

## Personal Financial Analysis ~ Exercise

**Personal Financial Statement as of** \_\_\_/\_\_\_/\_\_\_

**Submitted to:** (name of lending institution)

This form is being presented to introduce many of the components required for commercial lending transactions. Actual form categories may vary slightly relative to intended use and must comply with applicable laws and regulations.

### PERSONAL INFORMATION

**APPLICANT (NAME)**

Employer Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Yrs. Employed \_\_\_\_\_ Title/Position \_\_\_\_\_

Prior Employer (if above < 3 yrs.) \_\_\_\_\_ Yrs. Employed \_\_\_\_\_

Home Address \_\_\_\_\_

Phone \_\_\_\_\_ SS# \_\_\_\_\_ Date of Birth \_\_\_\_\_

Accountant Name/Phone \_\_\_\_\_

Attorney Name/Phone \_\_\_\_\_

Investment Advisor Name/Phone \_\_\_\_\_

Insurance Advisor Name/Phone \_\_\_\_\_

**CO-APPLICANT (NAME)**

Employer Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Yrs. Employed \_\_\_\_\_ Title/Position \_\_\_\_\_

Prior Employer (if above < 3 yrs.) \_\_\_\_\_ Yrs. Employed \_\_\_\_\_

Home Address \_\_\_\_\_

Phone \_\_\_\_\_ SS# \_\_\_\_\_ Date of Birth \_\_\_\_\_

Accountant Name/Phone \_\_\_\_\_

Attorney Name/Phone \_\_\_\_\_

Investment Advisor Name/Phone \_\_\_\_\_

Insurance Advisor Name/Phone \_\_\_\_\_

### Cash Income & Expenditures Statement for Year Ended \_\_\_/\_\_\_/\_\_\_

| ANNUAL INCOME                        | AMOUNT (\$)     | ANNUAL EXPENDITURES                        | AMOUNT (\$)     |
|--------------------------------------|-----------------|--|-----------------|
| Salary (applicant)\$                 | _____           | Federal Income and Other Taxes             | \$ _____        |
| Salary (co-applicant)                | _____           | State Income and Other Taxes               | _____           |
| Bonuses & commissions (applicant)    | _____           | Rent, Co-op, or Condo Fees                 | _____           |
| Bonuses & commissions (co-applicant) | _____           | Mortgage Payments (residential/investment) | _____           |
| Rental Income                        | _____           | Property Taxes (residential/investment)    | _____           |
| Interest Income                      | _____           | Loan Payments (interest & principal)       | _____           |
| Dividend Income                      | _____           | Insurance (disability, medical, etc.)      | _____           |
| Capital Gains                        | _____           | Investments (including tax shelters)       | _____           |
| Partnership Income                   | _____           | Alimony/Child Support                      | _____           |
| Other Investment Income              | _____           | Tuition                                    | _____           |
| Other Income (List)**                | _____           | Other Living Expense                       | _____           |
|                                      |                 | Medical Expenses                           | _____           |
|                                      |                 | Other Expense (List)                       | _____           |
| <b>Total Income</b>                  | <b>\$ _____</b> | <b>Total Expenses</b>                      | <b>\$ _____</b> |

Are significant changes projected over next 12 months?  Yes  No (If yes, attach information)

\*\* Income from alimony, child support, or separate maintenance income need not be revealed if the applicant or co-applicant does not wish to have it considered as a basis for repaying this obligation.

### Balance Sheet as of \_\_\_/\_\_\_/\_\_\_

| ASSETS  | AMOUNT (\$)     | LIABILITIES                           | AMOUNT (\$)     |
|---|-----------------|---------------------------------------|-----------------|
| Cash in this Institution (all accounts)                       | \$ _____        | Notes Payable to this Institution:    | \$ _____        |
| Cash in other Financial Institutions                          | _____           | Secured:                              | _____           |
| Readily Marketable Securities (Sched. A)                      | _____           | Unsecured:                            | _____           |
| Non-readily Marketable Securities (Sched. A)                  | _____           | Notes Payable to Others (Sched. E)    | _____           |
| Accounts and Notes Receivable                                 | _____           | Secured:                              | _____           |
| Net Cash Surrender Value of Life Insurance (Sched. B)         | _____           | Unsecured:                            | _____           |
| Residential Real Estate (Sched. C)                            | _____           | Accounts payable (i.e., credit cards) | _____           |
| Real Estate Investments (Sched. C)                            | _____           | Margin Accounts                       | _____           |
| Partnerships/PC Interests (Sched. D)                          | _____           | Notes Due: Partnership (Sched. D)     | _____           |
| IRA, Keogh, Profit-sharing & Other Vested Retirement accounts | _____           | Taxes Payable                         | _____           |
| Deferred Income (# of years deferred ___)                     | _____           | Mortgage Debt (Sched. C)              | _____           |
| Personal Property (i.e., automobiles)                         | _____           | Life Insurance Loans (Sched. B)       | _____           |
| Other Assets (list):  | _____           | Other Liabilities (list):             | _____           |
|   |                 | <b>Total Liabilities:</b>             | <b>\$ _____</b> |
| <b>Total Assets:</b>  | <b>\$ _____</b> | <b>Net Worth:</b>                     | <b>\$ _____</b> |
|   |                 | <b>Combined Total:</b>                | <b>\$ _____</b> |

