

VERSION 1.13.18



QFA Client Financial Checkup 2023

Year End Financial Check Up



PART I

Client Information			
Your First & Last Name:		Your Date of Birth: / /	
Marital Status: <input type="radio"/> Single <input type="radio"/> Married <input type="radio"/> Partner <input type="radio"/> Separated <input type="radio"/> Divorced <input type="radio"/> Widowed			
Street Address:			
City:		State:	Zip Code:
Home Phone: () -		Your Social Security #: - -	
Client Contact Info:			
Spouse's/Partner's (Co-Client's) First & Last Name:			
Spouse's/Partner's Date of Birth: / /		Spouse's/Partner's Social Security #: - -	
Spouse's/Partner's Contact Info:			

Employment Information			
Your Employment: <input type="radio"/> Self-Employed <input type="radio"/> Company Owner <input type="radio"/> Employee <input type="radio"/> Retired			
Company Name:			
Occupation:		Years with Company:	
Street Address:			
City:		State:	Zip Code:
Work Phone: () -	Ext:	Fax: () -	
Work Email:			
Spouse's/Partner's Employment: <input type="radio"/> Self-Employed <input type="radio"/> Company Owner <input type="radio"/> Employee <input type="radio"/> Retired			
Company Name:			
Occupation:		Years with Company:	
Street Address:			
City:		State:	Zip Code:
Work Phone: () -	Ext:	Fax: () -	
Work Email:			



Please call (301) 296-6203.

Form continues

Core Questions	
Do you need capital gains in your investment portfolio to offset losses from the prior year?	<input type="radio"/> Yes <input type="radio"/> No
Do you need capital losses in your investment portfolio to offset gains from the prior year?	<input type="radio"/> Yes <input type="radio"/> No
Do you currently own expensive variable annuities?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Would you like to learn how to exchange them for a new fee-only annuity earning 7% tax deferred?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Have you refinanced your primary residence in the last year?	<input type="radio"/> Yes <input type="radio"/> No
Do you have investment properties? If so, how many? _____	<input type="radio"/> Yes <input type="radio"/> No
Have you refinanced your investment properties?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Are you currently unemployed or expect to be unemployed	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Will you have a child attend college in the next two years?	<input type="radio"/> Yes <input type="radio"/> No
Do you plan to sell a large asset (like a home or business) within the next 2 years?	<input type="radio"/> Yes <input type="radio"/> No
Do you plan on getting married or divorced in the next 12 months?	<input type="radio"/> Yes <input type="radio"/> No
Will you receive an inheritance in the next 12 months?	<input type="radio"/> Yes <input type="radio"/> No
Do you or your spouse/partner plan to retire within the next three-five years?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Do you have life insurance or long-term disability coverage?	<input type="radio"/> Yes <input type="radio"/> No
Do you plan to start a small business?	<input type="radio"/> Yes <input type="radio"/> No
Do you have a will or a trust?	<input type="radio"/> Yes <input type="radio"/> No
Do you have durable powers of attorney?	<input type="radio"/> Yes <input type="radio"/> No
Have you executed health care proxies?	<input type="radio"/> Yes <input type="radio"/> No
When were these documents last updated?	
Are you concerned that your retirement income may not last?	<input type="radio"/> Yes <input type="radio"/> No
Do you want an income/expense forecast and retirement plan of your household?	<input type="radio"/> Yes <input type="radio"/> No
How long ago did you complete a financial planning questionnaire?	<input type="radio"/> 0-2Yr <input type="radio"/> 2-5Yr <input type="radio"/> 5-10 Yr
Do you have confidence that Washington is on the right track regarding fiscal policy and the economy?	<input type="radio"/> Yes <input type="radio"/> No
Do you believe the Federal Reserve is on the right track for monetary policy and the economy?	<input type="radio"/> Yes <input type="radio"/> No
Do you have anyone the can benefit from our services?	<input type="radio"/> Yes <input type="radio"/> No
Would you like to share the person's name and/or email? _____	

Risk Assessment	
What is more important to you; to be in the stock market with a chance of reasonable growth but also a chance of loss or to be in a safer investment that provides little or no loss?	<input type="radio"/> Stocks <input type="radio"/> Safer Investments
How do you rate your appetite for risk?	<input type="radio"/> None <input type="radio"/> Low <input type="radio"/> Medium <input type="radio"/> High
What is your investing objective?	<input type="radio"/> Liquidity <input type="radio"/> Income <input type="radio"/> Growth & Income <input type="radio"/> Growth <input type="radio"/> Speculative





Financial Check Up (continued)

PART II

Assets

Bank Accounts

Name of Account	Owner	Balance
Checking		\$
Money Market / Savings		\$
All CDs		\$
Other:		\$
How much of the above amount do you want earmarked for retirement?		\$

Retirement Accounts

List tax-deferred accounts separately and include accounts labeled: 401(k), 403(b), 457, ESOP, SEP, SIMPLE, Profit Sharing, TSA, Annuities, Traditional IRA and Roth IRA. Please attach copies of most recent statements. **Identify what is at QFA**

Name of Account	At	Owner	Balance
<i>Example: Lifespan 403(b)</i>	<i>QFA</i>	<i>Mary</i>	<i>\$42,000</i>
			\$
			\$
			\$
			\$
			\$
			\$
			\$

Taxable Accounts

List accounts separately and include: brokerage accounts, joint accounts, trusts, TODs, PODs, non-qualified annuities and accounts in an individual name. Please attach copies of most recent statements. **Identify what is at QFA**

Name of Account	At	Owner	Balance
<i>Example: Individual Account</i>	<i>Vanguard</i>	<i>John</i>	<i>\$51,000</i>
			\$
			\$
			\$
			\$
			\$

Notes



Financial Check Up (continued)

Assets Held for Education

List separately for each child and include 529 Plans, Coverdell IRAs, Custodial Accounts, Education Savings Bonds, Mutual Fund Accounts, etc. **Identify what is at QFA**

Name of Account	Type	Owner	Beneficiary	Balance
<i>Example: CollegeBoundFund</i>	<i>529 Plan</i>	<i>Mary</i>	<i>Julia</i>	<i>\$15,000</i>
				\$
				\$
				\$
				\$

Business Ownership

Include businesses in which you have direct ownership.

Name of Business	Owner	Business Type	Appraisal (your share)
<i>Example: Peter's Painting Co.</i>	<i>Peter</i>	<i>S-Corp</i>	<i>\$250,000</i>
			\$
			\$
Do you plan to sell your business to create retirement assets?			<input type="radio"/> Yes <input type="radio"/> No
If yes, in what approximate year?			
Assumed annual growth rate of business: <i>(If left blank, we will grow your business by 8% until sold.)</i>			%

Personal Property

Include collectibles, boats, automobiles, etc.

Property	Owner	Value
<i>Example: Art Collection</i>	<i>Mary/John</i>	<i>\$75,000</i>
		\$
		\$

Real Estate

For additional properties, please attach a separate sheet.

Property	Investment or Personal	Owner	Value
<i>Example: 212 Windham</i>	<i>Personal Residence</i>	<i>Joint</i>	<i>\$315,000</i>
	Personal Residence		\$
	Second Home		\$
	Investment Property (1)		\$
	Investment Property (2)		\$
	Other:		\$
How much pre-tax income do you receive each year from your investment properties?			\$



Financial Check Up (continued)

Which of these real estate properties is available to be sold with the proceeds used for retirement?	
In what year would you like to sell the property?	

Liabilities

Mortgages			
Mortgages	Balance Remaining	Term Remaining	Interest Rate
Primary Residence	\$		%
Second Home	\$		%
Investment Property (1)	\$		%
Investment Property (2)	\$		%
Other:	\$		%
Other:	\$		%
Home Equity Line of Credit Balance:			\$
Amount Available:			\$

Other Debt

Debt	Balance	Interest Rate(s)
Vehicle	\$	%
Vehicle	\$	%
All Credit Cards	\$	%
Student Loans	\$	%
Other:	\$	%

Income and Retirement Analysis

Your Current Annual Income?	\$
At what age do you expect to retire? <i>(If you are already retired, put in your current age.) (We will use this age to run your retirement projections.)</i>	
How much do you contribute to your retirement plans each year? <i>(Include the amount your employer adds through a profit sharing or matching program.)</i>	\$
Spouse's/Partner's Current Annual Income?	\$
At what age does your spouse/partner expect to retire? <i>(If she/he has already retired, put in her/his current age.)</i>	
How much does your spouse/partner contribute to her/his retirement plans each year? <i>(Include the amount her/his employer adds through a profit sharing or matching program.)</i>	\$
How much will you need to spend each month in retirement? <i>(Include taxes and think in terms of today's dollars.) (If you leave this question blank, we will assume you will need 85% of your current income.)</i>	\$

Questions? Please call (301) 296 6203

Financial Check Up (continued)

Additional Annual Savings:	\$
Type of Account:	

Pensions

Client Name	Monthly Amount at Start	Age at Start	Inflation COLA
<i>Example: Mary</i>	\$1,200	65	<input checked="" type="radio"/> Yes <input type="radio"/> No
	\$		<input type="radio"/> Yes <input type="radio"/> No
	\$		<input type="radio"/> Yes <input type="radio"/> No
	\$		<input type="radio"/> Yes <input type="radio"/> No

What payout option does this pension represent? (We will assume joint and 50% survivor unless otherwise indicated.)

<input type="radio"/> Single Life	Name Applicable Pension(s):	
<input type="radio"/> Joint and 50% Survivor	Name Applicable Pension(s):	
<input type="radio"/> Joint and 100% Survivor	Name Applicable Pension(s):	

Social Security

Client Name	Age to Start Payments	Anticipated Monthly Payment
<i>Example: John</i>	66	\$1,436
		\$
		\$

Other Income and Expenses

Do you expect to work part-time during retirement?	<input type="radio"/> Yes <input type="radio"/> No
If yes, for how many years?	At what salary (in current dollars)?
	\$
Does your spouse/partner expect to work part-time during retirement?	<input type="radio"/> Yes <input type="radio"/> No
If yes, for how many years?	At what salary (in current dollars)?
	\$

What is the value of any expected inheritance/gifts?	\$
In what year would you estimate that you might receive this inheritance?	

What is the value of any anticipated expenses or major purchases (other than education)?	\$
In what year should these expenses be applied?	

Is there anything else we should know about when we plan for your retirement?

Financial Check Up (continued)

Notes

Insurance Analysis

For how many years will you need life insurance?
If you leave blank, we will assume until the first year of retirement.

Life Insurance: Term Policies

Please attach your latest statement.

Face Value	Insured	Group or Individual	Term Remaining	Premium per Year
<i>Example: \$500,000</i>	<i>John</i>	<i>Individual</i>	<i>10 years</i>	<i>\$700</i>
\$				\$
\$				\$
\$				\$
\$				\$

Life Insurance: Permanent Policies

Please attach your latest statement.

Face Value	Type	Year Purchased	Insured	Cash Value	Premium per Year
<i>Example: \$100,000</i>	<i>Whole Life</i>	<i>1998</i>	<i>Mary</i>	<i>\$10,000</i>	<i>\$1,000</i>
\$				\$	\$
\$				\$	\$
\$				\$	\$
\$				\$	\$

Long Term Disability Insurance

Please attach policies if available.

Name	Monthly Benefit	Group or Individual	Premium per Year
<i>Example: John</i>	<i>\$3,000</i>	<i>Individual</i>	<i>\$2,100</i>
	\$		\$
	\$		\$
	\$		\$
	\$		\$



Financial Check Up (continued)

Long Term Care Insurance

Please attach policies if available.

Name	Daily Benefit	Inflation Rider	Term	Premium per Year
<i>Example: Mary</i>	\$150	<input checked="" type="radio"/> Yes <input type="radio"/> No	3 years	\$1,500
	\$	<input type="radio"/> Yes <input type="radio"/> No	years	\$
	\$	<input type="radio"/> Yes <input type="radio"/> No	years	\$

Notes

Funding Needs for Children and Other Dependents

We will use the college savings information from the Assets section to determine our education funding projections.

Name	Date of Birth	College Start Year	Years to Fund
<i>Example: Julia</i>	2/23/2001	September 2013	4 years

Annual Cost

What is the annual cost of college you are willing to fund for each child?
 Keep in mind that your children may get financial aid or choose to take out student loans to help pay for expenses. Therefore, list only the amount you are willing to pay in current dollars. For instance, if you expect a year of college (graduate school) to cost \$15,000 and you plan to pay two-thirds of that amount, then you would give "\$10,000" as your estimated cost.

\$

Annual expenses for other dependents (for example, parents):

\$

Please bring your completed Financial Planning Questionnaire along with any appropriate attachments to the meeting with your QFA advisor.

Please DO NOT complete this section PRIOR to meeting with your advisor.

I acknowledge receipt of Quantum Financial Advisor’s Privacy Policy, Form ADV Part 2, Proxy Voting Policy and the BCP disclosure statement.



Client Signature

Print Name

Questions? Please call (301) 296- 6203

Thank You.