



Client Questionnaire

**WHILE YOU'RE TAKING CARE
OF YOUR COMPANY'S FUTURE,
WE'RE TAKING CARE OF YOURS.**

The Office of the Foothills Group at Morgan Stanley

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Prepared by:

The Foothills Group of Morgan Stanley

The Foothills Group

The Foothills Group is dedicated to working exclusively with corporate executives and their families. While you are busy managing your company's future, The Foothills Group focuses on helping take care of yours by:

- Aligning your corporate wealth-building tools and benefits with your personal financial goals
- Providing you a professional network of experts to create solutions for your estate and tax planning needs
- Delivering a time-efficient process to monitor and review your wealth planning goals

Our Experience

As a corporate executive, you face many complex challenges. Often, the demands of your job leave you little time to focus on your personal financial plan. The Foothills Group understands these complexities and has the experience to combine many issues into a comprehensive strategy designed to help achieve your short-term and long-term financial goals.

Being employed at a publicly traded company, you face unique challenges when creating and managing your personal financial plan. Issues such as stock option planning, regulatory and company trading restrictions, and concentrations in company stock are very common. Some of the strategies can be complicated, requiring navigation through various legal, tax, and estate planning concepts. The Foothills Group has the proficiency to help determine which planning techniques and strategies can be implemented in an effort to achieve your long-term financial objectives.

Our Services

- Financial Planning
- Estate Planning Strategies
- Tax Planning Strategies
- Insurance Planning
- Continuity Planning
- Lending
- Social Security Planning

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Find Us Online

WEBSITE

advisor.morganstanley.com/foothills-group-of-morgan-stanley

Client Questionnaire

General Information

CLIENT 1

Client Name _____

Date of Birth _____

Home Address _____

Home Phone _____

CLIENT 2

Spouse Name _____

Date of Birth _____

City _____ State _____ Zip _____

E-mail Address _____

Employment Data

CLIENT 1

Employer _____

\$ _____
Annual Income

\$ _____
Additional Income From _____

Estimated Retirement Date _____ Age _____

\$ _____
Social Security Income (Self) At Age _____

\$ _____
Retirement Income Needed

CLIENT 2

Employer _____

\$ _____
Annual Income

\$ _____
Additional Income From _____

Estimated Retirement Date _____ Age _____

\$ _____
Social Security Income (Spouse) At Age _____

before or after tax

Participants

LIST ANY CHILDREN, GRANDCHILDREN, OR DEPENDENTS.

1) _____
Name DOB Relationship

3) _____
Name DOB Relationship

2) _____
Name DOB Relationship

4) _____
Name DOB Relationship

Assets

Please complete the following information in the designated spaces or simply provide us with copies of statements or your household summary sheet if you prefer.

Retirement Plans

401K INFORMATION

\$		\$	
Value of 401K, 403B, Profit Sharing Plan (Self)		(Spouse)	
\$	%	\$	%
Projected Annual Contribution (Self)		(Spouse)	
\$	%	\$	%
Company Match (Self)		(Spouse)	
\$		\$	%
Value of Deferred Compensation (Self)		Contribution	Match
\$		\$	%
Value of Deferred Compensation (Spouse)		Contribution	Match

BALANCES OF RETIREMENT ACCOUNTS

\$		\$	
Total Value of Existing Traditional IRAs (Self)		(Spouse)	
\$		\$	
Total Value of Roth IRAs (Self)		(Spouse)	
\$	<input type="checkbox"/> Roth <input type="checkbox"/> Traditional	\$	<input type="checkbox"/> Roth <input type="checkbox"/> Traditional
Annual IRA Contribution (Self)		(Spouse)	
\$	<input type="checkbox"/> Roth <input type="checkbox"/> Traditional	\$	<input type="checkbox"/> Roth <input type="checkbox"/> Traditional
Total Annuity Balance (Self)		(Spouse)	
\$		\$	
Pension Lump Sum Amount (Self)	At Age	(Spouse)	At Age
\$		\$	
Pension Monthly Payment Amount (Self)	At Age	(Spouse)	At Age

Non-Retirement Assets

ACCOUNT (E.G., "STOCK ACCOUNT AT PNC")

Account Name _____

\$ _____

Value _____

_____ %	_____ %	_____ %	_____ %
Stocks	Bonds	Alternatives	Cash

ACCOUNT (E.G., "STOCK ACCOUNT AT PNC")

Account Name _____

\$ _____

Value _____

_____ %	_____ %	_____ %	_____ %
Stocks	Bonds	Alternatives	Cash

ACCOUNT (E.G., "STOCK ACCOUNT AT PNC")

Account Name _____

\$ _____

Value _____

_____ %	_____ %	_____ %	_____ %
Stocks	Bonds	Alternatives	Cash

ACCOUNT (E.G., "STOCK ACCOUNT AT PNC")

Account Name _____

\$ _____

Value _____

_____ %	_____ %	_____ %	_____ %
Stocks	Bonds	Alternatives	Cash

Life Insurance

Do you have insurance through your employer?

Yes No

Amount as a multiple of salary: 1x 2x 3x 5x 6x

Does your spouse have insurance through his/her employer?

Yes No

Amount as a multiple of salary: 1x 2x 3x 5x 6x

Do you currently have life insurance outside your employer? If so, indicate below:

TYPE (CHECK ONE)	OWNER	CASH VALUE (IF ANY)	DEATH BENEFIT	PREMIUM
<input type="checkbox"/> Whole Life <input type="checkbox"/> Variable Life <input type="checkbox"/> Term	_____	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Whole Life <input type="checkbox"/> Variable Life <input type="checkbox"/> Term	_____	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Whole Life <input type="checkbox"/> Variable Life <input type="checkbox"/> Term	_____	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Whole Life <input type="checkbox"/> Variable Life <input type="checkbox"/> Term	_____	\$ _____	\$ _____	\$ _____

Do you have Umbrella Liability Insurance? Yes No

If yes, amount: _____

Do you have Long Term Care Insurance? Yes No

If yes, premium: _____

College Savings Accounts

1) _____ 2) _____ 3) _____ 4) _____

Equity Compensation

Please attach statement if Equity Compensation Plan is not held at Morgan Stanley.

Personal Real Estate Assets

PRIMARY RESIDENCE

Residence Name _____

Owner _____

\$ _____ \$ _____
Purchase Amount Current Market Value

Do you anticipate selling this home? Yes No

\$ _____
Date of Anticipated Sale Property tax amount

SECONDARY RESIDENCE

Residence Name _____

Owner _____

\$ _____ \$ _____
Purchase Amount Current Market Value

Do you anticipate selling this home? Yes No

\$ _____
Date of Anticipated Sale Property tax amount

PRIMARY RESIDENCE MORTGAGE

Product Type (check one):

- Adjustable: 1yr 2yr 3yr
- Fixed: 10yr 15yr 30yr

\$ _____
Annual Interest Rate Remaining Balance

\$ _____
Purchase Date (mm/yy) Monthly Mortgage Payment

SECONDARY RESIDENCE MORTGAGE

Product Type (check one):

- Adjustable: 1yr 2yr 3yr
- Fixed: 10yr 15yr 30yr

\$ _____
Annual Interest Rate Remaining Balance

\$ _____
Purchase Date (mm/yy) Monthly Mortgage Payment

Investment Real Estate Assets

PROPERTY 1

Property Name

Owner

\$ _____ \$ _____
Purchase Amount Current Market Value

\$ _____
Net Rental Income

Do you anticipate selling this asset? Yes No

Date of Anticipated Sale

\$ _____
Property Tax Amount

PROPERTY 1 MORTGAGE

Product Type (check one):

- Adjustable: 1yr 2yr 3yr
- Fixed: 10yr 15yr 30yr

\$ _____
Annual Interest Rate Remaining Balance

\$ _____
Purchase Date (mm/yy) Monthly Mortgage Payment

PROPERTY 2

Property Name

Owner

\$ _____ \$ _____
Purchase Amount Current Market Value

\$ _____
Net Rental Income

Do you anticipate selling this asset? Yes No

Date of Anticipated Sale

\$ _____
Property Tax Amount

PROPERTY 2 MORTGAGE

Product Type (check one):

- Adjustable: 1yr 2yr 3yr
- Fixed: 10yr 15yr 30yr

\$ _____
Annual Interest Rate Remaining Balance

\$ _____
Purchase Date (mm/yy) Monthly Mortgage Payment

HOME EQUITY LOC

Do you have a line of credit on your property? Yes No

\$ _____ \$ _____
If yes, which property? Balance Annual Interest Rate

\$ _____
Monthly Payment Available credit line?

