

PERSONAL FACTFINDER



GEN FINANCIAL MANAGEMENT, INC.

Security For Generations

To be respectful of everyone's time, and to ensure that you will benefit from the time we spend together, please complete this form and send back to lisa.hemmer@genfinancial.com prior to your initial financial planning meeting.

While we will have an initial snapshot of your financial situation, it is very important for us to learn more about your individual needs through the detail of statements, returns and documents. This gives us the ability to ask you appropriate questions to determine how to best assist you.

Please bring the following items (originals or copies) to our initial meeting:

- Most recent federal and state income tax returns
- Current investment statements (brokerage accounts, mutual funds, etc.)
- Social Security statement
- Current banking, mortgage, home equity loan or line of credit, and other debt statements
- Pay statements
- Mortgage notes
- Current retirement plan statements (401(k), 403(b), SEP IRA, etc.) and beneficiary information for all retirement plans
- Insurance policies: Life, Disability, and Long Term Care, including beneficiary information
- Home, Auto and Umbrella insurance declarations pages
- Estate Documents (Wills, Trusts, Power of Attorney and Health Care Directives)
- Employee benefits summary or handbook
- Your child(ren)'s 529 and/or UTMA statements
- Any personal financial goals that you have already established

Please feel free to contact us with any questions you may have.

Financial Profile

Personal Information

Client

First Name	MI	Last Name
Date of Birth	Social Security #	
Driver's License #	Home Phone #	
E-mail Address	Cell Phone #	
Employer	Position	
Business Address		
Business City, State, Zip		
Work E-Mail	Work Phone #	

Current Income Detail

Salary	\$ _____
Pensions	\$ _____
Social Security	\$ _____
Investment Income	\$ _____

Summer Address

Street			
City	State	Zip	
Summer Home Phone #			

Professional Advisors

Accountant:

Name			
Firm			
Address			
City	State	Zip	
Phone #			

Spouse

Anniversary Date: _____

First Name	MI	Last Name
Date of Birth	Social Security #	
Driver's License #	Cell Phone #	
E-mail Address		
Employer	Position	
Business Address		
Business City, State, Zip		
Work E-Mail	Work Phone #	

Current Income Detail

Salary	\$ _____
Pensions	\$ _____
Social Security	\$ _____
Investment Income	\$ _____

Winter Address

Street			
City	State	Zip	
Winter Home Phone #			

Attorney:

Name			
Firm			
Address			
City	State	Zip	
Phone #			

Financial Profile

Professional Advisors Continued...

Life Insurance Agent:

Name _____
Firm _____
Address _____
City _____ State _____ Zip _____
Phone # _____

Casualty and Property Insurance Agent:

Name _____
Firm _____
Address _____
City _____ State _____ Zip _____
Phone # _____

Children & Dependants

First Name _____ MI _____ Last Name _____
Date of Birth _____ Social Security # _____

First Name _____ MI _____ Last Name _____
Date of Birth _____ Social Security # _____

First Name _____ MI _____ Last Name _____
Date of Birth _____ Social Security # _____

First Name _____ MI _____ Last Name _____
Date of Birth _____ Social Security # _____

Beneficiaries (Grandchildren/Churches/Charities)

Name _____
Phone # _____ Social Security # _____
Address _____
City _____ State _____ Zip _____

Name _____
Phone # _____ Social Security # _____
Address _____
City _____ State _____ Zip _____

Name _____
Phone # _____ Social Security # _____
Address _____
City _____ State _____ Zip _____

Name _____
Phone # _____ Social Security # _____
Address _____
City _____ State _____ Zip _____

Assets & Liabilities

<i>Assets</i>	<i>Client</i>	<i>Spouse</i>	<i>Joint</i>
Cash/Checking	\$ _____	\$ _____	\$ _____
Certificates of Deposit	\$ _____	\$ _____	\$ _____
Home	\$ _____	\$ _____	\$ _____
Annuities	\$ _____	\$ _____	\$ _____
Investment Accounts	\$ _____	\$ _____	\$ _____
IRA Assets	\$ _____	\$ _____	\$ _____
IRA Assets	\$ _____	\$ _____	\$ _____
401(k) Assets	\$ _____	\$ _____	\$ _____
401(k) Assets	\$ _____	\$ _____	\$ _____
Stock Options	\$ _____	\$ _____	\$ _____
Business Interest	\$ _____	\$ _____	\$ _____
Investment Real Estate	\$ _____	\$ _____	\$ _____
Personal Assets	\$ _____	\$ _____	\$ _____
Other Assets	\$ _____	\$ _____	\$ _____
Other Assets	\$ _____	\$ _____	\$ _____
Total Assets	\$ _____	\$ _____	\$ _____
<i>Liabilities</i>			
1st Mortgage	\$ _____	\$ _____	\$ _____
2nd Mortgage	\$ _____	\$ _____	\$ _____
Auto Loans	\$ _____	\$ _____	\$ _____
Insurance Policy Loans	\$ _____	\$ _____	\$ _____
Education Debt	\$ _____	\$ _____	\$ _____
Other Debt	\$ _____	\$ _____	\$ _____
Total Liabilities	\$ _____	\$ _____	\$ _____
<i>Net Worth</i>	\$ _____	\$ _____	\$ _____

