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Form: Partnership
PPP Loan
Recalculation Request
01/25/2021

Partnership

Date:

<i>Business Name</i>		<i>Tax Id #</i>	
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** Business Name should match original PPP Loan **

<i>Personal Information *Click to enter info*</i>	
Last Name	
First Name	
Phone	
Email	

Address	
Street	
City	
State	
Zip	

Loan information

Wage & Expense information	Description	Values
Compensation to General Partners	2019 Schedule K-1 [IRS Form 1065] net earnings from self-employment of individual general partners that are subject to self employment tax multiplied by 0.9235 capped at a maximum of \$100,000 per partner.	
2019 Wages Paid	Total from 2019 IRS Form 941 line 5c - column 1 from each quarter	
2019 Excess Wages	Sum of any amounts paid to any individual in excess of \$100,000 and included above	
2019 Other Labor Expense	Include employer paid amounts for health, life, disability, vision and dental insurance and employee retirement contributions.	

Eligible 1 st Draw Loan Amount	
Initial Loan Amount Received	
Requested Increase	

Required documentation:

- *2019 IRS Form 1065 (Including K-1s)
- *2019 Form 941 [If employees]
 - * If not previously provided

NOTE: **If you intend to apply for a Second Draw loan based on a 25% reduction in receipts, SBA rules require that you use the proceeds of your First Draw loan and any increased First Draw amount prior to applying for a Second Draw.**

Requests are subject to review and not guaranteed

or email to: firstdrawrecalculation@fcsamerica.com

For questions please call 877-966-7778, option 2

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