

Instructions to complete Personal Financial Statement (SBA Form 413) for the Unified Certification Program:

1. Fill out all line items to the best of your ability. Be sure to include the DATE in the upper right corner of the First page.
2. Include all of your and, if applicable, your spouse's assets and liabilities.
3. Assets that must be included are real property (includes rental or vacation homes), personal property wherever located (includes household goods, collectibles, clothing and jewelry), other businesses, vehicles, boats, trailers, cash, bank accounts, stocks, bonds, retirement accounts, insurance policies and any other assets where you have an ownership interest.
4. Complete Section 4 for all of your real estate. Be sure to include and identify which is your primary residence.
5. For married individuals, list both names and all property, including both community and separate property. Complete Section 5 to identify separate property for each spouse.
6. Describe other assets, other property, and other liabilities in detail. Include your equity in your business also, under Other Assets, and then itemize all Other Assets in Section 5.
7. Market values for items such as real estate, other assets and other property should be as accurate as possible to their value as of the above date.
8. If necessary, use additional sheet(s) of paper to report all information and details.
9. To compute **Net Worth**, first add all liabilities and put that figure in the Total Liabilities line, then subtract Total Liabilities from Total Assets to get your **Net Worth**.
10. To determine economic disadvantage eligibility, your **Net Worth** amount will be adjusted by the following to obtain an Adjusted Net Worth figure (see worksheet below).
 - Exclusion of an individual's ownership interest in the applicant firm;
 - Exclusion of an individual's equity in his or her primary residence;
 - Deduction of tax and interest penalties that would accrue if retirement savings or investments (e.g., pension plans, Individual Retirement Accounts, 401(k) accounts, etc.) were distributed at the present time.
 - **For airport concessionaire only:** Exclusion of other assets documented to be necessary to obtain financing or a franchise agreement for the initiation, support, or expansion of an airport concession, to a maximum of \$3 million.

An individual's personal net worth includes only his or her own share of assets held jointly or as community property with the individual's spouse. If your Adjusted Net Worth exceeds the \$1.32m cap and you, individually, or you and other individuals are the majority owners of an applicant firm, the firm is not eligible for DBE certification. If the Adjusted Net Worth of the majority owner(s) exceeds the \$1.32m cap at any time after your firm is certified, the firm is no longer eligible for certification. Should that occur, it is your responsibility to contact your certifying agency in writing to advise the firm no longer qualifies.

Adjusted Net Worth Worksheet:

Net Worth (less one-half of community property, if applicable).....	\$ _____
Less: ① ownership interest in applicant firm.....	(_____)
② equity in primary residence	(_____)
③ tax and interest penalties on retirement accounts.....	(_____)
④ airport concessionaire exclusion, if applicable.....	(_____)
Adjusted Net Worth Total.....	\$ _____

11. Be sure to sign and date at the end of the statement. If you have any questions or would like assistance in completing this form, please contact one of the certifying agencies on the enclosed Roster.



PERSONAL FINANCIAL STATEMENT

New Orleans Aviation Board

As of _____, 20____

Complete this form for: (1) each proprietor, or (2) each limited partner who owns 20% or more interest and each general partner, or (3) each stockholder owning 20% or more of voting stock, or (4) any person or entity providing a guaranty on the loan.

Name: _____ Business Phone: _____

Residence Address: _____ Residence Phone: _____

City, State & Zip Code: _____

Business Name of Applicant: _____

ASSETS	(Omit Cents)	LIABILITIES	(Omit Cents)
Cash on hand & in Banks.....	\$ _____	Accounts Payable.....	\$ _____
Savings Accounts.....	\$ _____	Notes Payable to Bank and Others.....	\$ _____
IRA or Other Retirement Account.....	\$ _____	(Describe in Section 2)	
Accounts & Notes Receivable.....	\$ _____	Installment Account (Auto)	\$ _____
Life Insurance – Cash Surrender Value Only	\$ _____	Mo. Payments \$ _____	
(Complete Section 8)		Installment Account (Other)	\$ _____
Stocks and Bonds.....	\$ _____	Mo. Payments \$ _____	
(Describe in Section 3)		Loan on Life Insurance.....	\$ _____
Real Estate	\$ _____	Mortgages on Real Estate	\$ _____
(Describe in Section 4)		(Describe in Section 4)	
Automobile – Present Value	\$ _____	Unpaid Taxes	\$ _____
Other Personal Property	\$ _____	(Describe in Section 6)	
(Describe in Section 5)		Other Liabilities.....	\$ _____
Other Assets	\$ _____	(Describe in Section 7)	
(Describe in Section 5)		Total Liabilities.....	\$ _____
Total.....	\$ _____	Net Worth.....	\$ _____
		Total	\$ _____

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.

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

Section 2. Notes Payable (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (Monthly, etc.)	How secured or Endorsed Type of Collateral

Section 3. Stocks and Bonds. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

# of Shares	Name of Securities	Cost	Market Value Quotation/ Exchange	Date of Quotation/ Exchange	Total Value

Section 4. Real Estate Owned. (List each parcel separately. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.)

	Property A	Property B	Property C
Type of Property			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month/Year			
Status of Mortgage			

Section 5. Other Personal Property and Other Assets. (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and if delinquent, describe delinquency.)

Section 6. Unpaid Taxes. (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

Section 7. Other Liabilities. (Describe in detail)

Section 8. Life Insurance Held (Give face amount and cash surrender value of policies – name of insurance company and beneficiaries.)

I authorize NOAB to make inquiries as necessary to verify the accuracy of the statements made. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of obtaining DBE certification. I understand FALSE statements may result in forfeiture of certification and possible prosecution by the U.S Attorney General (Ref?)

Signature: _____ Date: _____

Signature: _____ Date: _____

PLEASE NOTE: If you have questions or comments concerning this estimate or any other aspect of this information, please contact the Disadvantaged Business Enterprise Office, New Orleans International Airport, P.O. Box 20007, New Orleans, LA 70141.