Sierra Company, LLC
7342 Powderhorn Dr • Littleton, CO 80124 • <a href="https://www.sierracompany.net">www.sierracompany.net</a> • 303 903-2100 • Fax: 303 792-3208

## I. GENERAL INFORMATION

II.

| dba or trade name:   |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
| City   |  |  |  |  |  |  |
| Business phone:  |  |  |  |  |  |  |
| Business website:  |  |  |  |  |  |  |
| Owner or contact name:   |  |  |  |  |  |  |
| Home mailing address:  |  |  |  |  |  |  |
| City Zip:           Home phone: fax:   |  |  |  |  |  |  |
| Home phone: fax:   |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Private phone for contact purposes:  |  |  |  |  |  |  |
| ' '  |  |  |  |  |  |  |
| Private e-mail address for contact purposes:   |  |  |  |  |  |  |
| What is the Company's SIC Code:  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| IPANY ORGANIZATION   |  |  |  |  |  |  |
| When was the Company founded? When did the current Ownership acquire the Company?  |  |  |  |  |  |  |
| Is there a Buy / Sell agreement between Owners? $\square$ Yes $\square$ No, if yes, attached copy.                           |  |  |  |  |  |  |
| Are there other locations, subsidiaries, or affiliated business?   Yes  No   |  |  |  |  |  |  |
| o. Is there any current or pending litigation? $\square$ Yes $\square$ No if yes, explain                                    |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| e of Company: Proprietorship Partnership S-Corp C-Corp LLC Other wners Name Active (Y/N) Position / Relationship % Ownership |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

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# **III. HUMAN RESOURCES** A. How may employees does the business have: Total: \_\_\_\_\_ Full time: \_\_\_\_\_ Part time: \_\_\_\_\_ B. What special training / Licensing / certifications / education is required of employees: C. Does the Company provide Employee Benefits Yes No\_\_\_\_\_ D. What job functions does the Owner perform on a daily basis; E. Are there any relatives employed by the Company \(\begin{align\*} \Pi \text{ Yes} \employed \text{ No} \\ \end{align\*} **IV. NATURE OF BUSINESS** A. Describe the Company's principal business Activity\_\_\_\_\_ B. Are there any intangible assets used in the business, such as patents, trademarks, professional licenses, permits, franchises, distributor agreements, other intellectual property, etc.? Yes No If yes, explain: C. What are the Strengths and Weakness of the Company: D. Given additional resources, what is the best way to grow the Company: \_\_\_\_\_\_ E. Does the Company have any exclusive distributions rights: Yes No F. What unique feature about the products / services attracts customers? Why do customers buy?

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| G. How many customers does the Company have?  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|
| H. This year, will any individual customers account for more than 10% of revenue?   Yes   No  |  |  |  |  |  |  |  |
| I. Does the Company have any recurring revenue?    Yes    No                                  |  |  |  |  |  |  |  |
| J. What is the dollar value of the Company's average Sale?                                    |  |  |  |  |  |  |  |
| K. What percent of business is to existing customers?   |  |  |  |  |  |  |  |
| L. Does the Company have its own brands?   Yes  No  |  |  |  |  |  |  |  |
| M. Who are the industry leaders in your market place?   |  |  |  |  |  |  |  |
| N. Are there industry Companies that are expanding Nationally Q Yes Q No                      |  |  |  |  |  |  |  |
| V. FACILITIES   |  |  |  |  |  |  |  |
| A. Business Facility:   |  |  |  |  |  |  |  |
| 1. What is the total square footage? How much land is occupied?                               |  |  |  |  |  |  |  |
| 2. Is the real estate owned by the company, its shareholders or their families?   Yes   No by |  |  |  |  |  |  |  |
| 3. If the business or its shareholders or their families own the real estate, what is:        |  |  |  |  |  |  |  |
| Market value:Debt:Equity:   |  |  |  |  |  |  |  |
| Current Monthly rent: \$Market rent:  |  |  |  |  |  |  |  |
| 4. Is the property included in the sale $\square$ Yes $\square$ No                            |  |  |  |  |  |  |  |
| 5. If the building is leased, what is:  |  |  |  |  |  |  |  |
| a. Lease Payment: Expiration Date: Market Lease:  |  |  |  |  |  |  |  |

## VI. MARKETING INFORMATION

A. Please attach copies of the company's marketing materials.

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### VII. FINANCIAL INFORMATION

| Α. | Are the Financial statements prepared on a:                               |
|----|---|
| В. | Are sales seasonal or cyclical? If yes, explain                           |
| D. | What is the gross revenue forecast for the current year and next 2 years? |
|    | Current Yr. \$  |
|    | Current Yr +1: \$   |
|    | Current Yr. + 2: \$   |

- E. Please attach income statements and balance sheets for the past three fiscal year-ends and current year-to-date. Please include details on operating expenses and cost-of-goods.
- F. Please complete the attached Recast Worksheet on the following page.

Since privately owned companies tend to keep reported profits and thus taxes as low as possible, financial recasting is an important element to understanding the earning capacity of the business enterprise.

Recasting provides and economic view of the company and allows meaningful comparisons with other investment opportunities.

Financial recasting eliminates such items as excessive and discretionary expenses and non-recurring revenues and expenses from the historical financial presentation, along with debt and interest expense since they reflect the financing decision of the current owner and may not represent financing preferences of a new owner.

## **RECAST WORKSHEET**

| ADD BACKS:                            | FYE 20 | FYE 20 | FYE 20 | Interim 20 |
|---------------------------------------|--------|--------|--------|------------|
| Owner Compensation (one Owner)        |        |        |        |            |
| Owner(s) Payroll Tax                  |        |        |        |            |
| Owner(s) Ins. (auto, health, life)    |        |        |        |            |
| Owner(s) Retirement                   |        |        |        |            |
| Owner(s) Vehicles                     |        |        |        |            |
| Other Owner(s)Comp./Benefits          |        |        |        |            |
| Personal travel, meals, entertainment |        |        |        |            |
| Contributions/Sponsorship             |        |        |        |            |
| One-time, non-recurring loss          |        |        |        |            |
| Rent Normalization +/-                |        |        |        |            |
| Other Co. paid personal expense       |        |        |        |            |
| Other Co. paid personal expense       |        |        |        |            |
| Other Co. paid personal expense       |        |        |        |            |
| Other Co. paid personal expense       |        |        |        |            |
| TOTAL ADD BACKS                       |        |        |        |            |