WEALTH ADVISORS
YOUR SINGLE SOURCE

# Investment Profile Questionnaire

This comprehensive, personal financial summary is designed to help you take inventory and assign realistic values to your personal assets and liabilities. It is the essential first step in organizing your financial future. At Wealth Advisors, our goal is to help you make the right decisions for your financial future. The information you provide in this questionnaire will assist us in making sound recommendations with confidence.

## BASIC INFORMATION:

Your Name | Nickname | Age | Birth date (mm/dd/yyyy)

Spouse's Name | Nickname | Age | Birth date (mm/dd/yyyy)

Residence Address | City | State | Zip

Mailing Address | City | State | Zip

Home Phone | Cell Phone | Fax | E-mail Address

How did you hear about our firm?

## BUSINESS DATA:

Business Name

Address | Phone

Type of Business | Sole Proprietorship | Partnership | C-Corporation | S-Corporation

State of Incorporation

## OCCUPATION:

Your Job Title | Employer (last, if retired) | # of Years | Retirement Date

Spouse's Job Title | Employer (last, if retired) | # of Years | Retirement Date

## FAMILY ASSETS:

| PERSONAL | Owner* | Purpose** | Current Value |
|---|---|---|---|
| Primary residence | ________ | ________ | $ ________ |
| Vacation home/second residence | ________ | ________ | $ ________ |
| Automobile(s) | ________ | ________ | $ ________ |
| Other personal assets ________ | ________ | ________ | $ ________ |
| Other personal assets ________ | ________ | ________ | $ ________ |
| **Total personal assets** | | | **$ ________** |

| LIQUID AND INVESTMENT | | | |
|---|---|---|---|
| **Cash** | ________ | ________ | $ ________ |
| **Fixed** | | | |
| Bonds and bond mutual funds | ________ | ________ | $ ________ |
| Bonds and bond mutual funds | ________ | ________ | $ ________ |
| **Equity** | | | |
| Stocks and stock mutual funds | ________ | ________ | $ ________ |
| Stocks and stock mutual funds | ________ | ________ | $ ________ |
| Other investment assets ________ | ________ | ________ | $ ________ |
| **Total liquid and investment assets** | | | **$ ________** |

| RETIREMENT | Owner* | Purpose** | Current Value |
|---|---|---|---|
| IRA | ________ | ________ | $ ________ |
| IRA | ________ | ________ | $ ________ |
| Qualified retirement plan (e.g., 401(k)) | ________ | ________ | $ ________ |
| Qualified retirement plan (e.g., 401(k)) | ________ | ________ | $ ________ |
| Annuities | ________ | ________ | $ ________ |
| Other retirement assets ________ | ________ | ________ | $ ________ |
| **Total retirement assets** | | | **$ ________** |

**TOTAL ASSETS** **$ ________**
(add personal assets, liquid and investment assets, and retirement assets)

* Indicate whether the asset is owned by you, a second person, or jointly.
** Indicate whether the purpose of the asset is for cash reserves, education, an accumulation goal, or retirement.

## FAMILY LIABILITIES:

| | Debtor*** | Current balance | Original balance | Origination date |
|---|---|---|---|---|
| Mortgage on first residence | ________ | $ ________ | $ ________ | ____/____/____ |
| Mortgage on second residence | ________ | $ ________ | $ ________ | ____/____/____ |
| Charge accounts and credit cards | ________ | $ ________ | $ ________ | ____/____/____ |
| Other liabilities | ________ | $ ________ | $ ________ | ____/____/____ |
| **TOTAL LIABILITIES** | | **$ ________** | | |

*** Indicate whether the debtor of the liability is you, a second person, or both.

## FAMILY INCOME:

| ANNUAL INCOME | Primary | Secondary |
|---|---|---|
| Employment (wages, salaries, bonuses) | $ ______________ | $ ______________ |
| Self-employment/business income | $ ______________ | $ ______________ |
| Social Security benefits | $ ______________ | $ ______________ |
| Other government benefits | $ ______________ | $ ______________ |
| Taxable investment income | $ ______________ | $ ______________ |
| Nontaxable investment income | $ ______________ | $ ______________ |
| Pensions (if currently receiving) | $ ______________ | $ ______________ |
| Other income – taxable ______________ | $ ______________ | $ ______________ |
| Other income – nontaxable ______________ | $ ______________ | $ ______________ |
| **Total annual income** | **$** ______________ | **$** ______________ |

**COMBINED TOTAL ANNUAL INCOME** **$** ______________

## FAMILY EXPENSES:

Fixed ______________

Variable ______________

**TOTAL** ______________

______________ ______________ ______________
Client Signature Date Print Name

______________ ______________ ______________
Client Signature Date Print Name

***Thank You.***