/

[Logo

Description automatically generated](http://www.pyrmontwm.com/)

**KNOW YOUR CLIENT ANALYSIS FORM**

(EXTENSIVE)

Strictly Private and Confidential

|  |  |
| --- | --- |
| **Name of Client (s):** | client\_salutation client\_first\_name client\_family\_name |
| **Date of Completion:** | report\_issued\_date |
| **Name of Financial Adviser:** | setting\_adviser\_name |

**PYRMONT WEALTH MANAGEMENT LIMITED**

**Address** 15/F, Soundwill Plaza II-Midtown, 1-29 Tang Lung Street, Causeway Bay, Hong Kong

**Tel** (852) 2598 6777 **Fax** (852) 2598 6770

**Email** info@pyrmontwm.com

**Website** [www.pyrmontwm.com](http://www.pyrmontwm.com)

**Licensed by the Hong Kong Insurance Authority - FB1226**

**Licensed by the HK Securities and Futures Commission- AIL303**

|  |
| --- |
| **Important Notice to Clients**  The Hong Kong Law requires that a licensed financial adviser making investment recommendations have reasonable grounds for making those recommendations. This means that an adviser must conduct an appropriate investigation based on the information provided concerning your financial objectives, situation and particular needs. The information requested in this form will form the basis of the investment plan and recommendations and will be used solely for that purpose.  It is therefore important that you have considered the questions and request for information carefully and that you have provided complete and accurate information. Please also let us know if you feel there is any other information or circumstance not covered by the Questionnaire that would be relevant to making recommendations or if you believe we have misinterpreted or overlooked some relevant information.  Please also inform your Financial Adviser Representative if you change your mind concerning the information given or if your circumstances change before a recommendation is made. In preparing this plan, we have relied on the information supplied, which we have assumed to be correct. We accept no liability for any advice given based on inaccurate or incomplete information. This plan is prepared solely for you, and we accept no liability whatsoever to third parties, including your dependents. |

SECTION 1: PERSONAL DETAILS

|  |  |  |  |
| --- | --- | --- | --- |
| basic\_info\_table | | | |
| Note: Fields marked with [**\***] must be completed. | | | |
|  | **CLIENT** |  | **PARTNER** | |
| **\*Title:** | client\_salutation (Hello everyone) |  |  | |
| **\*First & Second Name:** | client\_first\_name client\_middle\_name |  |  | |
| **\*Family Name:** | client\_family\_name |  |  | |
| **\*Date of Birth:** | client\_dob |  |  | |
| **Gender:** | client\_gender |  |  | |
| **Marital Status:** | client\_marital\_status |  |  | |
| **\*ID No. / Passport:** |  |  |  | |
| **\*Issuing Country:** |  |  |  | |
| Contact Details | | | |
| **\*Residential Address:** | client\_primary\_residential\_address\_line\_1 |  |  | |
|  | client\_primary\_residential\_address\_line\_2 |  |  | |
| **\*Correspondence Address:** | client\_primary\_residential\_address\_line\_1 |  |  | |
|  | client\_primary\_residential\_address\_line\_2 |  |  | |
| **\*Country:** | client\_primary\_residential\_address\_country |  |  | |
| **Resident Status** | client\_residency\_status |  |  | |
| **\*Preferred Telephone:** |  |  |  | |
| **\*Secondary Telephone:** |  |  |  | |
| **\*Mobile Phone:** | client\_preferred\_phone\_number |  |  | |
| **\*Preferred Email:** | client\_preferred\_email\_address |  |  | |
| Secondary Email: | client\_other\_email\_address |  |  | |

# SECTION 2: EMPLOYMENT DETAILS

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **employment\_details\_table** | | | | | |
|  | **CLIENT** | |  | **PARTNER** | |
| **\*Employment Status:** | client\_employment\_status |  |  | |  | | --- | |  | |  |
| **\*Occupation:** | client\_occupation | |  |  | |
| Employer: | client\_employed\_with | |  |  | |
| Education Level / Qualifications: | client\_highest\_qualification |  |  | |  | | --- | |  | |  |
| Do you foresee any major changes to your career in the near future? |  | |  |  | |

# SECTION 3: PERSONAL HEALTH QUESTIONS

|  |  |  |  |
| --- | --- | --- | --- |
|  | **CLIENT** |  | **PARTNER** |
| Rate your health |  |  |  |
| Smoker |  |  |  |
| Do you or any family member suffer from any physical disability or health condition that may affect current or future financial planning considerations? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

# SECTION 4: CHILDREN, FAMILY AND DEPENDANTS' INFORMATION

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| FULL NAME | RELATIONSHIP | GENDER | DATE OF BIRTH | CURRENT SCHOOL LEVEL | YEARS OF SUPPORT |
| children\_table | | | | | |

|  |
| --- |
| Are there any special needs that need to be addressed: |
|  |
|  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| PARENTS DETAILS | SIDE OF THE FAMILY (CLIENT/PARTNER) | AGE | FINANCIALLY INDEPENDENT (Y/N) | HEALTH STATUS | YEARS OF SUPPORT |
| parents\_table | | | | | |

|  |
| --- |
| **Are there any special needs that should to be addressed:** |
|  |
|  |
|  |
|  |
|  |

