KYARSIP FINANCIAL ADVISORS

Confidential Questionnaire

Date: ____/____/____

Note: print extra form page(s) when necessary to enter additional information.

	Client #1 Data	Client #2 Data (spouse)
Name		
Home Address		
Home Address		
City, State, Zip		
Home Phone		
Work Phone		
Cell Phone		
Home Fax		
Work Fax		
Email Address		
Date of Birth		
Employer		
Title/Job		
Years With Employer		
Year You Plan to Retire		

Primary contact person during business hours:

Best way to contact you during business hours: Home Phone Work Phone Cell Phone Email (circle one)

Describe any major changes that you anticipate in the next 12 months (e.g. employment changes, expecting baby, retirement, etc.)

Get the following numbers from the "Income" section of your most recent 1040

	Client #1	Client #2
Wages & Salaries (Line 7)	$	$
Interest (Line 8a)	$	$
Dividends (Line 9a)	$	$
Business Income (Lines 12, 17, 18)	$	$
Pensions (Lines 16b, 20b)	$	$
Alimony & Other (Lines 11, 21)	$	$
Total	$	$

KYARSIP FINANCIAL ADVISORS
Confidential Questionnaire

Family Members (list children and other dependents)				
Name	**Relationship**	**Date of Birth**	**Dependent**	**Resides in City, State**
			Y / N	
			Y / N	
			Y / N	
			Y / N	
			Y / N	
			Y / N	

Tax Preparation by: ❒ Self ❒ Other (check one, fill out below if "Other")				
Preparer Name				
Address				
City, State, Zip				
Phone			**Fax**	

Estate Planning Documents				
	Client #1		**Client #2**	
	Year Drafted	**State Drafted**	**Year Drafted**	**State Drafted**
Will				
Living Trust				
Power of Attorney				
Living Will				
Other Documents				

How were your current investment assets selected?

Financial Opinions/Preferences		
Of the following statements, indicate your preferences using a scale of 1 – 5 (check one)		
Client #1 **1 2 3 4 5**	**Client #2** **1 2 3 4 5**	**1 = Most True; 5 = Least True**
❒ ❒ ❒ ❒ ❒	❒ ❒ ❒ ❒ ❒	I would rather work longer than reduce my standard of living in retirement.
❒ ❒ ❒ ❒ ❒	❒ ❒ ❒ ❒ ❒	I feel that I/we can reduce our current living expenses to save more for the future if needed.
❒ ❒ ❒ ❒ ❒	❒ ❒ ❒ ❒ ❒	I am more concerned about protecting my assets than about growth.
❒ ❒ ❒ ❒ ❒	❒ ❒ ❒ ❒ ❒	I prefer the ease of mutual funds over individual securities.
❒ ❒ ❒ ❒ ❒	❒ ❒ ❒ ❒ ❒	I am comfortable with investments that promise slow, long term appreciation and growth.
❒ ❒ ❒ ❒ ❒	❒ ❒ ❒ ❒ ❒	I don't brood over bad investment decisions I've made.
❒ ❒ ❒ ❒ ❒	❒ ❒ ❒ ❒ ❒	I feel comfortable with aggressive growth investments.
❒ ❒ ❒ ❒ ❒	❒ ❒ ❒ ❒ ❒	I don't like surprises.
❒ ❒ ❒ ❒ ❒	❒ ❒ ❒ ❒ ❒	I am optimistic about my financial future.
❒ ❒ ❒ ❒ ❒	❒ ❒ ❒ ❒ ❒	My immediate concern is for income rather than growth opportunities.
❒ ❒ ❒ ❒ ❒	❒ ❒ ❒ ❒ ❒	I am a risk taker.
❒ ❒ ❒ ❒ ❒	❒ ❒ ❒ ❒ ❒	I make investment decisions comfortably and quickly.
❒ ❒ ❒ ❒ ❒	❒ ❒ ❒ ❒ ❒	I like predictability and routine in my daily life.
❒ ❒ ❒ ❒ ❒	❒ ❒ ❒ ❒ ❒	I usually pick the tried and true, the slow, safe but sure investments.
❒ ❒ ❒ ❒ ❒	❒ ❒ ❒ ❒ ❒	I need to focus my investment efforts on building cash reserves.
❒ ❒ ❒ ❒ ❒	❒ ❒ ❒ ❒ ❒	I prefer predictable, steady return on my investments, even if the return is low.

