NOBLE WEALTH ADVISORS
OF JANNEY MONTGOMERY SCOTT LLC

Financial Planning
Fact Finder

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Janney
Trusted Advisors for Generations

This Fact Finder is designed to begin the process of gathering data to prepare a customized financial plan for you. We view the financial planning as an ongoing process, and this initial financial plan should be considered as a starting point. We will take into consideration your goals and objectives to provide you with financial projections given your current situation. As there will inevitably be changes in your financial and life situation going forward, we will update the plan periodically to factor in any significant changes and make any necessary adjustments.

Please complete the information as best as you can and return the Fact Finder, along with copies of investment statements, insurance policies and annuity contracts to us either via fax at (203) 497-8920 or scanned into an email to **mkregling@janney.com**.

We will plan on circling back to you to discuss the assumptions and to obtain any additional information needed. Once we have all the necessary information, we will send you a Plan Analysis Synopsis to review and confirm the data and assumptions being utilized. A meeting can then be set up to review the financial plan and to discuss wealth management strategies to consider.

Our goal is to help you develop a workable strategy to meet your needs with creative solutions and practical advice. We are dedicated to providing you with sound financial advice to help you reach goals!

If you have any questions, please do not hesitate to contact us at (203) 784-7401.

Personal Information

Name	Address	Birth Date

Children	Address	Birth Date

Grandchildren	Son/Daughter of	Birth Date

Financial Goals

Retirement/Other Desired Goal	Target Date

Investment Assets/Bank Accounts
(held outside of Janney- please provide us with a copy of a recent statement)

Type	Title	Value	Cost Basis

Real Estate

Type/Address	Title	Purchase Date	Cost	Market Value	Outstanding Mortgage Balance*

***Enter details in Liabilities section on next page**

Business Interests

Description	Owner	Percent Ownership	Value of Interest	Cost Basis	Notes

Liabilities

Type	Owner	Date of Loan	Original Loan Amount	Balance	Interest Rate	Monthly payment (principal + interest)	Maturity Date

Insurance Policies (life, disability and long term care)

Type	Owner	Insured	Benefit	Term Expiry or Cash Value	Premium	Beneficiaries

Employee Benefits

Employee	Company	401(k) or Profit Sharing Plan Employer Contributions	Deferred Compensation	Stock Options	Restricted Shares

Detailed Income and Expenses

Source of Income	Owner	Annual Amount	Start Date	End Date	Annual Increase	Notes

The categories below have been provided to assist you in providing the total amount for Essential and Discretionary Spending – note that "best estimates" can be used. In addition, just the totals can be provided if you prefer not to complete the details.

Essential Expenses

Housing:

Utilities (heat, electric) ________
Phone/Cable ________
Property Insurance ________
Lawn and Garden ________
Cleaning ________
Repairs ________
Mortgage/Rent ________
Property Taxes ________

Necessities:

Groceries ________
Clothing ________
Personal Items ________

Transportation:

Fuel ________
Repairs/Insurance/License ________
Loan/Lease Payments ________

Health Care:

Health Insurance ________
Medical Co-payments ________
Prescriptions ________
Long term care premiums ________
Health Club dues ________

Other Essential:

Life Insurance Premiums ________
Disability Ins Premiums ________
____________________ ________
____________________ ________

Total Essential Expenses ________

Discretionary Expenses

Dining Out ________
Entertainment ________
Club Dues ________
Subscriptions ________
Vacations ________
Gifts – holidays, birthdays ________
Gifting to family members ________
Charitable contributions ________

Other:

____________________ ________
____________________ ________
____________________ ________
____________________ ________

Total Discretionary Expenses ________

Vacation/2nd Home:

Utilities & Maintenance ________
Property insurance ________
Mortgage/Rent ________
Other: ________
____________________ ________
____________________ ________

Total Vacation/2nd Home ________

Retirement Contributions

Acct:____________________ ________
Acct:____________________ ________

Total Contributions ________

Education Expenses *(if applicable)*

Child	Begin Date	Years	Amount

Semi-Regular/Lump Sum Expenses:

Expense Item	Amount	Purchase Date	How Often? (every x years)
New Auto			

Estate Planning

Date of will	
Attorney	
Beneficiaries	

Trusts

Title of Trust			
Type of Trust			
Tax ID #			
Date of Trust		**Address**	**Phone**
Grantor			
Trustees			
Income Beneficiaries	**Address**	**Date of Birth**	**Phone**
Remainder Beneficiaries	**Address**	**Date of Birth**	**Phone**
Assets held with	**Address**	**Market Value**	**Acct #**

Title of Trust			
Type of Trust			
Tax ID #			
Date of Trust		**Address**	**Phone**
Grantor			
Trustees			
Income Beneficiaries	**Address**	**Date of Birth**	**Phone**
Remainder Beneficiaries	**Address**	**Date of Birth**	**Phone**
Assets held with	**Address**	**Market Value**	**Acct #**

Assumptions Agreement

I acknowledge that the financial information and assumptions set forth in this Fact Finder will be relied upon to prepare the analysis and reflect my expectations. I understand that the results of using these assumptions are not promises or guarantees, but instead represent calculations based on the information and assumptions set forth in the Fact Finder. I understand that the reasonableness of certain assumptions and my expectations about certain assumptions may change over time due to a variety of dynamic factors such as tax law, investment trends and personal circumstances.

I understand that this Fact Finder and its assumptions and the conclusions drawn from those assumptions should be reviewed and updated. If there is any change with my financial situation or to the assumptions, I understand that it is my responsibility to inform Melanie Kregling, CFP® as the analysis may need to be revised.

I understand that tax aspects of the analysis should be discussed with a qualified tax professional and any legal issues should be reviewed by my attorney. I understand that all prospectuses, offering memoranda or other disclosure documents should be read carefully prior to investing. The provisions for investment management services provided are subject to the terms found under separate agreement.

By: Date:

_______________________________ _______________

_______________________________ _______________