

# Chicagoland e-Commerce Assessment Survey (a City of Chicago – GoDaddy Collaborative Survey)

## S1

Are you the owner, or one of the owners, of this business?

- Yes, I am an owner / co-owner
- No, but I am a key decision maker (manager, etc.)
- No, I am not an owner or decision maker in this business

**Term1** *Show if NotBusinessOwnerOrDecisionMaker*

Thanks. Those are all the questions that we have for you. The rest of our questions for this survey are limited to business owners and managers.

Status Code: 501

## S2

Please provide the zip code your business is headquartered in.

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## Page

### Q1

In what year was your business launched?

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### Q2

Which best describes your business?

- Start-up
- Up & Running
- Established & Growing
- Established & Content
- Developing exit strategy

### Q3

Thinking about the business or organization, where do you conduct business or services?

- Only online
- Only in a physical location
- Both online and in a physical location

### Q4

How many employees does your business employ?

- 1 (just myself)
- 2-10
- 11-25
- 26-50

- 51-100
- 101-500
- 501+

**Q5**

Which geographic area(s) does your business serve? Select all that apply.

- My neighborhood
- City of Chicago
- State of Illinois
- United States
- International

**Q6**

Which of the following best describes your business:

- Private, for profit
- Public, for profit
- Non-profit
- Other

**Q7**

Did you apply for the following funding? Select all that apply.

- Paycheck Protection Program (PPP)
- Illinois Business Interruption Grant (BIG)
- Small Business Resiliency Fund
- Grants through the City of Chicago
- Grants through other local governmental bodies
- County Grants
- Private Grants

*Show if previous question is not null:*

**Q7b**

Please select each program from which you received funding.

- Paycheck Protection Program (PPP)
- Illinois Business Interruption Grant (BIG)
- Small Business Resiliency Fund
- Grants through the City of Chicago
- Grants through other local governmental bodies
- County Grants
- Private Grants

**Q8**

Rate the extent to which you agree with the following statement:

Your business is in a position to thrive over the next 6 months.

- Strongly agree
- Agree
- No opinion
- Disagree
- Strongly Disagree

**Q9**

Which of the following best describes your business' approach to business travel?

- Travel for business to in-person events declined due to COVID-19 but will return to levels normal in pre-pandemic times.
- Travel for business to in-person events did not change due to COVID-19.
- Travel for business to in-person events is not something this business does.

**Q10**

For many, the Coronavirus outbreak (COVID-19) has had a profound impact. Which of the following ways has it affected your venture? Select all that apply.

*Select all that apply*

- It forced me to shut down my business or organization **permanently**
- It forced me to shut down my business or organization **temporarily**
- It forced me to shift activity I usually conduct offline to an online mode
- It made me expand what I was already doing online
- It forced me to lay off or furlough some or all of my employees
- It led to a reduction in my business revenues
- It led to an increase in my business revenues
- Other (specify): \_\_\_\_\_
- It has not affected my business or organization (*Exclusive*)
- Not sure (*Exclusive*)

**Q11**

Has your business had COVID-19 pandemic-related expenses that it would otherwise not have, if there were not a pandemic?

- Yes
- No

**Q12**

How long do you believe it will be until your business fully recovers from the pandemic?

- By the end of this summer
- Not until 2022
- Never
- I am doing better now than prior to the pandemic

**Q13**

What do you see as possible barriers to the recovery of your business from the pandemic? Please rank them 1 to 3.

	Affordable space/subsidized rent
	Access to capital
	Marketing of businesses to local residents
	Affordable options for health insurance and other benefits
	A skilled workforce in the community
	Customized workforce training at businesses
	Technical assistance for business development (e.g. getting more customers / vendors, developing an online presence, etc.)
	Assistance with digital strategies (e.g. marketing online, developing online operations/infrastructure to sell online)

	Opportunities to network with other business owners
	Expedited licensing/permits
	Expertise on health / safety protocols
	Tax incentives
	Other (specify): _____
	None of the above (Exclusive)

#### Q14

What do you believe is necessary for your business to thrive in 2021? Please rank them 1 to 3.

	Affordable space/subsidized rent
	Access to capital
	Marketing of businesses to local residents
	Affordable options for health insurance and other benefits
	A skilled workforce in the community
	Customized workforce training at businesses
	Technical assistance for business development (e.g. getting more customers / vendors, developing an online presence, etc.)
	Assistance with digital strategies (e.g. marketing online, developing online operations/infrastructure to sell online)
	Opportunities to network with other business owners
	Expedited licensing/permits
	Expertise on health / safety protocols
	Tax incentives
	Other (specify): _____
	None of the above (Exclusive)

#### Q15

What are the three most important resources you would need to grow right now? Please rank them 1 to 3.

	Affordable space/subsidized rent
	Access to capital
	Marketing of businesses to local residents
	Affordable options for health insurance and other benefits
	A skilled workforce in the community
	Customized workforce training at businesses
	Technical assistance for business development (e.g. getting more customers / vendors, developing an online presence, etc.)
	Assistance with digital strategies (e.g. marketing online, developing online operations/infrastructure to sell online)
	Opportunities to network with other business owners
	Expedited licensing/permits
	Expertise on health / safety protocols
	Tax incentives
	Other (specify): _____
	None of the above (Exclusive)

#### Q16

What is your overall expectation for Chicago/Illinois's economy over the next 6 months?

- More positive
- More negative
- No change
- Not sure

**Q17**

What is your overall expectation for **your business** over the next 6 months?

- More positive
- More negative
- No change
- Not sure

**Q18**

When this business was started what was the **primary source** of capital, if any was needed?

- Loan from bank/credit union
- Loan from friends and/or family
- Equity investors
- Debt investors
- Online start-up campaign (e.g. Kickstarter, etc.)
- Other (specify): \_\_\_\_\_
- No start-up capital was needed
- Don't know/not sure

**Q19**

Please select each of the statements that you agree with, specifically about your own business.

A website/online presence....:

*Select all that apply*

- Is not valuable to our business (*Exclusive*)
- Is critical for revenue generation and sales
- Has helped business growth
- Is part of our future growth/expansion plans
- Is necessary to maintain our current business levels
- Helps this business keep up with the competition
- Is key to our marketing/branding efforts
- I am not sure what value a website or online presence can bring to this business (*Exclusive*)

**Q20**

Which of the following best describes the main industry sector your organization operates in?

- ☐ 1 Aerospace
- ☐ 2 Agriculture
- ☐ 3 Automotive
- ☐ 4 Chemicals
- ☐ 5 Construction and Trade

- ☐ 6 Education
- ☐ 7 Energy and Utilities
- ☐ 8 Engineering
- ☐ 9 Entertainment and Arts
- ☐ 10 Financial Services
- ☐ 11 Food and Drink
- ☐ 12 Government and Public Sector
- ☐ 13 Healthcare
- ☐ 14 Hospitality
- ☐ 15 IT / Technology
- ☐ 16 Manufacturing and Industrial
- ☐ 17 Media and Advertising
- ☐ 18 Nonprofit/charity
- ☐ 19 Oil and Gas
- ☐ 20 Personal care/personal services
- ☐ 21 Paper, Print and Packaging
- ☐ 22 Professional Services and Business Services
- ☐ 23 Retail and Consumer
- ☐ 24 Telecommunications
- ☐ 25 Transport and Logistics
- ☐ 26 Other (specify): \_\_\_\_\_

### Q21

Do you consider this business as:

- ☐ 1 Your main source of employment
- ☐ 2 A second job or side employment
- ☐ 3 Volunteer work, a hobby or an interest rather than employment
- ☐ 4 Other (specify): \_\_\_\_\_
- ☐ 5 Not sure *(Exclusive)*

### DEMOGRAPHICS SECTION

The following section is optional. We would like to know a little more about you, and answering these questions will further help us target resources where they are most needed.

### D1

Which of the following describes this business? Select all that apply.

- Woman-owned
- Minority-owned

- Veteran-owned
- None of the above

**D2**

Which of the following do you most identify as:

- Male
- Female
- Other
- Prefer not to answer

**D3**

Are you of Hispanic origin or descent, such as Mexican, Puerto Rican, Cuban, or some other Spanish background?

- Yes
- No
- Prefer not to answer

**D4**

Do you identify with one of the following groups? Optional

- White
- Black or African American
- Asian or Pacific Islander
- American Indian or Alaska Native
- Other of multi-racial
- Prefer not to answer