GLOBAL
WEALTH ADVISORS LLC
Registered Investment Advisor

Confidential Questionnaire

Please complete the questionnaire prior to the first meeting, using estimates where necessary. Your information remains strictly confidential, and will be used only to determine the suitability of financial and investment planning with Global Wealth Advisors LLC.

Client Information

	Client	Spouse
Name		
Home Address		
Home Telephone		
Business Address		
Business Telephone		
Cell Phone		
E-Mail Address		
Citizenship (Country)		
Domicile (State)		
Date of Birth		
Health Status		

Family Information

Name	Dependent?	Date of Birth	Health Status	Marital Status	Special Needs
1.	Yes / No	/ /		S / M / D / W	
2.	Yes / No	/ /		S / M / D / W	
3.	Yes / No	/ /		S / M / D / W	
4.	Yes / No	/ /		S / M / D / W	
5.	Yes / No	/ /		S / M / D / W	

Employment

	Client	Spouse
Occupation		
Employer		
Annual Income		
Retirement Age		

Assets

Asset	Owner*	Value	Cost Basis (If available)	Notes
Cash Equivalents	H / W / JT / RLT			
Mutual Funds (Taxable)	H / W / JT / RLT			
Individual Stocks	H / W / JT / RLT			
Individual Bonds	H / W / JT / RLT			
Rental Real Estate Investments	H / W / JT / RLT			
Life Insurance Cash Value	H / W / JT / RLT			
Non-Qual. Def. Comp.	H / W / JT / RLT			
IRAs (Specify Type)	H / W / JT / RLT			
401(k) Plan	H / W / JT / RLT			
403(b) Plan	H / W / JT / RLT			
Pension Plan	H / W / JT / RLT			
Business Interest	H / W / JT / RLT			
Primary Residence	H / W / JT / RLT			
Other Residence	H / W / JT / RLT			
Other (Specify)	H / W / JT / RLT			

Please provide asset detail, using most recent statements.
* H = Husband W = Wife JT = Joint Tenancy RLT = Trust

Liabilities

Liability	Amount	Monthly Payment	Interest Rate	Original Amount and Term	Notes
Credit Cards					
Installment Loans					
Home Equity					
Primary Mortgage					
Other					

Annual Cash Flow

	Client	Spouse
Salary/Wages		
Investment Income		
Social Security		
Pension Income		
IRA Withdrawals		
Other		
TOTAL INFLOW		
Mortgage or Rent		
Property Taxes		
Homeowners Insurance		
Food		
Clothing		
Utilities		
Household Expenses		
Auto Loan Payment		
Auto Operating Expense		
Other Installment Debt		
Credit Card Payments		
Health Care Expense		
Life Insurance Premiums		
Entertainment		
Vacation/Travel		
Personal Gifts		
Charitable Gifts		
Education Funding		
Savings/Investments		
Miscellaneous		
TOTAL OUTFLOW		
Surplus or (Deficit)		

Additional Questions

	Client	Spouse
What is your most important objective in meeting with Global Wealth Advisors?		
How would you describe yourself as an investor?		
What significant financial changes do you expect?		
How would you rate your satisfaction with your current advisors?		
Who prepares your income tax returns?		
Are your estate planning documents up to date?		
What experience and credentials do you expect your advisor to have?		
What other concerns or specific issues would you like Global to address?		
How did you learn about Global Wealth Advisors?		

Global Wealth Advisors LLC
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Risk Tolerance Form

If applicable, please make two copies and be sure that both client and spouse complete the form.

Risk Tolerance Analysis

1. **Expected Return:** Given historical returns on different kinds of investments, my desired level of investment return is above-average.

   Strongly Disagree ❑ ❑ ❑ ❑ ❑ Strongly Agree

2. **Risk Tolerance:** I am willing to bear an above-average level of investment risk (volatility). I can accept occasional years with negative investment returns.

   Strongly Disagree ❑ ❑ ❑ ❑ ❑ Strongly Agree

3. **Holding Period:** I am willing to maintain investment positions over a reasonably long period of time (generally considered 10 years or more).

   Strongly Disagree ❑ ❑ ❑ ❑ ❑ Strongly Agree

4. **Liquidity:** I do not need to be able to readily convert my investments into cash. Aside from my portfolio, I have adequate liquid net worth to meet major near-term expenses.

   Strongly Disagree ❑ ❑ ❑ ❑ ❑ Strongly Agree

5. **Ease of Management:** I want to be very actively involved in the monitoring and decision-making required to manage my investments.

   Strongly Disagree ❑ ❑ ❑ ❑ ❑ Strongly Agree

6. **Dependents:** There are none or only a few dependents that rely on my income and my investment portfolio for support.

   Strongly Disagree ❑ ❑ ❑ ❑ ❑ Strongly Agree

7. **Income Source:** My major source of income is adequate, predictable and steadily growing.

   Strongly Disagree ❑ ❑ ❑ ❑ ❑ Strongly Agree

8. **Insurance Coverage:** I have an adequate degree of insurance coverage.

   Strongly Disagree ❑ ❑ ❑ ❑ ❑ Strongly Agree

9. **Investment Experience:** I have prior investment experience with stocks, bonds, and international investments. I understand the concept of investment risk.

   Strongly Disagree ❑ ❑ ❑ ❑ ❑ Strongly Agree

10. **Debt/Credit:** My debt level is low and my credit history is excellent.

    Strongly Disagree ❑ ❑ ❑ ❑ ❑ Strongly Agree