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BUSINESS PLANNING WORKSHEET

Using this organizer will assist us in getting to know you prior to our consultation and designing a plan that meets your needs and goals. All information provided is strictly confidential.

TABLE OF CONTENTS:

Part 1: Personal Information
 Part 2: Important Questions
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 Part 4: Business Assets & Debts

o **Part 5:** Entity Info

Not every section will apply to you and your situation - you can leave those areas blank or write "N/A". If you are unsure of an answer, or would rather discuss the issue in person, feel free to leave the section blank.

Please return the completed worksheet (along with any supporting documents) to our office prior to your consultation. Should you have any questions, please contact legal assistant, Becky DeCoite - she can be reached via phone at (702) 997-5701 or by email at becky@phillipsballenger.com. Thank you and we look forward to meeting with you soon!

Disclaimer: Please note that providing this information and/or consulting with our firm does not establish an Attorney/Client relationship. You acknowledge your understanding that an Attorney/Client relationship does not exist unless we are formally engaged through a written retainer agreement, signed by both law firm and client.

PART 1: PERSONAL INFORMATION

| | | | Date of Consulto | ıtion: |
|--------------------------------------|------------------|---|-------------------|-----------------------------|
| Partner 1 Legal Name | | | | |
| Also Known As | | | | |
| | (Other names use | ed to title property an | d accounts) | |
| Birth date | SS# | : | US Citizen? (y/r | n) |
| Home Address | | City/ | State/Zip | |
| Home Telephone | Cell Phone | | Email | |
| Employer/Position | | | _ It's OK to comm | nunicate with me via e-mail |
| Partner 2 Legal Name | | | | |
| Also Known As | | | | |
| | • | ed to title property an | • | |
| Birth date | SS# | · | US Citizen? (y/r | n) |
| Home Address | City/State/Zip | | | |
| Home Telephone | Cell Phone | | Email | |
| Employer/Position | | ☐ It's OK to communicate with me via e-mail | | nicate with me via e-mail |
| | | IILDREN/DEPEN use full legal nar | | |
| Name | | | Birth date, Age | Parent or Relationship |
| | | | | |
| | | | | |
| Accountant | | OUR ADVISERS: | | |
| Financial Adviser Insurance Agent | | | | |
| | WHO REFERRED Y | OU TO PHILLIPS | BALLENGER? | |
| Avvo.com | | Google Former Client Other | o | |

PART 2: IMPORTANT QUESTIONS

| (Please indicate YES or NO) | Υ | N |
|---|---|---|
| Have you ever previously completed a will, trust, and/or estate planning? (If you have copies available, please send or bring to meeting) | | |
| Are you receiving Social Security, disability, or other governmental benefits? Describe: | | |
| Are you making payments pursuant to a divorce or property settlement order? (If you have copies available, please send or bring to meeting) | | |
| Have you been widowed? If a federal estate tax return or a state death tax return was filed, please furnish a copy | | |
| Have you ever filed federal or state gift tax returns? (If you have copies available, please send or bring to meeting) | | |
| Are you currently the beneficiary of anyone else's trust? If so, please explain below. | | |
| Do any of your children have special educational, medical, or physical needs? | | |
| Do any of your children receive governmental support or benefits? | | |
| Do you provide primary or other major financial support to adult children or others? | | |
| Are you currently involved in a bankruptcy proceeding? If so, please explain below. | | |
| Are you currently involved in a lawsuit (plaintiff/defendant)? If so, please explain below. | | |
| Are you subject to any judgments/liens/garnishments? If so, please explain below. | | |

YOUR CONCERNS

Please rate the following as to how important they are to you: (**H** = high concern; **S** = some concern; **L** = low concern; **N/A** = not applicable)

| DESCRIPTION | LEVEL OF CONCERN |
|--|---------------------|
| Updating/making changes to an existing business | |
| Integrating an existing business into my overall estate plan | |
| Maintaining/bolstering my privacy (as it may relate to personal and/or business assets) | |
| Planning for the transfer and/or survival of a business if I am unable to work | |
| Protecting assets from potential lawsuits/creditors | |
| Avoiding/reducing estate taxes | |
| Preserving the privacy of affairs in case of disability or at time of death from business competitors, | |
| predators, dishonest persons and curiosity seekers | |
| Implementation/forming/updating an estate plan | |
| Providing for a Buy-Sell agreement for your business(es) | |

PART 3: YOUR ESTATE

ASSETS & DEBTS (HELD PERSONALLY)

(You may alternatively attach a list of assets or include additional pages if necessary.)

