

# Confidential Questionnaire

Answering this questionnaire will ensure that the time spent with your Advisor is efficient and productive.

| Personal Information     |            |                 |               |                |              |
|--------------------------|------------|-----------------|---------------|----------------|--------------|
| Client Last Name         | First name | MI              | Date of Birth | State of Birth | Citizenship? |
| 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 | Citizenship? |
| 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 | Citizenship? | From previous Marriage? (y/n) |
| Dependent Last Name                          | First name | MI | Date of Birth | State of Birth | Citizenship? | From previous Marriage? (y/n) |
| Dependent Last Name                          | First name | MI | Date of Birth | State of Birth | Citizenship? | From previous Marriage? (y/n) |
| Dependent Last Name                          | First name | MI | Date of Birth | State of Birth | Citizenship? | From previous Marriage? (y/n) |
| Dependent Last Name                          | First name | MI | Date of Birth | State of Birth | Citizenship? | From previous Marriage? (y/n) |

| Financial Position                        | Level of Importance of this Area (1 = Low, 5=High) |   |   |   |   | Level of Satisfaction with Current Results |   |   |   |   |
|---|--|---|---|---|---|--|---|---|---|---|
| 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?

←
1
2
3
4
5
6
7
8
9
10
→

Low Risk 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.

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