



Financial
Planning LLC

Fee-only Financial and Retirement Advisory Services

Confidential Financial Planning Questionnaire

Family Information

| | |
|--|--|
| Today's date: _____ | |
| Client initials: _____ | |
| Name on cover page: _____ | |
| <i>Single Married Partnered</i> | |
| Contact Information | |
| <u>Individual 1</u> Full name: _____ Date of Birth: _____ Age: _____ Life Expectancy: _____ Retirement Age: _____ | <u>Individual 2</u> Full name: _____ Date of Birth: _____ Age: _____ Life Expectancy: _____ Retirement Age: _____ |
| Find out by answering questions at www.livingto100.com | |
| Address & Employment Information (optional) | |
| <u>Individual 1</u> Email: _____ Phone: _____ Address: _____ City: _____ State: ____ Zip: _____ | <u>Individual 2</u> Email: _____ Phone: _____ Address: _____ (if different) City: _____ State: ____ Zip: _____ |
| Employment | |
| <u>Individual 1</u> Employer: _____ Job Title: _____ Phone: _____ Email: _____ Address: _____ City: _____ State: ____ Zip: _____ Employment Period: _____ | <u>Individual 2</u> Employer: _____ Job Title: _____ Phone: _____ Email: _____ Address: _____ City: _____ State: ____ Zip: _____ Employment Period: _____ |
| Children's Names and Birth Dates: _____ _____ | |

Earnings and Social Security

| | <u>Individual 1</u> | <u>Individual 2</u> |
|--|---------------------|---------------------|
| Employee Wages (annual) | \$ _____ | \$ _____ |
| Self Employed (annual) | \$ _____ | \$ _____ |
| Will wages keep up with inflation? | _____ | _____ |
| If receiving Social Security, the annual amount \$ | _____ | \$ _____ |

Special

List **Special Expenditures** including the amount and when expect to occur and for how long: (examples include car, charitable contributions, child care, child support, college, computers, credit card payments, day care, furniture, gifts, hobbies, home improvements, medical expenses, nursing home cost, other loan payments, private school, special celebrations, student loans payments, support for parents, therapy, vacations, weddings, work-related expenses or others)

| <u>Expenditure</u> | <u>Amount</u> | <u>Year begin and how many years</u> |
|--------------------|---------------|--------------------------------------|
| _____ | \$ _____ | _____ |
| _____ | \$ _____ | _____ |
| _____ | \$ _____ | _____ |

List **Special Receipts** including the amount and when expect to occur and for how long: (examples include alimony, annuities, child support, gifts, inheritance, miscellaneous income, rental income, repayment of loans, support from children, support from relatives, support from parents or others)

| <u>Receipts</u> | <u>Amount</u> | <u>Year begin and how many years</u> |
|-----------------|---------------|--------------------------------------|
| _____ | \$ _____ | _____ |
| _____ | \$ _____ | _____ |
| _____ | \$ _____ | _____ |

Estate

| Check the box if you have any of the following: | <u>Individual 1</u> | <u>Individual 2</u> |
|--|--------------------------|--------------------------|
| Will | <input type="checkbox"/> | <input type="checkbox"/> |
| Credit Shelter Trust Provisions | <input type="checkbox"/> | <input type="checkbox"/> |
| Durable General Power of Attorney | <input type="checkbox"/> | <input type="checkbox"/> |
| Living Will/Health Care Power | <input type="checkbox"/> | <input type="checkbox"/> |
| Other Trust, please specify | | |

Insurance

Insurance Information You may need to review your insurance policies in order to get this information.

| | <u>Individual 1</u> | <u>Individual 2</u> |
|---|---------------------|-----------------------|
| Permanent life insurance: | Face Value | Face Value |
| Name1: _____ | \$ _____ | Name1: _____ \$ _____ |
| Name2: _____ | \$ _____ | Name1: _____ \$ _____ |
| Cash Value (less loans): | | |
| Name1: _____ | \$ _____ | \$ _____ |
| Name2: _____ | \$ _____ | \$ _____ |
| Term insurance: | Face Value | Face Value |
| Name1: _____ | \$ _____ | Name1: _____ \$ _____ |
| Name2: _____ | \$ _____ | Name1: _____ \$ _____ |
| Long-term care insurance (daily limit): | \$ _____ | \$ _____ |
| Inflation Rider | Yes No | Yes No |
| Maximum length of benefit (# of years) | _____ | _____ |
| Disability Insurance (% of salary) | _____% | _____% |
| Elimination Period (#of days) | _____ | _____ |

Assets & Savings

List capital assets groups as follows including banking accounts, investment accounts, stocks, bonds, mutual funds, business interests and other financial assets not including retirement assets. An itemized listing is not required if investment statement are attached; just indicate – “see attached”.

| Asset Class Name | Current Value* | Annual Additions | Institutional Names |
|-------------------------|-----------------------|-------------------------|----------------------------|
| Saving & Checking | \$ _____ | \$ _____ | _____ |
| Money Market Accounts | \$ _____ | \$ _____ | _____ |
| Mutual Funds | \$ _____ | \$ _____ | _____ |
| Stocks | \$ _____ | \$ _____ | _____ |
| Bonds | \$ _____ | \$ _____ | _____ |
| Certificates of Deposit | \$ _____ | \$ _____ | _____ |
| Other Assets ** | \$ _____ | \$ _____ | _____ |

* In today’s dollars ** exclude home & business assets

Retirement Accounts

| | <u>Individual 1</u> | | <u>Individual 2</u> | |
|--|------------------------|-------------------------|------------------------|-------------------------|
| | Current Value * | Annual Additions | Current Value * | Annual Additions |
| Individual Deductible Accounts | | | | |
| 401(k), 403(b) and other defined contributions | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| Keogh & SEP Plans | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| IRAs | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| Supplemental Retirement Accts | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| Employer Accounts | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| Roth IRAs | \$ _____ | \$ _____ | \$ _____ | \$ _____ |

* In today’s dollars

Pension & Annuities

Defined Pension Information Include information on pensions that provide an annual income level (i.e.: military pension, state pension, etc.)

| | <u>Individual 1</u> | | <u>Individual 2</u> | |
|----------------------------------|---------------------|------------------|---------------------|------------------|
| | Pension 1 | Pension 2 | Pension 1 | Pension 2 |
| Anticipated annual amount: | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| Starting age: | _____ | _____ | _____ | _____ |
| Increase rate before retirement: | _____ % | _____ % | _____ % | _____ % |
| Increase rate after retirement: | _____ % | _____ % | _____ % | _____ % |
| Lump-sum | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| Survivor benefit (%): | _____ % | _____ % | _____ % | _____ % |
| Survivor Lump-sum (%) | _____ % | _____ % | _____ % | _____ % |

Immediate or Differed Annuities – if have immediate or differed annuities please attach copy of contracts.

Primary Home

| | | | |
|-------------------------------------|-------------------|-------------------------------|-------------------|
| If Rent: Monthly Rent | \$ _____ | Other Monthly Rental Expenses | \$ _____ |
| If Own: Current Market Value | \$ _____ | Annual Property Taxes | \$ _____ |
| Original Purchase Price plus | | | |
| Capital Improvements | \$ _____ | Annual Homeowner's Insurance | \$ _____ |
| Annual maintenance and condo fees | \$ _____ | | |
| Mortgages on Home | | | |
| | <u>Mortgage 1</u> | <u>Mortgage 2</u> | <u>Mortgage 3</u> |
| Description | _____ | _____ | _____ |
| Balance on Loan | \$ _____ | \$ _____ | \$ _____ |
| Years remaining on Loan | _____ | _____ | _____ |
| Monthly Payment | \$ _____ | \$ _____ | \$ _____ |
| Interest Rate | _____ % | _____ % | _____ % |

Vacation Home

| | | | |
|-------------------------------------|-------------------|-------------------------------|-------------------|
| If Rent: Monthly Rent | \$ _____ | Other Monthly Rental Expenses | \$ _____ |
| If Own: Current Market Value | \$ _____ | Annual Property Taxes | \$ _____ |
| Original Purchase Price plus | | | |
| Capital Improvements | \$ _____ | Annual Homeowner's Insurance | \$ _____ |
| Annual maintenance and condo fees | \$ _____ | | |
| Mortgages on Vacation Home | | | |
| | <u>Mortgage 1</u> | <u>Mortgage 2</u> | <u>Mortgage 3</u> |
| Description | _____ | _____ | _____ |
| Balance on Loan | \$ _____ | \$ _____ | \$ _____ |
| Years remaining on Loan | _____ | _____ | _____ |
| Monthly Payment | \$ _____ | \$ _____ | \$ _____ |
| Interest Rate | _____ % | _____ % | _____ % |

Additional Assets/Debts

| Other Asset Values | | Other Debts/Liabilities | |
|---------------------------|----------|--------------------------------|----------|
| Rental Properties | \$ _____ | Rental Property Mortgages | \$ _____ |
| Personal property: | \$ _____ | Credit card balances: | \$ _____ |
| Autos: | \$ _____ | Autos loans: | \$ _____ |
| Boats, RVs, etc: | \$ _____ | Boats, RVs, etc. loans: | \$ _____ |
| Other assets: | \$ _____ | Other loans: | \$ _____ |

What financial planning topics would you like to discuss and/or other notes that would be helpful to share with planner?

