# Risk Tolerance Questionnaire

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| Name: |  |
| Phone Number: |  |
| Email Address: |  |
| Address: |  |
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1. Are you married or in a domestic partnership? Do you have children?

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1. How much money are you planning on investing? What are your goals and plans for your investments?

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1. How long are you planning on letting your investments raise money? How soon will you need to withdraw any funds?

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1. What is your current income? What are your living costs? Do you have adequate money to cover all current living expenses?

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1. Do you have any upcoming large expenditure, like purchasing a house or paying college tuition?

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1. What is your expectation on the returns from this investment? (i.e. follow the stock market, trail the stock market but make a profit, have stability with modest profits, or have security with small profit gain)

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1. What is your attitude toward short term loss? Over the next three months? Three years? How much are you willing to lose over the short term, if it will bring in money over the long term?

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1. At what point of loss will you decide to cut your losses and withdraw your investment? What percentages of loss are you prepared accept?

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1. What percentage of your entire investment portfolio will this investment make up?

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1. Which is more important, trying to make the most profit, or protecting what you have?

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1. How willing are you to ride out the ups and downs of a volatile market? Are you looking for something very steady and dependable?

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1. How would you categorize your own attitude towards risking your finances?

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