

## Account Setup

### Welcome to the Qualifier Survey for the 2019 Pepperdine Most Fundable Companies List!

This is the second round of the startup competition run by Pepperdine University. Founders of U.S. based companies that make the 2019 Most Fundable Companies list will be invited to our gala event in Malibu, CA on October 17, 2019 and will be featured in a high profile national publication (in 2018 it was Entrepreneur Magazine). All survey respondents receive the following free benefits:

- Private, risk-free analysis and feedback, customized for your company (\$500 value)
- Radar Graph from The Venture Alliance - A unique graphical snapshot benchmarking your company to an ideal competitor in your industry at a similar stage of development
- General guidance on your likelihood for funding



Please be as complete and accurate as possible in your answers. Data from potential finalists will be verified prior to publication and honesty is highly valued. NOTE: It will be helpful for you to have your business plan and most recent business tax return available (you will NOT be asked to submit them) for reference to help you answer some of the questions.

Deadline to complete this round is May 31, 2019. Click the arrow to begin.

Basic Personal Information of Person Completing Survey. We need to be able to send you your free Qualifier report and we need to be able to contact you if you are selected as a finalist.

First Name

Last Name

Email Address

Confirm Email Address

## TERMS & CONDITIONS

Privacy and confidentiality is important to us. Please indicate that you have read and agree to the [terms and conditions](#) of this survey.

I Agree

I Do Not Agree

## Personal Demographics

Additional Information. Note: In order to participate, companies must be headquartered in the United States.

Name of Primary Founder

Company Name

Street

City

State

Zipcode

Website

Phone Number

Current Age of Founder (in years)

How many employees does your company currently have?

Briefly describe what your company does (optional):

Sex of Founder (for research purposes, not for scoring)

Male

Female

Other

Highest Level of Education of Founder

Some High School

High School Diploma

Some College

Associates Degree

Bachelors Degree

Masters Degree

Doctorate

Primary Race or Origin of Founder (proposed categories from 2020 US Census, for research purposes, not for scoring). Select one or more.

White

Black or African American

Hispanic / Latino / Spanish origin

American Indian or Alaska Native

Asian

Native Hawaiian or Pacific Islander

Other

## Citizenship of Founder

☐ US Citizen☐ Permanent Resident☐ Work Visa☐ Student Visa☐ Other

What are your reasons for taking this survey? (check all that apply)

## OPT-IN

EXPOSURE: Get on the Pepperdine Most Fundable Companies List

COURSE CORRECTION: Based on my responses on this Qualifier Survey, I agree to allow TVA to contact me about any products and/or services they feel may help me improve my value proposition.

ACCESS TO FUNDING: If I score highly enough on this Qualifier Survey, I would like Pepperdine or TVA (or their designates) to assist me in connecting to funding sources that may be interested. Such assistance may include the sharing of my ranking, but not my data.

## OPT-OUT

GENERAL OPT-OUT: I don't want to be put on any lists of any type. BE CAREFUL selecting this because it means that we cannot contact you with your free Qualifier report and you cannot be considered for the Most Fundable Companies List. Your survey responses will be used for research purposes only.

**Company Demographics**

During this survey, we will be asking you many in-depth questions about your company. This is a Pepperdine University research project so you can be sure we will handle this information appropriately. You will probably not be able to answer the entire survey in one sitting, so it's okay to take a break and come back. There will undoubtedly be questions that you previously had no idea were important to some investors. That's okay. Any company that could answer well ALL of the questions on this survey would already be funded. So it is perfectly normal to have to respond "no" to some questions or leave some blank.

One of the great benefits of this process is that it will expose you to some questions that you have never thought of before. Working through this survey will help you to start thinking more like an investor and some of the things you might want to do to improve your probability of getting funded.

When you finish, you will receive a detailed report indicating your strengths and weaknesses, and what you can do to improve.

Please identify what type of structure your company is currently operating under.

☐ We have not filed for any formal corporate structure yet.☐ We are a DBA (Doing Business As)☐ We are a "C" corporation☐ We are an "LLC"☐ We are an "S" corporation

Please enter more details about the organization of the company?

Date that your company was founded (MM/YYYY format)

If you are a corporation or LLC, in which state are you organized?

Year that your company was organized in the above state if applicable

Are you currently actively raising money to fund your business?

Yes

No

Was your company profitable over the last 12 months?

Yes

No

You indicated that you are raising money. Where will the funds potentially come from? (check all that apply)

Friends and Family

Angel Investors

Venture Capital

Strategic Partner

Founding Team

Cash flow from company

Do you have any revenue (Answer based on your most recent 12 months)?

None

Sporadic: Only an occasional sale with no real momentum

Less than \$250,000 for the last 12 months

Between \$250,000 and \$1,000,000 for the last 12 months

Between \$1,000,000 and 2,000,000 for the last 12 months

Greater than \$2,000,000 for the last 12 months

Choose one of the following categories for your business:

Products Only

Services Only

Both Products and Services (Hybrid)

Select the type of Product/Service you sell

Business services

Business products, software

Business products, hardware

For the service you sell, what is your estimated price per unit? (USD)

For the hybrid product/service you sell, what is your estimated price per unit? (USD)

For your services provided, what is the unit of measure for which you will charge your customers?

