What cover period was used when applying for forgiveness of the 2nd PPP Loan? Start Date: \_\_\_\_\_

## YES OR NO QUESTIONS

1. Was the business deemed non-essential during full or partial government shutdown?  
  
• ☐ YES ☐ NO
2. Was the business deemed non-essential, but had trouble sourcing equipment, supplies, etc?  
  
• ☐ YES ☐ NO

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## OTHER YES OR NO

3. Experienced a full shutdown  
• ☐ YES ☐ NO
4. Experienced a partial shutdown  
• ☐ YES ☐ NO
5. Experienced interrupted operations  
• ☐ YES ☐ NO
6. Experienced supply chain interruptions  
• ☐ YES ☐ NO
7. Inability to access equipment  
• ☐ YES ☐ NO
8. Limited capacity to operate  
• ☐ YES ☐ NO
9. Inability to work with your vendors  
• ☐ YES ☐ NO
10. Reduction in services or goods offered to your customers  
• ☐ YES ☐ NO
11. Cut down in your hours of operation  
• ☐ YES ☐ NO
12. Shifted hours to increase sanitation of your facility  
• ☐ YES ☐ NO