# SECTION 5: TAX & RESIDENT STATUS

|  |  |  |  |
| --- | --- | --- | --- |
|  | **CLIENT** |  | **PARTNER** |
| Resident Status | client\_residency\_status |  | |  | | --- | |  | |
| Resident Since | client\_residency\_since |  |  |
| Resident Type | (Specify …………………………………………….) |  | (Specify……………………………………………..) |

# SECTION 6: SOURCE OF WEALTH & INVESTOR CATEGORY (ANTI-MONEY LAUNDERING QUESTIONS)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **CLIENT** | |  | | **PARTNER** | |
| **\*Source of Wealth** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **\*Investor Category** |  |  | |  | |  | | --- | |  | |  |
|  |  | |  |  |
| **\*Politically Exposed Person** | specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  | specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| NOTE:  Politically Exposed Person meanss: (a) a natural person who is or has been entrusted with prominent public functions in a foreign country; (b) immediate family member if such person; or (c) close associates of such a person. "Prominent public function" includes the roles held by a head of state, a head of government, government ministers, senior public servants, senior judicial or military officials, senior executives of state-owned corporations, and senior political party officials. | | | | | | |

# SECTION 7: ESTATE PLANNING

|  |  |  |  |
| --- | --- | --- | --- |
| **estate\_planning\_table** | | | |
| **DO YOU HAVE WILL?** | client\_estate\_wills |  |  |
| Last Reviewed | client\_estate\_will\_reviewed |  |  |
| Location | client\_estate\_will\_location |  |  |
| Executor | client\_estate\_enduring\_attorney |  |  |
|  |  |  |  |
| **POWER OF ATTORNEY** | client\_estate\_type\_attorney |  |  |
|  |  |  |  |
| Attorney Name | client\_estate\_type\_attorney |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |  |  |
| **MPF BENEFICIARY NOMINATED** |  |  |  |
| Beneficiary Name | client\_estate\_inheritance\_detail |  |  |
| Do you have overseas assets? |  |  | |  | | --- | |  | |

# SECTION 8: DETAILED FINANCIAL OBJECTIVES

## **SHORT TERM GOALS**

|  |  |  |
| --- | --- | --- |
| ADDITIONAL DEATH AND TPD INSURANCE CONSIDERATIONS | Client | Partner |
| 1. I would like to provide my dependents with a monthly income until my youngest child becomes financially independent (Until what age?). | |  | | --- | |  | | |  | | --- | |  | |
| 1. I would like to provide for my children with higher education funds. | |  | | --- | |  | | |  | | --- | |  | |
| 1. I want to provide my spouse with a monthly income until they retire. | |  | | --- | |  | | |  | | --- | |  | |

|  |
| --- |
| WHAT IS YOUR TARGET HORIZON FOR INSURANCE/INVESTMENT-LINKED ASSURANCE SCHEMES? |
| |  | | --- | |  | |

|  |  |
| --- | --- |
| **Emergency funds** requirement (cash on call or based on the No. of monthly income) | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
|  |
|  |
|  |
|  |

## **MEDIUM TERM & EDUCATION GOALS**

1. Do you have plans for additional children?

|  |
| --- |
|  |

If so, how many? \_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| CHILDREN'S EDUCATION PLANNING CONSIDERATIONS  (ESTIMATES IN TODAY'S DOLLARS) | CHILD'S NAME | CHILD'S NAME | CHILD'S NAME |
| Which university do you plan to provide for your children? |  |  |  |
| The number of undergraduate years expected? |  |  |  |
| Estimated Cost ($) of Education per year? |  |  |  |
| Year Required |  |  |  |
| Est. Cost ($) of local/overseas living expenses pa (+ Airfares) |  |  |  |
| Inflation rate (%) used for Education fees estimation |  |  |  |

|  |
| --- |
|  |
|  |
|  |
|  |

## **long-term and retirement GOALS**

|  |  |  |
| --- | --- | --- |
| retirement\_goal\_table |  |  |
| RETIREMENT PLANNING CONSIDERATIONS (IN TODAY'S DOLLARS): | Client | Partner |
| 1. What is your estimated retirement age? | client\_retirement\_age |  |
| 1. What yearly income ($) would you like to maintain at retirement? | client\_retirement\_income |  |
| 1. What yearly expenses ($) would you like to maintain at retirement? | client\_retirement\_expenses |  |
| 1. Would you like to include a lump sum ($) amount at retirement? | client\_retirement\_lump\_sum |  |

|  |
| --- |
|  |
|  |
|  |
|  |
|  |

**Base Information to be used**

|  |  |
| --- | --- |
| 1**. \*'Annual Inflation Rate'** that you would like to use for general planning purposes? | \_\_\_\_\_\_\_\_\_\_\_\_ % |
| 2. \*'**Annual Investment Rate'** that you would like to use for general planning purposes? | \_\_\_\_\_\_\_\_\_\_\_\_ % |

**Additional Notes:**

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

# SECTION 9: CASHFLOW - INCOME, EXPENDITURE AND REGULAR INVESTMENTS

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Income  personal\_income\_table | | | | | | | | |  | | | | EXPENSES (MONTHLY) | | | | | | |  | | NET CASHFLOW SUMMARY TABLE | | | |
| INCOME | **Client Monthly reporting\_currency** | **Client Yearly**  **reporting\_currency** | |  | | **Partner Monthly $** | | **Partner Yearly $** | |  | | **MONTHLY EXPENDITURE** | | | **CLIENT**  **reporting\_currency** | | **PARTNER $** | | **JOINT $** | |  | | **TOTAL COMBINED INCOME** | **MONTHLY** | **YEARLY** | |
| Gross Salary | c\_emp\_inc\_tot\_mon | c\_emp\_inc\_tot\_ann | |  | |  | |  | | Alcohol & Tobacco | | |  | |  | |  | |  | | **Partner** |  |  | |
| Additional Wages |  |  | |  | |  | |  | | Groceries | | |  | |  | |  | |  | | **Joint** |  |  | |
| Bonuses |  |  | |  | |  | |  | | Education | | |  | |  | |  | |  | | **LESS: TOTAL REGULAR INVESTMENST$ ($)** | | | |
| Other Benefits |  |  | |  | |  | |  | | Clothing/ Footwear | | |  | |  | |  | |  | | **Client** |  |  | |
| Business Income |  |  | |  | |  | |  | | Utilities | | |  | |  | |  | |  | | **Partner** |  |  | |
| Government Pension |  |  | |  | |  | |  | | Medical/ Health Exp. | | |  | |  | |  | |  | | **Joint** |  |  | |
| Annuity Income |  |  | |  | |  | |  | | Dining / Entertainment | | |  | |  | |  | |  | | **LESS: TOTAL REGULAR INVESTMENST$ ($)** | | | |
| Other Inv. Income | c\_inv\_pro\_inc\_tot\_mon | c\_inv\_pro\_inc\_tot\_ann | |  | |  | |  | | Phone/ Internet | | |  | |  | |  | |  | | **Client** |  |  | |
| Other Income | c\_share\_tot\_mon | c\_share\_tot\_ann | |  | |  | |  | | Family / Dependants | | |  | |  | |  | |  | | **Partner** |  |  | |
| TOTAL INCOME $ | c\_tot\_inc\_mon | c\_tot\_inc\_ann |  | |  | |  | |  | | Charities | | |  | |  | |  | |  | | **Joint** | |  |  |
|  |  |  |  | |  | |  | |  | | Maid(s) | | |  | |  | |  | |  | | **NET CASHFLOW ($)** | |  |  |
|  |  |  |  | |  | |  | |  | | Rates / Management | | |  | |  | |  | |  | |  | |  |  |
|  |  |  |  | |  | |  | |  | | Home & Contents Ins. | | |  | |  | |  | |  | |  | |  |  |
|  |  |  |  | |  | |  | |  | | Mortgage / Rent | | |  | |  | |  | |  | |  | |  |  |
|  |  |  |  | |  | |  | |  | | Repairs/ Maintenance | | |  | |  | |  | |  | |  | |  |  |
| REGULAR INVESTMENTS | | | | | | | | |  | | Property Taxes | | |  | |  | |  | |
| Regular Savings |  |  |  | |  | |  | |  | | Car Loan / Lease | | |  | |  | |  | |
| Unit Trust | c\_unit\_trust\_tot\_mon | c\_unit\_trust\_tot\_ann |  | |  | |  | | Repairs/ Maintenance | | |  | |  | |  | |  | | | | | |
| ILAS |  |  |  | |  | |  | | Fuel Exp. | | |  | |  | |  | |  | | | | | |
| Others |  |  |  | |  | |  | | Road Tax/ Car Insurance | | |  | |  | |  | |  | | | | | |
| MPF Employer Cont. |  |  |  | |  | |  | | Fares (Bus, Taxi, Trains) | | |  | |  | |  | |  | | | | | |
| MPF Employee Cont. |  |  |  | |  | |  | | Personal Ins. (Term, etc.) | | |  | |  | |  | |  | | | | | |
| Other Contributions |  |  |  | |  | |  | | Income Protection Ins | | |  | |  | |  | |  | | | | | |
|  |  |  |  | |  | |  | | Critical Illness Insurance | | |  | |  | |  | |  | | | | | |
| TOTAL REGULAR INV. $ |  |  |  | |  | |  | | Medical Insurance | | |  | |  | |  | |  | | | | | |
|  |  |  |  | |  | |  | |  | | Pers. Loan/Credit Cards | | |  | |  | |  | |  | | | | | |
|  |  |  |  | |  | |  | |  | | Income Taxes Est. | | |  | |  | |  | |  | | | | | |
|  |  |  |  | |  | |  | |  | | **TOTAL EXPENSES $** | | |  | |  | |  | |  | | | | | |

