



# THE DISCOVERY PROFILE™

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Thank you for taking the time to complete The Discovery Profile™. The information you provide is strictly confidential and will only be used for your individual planning purposes. We ask that you complete this profile as fully as you are comfortable with. If you have any questions, please call our office for assistance.

BASIC INFORMATION

Your Name	Nickname	Age	Birthdate	Social Security # (optional)	
Your Job Title	Employer (last, if retired)	# of Years	Work Phone	Retirement Date	
Spouse's Name	Nickname	Age	Birthdate	Social Security # (optional)	
Spouse's Job Title	Employer (last, if retired)	# of Years	Work Phone	Retiremet	
Residence Address		City	State	Zip Code	
Mailing Address		City	State	Zip Code	
Home Phone	Cell Phone	Fax	Email Address		
Referred By: _____			<input type="radio"/> Newspaper	<input type="radio"/> Magazine	<input type="radio"/> Website

**Annual Income**

Your Wages: \$ \_\_\_\_\_

Spouse's Wages: \$ \_\_\_\_\_

Other Income \$ \_\_\_\_\_ Source: \_\_\_\_\_

Other Income \$ \_\_\_\_\_ Source: \_\_\_\_\_

Other Income \$ \_\_\_\_\_ Source: \_\_\_\_\_

Do you anticipate additional income that you are not currently receiving?  Yes  No  Uncertain

If yes, please indicate the source of the income: \_\_\_\_\_

1. At what age do you want to retire? \_\_\_\_\_ Your Spouse? \_\_\_\_\_
2. What is the minimum income you will need, in today's dollars, at retirement? \$ \_\_\_\_\_
3. If you plan on working after retirement, estimate your expected income: \$ \_\_\_\_\_
4. What interest rate would you like to earn on your investments? You: \_\_\_\_\_ % Spouse: \_\_\_\_\_ %
5. What do you think inflation will average in the future? \_\_\_\_\_ %

**Investments** (i.e., checking & savings accounts, money market, IRAs, 401(k)s, stocks, bonds, mutual funds, etc.)  
 You may attach statements instead of filling this section out.

	Account Type	Location	Approximate Value
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____

**Liabilities & Outstanding Debt** (i.e., home, business, credit cards, loans, other long-term debt, etc.)  
 You may attach statements instead of filling this section out.

	Type of Liability	Name of Debtor	Interest Rate	Approximate Balance Due
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____
7.	_____	_____	_____	_____

Do you have any other financial concerns that need to be addressed? If so, please describe the issue(s) below:

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## Instructions

The Risk Tolerance Questionnaire (RTQ) is designed to help you assess your client's risk tolerance and investment objective. The first six questions of the RTQ are assigned numerical weights to reflect each one's comparative importance in overall risk determination. Completing the questionnaire in its entirety will allow you to better evaluate your client's profile.

## Client and Registered Representative Information

Client Name	Registered Representative Name and Number # _____
Statement of Investment Selection (SIS) Number (Optional)	

## Risk Tolerance Questionnaire

### Question 1: (Purpose of Investment)

For these funds, which of the following closely aligns with your current financial goal?

- |   |    |
|---|----|
| <input type="checkbox"/> Sustaining current income and account preservation         | 0  |
| <input type="checkbox"/> Sustaining current income with possible growth opportunity | 10 |
| <input type="checkbox"/> Growing account value, not tied to current income needs    | 20 |
| <input type="checkbox"/> Aggressive growth, maximizing accumulation                 | 30 |

### Question 2: (Investment Horizon)

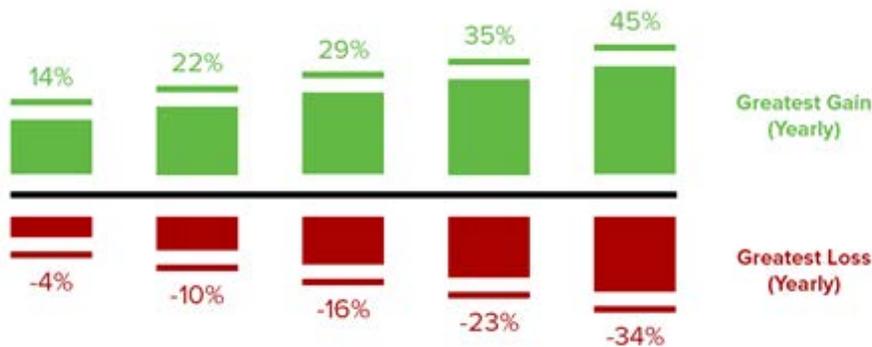
How long do you plan to keep these funds invested in order to achieve your financial goal?

