2018 Small Business Credit Survey of the Federal Reserve Banks

INTRODUCTION

Thank you for participating in the 2018 Small Business Credit Survey.

This voluntary survey is sponsored solely by the Federal Reserve Banks. **The questions are best answered by an owner or key financial decision maker** and will take about 10 minutes.

Survey responses will be aggregated for research and analysis. The Federal Reserve Banks will not disclose individual or identifiable survey responses except to trusted service providers to prepare data for analysis under strict confidentiality guidelines or if required by law or legal process. The Federal Reserve Banks may make anonymized data publicly available.

By taking this survey, you agree to these uses.

DEMOGRAPHICS

First, we have some general questions about your business.

| 1. | Is your business currently operating? |
|----------|---|
| | Yes |
| | No, business is not yet started |
| | No, business is <i>temporarily</i> closed |
| | No, business has <i>permanently</i> closed or been sold/ transferred |
| If Is yo | ur business currently operating = No, business is temporarily closed: Why is your business temporarily closed? Select all that apply. |
| | Business is seasonal |
| | Lack of demand |
| | Cannot secure financing to fulfill contract(s) |
| | Owner tending to other matters (e.g. family, medical reasons) |
| | Business is moving, being renovated, etc. |
| | Extreme weather event or natural disaster |
| | Other. Please specify: |

| 3. | How long has your business been temporarily closed? |
|-----------|---|
| | 12 months or less |
| \subset | More than 12 months |
| 4. | In what year was your business established? (YYYY) |
| 5. | Which state or territory is your headquarters located in? > Dropdown list of all states |
| 6. | ZIP code? |
| 7. | Which industry is your business in? |
| \subset | Manufacturing |
| C | Finance or insurance |
| C | Wholesale trade |
| C | All other industries |
| | Unsure |
| No | Please describe what your business generally does. you type, a list will appear. Select your business' industry or write in your own description. Ite: this screen may take a few seconds to load. If you encounter a connection error message, ock 'retry'. |
| | h industry is your business in? = Finance or insurance: Is your business a lender? E.g. equity investment firm, financial institution, etc. |
| C |) Yes |
| C | No No |
| | we have a few questions about the approximate size of your business. Does your business currently have any paid employees, excluding owner(s) and contract workers? |
| |) Yes |
| |) No |
| | Unsure. Please explain: |

If Does your business currently have any paid employees, excluding owner(s) and contract workers? = Yes OR Unsure:

11. How many employees does your business have?

| | Number (If none, enter 0) |
|--|---------------------------|
| Full-time employees (30+ hours/ week) | |
| Part-time employees (less than 30 hours/ | |
| week) | |

| 12. Does your business use any contract workers? |
|---|
| ○ Yes |
| ○ No |
| Ounsure |
| 13. How many owners does your business have? Only include those individuals who own a share of the business and/or profits. |
| O 1 |
| ○ 2 |
| Оз |
| O 4 |
| O 5 or more |

PERFORMANCE

| 14. Roughly, what were your business' total revenues in 2017? | | | | | |
|--|--|----------------------------------|-----------|--|--|
| \$25,000 or less | | | | | |
| \$25,001 - \$100,00 | | | | | |
| \$100,001 - \$500,0 | | | | | |
| \$500,001 - \$1,000,000 | S \$500,001 - | | | | |
| \$1,000,001 - \$5,0 | 00,000 | | | | |
| O \$5,000,001 - \$10, | 000,000 | | | | |
| O More than \$10,00 | O More than \$10,000,000 | | | | |
| O Unsure or decline | O Unsure or decline to answer | | | | |
| 15. At the end of 201 | 15. At the end of 2017, was your business operating at a profit, break-even, or loss? | | | | |
| O At break-even | | | | | |
| O At a profit | | | | | |
| O At a loss | O At a loss | | | | |
| Unsure or decline to answer Profit is the financial benefit when the amount of revenue gained from business activity is greater than business expenses and costs. | | | | | |
| 16. How did the follo | wing change over the past Decreased | t 12 months? No change | Increased | | |
| Revenue | 0 | 0 | 0 | | |
| Number of employees | \circ | \circ | \circ | | |

