# Key Level I Application ‐ Financial Section

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## SCHEDULE "A" - CASH IN BANK

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Within the last two (2) years, or since the last renewal/initial application, list below all bank accounts (checking, savings, time deposits, certificates of deposit, money market funds, etc.) foreign and domestic, maintained by you, your spouse, domestic partner or dependent child. Identify with an asterisk (\*) any check writing accounts held with brokerage houses, insurance companies, etc. For foreign accounts convert balance to U.S. currency and supply date of conversion.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name and address of institution | Name of person(s) and Tax Identification number(s) appearing on account | Account number | Interest rate (%) | General nature of account | Date of balance | **Balance** |
|  |  |  | % |  |  | $ |
| % | $ |
| % | $ |
| % | $ |
| Date of conversion:  | **Total current balance** (Enter this figure in item 1b, column B on page 16.) |

## SCHEDULE "B" - LOAN, NOTES AND OTHER RECEIVABLES

Within the last two (2) years, or since the last renewal/initial application, list below all loans, notes and other receivables held by you, your spouse, domestic partner or dependent child. For foreign accounts convert balance to U.S. currency and supply date of conversion.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Held by (you, spouse, domestic partner or dep. child) | Name and address of debtor | Interest rate (%) | **Original loan amount** | Original date of loan/note receivable | Total payments | Date due | Nature of advance & nature of security, if any (indicate if unsecured) | **Current balance** |
|  |  | % | $ |  |  |  |  | $ |
| % | $ | $ |
| % | $ | $ |
| % | $ | $ |
| % | $ | $ |
| Date of conversion:  | **Total original loan amount(s)** (Enter this figure in item 2, column A on page 16.) |  | **Total current balance** (Enter this figure in item 2, column B on page 16.) |

## SCHEDULE "C" - SECURITIES

Provide the information in the table below Within the last two (2) years, or since the last renewal/initial application, for all stocks, bonds, mutual funds, commodity accounts, options, warrants, etc., held or controlled by you, your spouse, domestic partner or dependent child in any jurisdiction. Whenever interest exists through a mutual fund or holding company, the individual stocks or bonds held by such mutual fund or holding company need not by listed; whenever such interest exists through a beneficial interest in a trust, the securities held in such trust shall by listed if you, your spouse, domestic partner or dependent children have knowledge of what securities are so held. **INDICATE PUBLICLY TRADED SECURITIES BY AN ASTERISK(\*).** For foreign accounts convert balance to U.S. currency and supply date of conversion.

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Held by (you, spouse, domestic partner ordep. child) | Number of securities or contracts held | Type of security | Name of issuing company or government agency/organization | Market value at time of acquisition | **Date of & price at purchase** | % of ownership if greater than 5% | Registered owner | Date of valuation | **Current market value** |
|  |  |  |  | $ |  | % |  |  | $ |
|  | $ |  |  |
| $ |  | % | $ |
|  | $ |  |  |
| $ |  | % | $ |
|  | $ |  |  |
| $ |  | % | $ |
|  | $ |  |  |
| $ |  | % | $ |
|  | $ |  |  |
|  | **Total** |  | **Total current** |
|  | **purchase** | **market value** (Enter |
| Date of conversion:  | **price** (Enter this figure in | this figure in item 3,column B on page |
|  | item 3, column | 16.) |
|  | A on page16.) |  |
|  |

## SCHEDULE "D" - REAL ESTATE INTERESTS

Within the last two (2) years, or since the last renewal/initial application, indicate below the location, size, general nature, acquisition date and other information requested regarding any real property in any jurisdiction in which any direct, indirect, vested or contingent interest is held by you, your spouse, domestic partner or dependent child, along with the names of all individuals or entities who share a direct, indirect, vested or contingent interest therein. **(Provide a copy of your most current paid personal and/or property taxes)** For foreign accounts convert balance to U.S. currency and supply date of conversion.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Held by (you, spouse, domestic partner ordep. child) | Address parcel/lot number | Lot size/stand no./square footage of building | Type of property | Date acquired/down payment | Individuals or entities sharing interest (include % of ownership for each) | **Purchase price of****% owned** | Monthly rental income, if any | **Estimated market value of****% owned** |
|  |  |  |  |  |  | $ | $ | $ |
| $ |  |  |  |
|  | $ | $ | $ |
| $ |  |  |  |
|  | $ | $ | $ |
| $ |  |  |  |
|  | $ | $ | $ |
| $ |  |  |  |
| Date of conversion:  | **Total purchase price** (Enter this figure in item 4, column A on page 16.) |  | **Total current market value** (Enter this figure in item 4, column B on page 16.) |

