

U.S. Department of Transportation

Personal Net Worth Statement For DBE/ACDBE Program Eligibility

As of _____

OMB APPROVAL NO: <u>2105-0510</u> EXPIRATION DATE: 10/31/2021

This form is used by all participants in the U.S. Department of Transportation's Disadvantaged Business Enterprise (DBE) and Airport Concession DBE (ACDBE) Programs. Each individual owner of a firm applying to participate as a DBE or ACDBE, whose ownership and control are relied upon for DBE certification must complete this form. Each person signing this form authorizes the certifying agency to make inquiries as necessary to verify the accuracy of the statements made. The agency you apply to will use the information provided to determine whether an owner is economically disadvantaged as defined in the DBE program regulations 49 C.F.R. Parts 23 and 26. Return form to appropriate certifying agency, not U.S. DOT. Applicant Name: Residence: (As reported to the IRS) Residence Phone Address, City, State and Zip Code **Business Name of Applicant Firm Business Phone** Spouse's Full Name: Marital Status: ☐ Single, ☐ Married, ☐ Divorced, ☐ Union **ASSETS** (Omit Cents) **LIABILITIES** (Omit Cents) \$ Cash and Cash Equivalents Loan on Life Insurance \$ (Complete Section 5) Retirement Accounts (IRAs, 401Ks, 403Bs, Pensions, \$ Mortgages on Real Estate Excluding \$ Primary Residence Debt etc.) (Report full value minus tax and interest penalties that would apply if assets were distributed today) (Complete Section 4) (Complete Section 3) \$ Notes, Obligations on Personal Property Brokerage, Investment Accounts \$ (Complete Section 6) Assets Held in Trust \$ Notes & Accounts Payable to Banks and Others (Complete Section 2) Other Liabilities Loans from You to the Firm, Other Entities, Individuals, & \$ \$ Other Receivables (Complete Section 6) (Complete Section 8) Real Estate Excluding Primary Residence **Unpaid Taxes** \$ (Complete Section 4) (Complete Section 8) Life Insurance (Cash Surrender Value Only) \$ (Complete Section 5) Other Personal Property and Assets \$ (Complete Section 6) Business Interests Other Than the Applicant Firm \$ (Complete Section 7) **Total Assets** \$ **Total Liabilities** \$ **NET WORTH** Section 2. Notes Payable to Banks and Others Original Current Payment Frequency How Secured or Endorsed Type of Collateral Name of Noteholder(s) Balance Balance Amount (monthly, etc.)

| Section 3. | Brokera | ge and custodia | I accounts, stoo | ks, bonds | , retirement accounts. | (Full Value) | (Use attachments if necessary | / |
|------------|---------|-----------------|------------------|-----------|------------------------|--------------|-------------------------------|---|
|------------|---------|-----------------|------------------|-----------|------------------------|--------------|-------------------------------|---|

| Name of Security / Brokerage Account / Retirement Account | | | Cost | (| Market Value Quotation/Exchange | Date Quotation/E | | Total Value |
|--|------------------------------------|-----------------|-----------------------------|------------------|---|--|----------------------|------------------------------------|
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| Section 4. Real Estate Owne Purposes, Farm Properties, | d (Including Proof or any Other Ir | rimary Res | idence, Inve ducing prop | estme perty). | nt Properties, Person (List each parcel sepa | n al Property arately. Add a | Leased or Ren | ted for Business if necessary). |
| | Primary Resider | | | Property B | | | | Property C |
| Type of Property | | | | | | | | |
| Address | | | | | | | | |
| Date Acquired and Method of Acquisition (purchase, inherit, divorce, gift, etc.) | | | | | | | | |
| Names on Deed | | | | | | | | |
| Purchase Price | | | | | | | | |
| Present Market Value | | | | | | | | |
| Source of Market Valuation | | | | | | | | |
| Name of all Mortgage Holders | | | | | | | | |
| Mortgage Acc. # and balance (as of date of form) | | | | | | | | |
| Equity line of credit balance | | | | | | | | |
| Amount of Payment Per Month/Year (Specify) | | | | | | | | |
| Section 5. Life Insurance He | ld (Give face ar | nount and o | ash surrenc | ler valı | ue of policies, name of | f insurance co | mpany and ber | neficiaries). |
| | | irrender Amount | | Beneficiaries | | Loan o | n Policy Information | |
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Section 6. Other Personal Property and Assets (Use attachments as necessary)

