

CONFIDENTIAL QUESTIONNAIRE



Client Last Name		First name		MI	Date of Birth	State of Birth	Social Security Number
Home Address Street				City		State	Zip
Home Phone		Home Fax		Home email			
Occupation				Employer			
Work Address Street				City		State	Zip
Client Work Phone		Work Fax		Work email			
Spouse/Partner Last Name		First Name		MI	Date of Birth	State of Birth	Social Security Number
Spouse Occupation				Spouse Employer			
Spouse Work Phone		Work Fax		Work email			

Dependents (please include adult dependents)

Dependent Last Name	First name	MI	Date of Birth	State of Birth	Social Security Number	From previous Marriage? (y/n)

Financial Position	Level of Importance of this Area (1 = Low, 5=High)					Level of Satisfaction with Current Results				
	1	2	3	4	5	1	2	3	4	5
Budgeting (living within your means)	1	2	3	4	5	1	2	3	4	5
Amount of emergency cash reserves	1	2	3	4	5	1	2	3	4	5
Safety or rate of return on cash reserves	1	2	3	4	5	1	2	3	4	5
Liquidity of cash reserves	1	2	3	4	5	1	2	3	4	5
Cost of debt	1	2	3	4	5	1	2	3	4	5
Other:	1	2	3	4	5	1	2	3	4	5

Risk Management	Level of Importance of this Area					Level of Satisfaction with Current Results				
	1	2	3	4	5	1	2	3	4	5
Your family's lifestyle in event of death or disability	1	2	3	4	5	1	2	3	4	5
Payment of medical expenses	1	2	3	4	5	1	2	3	4	5
Personal or business liability coverage	1	2	3	4	5	1	2	3	4	5
Replacement of auto, home, or other property in event of loss	1	2	3	4	5	1	2	3	4	5
The level of volatility of your investments	1	2	3	4	5	1	2	3	4	5
Unforeseen costs of caring for an aging or disabled relative	1	2	3	4	5	1	2	3	4	5
Other:	1	2	3	4	5	1	2	3	4	5

Wealth Accumulation	Level of Importance of this Area					Level of Satisfaction with Current Results				
	1	2	3	4	5	1	2	3	4	5
Education for children or grandchildren	1	2	3	4	5	1	2	3	4	5
New or second home	1	2	3	4	5	1	2	3	4	5
Special vacation	1	2	3	4	5	1	2	3	4	5
Weddings, Bar- or Bat-Mitzvahs	1	2	3	4	5	1	2	3	4	5
Purchase of business	1	2	3	4	5	1	2	3	4	5
Liquidity of cash reserves	1	2	3	4	5	1	2	3	4	5
Other:	1	2	3	4	5	1	2	3	4	5

Tax Planning	Level of Importance of this Area					Level of Satisfaction with Current Results				
	1	2	3	4	5	1	2	3	4	5
Taking advantage of all available tax reduction strategies	1	2	3	4	5	1	2	3	4	5
Reducing federal and state income taxes on earned income	1	2	3	4	5	1	2	3	4	5
Reducing federal and state income taxes on investment income	1	2	3	4	5	1	2	3	4	5
Reducing federal and state income taxes on future income	1	2	3	4	5	1	2	3	4	5
Alternative Minimum Tax	1	2	3	4	5	1	2	3	4	5
Sale of a highly appreciated or low cost basis asset or real estate	1	2	3	4	5	1	2	3	4	5
Other:	1	2	3	4	5	1	2	3	4	5

Retirement Planning	Level of Importance of this Area					Level of Satisfaction with Current Results				
	1	2	3	4	5	1	2	3	4	5
Level of retirement income	1	2	3	4	5	1	2	3	4	5
Duration of retirement	1	2	3	4	5	1	2	3	4	5
Continuation of retirement income at death or co-client	1	2	3	4	5	1	2	3	4	5
Taxation of retirement (including social security)	1	2	3	4	5	1	2	3	4	5
Maintaining purchasing power during retirement	1	2	3	4	5	1	2	3	4	5
Preparation for nursing home/ care costs for client or co-client	1	2	3	4	5	1	2	3	4	5
Other:	1	2	3	4	5	1	2	3	4	5

Estate Planning	Level of Importance of this Area					Level of Satisfaction with Current Results				
	1	2	3	4	5	1	2	3	4	5
Care of dependents at premature death	1	2	3	4	5	1	2	3	4	5
Disposition of assets at death	1	2	3	4	5	1	2	3	4	5
Reducing estate transfer costs (probate, state and federal death taxes)	1	2	3	4	5	1	2	3	4	5
Legacy for heirs or charity	1	2	3	4	5	1	2	3	4	5
Ease of administration for your executors	1	2	3	4	5	1	2	3	4	5
Financial assistance to your dependents' guardians in the event of your death	1	2	3	4	5	1	2	3	4	5
Other:	1	2	3	4	5	1	2	3	4	5

