EXHIBIT B: OMB FORMS

LITTLE HOUSE
3131 NEBRASKA AVE NW WASHINGTON, DC 20001

NPS Lease# L-ROCR-001-2025

OFFEROR FINANCIAL STATEMENTS AND PROJECTIONS
SMALL LEASES

PROPOSAL PACKAGE
L-ROCR001-25

Financial Statements

Provide the appropriate **Financial Statements** as described below**:**

The Service needs this information to verify there are enough funds available to be able to pay the required expenses to execute the requirements of the draft lease and satisfy any other existing debt. If the Offeror's total debts exceed current assets, provide a narrative explaining how these debts will be paid.

Financial Statements include both an income statement and a balance sheet. An income statement lists all of your income and expenses as of the last day of your most recent fiscal year. A balance sheet lists everything that you own and everything that you owe as of a certain date.

If an Offeror is not yet formed, each individual or entity that will establish the proposed lessee should submit the appropriate financial statements as set forth below.

The Service requires all existing business entities to submit Business Financial Statements.

Provide, at a minimum, an audited or reviewed (i) income statement for the two most recent fiscal years and (ii) balance sheets (1) for the most recent fiscal year and (2) as of the end of the most recent month prior to the submission of your proposal. business financial Statements should reflect the entity's business as a whole, including all operations both inside and outside of the park area.

If the entity does not have audited or reviewed financial statements, complete the Most Recent Fiscal Year Balance Sheet **(Table 1),** the Most Recent Month Balance Sheet **(Table 2),** and the Historical Income Statement **(Table 3)** provided below.

The Service requires Sole Proprietors to submit Personal Financial Statements.

Complete the Personal Financial Statements **(Table 4)** below.

Table 1: Business Financial Statement - Most Recent Fiscal Year Balance Sheet
For Fiscal Year Ending: ________________

Business Financial Statement- Most Recent Fiscal Year Balance Sheet		
1	Cash in Bank	$
2	Accounts Receivable	$
3	Inventory	$
4	Other Current Assets (Describe)	$
5	**Total Current Assets** (add lines 1-4)	$
6	Personal Property (Equipment) Items	$
7	Other Fixed Assets (Describe)	$
8	(LESS Accumulated Depreciation)	$
9	**Total Fixed Assets** (add lines 6-7, minus line 8)	$
10	**Total Assets** (add lines 5 & 9)	$
11	Accounts Payable	$
12	Bank Loans Outstanding	$
13	Loans due to Owners	$
14	Other Current Liabilities (Describe)	$
15	**Total Current Liabilities** (add lines 11-14)	
16	Long-Term Liabilities (Describe)	$
17	**Total Liabilities** (add lines 15 and 16)	$
18	**Total Net Worth** (line 10 minus line 17)	$

Describe the information in lines 4, 7, 14 & 16 below:

OMB Control No. 1024-0233
Expiration Date:04/30/2025

Table 2: Business Financial Statement - Most Recent Month Balance Sheet
For Month Ending: ____

Business Financial Statement- Most Recent Month Balance Sheet		
1	Cash in Bank	$
2	Accounts Receivable	$
3	Inventory	$
4	Other Current Assets (Describe)	$
5	**Total Current Assets** (add lines 1-4)	$
6	Personal Property (Equipment) Items	$
7	Other Fixed Assets (Describe)	$
8	(LESS Accumulated Depreciation)	$
9	**Total Fixed Assets** (add lines 6-7, minus line 8)	$
10	**Total Assets** (add lines 5 & 9)	$
11	Accounts Payable	$
12	Bank Loans Outstanding	$
13	Loans due to Owners	$
14	Other Current Liabilities (Describe)	$
15	**Total Current Liabilities** (add lines 11-14)	
16	Long-Term Liabilities (Describe)	$
17	**Total Liabilities** (add lines 15 and 16)	$
18	**Total Net Worth** (line 10 minus line 17)	$

Describe the information in lines 4, 7, 14 & 16 below:

Table 3: Business Financial Statement - Historical Income Statement

Historical Income Statement

Some lines may not be used, place "N/A" in these lines.
Include revenues and expenses related to the business as a whole, including any operations both inside and outside of the park area.

