

## Financial Review Organizer

Please share relevant qualitative and quantitative information so we can offer sound recommendations, investment policy, and financial advice. Review all sections before starting. Attach additional documents and statements if helpful.

Provide us with any updates in the future that might affect your recommendations.

Your confidential sensitive information is handled carefully and according to our strict privacy policy at <https://www.naturalinvestments.com/disclosures-disclaimers/>.

Today's date

Name Birthday

Phone Email

Name Birthday

Phone Email

Street, City State Zip

Preferred methods of communication: in person    phone/video    email

Accountant Attorney

Dependents (Children, Parents, Other)

### Interests, Topics, Priorities

Rate each on a scale of 0 to 3. (from 0=not concerned with now, to 3=very interested in)

<input type="checkbox"/> Sustainable, responsible investing	<input type="checkbox"/> Current income from assets	<input type="checkbox"/> Estate planning
<input type="checkbox"/> Financial Independence, Retire	<input type="checkbox"/> Maximum investment growth	<input type="checkbox"/> Insurance review
<input type="checkbox"/> Portfolio risk assessment	<input type="checkbox"/> Short-term liquidity	<input type="checkbox"/> Tax management
<input type="checkbox"/> Investment diversification	<input type="checkbox"/> Philanthropy	<input type="checkbox"/> Job security
<input type="checkbox"/> Education savings	<input type="checkbox"/> Personal debt management	<input type="checkbox"/> Other:

# Financial Review Organizer

Name

Date

Page 2 of 4

## Goals, Objectives, Purpose

**Core value** What you most want to do, or have your legacy reflect.

**Ought to** What you feel grateful to have received and therefore feel a commitment to give.

**Fun to** What would bring you joy, beauty, entertainment, or fulfillment.

<b>Uses of Your Wealth</b>	<b>Core value</b>	<b>Ought to</b>	<b>Fun to</b>	<b>n/a</b>
Providing for ongoing family needs. Day-to-day living, mortgage, transportation, vacations, children's needs.				
Support for parents, siblings, other family members.				
Leaving an inheritance for children, family, or organizations.				
Adjusting lifestyle: voluntarism, travel, different home, hobby.				
Supporting a change in work or career.				
Actualizing a different direction for life.				
Adjusting level of philanthropy and giving.				

## Investment & Financial Assets (individual, joint, trust, IRA, retirement, etc.)

Title & Type Account or investment Name Recent \$ Value (or attach statements)

Indicate with "LB" if there are significant unrealized gains (**Low** cost **Basis** compared with recent value).

## Liabilities (mortgage, loan, charge, debts)

Company Name & Type Interest Rate % \$ Payment/Month \$ Balance Due

## Health, Life, Disability, Long-term Care Insurance

Carrier Name & Type Benefit Amount and Limit

Date Reviewed with Agent

# Financial Review Organizer

Name

Date

Page 3 of 4

## Property & Casualty Insurance (Auto, Home, Umbrella, Liability)

Name of Carrier & Type

Benefit Amount and Limit

Date Reviewed with Agent

## Income Sources—Annual Estimates

(Gross salary, pension, Social Security, investment income, net business income after expenses, etc.)

Type	Employer or Source	Last Year	This Year	Next Year
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## Expenses—Monthly Estimates

	<u>Average</u> <u>\$/month</u>		<u>Average</u> <u>\$/month</u>
<u>Fixed Essentials</u>		<u>Variable</u>	
Housing & Household Operations		Federal Taxes	
Food (groceries)		State/Local Taxes	
Health & Medical Care		Transportation	
Utilities		Recreation & Travel	
Other	_____	Other	_____
Fixed		Variable	

Fixed + Variable = \_\_\_\_\_ x 12 = \_\_\_\_\_/year

## Financial Independence/Retirement (if applicable)

Amount contributing towards financial independence each year

Age you became (or would like to become) financially independent/retired

Age through which you might want to live on investments and pensions

Monthly income, in today's dollars, that would make you comfortable

## Estate Planning, Philanthropy, Legacy

Will last updated

Trust last updated

Cohabitation agreement

Living Will, Medical Directives

Durable Power of Attorney date

Major changes since these documents were prepared.

Philanthropy history, goals, legacy, ideas. Organizations associated with.

# Financial Review Organizer

Name

Date

Page 4 of 4

## On the Horizon

Likely significant *changes* in your assets, liabilities, income, expenses, estate planning

## Money Style & Experience

How was your experience with other financial advisers? (CPA, unpaid friend, family, etc.)

How often (monthly, quarterly, or annually) do you review...

Investing

Insurance

Financial Planning

Have there been any financial services or investing experiences you regretted or were *dissatisfied* with?

Have there been any financial services or investing experiences you were *satisfied* with?

## Other Info & Topics

What else do you wish to share that might be helpful? Or topics we might discuss together?