

**In order to determine if we are a good fit, we ask that you prioritize the following areas of concern:**

*#1 being your primary concern (use NA for the areas that may not apply to you)*

## \_\_\_\_\_ Financial Statements

- Provide asset and net worth statements
- Cash flow analysis
- Debt management

## \_\_\_\_\_ Asset Management

- Portfolio analysis
- Asset allocation
- Personalized re-balancing

## \_\_\_\_\_ Tax Strategies

- Collaborate with your tax professional
- Identify potential tax strategies
- Minimize taxes

## \_\_\_\_\_ Risk Analysis

- Portfolio risk
- Financial risk
- Transfer of risk

## \_\_\_\_\_ Accumulation Goals

- Prepare for future financial events
- Education
- Weddings

## \_\_\_\_\_ Retirement

- Review of your retirement goals
- Are you saving enough to retire?
- Retirement income from your assets

## \_\_\_\_\_ Business Strategies

- Employee benefits
- Succession planning
- Qualified plan analysis

## \_\_\_\_\_ Estate Analysis

- Will your assets transfer efficiently?
- Do you have charitable bequests?
- Do you have beneficiaries assigned?
- Minimize taxes

## Types of Assets You Own

- |                                            |                                         |                                            |
|--------------------------------------------|-----------------------------------------|--------------------------------------------|
| <input type="checkbox"/> Home              | <input type="checkbox"/> Stock/Bonds    | <input type="checkbox"/> Business/Practice |
| <input type="checkbox"/> Second Home       | <input type="checkbox"/> Mutual Funds   | <input type="checkbox"/> IRA               |
| <input type="checkbox"/> Other Real Estate | <input type="checkbox"/> Annuities      | <input type="checkbox"/> Retirement Plans  |
| <input type="checkbox"/> Roth              | <input type="checkbox"/> 401(k)         | <input type="checkbox"/> 403(b)            |
| <input type="checkbox"/> Savings/CDs       | <input type="checkbox"/> Life Insurance | <input type="checkbox"/> Other _____       |

## Types of Liabilities You Have

- |                                       |                                           |                                        |
|---------------------------------------|-------------------------------------------|----------------------------------------|
| <input type="checkbox"/> Mortgage     | <input type="checkbox"/> Student Loans    | <input type="checkbox"/> Vehicle Loans |
| <input type="checkbox"/> 2nd Mortgage | <input type="checkbox"/> Credit Card Debt | <input type="checkbox"/> Personal Loan |

## Assets/Liabilities/Income *(Do not include Real Estate)*

### Assets

- ☐ Under \$100,000
- ☐ \$100,000 to \$250,000
- ☐ \$250,000 to \$500,000
- ☐ \$500,000 to \$1,000,000
- ☐ Over \$1,000,000

### Liabilities

- ☐ None
- ☐ Under \$50,000
- ☐ \$50,000 to \$100,000
- ☐ \$100,000 to \$250,000
- ☐ \$250,000 to \$500,000+

### Household Income

- ☐ Under \$50,000
- ☐ \$50,000 to \$100,000
- ☐ \$100,000 to \$250,000
- ☐ \$250,000 to \$500,000
- ☐ Over \$500,000