Do you plan to buy a vacation home or another property in the future? Yes No

\$ _____
When? Where? Estimated Cost

Other Liabilities

Debt

CREDIT CARDS

\$	%	\$	\$
	APR	Minimum Payment	Monthly Payment
\$	%	\$	\$
	APR	Minimum Payment	Monthly Payment
\$	%	\$	\$
	APR	Minimum Payment	Monthly Payment
\$	%	\$	\$
	APR	Minimum Payment	Monthly Payment

CARS

\$	%	\$	
	APR	Payment	Finish Date (mm/yy)
\$	%	\$	
	APR	Payment	Finish Date (mm/yy)
\$	%	\$	
	APR	Payment	Finish Date (mm/yy)
\$	%	\$	
	APR	Payment	Finish Date (mm/yy)

STUDENT LOANS, PERSONAL LOANS

\$	%	\$	
	APR	Payment	Finish Date (mm/yy)
\$	%	\$	
	APR	Payment	Finish Date (mm/yy)
\$	%	\$	
	APR	Payment	Finish Date (mm/yy)
\$	%	\$	
	APR	Payment	Finish Date (mm/yy)

Morgan Stanley Smith Barney LLC ("Morgan Stanley"), its affiliates, and Morgan Stanley Financial Advisors or Private Wealth Advisors do not provide tax or legal advice. Clients should consult their tax advisor for matters involving taxation and tax planning and their attorney for matters involving trust and estate planning and other legal matters.

Objectives

Investment Objectives

WHAT IS YOUR TIMELINE TO ACCOMPLISH YOUR INVESTMENT OBJECTIVES OR GOALS?

Short-term objectives (1–5 years)

Medium-term objectives (6–10 years)

Long-term objectives (11–20 years)

WHAT ARE YOUR GOALS FOR RETIREMENT? (LIFESTYLE, VALUES, CHARITY, INTERESTS, TRAVEL, ETC.)

- 1) _____
- 2) _____
- 3) _____

RISK TOLERANCE (CHECK ONE):

- Conservative (0 to 25% in stocks)
- Conservative/Moderate (25 to 40% in stocks)
- Moderate (40 to 55% in stocks)
- Moderate/Aggressive (55 to 65% in stocks)
- Aggressive (over 65% in stocks)

ADVISOR INFORMATION

Insurance agent _____ CPA _____

Attorney _____ Other financial advisor _____

Do you have a current will? Yes No

Do you have a current Trust? Yes No

TELL US ABOUT YOURSELF.

What are your financial goals or concerns? What are your expectations of your financial advisor?

Please complete and return to:

The Foothills Group at Morgan Stanley

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foothillsgroup@morganstanley.com



Clients executing a 10b5-1 Plan should keep the following important considerations in mind: (1) 10b5-1 Plans should be approved by the compliance officer or general counsel of the company; (2) A 10b5-1 Plan may require a cessation of trading activities at times when lockups may be necessary to the company (i.e. secondary offerings, pooling transactions, etc.); (3) A 10b5-1 Plan does not generally alter the regulatory requirements (e.g. Rule 144, Section 16, Section 13D) that may otherwise be applicable; (4) 10b5-1 Plans that are modified or terminated early may weaken or lose the benefit of the affirmative defense; (5) Public disclosure of 10b5-1 Plans (e.g., via press release) may be appropriate for some insiders; (6) Most companies will permit 10b5-1 Plans to be implemented only during open window periods; and (7) Morgan Stanley Smith Barney, as well as some issuers, imposes a mandatory waiting period between the execution of the 10b5-1 Plan and the first sale pursuant to the 10b5-1 Plan.

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