

OMB Approval No. 3245-0331 Expiration Date: 08/31/07

8(a) Business Development (BD) Program Application Alaskan Native Corporation-Owned Concern

To Be	Completed by SBA				
Date R	Received				
CTS N	Number				
Busin	ness Information				
1.	Name of Parent Alaskan Native Cor	poration (ANC)			
2.	Address of Parent ANC			City	
	County	State		Zip Code	
3.	Does the ANC own the applican subsidiary, provide the name and ad-	ant concern directly or through a wholly-owned subsidiary? If through a wholly-owned address of the wholly-owned subsidiary.			
4.	Business Name of Applicant Co	ncern (include any trade or d.b.a. name	s)*		
		*The business must be			
5.	Street Address for Business			City	
		State			
6.	Mailing Address (if different fro	m above)	Telepho	ne (Area Code/#):	
7.	Type of Business:	□ Manufacturing□ Professional Service□ Franchise	□ Retail □ Non-P	rofessional service	□ Construction □ Concession
8.	IRS Employer's ID Number	Number of En	nployees	Date Established	
9.	Primary SIC Code*		% of Re	venues	
	*The primary Stand	ard Industrial Classification (SIC) co tly completed fiscal year.			
10.	PRO-Net User ID#, if applicabl	e:			
11.	Is the firm located in a HUBZO	NE area? Yes	No	Don't Know	
12.	Transportation recipient?	d as a Disadvantaged Business Enterpri	se (DBE) by	a Department of	
10	If yes, identify States(s			DE WDE 4 0	
13.		on as a disadvantaged business entity, l			
	If yes, by which state of	r localities?			

SBA Form 1010B-ANC (8-04)

This form was electronically produced by Elite Federal Forms, Inc.

Ownership and Management Information

14.	The applicant concern is:	□ Corporation	□ Partnership	□ Limited Lia	ability Company	
	FOR CORPORATIONS ON No. of Shares Authorized by		tion: N	o of Shares Issue	d•	
	•	1				
	No. of Directors authorized A	Articles of incorporati	on; by-laws; or by ame	nament to the by-	aws:	
15.	List Owners, Directors, Of	ficers, Partners and	or Members.			
Name an	nd Title:	% Own	ned Director	Officer?	Partner or Member?	U.S. Citizen?
[Circle]						
	5				o□ Yes □ No□	Yes □ No □
	S					Yes □ No □
	5					Yes □ No □
	5					Yes □ No □
	S					Yes □ No □
Mr./ Ms	S		Yes □ No	o□ Yes □ No	$Yes \square No\square$	Yes □ No □
16.	8(a) BD concern? Yes □ No □. If yes, provide the following information: name, title, business name and addresses, and percentage of ownership. Mark as Attachment 16A.					
18.	Does another concern in the sa applicant concern? Yes Addresses, affiliation with the former 8(a) BD program partic	☐. If yes, provide the applicant firm and per	e following information reentage of ownership.	: company name.	business	
19.	Has the applicant concern curr provide the following informat individual name, title, address SBA servicing office of record	ion: business name of of previous Participan	the previous participant, dates of participation	nt in the 8(a) BD p	rogram,	
20.	Has the applicant concern ever loan? Yes □ No □. If yes, procurrent status, and SBA office	ovide the following in	formation: name, busin	a concern which ess name, and date	has received an SBA e approved,	

- 21. Does the applicant concern, not including any other firms owned by the ANC, have any subsidiaries or affiliates (see 13 CFR 121 § 103) or is it a subsidiary or affiliate of another concern? Yes □ No □. If yes, provide the following information: name and address of subsidiary and/or affiliate and an explanation of the existing relationship. Mark as Attachment 21A.
- 22. Is the applicant concern, any person listed above, or another person, such as key employees with significant authority over the concern, involved in any present or pending lawsuits? Yes □ No □. If yes, provide the following information: name of the individual, details of the suit, including current status, and provide a copy of any available documents. Mark as Attachment 22A.
- 23. Has the applicant concern filed for bankruptcy or insolvency proceedings within the past seven years? Yes□ No □. **If yes,** provide-details and a copy of the bankruptcy court's final dispensation. Mark as Attachment 23A.
- 24. Is the applicant concern, any director, officer, partner, member, or any owner of more than 10% (or their spouse), or any immediate family member debarred, suspended, voluntarily excluded or otherwise ineligible for procurement or non-procurement purposes from any department or agency of the Federal Government? Yes □ No □. If yes, please provide a list of such individuals identifying their names and positions with said organization. Mark as Attachment 24A.
- 25. Does the ANC or wholly-owned subsidiary of the ANC own 51% or more of another firm which either at the time of application or within the previous two years, has been operating in the 8(a) program? Yes \square No \square . If yes, identify the firm(s) and such firm's primary SIC code. Mark as Attachment 25A.

When submitting your application, please provide the original application, including all original SBA and IRS Forms, and a copy of the items listed in the "Checklist of Required 8(a) BD Program Application Documents." All complete applications will be processed; incomplete applications will be returned.