		Year 1	Year 2
1	**Revenues**		
1a	Revenue Source 1 ______________________	$	$
1b	Revenue Source 2 ______________________	$	$
1c	Revenue Source 3 ______________________	$	$
1d	Revenue Source 4 ______________________	$	$
2	**Total Revenues** (add lines 1a-1d)	$	$
3	**Cost of Goods Sold**		
4	**Total Cost of Goods Sold**	$	$
5	**Gross Profit** (line 2 minus line 4)	$	$
6	**Direct Expenses**		
6a	Salaries and Wages	$	$
6b	Payroll Taxes and Benefits	$	$
6c	Operating Supplies	$	$
6d	Car and Truck Expenses	$	$
6e	Other Direct Expense 1 ___________________	$	$
6f	Other Direct Expense 2 ___________________	$	$
7	**Total Direct Expenses** (add lines 6a-6f)	$	$
8	**Undistributed Expenses**		
8a	Administrative and General	$	$
8b	Marketing (Advertising)	$	$
8c	Utilities	$	$
8d	Repair and Maintenance	$	$
8e	Other Undistributed Expense 1 _____________	$	$
8f	Other Undistributed Expense 2 _____________	$	$
9	**Total Undistributed Expenses** (add lines 8a-8f)	$	$
10	**Fixed Expenses**		
10a	Insurance	$	$
10b	Rent to NPS (if applicable)	$	$
10c	Other Fixed Expense 1 ___________________	$	$
10d	Other Fixed Expense 2 ___________________	$	$
11	**Total Fixed Expenses** (add lines 10a – 10d)	$	$
12	**Total direct, undistributed and fixed expenses** (add lines 7, 9 and 11)	$	$
13	**EBITDA*** (Line 5 minus line 12)	$	$
14	Depreciation and Amortization	$	$
15	Interest	$	$
16	**Net Income Before Income Taxes** (Line 13, minus lines 14 & 15)	$	$

*Earnings before Interest, Taxes, Depreciation and Amortization

Table 4: Personal Financial Statement

Name:		
As of Date:		
% Ownership:		
1	Cash in Bank	$
2	IRA and Other Retirement Accounts	$
3	Stocks & Bonds in Taxable Accounts	$
4	Real Estate	$
5	Accounts and Loans Receivable	$
6	Life Insurance (Cash Surrender Value Only)	$
7	Automobile (Present Value Only)	$
8	Other Personal Assets (Describe)	$
9	**Total Assets** (add lines 1-8)	$
10	Accounts Payable	$
11	Bank Loans Outstanding	$
12	Mortgage Loans Outstanding	$
13	Other Loans Outstanding (Describe)	$
14	Unpaid Tax Liability	$
15	Other Liabilities (Describe)	$
16	**Total Liabilities** (add lines 10-14)	$
17	**Total Net Worth** (subtract line 16 from line 9)	$
18	Salary	$
19	Investment Income	$
20	Other Income (Describe)	$
21	**Total Income** (add lines 18-20)	$
22	Endorsements or Guarantees	$
23	Other Contingent Liabilities (Describe)	$
24	**Total Contingent Liabilities** (add lines 22-23)	$

Describe the information in lines 8, 13, 15, 20 & 23 below:

Personal Property

Using **Table 5** below, list all currently owned personal property with monetary value equal to or exceeding [Insert $ amount] that you will use for **your operations inside of the park area** and provide an estimate of its current value. Do not include any personal property for your operations outside of the park area.

Using **Table 5** below, list all of the personal property with monetary value equal to or exceeding [Insert $ amount] that you will intend to acquire to use for this lease.

Table 5: Personal Property to be used in association with the Draft Lease

Personal Property	Quantity	Value of ***Currently Owned*** Personal Property
		$
		$
		$
		$
Total Value of Currently Owned Personal Property		**$**
Personal Property	Quantity	Value of Personal Property that ***will be Acquired*** Prior to Operation
		$
		$
		$
		$
Total Value of Personal Property Investment		**$**

Start-Up Costs

Estimate the start-up costs needed to begin operating the business (within the park area only) and use those estimates to complete the **Table 6** below. **Only provide estimates for those items you need to acquire in order to begin operating. Do not include costs for items you already own.** For working capital (cash), estimate the amount of cash you will need to have available after purchasing the other items (describe) in order to begin operating the business. For example, working capital would include salaries and rent you will pay before you generate income from the operations in the park area.