## SCHEDULE "E" - CASH VALUE LIFE INSURANCE

Within the last two (2) years, or since the last renewal/initial application, indicate below the information requested with regard to the cash value of all life insurance policies held by you, your spouse, domestic partner or your dependent child. For foreign accounts convert balance to U.S. currency and supply date of conversion.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Held by(you, spouse, domestic partner or dependent child) | Date purchased | Insurance carrier policy number | Beneficiary(ies) | Face value | Annual premium payments | **Cash surrender value** | Effective date of cash surrender value |
|  |  |  |  | $ | $ | $ |  |
| $ | $ | $ |
| $ | $ | $ |
| $ | $ | $ |
| $ | $ | $ |
| Date of conversion:  | **Total cash surrender value** (Enter this figure in item 5, columnB on page 16.) |  |

## SCHEDULE "F" - CASH VALUE - PENSION/RETIREMENT FUNDS

Within the last two (2) years, or since the last renewal/initial application, indicate below the information requested with regard to the cash value of all retirement/investment/pension funds\* held by you, your spouse or domestic partner. For foreign accounts convert balance to U.S. currency and supply date of conversion.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Held by(you, spouse or domestic partner) | Type of fund | Type of securities held and account number, if any | Employer/Institution | **Cumulative employee contribution** | Cumulative employer contribution | **Current cash value** | Effective date of cash value |
|  |  |  |  | $ | $ | $ |  |
| $ | $ | $ |
| $ | $ | $ |
| $ | $ | $ |
| $ | $ | $ |
| Date of conversion: \* If you are filing this application in the United States, the information is to include IRA, 401K and KEOGH plans. | **Total cumulative employee contribution** (Enter this figure in item 6,column A on page 16.) |  | **Total current cash value** (Enter this figure in item 6, column B on page16.) |  |

## SCHEDULE "G" - VEHICLES

Within the last two (2) years, or since the last renewal/initial application, indicate below the information requested with regard to all vehicles owned or leased by you, your spouse, domestic partner or dependent child. For foreign accounts convert balance to U.S. currency and supply date of conversion.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Held by (you, spouse,domestic partner or dependent child) | Type of vehicle | Owned or Leased\* | Date of purchase/ lease | Model Year | Make/model of vehicle | **Cost\*\*** | **If owned, current market value** |
|  |  |  |  |  |  | $ | $ |
| $ | $ |
| $ | $ |
| Date of conversion: \_\_\_\_\_\_\_\_\_\_\_\_\* If leased, specify in this column the length of the lease, total lease costs, down payments, monthly payments and number of payments over the life of the lease.\*\* If leased, enter the sum of the down payment plus monthly payments to date as the total cost. | **Total cost of vehicles** (Enter this figure in item 8, column A on page 16.) | **Total current cash value** (Enter this figure in item 8, column B on page16.) |

## SCHEDULE "H" - OTHER ASSETS

Within the last two (2) years, or since the last renewal/initial application, list below the information requested regarding all other assets, including any business investments in which any direct, indirect, vested or contingent is held by you, your spouse, domestic partner or your dependent child. Business interests should include, but not be limited to, joint ventures, partnerships, sole proprietorships, corporations and LLCs. Other assets should include, but not be limited to, art collections, coin collections, and antiques. For foreign accounts convert balance to U.S. currency and supply date of conversion.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Held by (you, spouse,domestic partner or dependent child) | Name | Nature of assetType of entity | Annual income | Date of acquisition | **Cost** | % of ownership interest | Date of valuation | **Current market value** |
|  |  |  | $ |  | $ | % |  | $ |
| $ | $ | % | $ |
| $ | $ | % | $ |
| $ | $ | % | $ |
| $ | $ | % | $ |
| Date of conversion:  | **Total cost of other assets** (Enter this figure in item 9, column Aon page 16.) |  | **Total current market value of other assets** (Enter this figure in item 9, column B on page 16.) |

## SCHEDULE "I" - NOTES PAYABLE

Within the last two (2) years, or since the last renewal/initial application, list below the information requested with regard to all notes payable for which you, your spouse, domestic partner or dependent child are obligated. Under "description", provide a description of the liability, including its purpose. For foreign accounts convert balance to U.S. currency and supply date of conversion.

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Held by(you, spouse, domestic partner or dependent child) | Name and address of creditor | Account number, if any | Date incurred | Due date | Interest rate (%) | Amount of periodic payment/pay period | **Original amount of note** | Nature of security, if any & description | Total payments | **Outstanding amount of liability** |
|  |  |  |  |  | % | $ | $ |  |  | $ |
| % | $ | $ | $ |
| % | $ | $ | $ |
| % | $ | $ | $ |
| % | $ | $ | $ |
| Date of conversion:  | **Total original amount of notes payable** (Enter this figure in item 10, column Con page 17.) |  | **Total amount of outstanding notes payable** (Enter this figure in item 10, column Don page 17.) |

## SCHEDULE "J" - LOANS AND OTHER PAYABLES

Within the last two (2) years, or since the last renewal/initial application, list below the information requested with regard to all accounts payable (include lines of credit, installment loans, revolving charge accounts and any other accounts) for which you, your spouse, domestic partner or your dependent child are obligated. Under "Description", provide a description of the liability, including its purpose. For foreign accounts convert balance to U.S. currency and supply date of conversion.

