## Investing Questionnaire

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| CLIENT INFORMATION | | | | | | | | | | | | | | | | | | | | | | | | | |
| INFORMATION | | | | CLIENT | | | | | | | | | | | | | | SPOUSE/2ND PARTY | | | | | | | |
| **Name:** | | | |  | | | | | | | | | | | | | |  | | | | | | | |
| Date of Birth: | | | |  | | | | | | | | | | | | | |  | | | | | | | |
| **Employment status:** | | | |  | | | | | | | | | | | | | |  | | | | | | | |
| Annual earned income (before taxes): | | | | $ | | | | | | | | | | | | | | $ | | | | | | | |
| Annual income from investments: | | | | $ | | | | | | | | | | | | | | $ | | | | | | | |
| Annual income from other sources: | | | | $ | | | | | | | | | | | | | | $ | | | | | | | |
| DEPENDENT INFORMATION | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME | | | | DOB | | | | | | | | | | | | | | GENDER | | | | | | | |
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| ASSETS & LIABILITIES | | | | | | | | | | | | | | | | | | | | | | | | | |
| **CASH ASSETS (emergency funds, money markets, checking, savings, etc.):** | | | | | | | | | | | | | | | | | | | | | | | | | |
| DESCRIPTION: | | | | OWNER: | | | | | | | | | | | | | | CURRENT VALUE: | | | | | | | |
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| *INVESTMENT ASSETS (stocks, bonds, non-retirement mutual funds, etc.):* | | | | | | | | | | | | | | | | | | | | | | | | | |
| DESCRIPTION (tax free or tax deferred): | | | | OWNER: | | | | | | | | | | | | | | CURRENT VALUE: | | | | | | | |
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| *BUSINESS/REAL ESTATE ASSETS (business building, rental property, etc.):* | | | | | | | | | | | | | | | | | | | | | | | | | |
| DESCRIPTION: | | | | OWNER: | | | | | | | | | | | | | | CURRENT VALUE: | | | | | | | |
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| *PERSONAL ASSETS (home, 2nd home, jewelry, art, etc.):* | | | | | | | | | | | | | | | | | | | | | | | | | |
| DESCRIPTION: | | | | OWNER: | | | | | | | | | | | | | | CURRENT VALUE: | | | | | | | |
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| *STOCK OPTIONS of a publicly traded company:* | | | | | | | | | | | | | | | | | | | | | | | | | |
| DESCRIPTION: | | | | OWNER: | | | | | | | | | | | | | | CURRENT VALUE: | | | | | | | |
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| *RETIREMENT ASSETS OF CLIENT (401-k, 403-b, SEP, Roth IRA, Traditional IRA, etc.):* | | | | | | | | | | | | | | | | | | | | | | | | | |
| TYPE: | CURRENT VALUE: | | | ANNUAL CONTRIBUTION: | | | | | | | | | | | | | | | | | ANNUAL EMPLOYER CONTRIBUTION: | | | | |
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| *RETIREMENT ASSETS OF SPOUSE/2ND PARTY (401-k, 403-b, SEP, Roth IRA, Traditional IRA, etc.):* | | | | | | | | | | | | | | | | | | | | | | | | | |
| TYPE: | VALUE: | | | ANNUAL CONTRIBUTION: | | | | | | | | | | | | | | | | | ANNUAL EMPLOYER CONTRIBUTION: | | | | |
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| *Liabilities/Debt Obligation (consumer loans, automobile loans, mortgages, home equity loan, etc.):* | | | | | | | | | | | | | | | | | | | | | | | | | |
| TYPE: | RESPONSIBLE PARTY: | | | | | | | | | CURRENT BALANCE: | | | | | MONTH PMNT: | | | % RATE | | | | TAX DEDUTCTIBLE? | | | |
|  |  | | | | | | | | | $ | | | | | $ | | |  | | | | Yes: | | | No: |
|  |  | | | | | | | | | $ | | | | | $ | | |  | | | | Yes: | | | No: |
|  |  | | | | | | | | | $ | | | | | $ | | |  | | | | Yes: | | | No: |
|  |  | | | | | | | | | $ | | | | | $ | | |  | | | | Yes: | | | No: |
|  |  | | | | | | | | | $ | | | | | $ | | |  | | | | Yes: | | | No: |
| INCOME PROTECTION | | | | | | | | | | | | | | | | | | | | | | | | | |
| *Life Insurance - CLIENT:* | | | | | | | | | | | | | | | | | | | | | | | | | |