The total "Value of Personal Property Investment that will be Acquired Prior to Operation" that you listed in the previous table should be equal to the amount you list for Personal Property (Equipment) in this table.

Table 6: Start-Up Costs

Estimate of Investment Required to Begin Operations in the Draft Lease	
Acquisition/Investment Category	Acquisition/Investment Amount
Personal Property (Equipment)	$
Merchandise (Inventory)	$
Supplies	$
Working Capital (Cash)	$
Other (Describe)	$
Total Funds Needed	**$**
Describe "Other" investment listed in the table:	

Operating Projections

a) Based on the condition of your personal property provided or purchased for the operation, attach a list of items using **Table 7**, that you will need to replace during the term of the lease. Include the anticipated year for the expenditure, the quantity of item(s) to be replaced, the description of the item(s), the approximate total value of the replacement, and how you plan to pay for the personal property replacement. (For example, cash, bank loan etc.).

If your projected expenditures for personal property investments exceeds $50,000, provide an explanation of how you will fund the investment.

If you will not need to replace personal property during the term of the Draft Lease, explain your reasoning.
Add or remove rows for years as needed in **Table 7**.

Table 7: Additional Personal Property Investments

Anticipated Year of Expenditure	Quantity	Capitalized Personal Property (Equipment) Items	Total Value	How will you fund the investment?
Year 1				
Year 1				
Year 2				
Year 2				
Year 3				
Year 3				
Year 4				
Year 4				
Year 5				
Year 5				
Year 6				
Year 6				
Year 7				
Year 7				
Year 8				
Year 8				
Year 9				
Year 9				
Year 10				
Year 11				

b) Demonstrate that your proposal is financially feasible by completing the following Prospective Income Statement, **Table 8**.

- Estimate the amount of income and expenses for the proposed operation for the first year of operation. We included blank lines on the prospective income statement for your estimates for expense categories we did not list. Describe those categories on the blank lines.

- Include only revenues and expenses related to the uses authorized by the Draft Lease inside the park area. Do not include other services you may provide outside the park area.

Fully explain the assumptions on which you base your projections and provide sufficient details so we fully understand your assumptions. Provide revenue estimates by department, if applicable. If the projections show significantly increased revenues from the projections provided in your response to the solicitation for the lease, provide a full explanation of the changes.

Note to Offeror: If you are not familiar with making these types of projections, you should consult an accountant or business advisor.

Additional Instructions for completing the Prospective Income Statement on the next page:

Line 1: If applicable, show revenues by departments (separate revenue activities - e.g., guide services, gift sales, snack bar revenue, etc.).
Line 8a: Administrative and General includes the costs of managing the business and may include items such as: credit card commissions; legal and accounting fees; travel; meals and entertainment; postage and printing; professional training; telecommunications expenses; etc.
Line 10a: Insurance: As required in Exhibit B of the Draft Lease
Line 13: Earnings before interest, taxes, depreciation and amortization

Table 8: Prospective Income Statement

If a **line is marked with an asterisk**, see additional notes on the previous page.

Some lines may not be used, place "N/A" in these lines.

Include only revenues and expenses related to the uses authorized by the Draft Lease **inside the park area** in your prospective income statement.

Do not include other servicesyou provide outside the park area. This is **unlike** the income statement you provided in Subfactor 4(a).

		Year 1	Assumptions
1	**Revenues***		
1a	Revenue Source 1 ______________________	$	
1b	Revenue Source 2 ______________________	$	
1c	Revenue Source 3 ______________________	$	
1d	Revenue Source 4 ______________________	$	
2	**Total Revenues** (add lines 1a-1d)	$	
3	**Cost of Sales**		
4	**Total Cost of Sales**	$	
5	**Gross Profit** (Line 2 minus line 4)	$	
6	**Direct Expenses**		
6a	Salaries and Wages	$	
6b	Payroll Taxes and Benefits	$	
6c	Operating Supplies	$	
6d	Car and Truck Expenses	$	
6e	Other Direct Expense 1 ___________________	$	
6f	Other Direct Expense 2 ___________________	$	
7	**Total Direct Expenses** (add lines 6a-6f)	$	
8	**Undistributed Expenses**		
8a	Administrative and General*	$	
8b	Marketing (Advertising)	$	
8c	Utilities	$	
8d	Repair and Maintenance	$	
8e	Other Undistributed Expense 1 _____________	$	
8f	Other Undistributed Expense 2 _____________	$	
9	**Total Undistributed Expenses** (add lines 8a-8f)	$	
10	**Fixed Expenses**		
10a	Insurance*	$	
10b	Rent to NPS	$	
10c	Other Fixed Expense 1 ___________________	$	
10d	Other Fixed Expense 2 ___________________	$	
11	**Total Fixed Expenses** (add lines 10a-10d)	$	
12	**Total direct, undistributed and fixed expenses** (add lines 7, 9 and 11)		
13	**EBITDA*** (Line 5 minus line 12)	$	
14	Depreciation and Amortization	$	
15	Interest	$	
16	**Net Income Before Income Taxes** (Line 13, minus lines 14 & 15)	$	

