



Wealth Management Questionnaire

Prepared For: _____

Date Prepared: _____

~ Personal & Confidential ~

Personal

Client Last Name		First name		MI	DOB		SSN	Citizenship	
Home Address Street		City		State	Zip		Drivers License #	DL Issuance Date	DL Expiration Date
Mobile / Home Phone	Work Phone		Primary email				Secondary email		
Marital Status		Industry			Occupation				
Employer			Employment Address						
Spouse/Partner Last Name		First Name		MI	DOB		SSN	Citizenship	
Industry		Occupation			Employer				

Family

Last Name	First name	MI	Date of Birth	SSN	Citizenship	Relationship
Last Name	First name	MI	Date of Birth	SSN	Citizenship	Relationship
Last Name	First name	MI	Date of Birth	SSN	Citizenship	Relationship
Last Name	First name	MI	Date of Birth	SSN	Citizenship	Relationship
Last Name	First name	MI	Date of Birth	SSN	Citizenship	Relationship

Source Of Introduction: _____

Professional Advisors

Financial Advisor(s)	Name	Phone	Email	Firm
Attorney	Name	Phone	Email	Firm
CPA	Name	Phone	Email	Firm
Insurance Agent	Name	Phone	Email	Firm
Other	Name	Phone	Email	Firm

Interests & Priorities

Values and Purpose

Level of Importance of this Area
(1 = Low, 5 = High)

Level of Satisfaction with Current Results
(1 = Low, 5 = High)

	1	2	3	4	5		1	2	3	4	5
Family											
Security and Stability											
Control											
Community											
Achievement											
Other:											

Financial Position

Level of Importance of this Area
(1 = Low, 5 = High)

Level of Satisfaction with Current Results
(1 = Low, 5 = High)

	1	2	3	4	5		1	2	3	4	5
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
(1 = Low, 5 = High)

Level of Satisfaction with Current Results
(1 = Low, 5 = High)

	1	2	3	4	5		1	2	3	4	5
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 in the event of loss											
The level of volatility of your investments											
The costs of caring for an aging or disabled relative											
Other:											

Wealth Accumulation

Level of Importance of this Area
(1 = Low, 5 = High)

Level of Satisfaction with Current Results
(1 = Low, 5 = High)

	1	2	3	4	5		1	2	3	4	5
Education for children or grandchildren											
New or second home											
Special vacation											
Weddings, other celebrations											
Purchase of business											
Liquidity of cash reserves											
Other:											

Tax Planning

Level of Importance of this Area
(1 = Low, 5 = High)

Level of Satisfaction with Current Results
(1 = Low, 5 = High)

	1	2	3	4	5		1	2	3	4	5
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:											

Retirement Planning

Level of Importance of this Area

(1 = Low, 5 = High)

Level of Satisfaction with Current Results

(1 = Low, 5 = High)

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

Estate Planning

Level of Importance of this Area

(1 = Low, 5 = High)

Level of Satisfaction with Current Results

(1 = Low, 5 = High)

	1	2	3	4	5		1	2	3	4	5
Care of dependents at premature death											
Disposition of assets at death											
Reducing estate transfer costs (probate, state, and federal death taxes)											
Legacy for heirs or charity											
Ease of administration for your executors											
Financial assistance to your dependents' guardians in the event of your death											
Creating a business succession plan											
Other:											

Other

Level of Importance of this Area

(1 = Low, 5 = High)

Level of Satisfaction with Current Results

(1 = Low, 5 = High)

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

Anticipated Changes (Please check all that are likely to occur within the next 12 months)

Marriage	Making an Investment	Retiring
Having a child	Inheritance	Increasing Savings
Graduation	Buying or Selling a home	Dependent Parent
Divorce	Changing Job or Promotion	Obtaining a loan
Buying a Business or Practice	Selling a Business	Death of a family member
Paying off a loan	Bonus or Salary Increase	Returning to work
Other:		

Wealth Management Goals & Objectives

Personal Goals

1. What are the biggest financial challenges you face today?

2. What specific long- and short-term goals or desires do you have for you and your family?

3. What is important to you about your money?

4. Additional comments on your goals?

Retirement Planning

1. What is your plan for retirement? When? Where? What do you hope to do?

2. Upon retirement, how much income is required to maintain your lifestyle? What do you see as the primary sources of this income?

3. What kind of retirement plans do you have? What are the assets? How are they invested? Are you confident you have enough resources set aside for retirement income? How much do you think you'll need?

4. How much are you contributing to your retirement plan? _____

5. What does your employer or your company contribute to your retirement plan? Are you vested? Is any portion of your retirement assets invested in employer stock?

6. Have you calculated your expected income from Social Security? How about your benefits from Medicare?

7. What is your biggest concern about reaching your retirement goals?

8. Do you have other sources of income such as:

- Rental Income
- Dividends and Interest
- Pension
- Trust Funds
- Self-Employment
- Capital Gains
- Annuity

Estate Planning

1. When was the last time your Estate Plan was reviewed? _____
2. Have there been any major family changes recently (i.e., divorce, health, birth, death, job change)?

3. Do you have a durable power of attorney and a health care proxy in the event you can't be reached or can't make decisions?

4. Do you own life insurance? What kind? How much? Who are the beneficiaries?

5. Do you own life insurance directly or is it in a trust?

6. When did you last have your insurance reviewed by an independent professional? _____
7. Do you have enough life insurance? Why do you think so?

8. Do you have long term care insurance? Do you think you need it?

9. What consequences do you feel there would be if you or your spouse required extended medical care?

10. Do you have a business? What is the business worth? Are your key employees adequately provided for? Would you consider executive benefits to their packages?