FOR CORPORATIONS ONLY:					
Corporate Seal	Corporate Seal (if required by state):				
By:	President's Signature	Date			
Attest By:	Corporate Secretary's Signature	Date			
	FOR ALL CONCERNS (corporations, partnerships, and limited liability companies): All officers, directors, partners, members and all owners of more than 10% must sign below.				
By:		Date			
By:		Date			
By:		Date			
		Date			
By:		Date			

PLEASE NOTE: The estimated burden for completing this form is 5 Hours per response. You are not required to respond to any collection of information unless it displays a currently valid OMB approval number. Comments on the burden should be sent to U.S. Small Business Administration, Chief, AIB, 409 3rd St., S.W., Washington D.C. 20416 and Desk Officer for the Small Business Administration, Officer of Management and Budget, New Executive Office Building, Room 10202, Washington, D.C. 20503. OMB Approval (3245-0015). PLEASE DO NOT SEND FORMS TO OMB.

The questions on the attached form were abstracted from the previous SBA Form 1010B OMB #3245-0015.

CHECKLIST OF REQUIRED 8(a) BD PROGRAM APPLICATION DOCUMENTS FOR ALASKAN NATIVE CORPORATION-OWNED CONCERN

Please provide all of the following documents in the order that they are listed and check if attached. **NOTE** "N/A" IF NOT APPLICABLE.

SBA Form 413, Personal Financial Statement - Provide for all individuals claiming disadvantaged status and his/her spouse, splitting all assets and liabilities as appropriate.
If applicable, signed copies of individual Federal income tax returns filed for the past two years

If applicable, signed copies of individual Federal income tax returns filed for the past two years, including all W-2 forms and all schedules and attachments. Provide for all individuals owning *more* than 10% and all individuals claiming disadvantaged status. Please provide signed and dated IRS Form 4506, Request for Copy or Transcript of Tax Form.

A resume of the education, technical training and business and employment experience, including employer's name, dates of employment and nature of employment, for general managers, officers, and key employees (please account for all time).

□ Documentation which demonstrates the legal status of the ANC.

BUSINESS ELIGIBILITY

PERSONAL ELIGIBILITY

For corporations only: Copy of Articles of Incorporation as filed with the state. Copy of all governing documents, such as the tribe's constitution or business charter. Copies of all minutes of shareholders meeting electing board of directors and minutes of last shareholders meeting. Copies of all minutes of board of directors meetings and all resolutions of the board of directors, including a copy of the resolution to seek 8(a) BD certification. Copies of all stock certificates (front and back) and stock register. Copy of the current Certificate of Good Standing from state where concern is incorporated. If concern conducts business in a state other than where it was incorporated, a copy of the filing as a Foreign Corporation and a current Certificate of Good Standing from that state are required as well.

For partnerships only:

Copy of Partnership Agreement.

BUSINESS ELIGIBILITY (continued)

For limited liability companies only:				
	Copy of Operating Agreement.			
	Copy of Articles of Organization as filed with the state.			
Other l	business eligibility documents - for all concerns:			
	Copies of buy/sell agreement, conditions precedent, conditions subsequent, executory agreements, voting trusts, shareholder agreements or other similar arrangements which may impact the unconditional ownership of the disadvantaged individuals.			
	Copies of current business insurance declaration pages (e.g. comprehensive, liability, worker's compensation, etc.).			
	Copies of franchise or trust agreements.			
	A brief description and history of the business.			
	Current business license (city, county, or state, as required by law).			
	Copies of any special licenses (e.g. public accountancy, engineering, architectural, contractor, etc.).			
	Copy of any distributorship, licensing or franchise agreement.			
	Copy of the current lease agreement(s) and/or proof of ownership for all business facilities.			
	Copy of current lease agreement(s) for equipment, if applicable.			
	Copies of <u>all</u> loan agreements, including lines of credit.			
	Copies of signature cards for all business bank accounts.			
	Copies of all management and joint venture agreements, indemnity agreements and consulting agreements, including agreements for assistance in completing this 8(a) BD application.			
	Provide a list of contracts held with the Federal government. Include award date, agency name, description of work and dollar value.			
	SBA Form 1623, Certification Regarding Debarment, Suspension, and Other Responsibility Matters.			
	A list of all affiliates and subsidiaries. The list should identify the name and address of the affiliate and/or subsidiary, the type of business, and the names of the affiliate/subsidiary's owners, directors and officers.			
	If bonding is required by your industry, such as construction, a statement of the bonding limit from a surety company specifying single job limit and aggregate limit.			

