Business Succession Planning with Key Person Coverage and Buy-Sell Agreements Fact Finder

Company Identification							
Name			Address				
City			State	ZIP	_ Telephone		
Entity Type: C Corporation S	Corpora	ition	☐ Partnership	o 🗌 Sole Proprie	etorship		
For C Corporation, Marginal Federal and	l State I	ncome	Tax Bracket:	%			
Business Owners	Age	Sex	Smoker Y/N	% of Ownership	Tax Bracket	Relationship to Others	
1. 2.							
3.							
4.							
5.							
Employee Benefits							
What employee benefit plans do you have	ve and h	now are	e they funded?				
Pension Plan				Profit-Sharing Plan			
Keogh (HR 10) SEP							
Group Health			Group Life				
Group Disability			Other (Describe)				
			_				
Are there any special benefit plans just for owners and key employees? If "yes," describe:							
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Do you plan to add anyone to the plan(s)? If "no," have you considered any?							
Business Stability							
Do any owners have personal liability fo	r busine	ess deb	ts?				
If "yes," are these debts covered by life	insurar	nce?					
Are there key employees whose death of	or disabi	ility wo	uld jeopardize	company profits?			
What has been done to protect the business in the event of death or disability of one of these key employees?							
If key employees are insured, who are the	he insur	ed?					
If not insured, who should be?		Is the insurance adequate today?					

Business Continuity

What are the names and ages of any relatives or children who may enter the business?					
In the event family members are too young or lack experien	ce, who would run the business?				
What have you done to guarantee that this person(s) will sta	ay?				
Do you have a Buy-Sell Agreement? (Y/N) What type	e? \square Entity or Stock Redemption \square Cross-Purchase \square Other				
If "yes," when was it last reviewed?	Is it funded with life insurance?				
If funded with insurance, when was the policy(ies) last revie	ewed?				
How is the business value in the agreement determined?					
If unknown or out-of-date: Book Value: What is the book val	lue of your business? \$				
Earnings & Growth: Average earnings—last five years \$	Capitalization rate (reflects risk of business/industry) %				
Years of goodwill (number of years that goodwill would last after	r owner's death, generally higher for service than manufacturing)				
Return of tangible assets% Annual business grov	vth rate% Estimate value of the business \$				
Are there any other agreements concerning your business i	interest in existence?				
If "yes," please explain:					
Does your will contain any provision regarding the disposition	on or retention of your business interest?				
Does your will direct or authorize your executor to retain or	operate the business?				
Company Advisors					
• •	Address				
	ZIP Code Telephone				
Attorney	Address				
City State	ZIP Code Telephone				
Other (Banker, etc.)	Address				
City State	ZIP Code Telephone				



Transamerica Life Insurance Company Transamerica Financial Life Insurance Company