OMB Approved No. 1505-0263 Expiration Date: 09/30/2020

PAYROLL SUPPORT APPLICATION FORM for Air Carriers and Contractors

7 m Carriers and Contracto

March 30, 2020

To receive approval of their applications as soon as possible, applicants should submit their completed application materials not later than 11:59 p.m. EDT on April 2, 2020 to PayrollSupportApplications@treasury.gov. Applications received after April 2 will be considered, but may not receive approval as quickly. Applications received after 11:59 p.m. EDT on April 27, 2020 may not be considered for approval by the Treasury Department, but the Treasury Department may, in its discretion and subject to the availability of funds, consider such applications for approval.

The definitions of the terms contained in this application appear in Division A, Title IV, Subtitle B of the Coronavirus Aid, Relief and Economic Security Act, Pub. L. 116-136 (Mar. 27, 2020) (the "Act"), and in the Guidelines and Application Procedures for Payroll Support to Air Carriers and Contractors under Division A, Title IV, Subtitle B of the Act (the Guidelines).

APPLICANT INFORMATION				
Applicant Name				
Applicant's Taxpayer ID Number				
Applicant's Address				
Contact Person Name				
Contact Person Title				
Contact Person Phone				
Contact Person E-mail				

DELIBERATIVE PRE-DECISIONAL SENSITIVE WORKING DRAFT 3-30-20

		APP	L]	ICANT T	Y	PE		
Type of applicant (choose on	e):						
Passenger Air Carrier	Cargo Air C		Carrier			Contractor		
f a contractor to a o	carrier or	airport, identi	ify				ı (choose all that apply)
Catering	Unloa	ading and loading of operty on craft		Assistance for Disabled Passengers			Security	
Airport Ticketing and Check-In	Groun of Air	d-Handling craft	Sanitat		Aircraft Cleaning, Sanitation, Waste Removal			Other (specify)
f a contractor to a c ervices are provide		airport, identi	ify	the prima	ry	y or largest carri	ier	or airport to which
Name of Carrier o	r Airport							
dentify any parent	companie	es and affiliate	es (of the app	li	cant:		
Names of Parent C and Affiliates	Companie	5						

FINANCIAL INSTITUTION INFORMATION

(For electronic payment. The account listed below should be the same account used by the applicant to make tax payments to the IRS.)

Routing Transit Number	
Applicant's Account Number	
	Checking or savings (circle one)
Financial Institution Name	
Financial Institution Address	
Financial Institution Telephone Number	

EMPLOYMENT LEVELS

Identify the annual average number of U.S. employees for the applicant in 2019, and the number of U.S. employees the applicant has involuntarily furloughed, laid off, or subjected to other involuntary employee reductions after March 1, 2020.

Average Number of Employees 2019	
Involuntary Reductions After March 1, 2020	

AWARDABLE AMOUNTS

The maximum potential amount of payroll assistance that may be awarded to an applicant is equal to the compensation paid by the applicant to its employees from April 1, 2019, through September 30, 2019, as determined by the Treasury Department in its sole discretion, referred to as the "awardable amount." Compensation includes salaries, wages, bonuses, and similar payments.

For air carriers that report salaries and benefits to the U.S. Department of Transportation (DOT) under 14 CFR part 241: the awardable amount is based on the amounts reported to DOT, and the air carrier should not complete the table below.

For air carriers and contractors that do NOT report salaries and benefits to DOT under 14 CFR part 241: the applicant MUST complete the following table, which shall be considered a sworn financial statement of the applicant, and supply supporting documentation as the Secretary of the Treasury may require.

In completing the table below, amounts must reflect ONLY employees as defined in the Act and the Guidelines.

DELIBERATIVE PRE-DECISIONAL SENSITIVE WORKING DRAFT 3-30-20

Month	Salaries and Wages	Benefits	Other Compensation	Monthly Total
April 2019			Compensation	
May 2019				
June 2019				
July 2019				
August 2019				
September 2019				
			Total	

TAXPAYER PROTECTION

Each applicant must identify financial instruments to be issued to the Secretary that, in the sole determination of the Secretary, provide appropriate compensation to the Federal Government for the provision of payroll support. Such financial instruments may include warrants, options, preferred stock, debt securities, notes, or other financial instruments issued by the applicant.

Each applicant must provide information in the following table that describes in sufficient detail its proposed financial instruments under this requirement. Each applicant will be notified whether the proposed financial instruments are acceptable before application approval.

Applicant Name:
Type of the Financial Instrument:
Amount, Value, or Price of the Financial Instrument, as Appropriate:
Seniority/Priority of the Financial Instrument Relative to Other Equity/Debt of Applicant:
Term or Duration of the Financial Instrument, if Applicable:
Other Terms and Conditions that Could Affect the Value of the Financial Instrument:

ADDITIONAL INFORMATION

Applicants MUST include with their application their completed IRS Form 941 "Employers Quarterly Federal Tax Return" covering the period April 1, 2019 to September 30, 2019.

CERTIFICATION

I certify under penalty of perjury that the information and certifications provided in the application and its attachments are true and correct. WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil penalties. (18 U.S.C. §§ 287, 1001; 31 U.S.C. §§ 3729, 3802).

Name of First Certifying Official	
Title of First Certifying Official	
Signature of First Certifying Official	
Name of Second Certifying Official	
Title of Second Certifying Official	
Signature of Second Certifying Official	
Applicant Name	
Date	

PAPERWORK REDUCTION ACT NOTICE

The information collected will be used for the U.S. Government to process requests for support. The estimated burden associated with this collection of information is two hours per response. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to the Office of Privacy, Transparency and Records, Department of the Treasury, 1500 Pennsylvania Ave., N.W., Washington, D.C. 20220. DO NOT send the form to this address. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid control number assigned by OMB.