



T h e W e a l t h P r o t e c t i o n R e p o r t



SWISSGUARD
i n t e r n a t i o n a l



All information entered is considered
personal and confidential
and will not be shared without permission.



GENERAL INFORMATION

Please complete the following information:

NAME _____ DATE OF BIRTH _____

SPOUSE NAME _____ DATE OF BIRTH _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

TELEPHONE _____

FAX _____

EMAIL _____

Note: All information is kept strictly confidential and is used only to help our clients reach their financial goals and protect their assets.

Please indicate Profession or Occupation

- Medical Doctor
- Attorney
- CPA/Accountant
- Business Owner
- Business Executive
- Insurance Professional
- Registered Investment Advisor
- Certified Financial Planner
- Stock Broker
- Other (Please Specify) _____



PERSONAL ASSETS

Please enter the approximate market value of your assets below. If you are married, please include the amount that you own jointly with your spouse.

Note: (1) Do not subtract for liabilities on real estate. You will list all liabilities (such as mortgages) below. (2) Please do not include in this Personal Assets section any business or other assets which you own through or in the name of a company, partnership, trust, or other entity. Include company, partnership, trust, or other values only under the section called Business Assets/Interests.

Market Value

Primary Residence	\$	<input type="text"/>
All Other Real Estate	\$	<input type="text"/>
Cash Accounts (Checking, Saving, CDs)	\$	<input type="text"/>
Publicly Traded Accounts (Stocks, Bonds, Funds, etc.)	\$	<input type="text"/>
Qualified Pension/Retirement Plans (Defined Benefit/Contribution, etc.)	\$	<input type="text"/>
Non Qualified Pension/Retirement Plans (IRAs, etc.)	\$	<input type="text"/>
Annuities	\$	<input type="text"/>
Life Insurance (Cash Value)	\$	<input type="text"/>
Intellectual or Intangible Property (Copyright, Patents, etc.)	\$	<input type="text"/>
Personal Property (Jewelry, Art, Silverware, Vehicles, etc.)	\$	<input type="text"/>
Amounts Owed to You Secured by Promissory Notes/Deeds of Trust	\$	<input type="text"/>
All Other Asset Values	\$	<input type="text"/>
Sum of Personal Assets	\$	<input type="text"/>



BUSINESS ASSETS/INTERESTS

For any business or other interests or shares which you own, please enter the approximate market value net of any debt or other obligations or liabilities of the business. If you are married, please include the combined value which you own jointly with your spouse.

Note: The company or enterprise itself may own vehicles, real estate, money market accounts, stocks, bonds, or other property. Since these assets are not owned by you, they should not be included in the values already entered for your Personal Assets. If you entered any such values above, please return to the Personal Assets section and remove them from the value provided.)

Market Value Net of Debt

C Corporation Interests	\$	<input type="text"/>
S Corporation Interests	\$	<input type="text"/>
Sole Proprietorship Interests	\$	<input type="text"/>
Limited Liability Company Interests	\$	<input type="text"/>
Limited Liability Partnership Interests	\$	<input type="text"/>
General Partnership Interests	\$	<input type="text"/>
Limited Partnership Interests	\$	<input type="text"/>

Note: If you are a General Partner in a Limited or Family Partnership, enter the net value of your General Partnership interest there, not here

Sum of Business Assets/Interests \$



SPECIAL TRANSACTIONS

Offshore Rabbi Trust Information

Has your employer created a Rabbi Trust arrangement in your behalf which has a payout this year or in the next 10 years?

Yes No

If yes, please provide the following:

Market Values

Cash Account	\$	<input type="text"/>
Publicly Traded Stocks	\$	<input type="text"/>
Other	\$	<input type="text"/>
Sum of Assets	\$	<input type="text"/>

Payout Years

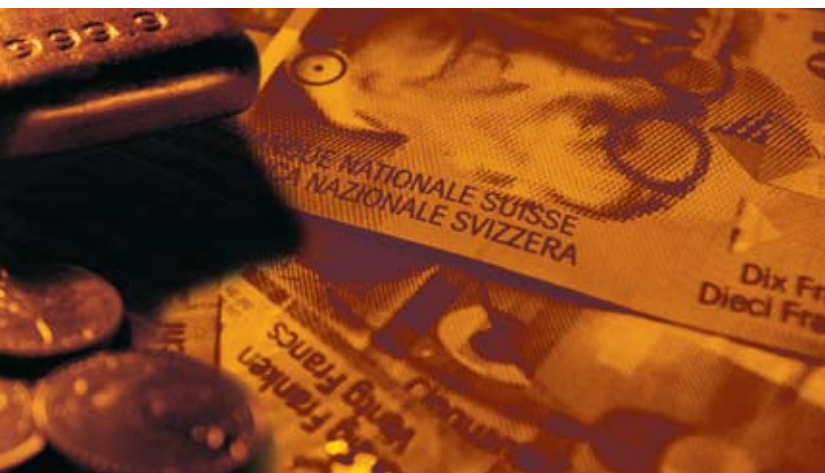
Is there more than one year for any Rabbi Trust payout?

Yes No

If yes, please provide the following:

Please indicate each year the Rabbi Trust will have a payout, including the payout amount (use cash and publicly traded securities values).

Year		Year	
<input type="text"/>	\$ <input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	\$ <input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	\$ <input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	\$ <input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	\$ <input type="text"/>	<input type="text"/>	<input type="text"/>



SPECIAL TRANSACTIONS

Investment Information

Are you planning on making an investment within the next 6 months?

Yes No

If yes, please provide the following:

Please state whether the investment you are planning to make is in a non-publicly traded security or a publicly traded security.

Publicly Traded Security Non Publicly Traded Security

Please state the amount you plan to invest: \$

Please identify the month and tax year for the planned investment

Please identify the expected return on investment (% Annum): %

If Non Publicly Traded Security, please provide the following:

Please identify the type of non publicly traded interest you plan on purchasing, the percentage of interest that you (if married, then including the phrase (and your spouse)) will own, pass through deductions (estimated), if any; depletion allowances (estimated), if any; indebtedness you are assuming or responsible for, if any; and the minimum required holding period, if any.

Type of Business (e.g. Sole Proprietorship, LLC, etc.)	Nature of Business (e.g. Mining Materials, Car Leasing)
Interest % You Will Own	<input type="text"/>
Deductions (estimated)	<input type="text"/>
Depletion Allowances (estimated)	<input type="text"/>
Indebtedness	<input type="text"/>
Minimum Holding Period	<input type="text"/>



SPECIAL TRANSACTIONS

Sale of a Business Interest (Sole Proprietorship, Stock, Partnership Interest)

Are you planning on selling a business interest?

Yes No

If yes, please provide the following:

Please identify the month and tax year for the planned sale.

Please identify the type of business interest, the percentage of interest that you (if married, then including the phrase (and your spouse)) own and are selling, its (estimated) basis, depreciation capture (if any), indebtedness, if any, and its (estimated) fair market value.

Type of Business
(e.g. Sole Proprietorship, LLC, etc.)

Interest % You Own & Sell	<input type="text"/>
Basis (estimated)	<input type="text"/>
Depreciation (estimated)	<input type="text"/>
Indebtedness	<input type="text"/>
Fair Market Value	<input type="text"/>



SPECIAL TRANSACTIONS

Sale of Publicly Traded Securities

Are you planning on selling publicly traded securities within the next 6 months?

Yes No

If yes, please provide the following:

For sales occurring within the next six months, please identify the month and tax year for the sale:

Please identify the security(ies) to be sold that you own, the (estimated) fair market value, the (estimated) tax basis, the (estimated) date of purchase, and indebtedness, if any.

Type of Asset	Fair market Value	Tax Basis	Purchase Date	Indebtedness
Stock	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Bond	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
REIT	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Mutual Fund	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Other	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>



SPECIAL TRANSACTIONS

Sale of a Business Asset

Are you planning on selling an asset?

Yes No

If yes, please provide the following:

Please identify the month and tax year for the planned sale:

Please identify the type of business asset, its (estimated) fair market value, its (estimated) basis, and indebtedness, if any.

Type of Asset

Fair Market Value \$

Basis \$

Indebtedness \$



SPECIAL TRANSACTIONS

Royalties

Do you receive royalty payments, or own a royalty producing asset?

Yes No

If yes, please provide the following:

What is the fair market value of the underlying asset(s) from which royalty income is derived? \$

What is the estimated tax basis of the underlying asset(s)? \$

Is the underlying asset(s) domestic or foreign owned? Domestic Asset(s) Foreign Asset(s)

What is the legal manner or form of ownership for the underlying asset(s)? _____

For each of the next ten years, estimate the amount of income derived from royalties, and the amount of that income necessary for maintaining your standard of living.

Year	Estimated Royalty Income	Portion needed for standard of living
_____	\$ <input type="text"/>	\$ <input type="text"/>
_____	\$ <input type="text"/>	\$ <input type="text"/>
_____	\$ <input type="text"/>	\$ <input type="text"/>
_____	\$ <input type="text"/>	\$ <input type="text"/>
_____	\$ <input type="text"/>	\$ <input type="text"/>
_____	\$ <input type="text"/>	\$ <input type="text"/>
_____	\$ <input type="text"/>	\$ <input type="text"/>
_____	\$ <input type="text"/>	\$ <input type="text"/>
_____	\$ <input type="text"/>	\$ <input type="text"/>
_____	\$ <input type="text"/>	\$ <input type="text"/>
_____	\$ <input type="text"/>	\$ <input type="text"/>



PERSONAL LIABILITIES/DEBTS

Please enter the approximate total personal debt. (Please do not include any business debts or liabilities, as these are accounted for already in the net values you gave for Business Assets.)

Primary Residence Mortgage(s)	\$	<input type="text"/>
Primary Residence Equity Line(s)	\$	<input type="text"/>
All Other Real Estate Debt	\$	<input type="text"/>
Automobile Debt	\$	<input type="text"/>
Credit Card Debt	\$	<input type="text"/>
All Other Personal Liabilities/Debts	\$	<input type="text"/>
Sum of Personal Liabilities/Debts	\$	<input type="text"/>



SPECIAL TRANSACTIONS

Document			Year Last Updated
Do you have a Will?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
Do you have a Durable Power of Attorney?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
Do you have a Special Power of Attorney?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
Do you have a Health Care Power of Attorney?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
Do you have a Living Will?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
Do you have a Living Trust?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
Do you have an Irrevocable Life Insurance Trust?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
When was your Asset Protection Plan most recently reviewed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____

Concerns

Please rank each concern on a scale of 1 to 10 (1 = not concerned, 10 = very concerned)

- _____ Minimizing income tax liabilities
- _____ Protecting wealth from potential lawsuits
- _____ Privacy in my financial affairs
- _____ Diversifying an investment portfolio
- _____ Reducing capital gains taxes on investments
- _____ Reducing estate taxes
- _____ Business succession planning
- _____ Charitable planning
- _____ Life insurance needs
- _____ Retirement planning



NOTES





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