

About You

Your name _____ Married | Single | Divorced | Widowed | Engaged

Home address _____

Cell # _____ | Work # _____ | Home # _____

Date of birth _____ | email address _____

SSN _____ | # of dependents, including you _____

Employer _____ Position held _____

If self-employed, line of business _____

Employer address _____

For Johanna Fox, CPA clients: Does your account manager have permission to access this information? Y | N

Do you have investment accounts at other firms? Y | N (This question is for *planning* purposes only)

Your Investment Profile

Overall Investment Objective for this account (choose only one):

- Capital Preservation** Minimize the potential for any loss of principal
- Income** Provide current income rather than growth of principal
- Growth** Increase investment value over time while accepting price fluctuations
- Speculation** Assume the highest degree of risk for potentially higher returns

Investment Experience

- None
- Limited
- Good
- Excellent

Annual Income

- \$0 - \$14,999
- \$15,000 - \$24,999
- \$25,000 - \$49,999
- \$50,000 - \$99,999
- \$100,000 - 199,999
- \$200,000+

Approximate Net Worth (excluding residence)

- \$ 0 - \$14,999
- \$15,000 - \$24,999
- \$50,000 - \$99,999
- \$100,000 - \$199,999
- \$200,000 - \$499,999
- \$500,000 - \$999,999
- \$1,000,000

Approx Liquid Net Worth (cash, stocks, etc)

- \$0 - \$14,999
- \$15,000 - 24,999
- \$25,000 - \$49,999
- \$50,000 - \$99,999
- \$100,000 - \$199,999
- \$200,000 - \$499,999
- \$500,000 - \$999,999
- \$1,000,000+

Your Risk Profile

Please check the box next to the number in answer to each of the six risk tolerance questions below.

1. How important is capital preservation (i.e. losing money in your account would seriously affect your lifestyle)?

- Not at all*
Moderately important
Very important
- 1 2 3 4 5 6 7 8 9

2. How important is growth (i.e. you don't plan to access your funds for five or more years)

- Not at all*
Moderately important
Very important
- 1 2 3 4 5 6 7 8 9

3. How important is low volatility (i.e. % of change in your portfolio is noticeably more than the market)
- Not at all* *Moderately important* *Very important*
- 1 2 3 4 5 6 7 8 9
4. How important is inflation protection (i.e. you live on a permanent and relatively fixed income)
- Not at all* *Moderately important* *Very important*
- 1 2 3 4 5 6 7 8 9
5. How important is current cash flow (i.e. you depend on your portfolio to help meet living expenses)
- Not at all* *Moderately important* *Very important*
- 1 2 3 4 5 6 7 8 9
6. How much risk are you willing to take to achieve a higher return (i.e. investments with higher risk generally afford a greater opportunity for both higher returns while exposing you to the risk of larger losses)
- Not at all* *A Moderate amount* *A lot*
- 1 2 3 4 5 6 7 8 9

What Average Annual Rate of Return* do you *want* to earn on your portfolio to reach your financial goals? _____
 (Enter a number between 5% and 14%.)

What Average Annual Rate of Return* do you *expect* to earn on your portfolio? _____

* The rate of return is hypothetical and used for comparison purposes only. It is not related to any specific investment and there is no guarantee you will actually receive this rate.

Your Investment Preferences

1. Are there particular investment areas you would like to own in your portfolio? (NOTE: your entries *can* total less than 100%)
- | | % | % | % |
|--|---|--|---|
| <input type="checkbox"/> International _____ | <input type="checkbox"/> Communications _____ | <input type="checkbox"/> Financial _____ | <input type="checkbox"/> Healthcare _____ |
| <input type="checkbox"/> Metals _____ | <input type="checkbox"/> Nat Resources _____ | <input type="checkbox"/> Real Estate _____ | <input type="checkbox"/> Technology _____ |
| <input type="checkbox"/> Utilities _____ | <input type="checkbox"/> Socially responsible _____ | <input type="checkbox"/> Other _____ | |

Comments _____

2. Are there any areas you specifically do NOT want to invest in? _____

3. How much do you *typically* prefer to keep in cash (liquid)? _____ % or a minimum of \$_____

4. How do you want me to communicate with you when investing your money? Get your approval first | Use my own discretion | Email after purchase | Other _____

5. How often do you want to hear from me and how (i.e. email, phone call, schedule a meeting at my office)? _____

Your Portfolio Plans

1. What is the purpose of each account (i.e. emergency fund, retirement, special goal, inheritance)?

Account 1 desc: _____ Purpose _____

Account 2 desc: _____ Purpose _____

Account 3 desc: _____ Purpose _____

2. When do you plan to distribute funds from each account (i.e. – what is your *time horizon* for each account)?

Account 1 desc: _____ Beginning _____

Lump Sum | Over a period of _____ years | Other _____

Account 2 desc: _____ Beginning _____

Lump Sum | Over a period of _____ years | Other _____

Account 3 desc: _____ Beginning _____

Lump Sum | Over a period of _____ years | Other _____

3. How will you distribute funds from each account (i.e. write checks, roll over to 2nd account, bank transfer, etc.)?

Account 1 desc: _____ Distribution _____

Account 2 desc: _____ Distribution _____

Account 3 desc: _____ Distribution _____

In General

Do you use a budget in your household? Y | N

Do you have a current will? Client A: Y | N | Client B: Y | N

Have you ever had a financial plan professionally prepared for you? Client A: Y | N | Client B: Y | N

Are you interested in learning more financial planning and whether it could benefit you? Y | N

Is there anything we have not asked that you would like for us to know? _____
