Advanced Tax Consulting LLC
Help The Best Get Better

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Discovery Questionnaire

This comprehensive, personal financial summary is designed to help you take inventory and assign realistic values to your personal assets and liabilities. It is the essential first step in organizing your financial future. At Advanced Tax Consulting LLC, our goal is to help you make the right decisions for your financial future. The information you provide in this questionnaire will assist us in making sound recommendations with confidence.

BASIC INFORMATION

Your Legal Name | Age | Birthdate(mm/dd/yyyy)

Spouse's Legal Name | Age | Birthdate(mm/dd/yyyy)

Address | City | State | Zip

Home Phone | Cell Phone | Cell Phone(spouse) | Fax

E-mail: | Email(spouse): | How did you hear about us?

BENEFICIARY

Name (1) | Relationship

Address | DOB | Primary or Contingent

Name (2) Relationship

Address DOB Primary or Contingent

OCCUPATION/BUSINESS

Your Job Title Employer (last, if retired) # of Years Retirement Date

Phone # Occupation Address

Your Spouse's Job Title Employer (last, if retired) # of Years Retirement Date

Phone # Occupation Address

BUSINESS ASSETS

	Owner	Spouse	Total
Business Assets1	$_____	$_____	$_____
Business Assets1	$_____	$_____	$_____
Business Assets1	$_____	$_____	$_____

COMMERCIAL REAL ESTATE

	Owner	Spouse	Total
Real Estate1	$_____	$_____	$_____
Real Estate1	$_____	$_____	$_____
Real Estate1	$_____	$_____	$_____

Total assets: ***$***_____

FAMILY ASSETS

	Owner	Spouse	Total
PERSONAL			
Primary Residence	$_____	$_____	$_____
Vacation home/Second Residence	$_____	$_____	$_____
Automobiles(s)	$_____	$_____	$_____
Other personal assets _____	$_____	$_____	$_____
Other personal assets _____	$_____	$_____	$_____
Total Personal assets:			***$*** _____
LIQUID AND INVESTMENT			
Cash	$_____	$_____	$_____
Fixed			
Bonds and bond mutual funds	$_____	$_____	$_____
Bonds and bond mutual funds	$_____	$_____	$_____
Equity			
Stocks and stock mutual funds	$_____	$_____	$_____
Stocks and stock mutual funds	$_____	$_____	$_____
Other personal assets _____	$_____	$_____	$_____
Total Liquid and Investment assets:			***$*** _____
RETIREMENT	**Owner**	**Spouse**	**Current Value**
IRA	$_____	$_____	$_____
IRA ROTH	$_____	$_____	$_____
Qualified Retirement Plan(e.g.,401(k))	$_____	$_____	$_____
Qualified Retirement Plan(e.g.,401(k))	$_____	$_____	$_____
Annuities	$_____	$_____	$_____
Other retirement assets	$_____	$_____	$_____
Total Retirement Assets:			***$*** _____

Total Assets

(Add personal assets, liquid and investment assets, and retirement assets) $_____

** Approximate annual after- tax income needed in retirement to live a comfortable lifestyle? ** $_____

FAMILY LIABILITIES:

	Debtor***	Current balance	Original balance
Mortgage on first residence	_____	$_____	$_____
Mortgage on second residence	_____	$_____	$_____
Charge accounts and credit cards	_____	$_____	$_____
Other Liabilities	_____	$_____	$_____

TOTAL LIABILITIES $_____

*** Indicate whether the debtor of the liability is you, a second person, or both.

FAMILY INCOME:

ANNUAL INCOME	Primary	Secondary
Employment (wages, salaries, bonuses)	$ _____	$ _____
Self-employment/business income	$ _____	$ _____
Social Security benefits – Projected amount	$ _____	$ _____
Other government benefits	$ _____	$ _____
Taxable investment income / Annuity income	$ _____	$ _____
Nontaxable investment income / Annuity income	$ _____	$ _____
Pensions (if currently receiving)	$ _____	$ _____
Other income – taxable _____	$ _____	$ _____
Other income – taxable _____	$ _____	$ _____
Total annual income:	$ _____	$ _____

COMBINED TOTAL ANNUAL INCOME $ _____

FAMILY EXPENSES:

