

## 8(a) Application Preview

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## Basic Eligibility

### Revenue

**Has your company ever generated revenue?**

Yes  No  Not Applicable

**More Information** +

Your company must demonstrate potential for success by showing that it has been in business in its primary industry for two years, or you will need to request a waiver of this requirement. If your business has not yet generated revenues, you will not be successful in obtaining a waiver. Reference: 13 CFR § 124.107.

Please note that companies owned by Alaska Native Corporations, Tribes, Native Hawaiian Organizations, and Community Development Corporations have special rules regarding potential for success. Therefore, if your company is entity-owned, select "Not applicable". Reference: 13 CFR §§ 124.109(c)(6), 124.110(g), and 124.111(f).

### Prior Company Participation

**Has your company ever participated in the 8(a) Program?**

Yes  No

**More Information** +

A company can only participate in the 8(a) Program one time. This includes participation under another name, voluntary withdrawal, termination, or graduation. If your company has already used its one-time eligibility, your application will be automatically closed.

### Prior Applicant Participation

**Have you already used your one-time 8(a) eligibility to qualify a business for the 8(a) Program?**

Yes  No

**More Information** +

An individual may only assert disadvantaged status to qualify one firm for the 8(a) Program. If you confirm that you have already used your one-time eligibility to qualify a business for the 8(a) Program, your application will be closed.

### Assets from Prior 8(a) Participant

**Are 50% or more your company's assets from a former 8(a) Participant?**

Yes  No

**More Information** +

If so, provide detail of the assets and the name of prior 8(a) Program participant. A company is not eligible for the 8(a) Program if 50% or more of their assets are from a former 8(a) Participant

### Resource Partner

**Have you met with a Resource Partner to assist with your 8(a) application?**

Yes  No

+ [Add documents](#)

**More Information** +

If you provide evidence of your coordination with the Resource Partner, your application may be prioritized for review. You can find local resource partners near you at [sba.gov/local-assistance](https://sba.gov/local-assistance).

### Outside Consultant

**Did you hire a consultant to help with your 8(a) application?**

Yes  No

**More Information** +

If yes, upload a signed [Representatives and Fees form](#) and consulting agreement. Outside consultants may include attorneys, accountants, appraisers, agents, or other representatives who assisted in preparing your application.

## U.S. Citizenship

### Are you a U.S. Citizen?

Yes  No

#### More Information +

In order to participate in the 8(a) Business Development program, any individuals claiming disadvantaged status must be U.S. citizens. Reference: 13 CFR § 124.101

If you were born outside the United States, upload evidence of your U.S. Citizenship. Acceptable evidence includes:

- U.S. Passport
- Certificate of Naturalization
- Consular Report of Birth Abroad of a Citizen of the United States of America (Form FS-240)

## Ownership

### Ownership Table

#### Please detail the ownership of your company:

Type of Owner	Name	Claiming Disadvantage?	Basis for Disadvantage	Ownership %	Action
Individual Primary Owner	Sdf	Yes	Black American	100%	...
<b>Total</b>				100%	

[Add Entry](#)

[Add documents](#)

#### More Information +

Add an entry for each owner of your company. An owner can be another individual or another company.

A company is considered entity-owned if it is 51% owned by an American Indian Tribe, Alaska Native Corporation, Community Development Corporation, or Native Hawaiian Organization. Entity-owned companies have specific requirements for the 8(a) Program. If your company is entity-owned, please complete and upload the relevant form 1010 from the following list:

- [American Indian Tribe \(AIT\) form](#)
- [Alaska Native Corporation \(ANC\) form](#)
- [Community Development Corporation \(CDC\) form](#)
- [Native Hawaiian Organization \(NHO\)](#)

## Management Table

### Detail the management of your company:

Principal Type	Name	Position	Action
<i>No items added yet</i>			

**Add Entry**

#### More Information +

All officers, board members, managing members, industry licensing holder, and any key employees must complete their own section of the application. You will be prompted for contact information to invite each additional contributor.

## Change in Last Two Years

### Has your company's ownership, legal structure, or name changed in the past two years?

Yes  No

#### More Information +

If yes, provide detail of all prior owners, ownership percentages, and dates of ownership transfer within the last two years. Also provide the buy/sell agreement, proof of payment, and evidence of how the firm was valued.