| 17. How did the fo | ollowing change over | the past 12 months | ? | | |
|--|--------------------------------------|---|-----------|---|---------------------------------------|
| | Decreased a lot (4% or greater | Decreased a little (less than 4%) | No Change | Increased a little (less than 4%) | Increased a lot (4% or greater) |
| Prices the business pays for products/services | 0 | | 0 | 0 | 0 |
| Prices the business charges | 0 | \circ | 0 | 0 | 0 |
| Profitability | \circ | 0 | \circ | \circ | 0 |
| Making payments on debt Paying operating expenses (including wages) Purchasing inventory or supplies to fulfill contracts Credit availability Other financial challenge. Please specify: Did not experience any financial challenges If Has your business experienced any financial challenges during the past 12 months? ≠ Did not experience any financial challenges: 19. What actions did your business take to deal with the issue(s)? Select all that apply. Made a late payment or did not pay Used personal funds Took out additional debt | | | | | |
| Cut staff, hou | rs, and/or downsized | loperations | | | |
| Other. Please | specify: | - | | | |
| Unsure | | | | | |

| | Decrease | No change | Increase |
|---|------------|------------|----------|
| Revenue | 0 | 0 | 0 |
| lumber of employees | \circ | \circ | \circ |
| | | | |
| | | | |
| | FINIANCING | CENEDAL | |
| a have a few questions abo | FINANCING | | |
| We have a few questions about how your business is financed. 21. How does your business PRIMARILY fund its operations? | | | |
| | | perations: | |
| Retained business ea | rnings | | |
| O Personal funds of ow | ner(s) | | |
| External financing | | | |
| | | | |

| | 22. Which of the following forms of financing, if any, does your business regularly use or carry an outstanding balance on? Select all that apply. |
|------------|--|
| | Loan or line of credit |
| | Merchant cash advance |
| | Credit card |
| | Trade credit |
| | Equity investment |
| | Factoring (sale of accounts receivable) |
| | Home equity line of credit |
| | Leasing |
| | Other. Please specify: |
| | Unsure |
| | Business does not use external financing |
| | |
| | hich of the following forms of financing, if any, does your business regularly use or carry utstanding balance on? = Credit card: |
| : | 23. Which type of credit card is used to fund your business? |
| \bigcirc | Personal card ONLY |
| \bigcirc | Business card ONLY |
| \bigcirc | BOTH personal and business cards |
| : | 24. Does your business have any debt outstanding? |
| \bigcirc | Yes |
| \bigcirc | No |
| \bigcirc | Unsure |
| | |

| If does your business have any debt outstanding? = Yes: 25. How much total debt outstanding does your business have? |
|---|
| ○ \$25,000 or less |
| <pre>\$25,001 - \$100,000</pre> |
| \$100,001 - \$250,000 |
| \$250,001 - \$1,000,000 |
| O More than \$1,000,000 |
| Ounsure |
| If does your business have any debt outstanding? = Yes: 26. Were any of the following used as a guarantee or as collateral to secure this debt? Select all that apply |
| Personal assets |
| Personal guarantee |
| Business assets |
| Portions of future sales ² |
| Other. Please specify: |
| Unsure |
| None |
| ² Including percentage of future credit card receivables for payment of merchant cash advances |
| 27. Did your business APPLY for any financing in the <u>past 12 months</u> ? Borrowing, leasing, or requesting equity investments - excluding financing provided by owner(s) of business |
| Yes, completed at least one application |
| Started credit search or application process but didn't complete |
| O Did not apply |
| Ounsure |

process but didn't compete OR Did not apply: 28. What was the PRIMARY reason your business DID NOT apply for financing? Not needed; had sufficient funding O Did not think application would be approved O Did not want to accrue debt Credit cost was too high Application process is too difficult or confusing Other. Please specify: If the What was the PRIMARY reason your business DID NOT apply for financing? = Did not think application would be approved: **29.** What were the likely reasons your business would not be approved? *Select all that apply.* Low credit score Insufficient credit history Insufficient collateral Weak business performance Unsure Other. Please specify: **APPLICANT BRANCH: INITIAL** If Did your business APPLY for financing in the past 12 months? = Yes, completed at least one application: **30.** For what purpose(s) was your business seeking financing? *Select all that apply.* Meet operating expenses Expand business, pursue new opportunity, or acquire business assets Replace capital assets or make repairs Refinance or pay down debt Other. Please specify: _____