FINANCIAL DATA

	If there are tax liens, unsatisfied judgments, or lawsuits involving the concern or individuals involved in the applicant concern as directors, general managers, and officers, evidence of repayment arrangement, proof of compliance with repayment arrangements, and latest status of lawsuits are required.
	A current balance sheet and profit and loss statement, including an aging of accounts for the concern no older than 90 days from the filing date of this application, signed, certified and dated by the concern's highest managing individual, if a corporation, usually CEO.
	A balance sheet and profit and loss statement for each of the three preceding fiscal year-end periods, signed, certified and dated by the concern's highest individual managing individual, if a corporation, usually CEO.
	Signed copies of business Federal tax returns, including all schedules, filed for the past three years, if applicable.
	Signed copies of financial statements and Federal tax returns of any subsidiaries or affiliates for each of the three preceding fiscal year-end periods.
<u>OTHE</u>	RREQUIREMENTS
	Provide signature on the attached "Authorization, Certification and Notices."
	"Representatives and Fees." If representatives were used, please complete the attached form.
	Length of Time in Business. See below for additional requirements for applicants that have not been in business for two full years as evidenced by tax returns reporting revenue.

Length of Time in Business Requirement

Eligibility criteria requires that an applicant concern must demonstrate that it has been in business in the primary industry classification in which it seeks 8(a) BD certification for two full years prior to the date of its 8(a) BD application by submitting income tax returns showing revenues, for each of the two previous years. If the concern does not meet this requirement, the concern must demonstrate potential for success. In determining potential for success, SBA will look at a number of factors including, but not limited to: [13 C.F.R. 124. 109(c)]

- A. Technical and managerial experience and competency of the individual(s) who manage and control the daily operations of the concern;
- B. The financial capacity of the concern; and
- C. The concern's record of performance on any previous Federal or private sector contracts its primary industry classification.

AUTHORIZATION, CERTIFICATION AND NOTICES

Read the following paragraphs carefully. Your signature on the 8(a) BD Business Eligibility Statement indicates acceptance and understanding of these conditions.

- A. <u>Authority to Collect Personal Information:</u> The U.S. Small Business Administration (SBA) is authorized to determine eligibility for the 8(a) BD Program under Section 124 of Title 13 of the U.S. Code of Federal Regulations. The information submitted on SBA Form 1010A and 1010B is used to determine persoanl and business eligibility for the 8(a) BD Program. Information submitted may be given to Federal, State and local agencies for law enforcement purposes.
- B. <u>Incomplete Applications:</u> If the application is not complete, SBA will return the application to you along with a listing of missing or incomplete documentation. You may then reapply when the application is complete.
- C. <u>Disclosure of Information</u>: All information submitted in connection with this aplication may be disclosed to Federal procurement agencies considering furnishing contracts to this businsess.
- D. <u>Payment to SBA Employees:</u> Payment of any fee or gratuity to SBA employees is illegal and will subject the parties of such a transaction to prosecution.
- E. <u>Access to records:</u> Applicant agrees to allow SBA access and the right to examine corporate records including, but not limited to, books, documents, papers and other material considered by SBA to be necessary.
- F. <u>True and Complete Statements:</u> By signing this form, you are certifying that all information in your 8(a) BD application, including exhibits, is true and complete to the best of your knowledge and is submitted for consideration of 8(a) BD Program eligibility.

FOR CORPORATIONS ONLY:

Corporate Se	eal (if required by state):		
By:	President's Signature	Date:	
Attest By:	Corporate Secretary's Signature	Date:	
FOR PART	NERSHIPS ONLY: s must sign:		
Partner:		Date:	

SBA Form 1010B-ANC (8-04)

Partner:

Date: _____

FOR LIMITED LIABILITY COMPANIES ONLY:

Member:

All members must sign:				
Member:	Date:			

Date:

Under Title 18 U.S.C. Section 1001 and Title 15 U.S.C. Section 645, any person who misrepresents a firm's status as an 8(a) business concern, or makes any other false statement in order to influence the certification process in any way, or to obtain a contract awarded under the preference programs established pursuant to section 8(a), 8(d), 9, or 15 of the Small Business Act, or any other prevision of Federal Law that references Section 8(a) for a definition of program eligibility shall be:

- 1. Subject to fines and imprisonment of up to 5 years, or both, as stated in Title 18 U.S.C. Section 1001; and subject to fines of up to \$500,000 and imprisonment of up to 10 years, or both, as stated in Title 15 U.S.C. Section 645.
- 2. Subject to civil and administrative remedies, including suspension and debarment.
- 3. Ineligible for participation in programs conducted under the authority of the Small Business Act.

REPRESENTATIVE AND FEES

It is not necessary for you to retain representation to assist in the preparation and presentation of this or any other 8(a) application. However, if you do retain such representation, SBA will determine the reasonableness of fees or other compensation for services actually performed by representatives on your behalf.

List the names of attorneys, accountants, appraisers, agents or other representatives who assisted in the preparation or filing of the application. Indicate the amount of fees, bonuses, commissions or expenses paid or due. SBA reserves the right to require, at a later date, a full itemization by representatives of actual services rendered. Attach additional sheet(s), if necessary.

NAME AND OCCUPATION		TOTAL FEES
OF REPRESENTATIVE	DESCRIPTION OF SERVICES	PAID DUE
	representative of an 8(a) BD applicant for ass isonable in light of the services performed by	
The fee charged by any agent or representat BD certification cannot be contingent upon	ive of an 8(a) BD applicant for assisting the a the applicant receiving certification.	pplicant in obtaining 8(a)
Signature(s) of Representative(s)		Date
Signature of Applicant		Date