Advisor Relationships (where applicable, rate your working relationships with each of the following advisors)			
1 = Very Dissatisfied; 5 = Very Satisfied (check one)			
Advisor	**1 2 3 4 5**	**Not Applicable**	**Comments**
Financial Planner	❒ ❒ ❒ ❒ ❒	❒	
Broker #1	❒ ❒ ❒ ❒ ❒	❒	
Broker #2	❒ ❒ ❒ ❒ ❒	❒	
Accountant	❒ ❒ ❒ ❒ ❒	❒	
Tax Preparer	❒ ❒ ❒ ❒ ❒	❒	
Attorney	❒ ❒ ❒ ❒ ❒	❒	
Insurance Agent – Auto	❒ ❒ ❒ ❒ ❒	❒	
Insurance Agent – Home	❒ ❒ ❒ ❒ ❒	❒	
Insurance Agent – Life	❒ ❒ ❒ ❒ ❒	❒	
Insurance Agent - Other	❒ ❒ ❒ ❒ ❒	❒	

Insurance Coverage						
	Client #1			**Client #2**		
Type Coverage	**Brief Description**	**Group Policy**	**Indivi-dual**	**Brief Description**	**Group Policy**	**Indivi-dual**
Health		❒	❒		❒	❒
Disability #1		❒	❒		❒	❒
Disability #2		❒	❒		❒	❒
Life #1		❒	❒		❒	❒
Life #2		❒	❒		❒	❒
Life #3		❒	❒		❒	❒
Homeowners		❒	❒		❒	❒
Auto #1		❒	❒		❒	❒
Auto #2		❒	❒		❒	❒
Umbrella Liability		❒	❒		❒	❒
Professional Liability		❒	❒		❒	❒
Long Term Care		❒	❒		❒	❒
Ever been turned down for insurance?	❒ Yes ❒ No			❒ Yes ❒ No		

Pension Plans					
Description	**Client #1**	**Client #2**	**Begin At Age**	**COLA**	**Monthly Benefit**
	❒	❒		❒	**$**
	❒	❒		❒	**$**
	❒	❒		❒	**$**
	❒	❒		❒	**$**

Have you received a copy of your credit report in the past 12 months?	**❒ Yes ❒ No**

KYARSIP FINANCIAL ADVISORS
Confidential Questionnaire

Note: if you have a printout of your assets and/or liabilities in another format, feel free to attach a copy instead of entering them on this form.

Assets – Bank Accounts					
Institution	**Check-ing**	**Sav-ings**	**Money Market**	**Who Owns Acct?**	**Average Balance**
	❒	❒	❒		**$**
	❒	❒	❒		**$**
	❒	❒	❒		**$**
	❒	❒	❒		**$**
	❒	❒	❒		**$**
	❒	❒	❒		**$**

Assets – Certificates of Deposit (attach a copy of the most current statements)		
Institution	**Who Owns CDs?**	**Average Balance**
		$
		$
		$
		$

Assets – Real Estate and Personal Property		
Description	**Who Owns Property?**	**Estimated Value**
Primary Residence		**$**
Furnishings (liquidation value)		**$**
Vehicle #1:		**$**
Vehicle #2:		**$**
Vehicle #3:		**$**
Other:		**$**
Other:		**$**

Assets – Other (Retirement accounts, brokerage accounts, businesses, etc. Bring a copy of the most current brokerage, mutual fund and retirement statements to the Initial Meeting.)			
Institution	**Description**	**Who Owns Asset?**	**Estimated Value**
			$
			$
			$
			$
			$
			$
			$

Liabilities – Credit Cards				
Credit Card Company	**Card Name**	**Interest Rate**	**Avg. Monthly Payment**	**Current Balance**
		%	$	$
		%	$	$
		%	$	$
		%	$	$
		%	$	$

Liabilities – Other Debts (Residence, autos, business, school, etc.)				
Description	**Term of Loan (in years)**	**Interest Rate**	**Avg. Monthly Payment**	**Current Balance**
		%	$	$
		%	$	$
		%	$	$
		%	$	$
		%	$	$

Please comment on the advice that you seek.

Please complete this questionnaire and bring to the initial meeting or send before the meeting.	
Email	Email scanned copy to Geleg@FeeOnlyFinancialAdvisors.com
Fax	Fax it to (206) 686-3306
Mail	Mail it to: Kyarsip Financial Advisors LLC, PO Box 17009, Seattle WA 98127

The items below, as well as others, may be needed should you engage our services.

1. Prior year tax return
2. Brokerage account statements
3. Trust account statements
4. Retirement plan account statements
5. Loan documents
6. Paycheck stubs
7. Mutual Fund account statements
8. Employee Benefits booklet
9. Legal documents
10. Insurance policies