If Did your business APPLY for any financing in the past 12 months? = Started credit search or application

| 31. How much TOTAL financing was your business SEEKING in the last 12 months? |
|--|
| ○ \$25,000 or less |
| \$25,001 - \$100,000 |
| \$100,001 - \$250,000 |
| \$250,001 - \$1,000,000 |
| O More than \$1,000,000 |
| O Unsure |
| 32. How much of the TOTAL financing dollars that your business sought in the last 12 months did you obtain |
| O All (100%) |
| O Most (51%-99%) |
| O Some (1%-50%) |
| O None (0%) |
| O Unsure |
| f business did not receive all the financing sought: 33. Why did your business not obtain all of the financing sought? Select all that apply. |
| At least some of the financing was not approved |
| Application(s) pending |
| Declined some or all of the approved financing |
| Other reason. Please specify: |

If Why did your business not obtain all of the financing sought? = At least some of the financing was not approved: **34.** What were the likely reasons your business was not approved for the full amount of financing it sought? Select all that apply. Low credit score Too new/insufficient credit history Insufficient collateral Too much debt already Weak business performance Other. Please specify: Unsure **35.** In the past 12 months, what types of financing did your business apply for? Select all that apply. Loan or line of credit Merchant cash advance Credit card Trade credit Home equity line of credit **Equity investment** Factoring (sale of accounts receivable) Leasing Other. Please specify: _____ Unsure If in the past 12 months, what types of financing did your business apply for? = Credit card **36.** Which type of credit card did your business apply for? Personal card ONLY

Business card ONLY

BOTH personal and business cards

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RECENT CREDIT APPLICATIONS

If In the past 12 months, what types of financing did your business apply for? = Loan or line of credit

OR Merchant cash advance:

| 3/ | . III <u>tile past 12 months,</u> now ma | dic | you submit? | |
|---|--|--|---|--|
| Now, we'd like to ask about your business' loan, line of credit, and/or cash advance applications submitted in the past 12 months. | | | | |
| <u>Beginning with your most recent application</u> , tell us about each loan, line of credit (LOC), and/ or cash advance your business applied for in the past 12 months. | | | | |
| | Product: SBA loan/LOC Business loan Business LOC Personal loan Mortgage Auto/equipment loan Cash advance HELOC Other product | Source: Large bank Small bank Credit union Nonbank online lender CDFI Other source | Share approved: All (100%) Most (51%-99%) Some (1%-50%) None Pending Unsure | |
| 1 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 38 | 3. How much financing did your b | usiness apply for in your {most rec recent application} (the {PRODUC | | |
| | \$25,001 - \$100,000 | | | |
| | \$100,001 - \$250,000 | | | |
| | \$250,001 - \$1,000,000 | | | |
| | More than \$1,000,000 | | | |
| | Unsure | | | |

If {SOURCE 1 | 2} = Nonbank online lender: **39.** Which type of online lender did you apply to? Retail/payments processor (e.g. Paypal Working Capital, Square Capital, Amazon Capital Services) Peer-to-peer lender (e.g. Lending Club, Prosper, Funding Circle) Merchant cash advance lender (e.g. RapidAdvance, CAN Capital, BizFi) Oirect lender (e.g. OnDeck, Kabbage, Fundation, Blue Vine) Other. Please specify: _____ **40.** Why did your business pursue this financing option (the {PRODUCT 1 | 2 from the SOURCE 1 | 2})? Select all that apply. Speed of decision or funding No collateral was required Chance of being funded Cost or interest rate Flexibility of product Existing relationship with lender Recommendation or referral Other. Please specify: _____