## Corporate Governance Documents

### Corporations

Please upload the following:

- **Articles of Incorporation (original and current version)**
- **Bylaws (current version)**
- **Current Shareholder meeting minutes showing the election of the Board of Directors**
- **Current Board of Director meeting minutes showing the election of Officers**
- **Stock certificates (front and back) created in accordance with your Bylaws**
- **Stock ledger**

#### More Information +

Bylaws should show that you have complete control of the company. Common issues include supermajority or unanimous consent voting provisions that could impact complete control of the company. Shareholder and Board meetings must be held in accordance with your company's by-laws and meeting minutes must detail the election of the Board of Directors and the Officers.

## LLC Governance Documents

**Please upload the following:**

- **Articles of Organization (including amended versions if applicable)**
- **Operating Agreement (current version)**
- **Meeting minutes showing the election of the current Directors and Officers, if applicable**
- **Membership shares and ledgers, if applicable**
- **Transmutation agreement if you live in a community property State/Territory - (Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington, Wisconsin, Guam, Puerto Rico.)**

[+ Add documents](#)

### More Information +

Operating agreement should show that you have complete control of the company. Common issues requiring revision include supermajority and unanimous consent voting provisions that undermine the owner's complete control of the company. Operating agreements are required for SBA to determine the control of the company regardless of local or State requirements.

Community property is owned jointly by a married couple. A transmutation agreement allows for your spouse to change the character of their ownership from community property to separate property.

## Partnership Governance Documents

**Please upload your Partnership Agreement.**

[+ Add documents](#)

### More Information +

One or more individual(s) claiming disadvantaged status must serve as general partners, with control over all partnership decisions. A partnership in which no individual claiming disadvantaged status is a general partner will be ineligible for participation. Reference: [13 CFR §124.105\(b\)](#)



## Sole Proprietorship DBA

### Does the applicant firm have a Doing Business As (DBA) Name?

Yes  No  
*Attachment is required*

[+ Add documents](#)

Please explain why you made this choice.

*Comment is required*

#### More Information +

If yes, upload the DBA Name Certificate or Fictitious Business Name Filing with the city, county or state where the name applies. Specific filing requirements are established by one of those governing authorities and will vary. If your city or state does not require this filing, please explain. Doing Business As Name may include an Assumed Name, Fictitious Name, or Trade Name.

## Certificate of Good Standing

### Please upload your company's Certificate of Good Standing (dated within one year)

*Attachment is required*

[+ Add documents](#)

#### More Information

A **Certificate of Good Standing** is a state-issued document that says your firm is authorized to do business in that state. It is issued by your state's Secretary of State office. Different states use different names for the Certificate of Good Standing. It may also be called a Certificate of Existence or a Certificate of Status.

## Character

### Pending Lawsuits

**Is your company a defendant in any pending lawsuits?**

Yes  No

[+ Add documents](#)

#### More Information +

If yes, please provide:

- A summary of the current status of the lawsuit and claims, including the company's interest in the suit
- A copy of the complaint, answer, and/or counterclaim filed in the suit

### Company Bankruptcy

**Has your company filed for bankruptcy or insolvency in the last 7 years?**

Yes  No

[+ Add documents](#)

#### More Information +

If yes, please provide a copy of the bankruptcy court's final order with all schedules and/or discharge.

## Company Delinquent Debt

**Does your company have any outstanding delinquent federal, state, or local financial obligations or liens?**

Yes  No

**More Information** +

Report any obligations, including delinquent tax returns and delinquent SBA loans. If yes, provide all of the following that apply:

- Information about any tax limits and unsatisfied judgments
- Evidence of repayment arrangements
- Proof of compliance with repayment arrangements
- Year of tax delinquency and an explanation

If a company or any of its principals fails to pay significant overdue debts to the Federal Government, both the company and the principals are not eligible to participate in the 8(a) Business Development program. Examples of debts are unresolved tax liens and defaults on federal loans or other federally assisted financing.

## Potential for Success

### Tax Returns

**Please upload your company's federal tax returns filed in the last five years, including all schedules, attachments, and proof of payment if a balance was due.**

[+ Add documents](#)

**More Information** +

If your company has not been in business for five years, upload all available tax returns.

### Primary NAICS

**Are you applying for the 8(a) Program under the same primary NAICS code listed for your company on [SAM.gov](https://sam.gov)?**

621420

**More Information** +

If no, enter your new primary NAICS code in the explanation field. You must also update your primary NAICS code in SAM.gov.

You can find your primary NAICS code in your business profile on Certify.SBA.gov or SAM.gov.

In most cases, your company's primary NAICS code must account for the largest portion of sales during the most recently completed fiscal year.

## Two Year Tax Revenue

**Do your company's two most recent tax returns show revenues in its primary industry?**

Yes  No

[+ Add documents](#)

**More Information** +

SBA requires a company to have at least two years in business generating operating revenues to be eligible for the 8(a) Program. SBA may waive this requirement if you can provide evidence that you meet five conditions related to your company's potential for success in the 8(a) Program. Would you like to apply for a waiver of this requirement?

- Provide evidence that you have substantial business management experience.
- Provide evidence that your company has technical experience in its primary industry.
- Provide evidence of your company's current financial position.
- Provide evidence that your company has a successful history of performance in its primary industry.
- Provide evidence that your company will be able to perform on contracts in the program.

## Financial Statements

**Upload your company's most recent financial statements.**


[+ Add documents](#)

**More Information** +

Financial statements must include a balance sheet and a profit & loss Statement, be prepared in accordance with generally accepted accounting principles, and be no more than 180 days old when submitted. Ensure that equity/retained earnings roll forward correctly and that the distributions reported on the balance sheet are supported by company tax returns. Previous year-end financial statements are acceptable from January 1 through June 30 of each year. Starting July 1 of each year, interim or year-to-date financial statements will be required.

### Fiscal Year

**When does your company's fiscal year end?**



**More Information**

If you performed work as a subcontractor, list the prime contractor as the customer.

### Contracts

**List the 10 largest contracts/projects awarded to your company in the last year.**

Award Date	Customer Name	NAICS Code	Description of Work	Total Contract Value	Annual Revenue	Action
<i>No items added yet</i>						

[Add Entry](#)

**More Information** +

If you performed work as a subcontractor, list the prime contractor as the customer.

### Industry Licensing

**Is your company required to have any industry specific licensing?**

Yes  No  
Attachment is required

[+ Add documents](#)

**More Information** +

If yes, upload your company's special licenses required in its industry, such as engineering, accounting, construction, etc. Please include detail showing the individual who qualified your company for the industry specific licensing.

## Construction Bonding

### Is your company in the construction industry?

Yes  No

[+ Add documents](#)

#### More Information +

If yes, upload a Statement of Bonding Ability detailing the single and aggregate bonding limits or an explanation of why bonding is not required.

## Control

### Control Agreements

#### Control Agreements

Does your company have any agreements that may impact ownership or control? These may include:

- joint venture
- mentor protégé
- indemnity
- consulting
- distributorship
- licensing
- teaming
- trust
- franchise
- management
- Certifications
- Permits
- Shared locations or other resources
- Ownership of another company
- Other financial support
- Lease with financial or familial interest
- Loans not from a commercial bank

Yes  No

#### More Information +

Upload a copy of each agreement.

## Highest Compensation

**Are you the highest compensated person in your company?**

Yes  No  Not Applicable - Entity Owned

Please explain why you made this choice.

**More Information** +

Please provide evidence of who the highest compensated member of your company is. If it is not you, please provide an explanation why that is in the best interest of your company.

## Disadvantaged Applicant

### Gender

**Gender**

▼

**Continue**

If unable to proceed, please scroll up to find error message.

### Marital Status

**Marital Status**

Unmarried

Married

Legally Separated

Attachment is required

[Add documents](#)

**More Information** +

**Continue**

If unable to proceed, please scroll up to find error message.

Social Security Number

**Social Security Number**

Phone Number

**Best contact phone number**

Home Address

**Provide your current home address**

Street Address

City State


   

ZIP (Optional) Country




### Date of Birth

**Date of Birth**



### Country of Birth

**Country of Birth:**



### Resume

**Upload your personal resume.**

[Add documents](#)

**More Information**


Provide a personal resume with the following:

- Education
- Technical training
- Description of your current duties within your business
- Any other current or past employment experience including:
  - Employer's name
  - Dates of employment
  - Job title
  - Description of duties
- Be sure to include any outside businesses you own

### Outside Employment

**Do you have a job outside your company?**

Yes  No

**More Information** 

If yes, provide an explanation of how your outside employment impacts your ability to manage your company during normal business hours and evidence of your work schedule from your employer. If you received W-2 income from any source outside the applicant company on your most recent personal tax return, you must provide a letter from your prior employer attesting to your last date of employment.

## Ownership or Management of Other Company

**Do you have ownership or management interest in any other company?**

Yes  No

**More Information** +

If yes, provide the following:

- Proof of ownership
- Federal Tax Returns – 5 years
- Year-to-date financial statements

Management interest includes but is not limited to one or more officers, directors, managing members, or partners who control the board of directors and/or management of one company also control the board of directors and/or management of another company.

