

# Plan for today, tomorrow and the future

## My Financial Profile

Client name \_\_\_\_\_ Birth date \_\_\_\_\_ Today's date \_\_\_\_\_

Co-client name \_\_\_\_\_ Birth date \_\_\_\_\_

Children's names \_\_\_\_\_ Birth date \_\_\_\_\_

\_\_\_\_\_ Birth date \_\_\_\_\_

\_\_\_\_\_ Birth date \_\_\_\_\_

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

## What are your goals?

### My most important goal (e.g., retirement)

By when (mo/yr)?

Goal amount (today's \$)

Goal 1 \_\_\_\_\_



### My other goals (e.g., education, home improvements, vacation home, travel)

Goal 2 \_\_\_\_\_



Goal 3 \_\_\_\_\_



Goal 4 \_\_\_\_\_



## What are your assets and liabilities?

### My assets:

Current value

Annual contributions/savings

401(k)(s), 403(b)(s)



### Employer contributions:

\$ \_\_\_\_\_ or \_\_\_\_ % of salary (client)

Traditional IRAs, SEPs and SIMPLE IRAs



\$ \_\_\_\_\_ or \_\_\_\_ % of salary (co-client)

Annuities



### My liabilities:

Balance

Monthly payment

Brokerage/investment accounts



Mortgage(s)



Cash/bank accounts



Credit card(s)



Roth IRAs, Roth 401(k)(s)



Other loans  
(e.g., car, boat)



Cash-value life insurance



Other liabilities



Education savings accounts  
(e.g., 529 plan)





Other assets  
(e.g., house, personal property)



TOTAL

Estimated net worth:

## What are your estimated income and expenses?

### My annual income today:

	Client	Co-client
Salary/bonuses/self-employment	\$ <input type="text"/>	\$ <input type="text"/>
Social Security* (Consult your annual Social Security Estimate or visit <a href="http://www.ssa.gov/estimator">www.ssa.gov/estimator</a> )	\$ <input type="text"/>	\$ <input type="text"/>
Pension income*	\$ <input type="text"/>	\$ <input type="text"/>
Other (e.g., rental, part-time work)	\$ <input type="text"/>	\$ <input type="text"/>

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

### My annual expenses today:

Essential expenses \$ <input type="text"/>	Lifestyle expenses \$ <input type="text"/>
(e.g., mortgage, rent, food, utilities, medical, liability payments)	(e.g., hobbies, entertainment, travel)

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

## How are you insured today?

### Client

Life insurance death benefit	\$ <input type="text"/>
Long-term care daily benefit	\$ <input type="text"/>
Disability insurance benefit	\$ <input type="text"/>
	or ___ % of salary (if group coverage)

### Co-client

Life insurance death benefit	\$ <input type="text"/>
Long-term care daily benefit	\$ <input type="text"/>
Disability insurance benefit	\$ <input type="text"/>
	or ___ % of salary (if group coverage)

## What to bring to your conversation with your advisor

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

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**If you are not an Ameriprise client:** Print your completed form and bring it with you when you meet with an advisor.

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