Gebhart & Associates, Inc.
Registered Investment Advisor

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Confidential Client Profile

Gebhart & Associates, Inc.
Registered Investment Advisor

This profile will provide Gebhart & Associates, Inc. with the preliminary information regarding your financial situation. We will obtain more detailed information from you about your finances, investments objectives, and time horizon so that we can make an appropriate recommendation.

Account Holder Information

Client Name ______________________________ SS#____________________

Nickname ________________ Date of Birth __________ State of Birth_____

Spouse Name ______________________________ SS#____________________

Nickname ________________ Date of Birth __________ State of Birth_____

Marital Status ☐Single ☐Married ☐Divorced ☐Widowed

Mailing Address ____

City ____________________________ State __________ Zip __________

Client's Driver's License # _____________ Spouse's Driver's License#________

Home Phone (_____) ________________ Email _________________________

Client's Employer:

Name ___________________________

Address_________________________

City, State, Zip___________________

Business Phone (_____)____________

Business Fax (_____)______________

Occupation_______________________
(prior to retirement if retired)

Spouse's Employer:

Name___________________________

Address_________________________

City, State, Zip___________________

Business Phone (_____)____________

Business Fax (_____)______________

Occupation_______________________
(prior to retirement if retired)

Number of Dependents __________

Do you have a current will? Y___ N___ Living Trust? Y___ N___

Are you concerned about possible Nursing Home Expenses? Y___ N___

Planned retirement date ________________, or if retired, date retired ________________

Mail correspondence to ☐Home ☐Business ☐Secondary Residence ☐Other

Fax correspondence to ☐Home ☐Business ☐Secondary Residence ☐Other

Call me at home between________and________ Call me at work between________and________

Please Initial: ________ / ________

Personal Balance Sheet

Use this worksheet to calculate your net worth. This will help us to better understand your current financial situation.

Cash & Cash Equivalents (includes checking, savings, CD's, money market)

	Approx Account Balance	Type of Account	Name & Address of Institution	Maturity Date	Interest Rate
1.					
2.					
3.					
4.					

IRA Accounts and Other Retirement Accounts (please bring your latest reports/statements

	Account Type & Location (for example: bank, broker, employer, etc.)	Type of Account (IRA, 401K TSA etc.)	Approx. Market Value
1.			
2.			
3.			
4.			

Stocks and bonds (Where you hold certificates yourself)

	Name of Stock/Bond	Number of Shares	Approx. Market Value
1.			
2.			
3.			
4.			

Mutual Funds and or Brokerage Accounts (please bring your latest statements)

	Name of Brokerage Firm/Mutual Fund	Number of shares	Approx. Market Value
1.			
2.			
3.			
4.			

Please Initial: ________ / ________

Promissory Notes & Trust Deeds (Where someone owes or is paying you a Note)

Name of Debtor	Interest Rate	Approx. Balance
1. ______________	______%	______________
2. ______________	______%	______________

Residence & Other Real Estate Owned (Use another sheet if more space is needed)

Property Address	Original Cost	Approx. Value	Debt	Net Cash flow before depreciation (of rental)
1.				
2.				
3.				
4.				

Limited or General Partnerships

Name of Partnership	Type of Investment	Approx. Market Value
1.		
2.		
3.		

Life Insurance

Company	Name of Insured	Type of Life Insurance (whole, Term, Etc.)	Approx. Death Benefit	Loan Against?
1.				
2.				
3.				
4.				

Please Initial: ________ / ________

Annuities (please bring in contracts and latest statements)

Company	Annuitant Owner	Interest Rate	Approx. Value	Loan Against?
1. ______	______	______%	______	______
2. ______	______	______%	______	______
3. ______	______	______%	______	______

Other Assets

1. ______________________ $ ______________
2. ______________________ $ ______________
3. ______________________ $ ______________

Loans (home, auto, personal) & credit card debt

Name of debtor	Interest Rate	Original Amount	Approx. Balance	Monthly Payment
1. ______	______%	______	______	______
2. ______	______%	______	______	______
3. ______	______%	______	______	______
4. ______	______%	______	______	______

Household Cash Flow

Husband's Wages: $______________ Source: ______________

Wifes's Wages: $______________ Source: ______________

Other Income: $______________ Source: ______________

What are your approximate annual expenses? ____________

What is your federal tax rate? ☐ 0-15% ☐ 0-15% ☐ 25% ☐ 28% % ☐ 33% ☐ 35%

What is your state tax rate?
☐ 0% ☐ 1% ☐ 2% ☐ 3% ☐ 4% ☐ 5% ☐ 6% ☐ 7% ☐ 8% ☐ 9% ☐ 10% ☐ 11% ☐ 12%

Do you have any tax-related issues to be taken into consideration when managing your portfolio? Y N

If yes, please explain:

Approximately what percentage of your total liquid assets will Gebhart & Associates, Inc. be managing? ________%

Please Initial: ________ / ________

Retirement & Withdrawal Information

Do you have other accounts you plan to draw income from upon retirement (e.g. pension plan)? Y N

Current Total Value $ ____________________

Anticipated Annual Income $ ____________________

Account Withdrawals:
Gebhart & Associates, Inc. Account (s) and Other Account (s)

	Start Date	Frequency	Annual Amount	# Years	% Account
1.					
2.					
3.					
4.					

Restrictions and Unique Needs

Are you, or any account holders, a director, officer, or 10% or greater shareholder in a publicly traded company? Y N

If yes, please list the company or companies: ____________________

Are you considering mandating limitations to holding specific asset classes in the portfolio? Y N

Are you considering any restrictions on certain securities or industry groups? Y N

During the last 12 months, how many times would you estimate you bought or sold mutual funds or individual securities?
☐ 0 ☐ 1-5 ☐ 5-10 ☐ 11-25 ☐ 26-50 ☐ 51+

Approximately how often do you check the value of your investments?
☐ Once a year ☐ Several times a year ☐ Quarterly ☐ Monthly ☐Weekly ☐Daily

Please indicate the number of years of investment experience for each category (Enter 0 if none) __________
Equities __________ Bonds __________ Futures __________ Options __________ Other __________

Have you ever had any litigation or arbitration? Y N

Financial Statements

IMPORTANT: PLEASE ATTACH A COPY OF YOUR MOST RECENT BROKERAGE STATEMENTS, LIFE INSURANCE STATEMENT, ANNUITY STATEMENT & LAST YEARS TAX RETURN

Please Initial: ________ / ________

Financial Goals

What are your primary financial concerns? (List in order of importance)

____

____

____

____

____

How would you improve your financial situation if you could? And Why?

____

____

____

____

____

Acknowledgment

BY SIGNING BELOW, I (WE) AM (ARE) ACKNOWLEDGING THAT I (WE) HAVE READ AND REVIEWED THIS CONFIDENTIAL CLIENT PROFILE AND THAT THE INFORMATION CONTAINED HEREIN IS TRUTHFUL & ACCURATE.

Signature: ______________________	Signature: ______________________
Name: ______________________	Name: ______________________
Date: ____________ (mm/dd/yyyy)	Date: ____________ mm/dd/yyyy

Gebhart & Associates, Inc. does not provide tax advice. Investment advisory clients should obtain the advice of a tax professional regarding the tax aspects of owning a securities investment account and the manner of its ownership, including the treatment of income, gains, and the effect of the death of an account owner.

Please Initial: ________ / ________