

COMPREHENSIVE QUESTIONNAIRE

Personal and Confidential

Financial Advisor: Myers Capital Management

Next Appointment Date: _____

Personal Data

Personal Information

	Client	Spouse
Full Name	_____	_____
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female
Social Security #	_____	_____
Date of Birth	____ / ____ / ____	____ / ____ / ____
Marital Status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widowed	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widowed
Email Address	_____	_____
Employment Status	<input type="checkbox"/> Retired <input type="checkbox"/> Employed <input type="checkbox"/> Business Owner <input type="checkbox"/> Homemaker <input type="checkbox"/> Not Currently Employed If a homemaker or unemployed and you plan on working in the future, please indicate so by putting the years you plan on working and your expected annual income in today's dollars.... From _____ to _____ making \$_____ per year	<input type="checkbox"/> Retired <input type="checkbox"/> Employed <input type="checkbox"/> Business Owner <input type="checkbox"/> Homemaker <input type="checkbox"/> Not Currently Employed If a homemaker or unemployed and you plan on working in the future, please indicate so by putting the years you plan on working and your expected annual income in today's dollars.... From _____ to _____ making \$_____ per year
Employment Income	\$ _____	\$ _____
Other Pre-Retirement Income <i>(non investment)</i>	\$ _____	\$ _____
Citizenship	_____	_____
State of Residence	_____	_____

Enter children, grandchildren, other dependents or any other person whom you will give a Gift, designate as a Beneficiary or assign ownership of an insurance policy. Note: Date of Birth is only required for Children, Grandchildren and Other Dependents.

Name	Date of Birth	Relationship
_____	____ / ____ / ____	<input type="checkbox"/> Child <input type="checkbox"/> Grandchild <input type="checkbox"/> Other Dependent <input type="checkbox"/> Beneficiary/Donee <input type="checkbox"/> Charity <input type="checkbox"/> Trust
_____	____ / ____ / ____	<input type="checkbox"/> Child <input type="checkbox"/> Grandchild <input type="checkbox"/> Other Dependent <input type="checkbox"/> Beneficiary/Donee <input type="checkbox"/> Charity <input type="checkbox"/> Trust
_____	____ / ____ / ____	<input type="checkbox"/> Child <input type="checkbox"/> Grandchild <input type="checkbox"/> Other Dependent <input type="checkbox"/> Beneficiary/Donee <input type="checkbox"/> Charity <input type="checkbox"/> Trust
_____	____ / ____ / ____	<input type="checkbox"/> Child <input type="checkbox"/> Grandchild <input type="checkbox"/> Other Dependent <input type="checkbox"/> Beneficiary/Donee <input type="checkbox"/> Charity <input type="checkbox"/> Trust

Personal Data

Data and Documentation Checklist

Note: Check the items applicable to your situation and bring all pertinent information for all family members to the fact-gathering interview. Since the requested documentation will assist you in completing the remainder of this questionnaire, I recommend that you gather this information first.

NEED

OBTAINED

EMPLOYMENT INFORMATION

- | | | |
|-------|-------|---|
| _____ | _____ | One month's <u>detailed</u> paycheck stubs |
| _____ | _____ | Employee Benefits handbooks/statements (need a description of all benefits available, their cost to you, whether your cost is pre or post tax, and which you have selected) |
| _____ | _____ | Current Retirement Savings Plan Information: For defined benefit pension, need pension formula and years of service. For 401k and similar plans, need employer contribution formula (for example: employer matches 25% of the first 3% on my contributions and an additional 2%). Some of the above information may be available in a document called the Summary Plan Description. |
| _____ | _____ | Any booklets and/or statements for vested retirement plans from former employers |

INDIVIDUAL INSURANCE POLICIES

(Including policies and recent premium, loan, and dividend statements)

- | | | |
|-------|-------|--|
| _____ | _____ | Life |
| _____ | _____ | Disability |
| _____ | _____ | Annuities |
| _____ | _____ | Hospitalization/medical |
| _____ | _____ | Homeowners/renters (Declarations Page which lists coverage and cost) |
| _____ | _____ | Automobile (Declarations Page which lists coverage and cost) |
| _____ | _____ | Other property |
| _____ | _____ | Liability Umbrella |

INVESTMENT/ASSET RECORDS

Most recent account statements for...

- | | | |
|-------|-------|---|
| _____ | _____ | Bank accounts and CDs |
| _____ | _____ | Brokerage accounts, Stock and Bond Certificates |
| _____ | _____ | Mutual funds |
| _____ | _____ | IRA and other Non-Employer retirement accounts |
| _____ | _____ | Employer retirement account statement (pension, 401k, 403b, SIMPLE, SEP, etc) |
| _____ | _____ | Savings bonds |
| _____ | _____ | Transaction confirmations/correspondence, K1's |

Personal Data

NEED

OBTAINED

- | | | |
|-------|-------|---|
| _____ | _____ | Other investment information and values for sellable assets such as art, jewelry, collections, etc, which you intend to sell in the future for cash purposes |
| _____ | _____ | Restricted Stock either owned currently or promised as future compensation. Please provide details of share numbers, grant dates, stock name, and vesting schedules. |
| _____ | _____ | Stock Options already granted or promised as future compensation. Please provide stock name, grant name, grant date, strike price, expiration date, shares granted, option type (ISO or non-qualified), vesting schedules, and number of options already exercised for each grant received. |

TAX RETURNS

- | | | |
|-------|-------|---|
| _____ | _____ | Federal and state income tax for last 3 years |
| _____ | _____ | Federal gift tax returns |
| _____ | _____ | Details on quarterly estimates |
| _____ | _____ | Income/deduction estimated for current year if different from prior years |

BUSINESS OWNERS

- | | | |
|-------|-------|--|
| _____ | _____ | Copies of corporate returns, federal and state |
| _____ | _____ | Copies of buy and sell, stock redemption, split dollar, and other agreements |
| _____ | _____ | Value of business and stock and ownership % |
| _____ | _____ | Qualified retirement deferred compensation plan(s), documents and statements |
| _____ | _____ | Business insurance policies |

GENERAL

- | | | |
|-------|-------|---|
| _____ | _____ | Most recent Social Security Statement/s |
| _____ | _____ | Copy of will/s and any other legal documents such as power of attorney, trusts, etc. |
| _____ | _____ | Copy of most recent loan statements (loans, mortgages, credit cards). For all non credit card loans also provide start date, original loan amount, interest rate, monthly payment (actual loan amount and if any additional principle is being paid) and total years of loan. |

As you gather documents and fill out forms and questionnaires online, remember that the quality of the financial plan we craft for you is dependent upon the completeness and accuracy of the information you provide us.

Cash Flow Worksheet

INCOME	MONTHLY	ANNUAL
Describe:	\$	\$
Describe:	\$	\$
Describe:	\$	\$
Total Income:	\$	\$
TAXES		
Federal Income Tax	\$	\$
Social Security	\$	\$
State and Local Income Taxes	\$	\$
Real Estate Taxes	\$	\$
Total Taxes	\$	\$
INSURANCE		
Employment Benefits	\$	\$
Life, Health, and Disability	\$	\$
Auto, Home, and Liability	\$	\$
Total Insurance	\$	\$
SAVINGS AND INVESTMENTS		
Retirement Plans	\$	\$
Investments	\$	\$
Savings	\$	\$
Total Savings and Investment	\$	\$
STANDARD OF LIVING		
Mortgage or Rent	\$	\$
Child Care, Child Support, or Alimony	\$	\$
Education	\$	\$
Groceries	\$	\$

Cash Flow Worksheet

Utilities	\$	\$
Telephone/Internet/Cable	\$	\$
Total Loan Payments (break down below)	\$	\$
Clothing and Dry Cleaning	\$	\$
Medical, Prescriptions, and Dental	\$	\$
Automobile Repair and Maintenance	\$	\$
Home Repair, Maintenance, or Improvements	\$	\$
Meals Out and Entertainment	\$	\$
Gas and Public Transportation	\$	\$
Gifts (Holidays, Birthdays, Occasions)	\$	\$
Vacations and Travel	\$	\$
Charitable Donations	\$	\$
Personal Care	\$	\$
Financial Planning and Tax Preparation	\$	\$
Household and Miscellaneous	\$	\$
Total Standard of Living	\$	\$
TOTAL EXPENSES (taxes + insurance + savings+standard of living)	\$	\$
INCOME MINUS EXPENSES If total expenses exceeds income, lower expenses until income can be increased to pay for expenses. Be creative.	\$	

Let's Talk About Your Goals

Still Have College?

If you have a goal for saving for college expenses,

- Enter all College goals regardless of whether they occur before or after retirement
- Enter as many College Goals as you need for kids, grandkids, or yourself
- Enter multiple college goals for one person (graduate and undergraduate)

If you plan to pay all or part of college education or some other education program for yourself, a child, or grandchild, make sure you have a goal for it.

Importance High to Low 10 to 1	Name and Relationship	Date of Birth	Number of Years	Amount Needed	
				Ideal*	Acceptable
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$
				\$	\$

If you want the ideal amount that you fund to be one of the following, plus indicate.

- A. Average cost: Average All
 4-year: Public In-State Public Out-Of-State Private
 2-year: Public In-State Public Out-Of-State Private
- B. Name of College: _____ State in which the college is located: _____
 Include: (Check which to include)
 Tuition Out-of-State fees Room & Board Books & Supplies Other Costs

If using average cost or a particular college cost, what percentage of this cost do you want to fund? _____%

If you prefer, you can indicate the acceptable amount above not as a dollar figure, but as the same as the ideal or a percentage of the ideal.

Let's Talk About Your Goals

What's Happening Before Retirement?

If you plan to use money from your Investment Assets (i.e. savings and investment accounts) to pay for any purchases or activities before you retire, you should create a separate Goal for each one.

- Look at the 14 Lifestyle Goal pictures on the following pages. Which ones would you like to have as Goals?
- DO create a Goal for expenses that will be paid (fully or partially) from Investment Assets, e.g. renovating the kitchen, or taking that BIG trip to Europe.
- DO NOT create Goals for any expense that is paid entirely from your income (like club dues or annual vacations).

Now, it's on to Retirement...

Retirement Lifestyle Goals – Begin With the Fun Stuff

Add a Lifestyle Goal for each significant purchase or activity that will make your Retirement more satisfying and enjoyable. Lifestyle Goals are above and beyond what you need to pay the basic expenses of day-to-day living, which will be covered by your Retirement Living Expense Goal in the next section.

- Go through the 14 Lifestyle Goal pictures once again. Which ones would make your Retirement more enjoyable and satisfying?
- Dream a little (or a lot). Create all the Goals you'd like, even if you're not sure you can afford them.
- Be sure to consider Cars, Travel and Gifts, which are usually important Goals during Retirement.

You can never have too many Goals. Creating more individual Lifestyle Goals and rating them by importance can help you make better financial decisions and increase the overall satisfaction you obtain from your money during the rest of your life. You may even discover that you can do more with your money than you ever expected.

Lifestyle Goals - Before & During Retirement



Travel - One Special Trip and/or Recurring Travel Fund

Is there one special place calling your name? Or do you want to travel every year? Create travel Goals for one special trip or for a recurring travel fund.

Importance High Low 10 ↔ 1	Description	Start		Amount		How Often	How Many Times
		Year	At Retirement	Ideal	Acceptable		
7	Annual Travel Fund		<input checked="" type="checkbox"/>	\$12,000	\$8,000	Yearly	20
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				



Car

Lexus? Chevy? One of each? Is it time for a convertible or sports car? To be sure you'll be driving what you want, add separate Goals for buying cars during retirement.

Importance High Low 10 ↔ 1	Description	Start		Amount		How Often	How Many Times
		Year	At Retirement	Ideal	Acceptable		
8	John's SUV		<input checked="" type="checkbox"/>	\$42,000	\$30,000	Every 4 years	6
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				



Major Purchase

You've always wanted a _____? A boat? A motor home? A hot tub? A snowmobile? Fill in the blank, and make it a Goal.

Importance High Low 10 ↔ 1	Description	Start		Amount		How Often	How Many Times
		Year	At Retirement	Ideal	Acceptable		
4	Ski Boat	2010	<input type="checkbox"/>	\$40,000	\$20,000	Yearly	1
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				

Lifestyle Goals - Before & During Retirement



Health Care

If Health Care is particularly important to you, use this Goal to separate its costs from your basic living expenses.

Importance High Low 10 ↔ 1	Description	Start		Amount		How Often	How Many Times
		Year	At Retirement	Ideal	Acceptable		
9	Extra Health Expense	2025	<input type="checkbox"/>	\$20,000	\$10,000	Yearly	15
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				



New Home

Need a down payment for your first home? Are you ready to trade-up to get more space for a growing family? Or, maybe it's time for that vacation home you've always wanted. A new home is always a good Goal.

Importance High Low 10 ↔ 1	Description	Start		Amount	
		Year	At Retirement	Ideal	Acceptable
7	Mountain Condo		<input checked="" type="checkbox"/>	\$350,000	\$250,000
			<input type="checkbox"/>		
			<input type="checkbox"/>		
			<input type="checkbox"/>		



Major Home Improvement

Do you have big plans for "this old house?" Do you plan to live in it for a long time? Create Goals for major home improvements and repairs.

Importance High Low 10 ↔ 1	Description	Start		Amount		How Often	How Many Times
		Year	At Retirement	Ideal	Acceptable		
5	Renovate Kitchen	2010	<input type="checkbox"/>	\$60,000	\$40,000	Once	1
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				

Lifestyle Goals - Before & During Retirement



Wedding

Who's getting married? Want to help pay for the wedding? If you plan to pay for all or part of the cost of a wedding, create a Goal and put yourself at the head table.

Importance High Low 10 ↔ 1	Name & Relationship	Year	Amount	
			Ideal	Acceptable
7	Susan's Wedding	2014	\$35,000	\$22,000



Celebration

What special events do you look forward to celebrating? Bar Mitzvah, Bat Mitzvah, Sweet 16, family reunion, anniversary, retirement, or engagement party. A celebration is a great Goal.

Importance High Low 10 ↔ 1	Description	Start		Amount		How Often	How Many Times
		Year	At Retirement	Ideal	Acceptable		
5	50th Anniversary	2012	<input type="checkbox"/>	\$35,000	\$20,000	Yearly	1
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				



Gifts - Donations - Help

Is it time to give back? Or maybe your parents or kids need help. Use Gift Goals for anything from holiday presents to cash gifts for family members or organizations.

Importance High Low 10 ↔ 1	Description	Start		Amount		How Often	How Many Times
		Year	At Retirement	Ideal	Acceptable		
6	Gifts for Tim	2015	<input type="checkbox"/>	\$20,000	\$10,000	Yearly	5
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				

Lifestyle Goals - Before & During Retirement



Provide Care for Someone

If you need money to take care of someone you love (e.g. your mother in a nursing home, or a special-needs child), make sure you have a Goal to pay for it.

Importance High Low 10 ↔ 1	Description	Start		Amount		How Often	How Many Times
		Year	At Retirement	Ideal	Acceptable		
8	Care for Mom	2009	<input type="checkbox"/>	\$45,000	\$45,000	Yearly	5
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				



Start Business

If you plan to start a business, buy a business, or buy a franchise, make it a Goal and make it a success.

Importance High Low 10 ↔ 1	Description	Start		Amount	
		Year	At Retirement	Ideal	Acceptable
2	Start Gift Shop		<input checked="" type="checkbox"/>	\$40,000	\$28,000
			<input type="checkbox"/>		
			<input type="checkbox"/>		
			<input type="checkbox"/>		



Private School

Do you want to give your kids or grand kids the benefit of a private school education? Make it a Goal and get them started right.

Importance High Low 10 ↔ 1	Who is Going to School?	Start Year	Number of Years	Amount	
				Ideal	Acceptable
4	Mary - Granddaughter	2014	4	\$15,000	\$10,000

Lifestyle Goals - Before & During Retirement



Leave Bequest

Do you want to leave something for the kids? Or “see” your name on that new building? Create bequests for the money you’d like to leave to family, friends, charities and institutions.

Importance High Low 10 ↔ 1	Description / Recipient	Amount	
		Ideal	Acceptable
2	Bequest to My College	\$50,000	\$0



Anything Else

If it’s expensive or important and doesn’t have its own picture – make it an Anything Else Goal.

Importance High Low 10 ↔ 1	Description	Start		Amount		How Often	How Many Times
		Year	At Retirement	Ideal	Acceptable		
1	Club Membership		<input checked="" type="checkbox"/>	\$10,000	\$10,000	Yearly	15
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				

Retirement Living Expense Goal

Now that you've identified your Retirement Lifestyle Goals, it's time to create a Goal for your Retirement Living Expenses.



Retirement Living Expenses

Everyone must pay the bills. This Goal is for your basic day-to-day living expenses (e.g. food, clothes, utilities, etc.). By making your Retirement Living Expense amount a separate Goal, you can see exactly what it takes to “pay-the-bills” for the rest of your life. This should make your Retirement more secure and leave you free to enjoy spending money to fulfill your Retirement Lifestyle Goals.

Importance	Ideal Amount	Acceptable Amount
10	\$_____ per year	\$_____ per year

Be sure you don't “double count” any expenses. For example, if you entered a separate Goal for a car, don't include the purchase cost of this car in your Living Expenses, but do include all operating expenses (e.g. gas, taxes, maintenance).

Notes

Estate Planning

Estate Planning

Do you have a living trust or will which establishes your estate distribution wishes? Yes No

If yes, do these documents reflect your current wishes? Yes No NA

Please describe below how you want your assets distributed (if married, include after one spouse dies, and then after both have died). Please include each beneficiary and amounts or percentages left to each. Beneficiaries can be individuals or organizations.

If you have minor children, have you selected adequate guardians? Yes No

Have you designated that trusts are set up for minor children if one or both parents die? Yes No

Have you done any estate planning to potentially lower estate taxes and other estate expenses? Yes No

If you could lower your taxes at death by executing certain documents now, would you be willing to spend money now to execute these documents to save taxes for your heirs? Yes No

Life Insurance Needs Analysis

Part of an estate plan for a working family is making sure that if either spouse dies that there is enough capital to make sure the surviving spouse and any children will be provide for.

Please fill out the details on the next page outlining the expenses to be paid at death of either spouse (assume all debts are to be paid for this analysis), the income the survivors will need to live, and the income and assets available to the survivors.

Estate Planning

If Client Dies		If Spouse Dies
\$ _____	Existing Life Insurance to Include Additional Death Benefit	\$ _____
\$ _____		\$ _____
	Amounts to be Paid at Death	
\$ _____	Liabilities	\$ _____
\$ _____	Final Expenses	\$ _____
\$ _____	Bequests	\$ _____
\$ _____	Other Payments	\$ _____
	Living Expenses for Survivors	
\$ _____	Current Annual Amount (after tax)	\$ _____
_____	Cover Expense until Spouse is this Age	_____
\$ _____	Future Annual Amount (after tax)	\$ _____
_____	Cover Expense until Spouse is this Age <i>(Life Expectancy)</i>	_____

Financial Goals If you die, there might be Goals in your Plan that you won't want to fund. Deleting these would reduce the amount of Life Insurance you need. List any goals that you wouldn't want to fund if your spouse died.

If Clients Dies		If Spouse Dies
\$ _____	Enter the total after-tax amount of assets that would be sold, if any, at death that does not include life insurance, retirement accounts, and savings/investment accounts.	\$ _____

Other Income (not surviving spouse income)

	From Now Until Retirement	
\$ _____	Annual Other Income Amount <i>(current dollars, pre tax)</i>	\$ _____
<input type="checkbox"/> No <input type="checkbox"/> Yes	Will this amount inflate?	<input type="checkbox"/> No <input type="checkbox"/> Yes

After Retirement

Check the types of your Retirement Income that would continue at your death.

Pension Annuity Income Rental Income Royalties Other

Spouse Employment

If your spouse is not currently employed and would seek employment if you died, enter the following: Start Year: _____ Stop Year: _____

Annual Income: \$ _____ Inflation? No Yes

Dependents List any dependents that would NOT be eligible for Social Security Survivor benefits:

Risk Tolerance

Please fill out the Finametrica Pro risk questionnaire online by going to the Client Center on www.myerscap.com and under Account Access select Money Guide Pro. Log with your USER ID _____ and your password _____ and click "Complete Your Questionnaire" link. If married, both spouses should complete form.

I/We have been investing in stocks, bonds, mutual funds, or other types of investments for ____ years.

I/We have ____ dependents and expect to have ____ more in the future. If you will have future dependents, please elaborate.

I/We do not expect to have to take care of parents in the future. True False
If false, please elaborate.

I/We have adequate cash flow to meet my/our current expenses and expect this to continue. True False

I/We have adequate funds in savings in case of emergencies so I/we will not be forced to sell investments at a potentially bad time. True False

For me/us, which is more important (circle one)?

1. Feeling comfortable about the level of risk in my/our portfolio
2. Having the potential of earning higher returns with a level of discomfort about the volatility in my/our portfolio to increase the probability of reaching my/our financial goals.

The Finametrica Personal Risk Profile that you will fill out will help us understand your overall thinking about risk in your life. However, we have found that sometimes people are willing to take more investment risk than their scores may indicate if this enhances their ability to reach their financial goals. Recognizing more risk means more potential for greater short term loss of principle but that historically have often lead to higher returns over time, what would be the maximum amount of risk you would be willing to take on your long term investment portfolio based on the volatility information below? Risk Level _____

	Allocation	Stock 1Yr	Worst Annualized Returns 1973-2005	
			3YR	5YR
1. Capital Preservation:	20%	-13.35%	2.7%	4.8%
2. Balanced Income:	40%	-20.51%	-1.45%	2.91%
3. Balanced:	60%	-27.22%	-6.99%	.33%
4. Balanced Growth:	75%	-32.11%	-10.94%	-1.58%
5. Growth:	90%	-36.74%	-14.81%	-3.53%
6. Aggressive Growth:	98%	-38.80%	-17.02%	-4.77%

What Average Annual Rate of Return* do you want to earn on your portfolio to reach your financial goals? Please be realistic! *(Enter a number between 5% and 14%.)*

Average Annual Rate of Return* You Want: _____ %

* This rate of return is hypothetical and used for comparison purposes only. It is not related to any specific investment and there is no guarantee you will actually receive this rate.

Other Assets

Personal and Business Assets (homes, Business Assets, Real Estate, Collections, etc.)

Owner: Client Spouse Joint Custodial

If Joint, what kind? Survivorship Common Entirety Community Property

Description: PERSONAL RESIDENCE Current Value: \$ _____

Will the value of this asset increase each year? _____%

Do you intend to sell this asset to help fund your Goals? No Yes (If Yes, complete the remaining items)

Year to Sell _____ Future Value (after-tax) \$ _____

Assign to Goal(s): (Check one)

- One Goal: _____ Priority Order Leave to Estate Not Used in Plan
 Multiple Goals: _____

Owner: Client Spouse Joint Custodial

If Joint, what kind? Survivorship Common Entirety Community Property

Description: _____ Current Value: \$ _____

Will the value of this asset increase each year? _____%

Do you intend to sell this asset to help fund your Goals? No Yes (If Yes, complete the remaining items)

Year to Sell _____ Future Value (after-tax) \$ _____

Assign to Goal(s): (Check one)

- One Goal: _____ Priority Order Leave to Estate Not Used in Plan
 Multiple Goals: _____

Owner: Client Spouse Joint Custodial

If Joint, what kind? Survivorship Common Entirety Community Property

Description: _____ Current Value: \$ _____

Will the value of this asset increase each year? _____%

Do you intend to sell this asset to help fund your Goals? No Yes (If Yes, complete the remaining items)

Year to Sell _____ Future Value (after-tax) \$ _____

Assign to Goal(s): (Check one)

- One Goal: _____ Priority Order Leave to Estate Not Used in Plan
 Multiple Goals: _____

Future Assets

Please describe the timing and amount of any future inheritances, gifts, or settlements that you expect to receive and whether you want to count on these for your long term planning.

Description of Future Asset	Expected Amount	Expected Receipt Time	Depend on Asset
	\$		Y N
	\$		Y N
	\$		Y N
	\$		Y N