

State of California – Franchise Tax Board
Business Entity
California Statement of Financial Condition and Other Information – Part I

Please furnish the information requested on this form and the requested supporting documents referred to in our application letter (FTB 9057). To expedite processing, please answer all questions. If a question does not apply, please enter the word "none." If you run out of space, please attach additional pages (write your entity's name and number on all additional pages).

1. Entity Information

Business Entity Name		Entity Number
DBA	Type of Business/Industry	FEINS
		SOSL
Mailing Address	Physical Address	Telephone Numbers () -

2. List of Entity Officers/General Partners/Managing Members

Name	Business Address	Business Telephone Number	Title
		() -	
		() -	
		() -	
		() -	

2a. Name of Authorized Representative (Attach Power of Attorney, if applicable)

Name:
Address:

Daytime Telephone Number
() -

3. Bank Account Information

3a. Bank Accounts (List all types of accounts including payroll, checking, savings, certificates of deposits, etc.) held during the past three years. Please provide copies of bank statements for the last (or final) 3 months for every account held.

Institution Name	Address	Type of Account	Routing Number	Account Number	Balance
					\$
					\$
					\$
					\$
Bank Accounts				Total ►	\$0.00

3b. Bank, Finance and Business Credit Cards (Lines of credit)

Institution Name	Address	Credit Limit	Amount Owed	Credit Available	Minimum Monthly Payments
		\$	\$	\$	\$
		\$	\$	\$	\$
		\$	\$	\$	\$
Bank credit available Total ►			\$0.00	\$0.00	\$0.00

3c. Safe Deposit Boxes (List contents of all deposit boxes rented or accessed by your entity)

Institution Name	Address	Box Number	Contents	Estimated Market Value
				\$
				\$
				\$
				\$
Safe Deposit Boxes Total ►				\$0.00

Asset and Liabilities

Please furnish your entity's **most recent balance sheet and profit and loss statement**. Include all interests in estates, trusts, and other property rights, including contingent interests and remainders.

**4. Statement of assets and liabilities as of / /
(date)**

a. Assets	Cost (less depreciation)	Fair Market Value
Cash	\$	\$
Cash surrender value of insurance (See item 5)	\$	\$
Accounts receivables (See item 6a)	\$	\$
Notes receivables (See item 6b)	\$	\$
Pending Litigation and Judgements (See item 7)	\$	\$
Real Estate (See item 8)	\$	\$
Machinery and equipment (See item 9)	\$	\$
Trucks and delivery equipment (See item 10)	\$	\$
Automobiles and Motorcycles (See item 11)	\$	\$
Aircraft (See item 12)	\$	\$
Watercraft (See item 13)	\$	\$
Securities (see item 14)	\$	\$
Judgments/Settlements not included in Accounts Receivables (See item 15)	\$	\$
Loans to entity's officers (not Included in Notes Receivables, above) (See item 16)	\$	\$
Other assets (See item 17)	\$	\$
Total Assets ►	\$0.00	\$0.00
b. Liabilities	Amount	
Loans on insurance (See item 16)	\$	
Accounts payable	\$	
Note payable	\$	
Mortgages (See item 8)	\$	
Judgments (See item 15)	\$	
Reserves (itemize)	\$	
Loans to officers/partners (See item 16)	\$	
Other (describe)	\$	
Total Liabilities ►	\$0.00	\$

5. Life insurance policies

Policy Number	Insurance Company Name	Policy Amount	Present Cash Surrender Value Plus Accumulated Dividends	Policy Loan	Date Made	Automatic Premium Payments	Date Made
		\$	\$	\$	/ /	\$	/ /
		\$	\$	\$	/ /	\$	/ /
		\$	\$	\$	/ /	\$	/ /
		\$	\$	\$	/ /	\$	/ /
Life insurance policies Total ▶		\$0.00	\$0.00	\$0.00		\$0.00	

6. Accounts and Notes Receivable

Name	Address	Book Value	Amount Due
a. Accounts Receivable			
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
Accounts Receivable Total ▶		\$0.00	\$0.00
b. Notes Receivable			
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
Notes Receivable Total ▶		\$0.00	\$0.00

7. Pending Litigation and Pending Judgments

Case Number	Court of Jurisdiction	Court Address	Judgment Amount
			\$
			\$
			\$
			\$
Pending Litigation and Judgments Total ▶			\$0.00

8. Real Estate

Property Address/ Assessor Parcel Number	Cost	Fair Market Value	Balance Due on Mortgage	Equity Value
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
Real Estate Total ▶	\$0.00	\$0.00	\$0.00	\$0.00

9. Machinery and Equipment

Description (Manufacturer, Model Number, Function)	Cost (less depreciation)	Fair Market Value
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Machinery and Equipment Total ►	\$0.00	\$0.00

10. Trucks and Delivery Equipment

Description (Make, Model, Year, and License Plate Number)	Cost (less depreciation)	Fair Market Value
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Trucks and Delivery Equipment Total ►	\$0.00	\$0.00

11. Automobiles and Motorcycles

Description (Make, Model, Year, and License Plate Number)	Cost (less depreciation)	Fair Market Value
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Automobiles and Motorcycles Total ►	\$0.00	\$0.00

