



McDONALD LAW FIRM, LLC

*Helping Preserve Your Family's Legacy*

## Business Planning Worksheet

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Using this organizer will assist us in designing an estate plan that meets your goals. All information provided is strictly confidential. If possible, please return the completed worksheet to our office prior to your appointment via mail or fax.

### **PLEASE READ BEFORE COMPLETING THIS FORM!!**

This is a fillable PDF which means that you can type directly into the form. You may also print the form and complete it by hand. Please follow the instructions below based on how you will complete the form.

#### **IF COMPLETING THE FORM ON A COMPUTER:**

**NOTE:** Please download the form onto your computer prior to completing the form. Once the form is downloaded onto your computer, you may complete the form (to the best of your ability) in one session or you may save the form and complete the form at your convenience. After completing the form, you may print the form as if you are printing any other document from your computer.

#### **IF COMPLETING THE FORM BY HAND:**

**NOTE:** Please download the form onto your computer and print the form. Once the form is printed, please complete the form, to the best of your ability, with either a blue or black ink pen.

#### **MAILING ADDRESS:**

10500 Little Patuxent Parkway  
Suite 420  
Columbia, MD 21044

#### **Fax:**

(443) 977-6977

**Business Information**

Current or Proposed Business Name \_\_\_\_\_

Type:  To be discussed  Limited liability company  C Corporation  S-Corporation  General Partnership  
 Limited Partnership/LLP/LLLP  Nonprofit  Sole proprietorship  Other: \_\_\_\_\_

Formation State: \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail Address \_\_\_\_\_

**Reason for Business Planning Inquiry**

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

**Important Questions**

(Please check "Yes" or "No" for your answer)	Yes	No
Should business activities be limited to specified business purpose, such as provision of professional services? <i>Describe</i> _____		
Does or will this business conduct activities in states other than the state in which it is formed? <i>List</i> _____		
Do you know of any actual or potential litigation against the company or any of its owners? <i>Describe</i> _____		
Do you know of any actual or potential tax, bankruptcy, or administrative proceedings against the company or any of its owners? <i>Describe</i> _____		
Does or will this business have different classes of equity that entitle the owners to different voting or economic rights?		

**Other Advisors**

Name	Telephone
Current Attorney (if any) _____	_____
Accountant _____	_____
Financial Advisor _____	_____
Life Insurance Agent _____	_____

### Party Information

**Full Name** \_\_\_\_\_

Type:  Individual  Business or organization

If individual: Prefer to be called \_\_\_\_\_ US Citizen? \_\_\_\_\_ Residence County \_\_\_\_\_

If business: Business Type \_\_\_\_\_ Formation State \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail Address \_\_\_\_\_

Role:  Owner  Manager/Director  Officer  Other: \_\_\_\_\_

**Full Name** \_\_\_\_\_

Type:  Individual  Business or organization

If individual: Prefer to be called \_\_\_\_\_ US Citizen? \_\_\_\_\_ Residence County \_\_\_\_\_

If business: Business Type \_\_\_\_\_ Formation State \_\_\_\_\_

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Telephone \_\_\_\_\_ E-mail Address \_\_\_\_\_

Role:  Owner  Manager/Director  Officer  Other: \_\_\_\_\_

**Full Name** \_\_\_\_\_

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City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail Address \_\_\_\_\_

Role:  Owner  Manager/Director  Officer  Other: \_\_\_\_\_

**Party Information (Continued)**

**Full Name** \_\_\_\_\_

Type:  Individual  Business or organization

If individual: Prefer to be called \_\_\_\_\_ US Citizen? \_\_\_\_\_ Residence County \_\_\_\_\_

If business: Business Type \_\_\_\_\_ Formation State \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail Address \_\_\_\_\_

Role:  Owner  Manager/Director  Officer  Other: \_\_\_\_\_

**Full Name** \_\_\_\_\_

Type:  Individual  Business or organization

If individual: Prefer to be called \_\_\_\_\_ US Citizen? \_\_\_\_\_ Residence County \_\_\_\_\_

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Role:  Owner  Manager/Director  Officer  Other: \_\_\_\_\_

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Role:  Owner  Manager/Director  Officer  Other: \_\_\_\_\_

**Full Name** \_\_\_\_\_

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If business: Business Type \_\_\_\_\_ Formation State \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail Address \_\_\_\_\_

Role:  Owner  Manager/Director  Officer  Other: \_\_\_\_\_

### Discussion Items

Use this section to indicate your areas of concern that you would like to discuss in our consultation:

Description	Check All That Apply
Assistance with selecting the correct form of entity for business liability, personal asset protection, and strategic tax planning purposes.	_____
Preparation or review of entity formation documents, including certificates of incorporation, certificates of rights, preferences and designations, articles of incorporation, bylaws and organizational minutes, shareholder agreements and operating agreements.	_____
Negotiating and drafting buy-sell agreements to address what happens if a co-owner dies or leaves a business, including cross-purchase and entity-purchase agreements or other forms of buy-out agreements.	_____
Negotiation and drafting of asset purchase agreements, stock purchase agreements or other merger and acquisition agreements and ancillary documents.	_____
Executive employment agreements, consulting agreements, stock option plans and stock option awards, equity incentive plans, stock appreciation rights and phantom stock agreements, non-compete agreements, proprietary inventions and non-disclosure agreements, and non-qualified deferred compensation agreements.	_____
Plan for the transfer and survival of a family business.	_____
Software and technology licenses, content licenses, software development agreements, turnkey computer systems installation agreements, web hosting agreements, web development agreements, and application service provider agreements.	_____
Leases and sub-leases of commercial office space.	_____
Protecting personal (non-business) assets from lawsuits or creditors.	_____
Preserving the privacy of affairs in case of disability or at time of death from business competitors, predators, dishonest persons and curiosity seekers.	_____
Preparation of tax opinions or seeking private letter rulings in connection with tax-free reorganizations or other tax-sensitive business structures.	_____
Borrowing and lending documents, including commercial loan agreements, private indebtedness, security agreements, collateral assignments and pledge agreements.	_____
Sales agreements, sales representative and agency agreements, distribution agreements, value-added reseller agreements, incentive compensation plans.	_____
Estate planning, including avoiding or reducing your estate taxes, avoiding probate, or reducing administration costs at time of your death.	_____



## PRIVACY STATEMENT

In the course of providing our clients with income tax, estate tax, gift tax, business planning and financial advice, we receive private, non-public information. We collect this information directly from you and from other service providers, when authorized by you to do so. It is our policy that any information, particularly financial information and sensitive personal information provided by you or your agents to us for purposes of our business relationship, is to be disclosed only under the following conditions:

***Our Staff.*** Employees of our office may need such information to conduct or conclude a transaction for which you have engaged our services. Access to client information is strictly limited to the specific items needed to perform that services you may require.

***Outside Service Contractors.*** In the course of providing services that you request, an outside service might be used to evaluate your financial, insurance, investing, or tax options. We insist that any such information needed by outside firms for business purposes must be considered confidential. We notify those outside sources that this business policy must be honored and such service providers are responsible for honoring Federal Trade Commission regulations.

***Others, by Client Request.*** If you ask us to work with one of your advisors, you must expect us to share pertinent information to complete the tasks you require of us.

***Security.*** We maintain physical, electronic and procedural guidelines and safeguards that comply with federal regulations to guard clients' private, personal information (in fact, ***all*** information you give us is handled in such a manner.)

New provisions from the Federal Trade Commission require us to notify you that this is our policy and that you have the right to keep non-public, personal information private by notifying us that this is your request. Regardless of the FTC requirements and even if you never request us to keep your non-public information private, we will do so, under the conditions listed above. This has always been our policy, not only in respect to Federal Trade Commission requirements, but also to comply with our moral and ethical responsibilities to you. If you have any questions, whatsoever, please do not hesitate to call me or our Director Client Services.

Sincerely,

*Andre McDonald*

Andre O. McDonald

**ACKNOWLEDGMENT OF PRIVACY STATEMENT**

I have read and understand the explanation titled “Privacy Policy” regarding non-public personal information I may supply and the federal trade commission regulations. By signing this acknowledgment, you agree to the terms stated. You may notify us at any time that you do not want us to disclose your personal information to particular financial advisors or helpers, even though you have previously given us permission to do so. If so, please let us know in writing, and we will honor your request.

Client’s- Signature

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