Fixed	$_____
Variable	$_____
TOTAL	**$_____**

Strategize: Tax Blueprint®

Estimating Monthly Expenses

In order to do an effective estimate of tax savings we need an idea of your monthly cash flow. Enter in the monthly amount for each item in the list below. Write in anything else that you regularly spend in the extra rows:

House Payment (Principal, Tax, Interest & Insurance)	$
Car Payment	$
Car Expenses (fuel, tolls, insurance)	$
Credit Card(s) Payment	$
Groceries	$
Phone (home, cell)	$
Utilities (gas, electricity, water, cable, etc.)	$
Entertainment (dining, movies, etc.)	$
Health Insurance	$
Life Insurance	$
School Loans	$
Other Debts	$
Out-of-pocket Medical Expenses	$
Charitable Giving	$
Miscellaneous	$
Total Monthly Expenses	**$**

GENERAL:

Are you anticipating any major lifestyle changes? ☐ Yes ☐ No ☐ Uncertain
(i.e. marriage, divorce, retirement, moving, etc.)
If so, what changes are you expecting? _____

Education: ☐Associates ☐Bachelor's ☐ Masters ☐P.H.D ☐ DO/MD/DDS/DMD/DV

Spouse Education: ☐Associates ☐Bachelor's ☐ Masters ☐P.H.D ☐ DO/MD/DDS/DMD/DV

Do you anticipate any significant changes in your cash flow?	☐ Yes	☐ No	☐ Uncertain
Are you a U.S. citizen?	☐ Yes	☐ No	
Is your spouse a U.S. citizen?	☐ Yes	☐ No	☐ Uncertain
Are you insurable?	☐ Yes	☐ No	Health Rating: __
Is your spouse insurable?	☐ Yes	☐ No	Health Rating: __
Are you charitably inclined?	☐ Yes	☐ No	

PROTECTION

Do you have any current health problems?	☐ Yes	☐ No	☐ Uncertain
Do you have disability coverage?	☐ Yes	☐ No	☐ Uncertain
Do you have home healthcare or nursing home coverage?	☐ Yes	☐ No	☐ Uncertain
Do **you** have life insurance? Type? _____ Amount? _____ **Spouse** Type? _____ Amount? _____	☐ Yes	☐ No	☐ Uncertain
Do you have an emergency fund (money set aside in savings)?	☐ Yes	☐ No	☐ Uncertain
Do you have long-term health care coverage?	☐ Yes	☐ No	☐ Uncertain

ESTATE PLANNING

Do you have updated/adequate wills?	☐ Yes	☐ No	☐ Uncertain
Have you established any trusts?	☐ Yes	☐ No	☐ Uncertain
Will you be receiving a significant inheritance?	☐ Yes	☐ No	☐ Uncertain
Have you adequately considered estate taxes?	☐ Yes	☐ No	☐ Uncertain

Have you provided adequate estate liquidity for your heirs?	☐ Yes	☐ No	☐ Uncertain

GOALS	
What are your major objectives for your investments?	
☐ Current and future income	☐ Keeping ahead of inflation
☐ Preserving capital (Protecting what you have)	☐ Increasing returns
☐ Building wealth for heirs	

Investment Goals	**Low Priority**					**High Priority**				
Return should exceed inflation rate	☐1	☐2	☐3	☐4	☐5	☐6	☐7	☐8	☐9	☐10
Principal should be safe	☐1	☐2	☐3	☐4	☐5	☐6	☐7	☐8	☐9	☐10
Investments should be liquid (immediately accessible)	☐1	☐2	☐3	☐4	☐5	☐6	☐7	☐8	☐9	☐10
Diversification is important	☐1	☐2	☐3	☐4	☐5	☐6	☐7	☐8	☐9	☐10
I want to reduce my taxable income	☐1	☐2	☐3	☐4	☐5	☐6	☐7	☐8	☐9	☐10
I want to build tax-free income	☐1	☐2	☐3	☐4	☐5	☐6	☐7	☐8	☐9	☐10
I am interested in long-term growth	☐1	☐2	☐3	☐4	☐5	☐6	☐7	☐8	☐9	☐10
I am interested in short-term profits	☐1	☐2	☐3	☐4	☐5	☐6	☐7	☐8	☐9	☐10