| Type of Property or Asset | Total Present Value | Amount of Liability (Balance) | Is this asset insured? | Lien or Note amount and Terms of Payment |
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| Automobiles and Vehicles (including recreation vehicles, motorcycles, boats, etc.) Include personally owned vehicles that are leased or rented to businesses or other individuals. | | , | | 3 |
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| Household Goods / Jewelry | | | | |
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| Loans from Owner to Firm, Other Entities, Individuals | | | | |
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| Other (List) | | | | |
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| Accounts and Notes Receivables | | | | |
| Section 7. Value of Other Business Investments, Other Businesses C Sole Proprietorships, General Partners, Joint Ventures, Limited Liability C | | | Traded Corpo | orations |
| | | , | • | |
| Section 8. Other Liabilities and Unpaid Taxes (Describe) | | | | |
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| Section 9. Transfer of Assets: Have you within 2 years of this persor partner, relative, or entity in which you have an ownership or benefic | | | | |
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| I declare under penalty of perjury that the information provided in this personand correct. I certify that no assets have been transferred to any beneficial the information submitted in this application is for the purpose of inducing government agency may, by means it deems appropriate, determine the anet worth statement, and I authorize such agency to contact any entity nannames banking institutions, credit agencies, contractors, clients, and other and determining the named firm's eligibility. I acknowledge and agree that contract or subcontract will be grounds for terminating any contract or subcontract and debarment; and for initiating action under federal and/or state. | ry for less than fair certification approved curacy and truth med in the application certifying agencie any misrepresentation tract which matate law concernin NOTA | market value in t val by a governme of the statements cion or this person is for the purpose ations in this appli y be awarded; der g false statement, RY CERTIFICATE | he last two yeart agency. I use in the applicate all financial stood verifying the cation or in replaid or revocate, fraud or others. | ears. I recognize that understand that a ation and this personal atement, including the information supplied ecords pertaining to a tion of certification; |
| Signature (DBE/ACDBE Owner) Date | · | | - | , |
| In collecting the information requested by this form, the Department of Transportation 552a) provisions. The Privacy Act provides comprehensive protections for your perso stored, and discarded. Your information will not be disclosed to third parties without y eligibility to participate in the Disadvantaged Business Enterprise (DBE) Program or A You may review DOT's complete Privacy Act Statement in the Federal Register publications. | onal information. This rour consent. The info Airport Concessional | includes how inform ormation collected w re DBE Programs as | nation is collect ill be used sole | ed, used, disclosed, ly to determine your firm's |



General Instructions for Completing the Personal Net Worth Statement for DBE/ACDBE Program Eligibility

Please do not make adjustments to your figures pursuant to U.S. DOT regulations 49 C.F.R. Parts 23 and 26. The agency that you apply to will use the information provided on your completed Personal Net Worth (PNW) Statement to determine whether you meet the economic disadvantage requirements of 49 C.F.R. Parts 23 and 26. If there are discrepancies or questions regarding your form, it may be returned to you to correct and complete again.

An individual's personal net worth according to 49 C.F.R. Parts 23 and 26 includes only his or her own share of assets held separately, jointly, or as community property with the individual's spouse and excludes the following:

- Individual's ownership interest in the applicant firm;
- Individual's equity in his or her primary residence;
- Federal Tax and penalties, if applicable, 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.

Indicate on the form if any items are jointly owned. If the personal net worth of the majority owner(s) of the firm exceeds \$1.32 million, as defined by 49 C.F.R. Parts 23 and 26, the firm is not eligible for DBE or ACDBE certification. If the personal net worth of the majority owner(s) exceeds the \$1.32 million cap specified in \$26.67(a)(2)(i) 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 that your firm no longer qualifies as a DBE or ACDBE. You must fill out all line items on the Personal Net Worth Statement.

If necessary, use additional sheets of paper to report all information and details. If you have any questions about completing this form, please contact the certifying agency.

Assets

All assets must be reported at their current fair market values as of the date of your statement. Assessor's assessed value for real estate, for example, is not acceptable. Assets held in a trust should be included.

Cash and Cash Equivalents: On page 1, enter the total amount of cash or cash equivalents in bank accounts, including checking, savings, money market, certificates of deposit held domestic or foreign. Provide copies of the bank statement.

Retirement Accounts, IRA, 401Ks, 403Bs, Pensions: On page 1, enter the full value minus Federal tax and penalties that would apply if assets were distributed as of the date of the form. Describe the number of shares, name of securities, cost market value, date of quotation, and total value in section 3 on page 2.

