



ACCOUNT SUITABILITY FORM

CLIENT PROFILE

Name of Account	_____
Contact Person	_____ Telephone Number _____
Address	_____
City, State, Zip	_____
Social Security# / Tax ID#	_____ Date of Birth _____
Fiscal Year End	_____

TRUST / ENDOWMENTS

<input type="checkbox"/> Income Must Be Distributed	Capital Gains: <input type="checkbox"/> Retained <input type="checkbox"/> Distributed
<input type="checkbox"/> To Beneficiaries: Rate <input type="checkbox"/> %	Final Distribution Date of Trust Assets (If Any) _____
<input type="checkbox"/> Income Taxes to Trust: Rate <input type="checkbox"/> %	

IRA / QUALIFIED PLAN

ERISA: <input type="checkbox"/> Yes <input type="checkbox"/> No	IRA: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Taxable	<input type="checkbox"/> Non-Taxable

INVESTMENT PROFILE

<input type="checkbox"/> Safety of Principal	<input type="checkbox"/> Tax-Sheltered Income	<input type="checkbox"/> Long-Term Growth
<input type="checkbox"/> Speculation	<input type="checkbox"/> Income	

CLIENT RISK LEVEL

<input type="checkbox"/> No Principal Risk Whatsoever	<input type="checkbox"/> Substantially Less than Stock Market
<input type="checkbox"/> Equal to Stock Market	<input type="checkbox"/> Somewhat Greater than Stock Market
<input type="checkbox"/> Substantially Greater than Stock Market	

ACCOUNT TYPE

<input type="checkbox"/> NON-WRAP FEE	<input type="checkbox"/> WRAP FEE
<input type="checkbox"/> International Equity Developed	<input type="checkbox"/> Global Equity Developed
<input type="checkbox"/> International Growth Equity	<input type="checkbox"/> Global Growth Equity
<input type="checkbox"/> International ETF	<input type="checkbox"/> Other

INCOME REQUIREMENTS

<input type="checkbox"/> Client Needs Some Income Now	<input type="checkbox"/> Client Needs Maximum Income Now
Amount _____ Frequency _____	<input type="checkbox"/> Client Does Not Need Income Now

RESTRICTIONS AND/OR SPECIAL REQUESTS

Information provided by: Client Consultant Other _____