

Business Information

Business Name _____

Business Nature	<input type="checkbox"/> Agriculture, Forestry, Fishing	<input type="checkbox"/> Mining	<input type="checkbox"/> Services
	<input type="checkbox"/> Construction	<input type="checkbox"/> Public Administration	<input type="checkbox"/> Wholesale Trade
Business Form	<input type="checkbox"/> Equipment	<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Other
	<input type="checkbox"/> Finance, Insurance, Real Estate	<input type="checkbox"/> Transportation, Communication, Electrical	<input type="checkbox"/> Unknown
	<input type="checkbox"/> Manufacturing		
	<input type="checkbox"/> C Corporation	<input type="checkbox"/> LLC	<input type="checkbox"/> Sole Proprietorship
	<input type="checkbox"/> S Corporation	<input type="checkbox"/> Professional Corporation (PC)	<input type="checkbox"/> Association
	<input type="checkbox"/> Private Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Charitable Organization
	<input type="checkbox"/> Public Corporation	<input type="checkbox"/> Limited Partnership (LP)	<input type="checkbox"/> Non-Profit Organization
	<input type="checkbox"/> Personal Service Corporation	<input type="checkbox"/> LLP	<input type="checkbox"/> Unknown

Business Value

Current Value	Business Tax Bracket	Annual Growth Rate	Years to Project Value
\$ _____	_____ %	_____ %	_____

Key Person Information

First Name	Middle Name	Last Name	Birth Date
_____	_____	_____	_____

Position	% Owned	Cost Basis	Tax Bracket	Years to Retirement
_____	_____ %	\$ _____	_____ %	_____

Key Person's Financial Impact

Portion of Profits Attributed to Key Person: _____ %

Portion of Sales Attributed to Key Person: _____ %

Number of Years Needed to Train Replacement for Key Person: _____ Years

Key Person's Annual Salary: \$ _____

Other Owners

**If the "% Owned" for the Other Owners do not add up to 100%, the software will assume "All Others" own the remaining percentage.*

Owner 2	_____	_____	_____	____%	\$ _____	____%	_____
	Name	Birth Date	Position	% Owned	Cost Basis	Tax Bracket	Yrs. to Retire

Owner 3	_____	_____	_____	____%	\$ _____	____%	_____
	Name	Birth Date	Position	% Owned	Cost Basis	Tax Bracket	Years to Retire

Owner 4	_____	_____	_____	____%	\$ _____	____%	_____
	Name	Birth Date	Position	% Owned	Cost Basis	Tax Bracket	Years to Retire

Owner 5	_____	_____	_____	____%	\$ _____	____%	_____
	Name	Birth Date	Position	% Owned	Cost Basis	Tax Bracket	Years to Retire

Owner 6	_____	_____	_____	____%	\$ _____	____%	_____
	Name	Birth Date	Position	% Owned	Cost Basis	Tax Bracket	Years to Retire

Owner 7	_____	_____	_____	____%	\$ _____	____%	_____
	Name	Birth Date	Position	% Owned	Cost Basis	Tax Bracket	Years to Retire

Owner 8	_____	_____	_____	____%	\$ _____	____%	_____
	Name	Birth Date	Position	% Owned	Cost Basis	Tax Bracket	Years to Retire

Owner 9	_____	_____	_____	____%	\$ _____	____%	_____
	Name	Birth Date	Position	% Owned	Cost Basis	Tax Bracket	Years to Retire

Owner 10	_____	_____	_____	____%	\$ _____	____%	_____
	Name	Birth Date	Position	% Owned	Cost Basis	Tax Bracket	Years to Retire

Impact of Key Person

Total Annual Company Sales \$ _____

Circle a number between 1 -10 to rate the impact of the Key Person on the Business.

Unique Qualities

Qualities that cannot be replaced easily

1	2	3	4	5	6	7	8	9	10
Not A Factor		Some Considerations				Important Contributions			Major Factor

Employee Relationships

Effects on spirit and productivity of co-workers

1	2	3	4	5	6	7	8	9	10
Not A Factor		Some Considerations				Important Contributions			Major Factor

Business Continuation

Importance in the plans for continuing the business

1	2	3	4	5	6	7	8	9	10
Not A Factor		Some Considerations				Important Contributions			Major Factor

Company Credit

Creditors' reactions; ability to collect accounts receivable

1	2	3	4	5	6	7	8	9	10
Not A Factor		Some Considerations				Important Contributions			Major Factor

Moneys Owed Key Person

Repayment of loans or deferred compensation

1	2	3	4	5	6	7	8	9	10
None				Some					Significant Amount

Documentation of Duties

Would the replacement know the job?

1	2	3	4	5	6	7	8	9	10
Complete				Some					None

Survivors' Expectations

Would the family expect various considerations?

1	2	3	4	5	6	7	8	9	10
None		Only Funded Benefits				Some Expectations			High Expectations

Business Interest

Are there plans to acquire the business interest?

1	2	3	4	5	6	7	8	9	10
Fully Funded Agreement		Agreement But No Funding				Funding Needed			No Plans