per minute

per hour

per day

per week

per month

per year

per job

other

### Select a service category

Accommodation, Entertainment & Food Services

Financial Services, Insurance & Real Estate

Healthcare & Social Services

IT Services

### Select Accommodation & Food Services Category

Hotel Industry

Resort Industry

Restaurant & Food Service

Other

### Select Financial Services, Insurance & Real Estate Category

Insurance Services

Real Estate Services

Transportation & warehousing services

Banking and securities industry

Tax Services

Other

### Select Healthcare & Social Services Category

Out-patient services

Services provided to care providers

Social Services

Hospital-based services

Doctor delivered services

Other

### Select IT Services Category

Internet focused

Software focused

Other

For the primary product you sell, what is your estimated price per unit? (USD)

## Select a product industry

Agriculture  
Biotechnology  
Commercial Products (Wholesale/Retail) & Distribution  
Computers & Electronic Devices  
Consumer Products (Wholesale/Retail) & Distribution  
Industrial/Energy/Environmental  
Media and Entertainment  
Medical Devices and Equipment  
Mining  
Real Estate Development  
Semiconductors  
Software  
Telecommunications  
Transportation Vehicles, Equipment & Parts

## Select Agriculture category

Agricultural Technology  
Agricultural Operations  
 Other

## Select Biotechnology category

Pharmaceuticals  
Genetics, Cloning, Stem Cells  
Vitamins, Herbs, Supplements, etc.  
 Other

## Select Commercial Product category

Chemical & Plastic Products  
Construction  
Wood Products  
Metals, Minerals & Machinery (Not mining)  
Furniture & Related  
 Other

## Select Computers &amp; Electronic Devices category

Computers  
Peripheral devices  
 Other Electronic Devices

## Select Consumer Products category

Necessities

Luxury products (Non-transportation)

Distribution Support products

Discretionary-based Products

Other

#### Select Industrial/Energy/Environmental category

Alternative Energy Sources

Purification technologies

Industrial enhancements

Mainstream Energy Products

Other

#### Select Media and Entertainment category

Games-based products

Video-based products

Publication-based products

Other

#### Select Medical Devices and Equipment category

Surgical

Diagnostic

Therapeutic

Other

#### Select Mining category

Mining Operation

Mining Technology

Other

#### Select Real Estate Development category

Commercial, Office and Hotel

Residential

Other

#### Select Semiconductor category

Chips & Chip technology

Other

#### Select Software category

Stand-Alone Software

Internet-only Products, SaaS

Hybrid

Other

Select Telecommunications category

Internet-based products

Phone-based products

Hybrid

Other

Select Transportation Vehicles, Equipment & Parts category

Planes

Cars and other personal transport including recreational

Trains

Sea-going vessels

Parts

Other

How important is it in your industry that your company "lead the way" in new technological innovations?

Not at all important

Somewhat important

We try to maintain a leadership position

We must always be the leader in introducing new technologies

Is it important for the success of your company to have protected secrets such as (check ALL that apply)

Patents

Trade Secrets

Trademarks

**Market Opportunity (#1)**

How many industry reports have you actually paid money for to better understand the growth and potential for your product(s)?

You indicated that you have paid for market analysis reports. Collectively, how much have you spent on these reports?

Please answer these additional questions about the reports you purchased.



	Responses	
	Yes	No
Were you able to find reports that were specific to the exact type of product/service you provide?	<input type="radio"/>	<input type="radio"/>

Have you done any of your own market research studies?

	Responses		If so, how many?
	Yes	No	Qty
Have you conducted any market research studies of your own to try and validate the size and potential appetite of the market for your product?	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

Drawing from the information you obtained from the industry reports in the previous question, what is your best estimate of the Total Market Size in which your product/service competes for the current year and the following three years? (Please provide answer in USD millions \$MM -- Thus, for example, 1.75 = \$1,750,000)

Year 0 (current year) Total Market Size

Year 1 (next year) Estimate

Year 2 Estimate

Year 3 Estimate

What is your estimate of the current size of your Niche Market, defined as the "existing sales" of similar products into your market niche? (Please provide answer in USD millions \$MM -- Thus, for example, 1.75 = \$1,750,000)

What is happening to this market that creates an opportunity for you (check all that apply)?

This is a totally new market niche and we are the "first in" player.

The leading competitor has faltered and we have "the right product at the right time."

We have leap-frogged the competition by developing the "next generation" technology.

Our product/service will enable our customers to save more money and/or make more money than our competitors.

This is a rapidly growing market with room for more players.

## Marketing & Sales Strategy (#2)

What is your strategy for gaining market acceptance and meeting your sales goals? (check all that apply)

Follow an aggressive internet marketing strategy.

Follow an aggressive print media campaign.

Hire and train our own sales force.

Strategic, targeted use of radio and TV ads.

Use contract representatives who sell on commission.

Use the sales force of a strategic partner with a common interest.

Use third party distribution channels.

Word-of-mouth

Now, we'd like to know more about why someone would choose to buy your product or service.

It acts like a vitamin that protects you from future problems.

It acts like a pain killer and deals with immediate problems.

It's an indulgence that just makes you feel really good.

It's none of the above. It's just a really cool idea.

What could go wrong with your idea that would change everything and make this idea NOT worth pursuing? Please enter a probability percentage number that is YOUR ESTIMATE of the likelihood of one of these events occurring (enter an integer from 0 to 100).

	0	10	20	30	40	50	60	70	80	90	100
A major shift in the economy (%)											
Our final product doesn't work as conceived (%)											
The market fails to embrace our concept (%)											
A bigger, stronger competitor introduces an equal or better product (%)											
A shift in technology (%)											
Nothing (%)											

Check all items below that you have addressed in a detailed business plan on your company.

Who is the competition and how you will "win" against them?

What are your marketing and selling strategies and how do you expect them to work?

What specific selling goals can you achieve, when, and at what profit level?

A contingency plan?

What is the experience of those on your team who are expected to sell?

How many total people do you have on your team that are expected to sell?

What is the TOTAL number of years of selling experience your team has (regardless of industry)?

What is the TOTAL number of years of selling experience your team has in the SAME industry your company is in?

On a scale of 1-10 (where 10=Always and 1=Almost never), what is your team's past track record of meeting or exceeding their sales targets?

### Competition (#3)

Indicate the approximate number of competitors you have

None

Between 1 and 3

Between 4 and 10

More than 10

How many companies do you consider competitors? Please enter an exact number from 1 to 3.

How many companies do you consider competitors? Please enter an exact number from 4 to 10.

How many companies do you consider competitors? Please enter an exact number greater than 10.

Are you claiming a "first mover" advantage? This means that your product/service is creating a brand new market and that by being the first to enter the marketplace you will have a sustainable competitive advantage.

Yes

No

What about the current market is providing you the opportunity to succeed?

There hasn't been a new idea in a long time.

There hasn't been a technological advance in years.

Most products/services are overpriced for what they deliver.

There is little or no competition in our geographical target.

No one has been able to produce something that delivers an acceptable price/performance ratio.

We now need some information about your top 3 competitors. (Please answer according to the threat level they are to you.)

	Domestic company?		Public Company?	
	USA	International	Public	Private
Competitor #1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Competitor #2	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Competitor #3	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please assess the nature of the threat from these same top 3 competitors

	Greatest challenge from this competitor in next 2 years			
	We expect them to introduce one or more major products/services.	Once they feel threatened by us, they can outspend us on marketing and sales	They have either (a) an exceptionally good reputation in the market and/or (b) a well-established position in the market.	They will want to buy us to get rid of us
Competitor #1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Competitor #2	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Competitor #3	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please enter the approximate Annual Sales of your top three competitors. If you have less than 3 competitors you may leave blanks. Please enter your number in millions (thus for example, 4.25 would represent \$4,250,000).

Competitor #1

Competitor #2

Competitor #3

Please enter the approximate Annual PROFIT of your top three competitors. If you have less than 3 competitors you may leave blanks. Please enter your number in millions (thus for example, 3.25 would represent \$3,250,000).

Competitor #1

Competitor #2

Competitor #3

Please enter the number of your team members that have worked at each of your top three competitors.

Competitor #1

Competitor #2

Competitor #3

Please enter the total cumulative number of years that your team members have worked at each of your top three competitors.

Competitor #1

Competitor #2

Competitor #3

How does your product or service compare in price to your competition? Please make sure to compare "apples to apples." For example if you are quoting your price for a product, quote a single unit price and then quote a price for a similar competitive product. If it is a service, quote either in a price/hour or for comparable service.

	Product / Service	
	Product/Service #1	Product/Service #2
Price of YOUR product/service	<input type="text"/>	<input type="text"/>
Competitor #1 Price	<input type="text"/>	<input type="text"/>
Competitor #2 Price	<input type="text"/>	<input type="text"/>
Competitor #3 Price	<input type="text"/>	<input type="text"/>

#### Entrepreneurial Experience (#4)

In this section, we want to get an idea of what the Principal Founders' past experience (if any) has been as an entrepreneur. (In other words, are the Principal Founders experienced in starting and running companies?) It is important that this question be answered based on ONLY members of the team who are considered original founders in the company.

Please list all companies you (or your team) have been associated with where you/they would be considered a "founder." For each company (up to a total of four), list the name of the company and the year it was founded. Please list the most recent companies first.

	Company Name	Year Founded (YYYY)
Company #1	<input type="text"/>	<input type="text"/>
Company #2	<input type="text"/>	<input type="text"/>
Company #3	<input type="text"/>	<input type="text"/>
Company #4	<input type="text"/>	<input type="text"/>

For each startup listed in the previous question where you (or a member of your founding team) worked, list monies raised during the time you/they were personally involved. (Please provide answer in USD millions \$MM -- Thus, for example, 1.75 = \$1,750,000)

	Angels/Friends/Family	VCs	Govt Grants	Strategic Partners
<input type="text" value="{q:/QID61/ChoiceTextEntryValue/1/1}"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="{q:/QID61/ChoiceTextEntryValue/2/1}"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="{q:/QID61/ChoiceTextEntryValue/3/1}"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="{q:/QID61/ChoiceTextEntryValue/4/1}"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Of the companies listed in the previous question, please share with us how large a return your prior investors received on their investment. Express that return as "X" times the original investment. For example, if the investors got a 3x return, enter the number "3".

	Return to Investors	Over how many years?
<input type="text" value="{q:/QID61/ChoiceTextEntryValue/1/1}"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="{q:/QID61/ChoiceTextEntryValue/2/1}"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="{q:/QID61/ChoiceTextEntryValue/3/1}"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="{q:/QID61/ChoiceTextEntryValue/4/1}"/>	<input type="text"/>	<input type="text"/>

Of the startups listed in the previous question, please share with us what was the basic outcome of the company

<input type="text" value="{q:/QID61/ChoiceTextEntryValue/1/1}"/>	<input type="text"/>
<input type="text" value="{q:/QID61/ChoiceTextEntryValue/2/1}"/>	<input type="text"/>
<input type="text" value="{q:/QID61/ChoiceTextEntryValue/3/1}"/>	<input type="text"/>
<input type="text" value="{q:/QID61/ChoiceTextEntryValue/4/1}"/>	<input type="text"/>

If you have already raised money previously for your company, please indicate which category, what year the funding happened, how much of it was debt and equity (in millions) and what percentage of the total capital structure each source represents.

	Year (YYYY)	Investment Debt (\$MM)	Equity (\$MM)	% Ownership (Total Must Be 100)
Friends & Family	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Angel Investors	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
VCs	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Government Grants	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Strategic Partners	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
ALL Founders	<input type="text"/>	<input type="text"/>	<input type="text"/>	100

### Management Team (#5)

In this section, we want to get a sense of your management team (including you) -- who they are, what they've done, how committed they are and how well you all work together. Investors generally believe that it is the team that justifies the investment -- therefore, the more impressive the team, the more likely you will have success.

Remember, this survey is designed to accommodate ALL sizes of entrepreneurial ventures. So don't worry if your team is just you. Just answer the questions with only your own individual information.

Please list the top five members of your management team (including you) and their title in your company. If you have less than five management team members then leave the remaining places blank.

Management Team Members	
Team Member Name (optional)	Title (required)
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

	Management Team Members	
	Team Member Name (optional)	Title (required)
Team Member A	<input type="text"/>	<input type="text"/>
Team Member B	<input type="text"/>	<input type="text"/>
Team Member C	<input type="text"/>	<input type="text"/>
Team Member D	<input type="text"/>	<input type="text"/>
Team Member E	<input type="text"/>	<input type="text"/>

Please indicate in the following matrix how each team member's experience overlaps with each other.

	<div> <div>\$ {q://QID67%231/ChoiceTextEntryValue/1/1}</div> <div>\$ {q://QID67%231/ChoiceTextEntryValue/1/2}</div> </div> <div> <div>Worked Together Before</div> <div>And Also Worked Together in Same Industry</div> </div>	
<div>\$ {q://QID67%231/ChoiceTextEntryValue/2/1}</div> <div>\$ {q://QID67%231/ChoiceTextEntryValue/2/2}</div>	<input type="checkbox"/>	<input type="checkbox"/>
<div>\$ {q://QID67%231/ChoiceTextEntryValue/3/1}</div> <div>\$ {q://QID67%231/ChoiceTextEntryValue/3/2}</div>	<input type="checkbox"/>	<input type="checkbox"/>
<div>\$ {q://QID67%231/ChoiceTextEntryValue/4/1}</div> <div>\$ {q://QID67%231/ChoiceTextEntryValue/4/2}</div>	<input type="checkbox"/>	<input type="checkbox"/>
<div>\$ {q://QID67%231/ChoiceTextEntryValue/5/1}</div> <div>\$ {q://QID67%231/ChoiceTextEntryValue/5/2}</div>	<input type="checkbox"/>	<input type="checkbox"/>

Please indicate in the following matrix how many years each team member has worked with each other.

		\$ {q://QID67%231/ChoiceTextEntryValue/1/1} \$ {q://QID67%231/ChoiceTextEntryValue/1/2}
		Years Worked Together
\$ {q://QID67%231/ChoiceTextEntryValue/2/1} \$ {q://QID67%231/ChoiceTextEntryValue/2/2}		<input type="text"/>
\$ {q://QID67%231/ChoiceTextEntryValue/3/1} \$ {q://QID67%231/ChoiceTextEntryValue/3/2}		<input type="text"/>
\$ {q://QID67%231/ChoiceTextEntryValue/4/1} \$ {q://QID67%231/ChoiceTextEntryValue/4/2}		<input type="text"/>
\$ {q://QID67%231/ChoiceTextEntryValue/5/1} \$ {q://QID67%231/ChoiceTextEntryValue/5/2}		<input type="text"/>

Tell us about how sophisticated your product/service is and the experience your team has with this kind of product/service.

How many total years experience does your management team have IN THIS SAME INDUSTRY?

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How many total years experience does your management team have WORKING FOR A TOP COMPETITOR in this market space?

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What kind of success(es) have you and/or your team had in the past in this industry?

Some limited success, but nothing big

At least one on our team has had a major success

Collectively, you'd be viewed as the "dream team" for this industry

This question calls for a totally honest assessment of your team (including you) as it exists today. We realize that, if your funding needs are met, things will change and that, to some extent is the purpose of this question. This information will be handled in strict confidence.

Start by evaluating your current team and then list all the key positions you'd like to have filled after your next round of funding.

	Title	Current Team or Future Team	Experience		Rate Performance 1-10	For Current Team Member	Explanation
	Title of Team Member	Is this person currently part of your team?	# Years in this industry	# Equiv positions in this industry		Is this person a Keeper?	If not, why not?
Team Member A - \${q://QID67%231/ChoiceTextEntryValue/1/1}	\${q://QID67%	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
Team Member B - \${q://QID67%231/ChoiceTextEntryValue/2/1}	\${q://QID67%	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
Team Member C - \${q://QID67%231/ChoiceTextEntryValue/3/1}	\${q://QID67%	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
Team Member D - \${q://QID67%231/ChoiceTextEntryValue/4/1}	\${q://QID67%	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
Team Member E - \${q://QID67%231/ChoiceTextEntryValue/5/1}	\${q://QID67%	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
Additional Team Member 1	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
Additional Team Member 2	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
Additional Team Member 3	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>

How many TOTAL shares has the company authorized to be issued? "Authorized" shares is defined as: The maximum number of shares available in the company.

Now, tell us the share ownership of the team members. Please reflect current ownership and do not include any future round of funding. (IMPORTANT: Remember, the table below should reflect who owns the company TODAY!)

	Founder? Is this person a founder of the company?	Employee? (20+ hours with expectation of being hired upon funding)	Vested Total Shares	Options Total Shares
\${q://QID67%231/ChoiceTextEntryValue/1/1}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
\${q://QID67%231/ChoiceTextEntryValue/1/2}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
\${q://QID67%231/ChoiceTextEntryValue/2/1}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
\${q://QID67%231/ChoiceTextEntryValue/2/2}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
\${q://QID67%231/ChoiceTextEntryValue/3/1}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
\${q://QID67%231/ChoiceTextEntryValue/3/2}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
\${q://QID67%231/ChoiceTextEntryValue/4/1}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
\${q://QID67%231/ChoiceTextEntryValue/4/2}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
\${q://QID67%231/ChoiceTextEntryValue/5/1}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
\${q://QID67%231/ChoiceTextEntryValue/5/2}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>

Now, tell us about equity ownership by outside investors and about the unvested option pool. Please reflect current ownership and do not include any future round of funding. Any shares not currently owned or assigned should be in the option pool or un-allocated share total.

	Equity Ownership (Other) Total Shares
Outside Investors (shares currently owned by non-team members)	<input type="text"/>
Unvested Option Pool (ALL options promised or issued but not yet vested (or owned) by the employees)	<input type="text"/>

### Founder Commitment (#6)

In this section, we want to know more about who is doing what, at what level and with how much commitment. It is important to answer each question as truthfully as possible as your answers will be compared to other sections of the application for consistency.

It's okay if you are the only founder.

Please answer the following questions concerning length of service, average number of hours worked and whether or not the Top 5 members of your team are getting paid. You will also indicate if each is a "principal founder" which is a person who was (a) at least partially responsible for the idea for the company and, as such, (b) received some stock in the company for their contribution.

	Active Since Active Since (MM/YYYY)	Hours Avg Hours per Week	Paid? / Principal Founder?	
			Paid?	Principal Founder?
<div> <div></div> <div></div> </div>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<div> <div></div> <div></div> </div>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<div> <div></div> <div></div> </div>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<div> <div></div> <div></div> </div>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<div> <div></div> <div></div> </div>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

Using the founders listed in the previous question, do any members of your team receive income from sources other than the company?

	Other Income Sources Outside Income?	Part-time / Full- time	Amount (\$) [Note: enter full dollars here]
<div> <div></div> <div></div> </div>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<div> <div></div> <div></div> </div>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<div> <div></div> <div></div> </div>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<div> <div></div> <div></div> </div>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<div> <div></div> <div></div> </div>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>

From the same founders listed in the previous question, please indicate how much "hard" cash (NOT sweat equity) each founder has in the company, and then whether said cash was invested as debt or equity.

	Hard Cash Invested as...[Note: enter full dollars here]		Debt Repayment
	Equity (\$)	Debt (\$)	Does Debt Need Repayment?
<div> <div></div> <div></div> </div>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<div> <div></div> <div></div> </div>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<div> <div></div> <div></div> </div>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<div> <div></div> <div></div> </div>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<div> <div></div> <div></div> </div>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>



Using the founders listed in the previous question, please list the estimated annual compensation, expenses and commissions that will be paid for this year.

	This Year's Expected Payouts [Note: enter full dollars here]		
	Base Comp (\$)	OR Expenses Only (\$)	Commissions (\$)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please enter the total of ALL other salaries paid to people in the company NOT listed in the previous question [Note: enter full dollars here]

### Directors & Advisors (#7)

In this section, we want to know who you look to for advice either as an official member of your board or as someone you have asked to join an "advisory board." Often, strong board members can be an invaluable source of help and advice to a young, growing company.

It's okay if you don't have a board of directors yet.

"Outsiders" are defined as people that are not part of the founding team and not a member of management.

Generally, there are two types of boards a company can create to help them get qualified, outside advice from recognized experts. Please select those that apply:

	Type of Board		Attributes of the Board		
	Yes	No	Total # of Members	Total # of Official Mtgs per Year	Total # of Outsiders
We have a "Board of Directors"	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
We have a "Board of Advisors"	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Now, this question applies ONLY to the people serving on your boards that are what we defined as "Outsiders." We've already probed your commitment and qualifications, now we'd like to know something about theirs.

	Name of Person	Type of Board Member		Board Member Details				Do they have a compensation plan?	
	Name	Director	Advisor	# Months Active	Total \$ Invested	Total \$ They Helped Raise	Total Yrs Experience in Same Industry	Yes	No
Outsider Member 1	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
Outsider Member 2	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
Outsider Member 3	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>

	Name of Person	Type of Board Member		Board Member Details				Do they have a compensation plan?	
	Name	Director	Advisor	# Months Active	Total \$ Invested	Total \$ They Helped Raise	Total Yrs Experience in Same Industry	Yes	No
Outsider Member 4	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
Outsider Member 5	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
Outsider Member 6	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
Outsider Member 7	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>

For each of your outside board members listed, tell us why you asked them to join your board. You may check as many as apply.

