



Business CheckSM (for existing businesses)

Thank you for contacting Starrett Law Firm about Business CheckSM. This questionnaire will help you evaluate and minimize legal risk to protect your business so you can leave a lasting legacy. Fill it out as well as you can. Attach additional sheets if necessary. Please submit this completed questionnaire and copies of any supporting documentation at least 3 days prior to our meeting. This will better ensure a productive and efficient meeting.

Matter Number, if known: _____

Is this your first Business CheckSM? Yes No

Business Name: _____

Person Completing Check: _____ Title: _____

Email: _____ Phone: _____

I. Audit

A. Entity Type – Which type of legal entity do you own/operate?

Limited Liability Company

Corporation (including non-profit)

Partnership

Sole Proprietorship

Other (please specify: _____)

B. Formation Date – When did you form your legal entity?

Within the past year

Between 1 and 3 years ago

More than 3 years ago

Not applicable

C. Best Practices – Do you routinely comply with the ongoing requirements and best practices below?

1. File on-time annual reports with the state	Y	N	N/A
2. Pay outstanding tax obligations	Y	N	N/A
3. Keep minutes of important meetings	Y	N	N/A
4. Document significant transactions and decisions	Y	N	N/A
5. Keep accounts, assets, and records separate from personal property	Y	N	N/A
6. Conduct daily operations via manager(s) or officer(s)	Y	N	N/A
7. Maintain up-to-date agreements and policies	Y	N	N/A
8. Protect confidential and proprietary information	Y	N	N/A

9.	Communicate and document personnel concerns	Y	N	N/A
10.	Maintain an information security program for cyber-preparedness	Y	N	N/A
11.	Conduct an annual business audit to stay up-to-date	Y	N	N/A
12.	Maintain an adequate level of business insurance	Y	N	N/A

D. Documents – Are the documents and policies below up-to-date?

1.	Non-disclosure agreement	Y	N	N/A
2.	Governance document (e.g. bylaws, operating agreement)	Y	N	N/A
3.	Buy-sell or shareholder agreement	Y	N	N/A
4.	Employment or contractor agreement	Y	N	N/A
5.	Confidentiality agreement	Y	N	N/A
6.	Service agreement	Y	N	N/A
7.	Website terms of use	Y	N	N/A
8.	Physical stock or membership certificates	Y	N	N/A
9.	Succession plan	Y	N	N/A

E. Maintenance – When did you last perform a comprehensive business review?

Within the past year

Between 1 and 3 years ago

More than 3 years ago

Unsure

Never

F. General Information - Since your last business review, has any of the information below changed? (If you answer YES, please provide more details at Section II.)

1.	Business info (e.g. name, address, phone)	Y	N
2.	Business purpose or product/service line(s)	Y	N
3.	Business territory (e.g. state, region, country)	Y	N
4.	Form of legal entity (e.g. LLC, corporation)	Y	N
5.	Tax status (e.g. partnership, S corporation)	Y	N
6.	Ownership (e.g. members, shareholders)	Y	N
7.	Ownership interest or number of shares owned	Y	N
8.	Management (e.g. managers, directors, officers)	Y	N
9.	Team members (e.g. employees, contractors)	Y	N
10.	Advisors (e.g. accountant, insurance agent)	Y	N

G. Actions (If you answer YES, please provide more details at Section II.)

- 1. Since your last business review, has anything happened that could have a negative impact on your business (e.g. firing an employee)? Y N
- 2. Since your last business review, have you made any major (not run-of-the-mill) business decisions? Y N
- 3. Are you currently contemplating any short-term decision (next 6-12 mos) that you would like to discuss (e.g. hiring an employee)? Y N
- 4. Are you currently contemplating any medium-term decision (next 1-3 years) that you would like to discuss (e.g. launching new service or product line)? Y N

II. Additional Details

Below, please provide additional details about any of your preceding responses. Include any additional issues or questions regarding the business that you would like to discuss at our meeting. Also include any pressing deadlines.

* * *

The undersigned hereby represents to Starrett Law Firm that the information contained in this questionnaire and any supporting documentation is accurate and complete, and that the undersigned understands that we will rely on this information. If the information contained herein is inaccurate or incomplete, our counsel may not be appropriate.

Type or sign your name below to acknowledge and agree to the above statement.

Signature

Title

Date