

Financial advisor instructions: To be used for all Advisory non-retirement accounts. For more detailed information on the appropriate paperwork requirements for all registration types, please consult the appropriate account opening checklist located in the resource center. For existing accounts, this form should only be used for adding or removing account holders, or to change the registration or account type.

Please fax the completed form to the New Accounts Department at (858) 202-8325.

ATTENTION: Any alterations must be initialed by all account holders.

<b>Account Number</b> <input style="width: 95%;" type="text"/>	<b>Rep ID</b> <input style="width: 95%;" type="text"/>	<input type="checkbox"/> Account updates required by LPL Operations
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**Section I: Account Information**

**1. Account Type:** (choose only one)

Each account holder must receive, read and understand the contents of the applicable Account Packet referenced below based on the account type selected. This separate packet contains the Account Agreement and any Program Brochures that detail the relationship between you, your Advisor, LPL Financial ("LPL") and other related parties as applicable to your account.

<input type="radio"/> SWM Brokerage (Account Packet - SWM)	<input type="radio"/> Optimum Market Portfolios Advisory (Account Packet - OMP)
<input type="radio"/> SWM Brokerage II (Account Packet - SWM)	<input type="radio"/> Model Wealth Portfolios (Account Packet - MWP)
<input type="radio"/> Manager Access Select (Account Packet - MAS)	<input type="radio"/> Personal Wealth Portfolios (Account Packet - PWP)
<input type="radio"/> Manager Access Network (Account Packet - MAN)	

**2. Registration Type:** (choose only one)

<input type="radio"/> Individual	<input type="radio"/> Custodian for Minor	<input type="radio"/> Limited Liability Company*	<input type="radio"/> Non-Profit Organization*
<input type="radio"/> Tenants in Common	<input type="radio"/> Personal Trust*	<input type="radio"/> Estate*	<input type="radio"/> Guardianship/Conservatorship*
<input type="radio"/> Community Property	<input type="radio"/> Corporate*	<input type="radio"/> Coverdell ESA*	<input type="radio"/> Omnibus*
<input type="radio"/> Joint Tenants With Rights of Survivorship	<input type="radio"/> Partnership*	<input type="radio"/> Other (Please specify):	<input style="width: 150px;" type="text"/>

\*Additional documentation required. Financial advisor should refer to the detailed procedures for the registration type on the Resource Center.

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**Is this account for a Government Entity?**  Yes  No

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**Is your client considered an "institutional account" based on one or more of the following definitions per FINRA Rule 4512(c):**  Yes  No

1. A bank, savings and loan association, insurance company or registered investment company;
2. An investment adviser registered either with the SEC under Section 203 of the Investment Advisers Act or with a state securities commission (or any agency or office performing like functions); or
3. Any other person (whether a natural person, corporation, partnership, trust or otherwise) with total assets of at least \$50 million

**3.**

<b>Social Security Number or Tax ID</b> <input style="width: 95%;" type="text"/>	<b>Country of Citizenship</b> <input style="width: 95%;" type="text"/>	<b>Mailing Address</b> <input style="width: 95%;" type="text"/> <input style="width: 95%;" type="text"/>
<b>Fill in your current residency status:</b> (choose only one)		
<input type="radio"/> U.S. Citizen <input type="radio"/> Resident Alien <input type="radio"/> Non-Resident Alien		
<b>Account Registration</b>		<b>Account Address (no P.O. boxes)</b> <input type="checkbox"/> Same as mailing address
<input style="width: 95%;" type="text"/>		<input style="width: 95%;" type="text"/>
<input style="width: 95%;" type="text"/>		<input style="width: 95%;" type="text"/>
<input style="width: 95%;" type="text"/>		<b>Email</b> <input style="width: 95%;" type="text"/>
<b>Mobile Phone</b> <input style="width: 95%;" type="text"/>	<b>Business Phone</b> <input style="width: 95%;" type="text"/>	<b>Home Phone</b> <input style="width: 95%;" type="text"/>

