

Discovery Questionnaire



Define and prioritize
your goals



Establish your investment
time horizon



Understand your ability to
accept risk and loss

Please complete this document as thoroughly as possible and ONLY consider the money you will be investing with GCD. Also be sure to consider money you have positioned elsewhere. Your answers will provide us with valuable insight into your prior investment experience and will enable us to more closely align our recommendations with your goals and preferences.

The information provided by you will be carefully analyzed and will ultimately establish the foundation for your investment program which will be clearly defined as guidelines and investment objectives that will be outlined in our investment proposal as well as in the Investment Policy Statement.

All items below marked with a red asterisk (*) are required to be completed.

Part 1

Name* : _____ Today's Date* : _____

1. Total proposed amounts and funding for the money you look to invest with GCD* :

	Amount	Funded by What (wire or transfer from existing account elsewhere)
Individual	\$	
Joint	\$	
Trust	\$	
IRA	\$	
Roth IRA	\$	
SEP/Keogh	\$	
Other	\$	

2. If you are investing both tax deferred AND non tax deferred amounts, it is possible that you will have a different risk profile for each based on differing time horizons and risk tolerances. Check only one below and then answer all questions in Part 2 accordingly.*

- a. I believe they would be the same and therefore only will answer each question once
- b. I believe they would be different and therefore will answer each of the questions with 2 different answers. The first answer is for non-tax deferred, the second is for tax deferred.

TELL US ABOUT YOURSELF (THESE ARE NOT REQUIRED, BUT ENCOURAGED)

3. What prompted you to seek guidance and/or more information on financial and investment matters?

4. What is important about money to you? Why?

5. What are your primary financial goals and objectives?

6. Where would you like to be five years from now?

7. Additional concerns or comments:

Part 2 - COMPLETE THE NEXT 5 QUESTIONS BY RECORDING THE CORRESPONDING LETTER OF THE ANSWER. IF YOU CHECKED PART 1, 2B, RECORD YOUR FIRST ANSWER FOR YOUR NON-TAX DEFERRED AMOUNTS AND A SECOND ANSWER FOR THE TAX DEFERRED AMOUNTS.

1. Investment Return Range

During any 12-month period, returns on portfolios with exposure to the stock market can vary dramatically. Given this variability and your initial investment of \$100,000, please select the typical range of potential gains and losses with which you are most comfortable.*

Your answer: _____ (if part 1, 2B was checked, record your answer for the tax deferred amounts: _____)



*The returns displayed above reflect the typical high and low ranges of the rolling 12-month averages from January 1, 1990 through December 31, 2019 for six hypothetical portfolios of global stocks and bonds. These returns do not reflect the performance of actual investment accounts and are presented for illustrative purposes only. Past performance is not a guarantee of future results.

2. Maximum Decline

With an initial investment of \$100,000, how much could your investments decline, with no relief in sight, before you sold all or most of your investments in stocks?*

Your answer: _____ (if part 1, 2B was checked, record your answer for the tax deferred amounts: _____)

- a. -\$15,000
- b. -\$25,000
- c. -\$35,000
- d. -\$45,000
- e. -\$50,000
- f. -\$55,000

3. Stock Market Forecast

Even if you have very little confidence in your forecast, pick your best guess at the most likely return for the stock market over the next 12 months.*

Your answer: _____

- a. Less than -10%
- b. Between -10% and 10%
- c. Between 10% and 20%
- d. More than 20%
- e. No expectations

4. Your Age Range

How old are you? * Your answer: _____

- a. Younger than 50
- b. 50 – 59 years old
- c. 60 – 69 years old
- d. 70 – 79 years old
- e. 80+ years old

5. Planned Withdrawal

If you expect to withdraw a significant portion (at least 1/3) of your account for any purpose (e.g. a new house, children's education, a boat, etc.) other than retirement spending, when is it likely to be?*

Your answer: _____ (if part 1, 2B was checked, record your answer for the tax deferred amounts: _____)

- a. Immediately
- b. Within 5 years
- c. 5 – 15 years from now
- d. 15+ years from now
- e. Never

Part 3: TELL US ABOUT YOUR MAXIMUM LOSS THRESHOLD

While it's very important to understand how you feel about the typical ups and downs of the markets (average volatility), it's also important to understand how you feel about large declines. Behavioral research shows that large declines historically have caused many investors to lose confidence and not only leave the market at the worst possible times, but also wait too long to return to investing. Since it is impossible to perfectly time the market, our shared goal is to help you stay the course and, over the long term, grow your wealth. A clear understanding of your "maximum loss threshold" will help you stay the course when markets decline sharply.

1. How much do you have in total investable assets? * \$ _____
2. How much could your investable assets decline, with no relief in sight, before you felt compelled to exit the market completely? * \$ _____

Part 4: TELL US ABOUT YOUR FINANCES

1. What is your current annual income (including bonuses, commissions, rental income, small business, etc.) *
\$ _____
2. Does your income fluctuate on an annual basis due to commissions, bonuses, etc.? *
 Yes, by this amount: \$ _____ No
3. Do you expect your annual income to change in the next five years beyond a normal cost-of-living adjustment? *
 Yes, by this amount: \$ _____ No
4. Outside your company retirement/savings plan, how much did you save last year? \$ _____
5. Do you expect to save a similar amount each year for the next few years?
 Yes No, I expect to save this amount each year: \$ _____
6. What is your current marginal federal tax rate 12%, 22%, 24%, 32%, 35%, 37%, Not Sure? _____
7. To what state do you pay income tax? * _____
8. What is your current marginal state tax rate? _____

CLIENT INTAKE FORM
 (this completed form is required only before opening any account)

Personal Information (complete spousal information only if to be included on a joint account or a separate registration)		
	Primary Account Holder	Spouse
Name		
Social Security Number		
Date of Birth		
Home Address		
City, State, Zip		
Email Address		
Cell Number		
Marital Anniversary, if married		

Beneficiary Information (mandatory for tax-deferred accounts, recommended to add Transfer on Death designation on non-tax-deferred accounts)				
	Primary	Additional Primary, any	Contingent 1	Contingent 2
Name				
Social Security Number				
Date of Birth				
Home Address				
City, State, Zip				
Allocation %				
Relationship to Account Holder				

Trust Information (only required if any registration is trust)	
Complete Name of Trust	
Date of Trust	
Type of Trust (Revocable or Irrevocable)	
TIN (if not the trustee's social security number above)	

Bank Information (for making deposits or having withdrawals deposited into)	
Bank Name	
Name(s) on Account	
Routing Number	
Account Number	

Non tax deferred accounts are eligible for a line of credit to be setup. Select one below:
 We would like more information about setting this up We are not interested at this time