



BRIDGEVIEW CAPITAL ADVISORS, INC.

Investments | Retirement | Financial Planning

Client Name _____ Client Name _____

Date _____ Advisor _____

The more we know about you and your goals for this account, the better we can serve you. Please answer the following questions about your investment objectives, financial situation and attitude toward investment risk to help us determine which investments and strategies are suitable for you.

Household Financial Background

Please tell us your best estimate as to:

ANNUAL INCOME	NET WORTH	LIQUID SAVINGS	HOME VALUE	TAX RATE
<input type="checkbox"/> \$25,000 and under	<input type="checkbox"/> \$25,000 and under	<input type="checkbox"/> \$25,000 and under	<input type="checkbox"/> \$50,001-200,000	<input type="checkbox"/> 0-15%
<input type="checkbox"/> \$25,001-50,000	<input type="checkbox"/> \$25,001-50,000	<input type="checkbox"/> \$25,001-50,000	<input type="checkbox"/> \$200,001-500,000	<input type="checkbox"/> 16-25%
<input type="checkbox"/> \$50,001-100,000	<input type="checkbox"/> \$50,001-200,000	<input type="checkbox"/> \$50,001-200,000	<input type="checkbox"/> \$500,001-1,000,000	<input type="checkbox"/> 26-30%
<input type="checkbox"/> \$100,001-250,000	<input type="checkbox"/> \$200,001-500,000	<input type="checkbox"/> \$200,001-500,000	<input type="checkbox"/> \$1,000,001-3,000,000	<input type="checkbox"/> 31-35%
<input type="checkbox"/> \$250,001-500,000	<input type="checkbox"/> \$500,001-1,000,000	<input type="checkbox"/> \$500,001-1,000,000	<input type="checkbox"/> Over \$3,000,000	<input type="checkbox"/> Over 35%
<input type="checkbox"/> Over \$500,000	<input type="checkbox"/> Over \$1,000,000	<input type="checkbox"/> Over \$1,000,000		

Financial Investment Experience

Please check the boxes that best describe your investment experience to date.

Investment	Years experience			Transactions per year (excluding automatic investments)		
Mutual Funds/ Exchange Traded Funds	<input type="checkbox"/> 0	<input type="checkbox"/> 1-5	<input type="checkbox"/> Over 5	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-15	<input type="checkbox"/> Over 15
Individual Stocks	<input type="checkbox"/> 0	<input type="checkbox"/> 1-5	<input type="checkbox"/> Over 5	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-15	<input type="checkbox"/> Over 15
Bonds	<input type="checkbox"/> 0	<input type="checkbox"/> 1-5	<input type="checkbox"/> Over 5	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-15	<input type="checkbox"/> Over 15
Annuities	<input type="checkbox"/> 0	<input type="checkbox"/> 1-5	<input type="checkbox"/> Over 5	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-15	<input type="checkbox"/> Over 15
CDs	<input type="checkbox"/> 0	<input type="checkbox"/> 1-5	<input type="checkbox"/> Over 5	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-15	<input type="checkbox"/> Over 15
Other	<input type="checkbox"/> 0	<input type="checkbox"/> 1-5	<input type="checkbox"/> Over 5	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-15	<input type="checkbox"/> Over 15

Do you have a will and/or trust? _____

Risk Assessment

Time Horizon: Your current situation and future income needs

1. What is your current age?

- Less than 45
- 45 to 55
- 56 to 65
- 66 to 75
- Older than 75

2. When do you plan to start drawing income or making withdrawals from this investment?

- Not for at least 20 years
- In 10 to 20 years
- In 5 to 10 years
- Not now but within 5 years
- Immediately

Long Term Goals and Expectations: Your views of how an investment should perform over the long term.

3. What is your goal for this investment?

- To grow aggressively
- To grow significantly
- To grow moderately
- To grow with caution
- To avoid losing money

4. Assuming normal market conditions, what would you expect from this investment over time?

- To generally keep pace with the stock market
- To slightly trail the stock market, but make a good profit
- To trail the stock market, but make a moderate profit
- To have some stability, but make modest profits
- To have a high degree of stability, but make profits

5. Suppose the stock market performs unusually poorly over the next 10 years, what would you expect from this investment?

- To lose money
- To make very little or nothing
- To make out a little gain
- To make a modest gain
- To be little affected by what happens in the market

Short-Term Risk Attitudes: Your attitude toward short-term volatility.

6. Which of these statements would best describe your attitudes about the next three years performance?

- I don't mind if I lose money
- I can tolerate a loss
- I can tolerate a small loss
- I'd have a hard time tolerating any losses
- I need to see at least a little return

7. Which of these statements would best describe your attitudes about the next three months performance?

- Who cares? One calendar quarter means nothing
- I wouldn't worry about losses in that time frame
- If I suffered a loss greater than 10%, I'd get concerned
- I can only tolerate small short-term losses
- I'd have a hard time stomaching any losses

Select the category that best describes the risk that you are willing to take in this account

Investing involves risk. Different investments and strategies involve different degrees of risk. The higher the expected returns of an investment or strategy, the greater the risk of loss. Investments should be chosen based on your objectives, timeframe, and tolerance for market fluctuations. Please select the category that matches your risk tolerance most closely.

- Very Conservative:** The very conservative range is designed for the cautious investor, one with a low risk tolerance and/or a short time horizon. It is targeted toward the investor seeking investment stability and liquidity from their investable assets. The main objective of the individual in the conservative risk range is to preserve capital while providing income. Fluctuations in the values of portfolios within this range are minor.
- Conservative:** This investor will have either a moderate time horizon or a slightly higher risk tolerance than the most conservative investor in the previous risk range. While this range is still designed to preserve the investor's capital while providing income, fluctuations in the values of portfolios may occur from year to year.
- Moderate:** This range will best suit the investor who seeks relatively stable growth from their investable assets offset by a low level of income. An investor in the moderate risk range will have a higher tolerance for risk and/or a longer time horizon than either of the previous investors. The main objective of an individual within this range is to achieve steady portfolio growth while limiting fluctuations to less than those of the overall stock markets.
- Moderately Aggressive:** The moderately aggressive risk range is designed for investors with a relatively high tolerance for risk and a longer time horizon. These investors seek above-average growth from their investable assets. The main objective of this risk range is capital appreciation, and its investors should be able to tolerate moderate fluctuations in their portfolio values.
- Aggressive:** The main objective of the aggressive risk range is to provide high growth for the investor's assets without providing current income. Portfolios in this range may have substantial fluctuations in value from year to year, making this category unsuitable for those who do not have an extended investment horizon.

Other Savings or Investment Accounts

Please consider providing us with additional information about your other investments to help us more fully understand your financial situation and what types of investments or strategies may be appropriate for your total investment portfolio.

Investment type/Description	Firm holding the investment	Amount
		\$
		\$
		\$
		\$

Financial Concerns

	High	Medium	Low	None
Retirement savings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Education savings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reducing Debt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Life Insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Long Term Care Insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Charitable Giving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business Transition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Estate Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Minimizing Taxes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Investment Objective

The investments in this account will be (check one):

- Less than 25% of my financial portfolio
- Between 25% and 50% of my financial portfolio
- Between 50% and 75% of my financial portfolio
- More than 75% of my financial portfolio

I plan to use this account for the following (check all that apply):

- Generate income for current or future expenses
- Partially fund my retirement
- Wholly fund my retirement
- Steadily accumulate wealth over the long term
- Preserve wealth and pass it on to my heirs
- Pay for education
- Market speculation
- Other: _____

Client Acknowledgement

To the best of my knowledge, the information provided in this questionnaire is true and correct and reflects an accurate picture of my current financial situation. Should any material changes occur, I will advise my representative immediately. Investment and insurance products are NOT insured by the FDIC or other governmental agencies and are subject to investment risk including possible loss of the principal amount invested.

I have been provided the following notices:

1. Privacy Policy
2. Anti-Money Laundering Disclosure
3. Summary of our Business Continuity Plan
4. Form ADV Part II

Signatures

Primary Applicant Name (please print)

Primary Applicant Signature

Date

Co-Applicant Name (please print)

Co-Applicant Signature

Date