Monthly or annual spending estimate: \$ _____

Estate Structure

Current Estate Documents

	Client		Spouse	
	Yes	No	Yes	No
Do you have a will?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a living trust?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a credit shelter trust?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a marital trust?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a QTIP trust?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you have an irrevocable life insurance trust?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a living will?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Charitable Requests

	Client	Spouse
What percent of your adjusted gross estate do you intend to leave to charity?	_____ %	_____ %
What dollar amount do you intend to leave to charity?	\$ _____	\$ _____

Fiduciaries

Personal Representatives	First Choice:	_____
	Second Choice:	_____
Trustees:	First Choice:	_____
	Second Choice:	_____

Life Insurance

Company	Insured	Policy Owner	Beneficiary	Policy Type	Face Amount

Disability Insurance

Company	Insured	Waiting Period	Premium*	Monthly Benefit

* Annual Amount

Investment Policy Detail

Earnings Test

Which best describes your earnings over the next five years?

- Will increase faster than inflation
 - Will increase somewhat faster than inflation
 - Will stay level with inflation
 - Will increase slower than inflation
 - Will stop
-

Philosophy Test

Which best describes your investment philosophy?

- Aggressive: I seek the highest possible returns. I can absorb large fluctuations in value.
 - Between aggressive and balanced.
 - Balanced: I want a middle-of-the-road position. Good returns with moderate fluctuations.
 - Between conservative and balanced.
 - Conservative: I want to avoid any chance of loss, even if returns do not keep pace with inflation.
-

Variation Test

With which of the following portfolios do you feel most comfortable?

	<u>Five Years of Returns</u>						
	1	2	3	4	5	Average	Total
<input type="checkbox"/>	3%	3%	3%	3%	3%	3%	15%
<input type="checkbox"/>	6%	-2%	7%	4%	10%	5%	25%
<input type="checkbox"/>	-5%	18%	8%	3%	9%	6.5%	32.5%
<input type="checkbox"/>	9%	-11%	26%	3%	11%	7.5%	37.5%
<input type="checkbox"/>	14%	-30%	37%	-6%	25%	8%	40%

Income Test

How much money will you require from your portfolio this year?

Monthly \$ _____

Annual \$ _____

Current Portfolio Value \$ _____

Investment Profile

The first step in the Asset Management Process is to determine your investor profile. This profile defines important factors such as your investment objectives, time horizon, and your attitudes toward investing. This profile will help build the base of information needed to move you to the next step in the asset management process – the selection of an appropriate asset allocation policy.

To complete this profile, answer each question by entering the number that best matches your personal situation.

Investment Objectives

Which of the following best describes your investment objectives?

Client

Spouse

- 1 Preserving principal and earning a moderate amount of current income
- 2 Generating a high amount of current income
- 3 Generating some current income and growing my assets
- 4 Growing my assets substantially

Five years from now, what do you expect your standard of living will be?

- 1 The same as it is now
- 2 Somewhat better than it is now
- 3 Substantially better than it is now

Ten years from now, what do you expect your portfolio value to be?

- 1 The same as or a little more than it is today
- 2 Moderately greater than it is today
- 3 Substantially greater than it is today

What do you want to do with the income generated by your portfolio?

- 1 Receive all income
 - 2 Receive some and reinvest some
 - 3 Reinvest all income
-

Investment Objectives Total

Time Horizon

What is the time frame for you to achieve your financial goals?

- 1 0-5 years
- 2 5-10 years
- 5 10-15 years
- 10 15 years or longer

What is your primary financial goal?

- 1 Wealth preservation or emergency savings
- 2 Education funding
- 5 Retirement planning
- 10 Long-term wealth accumulation

What is your age?

- 1 Over 56
 - 2 46-55
 - 5 36 -45
 - 10 20-35
-

Time Horizon Total

Investment Profile

Risk Tolerance

You just received a substantial sum of money. How would you invest it?

Client

Spouse

- 1 I would invest in something that offers moderate current income and is very safe.
- 2 I would invest in something that offers high current income with a moderate amount of risk.
- 3 I would invest in something that offers high total return (current income plus capital appreciation) with a moderately high amount of risk.
- 4 I would invest in something that offers substantial capital appreciation even though it has a high amount of risk.

Which of the following statements would best describe your reaction if the value of your portfolio suddenly declined by 15%?

- 1 I would be very concerned because I cannot accept fluctuations in the value of my portfolio.
- 2 If the amount of income I received were unaffected, it would not bother me.
- 3 I invest for long-term growth but would be concerned about even a temporary decline.
- 4 I invest for long-term growth and accept temporary fluctuations due to market influences.

How optimistic are you about the long-term prospects for the economy?

- 1 Pessimistic
- 2 Unsure
- 3 Somewhat optimistic
- 4 Very optimistic

Risk Tolerance Total