## Family 8(a) Participation

**Have any of your immediate family members ever owned a company that was admitted to the 8(a) Program?**

Yes  No

[+ Add documents](#)

**More Information** +

If your immediate family members own a company that was admitted to the 8(a) Program, please provide the following

- Company name
- Company primary NAICS code during participation in 8(a) Program
- Company EUI
- Business relationship with your company
- Detail of any common ownership or management of your company by the family member

Immediate family members include your father, mother, husband, wife, son, daughter, brother, sister, grandfather, grandmother, grandson, granddaughter, father-in-law, and mother-in-law

## DVD Federal Employment

### Are you a Federal Government employee?

Yes  No

[+ Add documents](#)

#### More Information +

The Federal Acquisition Regulation [Subpart 3.6](#) places restrictions on Federal Government employees which may prevent your company from acquiring contracts or create conflicts of interest. In addition, there are limitations on SBA's ability to provide assistance to government employees. Reference 13 CFR 105.301. If you are a Federal Government employee, provide an explanation of how it does not impact your full-time devotion to the company applying for the 8(a) BD Program.

## Household Federal Employment

### Household Federal Employment

#### Is any member of your household a Federal Government employee at or above a GS-13 or its equivalent or an SBA employee in any position?

Yes  No

[+ Add documents](#)

#### More Information +

If yes, and employed outside of SBA, provide a letter of no objection from the ethics official at the federal agency employing the member of your household. Reference 13 CFR § 105.301 - Assistance to officers or employees of other Government organizations. If your household member is an SBA employee, your application will need to be reviewed by the Standards of Conduct Committee before a final eligibility decision is made.

## Personal Bankruptcy

### Have you filed for personal bankruptcy in the last 7 years?

Yes  No

#### More Information

If yes, please provide an explanation and attach a copy of the bankruptcy court's final order or discharge.

## Pending Civil Lawsuit

**Are you a party to a pending civil lawsuit?**

Yes  No

### More Information

If yes, please provide the following details about the lawsuit:

- Your interest in the suit
- Summary of the claims
- Current status of the suit

## Delinquent Obligations

**Are you delinquent in paying or filing any of the following:**

- **Federal or Federally guaranteed obligations (including Federal student loans)**
- **Business taxes or liens**
- **Personal Federal, State, or local tax returns**

Yes  No *Please answer this question*

### More Information

If yes, please provide the following details and upload supporting documentation for EACH delinquency:

- Explanation of the delinquency
- Type of delinquency
- Status of delinquency (e.g., dismissed, satisfied)
- Details of the repayment arrangement
- Compliance with repayment of taxes
- Deferred payment status for student loans

### Other Names

**Have you ever gone by any other names?**

Yes  No

Please explain why you made this choice.

Comment is required

**More Information**

If yes, provide detail of your other names

### Current Charges

**Are you presently subject to an indictment, criminal information, arraignment, or other means by which formal criminal charges are brought in any jurisdiction?**

Yes  No

**More Information** +

If yes, upload evidence of the current status of the charges.

### Recent Arrest

**Have you been arrested in the past six months for any criminal offense?**

Yes  No

**More Information** +

If yes, upload an explanation including the current status of any charges.

## Prior Convictions

**For any criminal offense, other than minor motor vehicle violations, have you ever:**

- **Been convicted**
- **Plead guilty**
- **Plead nolo contendere**
- **Been placed on pretrial diversion**
- **Been placed on any form of parole or probation (including probation before judgment)**

Yes  No

**More Information** +

If yes, provide details including dates, locations, fines, sentences, misdemeanor or felony, dates of parole/probation, unpaid fines or penalties, name(s) under which charged, and any other pertinent information. Include expunged records.

## Social Disadvantage

### Social Disadvantage

Select one of the following “presumed disadvantaged groups” as the basis of your social disadvantage.

**More Information** +

Socially disadvantaged individuals are those who have been subjected to racial or ethnic prejudice or cultural bias within American society because of their identities as members of groups and without regard to their individual qualities. The following individuals are presumed socially disadvantaged:

- Black Americans
- Hispanic Americans (South America, Central America, Mexico, Cuba, the Dominican Republic, Puerto Rico, Spain, and Portugal)
- Native Americans (Alaskan Natives, Native Hawaiian, enrolled member of federally or state recognized Indian Tribe)
- Asian Pacific Americans (Burma, Thailand, Malaysia, Indonesia, Singapore, Brunei, Japan, China, Hong Kong, Taiwan, Laos, Cambodia, Kampuchea, Vietnam, Korea, The Philippines, U.S. Trust Territory of the Pacific Islands, Republic of Palau, Republic of the Marshall Islands, Federated States of Micronesia, the Commonwealth of the Northern Mariana Islands, Guam, Samoa, Macao, Fiji, Tonga, Kiribati, Tuvalu, Nauru)
- Subcontinent Asian Americans (India, Pakistan, Bangladesh, Sri Lanka, Bhutan, the Maldives Islands, Nepal)

NOTE: Being born in a country does not, by itself, suffice to make the birth country an individual's country of origin for purposes of being included within a designated group. An individual who is not a member of one of these groups must establish individual social disadvantage by a preponderance of the evidence. 13 C.F.R. § 124.103(c).

## Native American Documentation

**Please provide documentation supporting your membership in the “Native American” group.**

[+ Add documents](#)

**More Information** +

If you are an Alaskan Native or Native Hawaiian, please upload your birth certificate.

If you are an enrolled member of a federal or state recognized Indian tribe, please upload your tribal card.

If you are claiming as a Native American and are not currently an enrolled member of a federally or state recognized tribe then you must make a claim based upon a preponderance of the evidence. Go back to the previous question and select “None of the Above”.

## Other Basis of Disadvantage

**Select one of the following “objective distinguishing features” as the basis of your social disadvantage and add details in the comment field.**

Other x | v

Please explain why you made this choice.

**More Information** +

Please identify the specific feature in the comment field. For example, if you selected "Physical Handicap" you might write "Visually Impaired" in the comment field.

## Social Disadvantage Narrative

### Social Narrative

Please attach a narrative statement providing specific claims, incidents of bias, or discriminatory conduct directed towards you.

[Add documents](#)

#### More Information +

Please provide the following details in your narrative:

- When and where each incident occurred
- Who committed the act
- How the incident took place
- How the incident negatively impacted your entry into or advancement in the business world

Other guidance for narrative:

- Narrative should be three pages or less.
- Your disadvantage must be rooted in treatment you received in American society (not another country) and must be chronic and substantial.
- The disadvantage must have negatively impacted your entry or advancement in the business world.
- Experiences should be related to education, employment and business history (including current or previously owned companies ).
  - Education - SBA considers such factors as denial of equal access to institutions of higher education, exclusion from social and professional association with students or teachers, denial of educational honors rightfully earned, and social patterns or pressures which discouraged the individual from pursuing a professional or business education.
  - Employment - SBA considers such factors as unequal treatment in hiring, promotions and other aspects of professional advancement, pay and fringe benefits, and other terms and conditions of employment; retaliatory or discriminatory behavior by an employer; and social patterns or pressures which have channeled the individual into nonprofessional or non-business fields.
  - Business history - SBA considers such factors as unequal access to credit or capital, acquisition of credit or capital under commercially unfavorable circumstances, unequal treatment in opportunities for government contracts or other work, unequal treatment by potential customers and business associates, and exclusion from business or professional organizations.

## Distributions

**Detail the draws/distributions taken from the applicant firm in the last three years.**

2020 <span style="float: right;">▲</span>	2021 <span style="float: right;">◀</span>	2022 <span style="float: right;">◀</span>	Actions <span style="float: right;">◀</span>
<i>No items added yet</i>			

**Add item**



## Transferred Assets

### Transfer Assets

Have you transferred any assets to any immediate family member for less than fair market value in the last two years?

Yes  No

#### More Information +

If yes, please provide the following details about the transfer.

- Nature and value of asset
- Details of the transfer (including sale price)
- Recipient name
- Relationship to recipient

Fair market value is the price that property would sell for on the open market. It is the price that would be agreed upon between a willing buyer and a willing seller, with neither being required to act and both having reasonable knowledge of the relevant facts.

Immediate family members include your father, mother, husband, wife, son, daughter, brother, sister, grandfather, grandmother, grandson, granddaughter, father-in-law, and mother-in-law. Reference: CFR § 124.3

## Tax Returns

### Tax Returns

1. Upload your Individual Income Tax Returns for the last three completed tax years. Include all Schedules and attachments.
2. Upload your Wage and Tax Statements (W-2s) for the last three years. If you filed your tax return jointly with a spouse, upload your spouse's W-2s for the last three years, as well.
3. If you owed taxes, upload evidence of payment. (This may be a bank statement or [IRS Tax Account Transcript](#))

[+ Add documents](#)

#### More Information +

Please provide all W-2 forms, schedules, forms, statements, and 1099s accompanying the tax returns. If you file jointly with the individual claiming disadvantage, do not upload duplicate documents. You may still need to upload your individual W-2.