

# Income Tax Questionnaire

The following information is requested in order to provide you with an accurate analysis representative of your present circumstances. New York Life Insurance Company, its agents and its employees do not give legal, accounting or tax advice. Everyone should seek the advice of his or her own professional advisors before taking any action in regard to this material.



# Nautilus Member: \_\_\_\_\_

Information	Client	Spouse
Name		
Date of birth		
State of domicile		
Citizenship		

## Business Information

- What is the full legal name of the company? : \_\_\_\_\_
- Provide a brief history of the company (how was it started, who started it, what does the company do).
  
- Type of business entity: \_\_\_\_\_       Number of full-time employees: \_\_\_\_\_
- Are any family members employed in the business? If yes, describe any future plans for increased responsibility and/or ownership:

Business Owner	Ownership %	Income <i>from the Business</i>	Age	Active vs. Non-active
	%			
	%			
	%			
	%			

- Who will own the business interest in the event of retirement, disability or death?
  - Is there a *written* buy-sell agreement?     Yes     No
- Which non-owner employees are "key" to the continued success of the company? Describe.
- Does the company currently provide any employee fringe benefits? Describe.
- Does the company currently provide a retirement plan? Describe.
- Does the owner have other sources of income? \$ \_\_\_\_\_
- Does the owner own the commercial real estate?     Yes     No
  - Is it rented to the operating company?     Yes     No
- Does the company perform research?     Yes     No
- Does the company make or sell products that are sold internationally?     Yes     No
- Please provide three years of tax returns for all associated entities.**




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