



AKD INVESTMENT MANAGEMENT LTD. (AKDIML)

RISK PROFILING QUESTIONNAIRE

The following questions are to enable the salesperson(s) to assess the client's investment objectives, risk-return expectations and hence provide which fund is suitable according to the investment needs. This questionnaire will only serve as a guideline and does not mean to translate as a specific advice or investment model. All individuals can make their own fund selection (allocation) based on their own judgement and personal circumstances provided the sales person must ensure that all related risks have been provided to the client. Kindly **tick** the circle in the **left margin** that corresponds to your assessment.

	QUESTIONS	WEIGHTAGES
1	What is your current age?	
☐	Above 60 years	1
☐	45-60 years	2
☐	30-44 years	3
☐	Below 30 years	4
2	When it comes to investing in stocks or bonds or mutual funds, I would describe myself as...	
☐	Very Inexperienced	1
☐	Somewhat inexperienced	2
☐	Somewhat experienced	3
☐	Experienced	4
☐	Very experienced	5
3	My current source of income/source of fund is...	
☐	Pension	1
☐	Salary from employment	2
☐	Self-employed/ Business Income	3
☐	Inheritance	4
☐	Income from investments/others	5
4	When making an investment, I plan to keep the money invested for...	
☐	1-2 years	1
☐	3-4 years	2
☐	5-6 years	3
☐	7-8 years	4
☐	More than 8 years	5
5	Primary objective of investment is...	
☐	Regular/Monthly income	1
☐	Cash Management	2
☐	Capital Growth	3
☐	Long term saving	4
6.	I would classify my risk tolerance as...	
☐	Low	1
☐	Medium	2
☐	High	3
☐	Very High	4

7. Are you or any close relative a public figure? (Includes Senior Government Officials, Officials of public sector entities, Senior Military Officials and Politicians)

☐ Yes ☐ No

If Yes, please Specify: _____

8. Do you belong to a Non-Governmental Organisation/ Non-Profit Organisation?

☐ Yes

☐ No

9. Are you a non-resident?

☐ Yes

☐ No

10. Has any financial Institution ever refused to open your account?

☐ Yes

☐ No

If Yes, please specify: _____

11. Are you acting on behalf of any other person?

☐ Yes

☐ No

12. Do you deal in high value items such as Gold, Silver and Diamond, etc?

☐ Yes

☐ No

If Yes, please specify: _____

13: Do you have any links to offshore tax haven countries?

☐ Yes

☐ No

If Yes, Please Specify: _____

NOTE: I understand and agree that as per my Risk Profile, AKD Investment Management Ltd. can suggest me a fund but I can/may invest in any type of fund category as per my discretion.

Date

Signature

	SCORING YOUR RISK PROFILE (Sum of the total scores of all the options selected)		TOTAL SCORE =
SCORE RANGE	RISK APPROACH	CLASSIFICATION OF FUNDS	
6-9	VERY LOW - LOW	FIXED RETURN SCHEME MONEY MARKET SCHEME SHARJAH COMPLIANT MONEY MARKET SCHEME	
10-13	MEDIUM	AGGRESSIVE FIXED INCOME SCHEME SHARJAH COMPLIANT INCOME SCHEME EQUITY SCHEME	
14-27	HIGH	SHARJAH COMPLIANT EQUITY SCHEME INDEX TRACKER SCHEME AKD ASSET ALLOCATION PLAN	

I understand the risks associated with investment and my total score. I also understand that i can choose a risky asset too given my understanding of risk and return.

Signature

Office Use Only:

Client Risk Approach: _____

Suggested Fund: _____ Fund as per Client's Interest: _____

Potential Investment Amount: _____

Was the meeting done Face-to-Face? ☐ Yes ☐ No

CLIENT RISK ASSESSMENT

☐ Low - Simplified ☐ Medium – Standard CDD ☐ High – Enhanced CDD

DOCUMENT REASONS FOR CUSTOMER RISK RATING:

Customer's source of wealth/ Income is high risk/ cash intensive: ☐ Yes ☐ No

Name of Sales Person: _____ Signature: _____

CHECKED BY: _____ SIGNATURE: _____ DATE: _____

REVIEWED BY: _____ SIGNATURE: _____ DATE: _____

Disclaimer: I hereby declare that the above-mentioned remarks are derived from the information provided by the client. Moreover, I also assure that I have clearly communicated all the risks associated with investments in different types of funds to the client. The client is fully aware of risks and returns associated with investments.

FEEDBACK:

Information listed above is correct: ☐ Yes ☐ No

How Satisfied is the customer? ☐ Very Satisfied ☐ Satisfied ☐ Neither satisfied nor dissatisfied ☐ Dissatisfied ☐ Very Dissatisfied

Other comments: _____

Verified by: _____ Signature: _____

Risk Manager/ Operations Department Comments:

Allocated Investment Limit: _____

Remarks: _____

Signature: _____