12. Aircraft

Year, Model Number, Model Name, and Tail (N) Number	Hangar Location	Cost (less depreciation)	Fair market Value
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
Aircraft Total ►		\$0.00	\$0.00

13. Watercraft

Year, Make, Model and Vehicle Registration Number (CF Number)	Docking Location	Cost (less depreciation)	Fair market Value
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
Watercraft Total ►		\$0.00	\$0.00

14. Securities (Stocks, bonds, etc)

Name of Security	Number of Shares	Cost	Fair market Value
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
Securities Total ►	0	\$0.00	\$0.00

15. Judgments/Settlements (not included in Accounts Receivable)

Case Number	Court and Jurisdiction	Judgment Amount	Date Recorded	Award Amount
		\$	/ /	\$
		\$	/ /	\$
		\$	/ /	\$
		\$	/ /	\$
Judgments/Settlements Total ►				\$0.00

16. Loans to Entity's Officers, General Partners, Members (not included in Notes Receivables)

Recipient's Name and Title	Date Loan Originated	Loan Amount	Outstanding Balance
	/ /	\$	\$
	/ /	\$	\$
	/ /	\$	\$
	/ /	\$	\$
Loans to Entity's Officers Total ►			\$0.00

17. Other Assets

Description	Location	Estimated Value
		\$
		\$
		\$
		\$
Other Assets Total ►		\$0.00

18. Business References

Client/Vendor Name	Relationship to Entity	Address	Telephone Number
			() -
			() -
			() -
			() -
			() -
			() -

**State of California – Franchise Tax Board
Business Entity**

California Statement of Financial Condition and Other Information – Part II

This must be submitted with Part I.

1. Statement of Income – Business Entity

IMPORTANT: Please furnish the information requested below (from income tax returns, as adjusted, for the most recent account period).

a. Gross Income		
Gross sales or receipts (Subtract returns and allowances)		\$
Cost of goods sold		\$
Gross profit – trading or manufacturing		\$
Gross profit – from other sources		\$
Interest income		\$
Rents and royalties		\$
Gains and losses (From Schedule D)		\$
Dividends		\$
Other (Specify)		\$
Other (Specify)		\$
Other (Specify)		\$
Total Income	▶	\$0.00
b. Deductions		
Compensation of officers		\$
Salaries and wages (Not deducted elsewhere)		\$
Rents		\$
Repairs		\$
Bad Debts		\$
Interest		\$
Taxes		\$
Losses		\$
Dividends		\$
Depreciation and depletion		\$
Contributions		\$
Advertising		\$
Other (Specify)		\$
Other (Specify)		\$
Other (Specify)		\$
Total deductions	▶	\$0.00
b. Net Income (loss)	▶	\$
b. Nontaxable income	▶	\$

2. Salaries paid to principal officers and dividends distributed

IMPORTANT: Please show salaries paid to principal officers for the most recent accounting period.

a. Officers Names and Titles	Salaries	Dividends Paid
•President	\$	\$
•Vice President	\$	\$
•Treasurer	\$	\$
•Secretary	\$	\$
•Member	\$	\$
•Partner	\$	\$
Total	▶ \$0.00	\$0.00

3. Disposal of assets – In the most recent account period, has there been a disposition of any assets or property with a cost or fair market value of more than \$500, except for full value at the time of sale, transfer, exchange, gift, or other disposition?

☐ No ☐ Yes (If yes, please furnish the following information.)

Description of Asset	Date of Transfer	Fair Market Value When Transferred	Consideration Received	Transferee/Buyer's Name, Address, and Telephone Number
	/ /	\$	\$	
	/ /	\$	\$	
	/ /	\$	\$	
	/ /	\$	\$	
	/ /	\$	\$	
	/ /	\$	\$	
	/ /	\$	\$	

4. Are bankruptcy or receivership proceedings pending?

☐ No ☐ Yes (If yes, please furnish the following information.)

5. What is the prospect of an increase in value of assets or in present income? (Please give general statement.)

Documentation Checklist

Please check the list below to make sure **you** send us all of the required documents. You must send us all documents we request from you or your installment agreement will be delayed.

Bank Information

- ✓ Bank statements for **all** business accounts held for the past three months.

Financial Statements

- ✓ California Statement of Financial Condition and Other Information – Part I
- ✓ California Statement of Financial Condition and Other Information – Part II

Leases or Rental Agreements

- ✓ Copies of leases or rental agreements either as landlord or tenant.

Installment Agreements made with the IRS

- ✓ Copies of any installment agreement made with the IRS.
- ✓ Copies of any correspondence from the IRS indicating what action they have taken on the installment agreement.

Other

- ✓ Any other documentation we may have requested from you that is not listed above.

6. Declaration

Under penalty of perjury, I declare that I have examined the information given in this statement and, to the best of my knowledge and belief, it is true, correct, and complete, and I further declare that there are no assets, owned either directly or indirectly, or income of any nature other than as shown in this statement.

a. Date of this statement	b. Signature	c. Title

Please note: Under the terms of your installment agreement we are required to periodically review your account to determine if you still meet financial hardship criteria.