| TYPE: | OWNER: | | | BENEFICIARY: | | | | | | | | DEATH BENEFIT: | | | | | | CASH VALUE: | | | | | ANNUAL PREMIUM: | | |
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| *Life Insurance – SPOUSE/2ND PARTY:* | | | | | | | | | | | | | | | | | | | | | | | | | |
| TYPE: | OWNER: | | | BENEFICIARY: | | | | | | | | DEATH BENEFIT: | | | | | | CASH VALUE: | | | | | ANNUAL PREMIUM? | | |
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| How important is it to provide financial resources for your spouse, dependents, or others, in the case of your death? | | | | Very | | | | | | | Somewhat | | | | | Neutral | | | Somewhat  unimportant | | | | | Unimportant | |
|  | | | | CLIENT: | | | | | | | | | | | | | | SPOUSE/2ND PARTY: | | | | | | | |
| Do you have a plan, at work, or individually, which provides continuing income if you are unable to work due to accident or illness? | | | | YES:       NO: | | | | | | | | | | | | | | YES:       NO: | | | | | | | |
| **What %age of your income will be replaced by this plan?** | | | | **\_\_\_\_\_\_\_\_\_\_%** | | | | | | | | | | | | | | **\_\_\_\_\_\_\_\_\_\_%** | | | | | | | |
| **How many years of coverage does this plan provide?** | | | | **\_\_\_\_\_\_\_\_\_\_Years** | | | | | | | | | | | | | | **\_\_\_\_\_\_\_\_\_\_\_Years** | | | | | | | |
|  | | | | **CLIENT:** | | | | | | | | | | | | | | **SPOUSE/2ND PARTY:** | | | | | | | |
| **How long could you live on your current assets in the event you become disabled or suffer a prolonged illness?** | | | | **< 8 weeks       2-6 months**  **6-12 months       > 1 year** | | | | | | | | | | | | | | **< 8 weeks       2-6 months**  **6-12 months       > 1 year** | | | | | | | |
| **How important is it to replace your earned income in the event you become disabled or suffer a prolonged illness?** | | | | **Very       Somewhat       Neutral**  **Unimportant** | | | | | | | | | | | | | | | | | | | | | |
| **Are you financially prepared for high costs associated with long life in retirement, such as long-term care?** | | | | **Yes       No** | | | | | | | | | | | | | | | | | | | | | |
| Do you have any parents, siblings, etc., that may become your financial dependent? | | | | Yes       No | | | | | | | | | | | | | | | | | | | | | |
| How important is it to provide long-term care funding for you, your spouse, or our dependents? | | | | Very       Somewhat       Neutral        Unimportant | | | | | | | | | | | | | | | | | | | | | |
| FINANCIAL CONCERNS | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | CLIENT: | | | | | | | | | | | | | | | | SPOUSE/2ND PARTY: | | | | | | | |
| When did you last review your will? | | No will       < 3 Years          3-7 Years       > 5 Years | | | | | | | | | | | | | | | | No will       < 3 Years          3-7 Years       > 5 Years | | | | | | | |
| How important is it to reduce or eliminate your debt? | | | | | | | | | | | | | | Very      Somewhat      Neutral       Unimportant | | | | | | | | | | | |
| How important is it to consolidate your debt? | | | | | | | | | | | | | | Very      Somewhat      Neutral       Unimportant | | | | | | | | | | | |
| How important is it to accumulate funds for future goals besides retirement and education goals? | | | | | | | | | | | | | | Very      Somewhat      Neutral       Unimportant | | | | | | | | | | | |
| How important is it for you to have assistance in reviewing your different IRA choices, i.e., Roth vs Traditional, etc.? | | | | | | | | | | | | | | Very      Somewhat      Neutral       Unimportant | | | | | | | | | | | |
| How important is it for you to have assistance in moving retirement funds from a previous employer? | | | | | | | | | | | | | | Very      Somewhat      Neutral       Unimportant | | | | | | | | | | | |
| How important is it for you to have assistance in reviewing your investments? | | | | | | | | | | | | | | Very      Somewhat      Neutral       Unimportant | | | | | | | | | | | |
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| RETIRMENT PREPARATION | | | | | | | | | | | | | | | | | | | | | | | | | |
| **What age do you want to retire?** | CLIENT: \_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | SPOUSE/2ND PARTY: \_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | |
| On average, what percentage of your combined income (after tax) do you feel you will need when you retire to live comfortably? | | | | | | | | | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_% | | | | | | | | | | | | |
| How much impact do you feel inflation will have on your retirement? | | | | | | | | | | | | | Major       Some      Not sure | | | | | | | | | | | | |
|  | | | | | CLIENT | | | | | | | | | | | | | | | SPOUSE/2ND PARTY | | | | | |
| If you are employed, does your employer provide a defined benefit pension plan? | | | | | Yes       No | | | | | | | | | | | | | | | Yes       No | | | | | |
| EDUCATION PLANNING & LIFE EVENTS | | | | | | | | | | | | | | | | | | | | | | | | | |
| Do you plan to (help) fund the educational needs of your children, etc.? | | | | | | | | Yes       No | | | | | | | | | | | | | | | | | |
| Approximately what amount of money do you anticipate needing to fund these college/graduate school needs? | | | | | | | | | $\_\_\_\_\_\_\_\_\_\_\_\_\_College $\_\_\_\_\_\_\_\_\_\_\_\_\_Graduate School | | | | | | | | | | | | | | | | |
| Do you feel you are adequately prepared to fund these needs? | | | | | | Yes       No | | | | | | | | | | | | | | | | | | | |
| Do you anticipate any of these life changing events in the next year? | | | | | | | Please circle:  Change of employment Starting a new business  Birth of a child Dependent entering college  Major (home, etc.) purchase Retirement | | | | | | | | | | | | | | | | | | |
| RISK TOLERANCE | | | | | | | | | | | | | | | | | | | | | | | | | |
| Do you agree with the statement “reducing losses is more important than receiving high returns?” | | | Strongly agree       Agree        Somewhat disagree       Disagree | | | | | | | | | | | | | | | | | | | | | | |
| How comfortable are you with risk? | | | Lower risk/lower return       Moderate risk/moderate return        High risk/higher return | | | | | | | | | | | | | | | | | | | | | | |
| How would you describe your investment philosophy? | | | I want my investments to consistently generate a steady return. (This usually translates to a low level of risk tolerance.)        I am not concerned about periodic fluctuations and understand that this could mean some large losses. (This usually translates to a medium level of risk tolerance.)        I am comfortable with a portfolio that will lose and regain value, over time, with an understanding that, overall, the rate of return will be higher than average. (This usually translates to a high level of risk tolerance.) | | | | | | | | | | | | | | | | | | | | | | |
| If the value of your investments fell 20% in one year, what would your reaction be? | | | I would be inclined to move my money in to a different investment.        I would be concerned and consider moving my money in to a different investment.        I would leave my money alone and continue to invest according to my long-term plan.        I would leave my money alone and probably invest more. | | | | | | | | | | | | | | | | | | | | | | |
| What life stage of investing are you currently in? | | | Early years        Middle years        High income & savings years        Early retirement years        Retirement | | | | | | | | | | | | | | | | | | | | | | |