# SECTION 10: RISK MANAGEMENT (Insurance)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| life\_insurance\_table | | | | | | | |
| Personal Insurance Policy | 1 | 2 | 3 | 4 | 5 | 6 | TOTAL $ |
| Name of Policy | client\_life\_insurance\_policy\_name |  |  |  |  |  |  |
| Insurance Company | client\_life\_insurance\_organisation |  |  |  |  |  |  |
| Policy Type | client\_life\_insurance\_policy\_type |  |  |  |  |  |  |
| Individual / Group From Employer |  |  |  |  |  |  |  |
| Policy No. | client\_life\_insurance\_policy\_number |  |  |  |  |  |  |
| Policy Owner | client\_life\_insurance\_policy\_owner\_name |  |  |  |  |  |  |
| Life Assured | client\_life\_insurance\_basic\_assured |  |  |  |  |  |  |
| Start Date | client\_life\_insurance\_policy\_start\_date |  |  |  |  |  |  |
| Maturity Date |  |  |  |  |  |  |  |
| Death Benefits $ |  |  |  |  |  |  |  |
| TPD / P&A Benefits $ |  |  |  |  |  |  |  |
| Heath Critical Illness Benefits $ |  |  |  |  |  |  |  |
| Mortgage Insurance Value $ |  |  |  |  |  |  |  |
| Cash Value $ |  |  |  |  |  |  |  |
| Premiums $ |  |  |  |  |  |  |  |
| Additional Features and Notes |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Income / Disability Protection Policy(s) | Company | Policy No. | Date Commenced | Waiting Period | Step / Level | Premium $ | Current Monthly Benefits $ | Monthly Benefit Required $ | Difference / Shortfall $ |
| Client |  |  |  |  |  |  |  |  |  |
| Partner |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  | **TOTALS** |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Health and General Insurance Policy(s) | Insurer | Policy No. | Sum Insured  $ | Renewal Date | Premium per Year |
| Health / Medical Insurance | client\_illness\_insurance\_organisation | client\_illness\_insurance\_policy\_number |  | client\_illness\_insurance\_policy\_start\_date | client\_illness\_insurance\_policy\_premium |
| Home Insurance |  |  |  |  |  |
| Investment Property 1 |  |  |  |  |  |
| Investment Property 2 |  |  |  |  |  |
| Investment Property 3 |  |  |  |  |  |
| Investment Property 4 |  |  |  |  |  |
| Contents |  |  |  |  |  |
| Car |  |  |  |  |  |
| Other |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  | **TOTALS** |  |

## **INSURANCE PREMIUM SUMMARY**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Client | Partner | Joint |
| Personal Insurance Policy |  |  |  |
| Income Protection Policy |  |  |  |
| Private Health Insurance Policy |  |  |  |
| General Policy |  |  |  |
| Total Household Insurance Premiums $ |  |  |  |

1. How long can you contribute to an insurance policy and/or investments plan?

|  |
| --- |
|  |

1. Approximately what percentage of your income would you be able to use to pay your monthly premium for the entire insurance policy/investment plan term in regards to the above question?

|  |
| --- |
|  |

# SECTION 11: ASSET AND LIABILITY OR NET WORTH

(All assets, including the family home, car, term deposits, unit trusts, shares, existing investments, etc, are placed in this section. Attach extra sheet if required)

## **ASSETS**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Illiquid Assets | Current Value  $ | Purchase Date | Cost Price  $ | Description | Client / Partner / Joint |
| Family Home |  |  |  |  |  |
| Personal Contents |  |  |  |  |  |
| Motor Vehicle 1 |  |  |  |  |  |
| Motor Vehicle 2 |  |  |  |  |  |
| Inv. Property 1 |  |  |  |  |  |
| Inv. Property 2 |  |  |  |  |  |
| Inv. Property 3 |  |  |  |  |  |
| Inv. Property 4 |  |  |  |  |  |
| Collectibles (eg. Artwork) |  |  |  |  |  |
| Other |  |  |  |  |  |
| Sub Total $ |  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Liquid Assets | Current Value  $ | Purchase Date | Cost Price  $ | Description | Client / Partner / Joint |
| Bank Account 1 |  |  |  |  |  |
| Bank Account 2 |  |  |  |  |  |
| Bank Account 3 |  |  |  |  |  |
| Term Deposits |  |  |  |  |  |
| Ins.– Cash Value (Sec. 10) |  |  |  |  |  |
| Ins.– Cash Value (Sec. 10) |  |  |  |  |  |
| Direct Shares \* |  |  |  |  |  |
| Direct Shares \* |  |  |  |  |  |
| Unit Trust (s) |  |  |  |  |  |
| Unit Trust (s) |  |  |  |  |  |
| Unit Trust (s) |  |  |  |  |  |
| Other |  |  |  |  |  |
| Other |  |  |  |  |  |
| Other |  |  |  |  |  |
| Other |  |  |  |  |  |
| Sub Total $ |  |  |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| MPF/ Pension Investments | Current Value | Cash | Shares | Unit Trust | Others | Mortgage | Client / Partner / Joint |
| MPF Funds |  |  |  |  |  |  |  |
| MPF Funds |  |  |  |  |  |  |  |
| MPF Funds |  |  |  |  |  |  |  |
| MPF Funds |  |  |  |  |  |  |  |
| Others |  |  |  |  |  |  |  |
| Others |  |  |  |  |  |  |  |
| Others |  |  |  |  |  |  |  |
| Others |  |  |  |  |  |  |  |
| Sub Total $ |  |  |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **TOTAL ASSETS $** |  |  |

