



# *Wealth Plan Questionnaire*

**Name:** \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

**Date:** \_\_\_\_\_

*\*Please send this back with copies of your investment statements\**

**Phone: 763-231-9500**  
**Fax: 763-208-3173**  
**15600 35<sup>th</sup> Ave N Suite 101**  
**Plymouth, MN 55447**  
**[www.Prosperswell.com](http://www.Prosperswell.com)**

We would love for you to fill out and return our Wealth Plan Questionnaire to our office prior to your initial consultation. By completing the profile prior to our meeting and bringing everything on the checklist, we are able to help serve you better.

**Checklist:**

- Fill out Wealth Plan Questionnaire and return via e-mail, fax, or mail to us prior to our initial consultation
- Bring to our initial consultation:
  - Copies or originals of all your statements for financial investments (IRAs, 401ks, brokerage accounts, savings, etc.)
  - Birthdays and SSN's of who you want as your beneficiaries
  - Last years tax return

We are happy to have the opportunity to work with you to help you achieve your financial success. The strategies we consider are based on each of your investment goals and dreams as well as the market conditions and circumstances. We provide you independent and unbiased advice to help you make the important investment decisions to prepare for your future.

Please do not hesitate to contact us 763-231-9500 if you have any questions or visit us at [www.prosperwell.com](http://www.prosperwell.com). We look forward to seeing you soon.

***Personal Information***

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Has DL been verified? \_\_\_\_\_ Date of Issuance: \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

Dependents \_\_\_\_\_ Tax Bracket \_\_\_\_\_

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

Work Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: (\_\_\_\_\_) \_\_\_\_\_ Income/Annual Salary: \_\_\_\_\_

***Spouse's Information*** *check if single*  *divorced*

Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Has DL been verified? \_\_\_\_\_ Date of Issuance: \_\_\_\_\_

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

Work Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: (\_\_\_\_\_) \_\_\_\_\_ Income/Annual Salary: \_\_\_\_\_

## Children's Information

Name	Birthdate	Social Security #	Percentage

Who would you like as a beneficiary on your accounts if not your kids?

Name	Birthdate	Social Security #	Percentage

## Real Estate Information

	Primary Residence	Secondary Residence
<b>Address</b>		
<b>Purchase Price/Year</b>		
<b>Owner(s)</b> (please list the name(s) and check ownership type	<input type="checkbox"/> Individual <input type="checkbox"/> Joint Tenants <input type="checkbox"/> Tennants In Common	<input type="checkbox"/> Individual <input type="checkbox"/> Joint Tenants <input type="checkbox"/> Tennants In Common
<b>Years at This Home</b>		

## Other Real Estate

Address	Current Value	Purchase Price	Improvements	Rental Income

## Personal Property

Description (Make/Model)	Current Value	Purchase Price	Owner
Vehicle 1			
Vehicle 2			
Vehicle 3			
Other			
Other			

## ***Cash Accounts***

<b>Institution</b>	<b>Current Value</b>	<b>Owner</b>
Checking		
Savings		
Other		
Other		

## ***Taxable Investment Accounts***

<b>Description (Institution)</b>	<b>Current Value</b>	<b>Owner</b>

## ***Retirement Accounts (401k, 403b, IRA, Roth IRA, etc)***

<b>Owner/Desc (Institution)</b>	<b>Current Value</b>	<b>Employee Contribution</b>	<b>Employer Contribution</b>	<b>Primary Beneficiaries</b>	<b>Contingent Beneficiaries</b>

Attach current statements, if not previously provided

## ***Business Ownership***

<b>Entity Name</b>	<b>Owner/ Co-Owners</b>	<b>Fair Market Value</b>	<b>Tax Basis</b>	<b>Ownership %</b>	<b>Type of Entity</b>

**Goals for business:**


***Stock Options***

Company Name				
<b>Grants:</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
<b>Grant Date</b>				
<b>Shares granted</b>				
<b>Shares vested</b>				
<b>Exercise Price</b>				
<b>First Vest Date</b>				
<b>Vest Frequency</b>				
<b>Vesting Periods</b>				
<b>Expiration Date</b>				

***Education Planning***

Will your children attend college? \_\_\_\_\_ YES \_\_\_\_\_ NO

If yes, will the college be Public \_\_\_\_\_ or Private \_\_\_\_\_

Do you currently maintain investments to help pay for the cost of college? \_\_\_\_\_

What percent of your children's education do you plan to pay for? \_\_\_\_\_

Do you plan on helping your grandchildren pay for college? \_\_\_\_\_

**Type of Account**

**(UTMA/GMA, 529 Plan)**

**Beneficiary (Child)**

**Current Value**

**Where is the**

**account held?**

Type of Account (UTMA/GMA, 529 Plan)	Beneficiary (Child)	Current Value	Where is the account held?

## *Liabilities*

Description/Institution	Original Balance/ Current Balance	Date of Loan	Rate % & Term (yrs)	Monthly Payment

## *Industry/Affiliation*

If you or any member of your immediate family employed by a bank, insurance company, investment advisor or broker/ dealer please indicate name and firm below:

Employee/Relative other Financial Institution: \_\_\_\_\_

Employee/Relative other Securities Firm: \_\_\_\_\_

Relative of LPL Rep/Employee: \_\_\_\_\_

If you or any member of your immediate family has been a corporate officer, director or owner of 10% or more of any public corporation within the past three months, please indicate the name of that Corporation:

\_\_\_\_\_

## *Retirement Goals*

Do you currently receive any social security benefits? \_\_\_\_\_ YES \_\_\_\_\_ NO

If so, what amount are you receiving? \_\_\_\_\_

What is your future social security amount? \_\_\_\_\_ Spouse? \_\_\_\_\_

At what age do you want to retire? \_\_\_\_\_ Spouse? \_\_\_\_\_

How much are your current annual expenses? \_\_\_\_\_

If you were to retire today, how much after-tax income (in today's dollars) would you require on an annual basis to support your standard of living? Assume this amount would be deposited into your checking account on a monthly basis. Please consider whether you home mortgage and other debt will be paid off by retirement. Also factor in your travel expectations or other lifestyle changes in retirement.

Annual Requirement:\$ \_\_\_\_\_

Do you have term life insurance? YES NO  
 If yes: \_\_\_\_\_length of term \_\_\_\_\_ Death Benefit \_\_\_\_\_ Yearly Premium

Do you have a current will? YES NO

Are you the beneficiary of any trusts? YES NO

Do you have a durable power of attorney for property? YES NO

Do you have a healthcare directive? YES NO

Do you expect to care for a parent or any other person? YES NO

Are you concerned about possible Nursing Home expenses? YES NO

How many years have you been investing for? \_\_\_\_\_ 1-5 yrs \_\_\_\_\_ 6-11 yrs \_\_\_\_\_ 12-20 yrs \_\_\_\_\_ 20+ yrs

What types of accounts have you invested in?	What is your Net Worth?	What is your liquid Net Worth?
_____ Margins	_____ <25K	_____ <25K
_____ Stocks	_____ 25K-49K	_____ 25K-49K
_____ Options	_____ 50K-99K	_____ 50K-99K
_____ Mutual Funds	_____ 100K-249K	_____ 100K-249K
_____ Bonds	_____ 250K-499K	_____ 250K-499K
_____ Partnerships	_____ 500K-999K	_____ 500K-999K
_____ Other, Please explain:	_____ 1,000,000 & over	_____ 1,000,000 & over

## ***Risk Assessment Evaluation***

**On a scale from 1-10 (1 being very conservative- 10 being very aggressive), how do you describe your risk tolerance as an investor? \_\_\_\_\_ Spouse? \_\_\_\_\_**

**On a scale from 1-10 (1 being very conservative- 10 being very aggressive), how do you think your current portfolio is positioned? \_\_\_\_\_ Spouse? \_\_\_\_\_**

### **What is your primary financial goal?**

Wealth Preservation \_\_\_\_\_  
 Retirement Planning \_\_\_\_\_  
 Wealth Accumulation \_\_\_\_\_

### **What is your time frame?**

0-5 years \_\_\_\_\_  
 5-10 years \_\_\_\_\_  
 10+ years \_\_\_\_\_

Is there anything happening in your life right now that could impact your financial future?

\_\_\_\_\_ YES Please Explain \_\_\_\_\_  
 \_\_\_\_\_ NO

Indicate which objective best reflects your goals:

\_\_\_\_\_ **Income with Capital Preservation:** Designed as a longer term accumulation account, this is the most conservative investment objective. Emphasis is placed on generation of current income and prevention of capital loss.

\_\_\_\_\_ **Income with Moderate Growth:** Emphasis is placed on generation of current income with a secondary focus on moderate capital growth.

\_\_\_\_\_ **Growth with Income:** Emphasis is placed on modest capital growth with some focus on generation current income.

\_\_\_\_\_ **Growth:** Emphasis is placed on achieving high long-term growth and capital appreciation. There is little focus on generation of current income.

\_\_\_\_\_ **Aggressive Growth:** Emphasis is placed on aggressive growth and maximum capital appreciation. No focus on generation of current income. This objective has a very high level of risk and is for investors with a longer time horizon.

\_\_\_\_\_ **Trading:** Emphasis is placed on speculative transaction activity. This objective represents acceptance of an extremely high level of risk.

If you had all the money you would ever need right now, what would you do differently?

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What is the one thing you would like to change about your money or investments?

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Ten years from now, where would you like to be financially?

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Is there anything else we should know?

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