| | Which resources, if any, provided the recommendation or referral that influenced your decision to borrow from the {SOURCE 1 2} for the {PRODUCT 1 2}? Select all that apply. |
|-----|--|
| | Lender |
| | Accountant/tax preparer |
| | Broker |
| | Business consultant |
| | Nonprofit business advisor |
| | Auto/ equipment dealer |
| | Advertisement |
| | Website that compares financing options |
| | Other. Please specify: |
| 42. | Did your business experience any challenges in applying for the {PRODUCT 1 2}? Select all that apply. |
| | High interest rate |
| | Unfavorable repayment terms |
| | Long wait for credit decision or funding |
| | Difficult application process |
| | Lack of transparency |
| | Other challenges. Please specify: |
| | Experienced no challenges |

| 43. Overall, was your business | s satisfied or dissatisfi | ed with the {SOURCE 1 2} where you applied for the {PRODUCT 1 2}? |
|--|---------------------------|---|
| Satisfied | | |
| O Neutral | | |
| Obissatisfied | | |
| If Which of the following form | EXISTING I | DEBT does your business regularly use or carry an |
| | | f credit OR Merchant cash advance; |
| The state of the s | | g did your business apply for? ≠ Loan or line of |
| | credit NOR Merchant | |
| | | Il us about each loan, line of credit (LOC), and/ |
| than two, tell us about the two mo | • | or has recently used. If your business holds more |
| than two, ten us about the two me | ost recent. | |
| If you only have one loan, LOC, and | d/or cash advance. co | omplete the first row only . |
| Product: | ., | Source: |
| SBA loan/LOC | | Large bank |
| Business loan | | Small bank |
| Business LOC | | Credit union |
| Personal loan | | Nonbank online lender |
| Mortgage | | CDFI |
| Auto/equipment loan | | Other source |
| Cash advance | | |
| HELOC | | |
| Other product | | |
| 1 | | |
| 2 | | |
| If {SOURCE 1 2} = Nonbank online 44. From which type of nonban | | ou obtain the {PRODUCT 1 2}? |
| | (e.g. Paypal Working | g Capital, Square Capital, Amazon Capital |
| Services) | | |
| O Peer-to-peer lender (e.g. Le | ending Club, Prosper, | Funding Circle) |
| O Merchant cash advance le | nder (e.g. RapidAdvar | nce, CAN Capital, BizFi) |
| O Direct lender (e.g. OnDeck | , Kabbage, Fundation | , Blue Vine) |
| Other. Please specify lende | er: | |

| | 45. How much financing did your business obtain from the $\{SOURCE\ 1\ \ 2\}$ for the PRODUCT $\{1\ 2\}$? |
|------------|--|
| \bigcirc | \$25,000 or less |
| 0 | \$25,001 - \$100,000 |
| \bigcirc | \$100,001 - \$250,000 |
| \bigcirc | \$250,001 - \$1,000,000 |
| \bigcirc | More than \$1,000,000 |
| 0 | Unsure |
| | |
| | 46. Why did your business pursue this financing option (the {PRODUCT 1 2 from the SOURCE 1 2})? Select all that apply. |
| | Speed of decision or funding |
| | No collateral was required |
| | Chance of being funded |
| | Cost or interest rate |
| | Flexibility of product |
| | Existing relationship with lender |
| | Recommendation or referral |
| | Other. Please specify: |

If Why did your business pursue this financing option... = Recommendation or referral: 47. Which resources, if any, provided the recommendation or referral that influenced your decision to borrow from the {SOURCE 1 | 2}? Select all that apply. Lender Accountant/tax preparer Broker **Business consultant** Nonprofit business advisor Website that compares financing options Auto/ equipment dealer Advertisement Other. Please specify: _____ **48.** Has your business experienced any challenges in obtaining the {PRODUCT 1|2}? Select all that apply. High interest rate Unfavorable repayment terms Long wait for credit decision Difficult application process Lack of transparency