## **LIABILITIES**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Details | Amount Outstanding | Start Date | End Date | Fixed or Variable | Interest Rate | Repayments  Cash | Freq. | Client / Partner / Joint |
| Mortgage – Family Home |  |  |  |  |  |  |  |  |
| Mortgage – Family Home |  |  |  |  |  |  |  |  |
| Mortgage – Invest. Prop 1 |  |  |  |  |  |  |  |  |
| Mortgage – Invest. Prop 2 |  |  |  |  |  |  |  |  |
| Mortgage – Invest. Prop 3 |  |  |  |  |  |  |  |  |
| Credit Card - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |  |  |  |
| Credit Card - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |  |  |  |
| Business Loan |  |  |  |  |  |  |  |  |
| Tax Loan |  |  |  |  |  |  |  |  |
| Personal Loan |  |  |  |  |  |  |  |  |
| Car Loan/ Lease |  |  |  |  |  |  |  |  |
| Education Loan |  |  |  |  |  |  |  |  |
| Other |  |  |  |  |  |  |  |  |
| TOTAL LIABILITIES $ |  |  |  |  |  |  |  |  |

|  |  |
| --- | --- |
| TOTAL ASSETS $ |  |
|  |  |  |  |  |  |  |
| LESS: TOTALS LIABILITIES |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| **NET WORTH $** |  |  |  |  |  |  |

