

OMB APPROVAL NO.: 3245-0188 EXPIRATION DATE: 03/31/2021

PERSONAL FINANCIAL STATEMENT 7(a) / 504 LOANS AND SURETY BONDS

U.S. SMALL BUSINESS ADMINISTRATION

As of	

SBA uses the information required by this Form 413 as one of a number of data sources in analyzing the repayment ability and creditworthiness of an application for an SBA guaranteed 7(a) or 504 loan or, with respect to a surety bond, to assist in recovery in the event that the contractor defaults on the contract. Submission of this information is required as part of your application for assistance. Failure to provide the information would impact the agency's decision on your application.

Complete this form for: (1) each proprietor; (2) general partner; (3) managing member of a limited liability company (LLC); (4) each owner of 20% or more of the equity of the Applicant (including the assets of the owner's spouse and any minor children); and (5) any person providing a guaranty on the loan

Return completed form to:

For 7(a) loans: the Lender processing the application for SBA guaranty

For 504 loans: the Certified Development Company (CDC) processing the application for SBA guaranty

Name	Business Phone				
Home Address	s Home Phone				
City, State, & Zip Code					
Business Name of Applicant					
ASSETS (Omit Cents)	LIABILITIES (Omit Cents)				
Cash on Hand & in banks	Accounts Payable				
Section 1. Source of Income.	Contingent Liabilities				
Salary\$ Net Investment Income\$ Real Estate Income\$ Other Income (Describe below)*\$ Description of Other Income in Section 1.	As Endorser or Co-Maker\$ Legal Claims & Judgments\$ Provision for Federal Income Tax\$ Other Special Debt\$				

^{*}Alimony or child support payments should not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

Names and Addre Noteholder		Original Balance	Gurrent Balance	Payment Amount	Frequ (month)			ed or Endorse of Collateral
Section 3. Stocks and	Bonds. (Use at	tachments if nec	essary. Each a	ttachment must be	identified as pa	art of this state	ement and signed)
Number of Shares	Name of S	ecurities	Cost		t Value /Exchange		ite of n/Exchange	Total Value
ection 4. Real Estate (Owned. (List ea	ich parcel separa	ately. Use attac	hment if necessary	. Each attachn	ent must be i	identified as a pa	t of this statement
		Property	A	1	Property B		Pr	operty C
Type of Real Estate (e.g Primary Residence, Oth Residence, Rental Prop Land, etc.)	er		agenti, agenti e sa Signes e a seria e e e					
Address		10000000						
Date Purchased								
Original Cost								
Present Market Value	100 M + 20 100 M + 4-40 100 M + 10 M 100 M + 10 M							
Name & Address of Mortgage Holder								
Mortgage Account Num	ber							
Mortgage Balance	etale Alignozi Loginozi							
Amount of Payment per Month/Year								
Status of Mortgage								
Section 5. Other Personal Holder, amount of lien, to	onal Property	and Other As	ssets. (Desc	ribe, and, if any be delinguency	is pledged a .)	s security, s	state name and	d address of lier
moradi, dimedia er denj							_	
								Later Is hand List
Section 6. Unpaid Tallien attaches.)	ixes. (Describ	e in detail as	to type, to v	mom payable,	wrieri due, a	iniount, and	u to what prop	city, ii ally, a i

Section 7. Other Liabilities. (Describe in detail.)	
	and cash surrender value of policies — name of insurance company and
determine my creditworthiness.	nquiries as necessary to verify the accuracy of the statements made and to
CERTIFICATION : (to be completed by each person sumore owner when spousal assets are included)	ubmitting the information requested on this form and the spouse of any 20% o
information submitted with this form is true and comple Lenders or Certified Development Companies or Surety	prosecution that all information on this form and any additional supporting te to the best of my knowledge. I understand that SBA or its participating by Companies will rely on this information when making decisions regarding an that I have read the attached statements required by law and executive order
Signature	Date
Print Name	Social Security No.
Signature	Date
Print Name	Social Security No.

NOTICE TO LOAN AND SURETY BOND APPLICANTS: CRIMINAL PENALITIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Knowingly making a false statement on this form is a violation of Federal law and could result in criminal prosecution, significant civil penalties, and a denial of your loan or surety bond application. A false statement is punishable under 18 U.S.C. §§ 1001 and 3571 by imprisonment of not more than five years and/or a fine of up to \$250,000; under 15 U.S.C. § 645 by imprisonment of not more than two years and/or a fine of not more than \$5,000; and, if submitted to a Federally-insured institution, a false statement is punishable under 18 U.S.C. § 1014 by imprisonment of not more than thirty years and/or a fine of not more than \$1,000,000. Additionally, false statements can lead to treble damages and civil penalties under the False Claims Act, 31 U.S.C. § 3729, and other administrative remedies including suspension and debarment.

PLEASE NOTE:

According to the Paperwork Reduction Act, you are not required to respond to this request for information unless it displays a valid OMB Control Number. The estimated average burden hours for the completion of this form is 1.5 hours per response. If you have questions or comments concerning this estimate or any other aspect of this information collection, please contact: Director, Records Management Division, Small Business Administration, 409 Third Street SW, Washington, D.C. 20416, and SBA Desk Officer, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, D.C. 20503. PLEASE DO NOT SEND COMPLETED FORMS TO OMB.