**CONTINGENT LIABILITIES**

Table with 3 columns: Question, YES, NO, AMOUNT (\$). Rows include questions about guarantor status, outstanding credit, legal actions, tax obligations, and total estimated tax liability.

**Schedule A – All Securities (Including non-money market mutual funds)**

For both readily marketable securities (including U.S. Governments and municipals) and non-readily marketable securities (closely held, thinly traded or restricted stock), provide number of shares (stock) or face value (bonds), description, owner(s), location held, cost, current market value, and pledged status (yes or no).

**Schedule B – Insurance**

Provide name of life insurance carrier, face amount and type of policy, beneficiary, cash surrender value, amount borrowed, and ownership of each policy applicable. List disability insurance in terms of monthly distribution and number of years covered for both applicant and co-applicant.

**Schedule C – Personal Residence & Real Estate Investments, Mortgage Debt (majority ownership only)**

For both personal residence and investment real estate, provide property address, legal owner, purchase year and price, market value, present loan balance, interest rate, loan maturity date, monthly payment, and name of lender.

**Schedule D – Partnership (less than majority ownership for real estate partnerships)**

For both business/professional and other investments (i.e., tax shelters) provide name and type of investment, date of initial investment, cost, percent owned, current market value, balance due on partnerships (notes, cash call) and final contribution date. For investments that represent a material portion of your total assets, include the relevant financial statements or tax returns or in the case of partnership investments or S-corporations, schedule K-1's.

**Schedule E – Notes Payable**

Provide due to, type of facility, amount of line, secured status (yes or no), collateral, interest rate, maturity, and unpaid balance.

**Common Additional Questions:**

- Income tax returns filed through (date): \_\_\_\_\_ Are any returns currently being audited or contested? \_\_Y \_\_N
If yes, what year(s)?
Have (either of) you or any firm in which you were a major owner ever declared bankruptcy? \_\_Y \_\_N
If yes, provide details:
Have you drawn a will? \_\_Y \_\_N
If yes, please furnish the name of the executor(s) and year will was drawn:
Number of dependants (excluding self) and relationship to applicant:
Have you ever had a financial plan prepared for you? \_\_Y \_\_N
Did you include two years federal and state tax returns with this form? \_\_Y \_\_N
Do (either of) you have a line of credit or unused credit facility at any other institution(s)? \_\_Y \_\_N
If so, indicate where, how much and name of financial institution:
Do you anticipate any substantial inheritances? \_\_Y \_\_N
If yes, explain:

**Representations and Warranties**

The information contained in this statement is provided to induce you to extend or to continue the extension of credit to the undersigned or to others upon the guarantee of the undersigned. The undersigned acknowledge and understand that you are relying on the information provided herein in deciding to grant or continue credit or to accept a guarantee thereof. Each of the undersigned represents, warrants and certifies that the information provided herein is true, correct and complete. Each of the undersigned agrees to notify you immediately and in writing of any change in name, address, or employment and of any ability of any of the undersigned to perform its (or their) obligations to you. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. If the undersigned fail to notify you as required above, or if any of the information herein should prove to be inaccurate or incomplete in any material respect, you may declare the indebtedness of the undersigned or the indebtedness guaranteed by the undersigned, as the case may be, immediately due and payable. You are authorized to make all inquiries you deem necessary to verify the accuracy of the information contained herein and to determine the credit-worthiness of the undersigned. The undersigned authorizes any person or consumer reporting agency to give you any information it may have on the undersigned. Each of the undersigned authorizes you to answer questions about your credit experience with the undersigned. As long as any obligation or guarantee of the undersigned to you is outstanding, the undersigned shall supply annually an updated financial statement. This personal financial statement and any other financial or other information that the undersigned give you shall be your property.

Date: \_\_\_/\_\_\_/\_\_\_ Your Signature: \_\_\_\_\_

Date: \_\_\_/\_\_\_/\_\_\_ Co-Applicant's Signature: \_\_\_\_\_
(if you are requesting the financial accommodation jointly)