- |  |    |
|--|----|
| <input type="checkbox"/> Less than 1 year      | 0  |
| <input type="checkbox"/> 1 to 2 years          | 3  |
| <input type="checkbox"/> 3 to 5 years          | 8  |
| <input type="checkbox"/> 6 to 10 years         | 15 |
| <input type="checkbox"/> 11 to 20 years        | 23 |
| <input type="checkbox"/> Greater than 20 years | 30 |

### Question 3: (Risk & Reward)

How much risk are you comfortable with for the funds you are about to invest?

The chart below shows the potential one-year loss or gain for five hypothetical portfolios. Select the option you are most comfortable with from a risk/return trade-off perspective. Note that these numbers are not representative of your potential target portfolios.



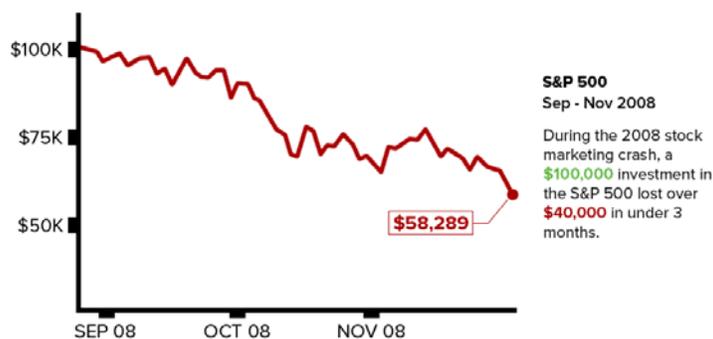
- |                            |                            |                            |                            |                            |
|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| <input type="checkbox"/> A | <input type="checkbox"/> B | <input type="checkbox"/> C | <input type="checkbox"/> D | <input type="checkbox"/> E |
| 0                          | 3                          | 5                          | 8                          | 10                         |

## Risk Tolerance Questionnaire (continued)

### Question 4: (Reaction in Adverse Market)

How would you react to a significant fall in the value of the stock market?

- Sell All, Avoid Further Risk 0
- Sell Some, Reduce Exposure to Risk 3
- Sell Nothing, Remain Invested 7
- Buy More, Opportunity is Present 10



If the stock marketing were to drop 40% in value and your stock holdings did the same, what would you do with your stock investments for this goal?

### Question 5: (Measuring Investor Patience)

How soon would you need these funds to recover after experiencing a sudden meaningful loss in value?

- 0 to 6 months 0
- 6 months to 1 year 3
- 1 to 3 years 7
- 3 years or more 10

### Question 6: (Client Comfort with Uncertainty)

How would you respond to the following statement?

**I am comfortable investing during times of uncertainty.**

- Strongly disagree 0
- Disagree 3
- Agree 7
- Strongly agree 10

## RTQ Scorecard)

Use this scorecard after completing the Risk Tolerance Questionnaire. The total point score is then used on the Point Scale below to determine the client's Risk Tolerance.

Question #1    Score: \_\_\_\_\_  
 Question #2    Score: \_\_\_\_\_  
 Question #3    Score: \_\_\_\_\_  
 Question #4    Score: \_\_\_\_\_  
 Question #5    Score: \_\_\_\_\_  
 Question #6    Score: \_\_\_\_\_

Point Scale	Investment Objective	Risk Tolerance
1 through 20	Capital Preservation	Conservative
21 through 40	Current Income	Moderately Conservative
41 through 60	Balanced	Moderate
61 through 80	Capital Growth	Moderately Aggressive
81 through 100	Maximum Growth	Aggressive

Total Score: