BLUEWATER
CAPITAL MANAGEMENT, LLC

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Initial Questionnaire

Please complete this questionnaire and give us a few times that are convenient for you. We will follow up within 1 business day. It should only take a few minutes. Thank you for your time as this information will help us run our meeting more efficiently.

	Date	Time
1st Preference:		
2nd Preference:		
3rd Preference:		

Name(s) ______________________________ ______________________________

Ages(s) ______________________________ ______________________________

Phone ______________________________ ______________________________

Email ______________________________ ______________________________

Occupation: ______________________________ ______________________________

Household Income Range: ☐ Less than $125,000 ☐ $125,000 - $250,000 ☐ Over $250,000

If you have children that will be part of the planning, what are their ages: ______________________

How did you hear of our firm? ____

Are you currently working with another financial advisor? ☐ Yes ☐ No

Summary of Assets *(estimates are fine)*

Bank Accounts

Checking/Savings/CDs ________________ ________________

Retirement Accounts

Employer Retirement Plans (401k, 403b) ________________ ________________

IRAs ________________ ________________

Roth IRAs ________________ ________________

Investment Accounts

Taxable Investments (Joint, etc.)	________________	________________
Stock Options / Restricted Stock Units	________________	________________
529 Plans	________________	________________
Other: ______________________	________________	________________

Other Major Assets / Debt

Residence	________________	Primary Mortgage	________________
Rental Properties	________________	Other Mortgages	________________
Businesses	________________	Auto Loans	________________
Other Major Assets	________________	Other Debt	________________

When would you like to retire? What are your plans?

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Are there any other financial goals that are important to you? (to not run out of money in retirement, maintain standard of living, retire at a certain age, education funding, leave a legacy etc.)

1) ____

2) ____

3) ____

4) ____

5) ____

6) ____

What do you feel are the biggest risks or roadblocks you face in achieving your financial goals?

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What particular topics and services would you like to discuss?

- ☐ Retirement Planning
- ☐ Lifetime Income
- ☐ College Funding
- ☐ Portfolio Allocation / Investments
- ☐ Stock Options / RSUs
- ☐ Real Estate / Business Interests
- ☐ Cash / Debt Management
- ☐ Life Insurance
- ☐ Other Insurance
- ☐ Tax Reduction
- ☐ Wills / Trusts / Estate Planning
- ☐ Philanthropy / Charitable Giving

Financial Planning Services

- ☐ My situation is not too complicated, I'd like a general overall financial plan.
- ☐ I'd like an overall plan, but my situation is more complex. (large assets, stock options, RSUs, rental real estate, business ownership, estate planning issues)
- ☐ I'm mainly interested in a retirement plan. (if you're wondering "here's what I have, here's what I'd like to do - will it work? and how do I make it last?")
- ☐ Other: ____

Investment Portfolio Services

What are your thoughts on the management of your investment portfolio?

- ☐ I'd prefer professional investment management
- ☐ I might want professional investment management
- ☐ Unsure
- ☐ I might want to invest myself
- ☐ I definitely want to invest myself

Any other information you'd like to share?

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Thank you for completing the questionnaire. We look forward to talking to you.