| · , | • | . • | |
|--|---|-----|--|
| REAL PROPERTY Please include: Property Address, Property Type (i.e. primary residence/ investment property), Fair Market Value & Loan(s) Information | | | |
| BANK & SAVINGS ACCOUNTS Please include: Name of Institution, Type of Account, Approx Acct Value | | | |
| INVESTMENT ACCOUNTS (I.E. STOCKS/BONDS, MUTUAL FUNDS, ETC.) Please include: Name of Institution, Type of Account, & Approx Acct Value | | | |
| LIFE INSURANCE & ANNUITIES Please include: Name of Institution, Type of Policy, Owner of Policy, Beneficiary/ies | | | |
| RETIREMENT PLANS (I.E. 401(K), IRA, ETC. Please include: Name of Institution, Type of Acct, Approx Acct Value, Current Beneficiary/ies | | | |
| BUSINESS INTERESTS | | | |
| FURNITURE/PERSONAL EFFECTS/VEHICLES | | | |
| DEBTS NOT LISTED ABOVE Please include: Type of Debt, Guarantor(s),& Approx. Amount of Debt Owed | | | |

PART 4: BUSINESS FINANCIALS/HOLDINGS

ASSETS & DEBTS OWNED BY YOUR BUSINESS

(You may alternatively attach a list of assets or include additional pages if necessary.)

| (1.00.11.0.) | and only and on the or account of an account of the particular par |
|--|--|
| REAL PROPERTY Please include: Property Address, Property Type (i.e. primary residence/ investment property), Fair Market Value & Loan(s) Information | |
| BANK & SAVINGS | |
| ACCOUNTS Please include: Name of Institution, Type of Account, Approx Acct Value | |
| INVESTMENT ACCOUNTS | |
| (I.E. STOCKS/BONDS, | |
| Mutual Funds, Etc.) Please include: Name of Institution, Type of Account, & Approx Acct Value | |
| LIFE INSURANCE & | |
| ANNUITIES Please include: Name of Institution, Type of Policy, Owner of Policy, Beneficiary/ies | |
| RETIREMENT PLANS | |
| (I.E. 401(K), IRA, ETC. Please include: Name of Institution, Type of Acct, Approx Acct Value, Current Beneficiary/ies | |
| PROMISSORY NOTES | |
| FURNITURE/PERSONAL EFFECTS/VEHICLES | |
| | |
| OTHER: | |
| | |
| | |

PART 4 BUSINESS DEBT

Please include information related to non-business debts, including:

- Debtor/guarantor (i.e. individual, joint (include joint owner name), trust, LLC, corporation, other)
- Institution (i.e. Bank of America, Charles Schwab)
- Approximate Amount Owed & Terms
- Debt Associated With _____ (i.e. Mortgage on Primary Residence)
 - O Note: You may alternatively attach a list of debts or include additional pages if necessary.

| BUSINESS LOAN(S) | |
|--|---|
| (please describe) | |
| | |
| | |
| BUSINESS CREDIT CARD(S) | |
| (institution & approx balance) | |
| | |
| | |
| IRS/STATE TAXES OWED | |
| (back taxes & payment plans only- please describe) | |
| ANTICIPATED LAWSUIT | |
| JUDGMENT/OTHER OWED | |
| (please describe) | |
| OTHER | |
| (please describe) | |
| | |
| | |
| | |
| OTHER ITEMS TO INCLUDE OR DI | ISCUSS Please list any other issues of concerns and/or goals of our consultation: |
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PART 5: BUSINESS ENTITY INFO

Gathering the following information is very helpful, should it be available to you for all Entities, (i.e. LLCs, Corporations, Partnerships, etc.), in which you have a vested/controlling/and/or managerial interest

Please feel free to bring originals to your consultation and/or send scanned copies ahead of time for review. If you do not have anything on this list, don't worry, we can get additional information later if necessary!

ENTITY FORMATION DOCUMENTS:

 Documents filed with the Secretary of State (or other Government body) to form the entity, which may include: Articles of Organization, Initial List/Annual List(s), Business License (State and/or County/City)

• **ENTITY GOVERNING DOCUMENTS**, which may include:

- LLC Operating Agreement (most recent version);
- Membership Certificates/Ledger (and/or any other documents evidencing Membership);
- Company/Corporate Resolutions;
- Corporate By-Laws;
- o Partnership Agreements;
- Buy-Sell Agreements

ENTITY TAX INFO:

- IRS/State Tax Forms/EIN Application;
- o IRS Form 2553 (if applicable);
- Entity's most recent tax return (if applicable)

ENTITY PURPOSE:

- o What is the business purpose?
- o What does it own?

ASSET & DEBT INFO:

- Business accounts
- o Information re: real property owned by your business
- Business Debts

OTHER:

 i.e.: DBA Filings and/or Fictitious Form Name Filings; Any IP/Trademark Registrations; Registration of Foreign LLC/Corporation in other state(s) (other than where entity was formed)