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Held by (you, spouse, domestic partner or dependent child) | Name and address of creditor  | Account number, if any | Date opened or incurred | Due date | Interest rate (%) | Nature of account | **Original amount of liability** | Nature of security, if any & description | Total payments | **Current amount outstanding** |
|  |  |  |  |  | % |  | $ |  |  | $ |
| % | $ | $ |
| % | $ | $ |
| % | $ | $ |
| Date of conversion:  | **Total original amount of liability** (Enter this figure in item 11, column C on page 17.) |  | **Total amount of outstanding loans & other payables** (Enter this figure in item 11, column D on page 17.) |

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## SCHEDULE "K" - TAXES PAYABLE

Within the last two (2) years, or since the last renewal/initial application. list below the information requested with regard to all taxed payables for which you, your spouse, domestic partner or your dependent child are obligated. For foreign accounts convert balance to U.S. currency and supply date of conversion.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Held by (you, spouse,domestic partner or dependentchild) | Taxing authority | Nature of tax | **Date and amount of original obligation** | Fines, penalties and interest, if any | **Total amount due** |
|  |  |  |  | $ | $ |
| $ | $ |
| $ | $ |
| $ | $ |
| $ | $ |
| Date of conversion:  | **Total original tax obligation(s)** (Enter this figure in item 12, column C on page 17.) |  | **Total amount of taxes payable** (Enter this figure in item 12, column D on page 17.) |

## SCHEDULE "L" - MORTGAGES OR LIENS PAYABLE ON REAL ESTATE

Within the last two (2) years, or since the last renewal/initial application, list below the information requested with regard to all mortgages or liens due and owing on real estate for which you, your spouse, domestic partner or your dependent child are obligated. In the "Description" column, provide a description of the real estate, including the type, condition and any improvements. For foreign accounts convert balance to U.S. currency and supply date of conversion.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Held by (you, spouse,domestic partner or dependentchild) | Name, address & phone number of mortgagee or lien holder | Account number | Date incurred | **Original amount of liability** | Description/ address of real estate | Term of mortgage/int erest rate (%) | Amount of periodic payment/pay period | **Current mortgage balance** |
|  |  |  |  | $ |  | % | $ | $ |
| $ | % | $ | $ |
| $ | % | $ | $ |
| $ | % | $ | $ |
| $ | % | $ | $ |
|  | **Total original** |  | **Total** |
|  | **mortgages or** | **mortgages or** |
|  | **liens payable** | **liens payable** |
|  | **on real estate** | **on real estate** |
| Date of conversion:  | (Enter thisfigure in item | (Enter this figurein item 13, |
|  | 13, column C | column D on |
|  | on page 17.) | page 17.) |

## SCHEDULE "M" - LOANS AGAINST INSURANCE/PENSION PLANS

Within the last two (2) years, or since the last renewal/initial application, list below the information requested with regard to all loans against life insurance policies, pension plans, etc., taken by you, your spouse, domestic partner or your dependent child. For foreign accounts convert balance to U.S. currency and supply date of conversion.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Held by (you, spouse,domestic partner or dependentchild) | Insurance carrier/pension plan | Purpose of loan | **Original amount of loan** | Interest rate (%) | Date of loan | Periodic payment amount/pay period | **Current loan balance** |
|  |  |  | $ | % |  | $ | $ |
| $ | % | $ | $ |
| $ | % | $ | $ |
| $ | % | $ | $ |
| $ | % | $ | $ |
| Date of conversion:  | **Total original liability insurance/pension loans** (Enter this figure in item 14, column C on page 17.) |  | **Total amount outstanding insurance/pension loans** (Enter this figure in item 14, column D on page 17.) |

## SCHEDULE "N" - ANY OTHER INDEBTEDNESS

Within the last two (2) years, or since the last renewal/initial application, list below the information requested with regard to any other indebtedness for which you, your spouse, domestic partner or your dependent child are obligated. For foreign accounts convert balance to U.S. currency and supply date of conversion.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Held by(you, spouse, domestic partner or dependent child) | Name, address & phone number of creditor | Interest rate (%) | Description of liability, type of obligation & nature of security, if any | Due date | Amount of periodic payment/ pay period | **Original amount of liability** | **Outstanding amount of indebtedness** |
|  |  | % |  |  | $ | $ | $ |
| % | $ | $ | $ |
| % | $ | $ | $ |
| % | $ | $ | $ |
| % | $ | $ | $ |
| % | $ | $ | $ |
| Date of conversion:  | **Total original amount other indebtedness** (Enter this figure in item 15, column Con page 17.) | **Total amount outstanding other indebtedness** (Enter this figure in item 15, column D onpage 17.) |