	Why you asked them to join your board				% of Expectation Achieved
	Industry Experience	Ability to Raise \$	Connection to Customer	Legal / Prof Background	%
#{QID84%232/ChoiceTextEntryValue/1/1}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
#{QID84%232/ChoiceTextEntryValue/2/1}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
#{QID84%232/ChoiceTextEntryValue/3/1}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
#{QID84%232/ChoiceTextEntryValue/4/1}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
#{QID84%232/ChoiceTextEntryValue/5/1}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
#{QID84%232/ChoiceTextEntryValue/6/1}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
#{QID84%232/ChoiceTextEntryValue/7/1}	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

### Financial Performance (#8)

In this section, accuracy and attention to detail will be extremely important! There are multiple double checks within this application, so inconsistencies will cause you to lose points! Be sure you reflect all dollar amounts in this section in Millions of dollars "\$MM". (thus \$142,000 would be expressed as 0.142)

It's okay if your company is "pre-revenue." Many startups are in your same stage and are still very fundable.

Please list the company's actual, total revenue (if it has any) for the current year (Note: the model assumes you are on a calendar year so please answer accordingly). Again, be sure you reflect all dollar amounts in this section in Millions of dollars "\$MM". (thus \$142,000 would be expressed as 0.142)

	Revenue		
	How many months so far this year?	Actual Revenue (\$MM) so far this year	Estimate (\$MM) for remainder of this year
Current Calendar Year	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please list the company's actual, total revenue (if it has any) for the previous three years (Note: the model assumes you are on a calendar year so please answer accordingly). Again, be sure you reflect all dollar amounts in this section in millions of dollars "\$MM". (thus \$142,000 would be expressed as 0.142)

	Revenue
	Actual Revenue (\$MM)
Last Calendar Year	<input type="text"/>
1 Year Before	<input type="text"/>
2 Years Before	<input type="text"/>

Please show us what revenue you're expecting over the next three years. If your estimates are contingent upon funding, please show the amount expected.

	Resource Estimates	
	Capital Funding (\$MM)	Forecast Revenue (\$MM)
Current Calendar Year	<input type="text"/>	<input type="text"/>
Next Year	<input type="text"/>	<input type="text"/>
Year After Next	<input type="text"/>	<input type="text"/>
Three Years Out	<input type="text"/>	<input type="text"/>

Now, provide your expense budget. Please assume that whatever contingent funding you listed in the previous question has been raised and that you add that money to your budget (Note: The Year 0, Year 1, etc. designations are the same as reflected in the previous question).

	Expense Budget (\$MM)			
	Current Year 0	Year 1	Year 2	Year 3
Research & Product Development	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Professional Fees	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Marketing & Selling Expenses (Not Salary)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Salaries (Existing Team including benefits and taxes)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Salaries (New Hires including benefits and taxes)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Cost of Goods Sold	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
General & Admin Costs	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Look at your four biggest customers and show us what percent of your revenue they will contribute in each year. If you don't have any customers, then skip this question. Combine all other customers as your fifth biggest customer. Be careful that each column adds up to 100.

	% of Revenue			
	2 Years Ago	1 Year Ago	Current Year	Next Year
Customer #1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Customer #2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Customer #3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Customer #4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
All Other Customers Combined	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Now we'd like to look at items on your balance sheet in millions (\$MM). Please make numbers current as of the most recent month. We will start with ASSETS. If there are asset categories not listed, then you will have a chance to list them on the next question.

	Balance Sheet Assets
	\$MM
Cash on Hand	<input type="text"/>
Debts Owed to the Company	<input type="text"/>
Accounts Receivable & Prepaid Expenses	<input type="text"/>
Inventory	<input type="text"/>
Capital Assets (Equipment, Real Estate, etc.)	<input type="text"/>
Goodwill	<input type="text"/>

Please list any other important assets not covered by the previous question (\$MM)

Other Assets

4/1/2019

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	Description	Other Assets	\$MM
	Description		\$MM
Other Asset #1	<input type="text"/>		<input type="text"/>
Other Asset #2	<input type="text"/>		<input type="text"/>

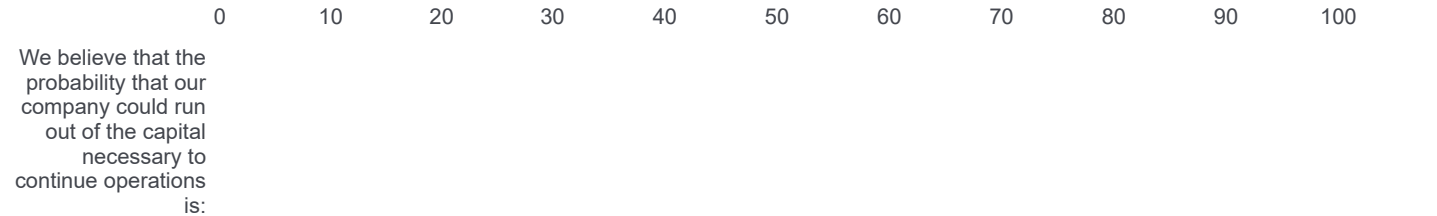
Now we'd like to look at your LIABILITIES & EQUITY in millions (\$MM). Please make numbers current as of the most recent month. If there are liability categories not listed, then you will have a chance to list them on the next question.

