

Financial Planning Questionnaire



Answering this questionnaire as completely as possible in advance of your meeting will ensure the time spent with your advisor will be efficient and productive. This information will be treated confidentially.

Personal Information						
Client Last Name	First Name	MI	Date of Birth	State of Birth/Citizenship	SSN	
Home Address Street		City		State	Zip	
Home Phone	Preferred? <input type="checkbox"/>	Mobile Phone	Preferred? <input type="checkbox"/>	Personal Email		
Occupation			Employer			
Work Address Street		City		State	Zip	
Spouse/Partner Last Name	First Name	MI	Date of Birth	State of Birth/Citizenship	SSN	
Home Address Street (if different)		City		State	Zip	
Home Phone (if different)	Preferred? <input type="checkbox"/>	Mobile Phone	Preferred? <input type="checkbox"/>	Personal Email		
Occupation			Employer			
Work Address Street		City		State	Zip	

Dependents (please include adult dependents)						
Dependent Last Name	First Name	MI	Date of Birth	State of Birth	SSN	From Previous Marriage? (Y or N)
Dependent Last Name	First Name	MI	Date of Birth	State of Birth	SSN	From Previous Marriage? (Y or N)
Dependent Last Name	First Name	MI	Date of Birth	State of Birth	SSN	From Previous Marriage? (Y or N)
Dependent Last Name	First Name	MI	Date of Birth	State of Birth	SSN	From Previous Marriage? (Y or N)
Dependent Last Name	First Name	MI	Date of Birth	State of Birth	SSN	From Previous Marriage? (Y or N)

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

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

Wealth Accumulation	Level of Importance of this Area					Level of Satisfaction with Current Results				
	1	2	3	4	5	1	2	3	4	5
1=Low, 5=High										
Education for children or grandchildren										
New or second home										
Special vacation										
Weddings, Bar/Bat Mitzvahs, Other special life events										
Purchase of a business										
Other:										

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

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Retirement Planning	Level of Importance of this Area					Level of Satisfaction with Current Results				
	1	2	3	4	5	1	2	3	4	5
1=Low, 5=High										
Level of retirement income										
Duration of retirement										
Continuation of retirement income at death										
Taxation of retirement income (including Social Security)										
Maintaining purchasing power during retirement										
Preparation for nursing home or other care costs										
Other:										

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

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

Notes:

Types of Assets Owned

Home	Business / Practice
Second Home	IRA / SEP IRA
Other Residential Real Estate	Other Retirement Plans
Savings Accounts / CDs	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
Over \$10,000,000	Over \$10,000,000

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Documents Needed for the Next Meeting

The following documents will be needed for review and analysis as we work together to create a financial plan and strategy for you. This information and these documents will be treated confidentially and returned to you when the plan is completed, or earlier if requested.

	Most Recent Payroll Stubs		Insurance Policies and/or Statements
	Client		Life Insurance
	Co-Client		Medical
			Disability
	Income Tax Returns		Long-Term Care
	Client		Auto and Home Owners Insurance
	Co-Client		Liability
	Business		Group Insurance
	Investment Statement and/or Plan Documents		Employee Benefit Statements
	Pension / Profit Sharing		Client
	SEP / SIMPLE		Co-Client
	401K / TSA / PEDC		
	IRA / Roth IRA		Business Documents
	529 Plan		Buy-Sell Agreements
	Securities / Brokerage Accounts		Deferred Compensation Agreements
	Savings and Investments		Split Dollar Agreements
	Annuities		Wage Continuation Agreements
			Employee / Consulting
	Estate Planning Documents		Group Benefit Programs
	Wills & Trusts		Other Employer Paid Benefits
	Other estate planning documents		
			Cash Flow Worksheet

Other:

Notes: