

**Preliminary Fact Finder**

IA:	Date:
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Client Name	DOB	US Citizen	Y	N
Spouse Name	DOB	US Citizen	Y	N
Address	City, State, Zip			
Home Phone	Fax	email		
Client Cell Phone	Spouse cell phone			

**Family Data:**

Children	DOB	Marital status	US Citizen?	Spouse	DOB	Marital status	US Citizen?
		S M Sep Div	Y N			S M Sep Div	Y N
		S M Sep Div	Y N			S M Sep Div	Y N
		S M Sep Div	Y N			S M Sep Div	Y N
Grandchildren				Grandchildren			
		S M Sep Div	Y N			S M Sep Div	Y N
		S M Sep Div	Y N			S M Sep Div	Y N

**Property:**

Real Estate/Personal	Current value	Tax basis	Pre-retire gross growth rate	Post-retire gross growth rate	Owner

**Investments:**

Type/Institution name	Current value	Tax basis	Pre-retire gross growth rate	Post-retire gross growth rate	Owner

**Retirement:**

Type / Institution name	Current Value	Pre-retire gross growth rate	Post-retire gross growth rate	Owner	Beneficiary	Employee contribution	Employer contribution

**Business Assets:**

*Projections will be based on assumptions provided by the advisor and are not guaranteed. Actual results will vary, perhaps to a significant degree. The projected reports will be hypothetical in nature and for illustrative purposes only. Consult your tax and/or legal advisor before implementing any tax or legal strategies.*

Business name	Base value	Tax basis	Pre-retire gross growth rate	Post-retire gross growth rate	Owner	Business type

**Insurance:**

	Life 1	Life 2	Long term care	Disability	Annuity	Other
Policy number						
Insurance company						
Purchase date						
Policy type						
Person insured						
Owner						
Beneficiary						
Death benefit						
Cash value now						
Cash value growth rate						
Annual premium						
Premium term						
Premium payer						
Elimination period						
Benefit period						

Does your insurance coverage still fill a need?
Do you work closely with a life insurance agent?

**Liabilities:**

Mortgage/loans	Institution name	Current balance	As of date	Interest rate	Loan term

**Salary/Bonus and Social Security:**

	Annual amount	Indexed at	Owner	Destination account	Guaranteed	Starts	Ends
Salary/bonus							
Salary/bonus							
Soc. Sec. #1							
Soc. Sec. #2							

**Estimated Living Expenses:**

Current	Semi-retirement	Retirement	Advance years	Desired income in the event of death of	
				Client:	
				Spouse:	

**Current Estate Planning:**

	Simple will	RLT	Funded	Gifts	ILIT	FLP	CLT	CRT	Business Succession	Other
Client										
Spouse										

**Attorney / CPA Questions:**

Do you have an Estate Planning Attorney?	Y	N
Would you like us to recommend someone?	Y	N
Is your CPA a key decision maker for you?	Y	N
Is your Attorney a key decision maker for you?	Y	N

**Personal Questions:**

Do you feel you have achieved sufficient financial independence for retirement?
Do you have any potential inheritances?
How would you like to pass your estate to the next generation?
Do you plan to leave any portion of your estate to charity?
Do you need to make any special financial provisions for any member of your family?
What are your plans to deal with likely Estate Taxes?
What in your mind is the largest obstacle to achieving your goals?
Are you willing to invest effort or money if the effort serves to reduce or eliminate tax?
Are you comfortable managing your own money or do you need help from time to time?
How do you think of yourself financially? Conservative? _____ Moderate? _____ Aggressive? _____