	Liabilities & Equity
	\$MM
Accounts Payable	<input type="text"/>
Short-term External Debts Payable	<input type="text"/>
Long-term External Debt	<input type="text"/>
Payable to Team including Deferred Compensation	<input type="text"/>
EQUITY: Paid-in Capital	<input type="text"/>
EQUITY: Retained Earnings	<input type="text"/>

Please list any other important liabilities not covered by the previous question (\$MM)

	Description	Other Liabilities
		\$MM
Other Liability #1	<input type="text"/>	<input type="text"/>
Other Liability #2	<input type="text"/>	<input type="text"/>

Based on the above financials, what is the probability that the company could run out of money? Slide the indicator to the correct percentage.



Based on your assessment of the probability you could run out of money for operations, the most likely date by which this might happen could be as soon as (use format MM/DD/YYYY):

### Investment Value (#9)

You are almost done. Thanks for your time investment so far.  
 How much money do you need to raise this year? (It's okay if you are not looking to raise money this year. If this is the case, just enter the amount that you might eventually be looking to raise.)

Funding Plan	How did you arrive at this figure?	How long do you expect this money to last?
(\$ MM)		Months

	Funding Plan (\$ MM)	How did you arrive at this figure?	How long do you expect this money to last? Months
How much money is your company currently looking to raise?	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please select TWO (only two, please) of the following options as the probable sources you expect to raise this money from.

Friends & Family  
 Angel Investors  
 Venture Capital  
 SBA  
 Government Grants  
 Strategic Partners  
 Private/Bank Debt Financing  
 Crowdfunding  
 Other

What are your budget and goals for the use of the money from the funding given above? Please report all numbers in millions (\$1,400,000 = 1.4).

	Use of Funds (\$MM)
Product Development - Money needed to prepare a product for commercialization	<input type="text"/>
Professional Fees - Includes all legal, accounting and patent fees	<input type="text"/>
Marketing & Selling Expenses - All costs associated with these programs (except salaries)	<input type="text"/>
Salaries Budget (Existing Team) - Includes any salary increases, bonuses, taxes, benefits, etc.	<input type="text"/>
Salaries Budget (New Hires) - Includes bonuses, taxes, benefits, etc.	<input type="text"/>
Cost of Goods Sold - All raw material purchases, WIP, etc. that will be needed to achieve goals	<input type="text"/>
Basic General & Administrative Costs - Office rent, insurance, furniture, utilities, etc.	<input type="text"/>
Unique items - Paying off debts to investors and/or founders, paying back salaries, etc.	<input type="text"/>
Capital Investment - Purchase of operating business, patents/IP, real estate, construction, equipment	<input type="text"/>

Assuming that this money is raised within your expected time frame, what goals will this investment enable the company to achieve?

The company expects to grow our sales  
 The company expects to improve our profits

The company expects to introduce new products

You indicated that you expect to grow your sales with the proceeds from funding. Please provide these follow-up details:

	Sales (\$MM)
Sales in Year 0 (current year) before growth (\$MM)	<input type="text"/>
Projected Sales in Year 1 after growth (\$MM)	<input type="text"/>

You indicated that you expect to improve your profits with the proceeds from funding. Please provide these follow-up details:

	Profits (\$MM)
Profits in Year 0 (current year) before improvement (\$MM)	<input type="text"/>
Projected Profits in Year 1 after improvement (\$MM)	<input type="text"/>

You indicated that you expect to introduce new products with the proceeds from funding. Please provide these follow-up details:

	Number
Number of products we currently offer	<input type="text"/>
Number of new products we plan to introduce	<input type="text"/>
Number of months it will take to introduce these new products	<input type="text"/>

What value (or price) have you placed on your Company today before the investment is made? This is called the "Pre-Money" valuation. Enter your answer in full \$ amount (\$5,000,000 for example)

Help us understand what you would tell an investor when they ask (and they will), "How will I get my money back?" Please check the ones you feel are the most likely.

We plan to sell the company  
We plan to do a public IPO/ICO

We plan to pay a dividend back to our investors  
We don't have any plans at this time.

You indicated that you want to eventually sell the company. In how many years from now?

You indicated that you want to eventually do an IPO or ICO. In how many years from now?

You indicated that you plan to pay a dividend back to investors.

Planned dividend % per annum

Target multiple return to investors (for example, enter "1" for a 1x return, "10" for a 10x return, etc.)

List the current status of your fundraising efforts, including your commitments from each of the below sources, the total amount of the commitments, the amount of that commitment that is certain, and the probability of raising the rest.

	Fundraising Status			
	Total # of Commitments	Total \$MM at stake	\$MM amount that is 100% certain	Probability of raising the remaining amount (%)
Friends & Family	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Angel Investors	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Venture Capital	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
SBA	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Government Grants	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Strategic Partners	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

	Fundraising Status			
	Total # of Commitments	Total \$MM at stake	\$MM amount that is 100% certain	Probability of raising the remaining amount (%)
Private/Bank Debt Financing	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Crowdfunding	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## Accomplishments (#10)

Almost done. Just two more very short sections.

In this section, we want to learn more about (a) what you have accomplished to date and (b) what you expect to accomplish in the near future (assuming you get funded).

Did your company have clear, measurable goals to meet over the last 12 months?

Yes

No

You indicated that your company has clear goals. Who set these goals?

Management Team

Board of Directors

Both

For each type of goal listed, please answer the following. Leave blank any categories that did not have goals.

