#### **1** Basic information

Business name	
Industry name or code	
Zip code	

## 2 Company profile

Contact person's first name		Contact person's last n	ame
E-mail address			
Address 1			
Address 2			
City	State		Zip code
Phone number		No. of employees	
Type of ownership	Tax form		Year of inception

#### Reason for valuation

Seeking equity financing

Looking to sell my business

Accounting preparation

Seeking debt financing
Looking to buy a business
409-A valuation pre-assessment

Estate planning
Insurance & risk planning
Strategic Planning

(3) Income & Expenses

	<b>2018</b> (projected)	2017	2016
Revenue			
Pretax income			
Officer compensation			
Interest expenses			
Non cash expenses			
One-time/non-operating expenses/losses			
One-time/non-operating revenues/gains			

## (4) Assets

Balance sheet data will be compared to industry benchmarks and the valuation will be adjusted

accordingly.	<b>2018</b> (projected)	2017	2016
Cash			
Accounts receivable			
Inventory			
Other current assets			
Fixed assets			
Intangible assets			

#### **(5)** Liabilities

	<b>2018</b> (projected)	2017	2016
Accounts payable			
Other short-term liabilities			
Bank loans			
Other long-term liabilities			
Contingent liabilities			

#### 6 Growth

Please provide us with your estimate in **percentage** format.

Projected revenue growth (annualized growth rate)	Long term EBITDA margin	Percent of business rec	urring
Do you have intellectual propert	y, including trade secrets or patents?	Yes	No

#### **7** Operations

3

Percentage of sales from top three customers?	Projected profit and rever exited business.	ue impact if owi	ner
Does your current life or key person insurance cover the business valuation	0	Yes	No
Do you rent or own?		Rent	Own

If you <b>OWN</b> instead of rent, please complete this section.		
What is the Fair Market Value of Your Property?		
What is the remaining mortgage on the property?		
What is the square footage?		
Is the property owned by this entity? if yes, what would the true market level monthly rent be?		
Is the property owned by a 2nd entity with common ownership? if yes, What is the current monthly rent paid to the 2nd entity?		
What would the true market level monthly rent be?		
If you <b>RENT</b> instead of own, please complete this section		
Is rent paid to an independent 3rd party? if yes, what is your monthly rent? What is the square footage?		
Is rent paid to an entity that you own or are affiliated with? if yes, What is the current monthly rent you are paying? What would the true market level monthly rent be? What is the square footage?		

## What's next?

Once we receive your completed form, we will schedule time to discuss your business valuation and its implications with you.

The personal information you provided in this factfinder may be stored and used by the advisor and/or firm to help develop a recommendation and create a profile for you, the consumer. The values contained in this document are provided and confirmed by you, the consumer. This document is not a statement or a guarantee of account values. Any inaccuracies within this document may impact the recommendation provided to you.

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