Ameriprise Financial

Plan for your future

My financial profile

Client name ______________________ Birth year ________ Today's date __________

Co-client name ______________________ Birth year ________

When do you plan to retire? (Leave blank if already retired.) ______________________

What are your short- and long-term goals? (e.g., education, new car, new home, home improvements, travel)

In the short term, I'd like to:

	By when (mo/yr)?	
Goal 1 ______________________		$
Goal 2 ______________________		$
Goal 3 ______________________		$

In the long term, I'd like to:

Goal 1 ______________________		$
Goal 2 ______________________		$
Goal 3 ______________________		$

What are your assets and liabilities?

My assets:	Current value	Annual contributions/savings
401(k)(s), 403(b)(s)	$	$
Traditional IRAs, SEPs and SIMPLE IRAs	$	$
Annuities	$	$
Brokerage/investment accounts	$	$
Cash/bank accounts	$	$
Roth IRAs, Roth 401(k)(s)	$	$
Cash-value life insurance	$	$
Education savings accounts (e.g., 529 plan)	$	$
Other assets (e.g., house, personal property)	$	$
TOTAL	$	

Employer contributions:

$ or ___ % of salary (client)

$ or ___ % of salary (co-client)

My liabilities:	Balance
Mortgage(s)	$
Credit card(s)	$
Other loans (e.g., car, boat)	$
Other liabilities	$
TOTAL	$

Estimated net worth: $

What are your estimated income and expenses?

My annual expenses today:

Essential expenses $ ______
(e.g., mortgage, rent, food, utilities, medical, liability payments)

Lifestyle expenses $ ______
(e.g., hobbies, entertainment, travel)

Do you anticipate your future expenses to: ☐ increase ☐ decrease ☐ stay the same ☐ unsure

My annual income today:	Client	Co-client
Salary/bonuses/self-employment	$	$
Social Security* (Consult your annual Social Security Estimate or visit www.ssa.gov/estimator)	$	$
Pension income*	$	$
Other (e.g., rental, part-time work)	$	$

*If not yet retired, include any expected retirement income from these sources.

How are you insured today?

Client		Co-client	
Life insurance death benefit	$	Life insurance death benefit	$
Long-term care daily benefit	$	Long-term care daily benefit	$
Disability insurance benefit	$	Disability insurance benefit	$
	or ___ % of salary (if group coverage)		or ___ % of salary (if group coverage)

What to bring to your conversation with your advisor

- ☐ **Financial statements:** Retirement plans, 401(k)(s), 403(b)(s), brokerage, IRAs, Social Security statements
- ☐ **Insurance policies:** Life, disability, long-term care, auto & home, umbrella
- ☐ **Recent tax return**
- ☐ **Recent pay stub** (if applicable)
- ☐ **Basic estate documents:** Will, healthcare directive/ living will, power of attorney, trust(s)
- ☐ **Employer benefits information:** Enrollment confirmation and/or benefits summary/handbook

For Ameriprise clients: You can send this form and supporting information securely online. Log in to the secure site on ameriprise.com, upload this and other files in Statements & Documents and share with your advisor. Not registered? Visit ameriprise.com/register.

Data gathering is one part of the financial planning process. The financial advisor may provide retirement planning analysis and/or recommendations.

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