Major Concerns/Goals:

QUESTIONS

Please list any questions you may have:

INVESTOR EXPERIENCE & HISTORY			
How much investing experience do you have (in years)?	Individual _____ Business	Stocks_____	Mutual Funds_____
Variable Annuities _____	Bonds _____	REIT's _____	Options_____

I expect to start drawing income from the investment:	
☐ Not for at least 20 years	☐ Not now,but with in 5 years
☐ In 10 to 20 years	☐ Immediately
☐ In 5 to 10 years	

Assuming normal market conditions, what would you expect from this investment over time?

☐ To generally keep pace with the stock market

☐ To trail the stock market, but make a decent profit

☐ To have a high degree of stability, but only modest profits

Suppose the stock market performs unusually poorly over the next decade. Then what would you expect from this investment?

☐ I will be OK if I lose money

☐ To make a small gain

☐ To be little affected by what happens in the stock market

Which of these statements would best describe your attitude about the next three years' performance of this investment?

☐ I'll be OK if I lose money

☐ I want to at least break even

☐ I need at least a small profit

Which of these statements would best describe your attitude about the next three months' performance of this investment?

☐ Who cares? One calendar quarter means absolutely nothing

☐ If I suffered a loss of greater than 10% I'd get concerned

☐ I can tolerate only small short-term losses

This comprehensive financial planning summary is designed to help you take inventory and assign realistic values to your personal assets and liabilities. It is essential step in organizing a sensible financial strategy for your future.

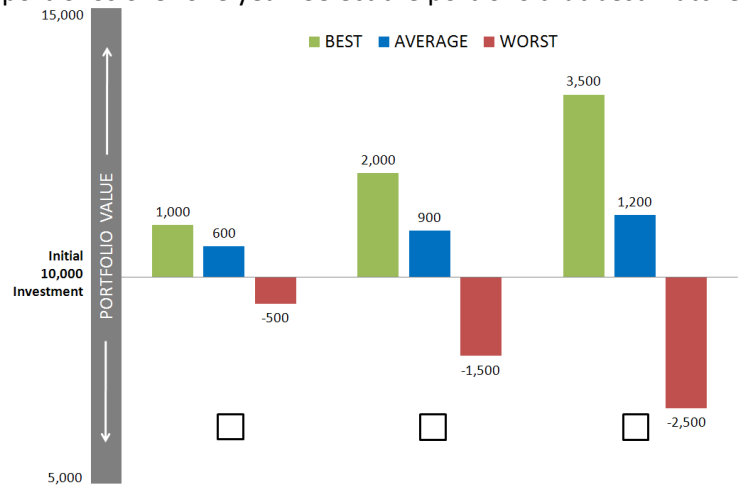
Wealth Strategy
What do you value most in life?
What do you ultimately want to achieve in your life?
What is the vision for your future?
What is important about money to you?
If you could change three things about your financial situation, what would you change?
1.
2.
3.

Please rank the following objectives from 1 to 10 (1 being most important and 10 being less important):		
	Rank	
a.		Save on income taxes
b.		Save on estate, gift and/or generation-skipping transfer taxes
c.		Create a ownership succession plan for the business
d.		Create a management succession plan for the business
e.		Create an incentive compensation plan for key employees
f.		Increase the revenues and/or profitability of the business
g.		Acquire another business
h.		Acquire additional business equipment/assets
i.		Fund additional retirement funds
j.		Increase protection from unwanted business creditors or predators
k.		Charitable planning
l.		Other Concerns/Goals:

Please provide the following additional information:

- Individual Income Tax Returns for the past two (2) years.
- Business Income Tax Returns for the past two (2) years. (if the most recent tax return is more than one (1) year ago, please provide a balance sheet and income statement for the most recent taxable year)

The following graph shows the possible outcomes (best, average and worst case scenario) of 10,000 invested in three different hypothetical portfolios over one year. Select the portfolio that best matches how you would have invested the money.



I have completed the Discovery Questionnaire and agree that I have answered these questions to the best of my ability; thus reflecting my financial needs, time horizon and willingness to accept risk.

Client Signature	Date	Print Name
Client Signature	Date	Print Name