

Client Fact Finder

Confidential client and household profile



SOMERSET
WEALTH STRATEGIES

Date

Personal and family information

OWNER / CLIENT

Last name	First name	Middle
Date of birth (MM/DD/YYYY)	Social Security number	Sex
Phone	Entity (if applicable)	Tax status
Relationship to annuitant(s) (if applicable)		

JOINT OWNER / SPOUSE OR DOMESTIC PARTNER

Last name	First name	Middle
Date of birth (MM/DD/YYYY)	Social Security number	Sex
Phone	Entity (if applicable)	Tax status
Relationship to annuitant(s) (if applicable)		

CHILDREN / DEPENDENTS

Name	Date of birth	Relationship	Notes

Residence information

Street address			
City, state, ZIP		Home phone	
☐ Own	☐ Rent	Monthly payment	
		Mortgage balance	

Legal and financial professional information

Client will	Date		Type / notes	
Joint owner will	Date		Type / notes	
Client trust	Date		Type / notes	
Joint owner trust	Date		Type / notes	
Attorney			Phone	
Accountant			Phone	

Employment & Income

Owner, joint owner and household financial profile

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Employment information

OWNER / CLIENT

Employment status (check one) ☐ Employed ☐ Self-employed ☐ Unemployed ☐ Retired ☐ Homemaker ☐ Disabled ☐ Student

Occupation (or former, if retired)

Employer

JOINT OWNER / SPOUSE OR DOMESTIC PARTNER

Employment status (check one) ☐ Employed ☐ Self-employed ☐ Unemployed ☐ Retired ☐ Homemaker ☐ Disabled ☐ Student

Occupation (or former, if retired)

Employer

Income and cash-flow information

Owner annual income

Joint owner annual income

Annual household income

Annual household expenses

Federal Income Tax Bracket:

☐ 0% ☐ 10% ☐ 12% ☐ 15% ☐ 22% ☐ 24% ☐ 32% ☐ 35% ☐ 37%+

OWNER'S SOURCES OF INCOME - CHECK ALL THAT APPLY

- | | | |
|---|--|---|
| ☐ Household wages/salary | ☐ 401(k)/pension plan | ☐ Social Security (not disability) |
| ☐ Rental income | ☐ 403(b) | ☐ Investment income/RMDs |
| ☐ Disability | ☐ Unemployment | ☐ Severance |
| ☐ Child support | ☐ Alimony | ☐ Business income |
| ☐ None | | |

For disability, unemployment, severance, child support or alimony, provide the monthly amount received and how long the income is expected to continue.

Monthly amount

Expected duration

☐ Years

☐ Months

Household means the applicant and the applicant's spouse or domestic partner, as applicable by state law.

Household Financial Information

Liquid assets, non-liquid assets and liabilities



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Instructions

- Complete all amounts using household financials. For personal accounts, exclude business assets; for business accounts, exclude personal assets.
- Do not include the primary residence or land, automobiles, or personal property in the asset totals below.
- For annuities, enter the higher of accumulated value or surrender value in the appropriate section.
- Do not leave items blank. Enter 0, N/A or -- where appropriate.

F1. HOUSEHOLD LIQUID ASSETS		F2. HOUSEHOLD NON-LIQUID ASSETS	
Checking / savings	\$	Cash value of life insurance	\$
IRA - non-annuity (age 59 1/2 or above)	\$	IRA - non-annuity (under age 59 1/2; include B shares)	\$
Certificates of deposit	\$	Real estate equity (exclude primary residence / home / land)	\$
403(b) / 457(b) mutual funds	\$	403(b) / 457(b) mutual funds	\$
Stocks / bonds / mutual funds	\$	Annuities in surrender term (all ages)	\$
Annuities out of surrender term (age 59 1/2 or above)	\$	Annuities out of surrender term (under age 59 1/2)	\$
401(k) or TSP (age 59 1/2 or above and separated from service)	\$	401(k) or TSP (under age 59 1/2 and/or not separated from service)	\$
Alternative investments / private placements / promissory notes	\$	Alternative investments / private placements / promissory notes	\$
Money market / brokerage account	\$	Other - list source 	\$
Cash / precious metals (excluding jewelry and coins)	\$	Other - list source 	\$
F1 total liquid assets		F2 total non-liquid assets	
F3 total household liabilities / debt	(exclude primary-residence mortgage and automobile debt)		
Household existing assets (F1 + F2 - F3)			

Insurance Information

Existing life, disability, health and property coverage

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Life insurance

Insured	Company	Policy number	Policy date	Face amount	Annual premium	Beneficiary

Total existing life-insurance face amount

Total cash value

Other insurance

Monthly disability benefit - ClientJoint ownerOther

Health insurance - Client carrier / planJoint owner carrier / plan

P&C expiration dates - AutoHomeownersOther

Coverage notes

Planning Priorities

Indicate the importance of each planning objective



Planning priorities

Planning objective	High	Medium	Low	None
Protecting family's lifestyle	☐	☐	☐	☐
Protecting income	☐	☐	☐	☐
Providing education funds	☐	☐	☐	☐
Implementing a savings plan	☐	☐	☐	☐
Planning for retirement	☐	☐	☐	☐
Minimizing estate shrinkage	☐	☐	☐	☐
Planning for business continuation	☐	☐	☐	☐
Lowering income taxes	☐	☐	☐	☐
Hedging inflation	☐	☐	☐	☐
Peace of mind	☐	☐	☐	☐
Assuring proper disposition of assets	☐	☐	☐	☐
Increasing current income	☐	☐	☐	☐
Other	☐	☐	☐	☐

Additional planning objectives or concerns

Insurance & Annuity Details

Supplemental contract information

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WEALTH STRATEGIES

Annuity contract information

List all fixed, fixed indexed, variable, immediate and deferred annuity contracts.

Owner / annuitant	Carrier	Contract number	Product type	Issue date	Current value	Income / rider	Surrender value

Contract features and planning notes

Planning objective, income needs, liquidity considerations or additional notes

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