

ERC Questionnaire

Primary owner of the company

First Name:

Last Name:

Your Registered Business Name:

Your work email? :

Your Cell Phone Number? :

When did your company originally begin operating?

Before Feb 16th 2020

After Feb 16th 2020

Which option best describes your business (or nonprofit)? *

Business with W2 employees

Business with only 1099 contractors

Business with no employees

Business with W2 employees & 1099 employees

Other

Approximately how many W2 employees did you have in 2020?

(Not including the owner or other family members/business partners on payroll)

Approximate Employees for 2020

Approximate Employees for 2021

Did you have a reduction in revenue in 2020 and/or 2021?

IMPORTANT: You can still qualify for this refund even if your revenues INCREASED, so please be honest.

Yes

No

Did the state(s) that your organization is located in have any shutdowns, capacity restrictions, or stay-at-home orders in 2020 or 2021?

Were you required to temporarily modify/restrict your operations in any way?

supply chain delays, remote/telework (working from home), doing more online meetings, indoor capacity restrictions, social distancing for employees and/or customers, staggered work schedules, etc.

Yes

No