## Section II: Investment Objective and Risk Tolerance

1. **Select the investment objective that most accurately reflects the goals for this account:** (choose only one)  
 The investment objectives are overall objectives for the entire account and may be inconsistent with a particular holding at any time. Please note that achievement of the stated investment objectives is a long-term goal for the account. These choices are listed in order from what is considered to be conservative to highest risk. There is no guarantee that the investment objective will be achieved.
- A. Income with Capital Preservation.** Designed as a longer term accumulation account, this is considered generally the most conservative investment objective. Emphasis is placed on generation of current income and prevention of capital loss. Lowering the risk generally means lowering the potential income and overall return.
- B. Income with Moderate Growth.** Emphasis is placed on generation of current income with a secondary focus on moderate capital growth.
- C. Growth with Income.** Emphasis is placed on modest capital growth with some focus on generation of current income.
- D. Growth.** Emphasis is placed on achieving high long-term growth and capital appreciation. There is little focus on generation of current income.
- E. Aggressive Growth.** Emphasis is placed on aggressive growth and maximum capital appreciation. No focus on generation of current income. This objective has a very high level of risk and is for investors with a longer time horizon.
- ATTENTION:** If you select an objective and cross it out to choose another, the change must be initialed by all account holders.

## Section III: Account Holder Information

For corporate, LLC, non-profit organization, partnership, and investment club accounts, this section is NOT required. Complete the appropriate supplementary documentation instead. For additional account holders, complete the Supplemental Account Application (F1C-R).

1.	<b>Primary Account Holder/Trustee/Minor/Decedent</b>	<input type="text"/>	<b>Employer Name</b>	<input type="checkbox"/> Mark here if retired or unemployed	<input type="text"/>
	<b>Residence Address (no P.O. boxes)</b>	<input type="checkbox"/> Same as account	<b>Employment Address (no P.O. boxes)</b>	<input type="text"/>	<input type="text"/>
	<b>Home Phone</b>	<input type="text"/>	<b>Business/Cell Phone</b>	<input type="text"/>	<b>Occupation</b> (former if retired or unemployed)
	<b>Social Security Number</b>	<input type="text"/>	<b>Country of Citizenship</b>	<input type="text"/>	<b>Industry</b> (former if retired or unemployed)
	<b>Date of Birth</b>	<input type="text"/>	<b># Dependents</b>	<input type="text"/>	<b>ID Type</b>
	<b>Client ID verified?</b>	<input type="radio"/> Yes <input type="radio"/> No	<b>ID Place of Issuance</b>	<input type="text"/>	<b>ID Issuance Date</b>
	<input type="checkbox"/> Mark here if you, your spouse, or any other immediate family members are employed by or associated with the securities industry or a financial regulatory agency. You must also provide the information requested below as well as a letter (when required) from the employer approving establishment of this account. An approval letter is not required for LPL employees.		<b>ID Expiration Date</b>	<input type="text"/>	<input type="text"/>
	<b>Full Name</b>	<input type="text"/>	<b>Relationship</b>	<input type="text"/>	<b>Name of Firm</b>
	<input type="checkbox"/> Mark here if you or any member of your immediate family has been a corporate officer, director, or owner of 10% or more of any public corporation within the past three months.				<b>Name of Corporation(s)</b>
					<input type="text"/>

2. **Secondary Account Holder/Trustee/Custodian/Fiduciary**  **Employer Name**   Mark here if retired or unemployed

**Residence Address (no P.O. boxes)**  Same as account

**Employment Address (no P.O. boxes)**

**Home Phone**  **Business/Cell Phone**  **Occupation** (former if retired or unemployed)  **Industry** (former if retired or unemployed)

**Social Security Number**  **Country of Citizenship**  **ID Type**  **ID Number**

**Date of Birth**  **# Dependents**  **Client ID verified?**  Yes  No **ID Place of Issuance**  **ID Issuance Date**  **ID Expiration Date**

Mark here if you, your spouse, or any other immediate family members are employed by or associated with the securities industry or a financial regulatory agency. You must also provide the information requested below as well as a letter (when required) from the employer approving establishment of this account. An approval letter is not required for LPL employees.

**Full Name**  **Relationship**  **Name of Firm**

Mark here if you or any member of your immediate family has been a corporate officer, director, or owner of 10% or more of any public corporation within the past three months. **Name of Corporation(s)**

**Section IV: Financial Information and Experience**

1. **Enter the letter that corresponds to the correct range:**

**Annual income?**  **Net worth? (exclusive of home)**  **Liquid net worth?\***  **Approximate account value?\***

A. Less than \$25,000    B. \$25,000 - \$49,999    C. \$50,000 - \$99,999    D. \$100,000 - \$249,999    E. \$250,000 - \$499,999  
 F. \$500,000 - \$749,999    G. \$750,000 - \$999,999    H. \$1,000,000 and over

**Source of Client Wealth and Income (inheritance, employment salary, sale of real estate, etc.):**  **Federal income tax bracket? (%)**

**Investment Experience (number of years):**

Annuities  Mutual Funds  Partnerships  Margin  Stocks  Bonds

Options  Other (please specify):

**What are your other investments (includes other assets held by LPL)? Please indicate percentage of net worth (must equal 100%).**

Real Estate \_\_\_\_\_%    Mutual Funds \_\_\_\_\_%    Checking / Savings \_\_\_\_\_%    Annuities \_\_\_\_\_%  
 Insurance \_\_\_\_\_%    Equities \_\_\_\_\_%    Alternative Investments \_\_\_\_\_%    Bonds \_\_\_\_\_%  
 Other \_\_\_\_\_%    If Other, please explain

\*Liquid net worth is exclusive of real estate; only include assets that can be liquidated within 30 days.  
 \*\*Account minimums apply; see the applicable Account Packet for details or ask your financial advisor.

2. What is your investment time horizon for this account?  
 1-3 years     3-5 years     5-10 years     More than 10 years

Do you have liquidity needs from the funds in this account?  Yes     No

If yes, when do you need these funds?  0-3 years     More than 3 years

If yes, specify the approximate dollar amount for the time range indicated above \$ \_\_\_\_\_

**Section V: Advisory Account Information**

1. **Advisor Firm Name**  **Firm ID**  **Business Address**   
  
**Authorized Person Name**  **Business Phone**  **Total Client Account Fee**  (%)

**Trading Authorization:** By signing this application, I authorize LPL to execute trades or update investment instructions in this account at the direction of the Advisor named above or for MAS and MAN accounts, the portfolio manager named in Section VI.  
**Disbursement Authorization:** By signing this application, I authorize LPL to disburse assets from this account for investment purposes or to me personally at the direction of the advisor named above.  
**Fee Payment Authorization:** By signing this application, I authorize LPL to automatically deduct my account fee at the annual rate detailed above and pay the advisory fee to the advisor named above.  
**Account Information:** By signing this application, I authorize LPL to send information regarding my account, including trade confirmations and account statements, to the Advisor named above or for MAS and MAN accounts, the portfolio manager named in Section VI.

2.  **Mark here if you have paid the advisors of this account a commission on the purchase of any security within the past two years on the assets (cash or securities) being deposited into this account (does not apply to MAS or MAN accounts). In order to determine if you qualify for a fee credit, please provide trade details below.** (attach additional pages if necessary)

Purchase Date	Purchase Amount	Investment Name	Fund Class	CUSIP/Symbol	Commission
<input type="text"/>	\$ <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	\$ <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	\$ <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	\$ <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>

3.  **Mark here if you wish to restrict specific securities, categories, groups or sectors from your account (for PWP and MAS accounts only). In order to facilitate these restrictions, please provide restriction details below.\***

**Please provide the symbol (common stock) or the category, sector or group name or code.**       
**Restrictions do not apply to mutual funds.**

Financial advisor should refer to the Resource Center for detailed information on the restriction options available for PWP accounts.  
 \*Certain restrictions may require further review with LPL and your financial advisor (attach additional pages if necessary).

