Eastman Credit Union SBA PPP Worksheet

Instructions: Please complete to expedite the processing of your SBA Paycheck Protection Program loan request.

Category	ANNUAL AMOUNT	List Source Document Provided
Employee Wages and Other Compensation Compensation to employees in the form of salary, wages, commissions, or similar compensation; cash tips or the equivalent compensation.		
Paid Time Off (not included above) Payments for vacation, parental, family, medical, or sick leave		
Dismissal or Separation Allowance for dismissal or separation payments		
Health Insurance and Retirement Benefits Payments for employee benefits: group health care coverage, including insurance premiums, and retirement		
State and Local Taxes on Compensation Payments of state and local taxes assessed on compensation of employees. (e.g. Unemployment Tax)		
Sole Proprietor Owner Compensation (if applicable) Net profit from 2019 Sch C not to exceed $100,000		
General Partner Self-Employment (if applicable) Active general partners compensation not to exceed $100,000 each		
LESS ADJUSTMENTS: AS APPLICABLE		
Salaries in Excess of $100,000 Enter $0 if not applicable. The compensation of an individual employee in excess of an annual salary of $100,000, prorated as necessary.		
Non-US Resident Employees Enter $0 if not applicable. Compensation of employees whose principal place of residence is outside the United States		
Taxes Withheld During Covered Period Federal employment taxes imposed or withheld between February 15, 2020 and June 30, 2020, including the employee's and employer's share of FICA (Federal Insurance Contributions Act) and Railroad Retirement Act taxes, and income taxes required to be withheld from employees		
Allowed Credits for Qualified Leave Qualified sick and family leave wages for which a credit is allowed under sections 7001 and 7003 of the Families First Coronavirus Response Act		
= TOTAL ANNUAL COVERED PAYROLL	$ 0.00	
DIVIDE BY 12 FOR MONTHLY AVERAGE	$ 0.00	
MULTIPLY MONTHLY AVERAGE BY 2.5	$ 0.00	
= ELIGIBLE PAYROLL COST PPP LOAN AMOUNT	$ 0.00	
Add Eligible EIDL Refinance Amount (if applicable) If refinancing an EIDL loan with PPP loan, include here.		
TOTAL PPP LOAN AMOUNT REQUESTED	$ 0.00	

Date: _____

Borrower: _____

Authorized Representative Signature: _____

Title: _____