



FACT FINDER (Supplemental Material)



- **Stock Option Information**
- **Annuity Information**
- **Deferred Compensation Information**
- **Client Owned Business Information**

Client Name

Client Signature

Advisor Name

Date

CONTENTS

1. Stock Options / Annuities
2. Deferred Compensation
3. Business Information

List Attachments

STOCK OPTIONS/ ANNUITIES

Stock Options/Grants

Attach most recent Grant Statement or fill out the form below.

Did you exercise or sell shares in the past? Yes No

	1	2	3	4
Owner				
Institution Name				
Online Access Available?				
Ticker Symbol				
CUSIP				
Current Stock Price				
Vest at Death? (Yes/No)				

Annuities

	1	2	3	4
Owner (Client, Spouse, Joint, etc.)				
Institution Name				
Online Access Available?				
Asset Type*				
Type of Funds**				
Total Value				
Tax Basis				
Beneficiary				

*Asset Type: Fixed, Variable **Type of Funds: Qualified, NQ, Tax Free

Immediate Annuities

Attach Annuity Contract

	1	2	3	4
Owner (Client, Spouse, Joint, etc.)				
Immediate Annuity Name				
Annual Payments				
Exclusion Ratio				
Basis/Purchase Amount				
Purchase Amount				
Annuitization Type*				
Based on Lifetime of (Client, Spouse, Survivorship)				
Guaranteed Years of Payout				
Term in Years				

*Annuitization Type: Life, Term, Certain

DEFERRED COMPENSATION CONTRIBUTIONS

Deferred Compensation

	1	2	3	4
Owner (Client, Spouse, Joint, etc.)				
Institution Name				
Online Access Available?				
Total Value				
Beneficiary				

Employee Contributions

	CLIENT	SPOUSE
Percent of Salary		
Dollar Amount		

Employer Contributions

	CLIENT	SPOUSE
Employer Match Percent of Salary		
Amount		

*Contributions Based On: All Earned Income, Client/Spouse Salary, etc.

BUSINES INFORMATION

Business Interests

	1	2	3
Owner (Client, Spouse, Joint, etc.)			
Business Name			
Base Value			
Business Tax Basis			
Business Type*			
Income Taxes Pass Through to Client? (Yes/No)			

*Business Type: Sole Proprietorship, Partnership, S-Corp, C-Corp, Limited Liability Corp, Professional Corp

Business Cash Flow

	1	2	3
Income			
Expenses			
Distribution Type**			
Distribution Amount			
Distribution (% of Income)			

**Distribution Type: None, Fixed Amount, Income

Related Business Questions

	1	2	3
Client Active in Business? (Yes/No)			
Spouse Active in Business? (Yes/No)			
# of Children Active in Business			
Future Plans for Business			
Relatives Active in Business (Yes/No)			
Shareholder, Partnership, or Operating Agreement? (Yes/No)			
Does current agreement permit gifting? (Yes/No)			
Buy/Sell Agreement among owners? (Yes/No)			
Buy/Sell Agreement funded with life insurance? (Yes/No)			
How much coverage? (if applicable)			

*Future Plans for Business: Retain with Family, Sell to Employees, Sell to 3rd Party, Liquidate, Unsure

Notes Receivable

	1	2	3	4
Owner (Client, Spouse, Joint, etc.)				
Note Name				
Original Loan Amount				
Date of Loan				
Current Balance				
Current Tax Basis				
Balance as of Date				
Interest Rate				
Number of Payments				
Payment Frequency*				
Repayment Type**				
Estimated Payment				
Balloon Period				

*Payment Frequency: Monthly, Quarterly, Semi-Annually, Annually

**Repayment Type: Principal and Interest, Interest Only

Business Interests - Notes