Financial Objectives:

| | <<Low High>> | | | | |
|--|---------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Reducing income Taxes | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Protection from inflation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Maximum investment growth potential | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Current spendable income from assets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Liquidity (convert assets to cash) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Note: click on a radio button that closely represents the financial objective for each of the above statements. | | | | | |

Investor Questionnaire

Your answers to these questions will be used to evaluate your target asset allocation, taking into account your investment goals and your tolerance for risk. Check only one answer to each question.

The resulting allocation is based on generally accepted investment principles. There is no guarantee, however, that any particular asset allocation or mix of funds will meet your investment objectives. All investments involve risks, and fluctuations in the financial markets and other factors may cause declines in the value of your account. You should carefully consider all of your options before investing. The Investor Questionnaire does not provide comprehensive investment or financial advice. The planner will review the suggested allocation if this is a desired outcome.

1. I plan to begin taking money from my investments in . . .

- 1 year or less
- 1 – 2 years
- 3 – 5 years
- 6 – 10 years
- 11 – 15 years
- More than 15 years

2. As I withdraw money from these investments, I plan to spend it over a period of . . .

- 2 years or less
- 3 – 5 years
- 6 – 10 years
- 11 – 15 years
- More than 15 years

3. When making a long-term investment, I plan to keep the money invested for . . .

- 1 – 2 years
- 3 – 4 years
- 5 – 6 years
- 7 – 8 years
- More than 8 years

4. From September 2008 through November 2008, stocks lost over 31%. If I owned a stock investment that lost about 31% in 3 months, I would: (If you owned stocks during this period, select the answer that corresponds to your actual behavior.)

- Sell all of the remaining investment.
- Sell a portion of the remaining investment.
- Hold onto the investment and sell nothing.
- Buy more of the investment.

Financial Planning Questionnaire for E\$Planner

5. Generally, I prefer investments with little or no fluctuation in value, and I'm willing to accept the lower return associated with these investments.

- Strongly disagree
- Disagree
- Somewhat agree
- Agree
- Strongly agree

6. During market declines, I tend to sell portions of my riskier assets and invest the money in safer assets.

- Strongly disagree
- Disagree
- Somewhat agree
- Agree
- Strongly agree

7. I would invest in a mutual fund based solely on a brief conversation with a friend, co-worker, or relative.

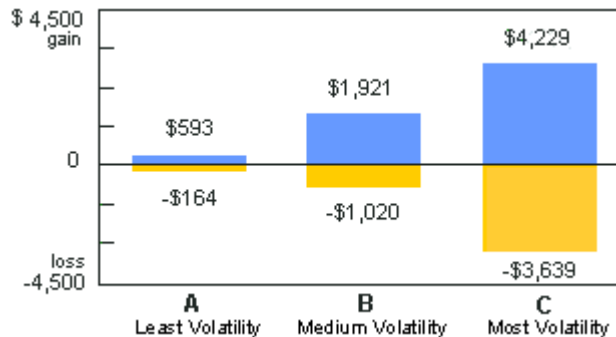
- Strongly disagree
- Disagree
- Somewhat agree
- Agree
- Strongly agree

8. From September 2008 through October 2008, bonds lost nearly 4%. If I owned a bond investment that lost almost 4% in 2 months, I would: (If you owned bonds during this period, select the answer that corresponds to your actual behavior.)

- Sell all of the remaining investment.
- Sell a portion of the remaining investment.
- Hold onto the investment and sell nothing.
- Buy more of the investment.

9. The chart below shows the greatest 1-year loss and the highest 1-year gain on 3 different hypothetical investments of \$10,000.* Given the potential gain or loss in any 1 year, I would invest my money in:

- A** (loss of \$164, gain of \$593)
- B** (loss of \$1,020, gain of \$1,921)
- C** (loss of \$3,639, gain of \$4,229)



*The maximum gain or loss on an investment is impossible to predict. The ranges shown in the chart are hypothetical and are designed solely to gauge an investor's risk tolerance.

Financial Planning Questionnaire for E\$Planner

10. My current and future income sources (for example, salary, Social Security, pension) are:

- Very unstable
- Unstable
- Somewhat stable
- Stable
- Very stable

11. When it comes to investing in stock or bond mutual funds (or individual stocks or bonds), I would describe myself as . . .

- Very inexperienced
- Somewhat inexperienced
- Somewhat experienced
- Experienced
- Very experienced

Additional Information Needed

Copies of:

Most Recent Social Security Statements with earnings (obtain at www.ssa.gov)

Most Recent Income Tax Return

Investment Statements

Retirement Account Statements (IRAs, 401(k), 403(b), 457, TSP etc.)