# SECTION 12: Investment Risk Tolerance Questionnaire

**Risk tolerance is an essential component in investing. Risk tolerance is generally defined as 'the amount of risk an investor is comfortable taking or the degree of variability in investment returns an individual is willing to withstand. Please answer one (1) response for each question.**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **inv\_risk\_profile\_table** | | | | | |  | |  |
| **LIFE STAGE QUESTIONS** | | | | | | **CLIENT** | | **PARTNER** |
| **1.** | **Which of the following best describes your current stage of life?** | | | | | | | |
|  | | | | 1. Your goal is to accumulate wealth for the medium-term and long-term (> 5 years). | | 7 | | 7 |
|  | | | | 1. You are preparing for life changes (i.e., getting married, starting a family, buying a home) and will need more expenses and planning. | | 4 | | 4 |
|  | | | | 1. You own your own home. You may have a mortgage, childcare, or other regular costs and maintain only small cash balances. | | 1 | | 1 |
|  | | | | 1. You are in your peak earning years, and your mortgage or major expenses are under control. If you have children, they have grown up or left home. You may be ready to start thinking about preparing | | 5 | | 5 |
|  | | | | 1. You are preparing for retirement and have few financial burdens. You want to ensure you can afford a comfortable retirement. | | 3 | | 3 |
|  | | | | 1. You are retired. You rely on existing funds and investments or government or private pension to maintain your lifestyle in retirement. | | 2 | | 2 |
|  | | | | **Ans:** | | **c\_risk01** | |  |
|  | | | | | | | | |
| **2.** | **How secure are your current and future income from your salary, pensions or other investments?** | | | | | | | |
|  | | | | 1. Not secure | 1 | | 1 | |
|  | | | | 1. Somewhat secure | 3 | | 3 | |
|  | | | | 1. Fairly secure | 5 | | 5 | |
|  | | | | 1. Very secure | 7 | | 7 | |
|  | | | | **Ans:** | **c\_risk02** | |  | |
|  | | | | | | | | |
| **Investment Objectives Questions** | | | | | **CLIENT** | | **PARTNER** | |
| **3.** | **What is the primary reason you are investing your funds?** | | | | | | | |
|  | | | | 1. Long-term capital growth | 7 | | 7 | |
|  | | | | 1. To meet income needs | 3 | | 3 | |
|  | | | | 1. Long-term capital growth and income | 5 | | 5 | |
|  | | | | 1. For capital security | 1 | | 1 | |
|  | | | | **Ans:** | **c\_risk03** | |  | |
|  | | | | | | | | |
| **4.** | **What would you estimate your net worth to be in total (assets excluding the family home minus liabilities)?** | | | | | | | |
|  | | | | 1. < USD250,000 | 1 | | 1 | |
|  | | | | 1. Between US$250,000 - US$500,000 | 3 | | 3 | |
|  | | | | 1. Between US$500,000 - US$750,000 | 5 | | 5 | |
|  | | | | 1. Between US$750,000 and US$1,000,000 | 7 | | 7 | |
|  | | | | 1. > US$1,000,000 | 9 | | 9 | |
|  | | | | **Ans:** | **c\_risk04** | |  | |
|  | | | | | | | | |
| **5.** | **What is your level of reliance on the income generated from the portfolio to meet your needs?** | | | | | | | |
|  | | | | 1. Nil. I have other income sources | 7 | | 7 | |
|  | | | | 1. Minimal. I have other income sources, but the income from the portfolio does help. | 5 | | 5 | |
|  | | | | 1. Reasonable. I rely somewhat on the income generated from the portfolio. | 3 | | 3 | |
|  | | | | 1. Considerable. I rely heavily on the income generated from the portfolio | 1 | | 1 | |
|  | | | | **Ans:** | **c\_risk05** | |  | |
|  | | | | | | | | |
| **Investment Knowledge and Experience Questions** | | | | | **CLIENT** | | **PARTNER** | |
| **6.** | **How familiar are you with investment matters?** | | | | | | | |
|  | | | | 1. I am unfamiliar with investments and feel uncomfortable with the complexity. | 1 | | 1 | |
|  | | | | 1. I am not very familiar when it comes to investments. | 2 | | 2 | |
|  | | | | 1. I am somewhat familiar. I don't fully understand investments, including the share market. | 3 | | 3 | |
|  | | | | 1. I am reasonably familiar. I understand the various factors which influence investment performance. | 5 | | 5 | |
|  | | | | 1. I am very familiar. I understand the various factors which influence investment performance. I use research and other investment information to make investment decisions. | 7 | | 7 | |
|  | | | | **Ans:** | **c\_risk06** | |  | |
|  | | | | | | | | |
| **7.** | **To earn a return above the level of bank interest rates, you may need to hold investments that go up and down in Value (i.e., have volatility). How important is it to you to protect your investment and minimise the prospect of any fall in the Value?** | | | | | | | |
|  | | | | 1. Very important. Protecting my existing investment is my main objective. | 1 | | 1 | |
|  | | | | 1. Important, but I'm comfortable for at least a small part of my portfolio to have volatility in order to improve returns over the longer term. | 3 | | 3 | |
|  | | | | 1. Somewhat important but I'm prepared to take on a reasonable amount of volatility in order to increase my chance of higher returns over the longer term. | 7 | | 7 | |
|  | | | | 1. Not particularly important as I'm comfortable that having exposure to volatility is the best way to maximise returns over the longer term. | 9 | | 9 | |
|  | | | | **Ans:** | **c\_risk07** | |  | |
|  | | | | | | | | |
| **8.** | **How long have you been investing, not counting your own home, pension or bank type deposits?** | | | | | | | |
|  | | | |  | **CLIENT** | | **PARTNER** | |
|  | | | | 1. This is my first investment. | 1 | | 1 | |
|  | | | | 1. 3 years or more | 2 | | 2 | |
|  | | | | 1. More than 3 years | 5 | | 5 | |
|  | | | | **Ans:** | **c\_risk08** | |  | |
|  | | | | | | | | |
| **9.** | **How long are you looking at investing the majority of your money before you think you would need to access it? (Assuming you already have plans in place to meet short-term cash flow and/or emergencies.)** | | | | | | | |
|  | | | | 1. This is my first investment. | 1 | | 1 | |
|  | | | | 1. In 2 years or less | 2 | | 2 | |
|  | | | | 1. Within 3 - 5 years | 3 | | 3 | |
|  | | | | 1. Within 6 - 10 years | 5 | | 5 | |
|  | | | | 1. Not for 10+ years | 10 | | 10 | |
|  | | | | **Ans:** | **c\_risk09** | |  | |
|  | | | | | | | | |
| **10.** | | **When considering your investments and making investment decisions, do you think about the impact of possible losses or possible gains?** | | | | | | |
|  | | | | 1. I am always concerned about possible losses. | | 1 | | 1 |
|  | | | | 1. I am somewhat concerned about possible losses. | | 3 | | 3 |
|  | | | | 1. I usually consider possible gains. | | 5 | | 5 |
|  | | | | 1. I always consider possible gains. | | 7 | | 7 |
|  | | | | **Ans:** | | **c\_risk10** | |  |
|  | | | | | | | | |
| **11.** | | | **Assume you had an initial investment portfolio worth US$100,000. If, due to market conditions, your portfolio fell to US$85,000 (-15%), would you**  (If your portfolio has experienced a drop like this, choose the answer that corresponds to your actual behaviour) | | | | | |
|  | | | |  | | **CLIENT** | | **PARTNER** |
|  | | | | 1. Sell all of the remaining investments? You do not intend to take risks. | | 1 | | 1 |
|  | | | | 1. Sell a portion of your portfolio to cut your losses and reinvest into more secure investment assets? | | 3 | | 3 |
|  | | | | 1. Hold the investment and sell nothing, expecting performance to improve? | | 5 | | 5 |
|  | | | | 1. Invest more funds to lower your average investment price? You are comfortable taking short-term losses for archive long-term gains. | | 7 | | 7 |
|  | | | | **Ans:** | | **c\_risk11** | |  |
|  | | | | | | | | |
| **12.** | **Most portfolios suffer some volatility in returns. The level of volatility will depend on how exposed the portfolio is to growth assets. The greater the exposure is to growth assets, the greater the potential for returns but also the greater the potential for loss. Of the following portfolios which one would you be most comfortable with when it comes to the possibility of losses versus returns?** | | | | | | | |
|  | | | | 1. Conservative Portfolio : 10% - 20% exposure to growth assets | | 1 | | 1 |
|  | | | | 1. Moderately Conservative Portfolio : 20% - 40% exposure to growth assets | | 3 | | 3 |
|  | | | | 1. Balance : 40% - 60% exposure to growth assets | | 5 | | 5 |
|  | | | | 1. Aggressive Portfolio : 60% - 80% exposure to growth assets | | 7 | | 7 |
|  | | | | 1. Very Aggressive Portfolio : 80% - 100% exposure to growth assets | | 9 | | 9 |
|  | | | | **Ans:** | | **c\_risk12** | |  |
|  | | | | | | | | |
| **13.** | **Thinking about your answer to the previous question, if you now think about your feelings towards choosing actual investments, which one of the following statements best describes you.** | | | | | | | |
|  | | | | 1. I would prefer investments with little or no fluctuation in Value with a low degree of risk. I am willing to accept the lower return associated with these investments. | | 1 | | 1 |
|  | | | | 1. I prefer to diversify with a mix of investments that have an emphasis on low risk. I am happy to have a small proportion of the portfolio invested in assets with a higher degree of risk to achieve a slightly higher return. | | 3 | | 3 |
|  | | | | 1. I prefer to have a spread of investments in a balanced portfolio. | | 5 | | 5 |
|  | | | | 1. I prefer to diversify my investments with an emphasis on more investments with higher returns but still have a small number of low-risk investments. | | 7 | | 7 |
|  | | | | 1. I would select investments that have a higher degree of investment price fluctuation so that I can earn higher long-term returns. | | 9 | | 9 |
|  | | | | **Ans:** | | **c\_risk13** | |  |

