PPP Loan Forgiveness Application

SBA Form 3508

What should I do now?

- 1. Your completed PPP Loan Forgiveness Application (SBA Form 3508) starts on the following page. Please review the application thoroughly. We cannot guarantee the accuracy of any calculations you are solely responsible to review all fields and calculations prior to submitting the application to your lender. Once reviewed, please sign and date the application and send it to your lender (or use it to complete their online form) along with the supporting documents listed on the second to last page of the application.
- 2. Your lender will issue a decision to SBA on your loan forgiveness application not later than 60 days after receipt of a complete loan forgiveness application from you. Should you have any questions or would like updates during the process, please contact your lender directly.

This application was created using the Free PPP Loan Forgiveness Application Creator at Applyforppp.com



ApplyforPPP.com was created by **Reliant Business Valuation**, a tech-enabled business valuation firm founded in 2010 that serves over 150 SBA lenders around the nation. We know small business and we know SBA. In late March 2020, due to COVID, we pivoted our technology and created a digital platform to automate PPP applications for our SBA bank clients in the pursuit of our core mission: to build a premier company to guide entrepreneurs who drive our economy.

The automated loan forgiveness application is the first part of our larger digital solution designed to automate the entire PPP application and forgiveness process for lenders. We've offered this automated application to borrowers for free in an effort to reduce the financial burden on the small business community as a whole during the COVID pandemic, as well as to spread awareness of Reliant Business Valuation's tech enabled solutions.





ApplyforPPP.com is not associated with the U.S. Small Business Administration (SBA) and the U.S. Department of the Treasury. Refer to the Treasury's website for specific instructions. By utilizing ApplyforPPP.com, you have agreed to the Terms of Service www.applyforppp.com/license.



OMB Control Number 3245-0407 Expiration Date: 10/31/2020

PPP Loan Forgiveness Calculation Form

Business Legal Name ("Borrower")		DBA or Tradename, if applicable		
Pizza Planet, LLC	Pizza Pizza			
Business Primary Address	Business TIN	(EIN,SSN)	Business Phone	
1 Pizza Planet Way, Howell, NJ 07731	23-232	3232	(732) 123-4567	
	Primary (Contact	Email Address	
	John Smith		example@email.com	
SBA PPP Loan Number: 12345678900	Lender PPP Loan Number:			
PPP Loan Amount: \$100,000.00	PPP Loan Disbursement Da	ote: 05/20/	2020	
Employees at Time of Loan Application: 5				
Employees at Time of Forgiveness Application: 5				
EIDL Advance Amount:	EIDL Application Number:			
Payroll Schedule: The frequency with which payroll is paid to e	employees is:			
■ Weekly □ Biweekly (every other week) □ Twic	e a month	[☐ Other	
Covered Period: 05/20/2020 to 11/03	3/2020			
Alternative Payroll Covered Period, if applicable: 05/26/2020	to	- 11/09/2020	0	
If Borrower (together with affiliates, if applicable) received PF	PP loans in excess of \$2 million	, check he	re:	
Forgiveness Amount Calculation:				
Payroll and Nonpayroll Costs				
Line 1. Payroll Costs (enter the amount from PPP Schedule A, line	e 10):	\$56,500.00	0	
Line 2. Business Mortgage Interest Payments:		\$20,000.00	0	
Line 3. Business Rent or Lease Payments: \$10,0		\$10,000.00	0,000.00	
Line 4. Business Utility Payments: \$0.00				
All of CENTRY CONTROL (CTCC)	W D I			
Adjustments for Full-Time Equivalency (FTE) and Salary/Hourly Line 5. Total Salary/Hourly Wage Reduction (enter the amount from the salary fro		\$0.00		
Line 6. Add the amounts on lines 1, 2, 3, and 4, then subtract the a	mount entered in line 5:	\$86,500.00	0	
Line 7. FTE Reduction Quotient (enter the number from PPP Sche	edule A, line 13):	1.00		
<u>Potential Forgiveness Amounts</u> Line 8. Modified Total (multiply line 6 by line 7):		\$86,500.00	0	
Line 9. PPP Loan Amount:		\$100,000.0	00	
Line 10. Payroll Cost 60% Requirement (divide line 1 by 0.60):		\$94,166.6	7	
<u>Forgiveness Amount</u> Line 11. Forgiveness Amount (enter the smallest of lines 8, 9, and	10):	\$86,500.00	0	



OMB Control Number 3245-0407 Expiration Date: 10/31/2020

By Signing Below, You Make the Following Representations and Certifications on Behalf of the Borrower:

The authorized representative of the Borrower certifies to all of the be	elow by initialing next to each one.
payments; business rent or lease payments; or bu • includes all applicable reductions due to decrea salary/hourly wage reductions; • includes payroll costs equal to at least 60% of t • if a 24-week Covered Period applies, does not o owner-employee or self-employed individual/get	he forgiveness amount; exceed 2.5 months' worth of 2019 compensation for any heral partner, capped at \$20,833 per individual; and Period, does not exceed 8 weeks' worth of 2019 compensation for any
I understand that if the funds were knowingly used for una loan amounts and/or civil or criminal fraud charges.	uthorized purposes, the federal government may pursue recovery of
The Borrower has accurately verified the payments for the requesting forgiveness.	eligible payroll and nonpayroll costs for which the Borrower is
	verifying payroll costs, the existence of obligations and service (as ss mortgage interest payments, business rent or lease payments, and
correct in all material respects. I understand that knowingl loan is punishable under the law, including 18 USC 1001 a up to \$250,000; under 15 U.S.C. 645 by imprisonment of r	nation provided in all supporting documents and forms is true and y making a false statement to obtain forgiveness of an SBA-guaranteed and 3571 by imprisonment of not more than five years and/or a fine of not more than two years and/or a fine of not more than \$5,000; and, if 1014 by imprisonment of not more than thirty years and/or a fine of
and/or state tax or workforce agency. I also understand, ac	sistent with those the Borrower has submitted/will submit to the IRS eknowledge, and agree that the Lender can share the tax information ed representatives of the SBA Office of Inspector General, for the d all SBA reviews.
eligibility for the PPP loan and for loan forgiveness, and the	st additional information for the purposes of evaluating the Borrower's tat the Borrower's failure to provide information requested by SBA tible for the PPP loan or a denial of the Borrower's loan forgiveness
between February 15, 2020 and the end of the Covered Perdue to compliance with requirements established or guidant Secretary of Health and Human Services, the Director of the	afe Harbor 1 on PPP Schedule A, the Borrower was unable to operate riod at the same level of business activity as before February 15, 2020 are issued between March 1, 2020 and December 31, 2020, by the ne Centers for Disease Control and Prevention, or the Occupational are of standards of sanitation, social distancing, or any other work or
The Borrower's eligibility for loan forgiveness will be evaluated in acc SBA through the date of this application. SBA may direct a lender to SBA determines that the Borrower was ineligible for the PPP loan.	
Signature of Authorized Representative of Borrower	Date
	President
Print Name	Title



OMB Control Number 3245-0407 Expiration Date: 10/31/2020

PPP Schedule A

PPP Schedule A Worksheet, Table 1 Totals

Line 1.	Enter Cook Companyation (Day 1) from DDD Schodulo A Workshoot Toklo 1.	\$50,000.00
Line 1.	Enter Cash Compensation (Box 1) from PPP Schedule A Worksheet, Table 1:	
Line 2.	Enter Average FTE (Box 2) from PPP Schedule A Worksheet, Table 1:	5.0
Line 3.	Enter Salary/Hourly Wage Reduction (Box 3) from PPP Schedule A Worksheet, Table 1: If the average annual salary or hourly wage for each employee listed on the PPP Schedule A Worksheet, Table 1 during the Covered Period or the Alternative Payroll Covered Period was at least 75% of such employee's average annual salary or hourly wage between January 1, 2020 and March 31, 2020, check here and enter 0 0 n line 3.	\$0.00
	dule A Worksheet, Table 2 Totals	
Line 4.	Enter Cash Compensation (Box 4) from PPP Schedule A Worksheet, Table 2:	\$0.00
Line 5.	Enter Average FTE (Box 5) from PPP Schedule A Worksheet, Table 2:	0.0
<u>Non-Cash</u> Line 6.	Compensation Payroll Costs During the Covered Period or the Alternative Payroll Covered Period Total amount paid or incurred by Borrower for employer contributions for employee health insurance:	\$1,500.00
Line 7.	Total amount paid or incurred by Borrower for employer contributions to employee retirement plans:	\$2,000.00
Line 8.	Total amount paid or incurred by Borrower for employer state and local taxes assessed on employee compensation:	\$1,000.00
<u>Compens</u>	ation to Owners	
Line 9. Total Pay	Total amount paid to owner-employees/self-employed individual/general partners: This amount may not be included in PPP Schedule A Worksheet, Table 1 or 2. If there is more than one individual included, attach a separate table that lists the names of and payments to each. veroll Costs	\$2,000.00
Line 10	Payroll Costs (add lines 1, 4, 6, 7, 8, and 9):	\$56,500.00
<u>Full-Time</u> If you sat	e Equivalency (FTE) Reduction Calculation isfy any of the following three criteria, check the appropriate box, skip lines 11 and 12, and enter 1.0 on therwise, complete lines 11, 12, and 13:	450,500.00
	tion in employees or average paid hours: If you have not reduced the number of employees or the paid hours of your employees between January 1, 2020 and the end of the Covered Period, check here \Box .	
Covered in requirement of the control of the contro	duction Safe Harbor 1: If you were unable to operate between February 15, 2020, and the end of the Period at the same level of business activity as before February 15, 2020 due to compliance with ents established or guidance issued between March 1, 2020 and December 31, 2020, by the Secretary of ad Human Services, the Director of the Centers for Disease Control and Prevention, or the Occupational d Health Administration related to the maintenance of standards for sanitation, social distancing, or any other or customer safety requirement related to COVID-19, check here □.	
FTE Red	duction Safe Harbor 2: If you satisfy FTE Reduction Safe Harbor 2 (see PPP Schedule A Worksheet), re ■.	
Line 11.	Average FTE during the Borrower's chosen reference period:	1.0
Line 12.	Total Average FTE (add lines 2 and 5):	5.0
Line 13.	FTE Reduction Quotient (divide line 12 by line 11) or enter 1.0 if FTE Safe Harbor is met:	1.0



OMB Control Number 3245-0407

Expiration Date: 10/31/2020

PPP Schedule A Worksheet

Table 1: List employees who:

- Were employed by the Borrower at any point during the Covered Period or the Alternative Payroll Covered Period whose principal place of residence is in the United States; and
- Received compensation from the Borrower at an annualized rate of less than or equal to \$100,000 for all pay periods in 2019 or were not employed by the Borrower at any point in 2019.

Employee's Name	Employee Identifier	Cash Compensation	Average FTE	Salary / Hourly Wage Reduction
Jeff Smith	1234	\$15,000.00	1.0	\$0.00
Joyce Smith	5678	\$18,000.00	1.0	\$0.00
Jeffrey Smith	9012	\$17,000.00	1.0	\$0.00
FTE Reduction Exceptions:			2.0	
Totals:		\$50,000.00	5.0	\$0.00

Table 2: List employees who:

- Were employed by the Borrower at any point during the Covered Period or the Alternative Payroll Covered Period whose principal place of residence is in the United States; and
- Received compensation from the Borrower at an annualized rate of more than \$100,000 for any pay period in 2019.

Employee's Name	Employee Identifier	Cash Compensation	Average FTE
Totals:		Box 4	Box 5

line 13 of PPP Schedule A by dividing line 12 by line 11 of that schedule.

Attach additional tables if additional rows are needed.

FTE Reduction Safe Harbor 2:

Step 1.	Enter the borrower's total average FTE between February 15, 2020 and April 26, 2020. Follow the same method that was used to calculate Average FTE in the PPP Schedule A Worksheet Tables. Sum across all employees and enter:
	1.0
Step 2.	Enter the borrower's total FTE in the Borrower's pay period inclusive of February 15, 2020. Follow the same method that was used in step 1: 1.0
Step 3.	If the entry for step 2 is greater than step 1, proceed to step 4. Otherwise, the FTE Reduction Safe Harbor 2 is not applicable and the Borrower must complete line 13 of PPP Schedule A by dividing line 12 by line 11 of that schedule.
Step 4.	Enter the borrower's total FTE as of earlier of December 31, 2020, and the date this application is submitted: 1.5
Step 5.	If the entry for step 4 is greater than or equal to step 2, enter 1.0 on line 13 of PPP Schedule A; the FTE Reduction Safe

Harbor 2 has been satisfied. Otherwise, the FTE Reduction Safe Harbor 2 does not apply and the Borrower must complete



PPP Borrower Demographic Information Form (Optional)

OMB Control Number 3245-0407

Expiration Date: 10/31/2020

Instructions

- 1. **Purpose.** Veteran/gender/race/ethnicity data is collected for program reporting purposes only.
- 2. **Description.** This form requests information about each of the Borrower's Principals. Add additional sheets if necessary.
- 3. **<u>Definition of Principal.</u>** The term "Principal" means:
 - For a self-employed individual, independent contractor, or a sole proprietor, the self-employed individual, independent contractor, or sole proprietor.
 - For a partnership, all general partners and all limited partners owning 20% or more of the equity of the Borrower, or any partner that is involved in the management of the Borrower's business.
 - For a corporation, all owners of 20% or more of the Borrower, and each officer and director.
 - For a limited liability company, all members owning 20% or more of the Borrower, and each officer and director.
 - Any individual hired by the Borrower to manage the day-to-day operations of the Borrower ("key employee").
 - Any trustor (if the Borrower is owned by a trust).
 - For a nonprofit organization, the officers and directors of the Borrower.
- 4. **Principal Name.** Insert the full name of the Principal.
- 5. **Position.** Identify the Principal's position; for example, self-employed individual; independent contractor; sole proprietor; general partner; owner; officer; director; member; or key employee.

Principal Name		Position	
Veteran	1=Non-Veteran; 2=Veteran; 3=Service-Disabled Veteran; 4=Spouse of Veteran; X=Not Disclosed		
Gender	M=Male; F=Female; X=Not Disclosed		
Race (more than 1 may be selected)	1=American Indian or Alaska Native; 2=Asian; 3=Black or African-American; 4=Native Hawaiian or Pacific Islander; 5=White; X=Not Disclosed		
Ethnicity	H=Hispanic or Latino; N=Not Hispanic or I	Latino; X=Not Disclosed	

Disclosure is voluntary and will have no bearing on the loan forgiveness decision

Paperwork Reduction Act — You are not required to respond to this collection of information unless it displays a currently valid OMB Control Number. The estimated time for completing this application, including gathering data needed, is 180 minutes. Comments about this time or the information requested should be sent to Small Business Administration, Director, Records Management Division, 409 3rd St., SW, Washington DC 20416, and/or SBA Desk Officer, Office of Management and Budget, New Executive Office Building, Washington DC 20503.

PLEASE DO NOT SEND FORMS TO THESE ADDRESSES.