



## Owners and Key Management Information

This following information is needed for each stockholder owning 20% or more stock as well as all officers even if they are not owners.

Legal Name: \_\_\_\_\_  
First Middle (Maiden) Last Social Security #

OWNERSHIP PERCENTAGE: \_\_\_\_\_ CORPORATE TITLE: \_\_\_\_\_

\_\_\_\_\_  
Date of Birth City and State of Birth Alien # if not US Citizen Race

\_\_\_\_\_  
Marital Status E-Mail address

\_\_\_\_\_  
Current Home Address City State Zip

From: (mo/yr) \_\_\_\_\_ to Present Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

\_\_\_\_\_  
Immediate Past Address City State Zip

From: (mo/yr) \_\_\_\_\_ to \_\_\_\_\_

- |  |    |     |  |
|--|----|-----|--|
| 1. Are you presently subject to an indictment, criminal information, arraignment, or other means by which formal criminal charges are brought in any jurisdiction?   | NO | YES |  |
| 2. Have you been arrested in the past six months for any criminal offense?   | NO | YES |  |
| 3. For any criminal offense – other than a minor vehicle violation – have you ever:<br>1) been convicted; 2) plead guilty; 3) plead nolo contendere (no contest);<br>4) been placed on pre-trial diversion; 5) been placed on any form of parole or probation (including probation before judgment). | NO | YES |  |
| 4. Are you, any of your children, your parents or your spouse employed by, directors of, officers of or stockholders of the participating bank or the SBA or SCORE or any Federal Agency?  | NO | YES |  |
| 5. Have you ever filed for corporate or personal bankruptcy or been involved in insolvency proceedings?  | NO | YES |  |
| 6. Are you or your business involved in any pending lawsuits?  | NO | YES |  |
| 7. Do you have ownership in any other businesses?<br>Provide Name of business, % of ownership & copy of most recent financial statement  | NO | YES |  |
| 8. Do you or any of your affiliated businesses have any existing debt with SBA guarantees?   | NO | YES |  |
| 9. Have you or any of your affiliate businesses ever caused a loss to the Government from prior federal assistance?  | NO | YES |  |

**If you answered yes to any of above these questions, please supply details on separate sheet.**

**OWNERS ONLY: Please check all that apply. (NOTE: This information is optional. It is requested to determine eligibility for special loan & technical assistance programs.)**

Female \_\_\_\_\_ Minority \_\_\_\_\_ Veteran \_\_\_\_\_ Handicapped \_\_\_\_\_ Disadvantaged \_\_\_\_\_

\_\_\_\_\_  
Signature Date