NOTICES

PRIVACY ACT

STATEMENT

Authority: 54 U.S. Code Chapter 1021—Privileges and Leases; 54 U.S. Code § 306121—Lease or Exchange.

Purpose: The purposes of the system are (1) to assist NPS employees in managing the NPS Leasing program allowing for residential and commercial uses within a unit of the National Park System to ensure that business activities are conducted in a manner that complies with Federal laws and regulations; (2) to monitor resources that are or may be affected by the authorized residential and/or commercial uses within a unit of the National Park System; (3) to track applicants and holders of leases who are planning to conduct or are conducting business within units of the National Park System; and (4) to provide to the public the description and contact information for businesses that provide services in national parks.

Routine Uses: In addition to those disclosures generally permitted under 5 U.S.C.552a(b) of the Privacy Act, records or information contained in this system may be disclosed outside DOI as a routine use pursuant to 5 U.S.C. 552a(b)(3) to other Federal, state and local governments, tribal organizations, and members of the general public upon request for names, addresses and phone numbers of lease holders conducting business within units of the National Park System for the purpose of informing the public of the availability of the services offered by the lease holder. In addition, records or information contained in this system may be disclosed outside DOI based on an authorized routine use when the disclosure is compatible with the purpose for which the records were compiled as described under the system of records notice for this system.

Disclosure: Voluntary, however, failure to provide the requested information may impede our ability to 1) manage the National Park Service (NPS) Leasing Program allowing for residential and/or commercial uses within a unit of the NPS, 2) monitor resources that are or may be affected by the authorized residential and/or commercial uses, and 3) provide the public the description and contact information for businesses that provide services in national parks.

PAPERWORK REDUCTION ACT STATEMENT

We collect this information under the authority of 54 U.S.C. Chapter 1021. We use this information to evaluate a lease proposal. Your response is required to obtain or retain a benefit. We may not collect or sponsor and you are not required to respond to a collection of information unless it displays a currently valid OMB control number. OMB has approved this collection of information and assigned Control No. 1024-0233.

ESTIMATED BURDEN STATEMENT

We estimate that it will take no more than 5 hours to complete this form, including time to review instructions, gather and maintain data, and complete and review the form. You may send comments on the burden estimate or any aspect of this form to the Information Collection Clearance Officer, National Park Service, 1201 Oakridge Drive, Fort Collins, CO 80525. Please do not send your completed form to this address.

BUSINESS ORGANIZATION INFORMATION
Corporation, Limited Liability Company, Partnership, or Joint Venture

Note: Either a Form 10-353 or Form 10-354 is completed for each proposal, depending on the nature of ownership of the company.

Complete separate form for the submitting business entity and any and all parent entities.

Name of Entity and Trade-name, if any		
Address		
Telephone Number	**Fax Number**	**Email Address**
Contact Person		
Title		
Tax ID#	**State of Formation**	**Date of Formation**

Ownership	Percentage of Ownership Interests	Current Value of Investment
Names and Addresses of those with controlling interest and key principals of business		
Total Interests Outstanding and Type(s):		

Officers and Directors or General Partners or Managing Members or Venturers	Address	Title and/or Affiliation

NOTICES

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Disclosure: Voluntary, however, failure to provide the requested information may impede our ability to 1) manage the National Park Service (NPS) Leasing Program allowing for residential and/or commercial uses within a unit of the NPS, 2) monitor resources that are or may be affected by the authorized residential and/or commercial uses, and 3) provide the public the description and contact information for businesses that provide services in national parks.

