New Client Planning Questionnaire

Estimates are fine; skip anything that doesn't apply. Don't include Social Security or full account numbers.
Upload this form and the documents listed at the end to www.encyro.com/shermanfpbs.

About You

Name(s):

Address:

Phone:

Email:

Month and year of birth (each):

Occupation and employer (each):

Marital status:

Children and other dependents (names and birth years):

Goals

1 What prompted you to seek planning now, and what questions do you most want answered?

2 What does financial security look like to you in five years? At retirement?

3 At what age do you each plan to retire?

4 Other goals to plan for (travel, career change, children, home purchase, helping family)

5 How comfortable are you managing your own finances? (very, somewhat, not at all)

Income and Spending

6 Annual income before taxes, by source (salary, bonus, business, rental, Social Security, pension, other)

7 Do you expect your income to change significantly in the next few years?

8 If not yet receiving Social Security, at what age do you plan to start?

9 Expected inheritance or other large sum (amount, timing, and whether you'll spend it or pass it on)

10 Approximate monthly household spending, excluding savings

11 Large expenses expected in the next five years

Saving

12 Annual retirement contributions, and whether you receive the full employer match

13 Other savings goals (goal, target amount, and date)

Assets and Debts

List each with its approximate balance or value, or attach statements instead.

14 Retirement accounts (401(k), 403(b), 457, IRA, Roth, SEP, SIMPLE)

15 Other investment and savings accounts (exclude everyday checking)

16 Pensions (monthly benefit and starting age)

17 Real estate and business interests

18 Debts, including mortgages, credit cards, and 401(k) loans (balance, rate, and monthly payment)

Investments

Also complete the Asset Allocation Questionnaire in your engagement packet.

19 Who manages your investments, and how satisfied are you with them?

20 Expected average annual return in retirement (if you have none in mind, I'll use 4%)

Insurance

21 Life, disability, long-term care, health, and umbrella coverage (type and amount)

22 Health or family circumstances that could affect your plan or long-term care needs

Estate and Taxes

23 Which do you have, and when were they last updated? (will, trust, powers of attorney, guardian for minor children)

24 Tax filing status, and who prepares your return

Business Owners (if applicable)

25 Business name, entity type, and your role

26 Does the business have a retirement plan or cash to invest?

27 Plans to expand, sell, or pass on the business, and timeline

28 Do you need help with bookkeeping or business taxes? (provided separately by Sherman Business Services, LLC, which I also own; no obligation to use it)

Other

29 Any tax audit, lawsuit, or other legal matter I should know about?

30 Anything else I should know?

Documents to Send

Recent federal and state tax returns, statements for each account listed, a recent pay stub and benefits summary, your Social Security statement, pension estimates, insurance policy summaries, wills, trusts, and powers of attorney, and mortgage and loan statements.

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