	Please indicate Percentage (%)	
	% of goal completed by deadline	% of allocated expense budget used
Sales Goals	<input type="text"/>	<input type="text"/>
Marketing Goals	<input type="text"/>	<input type="text"/>
Financial Goals	<input type="text"/>	<input type="text"/>

If you did not have any goals or, if you failed to complete 100% of everything you set out to do (who doesn't?), we'd like to know what it is that is holding you back. We are having difficulty making (or even setting goals) because:

	Does this obstacle apply to you? Check up to 2	Time required to solve Months
We must raise more money before we can accomplish anything significant.	<input type="checkbox"/>	<input type="text"/>
We need to find good people who will share our vision and accept a below market salary until we can afford more.	<input type="checkbox"/>	<input type="text"/>
We need to finish a commercial version of our product first.	<input type="checkbox"/>	<input type="text"/>
We need to overcome some regulatory barriers first.	<input type="checkbox"/>	<input type="text"/>
We need to file our patents and establish protection first.	<input type="checkbox"/>	<input type="text"/>
We need to solidify a couple of key contracts with vendors, customer, strategic partners, etc. first.	<input type="checkbox"/>	<input type="text"/>
We are waiting until we can afford an office where everyone can work together.	<input type="checkbox"/>	<input type="text"/>

You indicated that your strategic partner has committed to invest in you. Will they lead the investment, or only follow someone else?

Lead

Follow

Sometimes it helps a growing company to find "strategic partners" (i.e., other companies in their general market niche) who might share a common interest in your success. Relationships with strategic partners might include someone who will use their sales force to sell your products, manufacture your products and/or even make an investment in you. Please let us know if you have any relationships like this either done or pending.

Our strategic partner relationships consist of:

	Status			If Pending, what is the probability of it happening? %	Is this partner a Fortune 500 company? Check if Yes
	N/A	Done	Pending		
A relationship to market our products	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="checkbox"/>
A relationship to sell or distribute our products.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="checkbox"/>
A relationship to manufacture our products.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="checkbox"/>
A commitment to invest in us	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="checkbox"/>

We previously asked you about your past goals. Now we want to know about your FUTURE goals. Does your company have clear, measurable goals to meet over the NEXT 6-12 months?

Yes

No

You indicated in the previous question that you have a commitment from a strategic partner to invest in your company. What is the dollar amount (in millions \$MM) of that commitment?

You indicated that your company has clear goals for the next 6-12 months. Who set these goals?

Management Team

Board of Directors

Both

For each type of future goal listed, please answer the following. Leave blank any categories that do not have goals.

	What Impact if Completed? (%)	
	% increase in Sales	% increase in Profitability
Sales Goals	<input type="text"/>	<input type="text"/>
Marketing Goals	<input type="text"/>	<input type="text"/>
Financial Goals	<input type="text"/>	<input type="text"/>

### Equity Shares (#11)

Now, please tell us how many shares (units) have been allocated.

Out of the number of shares Authorized that you previously entered as: **#{QID75/ChoiceTextEntryValue}**

What number of shares are?

Issued

(This is the number that are all "vested" and "owned" 100% by someone.)

Reserved

(This is the sum of all shares set aside as options or warrants. They are not yet "owned" by anyone, but they may be reserved for them in an option.)



**Intellectual Property (#12)**

This is the last section!

In this section, we want to learn more about the "intellectual property" that makes you special. Don't worry, we won't be asking you to divulge any "trade secrets" or "proprietary" information that would require a non-disclosure agreement. Our purpose here is to understand (a) what you have in general and (b) what you have done to protect it.

	Applications Filed			Date Filed	Was filing done by a lawyer?
	# Filed	# Approved	# Pending	MM/DD/YYYY	Yes
Have you filed for any trademark protection?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Have you filed for any patent protection?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>

Who owns the trademarks / patents listed in the previous question?

	Owned by Company?	
	Yes	No
All trademarks have been assigned to the company and are owned 100% by the company	<input type="radio"/>	<input type="radio"/>
All patents have been assigned to the company and are owned 100% by the company	<input type="radio"/>	<input type="radio"/>

Are there any patents considered vital to the success of the company owned by another person or entity?

Yes

No

You indicated that one more vital patents are owned by another entity. Who is the owner?

The founder of the company

An outside investor, but not a founder

A separate company owned by the founder

A separate company owned by the investor (not founder)

We need just a little more information about your vital patents that are owned by another entity.

	Number #
How many of your patents fall into this category?	<input type="text"/>
How many of these patents have been exclusively licensed to the company?	<input type="text"/>

Is there anything that you have decided to keep as a trade secret, rather than file for a patent?

	Trade Secrets		How Many?
	Yes	No	#
Do you have trade secrets (instead of patents)?	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

What precautions have been taken to protect the integrity of your idea(s)?

	Precaution Taken?	
	Yes	No
Were all employees asked to sign an invention assignment agreement prepared by your patent attorney?	<input type="radio"/>	<input type="radio"/>
Has your patent attorney reviewed all your paperwork on each patent and signed off on its acceptability?	<input type="radio"/>	<input type="radio"/>

	Precaution Taken?	
	Yes	No
If someone were found to be violating one of your patents and/or trademarks, are you in a financial position to enforce your rights through some type of legal means?	<input type="radio"/>	<input type="radio"/>

## Finalize

Thank you for completing the Qualifier Survey! If you have any additional comments or feedback, please enter it here.

Please click on the check box to indicate that you are ready to submit and THEN click the Next Button (or the right arrow button) to finalize and exit. Congratulations on completing this significant project!

I am ready to submit my survey

Powered by Qualtrics











