



Trader Tax Questionnaire / Analysis

- 1) What Types Of Securities Do You Trade? (check all that apply)
 Stocks Bonds Options Commodities Futures Forex
- 2) How Frequently Do You Trade? Daily Weekly Monthly
- 3) How Many Trades On Average (round trips) Do You Make During That Time Frame?
 1-2 3-5 5-10 11-15 16-20 21-25 26-50 51-100 100+
- 4) What Is Your Average Holding Period?
 Minutes Hours Days Weeks Months Years
- 5) How May Hours Per Day Do You Spend Actively Trading During Market Hours?
 Less Than 1 1 to 2 3 to 4 5 to 6 6+
- 6) How Many Hours Per Day Do You Spend Reading Financial Publications, Analyzing Market or Stock Action, Analyzing Charts, etc?
 Less Than 1 1 to 2 3 to 4 5 to 6 6+
- 7) Do You Have Another Source of Income From Employment (W-2 or self employed)?
 Yes No
- 8) How Many Hours A Week Do You Spend at That Job or Business?
 Less Than 5 5 to 10 10 to 20 20 to 30 30 to 40 40+
- 9) What % of Your Total Investable Assets Are In Your Trading Account?
 Under 5% 5 to 10% 10 to 24% 25 to 50% 50 to 75% 75 to 100%
- 10) Do You Maintain a Separate Brokerage Account For Your Long Term Positions?
 Yes No Don't Have Long Term Positions
- 11) What is Your Security Selection Process?
 Technical Analysis Fundamental Analysis Automated Trading System Other
- 12) Do You Hire Outside Money Managers To Manage Your Trading Account?
 Yes No Only For My Long Term Account

Name: _____ Phone: _____

Email Address: _____

Fill Out and Fax Back To: 866-961-5668 or Scan & Email to info@shrinkmytaxes.com