Morgan Stanley

Matthew Landry
Executive Director
Financial Advisor
55 East 52nd Street 28th Floor
New York, NY 10055
212-883-8537

The Alpha Bridge Group

Client Profile Questionnaire

The first step in creating a personalized financial strategy is to develop a thorough understanding of your personal financial goals and the resources available to fund them. This document will help define and prioritize these goals and identify your resources.

1. Personal Information

Client Name	**Co-Client Name**
Date of Birth	Date of Birth
Gender ☐ Male ☐ Female	Gender ☐ Male ☐ Female
Marital Status ☐ Single ☐ Widow/Widower ☐ Married ☐ Domestic Partners	Marital Status ☐ Single ☐ Widow/Widower ☐ Married ☐ Domestic Partners
Employment Status ☐ Retired ☐ Employed ☐ Business Owner ☐ Not Currently Employed	Employment Status ☐ Retired ☐ Employed ☐ Business Owner ☐ Not Currently Employed
Employment Income $	Employment Income $
Other Income *(details in section 3)*	Other Income *(details in section three)*
State of Residence	State of Residence

2. Defining Financial Goals

Retirement Goals

Desired Retirement Age *The age at which you would like to retire, if applicable* **Client**	Desired Retirement Age *The age at which you would like to retire, if applicable* **Co-Client**
Willingness to Retire Later to Attain Goals? (if necessary) ☐ Not at All Willing ☐ Slightly Willing ☐ Somewhat Willing ☐ Very Willing	Willingness to Retire Later to Attain Goals? (if necessary) ☐ Not at All Willing ☐ Slightly Willing ☐ Somewhat Willing ☐ Very Willing
Desired Income Amount (After Tax) per year $	

Education Goals

Importance High-Low (10-1)	**Description**	**Student/Dependent Name**	**Desired Amount (After Tax)**	**Start Date**	**Number of Years**
			$		
			$		
			$		
			$		

Other Financial Goals

Importance High-Low (10-1)	**Description (Purchase, gift, investment)**	**Start**	**Desired Amount (After Tax)**	**Number of Years**
		At Retirement Year: _______	$	
		At Retirement Year: _______	$	
		At Retirement Year: _______	$	
		At Retirement Year: _______	$	
		At Retirement Year: _______	$	

3. Resources

Other Income *(e.g. from a Pension, Annuity, Trust, Social Security, Part-Time Work, Rental Property Income, Divs/Interest)*

Description	Owner	Amount/ Month	Year It Begins	Year it Ends	Will This Benefit Increase with Inflation?
		$			☐ Yes ☐ No
		$			☐ Yes ☐ No
		$			☐ Yes ☐ No
		$			☐ Yes ☐ No

Assets Held at Other Financial Institutions
(Please provide copies of the most recent account statements or attach them to this profile.)

Taxable and Individual Retirement Accounts *(e.g. Brokerage Accounts, Savings Accounts, Annuities, IRAs, Roth IRAs, Other Tax-Deferred Accounts)*

Description	Account Type	Owner	Value	Annual Savings
			$	$
			$	$
			$	$
			$	$
			$	$

Employer-Sponsored Retirement Accounts

Description	Account Type	Owner	Value	Annual Contributions	Employer Match
			$	$	
			$	$	
			$	$	
			$	$	

Other Assets *(Residences, Employee Stock Options, Personal Property, Vehicles, Businesses, Real Estate, Related Trust Entities & Other)*

Description	Value
	$
	$
	$
	$
	$

Life Insurance

Insured Name	Term/Whole	Death Benefit	H-12 in Trust
		$	☐ Yes ☐ No
		$	☐ Yes ☐ No
		$	☐ Yes ☐ No
		$	☐ Yes ☐ No

4. Liabilities

Include information regarding any outstanding liabilities you may have. *(e.g. Home Mortgages, Car Loans, Student Loans, Personal Loans, etc.)*

Description	Loan Type (fixed, adjustable, interest only)	Initial Amount	Start Date	Balance	Interest Rate %	Term	Monthly Payment
		$		$			$
		$		$			$
		$		$			$
		$		$			$
		$		$			$
		$		$			$

Additional Information: