Form CM-2B
Department of Taxation - State of Hawaii
(Rev. 2020)

## STATEMENT OF FINANCIAL CONDITION AND OTHER INFORMATION

Section I.
General Information - For Corporations, Partnerships, etc.

10. Safe deposit boxes rented or accessed (List all locations, box numbers, and contents.)

Section II.
General Financial Information - continued

| 11. Real and lease property (Brief description and type of ownership) | Physical Address (include tax map key) |  |  |  |
| :--- | :--- | :--- | :--- | :--- |
|  |  |  |  |  |
|  |  |  |  |  |
|  | Policy Number | Type | Face Amount | Available Loan Value |
| 12. Life Insurance (Name of Company) |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

13. Securities (stocks, bonds, mutual funds, money market funds, government securities, etc.) Attach additional sheets as necessary.

| Kind | Quantity or <br> Denomination | Current Value | Where Located | Owner of Record |
| :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

14. Additional information regarding financial condition (Court proceedings, bankruptcies filed or anticipated, transfers of assets for less than full value, changes in market conditions, etc.)
15. Accounts / Notes Receivable (include current contract jobs, loans to stockholders, officers, partners, etc.)

| Name | Address |  | Amount Due | Date Due |
| :--- | :--- | :--- | :--- | :--- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
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|  |  |  |  |  |

Section III.
Asset and Liability Analysis

| Description | Current <br> Market Value | Liabilities Balance Due | Equity in Asset | Amount of Monthly Payment |
| :---: | :---: | :---: | :---: | :---: |
| ASSETS |  |  |  |  |
| 16. Cash |  |  |  |  |
| 17. Bank accounts (from Item 8) |  |  |  |  |
| 18. Securities (from Item 13) |  |  |  |  |
| 19. Cash or loan value of Insurance (from Item 12) |  |  |  |  |
| 20. Accounts / Notes Receivable (from Item 15) |  |  |  |  |
| 21. Merchandise Inventory |  |  |  |  |
| 22. Vehicles (Model, year, license) |  |  |  |  |
| a. |  |  |  |  |
| b. |  |  |  |  |
| c. |  |  |  |  |
| 23. Real property (from Item 11) |  |  |  |  |
| a. |  |  |  |  |
| b. |  |  |  |  |
| c. |  |  |  |  |
| 24. Machinery and equipment |  |  |  |  |
| a. |  |  |  |  |
| b. |  |  |  |  |
| 25. Merchandise inventory |  |  |  |  |
| 26. Other assets |  |  |  |  |
| a. |  |  |  |  |
| b. |  |  |  |  |
| c. |  |  |  |  |
| d. |  |  |  |  |
| e. |  |  |  |  |
| Total Assets |  |  |  |  |
| LIABILITIES |  |  |  |  |
| 27. Bank revolving credit (from Item 9) |  |  |  |  |
| 28. Loan on Insurance |  |  |  |  |
| 29. Accounts payable |  |  |  |  |
| 30. Notes payable |  |  |  |  |
| 31. Mortgages |  |  |  |  |
| 32. Judgments |  |  |  |  |
| 33. Other liabilities |  |  |  |  |
| a. |  |  |  |  |
| b. |  |  |  |  |
| c. |  |  |  |  |
| d. |  |  |  |  |
| e. |  |  |  |  |
| 34. Federal taxes owed |  |  |  |  |
| 35. State taxes owed |  |  |  |  |
| Total Liabilities |  |  |  |  |

Section IV.
Income and Expense Analysis


Under penalties of perjury, I (we) declare that to the best of my (our) knowledge and belief this statement of assets, liabilities, and other information is true, correct, and complete.

| 54. Your signature | 55. Date |
| :--- | :--- |

Additional information or comments:

