

PROFILE ● — ●

By learning everything we can about your financial picture before we meet, we can prepare and spend more of your time planning.

01 The Catalyst

What are your financial concerns and how would you like our work together to help?

What are you hoping to get out of our planning sessions?

02 The Basics

● Person 01:

Full Name

Pronouns Preferred Name?

Email(s)

Phone Date of Birth

● Person 02:

Full Name

Pronouns Preferred Name?

Email(s)

Phone Date of Birth

Address

Street (+ Unit/Apt) City State Zip Code

If you have a different mailing address, please add →

Family *Children and other dependents*

NAME	RELATIONSHIP	DATE OF BIRTH	RESIDES
●			
●			
●			
●			

02 The Basics

Employment

Person 01

Employer	Role/Title	Year Started	Salary	Bonus Comp
<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>

Person 02

Employer	Role/Title	Year Started	Salary	Bonus Comp
<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>

Self-Employment Income

	Field of Work:	Income	Is this income:	
Person 01	<input type="text"/>	\$ <input type="text"/>	<input type="radio"/> GROSS	<input type="radio"/> NET
Person 02	<input type="text"/>	\$ <input type="text"/>	<input type="radio"/> GROSS	<input type="radio"/> NET

Equity Compensation Income

<input type="checkbox"/> RSU	<input type="checkbox"/> ISO	<input type="checkbox"/> Unsure	IS IT:	<input type="radio"/> Public	WHO HAS THIS:	<input type="checkbox"/> Person 01
<input type="checkbox"/> NSO	<input type="checkbox"/> ESOP					<input type="radio"/> Private
					<input type="checkbox"/> Both	

Other Income → Trust Distribution Family Gifts Annuity Payment

MORE DETAILS:

03 Assets

Bank Accounts

Bank	Type	Owner	Balance
●			\$
●			\$
●			\$
●			\$
●			\$
●			\$
●			\$
●			\$

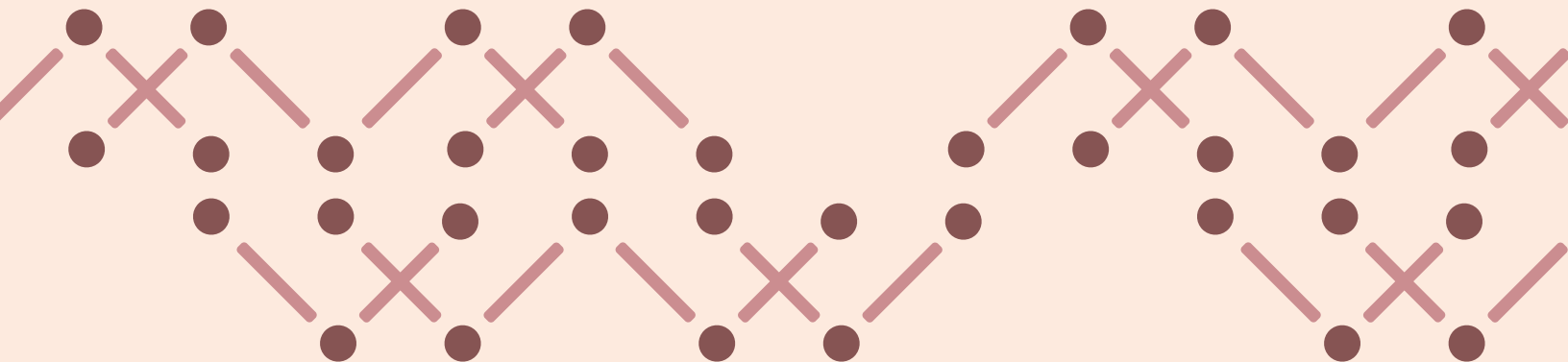
Certificates Of Deposit (CDs)

Bank	Owner	Balance
●		\$
●		\$
●		\$
●		\$

03 **Assets**

Retirement + Investments Accounts

Financial Institution	Account Type	Owner	Balance
●			\$
●			\$
●			\$
●			\$
●			\$
●			\$
●			\$
●			\$
●			\$
●			\$



03 Assets**Real Estate**

DO YOU: Rent → Monthly Rent: \$

Own

**Main Residence**

City State Purchase Year Purchase Price \$

Other Properties

City State Purchase Year Purchase Price \$

IS THIS: Investment Property

Second Home

City State Purchase Year Purchase Price \$

IS THIS: Investment Property

Second Home

04 Debt

Mortgage + Home Loan Details

01

Lender	Year Started	Current Balance	Interest Rate
<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	<input type="text"/> %
TYPE → <input type="checkbox"/> Mortgage <input type="checkbox"/> HELOC <input type="checkbox"/> Something Else			