11. What kind of succession plan do you have for your business? How would you fund the succession plan?

12. Do you have any kind of buy/sell agreement for your business with partners or potential successors? Is it up to date? Is it adequate?

13. Do you have any health problems?

14. Do you plan to leave any portion of your estate to charity?

15. Do you have any potential inheritances?

Income Protection

1. How will your family survive if your income is cut off by an untimely death?

2. If you were unable to work would your earnings stream continue?

3. Do you have personal liability coverage? Are you confident you have adequate coverage for yourself, your family, and your business? Have you ever been sued?

4. Does your business have adequate protection against lawsuits for sexual harassment, product liability and workman's compensation claims?

Assisting Children

1. What are the schooling plans for the kids? How much will it cost? Do you plan to pay some/all of your children's education costs? How have you provided financially for those needs?

2. Do your children participate in saving or investing? Do they have accounts of their own? Roth IRAs? UGMA accounts? 529 Plans?

3. Do you have any grandchildren? How are you assisting them today? In the future?

4. Do your children have special needs because of physical or mental reasons? Did you know that without adequate planning, they could lose all of their federal and state assistance?

Assisting Parents

1. Are your parents living? Grandparents? Ages? How is the health of each? Where do they live? Any medical history to be concerned about? What kind? Are you providing any care?

2. How will your parents provide for their expenses in retirement? How about medical care? Do they own long-term care insurance?

3. Are you providing care for any older relatives or friends? How long have you been doing so?

4. Are there any other relatives or friends for whom you might one day be responsible? When? In what way(s)? How will you manage those responsibilities?

5. Do your parents have a will? Have they completed their estate plan? Are their beneficiaries up to date? How will their estate plan impact your plan?
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Financial Information & Suitability

Household Income

Under \$50,000	\$150,000 - \$250,000
\$50,000 - \$75,000	\$250,000 - \$500,000
\$75,000 - \$100,000	\$500,000 - \$1M
\$100,000 - \$150,000	\$1M+

Types Of Assets Owned

Home	Business/Practice
Second Home	IRA / SEP
Other Residential Real Estate	Other Retirement Plan Accounts
Savings Accounts / CD's	Tax-Free Funds
Money Market Account	Limited Partnerships
Commercial Real Estate	Commercial Notes / Trust Deeds
Stocks / Bonds	Stock Options / Restricted Stock
Term Life Insurance	Annuities
Cash Value Life Insurance	Unit Investment Trusts
Mutual Funds	Separate Accounts

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+

Investment Preferences

1. How would you describe your current investment strategy and risk profile?

2. How comfortable are you with how your overall investment portfolio is positioned to achieve your objectives?

3. Would you like international equity to be considered in the asset allocation recommendation?

4. Would consolidating your assets at a single financial institution be of value to you if it simplified your financial affairs and facilitated the creation and monitoring of an integrated financial strategy?

5. Which statement best describes how you like to monitor the investing in your portfolio?
 I track activity very closely. I check the value or prices of my investments more than once a month.
 I track investment activity somewhat closely and monitor less frequently than multiple times a month.
 Detail shown in my periodic account statements provides sufficient information.
 I leave the investment activity to the investment advisors; I don't need to know all the details.
6. How would you describe your outlook for the U.S. economy over the next 5 years?
 Positive
 Negative
 Undecided

Document Checklist for next meeting (where applicable)

Bank and Investment Statements

Tax Documents

Checking Account Statements	Federal / State Tax Returns (1040) for the last two years
Savings / CDs / Money Market Statements	Trust Tax Returns (1041) for the past two years
Brokerage / Advisory Account Statements	Gift Tax Returns Filed (Form 709)
Annuity Statements	Business Interest Distributions (K-1)
Credit Card Statements	
IRA/Roth IRA Statements	

Property and Liabilities

Insurance Statements

Schedule of Real Estate (Title, location, acquisition date, and cost, income, market value)	Life Insurance policy declaration / In-force illustration
Values of personal property	Disability Policy
Loan Statements (primary residence, home equity / other mortgage, rental real estate, investment / margin, auto)	Long-Term Care
Student Loans	Property / Casualty
Family Loans	Limited Liability Insurance (Umbrella)

Income & Employment Benefits**Estate Documents**

Payroll Statements (W2)	Last Will and Testament
Self-Employment Statements (1099)	Trust Documents (Revocable, Irrevocable, QTIPs, ILITs, FLPs, etc.)
Social Security Statements (SSA.GOV)	Settlement Agreements
Employee Benefit Statement - Group Term Life Insurance - Group Disability Coverage	Pre- and Post-Nuptial Agreements
Retirement Plan Statements (401(k), 403(b), 457)	Divorce Settlements (alimony and child support)
Deferred Compensation Arrangements	Durable / Medical Powers of Attorney
Pension Plan Statements	Health Care Directives, HIPAA release
Section 125 Plan (cafeteria, MSA)	Guardianship Agreements
Stock Option Plan Statements	

Expenditures**Business Documents**

List of current living expenses (discretionary & non-discretionary)	Past 2 years of tax returns and company financials: - Business tax returns (1120S, 1120C) - Year-end balance sheets - Year-end income statements
Estimate of retirement living expenses	Articles of incorporation / Articles of organization
	Operating agreement / By laws
	Buy-Sell Agreement(s)
	Insurance (key person, liability, operational)
	Deferred Compensation Plans
	Stock Options/Stock Bonus Plan
	Appraisals
	Organizational Chart