

Today's Date: \_\_\_\_\_

**Sterling Wealth Advisors, Inc.**  
**Personal Financial Planning Profile**

*The following information is strictly confidential and will not be disclosed to anyone without your consent.*

**General Information**

Client's Name: \_\_\_\_\_ Co-Client's Name: \_\_\_\_\_  
Birth date: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
Social Sec. #: \_\_\_\_\_ Social Sec. #: \_\_\_\_\_  
Last name on SS Card: \_\_\_\_\_ Last Name on SS Card: \_\_\_\_\_  
Town and State Born: \_\_\_\_\_ Town and State Born: \_\_\_\_\_  
High School Attended: \_\_\_\_\_ High School Attended: \_\_\_\_\_  
Country of Citizenship: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_  
Address: \_\_\_\_\_  
County: \_\_\_\_\_  
Phone #s: \_\_\_\_\_ (home) \_\_\_\_\_ (work/Client) \_\_\_\_\_ (work/Co-Client)  
Fax #: \_\_\_\_\_ e-mail: \_\_\_\_\_ other: \_\_\_\_\_  
What is the best way for us to communicate with you: Phone \_\_\_\_ Email \_\_\_\_ Fax \_\_\_\_ Mail \_\_\_\_  
Which is your preferred phone #: Home \_\_\_\_ Cell \_\_\_\_ Business \_\_\_\_ Other \_\_\_\_  
Job Title/Work Address: (Client) \_\_\_\_\_  
Job Title/Work Address: (Co-Client) \_\_\_\_\_  
If you own a business, please provide the Federal EIN: \_\_\_\_\_  
Please choose one: Single \_\_\_\_ Married \_\_\_\_ Divorced \_\_\_\_ Widowed \_\_\_\_ Domestic Partner \_\_\_\_

**Children:**

Name	Address	Birthdate	Social Sec. #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Client: Prior Marriages #\_\_\_\_ Children from: \_\_\_\_\_  
Co-Client: Prior Marriages #\_\_\_\_ Children from: \_\_\_\_\_

**Grandchildren:**

Number of Grandchildren: \_\_\_\_\_

Grandchildren's Ages: \_\_\_\_\_

Are your parents living? Please check below if yes:

**Client:** Mother \_\_\_\_\_ Father \_\_\_\_\_      **Co-Client:** Mother \_\_\_\_\_ Father \_\_\_\_\_

**Client**

**Co-Client**

Please check:  Empl    Self-Empl    Retired      :  Empl    Self-Empl    Retired

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

**Financial Planning Priorities and Goals**

What are your three most important financial concerns or goals?

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

**Assets**      *Please estimate the value of the following:*

Checking Accounts \_\_\_\_\_

Retirement Accounts \_\_\_\_\_  
(includes IRAs, 401(k)s, 403(b)s, annuities, etc.)

Savings Accounts \_\_\_\_\_

Your Home \_\_\_\_\_

CDs, Savings Bonds \_\_\_\_\_

(estimated fair market value)

Brokerage Accounts \_\_\_\_\_  
(includes stocks, bonds, mutual funds,  
money market accounts, etc.)

Other Real Estate \_\_\_\_\_

Other Assets \_\_\_\_\_

Do you have a Pension   Yes \_\_\_\_\_   No \_\_\_\_\_

If yes, is your pension is "non covered" meaning you did not pay in ss taxes on some or all of your income.   Yes \_\_\_\_\_   No \_\_\_\_\_

This usually applies to railroad employees or teachers who started working prior to 1973

*If yes we will need to ask additional questions during our upcoming meeting to help you decide when to take Social Security*

Can you make after-tax contributions to your 401(k)/403(b) retirement plan?

Yes \_\_\_\_\_   No \_\_\_\_\_   I Don't Know \_\_\_\_\_

Have you made, in the past, after-tax contributions to your 401(k)/403(b) retirement plan?

Yes \_\_\_\_\_   No \_\_\_\_\_

**Foreign Assets** *Please estimate the value of the following:*

Checking Accounts \_\_\_\_\_

Savings Accounts \_\_\_\_\_

CDs, Savings Bonds \_\_\_\_\_

Brokerage Accounts \_\_\_\_\_  
(includes stocks, bonds, mutual funds,  
money market accounts, etc.)

Retirement Accounts \_\_\_\_\_  
(includes IRAs, 401(k)s, 403(b)s, annuities, etc.)

Your Home \_\_\_\_\_

(estimated fair market value)

Other Real Estate \_\_\_\_\_

Other Assets \_\_\_\_\_

**Liabilities** *Please estimate the current balance of the following:*

Primary Mortgage \_\_\_\_\_

Other Mortgages \_\_\_\_\_

Auto Loans \_\_\_\_\_

Home Equity Loan \_\_\_\_\_

Education Loans \_\_\_\_\_

Credit Card Balances \_\_\_\_\_  
(list only if they are not paid off monthly)

Alimony \_\_\_\_\_

Other Debts \_\_\_\_\_

**Annual Earned Income**

**Client**

Salary \_\_\_\_\_

Commission \_\_\_\_\_

Bonus \_\_\_\_\_

Social Security \_\_\_\_\_

Pension \_\_\_\_\_

What percentage of pension goes to spouse if pension holder passes? \_\_\_\_\_

Other Income \_\_\_\_\_

**Co-Client**

Salary \_\_\_\_\_

Commission \_\_\_\_\_

Bonus \_\_\_\_\_

Social Security \_\_\_\_\_

Pension \_\_\_\_\_

Other Income \_\_\_\_\_

Is income fairly consistent and reliable?

Yes \_\_\_\_ No \_\_\_\_

Yes \_\_\_\_ No \_\_\_\_

**Contributions**

Are you contributing on a regular basis to a retirement plan such as an IRA, 401(k), 403(b), etc.?

Client: Yes \_\_\_\_ No \_\_\_\_

Co-Client Yes \_\_\_\_ No \_\_\_\_

## Estate Planning

Do you have a will(s)? Yes \_\_\_\_ No \_\_\_\_

Do you have any trusts? Yes \_\_\_\_ No \_\_\_\_

Please list your current professional advisors:	Are you pleased with their service?	Phone #
Accountant: _____	Yes ____ No ____	_____
Attorney: _____	Yes ____ No ____	_____
Brokerage Co: _____ (and broker)	Yes ____ No ____	_____
Insurance Co: _____ (and agent)	Yes ____ No ____	_____
Bank: _____	Yes ____ No ____	_____
Other: _____	Yes ____ No ____	_____

## Insurance

How much life insurance do you have? What type of insurance is it?

Client	Co-Client
\$ _____	\$ _____
Type _____	Type _____

Do you (both) have health insurance? Yes \_\_\_\_ No \_\_\_\_

Do you (both) have disability insurance? Yes \_\_\_\_ No \_\_\_\_

Do you have auto insurance? Yes \_\_\_\_ No \_\_\_\_

Do you have homeowner's insurance? Yes \_\_\_\_ No \_\_\_\_

Do you have an umbrella liability policy? Yes \_\_\_\_ No \_\_\_\_

## Other Information

Do you follow a budget? Yes \_\_\_\_ No \_\_\_\_

What do you expect to earn on your investments?

6-8% \_\_\_\_\_ 8-10% \_\_\_\_\_ 10-12% \_\_\_\_\_ 12-15% \_\_\_\_\_ 15% + \_\_\_\_\_

Have you ever been unhappy with the recommendations of a stockbroker, insurance agent, and/or financial advisor or consultant? \_\_\_\_\_ If yes, please explain:

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Who may we thank for your referral? \_\_\_\_\_

Is there any other information you would like to provide at this time? \_\_\_\_\_

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**On a Personal Note:**

What do you like to do with your free time? \_\_\_\_\_

What brings you the most happiness? \_\_\_\_\_

Where in the world would you like to travel most? \_\_\_\_\_

**Thank You!**