Give us COPIES only Clips only - NO STAPLES

12 Business Information (Green Sheet)

If you are self-employed, <u>or</u> if you have had income for which you do not receive a W-2, please provide the following:

- A. A completed **Business Questionnaire** with copies of all required documents.
- B. A completed **Business Budget** (attached to Business Questionnaire)
- C. **Profit and Loss Statements** (attached to Business Questionnaire) for each of the last 6 months
- D. Photocopies of any **1099s**, or other proof of income received, if any, received within last 6 months.
- E. Photocopies of **business bank statements** showing deposits for self-employment Tax Withholding.

Business Questions

You must answer these Business Questions (18-25) <u>only if</u>, during the last **six years**, you have been <u>any</u> of the following: An officer, director, managing executive, or owner of more than 5% of the voting securities of a corporation; a partner (other than a limited partner) or a partnership; a sole proprietor; or self-employed. Attach additional sheets if necessary.

You must fill out one of these sets of questions for <u>each</u> business you own or have operated during the last six years.

18. Name, location and nature of your business . Give the names, addresses, taxpayer identification numbers, nature of the business, and beginning and ending dates of all which you were an officer within the six years immediately preceding the filing of this case.	businesses in NONE
19. Books, records, and financial statements a) Give name, address and dates of service of all bookkeepers and accountants who, within the two years immediately profiling of this bankruptcy case, kept or supervised the keeping of books of account and records.	receding the NONE
b) Give name, address and dates of service of all firms or individuals who, within the last two years have audited the boand records, or prepared a financial statement of the debtor.	oks of account NONE
c) Give name, address and dates of service of all firms or individuals who, at the time of the filing of this case, were in popular books of account and records. If the records are not available, explain.	ossession of NONE
d) Give name, address and dates of service of all financial institutions, creditors and other parties, including mercantile a agencies, to whom a financial statement was issued by the debtor within last two years .	nd trade NONE
20. Inventories a) List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of e and the dollar amount and basis of each inventory.	ach inventory, NONE
b) Give the name and address of the person having the records of each of the inventories reported in a.) above.	□ NONE
21. Current partners, officers, directors, and shareholdersa) For a partnership, list the nature & percentage of partnership interest of each partner.	□ NONE
b) If your business is a corporation, list all officers and directors of the corporation, and each stockholder who directly or owns, controls, or holds 5 % or more of the voting securities of the corporation.	indirectly NONE
22. Former partners, officers, directors and shareholders a) If your business is a partnership, list each member who withdrew from the partnership within one year immediately profiling of this case.	receding the NONE
b) If your business is a corporation, list all officers or directors whose relationship with the corporation terminated within immediately preceding the filing of this case.	one year NONE
23. Withdrawals from a partnership or distributions by a corporation If your business is a partnership or corporation, list all withdrawals or distributions credited or given to an <u>insider</u> , includ compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during the last	
24. Tax Consolidation Group If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any cogroup for tax purposes of which the debtor has been a member at any time within the last six-years.	onsolidated NONE
25. Pension Funds	

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as

☐ NONE

an employer, has been responsible for contributing at any time within the last six-years.

Business Income and Expenses

Include on this form ONLY information related to your business operation

A. GROSS BUSINESS INCOME FOR THE PREVIOUS	12 MONTHS:	
1. Gross Income For 12 Months Prior to Filing:	\$	
B. ESTIMATED AVERAGE FUTURE GROSS MONTH	LY INCOME:	
2. Gross Monthly Income:		\$
C. ESTIMATED FUTURE MONTHLY EXPENSES:		
3. Net Employee Payroll (other than Debtor)	\$	
4. Payroll Taxes	\$	
5. Unemployment Taxes	\$	
6. Worker's Compensation	\$	
7. Other Business Taxes	\$	
8. Inventory Purchases (including raw materials)	\$	
9. Purchase of Feed/Fertilizer/Seed/Spray	\$	
10. Rent (other than Debtor's principal residence)	\$	
11. Utilities	\$	
12. Office Expenses and Supplies	\$	
13. Repairs and Maintenance	\$	
14. Vehicle Expenses	\$	
15. Travel and Entertainment	\$	
16. Equipment Rental and Leases	\$	
17. Legal/Accounting/Other Professional Fees	\$	
18. Insurance	\$	
19. Employee Benefits (e.g., pension, medical, etc)	\$	
20. N/A		
21. Other (specify)	\$	
22. Total Monthly Expenses (add lines 3-21)		\$
23. Average Net Monthly Income (subtract line 22	from line 2)	\$