Other:	Level of Importance of this Area					Level of Satisfaction with Current Results				
	1	2	3	4	5	1	2	3	4	5
Charitable Giving	1	2	3	4	5	1	2	3	4	5
Consolidated inventory of assets, accounts and property	1	2	3	4	5	1	2	3	4	5
Understanding your employee benefits package	1	2	3	4	5	1	2	3	4	5
Understanding if your existing financial arrangements will achieve your goals	1	2	3	4	5	1	2	3	4	5
Coordination of and communication between advisors (attorney, CPA, etc.)	1	2	3	4	5	1	2	3	4	5
Having a step-by-step plan to accomplish your goals	1	2	3	4	5	1	2	3	4	5
Other:	1	2	3	4	5	1	2	3	4	5

Anticipated Changes			
Please check all that are likely to occur within the next 12 months.			
<input type="checkbox"/>	Marriage	<input type="checkbox"/>	Make an Investment
<input type="checkbox"/>	Have a child	<input type="checkbox"/>	Inheritance
<input type="checkbox"/>	Graduation	<input type="checkbox"/>	Buy or Sell a home
<input type="checkbox"/>	Divorce	<input type="checkbox"/>	Job change or Promotion
<input type="checkbox"/>	Buy a Business or Practice	<input type="checkbox"/>	Sell a Business
<input type="checkbox"/>	Pay off a loan	<input type="checkbox"/>	Bonus or Salary Increase
<input type="checkbox"/>		<input type="checkbox"/>	Retirement
<input type="checkbox"/>		<input type="checkbox"/>	Increase Savings
<input type="checkbox"/>		<input type="checkbox"/>	Dependent Parent
<input type="checkbox"/>		<input type="checkbox"/>	Obtain a loan
<input type="checkbox"/>		<input type="checkbox"/>	Death of a family member
<input type="checkbox"/>		<input type="checkbox"/>	Return to work
Other:			

Household Income	
<input type="checkbox"/>	Under \$50,000
<input type="checkbox"/>	\$50,000 - \$70,000
<input type="checkbox"/>	\$75,000 - \$100,000
<input type="checkbox"/>	\$100,000 - \$150,000
<input type="checkbox"/>	\$150,000 - \$250,000
<input type="checkbox"/>	\$250,000 - \$500,000
<input type="checkbox"/>	\$500,000 - \$1M
<input type="checkbox"/>	\$1M+

Types of Assets Owned

Home	Business/Practice
Second Home	IRA/SEP
Other Residential Real Estate	Other Retirement Plans
Savings Accounts/CD's	Tax-Free Funds
Money Market Account	Limited Partnerships
Commercial Real Estate	Commercial Notes/Trust Deeds
Stocks/Bonds	Stock Options
Term Life Insurance	Annuities
Cash Value Life Insurance	Unit Investment Trusts
Mutual Funds	Separate Accounts
Other:	
What is the best investment you ever made?	
What is the worst investment you ever made?	

Assets and Liabilities

Total Assets	Total Liabilities
Under \$100,000	Under \$100,000
\$100,000 - \$250,000	\$100,000 - \$250,000
\$250,000 - \$500,000	\$250,000 - \$500,000
\$500,000 - \$1,000,000	\$500,000 - \$1,000,000
\$1,000,000 - \$2,500,000	\$1,000,000 - \$2,500,000
\$2,500,000 - \$5,000,000	\$2,500,000 - \$5,000,000
\$5,000,000 - \$10,000,000	\$5,000,000 - \$10,000,000
\$10,000,000+	\$10,000,000+

How Much of a Financial Risk Taker are You?

Low Risk 1 2 3 4 5 6 7 8 9 10 High Risk

Documents Needed for the Next Meeting

The following documents will be needed for study and analysis as we work together to create a financial strategy for you. It is understood that this material will be treated confidentially and returned when the plan is completed, or earlier if requested.

	Most Recent Payroll Stubs		Insurance Policies and/or Statements
	Client		Life
	Co-client		Medical
			Disability
	Income Tax Returns		Long-term Care
	Client		Auto and Home
	Co-client		Liability
	Business		Group Insurance
	Investments and Retirement Statements and/or plan descriptions		Employee Benefit Statements/ Booklets
	Pension/Profit Sharing		Client
	SEP/SIMPLE		Co-client
	401k/ TSA/ PEDC		
	IRA/ Roth		Business Documents
	529		Buy-Sell Agreements
	Securities Accounts		Deferred Compensation Agreements
	Savings and investments		Split Dollar Agreements
	Annuities		Wage Continuation Agreements
			Employee/Consulting
	Wills and Trusts		Group Benefit Programs
	Client		Other Employer Paid Benefits
	Co-client		
			Cash Flow Worksheet
Other:			