

DATE: \_\_\_\_\_

Answers to questions in **bold** are required.

**1 Basic Contact Details**

	CLIENT 1	CLIENT 2
Name(s)	<input type="text"/>	<input type="text"/>
Address	<i>Street</i> <input type="text"/>	
	<input type="text"/>	
	<i>City/State/Zip</i> <input type="text"/>	
Phone(s)	<input type="checkbox"/> home <input type="checkbox"/> work <input type="checkbox"/> mobile	<input type="checkbox"/> home <input type="checkbox"/> work <input type="checkbox"/> mobile
Email(s)	<input type="checkbox"/> home <input type="checkbox"/> work	<input type="checkbox"/> home <input type="checkbox"/> work

**2 Objectives (Why are we meeting today?)**

How did you learn about Gould Asset Management?

Purpose and objectives for this meeting

**3 Assets**

**Estimated total portfolio value excluding real estate** (i.e., all liquid assets)

\$

**Current portfolio breakdown** (approximate)

Stocks \$ or %

Bonds \$ or %

Cash & Equivalents \$ or %

<input type="text"/>
<input type="text"/>
<input type="text"/>

**Current custodians/brokers**

Stmt provided?

Stmt provided?

Stmt provided?

<input type="text"/>
<input type="text"/>
<input type="text"/>

Primary source of assets

Accumulated savings     Inheritance     Other

Value of real assets

Family home  
 Second home  
 Investment property

\$

Any mortgage attached to family home?	<input type="checkbox"/> Mortgage	\$
Any other liabilities?	<input type="checkbox"/> Credit card debt <input type="checkbox"/> Other liabilities	
		<input type="checkbox"/> Fixed Rate _____ <input type="checkbox"/> Variable Formula _____
Other financial assets	<input type="checkbox"/> Employee stock <input type="checkbox"/> Stock options <input type="checkbox"/> Pension plans <input type="checkbox"/> Cash-value insurance <input type="checkbox"/> Other	\$
Form of ownership	<input type="checkbox"/> Living trusts <input type="checkbox"/> Irrevocable trusts	
Significant inheritance expected?		\$

## 4 Employment, Retirement, and Income

	CLIENT 1	CLIENT 2		
Employment status	<input type="checkbox"/> Full time <input type="checkbox"/> Part time	<input type="checkbox"/> Retired <input type="checkbox"/> Not empl.	<input type="checkbox"/> Full time <input type="checkbox"/> Part time	<input type="checkbox"/> Retired <input type="checkbox"/> Not empl.
If employed, projected retirement date				
<b>Approximate annual income</b>	\$		\$	
Sources of income (check all that apply)	<input type="checkbox"/> Employment <input type="checkbox"/> Pension	<input type="checkbox"/> Investments <input type="checkbox"/> Other	Notes:	
How stable are your current and future income sources?		<input type="checkbox"/> Very stable <input type="checkbox"/> Somewhat stable	<input type="checkbox"/> Unstable <input type="checkbox"/> Very unstable	
Do you have a will? <input type="checkbox"/>	Do you have a living trust? <input type="checkbox"/>			
Insurance	<input type="checkbox"/> Health			(notes / value)
	<input type="checkbox"/> Disability			(notes / value)
	<input type="checkbox"/> Life			(notes / value)
	<input type="checkbox"/> Long-term care / CCRC			(notes / value)

## 5 Investment Experience and Outlook

How would you rate your level of knowledge and expertise in each of the following products?	Mutual Funds	None	Some	A Lot	Expert
	Stocks	None	Some	A Lot	Expert
	Bonds	None	Some	A Lot	Expert
	Options	None	Some	A Lot	Expert
What is your long-term outlook for the US economy?	Optimistic	Positive	Neutral	Negative	Pessimistic
What is your long-term outlook for the world economy?	Optimistic	Positive	Neutral	Negative	Pessimistic
Do you desire global portfolio diversification?	Not at all	Unsure	Prefer	Strongly prefer	

## 6 Risk Attitude and Tolerance

Which of the following best describes your attitude toward investing?  As a long-term investor, I can accept substantial swings in account value  
 I am a long-term investor, but I can only accept modest swings in account value  
 Any declines in account value make me very nervous  
 Other: \_\_\_\_\_

*In the financial crisis of 2007-2009, the US stock market dropped approximately 50% from peak to trough. A \$1 million portfolio with a 60% allocation to stocks would have been reduced to \$700,000 at its lowest point.*

How would you describe your emotional reaction to this period of turmoil?  Scared / Despondent  Calm / Philosophical  
 Anxious / Worried  Other: \_\_\_\_\_

What, if any, action did you actually take in response to what was happening in the financial markets?  Sold stocks / Pulled back from the market  
 Maintained investments / Stayed the course  
 Bought stocks / Added to my portfolio  
 Other: \_\_\_\_\_

Notes:

## 7 Investment Objectives

Check all that apply:

Preservation of capital  Funding living expenses in retirement  
 Current income  Funding significant gifts and/or bequests  
 Preservation of purchasing power  Other: \_\_\_\_\_  
 Capital appreciation

Notes:

Describe any other financial goals (i.e., dreams, bequests, etc.)

Given your stated objectives and tolerance for risk, what long-term average rate of return do you expect from a portfolio that meets these criteria? %

What long-term average rate of return would you expect from a portfolio that assumes a minimal amount of risk? %

## 8 Other Investment Considerations

Projected liquidity/cash requirements (recurring, near-term, or long-term) \$  Monthly  Annually  
 Quarterly  One-time

Marginal tax bracket (approximate) (federal and state combined)  < 15%  15% - 25%  25% - 35%  > 35%

May tax-exempt securities be used where appropriate?

- Yes    I don't know  
 No

Notes:

Do you have any accumulated tax-loss carryforwards?

- Yes    I don't know  
 No

If yes, amount:

**Investment time horizon**

- 1-5 years    5-10 years    10+ years

Other:

Unique restrictions (e.g., any assets which should not or cannot be sold?)

Special legal considerations (e.g., trusts, dual citizenship, etc.)

## 9 Additional Personal Details

CLIENT 1

CLIENT 2

Name

Date of Birth

Social Security Number

Secondary Address

Street

City/State/Zip

Professional Advisors

Accountant  
 Banker  
 Attorney  
 Estate Planner

Children (name, age)

Siblings (name, state/country)

Parents

Grandchildren

Hobbies, favorite charities, and anything else we should know about you

# 10 Recommendations (to be completed by a Gould professional)

- Risk Profile** (check one or two)
- Conservative
  - Moderately Conservative
  - Moderate
  - Moderately Aggressive
  - Aggressive

Notes:

**Investment Objective(s)**

- Current income and preservation of capital, over time.
- Preservation and enhancement of purchasing power of invested capital, over time.
- Moderate income, with potential for some long-term capital appreciation.
- Moderate long-term capital appreciation, with potential for some income.
- Long-term participation in the returns of a specified stock market index, with reduced variability of returns relative to the index.
- Aggressive long-term capital appreciation.

Strategy	Variant	Allocation (\$ or %)	Source of Funds	Fee
Quality Fixed Income	<input type="checkbox"/> Taxable <input type="checkbox"/> Tax-Deferred			%
TargetReturn				%
Diversified Income	<input type="checkbox"/> Taxable <input type="checkbox"/> Tax-Deferred			%
BenchmarkPlus				%
Equity Index Plus				%
Master Limited Partnerships				%
Global Growth & Resources				%
Other: _____				%

**Custodian** \_\_\_\_\_

**ADV & Privacy Policy Received?**

**Employee Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Additional Notes (*suggested PM, primary relationship manager, other*):