CHAPTER 13 BUSINESS QUESTIONNAIRE

NOTICE TO DEBTORS AND DEBTORS' ATTORNEY

Pursuant to 11 U.S.C. § 1302(c) and Local Rule 2083-1(d), debtors must provide to the trustee, on or before the First Meeting of Creditors, a completed Business Questionnaire and requested documents for each business operated by the debtor during the sixty(60) day period preceding the petition date (a copy of the Business Questionnaire is attached hereto). This requirement applies to any business in which the debtor has an ownership interest, including the following:

- 1. A sub Ch. S or Sub Ch. C corporation
- 2. A partnership
- 3. A professional corporation
- 4. A limited liability corporation
- 5. A sole proprietorship or DBA

If the Business Questionnaire and requested documents are not received by the trustee on or before the First Meeting of Creditors, the trustee is required by Local Rule 2083-1(c) to file with the court a Notice of Failure to Comply. This rule applies even if the required documents are mailed but not received by the trustee prior to the First Meeting of Creditors.

	Case Number:		
BUSINESS QUESTIONNAIRE As required by 11 U.S.C. § 1302(c) and Local Rule 2083-1(b)			
INSTRUCTIONS: Complete the case number, debtor's name ar information, unless otherwise sta	nd the question number on	all additional pa	
This Questionnaire must be sub of Creditors. Copies of all docu Questionnaire. The trustee mus all requested documents are not	ments requested herein MUS t move to dismiss your case	ST be submitted al	ong with the
1. Name of Business:			
2. Address or location of Business	<u> </u>		
3. Is your business a □ sole proprietorship; □ C-corporation; □ S-corporation; □ professional corporation; □ limited liability company (LLC); □ partnership; □ other			
4. Do you operate your business out of your home? \square Yes \square No. If no, identify whether you or your business leases, rents, or owns the business location?			
As of the date of your Bankrupto payments for your business locati	cy filing, list he amount of a on: Since	any delinquency or filing for bankrupt	rent or mortgage cy, are you current
on rent or mortgage payments fo	r your business location? \Box	Yes □ No.	
5. List the number of employ 1099: How many employ			
intend in the next 12 months to h			
If you have employees list them			
Employee Name	Position/Function	Hourly Rate	P=Part time F= Full time
	ing, are you current on paying		
maintain a trust account	e delinquency as of your bank for depositing employee wit		
Why not?	employee withholding tax re	eturns? □ Yes □ N	Jo If no State the
periods for which returns			If no, blute the

Name:______ Date:_____

If you have employees, provide COPIES of IRS Form 941 and Utah Form TC-96M or TC-96Q for the most recent 4 quarters prior to your bankruptcy filing. Do you lease employees? Yes No. If yes, list the number of leased employees and the name of the employee leasing agency: 6. Does your business collect sales tax? Yes No. If yes, provide verification of a sales tax trust account and proof that since filing for bankruptcy, sales taxes are being deposited into the trust account and paid to the appropriate taxing authority. Nhat percentage of your business do you, your spouse, and/or children own? 8. On a separate page, list all other persons with an ownership interest in your business and the percentage of their ownership. 9. If the business is a corporation, list all persons with control over corporate assets and funds.
10. When did the business start? If the business has closed, list the date
11. What is the nature of your business?
☐ Real estate or insurance sales
☐ Providing the following services:
☐ Manufacturing the following products:
☐ Independent contractor of
☐ Other
12. Is your business seasonal? ☐ Yes ☐No. If yes, list the good months
and list the bad months
13. Are you leasing any personal business property or equipment? ☐ Yes ☐ No. If yes, please
describe:
Do you intend to continue with the lease during the bankruptcy case? \square Yes \square No. If yes, attach a COPY of your lease agreement to this questionnaire.
14. Is you business registered with the State of Utah? \square Yes \square No. If no, explain on a separate sheet
why it is not registered in Utah. If yes, is your registration current and in good standing? \square Yes \square
No. If no, explain why?
15. Is your local business license current and in good standing? ☐ Yes ☐ No. If no explain
why?
*Provide COPIES , not originals, of all business licenses with this Questionnaire
16. List all other licenses you or your business is required to have:

^{*}Provide **COPIES**, not originals, of all other business licenses listed above.

☐ Business oper	xt to the insurance you cation liability insurance spensation insurance	or your business are requi	ired to carry:
☐ Vehicle insura	<u>=</u>		
	ersonal property insuran	ce	
☐ Other	nsonar property msaran		
	ES, not originals, of all r	— equired insurance	
	<u> </u>	ss carry but are not requi	red by law or regulations
to carry:	men you or your ousine	os carry out are not requi	ica by law of regulations
•	ES, not originals of proc	of of all insurance listed a	ahove
		iness, including good wil	
		ttributed to accounts rece	
	=	ttributed to inventories?	\$
	₹	ttributed to real propertie	
	~	ttributed to tools/ fixture	
	your business value is a		\$
	as a value not accounted	for the prior five question	· ————————————————————————————————————
asset, the age of each ass 21. Did you or your busing I Yes I No. If yes, list 22. Do you or your businventory was taken, the the day filing. 23. Have you or your busing I Yes I No. If ye with a security interest in 24. Do you anticipate the If yes, such debt must business. 25 List all bank accounts	set, and the estimated curiness have any accounts the estimated market variness have any inventor value of the inventory of your siness pledged assets, rees, list on a separate pagent the collateral. at you will continue to it be limited to 30-day tr	ceivables, rents, profits, e what property has been neur trade debt on a monade accounts incurred in the ses (use a separate page in the ses (use a separate p	or each asset. You filed for bankruptcy? Evaluates. \$
Bank Name	Account No.	Type of Account	Purpose
			1

Are any other persons authorized to sign on the accourgerson(s):	$\operatorname{nt}(s) \sqcup \operatorname{Yes} \sqcup \operatorname{No.} \operatorname{If yes}, \operatorname{identify such}$
*Provide COPIES , not originals, of bank statements month before you filed your bankruptcy petition, the rand the month after you filed your petition.	
26. Federal Tax Returns.	
*Provide COPIES , not originals, of your personal an along with all supporting schedules for the last three y 2's or 1099's you received.	
27. Are you current on personal self-employment taxes and (Such deposits are due April 15 th , June 15 th , Sept 15 th , and Ja 28. Do you have a business record keeping system and/ or do	an 15 th of the next tax year)
tax prep services? \square Yes \square No. If yes, identify and describe:	
29. Provide a COPY of the most recent balance sheet for this updated copy together with required monthly profit and loss 30. Other than wages listed on Schedule I, do you now receive from the operation of your business such as loan repayment loans from business, bonuses, etc.? \square Yes \square No. If yes, exp	s statements. we or expect to receive other payments s, return on business capital, personal
DECLARATION UNDER PENALTY OF P	ERJURY BY DEBTOR
I/ We declare under penalty of Perjury that I/we have ans applicable documents pertaining to this business examinatio answers and documents are true and correct.	
Name:	-
Signature:	Date:
Name:	-
Signature:	Date:
If Questionnaire is prepared by individual(s) other than debt	tor(s):
Prepares' Name:	_
Prepares' Signature:	Date:

Upon review of submitted documentation, the trustee may request additional financial information. Any additional documentation requested must be received and reviewed by the trustee prior to the confirmation hearing.