

# VALUATION PROGRAM CHECKLIST

## I. GENERAL COMPANY INFORMATION

### COMPANY INFORMATION

NAME: \_\_\_\_\_  
DBA (if applicable): \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
PHONE: \_\_\_\_\_  
FAX: \_\_\_\_\_

### ORGANIZATIONAL INFORMATION

Corporation Type: ("S" or "C") \_\_\_\_\_  
Date Incorporated: \_\_\_\_\_  
State of Incorporation: \_\_\_\_\_

### COMMON SHARES

# of Shares Authorized: \_\_\_\_\_  
# of Shares Issued & OS: \_\_\_\_\_  
Restrictions (if any): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### TREASURY SHARES

# of Shares Held: \_\_\_\_\_  
Date of Purchase: \_\_\_\_\_  
Purchase Price: \_\_\_\_\_  
Date of Cancellation: \_\_\_\_\_

### PREFERRED SHARES

# of Shares Authorized: \_\_\_\_\_  
# of Shares Issued & OS: \_\_\_\_\_  
Description of Preference: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Valuation Program Checklist, Continued

SHAREHOLDER INFORMATION

Ownership:

Name	# of shares (Common or Preferred?)	%
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Shareholder Participation:

Name and Title	Duties	% of time devoted to business
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Related Party Information:

Name	Relationship	Involvement
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Valuation Program Checklist, Continued**

**Recent Stock Sale Information:**

Type of Stock Sold: \_\_\_\_\_  
Sold To: \_\_\_\_\_  
# of Shares Sold: \_\_\_\_\_  
Date of Sale: \_\_\_\_\_  
% Sold: \_\_\_\_\_  
Restrictions (If any): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Type of Stock Sold: \_\_\_\_\_  
Sold To: \_\_\_\_\_  
# of Shares Sold: \_\_\_\_\_  
Date of Sale: \_\_\_\_\_  
% Sold: \_\_\_\_\_  
Restrictions (If any): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**VALUATION INFORMATION**

**Purpose of Valuation:** (example: estate and gift tax, buy / sell agreement, incentive stock options, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

Valuation Date: \_\_\_\_\_  
# of shares to be valued: \_\_\_\_\_  
% of interest to be valued: \_\_\_\_\_

**Requesting Party:**

Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
Relationship: \_\_\_\_\_



**Valuation Program Checklist, Continued**

**Annual Gross Revenues:** \_\_\_\_\_  
**Average # of Employees:** \_\_\_\_\_  
**SIC Code:** \_\_\_\_\_  
**Principal Activity:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**LOCATION INFORMATION**

<b>Location</b>	<b>Date Occupied</b>	<b>Leased / Owned</b>	<b>Function</b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**III. PRODUCTS / SERVICES AND MARKETS**

**Describe Products:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Describe Services:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Valuation Program Checklist, Continued**

**Describe Customers:**

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**Describe Market Area:**

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**Estimated Market Share:**

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**Describe Distribution Channels:**

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**Is the Business Cyclical or Seasonal? Explain.**

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**Describe Barriers to Market Entry:**

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Valuation Program Checklist, Continued

**IV. COMPETITION AND PRODUCT DIFFERENTIATION**

**Identify Major Competitors**

<b>Name</b>	<b>Location</b>	<b>Estimated Market Share</b>
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**List Product Lines:**

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**How is your product different from that of your competitors?**

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**List Competitive Strengths:**

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**List Competitive Weaknesses:**

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Valuation Program Checklist, Continued

**V. FINANCIAL INFORMATION**

Fiscal Year End: \_\_\_\_\_

Are Financial Statements generated In-House or by a CPA?

\_\_\_\_\_

How often (monthly, quarterly, etc.)?

\_\_\_\_\_

Describe Significant Accounting Policies:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Identify Recent Changes in Accounting Policies (if any):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are Budgets or Forecasts Prepared? If so, How Often?

\_\_\_\_\_  
\_\_\_\_\_

How has the Company performed Relative to Budget?

\_\_\_\_\_  
\_\_\_\_\_



**Valuation Program Checklist, Continued**

**Describe Future Planned Capital Expenditures:**

Planned Date	Amount	Purpose

**List and Describe all Short Term Financing:**

Principal Balance	Lender	Purpose

**List and Describe all Long Term Financing:**

Include loan date & amount, name of lender, interest rate, purpose of loan, and principal balance to date.

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**Identify Pending or Threatened Litigation:**

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**Valuation Program Checklist, Continued**

**Has the Company Been Denied Credit? If so, Describe:**

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**List Major Customers and Percentage of Gross Revenue Derived from Each:**

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**List Major Vendors:**

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**List and Describe Non-Operating Assets and Liabilities:**

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**Identify any Major Non-Recurring and/or Extraordinary Expenses:**

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**Valuation Program Checklist, Continued**

**Identify Primary Discretionary Expenses:** (examples include owner life insurance, pension contributions, auto expenses, travel and entertainment, and costs of maintaining boats, airplanes, etc.)

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**Are Current Appraisals of Tangible Assets Available? If so, Describe.**

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**Discuss Condition of Facilities and Equipment:**

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**Is the Company Carrying Assets Not in Use? If so, Describe Including Net Book Value.**

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**Describe any Leased Assets Including Lease Terms:**

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**Valuation Program Checklist, Continued**

**How is Inventory Reported? (FIFO, LIFO, Average Cost)**

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**Is the Company Carrying any Obsolete Inventory? If so, Describe Including Amount.**

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**Is the Company Capital Intensive?**

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**Is the Company Labor Intensive?**

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**V. MANAGEMENT INFORMATION**

**KEY MANAGEMENT**

<b>Name</b>	<b>Title</b>	<b>Age/Health</b>
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**Describe Key Management Background, Education, Longevity and Experience:**

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**Valuation Program Checklist, Continued**

**Are Key Man Policies in Place? If so, Describe.**

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**MANAGEMENT COMPENSATION**

<b>Name</b>	<b>Title</b>	<b>Annual Compensation</b>
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**OFFICERS**

<b>Name</b>	<b>Title</b>	<b>Annual Compensation</b>
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**BOARD OF DIRECTORS**

<b>Name</b>	<b>Title</b>	<b>Annual Compensation</b>
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**Valuation Program Checklist, Continued**

**V. DOCUMENT REQUEST LIST**

The following documents are needed in order to prepare your valuation.

Please submit these documents (if applicable) along with the completed checklist.

- Financial Statements (most recent five years)
- Tax Returns (most recent five years)
- Accounts Receivable Aging Reports (current)
- Detailed Schedule of Fixed Assets
- Schedule of Shareholder Loans (Receivable or Payable)
- Schedule of Notes Payable, Leases, & Other Term Debt
- Appraisal Reports for Real Estate and Equipment
- Corporate Articles of Incorporation / Organization
- Schedule of Unfunded Pension / Profit Sharing
- Any other Documents You May Deem Important