Other challenges. Please specify: _____

Experienced no challenges

| 49. Ov | rerall, was your business satisfied or dissatisfied with the {SOURCE 1 2} where you applied for the {PRODUCT 1 2}? |
|---------------|---|
| O Sat | tisfied |
| O Ne | utral |
| O Dis | ssatisfied |
| | FINAL DEMOGRAPHICS |
| Last, we h | ave a few general questions about your business and the characteristics of the owner(s). |
| 50. Do | pes your business rely on a business credit score or does it use an owner's personal credit score? |
| OBu | siness score |
| Ov | vner's personal score |
| Ово | th business score AND personal score |
| O Ur | sure or neither |
| Business so | ur business rely on a business credit score or does it use an owner's personal credit score? = core OR Both business score AND personal score: nat would you say is your firm's business credit score? |
| O 80 | -100 |
| O 50 | -79 |
| O 0-4 | 49 |
| O Ur | nsure |
| | ur business rely on a business credit score or does it use an owner's personal credit score? = ersonal score OR Both business score AND personal score: |
| 52. Wh | nat would you say is the owner's personal credit score? |
| O Ab | ove 760 |
| O 72 | 0-760 |
| O 68 | 0-719 |
| O 62 | 0-679 |
| Ове | low 620 |
| O Un | sure |

If How many owners does your business have? =1, 2, 3, 4, 5 or more:

53. You previously indicated that your business has [NUMBER OF OWNERS from Q13]. What is the race and ethnicity of each owner? *Please complete the entire table.*

| | Ownership share of business | Ethnicity | | Race | | | | | |
|-------------|-----------------------------|-----------|-----------|-------|----------|----------|-----------|------------|-------|
| | Enter a | Hispanic | Not | White | Black or | Asian or | American | Middle | Other |
| | percentage | or Latino | Hispanic | | African | Pacific | Indian or | Eastern or | race |
| | (0-100): | | or Latino | | American | Islander | Alaskan | North | |
| | | | | | | | Native | African | |
| Owner | | | | | | | | | |
| #1 | | | | | | | | | |
| Owner #2 | | | | | | | | | |
| Owner #3 | | | | | | | | | |
| Owner #4 | | | | | | | | | |

If there are more than four owners, tell us about the four persons with the **greatest ownership share**.

If Race = American Indian or Alaskan Native: 54. Is your business headquartered in a Native American reservation? Yes. Please specify the reservation: No 55. How old is the primary decision maker of the business? Under 25 25-35 36-45 46-55 56-65 Over 65

| 56. What is the | e highest degree or | level of school complete | ed by the primary do | ecision maker of the business? | | |
|--|--|--|----------------------|--------------------------------|--|--|
| O High school diploma, GED, or less | | | | | | |
| O Technical, tr | O Technical, trade, or vocational school | | | | | |
| O Associate de | egree or some colle | ge | | | | |
| O Bachelor's d | egree | | | | | |
| O Master's, pr | ofessional or docto | ral degree | | | | |
| | | stablished? ≥ 2012; OR if) and contract workers? | | s currently have any | | |
| 57. Did the owne | r start or acquire th | nis business because he c | or she lacked other | employment options? | | |
| O Yes | | | | | | |
| ○ No | | | | | | |
| Ounsure | | | | | | |
| 58. What portion of your business is owned by: | | | | | | |
| | . , , | • | | | | |
| | None (0%) | Less than half (1%- 49%) | Half (50%) | More than half (51+%) | | |
| Someone not born a U.S. citizen? | | Less than half (1%- | Half (50%) | | | |
| Someone not born | | Less than half (1%- | Half (50%) | | | |
| Someone not born a U.S. citizen? A woman/ | | Less than half (1%- | Half (50%) | | | |
| Someone not born a U.S. citizen? A woman/ women? A veteran/ | None (0%) | Less than half (1%- | Half (50%) | | | |
| Someone not born a U.S. citizen? A woman/ women? A veteran/ veterans? | None (0%) | Less than half (1%-49%) | Half (50%) | | | |
| Someone not born a U.S. citizen? A woman/ women? A veteran/ veterans? | None (0%) | Less than half (1%-49%) | | (51+%) | | |
| Someone not born a U.S. citizen? A woman/ women? A veteran/ veterans? 59. Is your busined Certified minority | None (0%) | Less than half (1%-49%) | | (51+%) | | |

If In what year was your business established? ≥ 2012; OR if Does your business currently have any paid employees, excluding owner(s) and contract workers? = No; OR if How many employees does your business have? < 5:

60. Is your business...

| | Yes | No | Unsure |
|---|--------------------------------------|-------------------------------|----------------------------------|
| Operated out of a home? | 0 | 0 | \circ |
| Legally incorporated ¹ ? | 0 | \circ | \circ |
| The primary source of income for one or more of the owner(s)? | 0 | \circ | |
| Legally incorporated refers to bu | sinesses that are legal entities sep | parate from the owner(s). | |
| 61. In 2017, which of | the following types of cust | omers accounted for 10% | or more of this business' |
| Individuals | total s | ales of goods and/or servi | ces? Select all that apply. |
| Federal governme | ent, including military | | |
| State and local go | overnment, including schoo | l districts, transportation a | uthorities, etc. |
| Other businesses | and/or organizations, inclu | iding distributors of yourp | roduct(s) |
| 62. In 2017, did your b | usiness export any goods a | nd/or services outside the | United States? |
| O Yes | | | |
| ○ No | | | |
| Ounsure | | | |
| 63. Which of the fol | lowing statements best des | scribes your preference for | the future size of this business |
| Much larger | | | |
| O Somewhat larger | | | |
| Same size | | | |
| O Smaller | | | |
| O Plan to sell/ close | | | |
| O Uncure Please ex | nlain· | | |

If Which state or territory is your headquarters located in? = West Virginia

| 64. On whom do you rely most for your business strategy and planning? |
|--|
| O Friends or family |
| Business associate or industry peers |
| O Financial planner or broker |
| O Bookkeeper or accountant |
| Attorney |
| Business coach or consultant |
| O I only rely on myself |
| Other. Please specify: |
| 65. Do you have any comments about the availability of business financing or general business conditions? |
| 66. Business name: |
| 67. Email Address (used only for survey-related purposes). You will receive a copy of the final report once it is released |
| Thank you for your valuable input. Your answers will bring small business issues to the attention of policymakers. Please click 'Continue' to answer a few questions on special topics. This should take abou 2 minutes to complete. |
| ○ Continue |
| C End survey |
| |

SPECIAL TOPIC: WORKFORCE DEVELOPMENT

| If Does you No: | r business currently have any paid employees, excluding owner(s) and contract workers? = |
|--------------------|--|
| 68. Are | you an independent contractor and/or 1099 worker? |
| O Yes | 5 |
| O No | |
| If Does you No: | r business currently have any paid employees, excluding owner(s) and contract workers? = |
| | e the majority of your customers found or sales made through an app or online marketplace (e.g. Uber, Thumbtack, Taskrabbit, Upwork, Ebay, Etsy)? |
| O Yes | 5 |
| O No | |
| If Does you No: | r business currently have any paid employees, excluding owner(s) and contract workers? = |
| | you currently have health insurance? |
| O Yes | 5 |
| O No | |

| If Do yo | ou currently have health insurance? = Yes: What is the source of your health insurance? Select all that apply. |
|-----------------|---|
| | VA Benefits or Tricare |
| | Medicare or Medicaid |
| | Spouse's or parent's health insurance plan |
| | Current employer |
| | Prior employer pension or retirement/ severance package |
| | Pay for my own insurance (including ACA) |
| | State-run health insurance system (e.g. MassHealth) |
| | Labor union |
| | Other. Please specify: |
| | ou currently have health insurance? = No: Why do you currently lack health insurance coverage? Select all that apply. |
| | Healthy/ not currently needed |
| | Too expensive |
| | No option of employer/ union plan |
| | Process of obtaining is confusing/ difficult |
| | Application was denied |
| | Application is pending |
| | No options in ACA marketplace in my area |
| | Other. Please explain: |
| If Does Yes: | your business currently have any paid employees, excluding owner(s) and contract workers? = |
| | Has your business attempted to hire in the past 12 months? |
| \circ | Yes |
| \circ | No |
| \bigcirc | Unsure |

If Has your business attempted to hire in the past 12 months? = Yes:

74. In the past 12 months, how difficult has it been to fill jobs that require:

| | Very difficult | Somewhat difficult | Not difficult | N/A | Unsure |
|-------------------------------------|----------------|-----------------------|---------------|-----|--------|
| AT LEAST a bachelor's degree | 0 | 0 | 0 | 0 | 0 |
| LESS than a bachelor's degree | 0 | \circ | 0 | 0 | 0 |

If In the past 12 months, how difficult has it been to fill jobs that require AT LEAST a bachelor's degree = Very difficult OR Somewhat difficult:

| , | 75. What about the applicant pool or hiring environment has made it difficult to fill jobs that require AT LEAST a bachelor's degree? <i>Select all that apply.</i> |
|---|---|
| | Too few applicants |
| | Competition from other employers |
| | Lack of basic math, reading, or writing skills |
| | Lack of soft skills. Please specify: |
| | Lack of job-specific skills, education, or experience . Please specify: |
| | Difficulty passing background check or credit check |
| | Difficulty passing drug test |
| | Other. Please specify: |
| | Unsure |

If In the past 12 months, how difficult has it been to fill jobs that require AT LEAST a bachelor's degree = Very difficult OR Somewhat difficult:

76. What changes has your business made IN RESPONSE to the difficulty filling jobs that require AT.

| /b. | LEAST a bachelor's degree? Select all that apply. |
|------|--|
| | Made no changes |
| | Increased starting pay |
| | Loosened job requirements |
| | Offered more training |
| | Restructured existing employee responsibilities |
| | Invested more in labor-saving technologies |
| | Enhanced benefits or increased non-wage compensation |
| | Other. Please specify: |
| | Unsure |
| Very | e past 12 months, how difficult has it been to fill jobs that require LESS THAN a bachelor's degree difficult OR Somewhat difficult: 7. What about the applicant pool or hiring environment has made it difficult to fill jobs that require LESS than a bachelor's degree? Select all that apply. |
| | Too few applicants |
| | Competition from other employers |
| | Lack of basic math, reading, or writing skills |
| | Lack of soft skills. Please specify: |
| | Lack of job-specific skills, education, or experience. Please specify: |
| | Difficulty passing background check or credit check |
| | Other. Please specify: |
| | Difficulty passing drug test |
| | Unsure |

If In the past 12 months, how difficult has it been to fill jobs that require LESS THAN a bachelor's degree = Very difficult OR Somewhat difficult:

| 78. | . What changes has your business made IN RESPONSE to the difficulty filling jobs that require LESS than a bachelor's degree? <i>Select all that apply.</i> |
|---|---|
| | Made no changes |
| | Increased starting pay |
| | Loosened job requirements |
| | Offered more training |
| | Restructured existing employee responsibilities |
| | Invested more in labor-saving technologies |
| | Enhanced benefits or increased non-wage compensation |
| | Other. Please specify: |
| | |
| | Unsure |
| If Does Yes: | your business currently have any paid employees, excluding owner(s) and contract workers? = |
| · • • • • • • • • • • • • • • • • • • • | 79. What benefits does your business offer to the MAJORITY of employees? <i>Select all that apply.</i> |
| | Health insurance |
| | Parental leave |
| | Paid time off |
| | 401K investment option(s) |
| | Equity participation (e.g. stock options of a profit sharing program) |
| | Bonuses |
| | Flexible scheduling |
| | Remote work |
| | Fitness center/membership |
| | Volunteer programs |
| | Other. Please specify: |
| | Unsure |
| | Not applicable |

| f Does your business currently have any paid employees, excluding owner(s) and contract worke | rs? = | |
|--|-------|--|
| 'es: 80. How does your business train and develop employees? Select all that apply. | | |
| On-the-job training performed by your business | | |
| Training conducted by an outside organization | | |
| Reimbursement for employee-directed continuing education | | |
| Other. Please specify: | | |
| Unsure | | |
| | | |
| ∪ N/A | | |
| If Does your business currently have any paid employees, excluding owner(s) and contract workers? = Yes: | | |
| 81. What level of education do the MAJORITY of jobs at your business require? | | |
| AT LEAST a bachelor's degree | | |
| | | |
| ○ LESS than a bachelor's degree | | |
| Unsure | | |