02

Lender	Year Started	Current Balance	Interest Rate
<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	<input type="text"/> %
TYPE → <input type="checkbox"/> Mortgage <input type="checkbox"/> HELOC <input type="checkbox"/> Something Else			

03

Lender	Year Started	Current Balance	Interest Rate
<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	<input type="text"/> %
TYPE → <input type="checkbox"/> Mortgage <input type="checkbox"/> HELOC <input type="checkbox"/> Something Else			

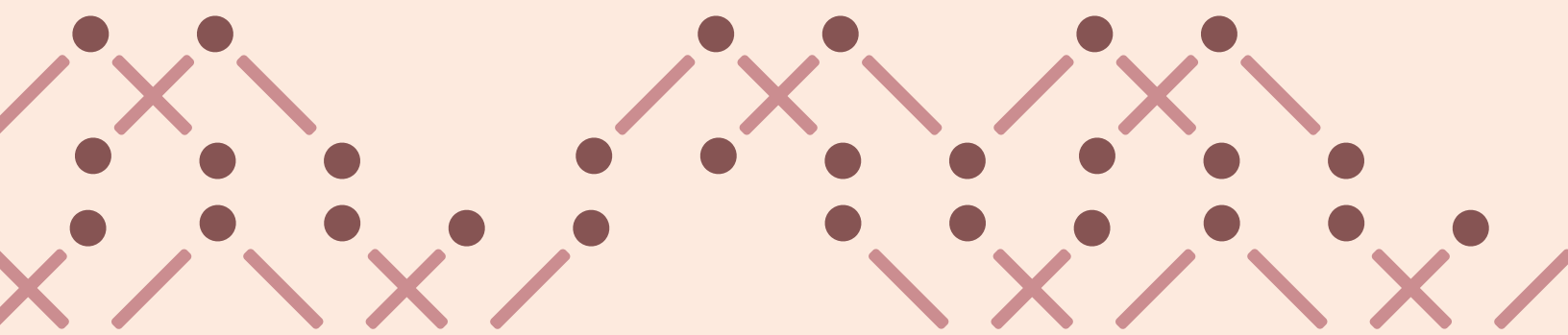
04 Debt

Student loans, vehicle, personal, business, medical, etc.

LENDER	BALANCE	MONTHLY PAYMENT	INTEREST RATE
●	\$	\$	%
●	\$	\$	%
●	\$	\$	%
●	\$	\$	%
●	\$	\$	%
●	\$	\$	%
●	\$	\$	%
●	\$	\$	%

Have you been a victim of identity theft in the past 5 years? YES NO

NEXT → *Credit Cards*



04 Debt

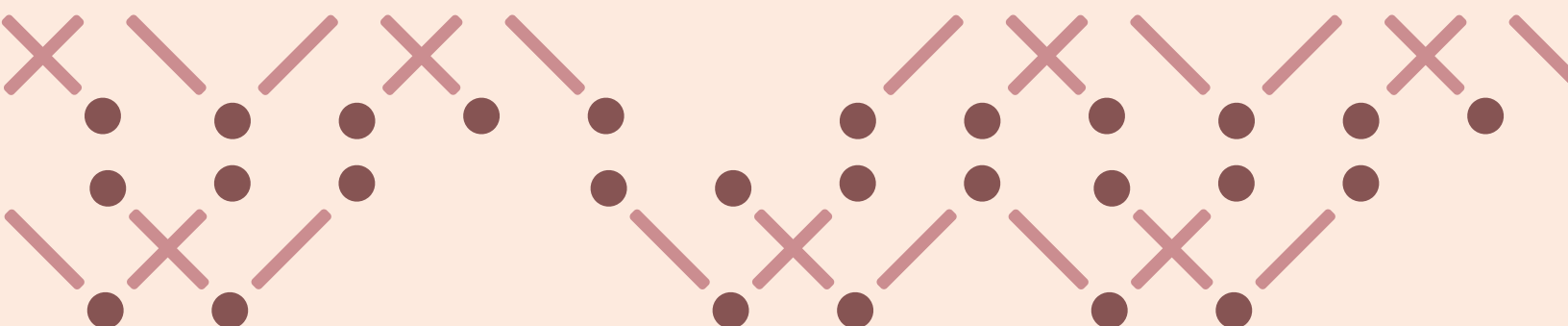
DO YOU PAY OFF CREDIT CARDS IN FULL EACH MONTH?

YES → skip to next section

OR

NO

CREDIT CARD	BALANCE	DEBT OWNER	PAYING:		
			MINIMUM	OR	OTHER AMOUNT
●	\$		<input type="checkbox"/>	OR	\$
●	\$		<input type="checkbox"/>	OR	\$
●	\$		<input type="checkbox"/>	OR	\$
●	\$		<input type="checkbox"/>	OR	\$
●	\$		<input type="checkbox"/>	OR	\$
●	\$		<input type="checkbox"/>	OR	\$
●	\$		<input type="checkbox"/>	OR	\$
●	\$		<input type="checkbox"/>	OR	\$



05 Savings + Cash Flow

WHAT DO YOU ESTIMATE ARE YOUR MONTHLY EXPENSES?

\$

HOW CONFIDENT ARE YOU IN THIS FIGURE?



VERY
LOW



VERY
HIGH

DO YOU CURRENTLY HAVE A PRACTICE, OR USE ANY TOOLS, FOR TRACKING YOUR SPENDING OR BUDGET?

HOW OFTEN ARE YOU ADDING TO SAVINGS OR INVESTMENT ACCOUNTS (NON-RETIREMENT)?

- ON A REGULAR BASIS →
- WHEN I CAN
- RARELY

WHAT ADDITIONAL AREAS OF SPENDING DO YOU NEED TO PLAN FOR?

(health care, education, real estate, home improvement, travel, etc)

05 Retirement Savings

● Person 01

I AM ACTIVELY CONTRIBUTING TO:

401(K) / 403(B)

TRADITIONAL IRA

SEP IRA

ROTH 401(K) / 403(B)

ROTH IRA

SIMPLE IRA

SOLO 401(K)

↓
HOW MUCH?

I TRY TO MAX IT OUT

↓
HOW MUCH?

I TRY TO MAX IT OUT

↓
HOW MUCH?

I TRY TO MAX IT OUT

OR

%

OR

OR

● Person 02

I AM ACTIVELY CONTRIBUTING TO:

401(K) / 403(B)

TRADITIONAL IRA

SEP IRA

ROTH 401(K) / 403(B)

ROTH IRA

SIMPLE IRA

SOLO 401(K)

↓
HOW MUCH?

I TRY TO MAX IT OUT

↓
HOW MUCH?

I TRY TO MAX IT OUT

↓
HOW MUCH?

I TRY TO MAX IT OUT

OR

%

OR

OR

06 Retirement Income

IDEALLY, WHEN WOULD YOU LIKE TO TRANSITION YOUR WORK TOWARD RETIREMENT?

Person 01

Already Retired
 ↳ Started Social Security?
 Yes No

ASAP

Specific Age:

I'd like to continue working, transitioning to part-time or different compensation

I plan to keep working, indefinitely

Person 02

Already Retired
 ↳ Started Social Security?
 Yes No

ASAP

Specific Age:

I'd like to continue working, transitioning to part-time or different compensation

I plan to keep working, indefinitely

Defined Benefit Pension Plan

Person 01

I RECEIVE A MONTHLY PENSION BENEFIT →

I PARTICIPATE IN A PENSION PLAN AT WORK

Person 02

I RECEIVE A MONTHLY PENSION BENEFIT →

I PARTICIPATE IN A PENSION PLAN AT WORK

07 Insurance

HOW ARE YOU COVERED FOR THE FOLLOWING:

HEALTH

	THROUGH WORK	I BUY MY OWN	THROUGH SPOUSE	MEDICARE/MEDICAID	NONE
● Person 01 →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
● Person 02 →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

LIFE

	THROUGH WORK	I BUY MY OWN		THROUGH SPOUSE	NONE
		TERM	WHOLE LIFE		
● Person 01 →	<input type="checkbox"/>	<input type="checkbox"/>	OR <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
● Person 02 →	<input type="checkbox"/>	<input type="checkbox"/>	OR <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

DISABILITY

	THROUGH WORK	I BUY MY OWN	NONE
● Person 01 →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
● Person 02 →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

WHEN WAS THE LAST TIME YOU REVIEWED YOUR HOME/AUTO POLICIES?

WITHIN THE LAST 2 YEARS

2-5 YEARS

MORE THAN 5 YEARS

DO YOU HAVE ANY OF THE FOLLOWING:

RENTERS

PET INSURANCE

PROFESSIONAL LIABILITY

LONG-TERM CARE

UMBRELLA

OTHER TYPE OF LIFE INSURANCE

08 Taxes + Estate Planning

MY TAX RETURN IS PREPARED BY:

ME

A PROFESSIONAL →

PLEASE INDICATE IF YOU HAVE
CREATED ANY OF THESE
DOCUMENTS:

WILL

LIVING TRUST

HEALTH CARE POWER OF ATTORNEY

FINANCIAL POWER OF ATTORNEY

APPROXIMATELY WHEN WERE
THESE LAST UPDATED?

HOW ARE THE RELATIONSHIPS
WITH THE OTHER FINANCIAL
PROFESSIONALS IN YOUR LIFE?

Tax preparer, investment advisor, attorney, etc

09 Risk Tolerance

Please respond to the questions below.

We'd love to hear from household members if applicable.

01 **02**

How experienced do you consider yourself regarding investing?

LIMITED EXPERIENCE

SOME:
I invest through both workplace plans and a robo advisor or with an investment advisor.

A GOOD BIT:
I've chosen my own mutual funds or ETFs.

A LOT:
I feel comfortable picking investments myself.

ADVANCED:
I have experience picking single stocks, private investments, real estate, etc.

01 **02**

When do you expect to begin withdrawing from your investment accounts?

I already do

Soon—in the next 0 - 5 years

Fairly soon—in the next 5-10 years

More than 10 years from now

More than 20 years from now

09 Risk Tolerance

01

02

Which statement do you most agree with?

My goal is to minimize swings in my portfolio's value, even if growth does not keep pace with inflation.

My goal is for growth to at least keep pace with inflation, and I can handle modest swings in my portfolio's value.

My goal is for growth to exceed inflation, with the risk of modest to larger swings in my portfolio's value.

My goal is for growth to significantly exceed inflation, with the risk of larger swings in my portfolio's value.

01

02

When you think of the word "risk" in a financial context, which of the following words come to mind?

Risk of loss

Risk of not earning enough

Risk of interest rates rising (increasing the cost of borrowing)

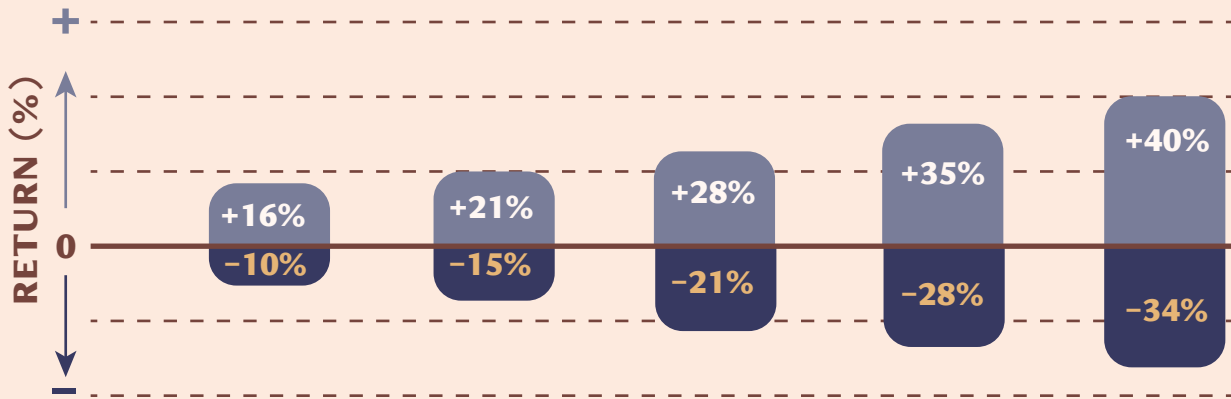
Risk of interest rates falling (reducing the earning on savings)

Risk of uncertainty in how values of investments can change

09 Risk Tolerance

Investments carrying a higher risk come with the potential for achieving more gains, but also a higher possibility of incurring considerable losses.

Which of the sample portfolios would be most attractive to you?



01 →

02 →

01 ↓

02 ↓

You turn on the news and hear that a major geopolitical event has happened. It isn't clear when conditions will improve. The broadcaster says the S&P 500 Index dropped 10% as a result.

What do you do?

- Nothing/Change the channel
- Sell my investments that were hit the hardest.
- Sell everything and keep my money in cash until the markets recover.
- Invest more money to take advantage of the dip.

09 Risk Tolerance

01

02

Are you interested in aligning your investments with particular social values?

Yes, this is very important to me.

This is important to me. It's not my main concern, but it's up there.

I'm interested, but a higher priority for me is long-term growth potential.

I'd like to learn more about this.

This is not a focus for me.

01

02

Have you ever made an investment decision in the past based on current events?

No

Yes → *If YES, please tell us more:*

Are there any news sources, podcasts, books, influencers, etc. that you rely on to learn about investing or investment news?

01 →

02 →