# PPP First Draw Loan Sizing Worksheet

## For: Self-employed and has employees



This includes independent contractors and sole proprietors, but not if you are a partner in a partnership.

Your business name:

	PART I: CALCULATE YOUR MAXIMUM PPP LOAN REQUEST	AM	OUNT
1.	Enter the time period you are using to calculate average monthly payroll		
	Options: 2019, 2020, or Startup Method (see instructions on page 3)		
2.	Owner Compensation:  a. Enter if you would like to base your owners compensation off of Gross Income (Line 7) or Net Profit (Line 31)  Options: Gross Income, Net Profit		
	b. If using Gross Income, enter the following figures from your IRS Form 1040 Schedule C		
	Gross income amount (Line 7)	(+)	
	Employee benefit programs (Line 14)	(-)	
	Pension and profit-sharing plans (Line 19)	(-)	
	Wages (less employement credits) (Line 26)	(-)	
	Subtotal (min \$0, max \$100,	000)	
	c. Else if using Net Profit, enter the net profit amount (Line 31) from your IRS Form 1040 Schedule C		
	If this amount is over \$100,000, reduce it to \$100,000.  If this amount is less than zero, just enter 0.		
	Employee Payroll Costs for the selected time period:		
3.	a. Enter IRS Form 941 Taxable Medicare wages & tips	Q1	
	Line 5c-column 1 from each quarterly 941	Q2	
		Q3	
		Q4	
	Sub	total	
	As applicable for the selected time period:		
	b. Enter any pre-tax employee contributions for health insurance		
	or other fringe benefits excluded from Taxable Medicare wages & tips		

	of \$100,000, and (ii) any amounts paid to any employee whose	
	principal place of residence is outside the US (-)	
	Additional eligible payroll costs for the selected time period:	
	d. Enter employer contributions for employee group health, life,	
	disability, vision, and dental insurance	
	The portion of IRS Form 1040 Schedule C line 14 attributable to those contributions	
	e. Employer contributions to employee retirement plans	
	IRS Form 1040 Schedule C line 19	
	f. Employer state and local taxes assessed on employee	
	compensation, primarily state unemployment insurance tax	
	Primarily state unemployment insurance tax (from state quarterly wage reporting forms)	
4.	Subtotal all payroll costs	
	Adding Line 2 plus Line 3-a, b, d, e, f, and minus Line 3-c	
5.	Calculate average monthly payroll	
	Net Profit / 12	
	» Enter this amount in the 'Average Monthly Payroll' box of your SBA Form 2483	
6.	Multiply the average monthly payroll amount by 2.5	
_	Add the outstanding amount of any EIDL loan received between	
7.	1/31/20 and 4/3/20 that you seek to refinance.	
	Do not include the amount of any advance under an EIDL COVID-19 loan (because	
	it does not have to be repaid).	
	You do not have to refinance your EIDL. This is purely optional.	
$\rightarrow$	This Your Maximum PPP Loan Request Amount:	.00
	Line 6 + Line 7 rounded down to nearest whole dollar	
	» Enter up to this amount in the 'Loan Request Amount' box of your SBA Form 2483	
	PART II: ORGANIZE YOUR REQUIRED SUPPORTING DOCUME	ENTS
The follow	ving documents <u>must</u> be submitted along with your completed SBA Form 2483. If any red	quired documents are
missing, it	t will delay the processing of your application and could jeapordize its ability to be funde	d.
	Document(s) to support your Average Monthly Payroll figure:	
	IRS Form 1040 Schedule C for the relevant year	
	IRS Form 941 from each quarter (or equivalent payroll processor records or IR Statements)	S Wage and Tax
	If line 2 fie greater than CO state assentants are a second asset in the contract in the contr	av rapartina farm for
	If Line 3-f is greater than \$0: state quarterly wage unemployment insurance to each quarter (or equivalent payroll processor records or IRS Wage and Tax States	-

If Line 3-e is greater than \$0: documentation of any retirement or group health, life, disability, vision, and dental contributions  Document(s) to prove in operation:
A payroll statement or similar documentation from the pay period that covered February 15, 2020 must be provided to establish you were in operation and had employees on that date.
** Continue to the next page for Part III **

## PART III: FILL OUT YOUR SBA FORM 2483

Below are the most common ways applicants incorrectly fill out their Form 2483. Please review each of them to ensure you've correctly completed your form, and then initial at the bottom once you've verfied each of the items.

## Page 1 Common Issues:

Court Out   Soft Propriet   Description		Borr	Paycheck Protection Prower Application Form Revise		1	OMB Contro Expiratio	ol No.: 3245-0407 n Date: 7/31/2021		
Builases Address (Steeset, City, Store, Zig Cole - No P.O. Box addresses  Builases Address (Steeset, City, Store, Zig Cole - No P.O. Box addresses  Builases Address (Steeset, City, Store, Zig Cole - No P.O. Box addresses  Builases Address (Steeset, City, Store, Zig Cole - No P.O. Box addresses  Builases Address (Steeset, City, Store, Zig Cole - No P.O. Box addresses  Builases (Index)  Frimary Courses  Builases (Index)  Must provide SSN (without dashes)  If See Builases (Index)  Must provide SSN (without dashes)  If Other Courses (Dynaminus  Builases)  Frimary Courses  Builases (Index)  Frimary Courses  Builases (Index)  Frimary Courses  Builases (Index)  Must provide SSN (without dashes)  If Other Courses (Dynaminus  Builases)  Must provide SSN (without dashes)  If owner is an individual. Only use EIN if owner is an other business.  Lat all owners of 20% or more of the square of the Applicate Antone Angelicate (Ornaminus Index)  Builases (Index)  Covered Works  Decomposition (Ind. City, or 60 or more of the square of the Applicate or specific or squared (Ind. Cole Ind.	□ Inc □ 50 □ 50	dependent Contractor 11(c)(3) nonprofit 5 11(c)(19) veterans organ	Self-Employed Individual 01(c)(6) organization nization Housing cooperative						
Average Monthly  Average Monthly  S	Business Address (	Street, City, State, Zi	p Code - No P.O. Box addresses			if applicable) A Standard (che No more than 500 (or 300 employees, SBA industry size SBA alternative s	feets Size eck one): 0 employees if applicable) e standards	EIN (if inc (if self-em	orporated) or SSN
List all owners of 20% or more of the equity of the Applicant Ownership  Owner Name  Title  Ownership  List all owners of 20% or more of the equity of the Applicant Abach a squared sheet if necessary.  Address  Owner Name  Title  Ownership  Questions  List the Applicant or any owner of the Applicant and the supervoid.  List the Applicant or any owner of the Applicant or any business ownership to proposed for debarment, declared ineligible, voluntarily excluded from participation in this transaction by any Federal department or agency, or presently involved in any business or any owner of the Applicant, or any business owner or counted allow to the Applicant and some of the Applicant, or any business ownership to controlled by any of them. even obtained a disect or caused a loss to the provenance of the Applicant and some of any other business, or, have common management (inchining a management agencies) to the former of the Applicant or any owner of th	Payroll:  Purpose of the loan (select all	☐ Payroll Costs	Any EIDL Advance) equals  Loan Request Amount:  Rent / Mortgage Interest	\$ Utilities	Number of Employees	Covered Oper	ations	<u>dashes</u> ) if individual	owner is an . Only use EIN if
Is the Applicant or any owner of the Applicant prevently suppeaded, debarred, proposed for debarment, declared insligible, voluntarily excluded from participation in this transaction by any Federal department or agency, or prevently smooked in any voluntarily excluded from participation in this transaction by any Federal department or agency, or prevently smooked in any participation from SRA or any other Federal agency that is (a) currently delinquent or (b) has defaulted in the last 7 years and caused a loos to the government?  Is the Applicant arrective an SBA Economic Injury Disaster Loan between January 31, 2020 and April 3, 2020? If yee, provide details on a separate heat elementaried as addedoum A.  4. Did the Applicant receives an SBA Economic Injury Disaster Loan between January 31, 2020 and April 3, 2020? If yee, provide details on a separate heat elementaried as addedoum and any follow, prevently subject to an indichment, reminal information, arrangement, or after means by which formal criminal charges are brought in any purishedous?  Is the Applicant (if an individual) or any individual owning 20% or more of the equity of the Applicant prevently incident as addedoum B.  So the Applicant receives an SBA Economic Injury Disaster Loan between January 31, 2020 and April 3, 2020? If yee, provide details on a separate heat elements of a soldential on a separate heat elements of a soldential on a separate heat elements of a soldential or an application of the applicant o	Owner I	or more of the equity	Applicant Owners of the Applicant. Attach a separate s Title Owners	hip heet if necessary. hip % TIN (EIX		Address		I.	_
Signature of any owner of the Applicant an owner of any other business, or have common management (including a management) argement) with any other business? If yee, list all nach businesses (including their ThS <sub>1</sub> available) and describe the relationship on a separate sheet identified as addendum A.	Is the Applicant or a voluntarily excluded bankruptcy?     Has the Applicant, as guaranteed loan fron	ny owner of the Appli from participation in t ny owner of the Appli n SBA or any other Fe	Question cant presently suspended, debarred, ; this transaction by any Federal depar cant, or any business owned or contr	proposed for debarn rtment or agency, or olled by any of then	presently inv n, ever obtain	olved in any	Yes No	1.	
any felony, presently subject to an indictment, criminal information, arraignment, or other means by which formal criminal charges are brought in any jurisdiction?  Initial here to confirm your response to question 5—  6. Within the last 5 years, for any felony involving flaud, bribery, embezzlement, or a false statement in a loan application or an application for federal financial assistance, or within the last year, for any other felony, has the Applicant (if an individual and application or an application for federal financial assistance, or within the last year, for any other felony, has the Applicant (if an individual and probation (including probation (including probation (including probation (including probation feel probation) and probation (including probation) and probation (including probation feel probation) and probation (including probation) and probation (including probation) and probation (including probation) and probation (including probation) and probation) are stated in the SBA of Franchise Identifier Code here:    Carefully read and answer #7 (hint: must be 'Yes' to be a valid application)    Carefully read and answer #7 (hint: must be 'Yes' to be a valid application)    Carefully read and answer #7 (hint: must be 'Yes' to be a valid application)    Carefully read and answer #7 (hint: must be 'Yes' to be a valid application)    Carefully read and answer #7 (hint: must be 'Yes' to be a valid application)    Carefully read and answer #7 (hint: must be 'Yes' to be a valid application)    Carefully read and answer #7 (hint: must be 'Yes' to be a valid application)    Carefully read and answer #7 (hint: must be 'Yes' to be a valid application)    Carefully read and answer #7 (hint: must be 'Yes' to be a valid application)    Carefully read and answer #7 (hint: must be 'Yes' to be a valid application)    Carefully read and answer #7 (hint: must be 'Yes' to be a valid application of the purpose of the season of the	Is the Applicant or a management agreem relationship on a sep      Did the Applicant re details on a separate	ny owner of the Applic ent) with any other bu arate sheet identified a ceive an SBA Econom sheet identified as add	siness? If yes, list all such businesse is addendum A. iic Injury Disaster Loan between Jan lendum B.	s (including their Ti mary 31, 2020 and A	INs if availabl April 3, 2020?	e) and describe the If yes, provide		1	• •
Print Name   Pri	any felony, presently are brought in any ju Initial here to confirm 6. Within the last 5 year application for federal	subject to an indictment risdiction? m your response to que rs, for any felony invo al financial assistance,	ent, criminal information, arraignme estion 5 → lving fraud, bribery, embezzlement, or within the last year, for any other	or a false statement	y which form in a loan app plicant (if an i	al criminal charges			· · · · · · · · · · · · · · · · · · ·
645 by imprisonment of not more than two years and/or a fine of not more than \$1,000,000.  18 U.S.C. 1014 by imprisonment of not more than two years and/or a fine of not more than \$1,000,000.  1 acknowledge that the Lender will confirm the eligible loan amount using required documents submitted. I understand, acknowledge, and agree that the Lender can share any tax information that I have provided with SBA's authorized representatives, including authorized representatives of the SBA Office of Inspector General, for the purpose of compliance with SBA Loan Program Requirements and 10 office of Inspector General, for the purpose of compliance with SBA Loan Program Requirements and 10 office of Inspector General, for the purpose of compliance with SBA Loan Program Requirements and 10 office of Inspector General, for the purpose of compliance with SBA Loan Program Requirements and 10 office of Inspector General, for the purpose of compliance with SBA Loan Program Requirements and 10 office of Inspector General, for the purpose of compliance with SBA Loan Program Requirements and 10 office of Inspector General, for the purpose of compliance with SBA Loan Program Requirements and 10 office of Inspector General, for the purpose of compliance with SBA Loan Program Requirements and 10 office of Inspector General, for the purpose of compliance with SBA Loan Program Requirements and 10 office of Inspector General, for the purpose of Compliance with SBA Loan Program Requirements and 10 office of Inspector General, for the purpose of Compliance with SBA Loan Program Requirements and 10 office of Inspector General, for the purpose of Compliance with SBA Loan Program Requirements and 10 office of Inspector General, for the purpose of Compliance with SBA Loan Program Requirements and 10 office of Inspector General Representatives of Compliance with SBA Loan Program Requirements and 10 office of Inspector General Representatives of Compliance Without Compliance Without Compliance Without Compliance Without Compliance Without Com	probation (including Initial here to confin 7. Is the United States t 8. Is the Applicant a fire	probation before judge m your response to que the principal place of re anchise?	ment)? estion $6 \rightarrow$ esidence for all employees included	in the Applicant's p	ayroll calcula	-		hint: mu	st be 'Yes' to be a
18 U.S.C. 1014 by immicromment to the unit unity years and/or a fine of not more than \$1,000,000.  13 cknowledge that the Lender will confirm the eligible loan amount using required documents submitted. I understand, acknowledge, and agree that the Lender can share any tax information that I have provided with SBA's authorized representatives, including authorized representatives of the SBA Office of Inspector General, for the purpose of compliance with SBA Loan Program Requirements and a U.S.C. 1014 by immicromment and agree that the Lender will confirm the eligible loan amount using required documents submitted. I understand, acknowledge, and agree that the Lender can share any tax information that I have provided with SBA Loan Program Requirements.			n two years and/or a fine of not	410	r submitted to	a federally insured in	estitution, under	Initial all I	ooxes
Print Name Title	18 U.S.C. 1014 1 acknowledge that the Lender	4 by imprisonment of that the Lender will co r can share any tax info	onfirm the eligible loan amount using mation that I have provided with SB	ne of not more than g required document BA's authorized repr	\$1,000,000. ts submitted. I esentatives, in	understand, acknowl cluding authorized re	edge, and agree		forget to <u>s<b>ign your</b></u>
Initial:	Print Name	Representative of App		Title					Initial:

Initial to the right to indicate that you have reviewed each of these common issues and verified your form has been completed fully to the best of your ability  $\rightarrow$ 

### SPECIAL INSTRUCTIONS IF USING THE "STARTUP METHOD" TIME PERIOD

If you were in operation on February 15, 2020, but were not in operation between February 15, 2019, and June 30, 2019, you may choose one of two ways to calculate your First Draw PPP Loan amount.

The **first option** is to simply use payroll information for all of 2020 instead of 2019. If using this option, please select "2020" as your time period for question 1 above and then proceed following the instructions.

The **second option**, the "Startup Method", is to calculate your loan amount using your average monthly payroll costs (and Schedule C net income) for January and February 2020.

Fill out an IRS Form 1040 Schedule C for January and February 2020. The entries on the schedule must reflect all business income and expenses from those two months, with the exception that on Schedule C line 13: o you must include only 1/6 of the amount of any annual depreciation and section 179 expense deduction attributable to investment made in those months, and o you must include 1/6 of the amount of the 2020 depreciation deduction attributable to investment made in prior years.

Once completed, enter the amount from Line 31 on your Schedule C for Question 2 on page 1 of this worksheet. Note: save your Schedule C as you will be required to attach it when submitting your application.

Then, additionally add all relevant employee payroll costs for on Page 1 Lines 3 a-f. You also must provide payroll records from those two months, your IRS Form 941 for the first quarter of 2020, and documentation of any employer retirement and group health, life, disability, vision, and dental insurance contributions made on behalf of employees.

#### **QUESTIONS?**

<u>Please visit our PPP Help Center for FAQ, webinars, and contact information</u> to reach one of our PPP specialists