## SCHEDULE "O" - CONTINGENT LIABILITIES

Within the last two (2) years, or since the last renewal/initial application, list below the information requested with regard to all contingent liabilities for which you, your spouse, domestic partner or dependent child are obligated. In the "Description" column, provide a description of the liability, including its purpose. For foreign accounts convert balance to U.S. currency and supply date of conversion.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Held by (you, spouse,domestic partner of dependent child) | Name, address & phone number of contingent creditor | Date incurred | Account number | Primary debtor | Description of obligation including nature of security, if any | **Original amount of contingent obligation** | **Current amount of contingent obligation** |
|  |  |  |  |  |  | $ | $ |
| $ | $ |
| $ | $ |
| $ | $ |
| $ | $ |
|  | **Total original** | **Total amount of outstanding contingent liabilities** (Enter this figure in item 16, column D on page 17.) |
|  | **contingent** |
|  | **liabilities** (Enter |
| Date of conversion:  | this figure in item |
|  | 16, column C on |
|  | page 17.) |

## NET WORTH STATEMENT -- ASSETS

**NOTE: Complete the financial statements on pages 1 through 15 and copy the totals in the appropriate space on the assets and liabilities pages.**

Within the last two (2) years, or since the last renewal/initial application, list all assets, tangible and intangible, in which a direct or indirect interest is held by you, your spouse, domestic partner or your dependent child. For each line item, list both the cost of the asset and the present market values as of the date of this statement unless this cannot reasonably be done, in which case any special valuation date should be noted in the column provided. Detail each line entry on the appropriate schedule. For foreign accounts convert balance to U.S. currency and supply date of conversion.

|  |  |  |  |
| --- | --- | --- | --- |
| Asset | Cost at date acquired or purchased (A) | Current market value (B) | Special valuation date, if any |
| 1. Cash
	1. On hand
 | a) $ 0.00 | a) $ 0.00 |  |
| b) In bank (Schedule A) | b) $ 0.00 | b) $ 0.00 | b) |
| 2. Loans, notes andother receivables (Schedule B) | $ 0.00 | $ 0.00 |  |
| 3. Securities (Schedule C) | $ 0.00 | $ 0.00 |  |
| 4. Real estate interests (Schedule D) | $ 0.00 | $ 0.00 |  |
| 5. Cash value life insurance (Schedule E) | $ 0.00 | $ 0.00 |  |
| 6. Cash value pension/retirement funds (Schedule F) | $ 0.00 | $ 0.00 |  |
| 7. Furniture and clothing (Reasonable estimate) | $ 0.00 | $ 0.00 |  |
| 8. Vehicles (Schedule G) | $ 0.00 | $ 0.00 |  |
| 9. Other(Schedule H) | $ 0.00 | $ 0.00 |  |
| **Total Assets** | $ 0.00 | $ 0.00 |  |

Date of conversion:

## NET WORTH STATEMENT -- LIABILITIES

**NOTE: Complete the financial statements on pages 1 through 15 and copy the totals in the appropriate space on the assets and liabilities pages.**

Within the last two (2) years, or since the last renewal/initial application, list all liabilities of you, your spouse, domestic partner and your dependent child. Enter the amount as of the date of this statement. Detail each line entry on the appropriate schedule. For foreign accounts convert balance to U.S. currency and supply date of conversion.

|  |  |  |
| --- | --- | --- |
| Liability | Original amount of liability (C) | Amount outstanding (D) |
| 10. Note payable(Schedule I) | $ 0.00 | $ 0.00 |
| 11. Loans and other payables (Schedule J) | $ 0.00 | $ 0.00 |
| 12. Taxes payable(Schedule K) | $ 0.00 | $ 0.00 |
| 13. Mortgages or liens on real estate(Schedule L) | $ 0.00 | $ 0.00 |
| 14. Loans against insurance/pensions(Schedule M) | $ 0.00 | $ 0.00 |
| 15. Other indebtedness(Schedule N) | $ 0.00 | $ 0.00 |
| **Total liabilities** | $ 0.00 | $ 0.00 |
| **NET WORTH**Total assets(From column B) less Total liabilities(From column D) | $ 0.00 | $ 0.00 |
| 16. Contingent liabilities(Schedule O) | $ | $ |

**Date of statement:** Please provide the name, address and phone number of the person completing this statement if it is completed by someone other than you.

**IMPORTANT:** The date of this net worth statement must be within three (3) months of the date this application is submitted to the Missouri Gaming Commission.

**Date of conversion:**