## **Overall Attitude to Investment Risk**

Total the evaluation answers in the above questions and record the total. The score will determine the most appropriate investment strategy.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **inv\_risk\_profile\_result\_table** | | | | | |
| **SCORE** | **INVESTMENT RISK PROFILE** |  | **Client** |  | **Partner** |
| 0 to 19 | Conservative |  |  |  |  |
| 20 to 39 | Moderate | **\* YOUR SCORE:** | **c\_risk\_score** |  |  |
| 40 to 65 | Balance |  |  |  |  |
| 66 to 88 | Moderately Aggressive | **\*INVESTMENT PROFILE:** | **c\_risk\_res** |  |  |
| 89 or over | Very Aggressive |  |  |  |
|  |  | **\*SIGN AND CONFIRM** |  |  |  |

## **INVESTMENT RISK PROFILE SCORE DEFINITION**

|  |  |  |
| --- | --- | --- |
| INVESTMENT PROFILE | DEFINITION | ESTIMATE INVESTMENT ALLOCATION |
| CONSERVATIVE  Score 09 to 19 | * Your investment style would suggest that you do not wish to take any investment risk. * Your main priority is the safeguarding of your investment capital. * You are prepared to sacrifice higher returns for peace of mind. * This indicates that you wish to have a ***conservative*** approach to investing, and the most appropriate strategy would include 100% income. | * Income 100% * Growth 0% |
| MODERATE  SCORE 20 TO 39 | * Your investment style would suggest that you have some understanding of investment markets and their behaviour. * You do not wish to see all your capital eroded by tax and inflation, and you are prepared to take a small short-term risk to gain longer-term capital growth. * This indicates that you wish to have a ***moderate*** approach to investing, and the most appropriate investment strategy would include 90% income and 10% growth. | * Income 90% * Growth 10% |
| BALANCED  SCORE 40 TO 59 | * Your investment style would suggest that you seek a greater growth component in your investment portfolio to help protect your capital from the eroding effect of taxation and inflation. * You remain cautious about taking high levels of risk; however, your general understanding of the investment market enables you to feel comfortable with some short-term risks. * Your priority is consistent capital growth with some income to smooth any volatility in your returns. * This indicates that you wish to have a ***balanced*** approach to investing, and the most appropriate investment strategy would include 50% income and 50% growth. | * Income 50% * Growth 50% |
| Moderately Aggressive  SCORE 60 TO 79 | * Your investment style would suggest that you are an investor who understands the movement of investment markets. * You are most interested in maximising the Value of your investments(s) through long-term capital growth, although you do not wish to make unbalanced investment decisions. * You are comfortable with short-term volatility from your portfolio to maximise the potential for long-term capital growth. * This indicates that you wish to have an ***assertive*** approach to investing, and the most appropriate investment strategy would include 30% income and 70% growth. | * Income 30% * Growth 70% |
| AGGRESSIVE  SCORE 80+ | * Your investment style would suggest that you might be prepared to sacrifice your investment capital in pursuit of the highest long-term capital growth investment. * You have a good understanding of the behaviour of investment markets, and you are interested in reducing your taxable income. * This indicates that you wish to have an ***aggressive*** approach to investing, and the most appropriate investment strategy would include 100% growth. | * Income 0% * Growth 100% |

**DERIVATIVE KNOWLEDGE ASSESSMENT**

This section is designed to assist you in assessing your knowledge of derivatives investment and the suitability of certain financial products with derivatives exposures in your investment portfolio. You are required to complete this section as you will be restricted to investing in certain funds if you do not pass this assessment.

**\*Experience in Derivatives Investments**

Have you (or if the account is a Joint Account, either all Joint Account Holders or the sole investment decision maker for the Joint Account) invested in any of the products(s) below for more than 5 times in the past 3 years?

|  |  |  |  |
| --- | --- | --- | --- |
|  | |  | | --- | |  | | |
|  |  | |
|  | |  |
|  | |  |
|  | |  |
|  | |  |
|  | |  |
|  | |  |
|  | |  |
|  | |  |
|  | |  |
|  | |  |
|  | |  |

**\*Work Experience in the Financial Industry**

Have you (or the main account holder if the account is a Beneficiary Account) ever been either a licensed person under Hong Kong Securities and Futures Commission (SFC) or relevant individual with Hong Kong Monetary Authority (HKMA)?

|  |  |  |  |
| --- | --- | --- | --- |
|  | |  | | --- | |  | |  |
|  |  |  |

**\*Derivatives Knowledge acquired from Academic Background**

Have you (or the main account holder if the account is a Beneficiary Account) ever obtained any financial qualification(s), or completed any financial course(s) or in-depth training from reputable institute(s)?

|  |  |
| --- | --- |
| |  | | --- | |  | |
|  |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |

## **Client Investment Risk Profile Choice**

(Complete this only if the client DISAGREES with or skips the Investment Risk Profile above)

\*Notwithstanding the Investment Risk Profile questionnaire, I/we hereby declare that my/our risk profile is/are: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| Notes: |
|  |

# SECTION 13: Additional Investment ExPerience Question

In addition to the Investment Risk Profile questions, we need to obtain extra information on your actual investment experience.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Bonds | Stocks | ETF | Managed Funds | Structured Notes | Derivatives | Others |
| 1. Do you have any experience in following financial instruments? (Yes/No) |  |  |  |  |  |  |  |
| 1. Do you consider yourself a professional investor? |  |  |  |  |  |  |  |
| 1. How many years have you been executing transactions in these financial instruments? |  |  |  |  |  |  |  |
| 1. Average No. of Transactions per year? |  |  |  |  |  |  |  |
| 1. Does your occupation and experience indicate that you are familiar with these products? |  |  |  |  |  |  |  |
| 1. Do you understand the risks involved in these products and that in general the returns are variable? |  |  |  |  |  |  |  |

|  |
| --- |
| **Please elaborate on Questions 5 and 6.** |
|  |
|  |
|  |
| **I also acknowledge that the above questions is true and correct** |

**\*Client Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \*Client Name:** client\_complete\_name **\*Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\*Client Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \*Client Name:** client\_complete\_name **\*Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# SECTION 14: CLIENT ACKNOWLEDGMENT / FULL ADVICE AUTHORISATION

I / We hereby declare that the information set out in this Questionnaire is true and accurate to the best of my / our knowledge. I / We are not aware of any other information which would be relevant to the making of a recommendation by a financial adviser and have not disclosed any other information besides that set out in this Questionnaire to the financial adviser. I / We give permission for this information to be used for the preparation of my financial plan and I / we understand that the investment recommendations will be based solely on the information supplied in this form.

# SECTION 15: CLIENT LIMITED / NO ADVICE STATEMENT / AUTHORISATION

Relevant legislation and guidelines requires that the financial adviser must "know the client" before making any recommendations. However, there is provision that in certain circumstances a financial adviser may supply limited or no advice. If you are seeking limited advice of a particular nature, you must make this known at the time of the interview and you should recognise that the recommendations will only relate to that limited advice being sought.

|  |  |
| --- | --- |
| * + I / We require only **"LIMITED"** advice or product advice only as specified in this Questionnaire. | **WARNING:**  Without a completed Financial Needs Analysis, the Financial Adviser Representative may not be able to furnish you with the most appropriate advice or recommendation to meet your needs and objectives.  I/We acknowledge the risk associated with "Limited" or No advice. |
| * + I / We require only **no** advice as specified in this Questionnaire. |

**I also acknowledge that I have received the following;**

|  |
| --- |
|  |

**\*Client Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \*Client Name:**  client\_complete\_name **\*Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\*Client Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \*Client Name:**  client\_complete\_name **\*Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# SECTION 16: FINANCIAL ADVISER DECLARATION

The preparation of your financial plan will be based on the above information and any other documented correspondence entered into. All care will be undertaken when preparing your financial plan. I confirm that the information has been personally given by the client (s), and the same has been personally recorded accurately and properly by me.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ adv\_name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*Adviser Signature \*Adviser Name \*Date**

## **ADVISOR Follow-up Action Required**

|  |
| --- |
| 1. |
| 2. |
| 3. |
| 4. |

**Notes**

|  |
| --- |
|  |

|  |
| --- |
|  |