



THE R.I.S.K. QUESTIONNAIRE

RETIREMENT INCOME SURVIVAL KIT

CLIENT INFORMATION

	Name	Gender	Date of Birth	State of Residence	Use of Tobacco Products	Projected Retirement Age
Client						
Spouse						

GENERAL ASSUMPTIONS

Post Retirement Tax Rate		Inflation Assumption	
Current Tax Rate		Social Security Cost of Living Adjustment	

RETIREMENT INCOME GOALS

	Estimated Amount
What is your current retirement savings from all sources?	\$
How much do you plan to save annually until you retire? (401(k), IRA, Roth, etc.)	\$
What dollar amount do you plan to spend per year in retirement? (Sum of a+b+c below)	\$
a. What amount will fund your needs (e.g. utilities, taxes, food, shelter, healthcare, debt payments)	\$
b. What amount will fund your wants (e.g. new car every 5 years, entertainment)	\$

RETIREMENT RESOURCES

INCOME SOURCES

Type	Income (Yearly)	Owner	Age Income Begins	Inflation Adjustment
Social Security (Primary)				
Social Security (Spouse)				
Pension				
Other (e.g. rental property, oil/gas royalties, part-time work,)				
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INVESTIBLE ASSETS

Account Name	Owner	Account Value / Protected Value	Approx: Equity % / Fixed %	Qualified / Non-Qualified

RISK MANAGEMENT

Type	Premium	Cash Value	Benefits
Life Insurance			
Long Term Care			
Other (Hybrid LTC, DI, etc.)			

RETIREMENT PRIORITIES

My primary retirement objective is to maximize: <u>Lifestyle</u> or <u>Legacy</u> . (Circle One)			
If necessary, are you willing to reduce your standard of living in order to reach your legacy goals?			Yes No
If leaving a legacy is important to you, what amount of funds would you like to leave to each of the following at death?			
	Family	Charity	Other
Dollar Amount			
Comments / Notes:			

RETIREMENT RISK ASSESSMENT

PLEASE RANK THE RISKS BELOW FROM 1 - 8 WITH THE HIGHEST PRIORITY BEING 1 (PLEASE USE EACH NUMBER ONLY ONCE)	Rank
MARKET: <i>The risk I could lose all or a significant portion of my money invested in the market.</i>	
SEQUENCE OF RETURNS: <i>The risk of retiring in the wrong year (e.g. retiring just before the Great Depression, Mortgage Crisis)</i>	
LONGEVITY: <i>The risk I will outlive the assets I have set aside for retirement.</i>	
HEALTH: <i>The risk I will be forced to deplete a significant portion of my assets in order to pay for long term care.</i>	
INFLATION: <i>The risk that the cost of goods and services will increase over time.</i>	
LIQUIDITY: <i>The risk my current portfolio provides me limited or no flexibility when unexpected needs arise.</i>	
LEGACY: <i>The risk of not being able to leave a financial legacy to the people or organizations I care about most.</i>	
TAXATION: <i>The risk that tax laws could change, causing a negative impact on the resources used to fund my income needs.</i>	

DO YOU FEEL YOUR PORTFOLIO ADEQUATELY ADDRESSES THE FOLLOWING RISKS? (ANSWER YES OR NO)			
MARKET		INFLATION	
SEQUENCE OF RETURNS		LIQUIDITY	
LONGEVITY		LEGACY	
HEALTH		TAXATION	

NOTES/COMMENTS

Each of the questions in this questionnaire have been purposefully written to gather specific information needed to design your custom R.I.S.K. Blueprint™. For compliance reasons, we are unable to design a R.I.S.K. Blueprint™ until we have a R.I.S.K. Questionnaire™ completed in its entirety (each field must have a response).

