

ESOP Eligibility Tool Intake Form &

The New Jersey Economic Development Authority (NJEDA) has approved **X** vendors to provide feasibility study services for businesses interested in establishing Employee Stock Ownership Plan (ESOPs) in New Jersey. These services are funded by Wealth Disparities Initiatives allocations. This Eligibility Tool allows interested parties to express potential interest in acquiring these services. The NJEDA will cover 90% of the total cost of feasibility study services through the approved vendors.

Everyone is encouraged to use this form to understand the factors involved in setting up an ESOP. Please note completing the form does not constitute a guarantee of your eligibility or compatibility with an approved vendor, nor does it ensure a successful transition to an ESOP.

Frequently Asked Questions:

Who should fill out this form?

- Businesses that have over 20 full-time, W-2 employees.
- Businesses that can demonstrate a steady cash flow, sustainable revenues.
- Businesses or business owners who are exploring succession planning options to execute in the next 1 to 5 years, particularly if there is an interest to sell the business to the company's employees.

Who is eligible for these services?

- Businesses that are located in New Jersey.
- Businesses that are in good standing with all New Jersey agencies.

What is a Feasibility Study and what services are included?

- Services may include, but may not be limited to, the analysis of a business' earnings with interest, taxes, depreciation, and amortization added back in (EBITDA), management team structure, structure and number of employees, value of a company, existing employee benefits, transaction structure, and any tasks that may be necessary to execute to assist a business in achieving the optimal metrics for an ESOP transition. Services will, at minimum, produce an in-depth, written assessment of the companies outcomes based on the above measures.
- Services for individuals companies, through this Program, may vary depending on the individual business needs and structure. If the business wishes to participate in the Program with a approved vendor, a scope of work and contract between the vendor and the potential client will be executed.

What are the next steps?

- After filling out this form, individuals who make the inquiry and select that they would like to be contacted will receive an email confirming they would like to proceed. If the inquiry was not initiated by the owner(s) of the business, we will request the contact information of the owner(s) to confirm that they would like to proceed.
- Following confirmations, the business will be assigned to one of the approved vendors for an introductory meeting.
- The assigned vendor will then create a proposal, and, if agreeable, will enter into a contract with the interested business to conduct feasibility study services.

Continuation of the process by the interested party will be at the discretion of the approved vendor. Some businesses may meet certain criteria but be deemed incompatible with employee ownership transitions.

Requir	ed
1. Yc	our Name *
2. Yo	ur Email *
2 Λ,	e you the business owner or an employee of the business? *
3. AI	Owner
	Co-Owner
) Employee
	Board Member
	Business Advisor
) Other
4. Ho	ow many individuals and/or entities currently own the business?
) 1
) 2
) 3
) 4
) 5
) 6
	7+
5 т:-	tle of Applicant/Role with Applying Business *
J. 11	ie of Applicant, note with Applying business

6.	Is the business located in New Jersey? *
	Yes
	○ No
7.	Business Name *
8.	Type of Business (i.e. sole proprietor, partnership, LLC, etc.) *
9.	Address of Business *
10.	How many full-time, w-2 employees does the business currently employ? *
	☐ 1-20
	<u>21-50</u>
	<u></u>
	<u> </u>
	201-500
	<u> </u>
11.	How many part-time employees does the business currently employ? *
	1-19
	20-49
	50-99
	100-199
	200-499
	500+

		many seasonal and/or temporary employees does the business currently employ? *
	\bigcirc	1-19
	\bigcirc	20-49
	\bigcirc	50-99
	\bigcirc	100-199
	\bigcirc	200-499
	\bigcirc	500+
13.		s the business have a sustainable business model (i.e. steady cash flow for last several s, sustainable revenues, etc.) *
	\bigcirc	Yes
	\bigcirc	No
14.	How	familiar are you with Employee Stock Ownership Plans (ESOP)? *
14.	How	familiar are you with Employee Stock Ownership Plans (ESOP)? * Very Familiar
14.	How	
14.	How	Very Familiar
14.	How	Very Familiar Somewhat Familiar
14.	How	Very Familiar Somewhat Familiar Not at all Familiar
	○ ○ ○ ○ ○ Why	Very Familiar Somewhat Familiar Not at all Familiar
	○ ○ ○ ○ ○ Why	Very Familiar Somewhat Familiar Not at all Familiar Our business has conducted a feasibility study are you interested in exploring ESOPs? Select all that apply. Please feel free to select
	○ ○ ○ ○ ○ Why	Very Familiar Somewhat Familiar Not at all Familiar Our business has conducted a feasibility study are you interested in exploring ESOPs? Select all that apply. Please feel free to select ner" and detail any important information. *
	○ ○ ○ ○ ○ Why	Very Familiar Somewhat Familiar Not at all Familiar Our business has conducted a feasibility study are you interested in exploring ESOPs? Select all that apply. Please feel free to select her" and detail any important information. * Succession Planning

16.	Wha	at is your expected timeline for sale of the business? *
	\bigcirc	Short term (within 12 months)
	\bigcirc	1 - 5 Years
	\bigcirc	Long Term (5+ years)
17.	Wha	at benefits, if any, does the company offer to full-time employees? *
		Retirement Savings Plans (401k, etc.)
		Profit Sharing Programs
		Health Insurance Coverage
		Dental and/or Vision Care
		Wellness Programs
		Paid Time Off
		Parental Leave
		Tuition Reimbursement
		Other
18.	Add	you in good standing with all New Jersey government agencies and authorities? itionally, the business is in compliance with all applicable statutes and regulations (i.e. tax gations, active licenses, etc.) *
	\bigcirc	Yes
	\bigcirc	No
	\bigcirc	Not Sure
19.	Are	you and/or your business a party to any ongoing litigation and/or lawsuit? *
	\bigcirc	Yes
	\bigcirc	No
	\bigcirc	Not Sure

20.	Businesses that meet criteria, based on the responses to these questions, can request that NJEDA share the information with the approved vendors if interested in receiving feasibility study services from an approved vendor.
	Are you interested in seeking feasibility study services from the approved vendors with supplemental state funding offered through NJEDA? If so, NJEDA will share your contact information and the data gathered in this form with the approved vendors. *
	Yes, please share the information from this form and my contact information with vendors. I am interested in receiving financial assistance from the NJEDA for feasibility study services offered by the vendors.
	No, I am not interested in receiving financial assistance for feasibility study services.

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