Brokerage and Custodial Accounts, Stocks, Bonds, Retirement Accounts: Report total value on page 1, and on

page 2, section 3, enter the name of the security, brokerage account, retirement account, etc.; the cost; market value of the asset; the date of quotation; and total value as of the date of the PNW statement.

Assets Held in Trust: Enter the total value of the assets held in trust on page 1, and provide the names of beneficiaries and trustees, and other information in Section 6 on page 3.

Loans from you to the firm, other Entities, Individuals, and Other Receivables not listed: Enter current balances of loans you have extended to this firm and to other entities or individuals, plus interest payable on those loans; and other receivables not listed above. Complete Section 6 on page 3.

Real Estate: The total value of real estate excluding your primary residence should be listed on page 1. In section 4 on page 2, please list your primary residence in column 1, including the address, method of acquisition, date of acquired, names of deed, purchase price, present fair market value, source of market valuation, names of all mortgage holders, mortgage account number and balance, equity line of credit balance, and amount of payment. List this information for all real estate held. Please ensure that this section contains all real estate owned, including rental properties, vacation properties, commercial properties, personal property leased or rented for business purposes, farm properties and any other income producing properties, etc. Attach additional sheets if needed.

Life Insurance: On page 1, enter the cash surrender value of this asset. In section 5 on page 2, enter the name of the insurance company, the face value of the policy, cash surrender value, names of beneficiaries, and loans on the policy.

Other Personal Property and Assets: Enter the total value of personal property and assets you own on page 1. Personal property includes motor vehicles, boats, trailers, jewelry, furniture, household goods, collectibles, clothing, and personally owned vehicles that are leased or rented to businesses or other individuals. In section 6 on page 3, list these assets and enter the present value, the balance of any liabilities, whether the asset is insured, and lien or note information and terms of payments. For accounts and notes receivable, enter the total value of all monies owed to you personally, if any. You may also be asked to provide a copy of any liens or notes on the property.

Other Business Interests Other than Applicant Firm: On page 1, enter the total value of your other business investments (excluding the applicant firm). In section 7 on page 3, enter information concerning the businesses you hold an ownership interest in, such as sole proprietorships, partnerships, joint ventures, corporations, or limited liability corporations (other than the applicant firm). Do not reduce the value of these entries by any loans from the outside firm to the DBE/ACDBE applicant business.

Liabilities

Mortgages on Real Estate: Enter the total balance on all mortgages payable on real estate on page 1.

Loans on Life Insurance: Enter the total value of all loans due on life insurance policies on page 1, and complete section 5 on page 2.

Notes & Accounts Payable to Bank and Others: On page 1, section 2, enter details concerning any liability, including name of noteholders, original and current balances, payment terms, and security/collateral information. The entries should include automobile installment accounts. This should not, however, include any mortgage balances as this information is captured in section 4. Do not include loans for your business or mortgages for your properties in this section. You may be asked to submit copy of note/security agreement, and the most recent account statement.

Other Liabilities: On page 1, enter the total value due on all other liabilities not listed in the previous entries. In section 8, page 3, report the name of the individual obligated, names of co-signers, description of the liability, the name of the entity owed, the date of the obligation, payment amounts and terms. Note: Do not include contingent liabilities in this section. Contingent liabilities are liabilities that belong to you only if an event(s) should occur. For example, if you have co-signed on a relative's loan, but you are not responsible for the debt until your relative defaults, that is a

contingent liability. Contingent liabilities do not count toward your net worth until they become actual liabilities.

Unpaid Taxes: Enter the total amount of all taxes that are currently due, but are unpaid on page 1, and complete section 8 on page 3. Contingent tax liabilities or anticipated taxes for current year should not be included. Describe in detail the name of the individual obligated, names of cosigners, the type of unpaid tax, to whom the tax is payable, due date, amount, and to what property, if any, the tax lien attaches. If none, state "NONE." You must include documentation, such as tax liens, to support the amounts.

Transfers of Assets:

Transfers of Assets: If you checked the box indicating yes on page 3 in this category, provide details on all asset transfers (within 2 years of the date of this personal net worth statement) to a spouse, domestic partner, relative, or entity in which you have an ownership or beneficial interest including a trust. Include a description of the asset; names of individuals on the deed, title, note or other instrument indicating ownership rights; the names of individuals receiving the assets and their relation to the transferor; the date of the transfer; and the value or consideration received. Submit documentation requested on the form related to the transfer.

Affidavit

Be sure to sign and date the statement. The Personal Net Worth Statement must be notarized.

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