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ESTIMATED BURDEN STATEMENT

We estimate that depending on the complexity of your business organization it will take between 5 and 10 hours to complete this form, including time to review instructions, gather and maintain data, and complete and review the form. You may send comments on the burden estimate or any aspect of this form to the Information Collection Clearance Officer, National Park Service, 1201 Oakridge Drive, Fort Collins, CO 80525. Please do not send your completed form to this address.

BUSINESS ORGANIZATION INFORMATION
Individual* or Sole Proprietorship

Note: Either a Form 10-353 or Form 10-354 is completed for each proposal, depending on the nature of ownership of the company.

Complete separate form for the submitting business entity and any and all parent entities.

Name of Individual and Tradename, if Any**		
Address		
Telephone Number	**Fax Number**	**Email Address**
Contact Person (if other than the Offeror)		
Tax ID #	**Years in Business (of same type as proposed service(s))**	**Current Value of Business**
Role in Providing Proposed Service(s)		

* Due to difficulties determining authority to act and ownership, the Service will not accept a proposal from spouses jointly as a purported business entity. Either one individual must serve as the Offeror or the spouses must form a corporation, partnership, or limited liability company to serve as Offeror.

** If the sole proprietorship acts under a name other than that of its owner (i.e., does business as "company name"), also add the jurisdiction where the company's trade name is registered, if any.

NOTICES

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Routine Uses: In addition to those disclosures generally permitted under 5 U.S.C.552a(b) of the Privacy Act, records or information contained in this system may be disclosed outside DOI as a routine use pursuant to 5 U.S.C. 552a(b)(3) to other Federal, state and local governments, tribal organizations, and members of the general public upon request for names, addresses and phone numbers of lease holders conducting business within units of the National Park System for the purpose of informing the public of the availability of the services offered by the lease holder. In addition, records or information contained in this system may be disclosed outside DOI based on an authorized routine use when the disclosure is compatible with the purpose for which the records were compiled as described under the system of records notice for this system.

Disclosure: Voluntary, however, failure to provide the requested information may impede our ability to 1) manage the National Park Service (NPS) Leasing Program allowing for residential and/or commercial uses within a unit of the NPS, 2) monitor resources that are or may be affected by the authorized residential and/or commercial uses, and 3) provide the public the description and contact information for businesses that provide services in national parks.

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We estimate that it will take no more than 1 hour to complete this form, including time to review instructions, gather and maintain data, and complete and review the form. You may send comments on the burden estimate or any aspect of this form to the Information Collection Clearance Officer, National Park Service, 1201 Oakridge Drive, Fort Collins, CO 80525. Please do not send your completed form to this address.

BUSINESS HISTORY INFORMATION

PROPOSAL PACKAGE
L-ROCR001-25

Business History Information Form

Business history information should be provided for the Offeror AND any entity that will provide financial or management assistance. If the Offeror is not yet formed, provide a business history form for each Offeror-Guarantor.

The information provided below is for the entity: ________________________________

(1) Has Offeror ever defaulted from or been terminated from a lease, management or concession contract, or been forbidden from contracting by a public agency or private company?

☐ YES ☐ NO

If YES, provide full details of the circumstances.

(2) List any Bankruptcies, Receiverships, Foreclosures, Transfers in Lieu of Foreclosure, and/or Work-Out/Loan Modification Transactions during the past five years. Include an explanation of the circumstances, including nature of the event, date, type of debt (e.g., secured or unsecured loan), type of security (if applicable), approximate amount of debt, name of lender, resolution, bankruptcy plan, and/or other documentation as appropriate. If none, check the box below. Otherwise, provide full details below.

☐ NONE

(3) Describe any pending litigation or administrative proceeding (other than those covered adequately by insurance) which, if adversely resolved, could materially impact the financial position of the Offeror. If none, check the box below. Otherwise, provide full details below.

☐ NONE

(4) Describe any lawsuit, administrative proceeding or bankruptcy case within the past five years that concerned the Offeror's alleged inability or unwillingness to meet its financial obligations. If none, check the box below. Otherwise, provide full details below.

☐ NONE

(5) Describe any liens recorded against the Offeror within the past five years (whether from taxing authorities or judgments) and, if resolved, provide a copy of any lien release. If none, check the box below. Otherwise, provide full details below.

☐ NONE

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ESTIMATED BURDEN STATEMENT

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