



Risk profiling of the client

- Please note that the questionnaire is only suitable for customers that are comfortable with taking on some form of investment risk. It is not suitable for customers that do not want to take on any risk whatsoever. Clients are classified under three categories low risk, medium risk and high risk clients with respective scores 07-12, 13-18,19-27 and accordingly product is recommended to them. Investors are categorized on the basis of this questionnaire and weights allotted
- Please choose the option that best describe how you feel about each question. If no option is exactly right for you, choose the one that is closest.

Instructions for Completion of Risk Profiling Form:

- 1) Risk Profiling Form comprises of 4 pages which must be acknowledged by client.
- 2) All details of Risk Profiling form should be completely filled by client including client's name & number.
- 3) Clients have to compulsorily answer all the questions. In case of any doubt, you can coordinate with your executive.
- 4) Clients have to update total scores (based on all questions) along with the product taken(Service Name) at the last page (Duly signed by client)

Name:- _____

Registered Number: _____

Gender (M/F):

* Gender, age and marital status.

1. What is your Age Group?

Category	Weight Allotted	Choose Ans.
Under 35	1	
Under 45	2	
46-55	1.5	
55-60	0.5	
60+	0	

2. What is your marital status?

- Married
- Unmarried

* Investment objective including time duration.

3. Investment objective?

Category	Weight Allotted	Choose Ans.
To grow aggressively	1.5	
To grow significantly	1	
To grow moderately	0.5	
To grow with caution	0	

4. How long do you want to stay invested into market investment?

Category	Weight Allotted	Choose Ans.
0-6 Months	1.5	
7-12 Months	1	
13-24 Months	0.5	
>24 Months	0	

5. Proposed Investment Amount

Category	Weight Allotted	Choose Ans.
<1 lacs	0	
1-2 lacs	0.5	
2-5 lacs	1	
> 5 lacs	1.5	

6. Preferred Investment type

Category	Weight Allotted	Choose Ans.
Short term Positional	0.5	
Long term Positional	0	
Intraday	1	

* Occupation and Income details

7. Occupation (please select the appropriate)

- | | |
|--|---|
| <input type="checkbox"/> Private sector service, | <input type="checkbox"/> Public sector, |
| <input type="checkbox"/> Government sector, | <input type="checkbox"/> Business , |
| <input type="checkbox"/> Professional, | <input type="checkbox"/> Agriculturist, |
| <input type="checkbox"/> Retired, | <input type="checkbox"/> Housewife, |
| <input type="checkbox"/> Student, | <input type="checkbox"/> Dealer, |
| <input type="checkbox"/> Others | |

8. Gross Annual Income details:-

Category	Weight Allotted	Choose Ans.
Below 1 lac	0	
1-5 lac	0.5	
5-10 lac	1	
10-25 lac	1.5	
>25 lac	2	

9. Sources of Income

A. Primary Source

- Salary
 Business

B. Secondary Source

- Royalties
 Rental
 Dividend
 Others Specify _____

* Existing Investment and Assets

10. Market Value of portfolio held?

Category	Weight Allotted	Choose Ans.
<1 lacs	0	
1-2 lacs	0.5	
2-5 lacs	1	
> 5 lacs	1.5	

11. What percentage of total net worth you are investing in this Investment Program?

Category	Weight Allotted	Choose Ans.
Less than 25%	0	
26% - 50%	0.5	
51% - 75%	1	
76% - 100%	1.5	

*** Risk appetite and tolerance**

12. What degree of risk have you taken with your past investment decisions?

Category	Weight Allotted	Choose Ans.
High	2	
Medium	1	
Low	0	

13. What degree of risk do you wish to take with your future financial decisions?

Category	Weight Allotted	Choose Ans.
High	2	
Medium	1	
Low	0	

14. Which of these statements would best describe your attitudes towards performance of this investment?

Category	Weight Allotted	Choose Ans.
I don't mind if I lose money	1.5	
I can tolerate some losses	1	
I'd have a hard time tolerating any losses	0.5	
I need to see at least some return	0	

15. What is the size of your emergency fund?

Category	Weight Allotted	Choose Ans.
Do not have	0	
< 1 month income	0.5	
1-3 months income	1	
3-6 months income	1.5	
> 6 months income	2	

*** Liability and borrowing details**

16. How many dependents do you financially support?

Category	Weight Allotted	Choose Ans.
None	2	
Between 1-3	1	
4+	0.5	

17. Which of these is your liability in future?

- Child marriage
- Child education
- Any other please specify.....

18. What percentage of monthly income is allocated to pay off debt [all EMIs]?

Category	Weight Allotted	Choose Ans.
None	2	
Between 0% -20%	1.5	
Between 20% - 35%	1	
Between 35% - 50%	0.5	
> 50%	0	

*** Past experience**

19. Investment Experience

Category	Weight Allotted	Choose Ans.
< 3 years	2	
3-5 years	1	
>5 years	0	



20. Experience in market products

- Commodity
- Stock
- Derivatives Stocks
- Forex
- All

21. What is your experience with market products in past?

Category	Weight Allotted	Choose Ans.
Very Good	2	
Good	1.5	
Moderate	1	
Bad	0.5	
Very Bad	0	

Note: Clients with Long term Investment goal as investment objectives are not accepted at Alliance Research.

Investment Options offered to various categories of investors

All the questions which are related to risk profiling have been assigned weight and based on the total score of a client product is recommended using following guideline; however special focus is made on any special requirements discussed with the client.

Product	Risk Classification	Score
	Low	07-12
	Low	
	Low	
	Medium	13-18
	Medium	
	Medium	
	High	19-27
	High	
	High	

Signature: _____