

Company Name: _____ Client ID: _____



Employee Retention Tax Credit (ERTC) Questionnaire

The following questions are intended to help you determine if you are eligible for the ERTC credit. If you are unsure of the answers to any of these questions, please contact your accountant.

If your accountant has filed any of this information on your behalf (which may include 941x or IRS form 7200), please send copies to APS ASAP. This information must be included on any quarterly amendments to prevent 941 tax notices. Inaccurate reporting may result in notices that require repayment of the credit back to the IRS.

1. Was your business shutdown (partially or fully) by an order from a government authority due to COVID-19?
 Yes - List the time span you were closed (partially or fully) From: ____/____/____ To: ____/____/____
 No
2. Are either of these statements true regarding your gross receipts?
 Gross receipts in any quarter in 2020 were less than 50% in the same quarter in 2019
 Gross receipts in the first two quarters of 2021 were less than 20% in the same quarter in 2019
 Neither of these items are true

If you answered Yes to either of these questions, please proceed with the rest of this form.

3. For what period(s) are you requesting APS to calculate the ERTC Credit:
_____/_____/_____ to ____/_____/_____
4. For what period did your PPP Loan amount that was allocated to wages (not rent or utilities) cover your payroll wages paid to non-owners: ____/_____/_____ to ____/_____/_____
For example, if your PPP Loan period began 04/15/2020 and \$100,000 of your PPP Loan was allocated to payroll wages and \$100,000 covered your payroll wages through 05/31/2020, the period that should be excluded is 04/15/2020-05/31/2020 (not necessarily the full loan period for the PPP).

Please complete the appropriate section according to the year you are requesting the credit.

2020:

5. If you plan on using income to determine your qualification, please indicate the differential (percentage) of gross receipts for each quarter in 2020 compared to each quarter in 2019. If you were not in business in that quarter in 2019, you can use the preceding quarter in the same year (i.e. Q2 2020 can be used as the comparison quarter to determine eligibility for Q3 2020).
For examples: If Q1 2020 = \$40,000.00 and Q1 2019 = \$100,000.00, your answer would be 60% for Q1 2020
If Q2 2020 = \$50,000.00 and Q2 2019 = \$40,000.00, your answer would be 20% for Q2 2021
 - Q1 2020: % _____ Compared to: Q1 2019 OR Q4 2019
 - Q2 2020: % _____ Compared to: Q2 2019 OR Q1 2020
 - Q3 2020: % _____ Compared to: Q3 2019 OR Q2 2020
 - Q4 2020: % _____ Compared to: Q4 2019 OR Q3 2020

***Note: It is strongly recommended that you work with your accountant to obtain and calculate your percentages accurately**

6. Did you receive a PPP loan in round 1?
 Yes – What **dollar amount** of the loan was used for **payroll wages to non-owners**: _____
 No
7. If you answered yes, and you filed for forgiveness (or plan on doing so), please indicate the date span of the wages you going to use for the forgiveness application (covered period):
From: ____/____/_____ To: ____/____/_____

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I'm not sure yet I don't plan to file for forgiveness

8. What was your full-time employee count for 2019? 100 FTEs or less more than 100 FTEs

9. Did you provide Health Insurance to your employees? Yes No

10. If you provide Health Insurance to your employees, are your Insurance Premiums maintained by APS?
 Yes No

Note: If your Health Insurance Premiums are not maintained by APS, we will need a report from you outlining "EMPLOYER" cost per employee. You can only include the share you didn't deduct from the employees.

2021:

11. Did you receive a PPP loan in round 2?

- a. Yes – What **dollar amount** of the loan was used for **payroll wages to non-owners**: _____
b. No

12. If you answered yes, and you plan on filing for forgiveness, please indicate the date span of the wages you are going to use for the forgiveness application (covered period):

- a. From: ____/____/____ To: ____/____/____
b. I'm not sure yet I don't plan to file for forgiveness

13. Was your business shutdown (partially or fully) by an order from a government authority due to COVID-19?

- a. Yes - List the time span – during 2021 - you were closed (partially or fully) From: ____/____/____ To: ____/____/____
b. No

14. If you plan on using income to determine your qualification, please indicate the differential (percentage) of gross receipts for each quarter in 2021 compared to each quarter in 2019:

- a. For examples: If Q1 2021 = \$40,000.00 and Q1 2019 = \$100,000.00, your answer would be 60% for Q1 2021
i. If Q2 2020 = \$50,000.00 and Q2 2019 = \$40,000.00, your answer would be 20% for Q2 2021
- Q4 2020: % _____ Compared to: Q1 2019 or Q3 2020
 - Q1 2021: % _____ Compared to: Q1 2019 or Q1 2020
 - Q2 2021: % _____ Compared to: Q2 2019 or Q2 2020

***Note: It is strongly recommended that you work with your accountant to obtain and calculate your percentages accurately**

15. What was your full-time employee count for 2019? 500 FTEs or less More than 500 FTEs

16. Did you provide Health Insurance to your employees? Yes No

17. If you provide Health Insurance to your employees, are your Insurance Premiums maintained by APS?
 Yes No

Note: If your Health Insurance Premiums are not maintained by APS, we will need a report from you outlining "your" cost per employee. You can only include the share you didn't deduct from the employees.

I certify that the above information is true and accurate to the best of my knowledge:

Dated: ____/____/____

Printed Name

Signature