**Section VI: Portfolio Manager Account Information (complete this section for MAS and MAN accounts only)**

1. **Portfolio Manager Name**

**Asset Class\***  **Investment Style\***

Did the portfolio manager indicated above previously manage the assets in this account?  Yes  No

Accepted by Portfolio Manager / Authorized Person Signature \_\_\_\_\_ Accepted by Portfolio Manager / Authorized Person Name (print) \_\_\_\_\_ Date (required) \_\_\_\_\_

\*Financial advisor should refer to the Participation List on the Resource Center for detailed information on each portfolio manager, their available asset classes and investment styles.

2. **Manager Access Network (MAN) Account Fee Breakdown (complete this section for MAN accounts only)**

My Advisor's fee at the annual fee rate of \_\_\_\_\_ %  
 Portfolio Manager's fee at the annual rate of \_\_\_\_\_ %  
 LPL's fee at the annual rate of \_\_\_\_\_ %\*  
 For a total annual rate of \_\_\_\_\_ %

\* For information about LPL's fee, see the Account Packet - MAN.

**Section VII: Margin Agreement (not all account types are eligible to have margin, ask your financial advisor for details)**

<b>1.</b>	<p>A margin account allows you to borrow against eligible securities or purchase securities on margin. Initial below if you want to establish a margin account and to indicate that you have received the Margin Disclosure Statement, have read the margin disclosure section in the Account Packet referenced in Section I, and agree to the terms and conditions.</p> <p><b>Date Margin Disclosure Statement provided:</b> <input style="width: 100px;" type="text"/> <b>ALL</b> account holders must initial. <input style="width: 50px;" type="text"/> Initials <input style="width: 50px;" type="text"/> Initials <input style="width: 50px;" type="text"/> Initials <input style="width: 50px;" type="text"/> Initials</p>
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**Section VIII: Client Acknowledgment and Execution**

	<p><b>I acknowledge by signing below that I have received, read, understand and agree to the terms of this Account Application and the applicable Account Agreement (included in the Account Packet specified in Section I). Additionally I certify the following:</b></p> <ul style="list-style-type: none"> <li>• All of the information provided in this Account Application is true, correct, and complete and I agree to notify LPL of any changes to the information.</li> <li>• For MAS, MWP, OMP and PWP accounts, I have received the Advisory Program Brochure included as part of the applicable Account Packet.</li> <li>• I understand that LPL will supply my name to issuers of any securities held in my account so that I may receive important information regarding those securities, unless I notify LPL in writing not to do so.</li> <li>• I acknowledge that proceeds from liquefied home equity on my primary residence will not be used to fund this account.</li> <li>• I understand and acknowledge that I have granted discretionary authority in the Account Agreement to trade securities in my account to LPL in the case of OMP, PWP and MWP accounts, and to the Portfolio Manager in the case of Manager Access Select accounts.</li> <li>• I have discussed with my financial advisor the investment objective selected for the account in Section II of this Application, and for MWP, PWP and OMP accounts, the model portfolios to be selected for my account.</li> <li>• I understand that investing through an advisory account involves investment risk, including the risk of loss. I am prepared to bear the risks associated with my investments.</li> </ul> <p><b>Suppression of Confirmations (for PWP, MWP, MAS and MAN accounts only):</b> By initialing below, I hereby elect <b>not</b> to receive immediate trade confirmations from LPL for each transaction in the account. Information from the confirmation will be reported on my brokerage account statement.</p> <p style="text-align: center;"> <input style="width: 100px;" type="text"/> Initials                                  <input style="width: 100px;" type="text"/> Initials                                  <input style="width: 100px;" type="text"/> Initials                                  <input style="width: 100px;" type="text"/> Initials         </p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>Under penalties of perjury, I hereby certify that: (1) The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and (3) I am a U.S. person (including a U.S. resident alien). (Cross out (2) if subject to backup withholding.) <b>The Internal Revenue Service does not require my consent to any provision of this document other than the certifications required to avoid backup withholding.</b></p> </div> <p><b>This account is governed by and I acknowledge receipt of the predispute arbitration clause that is located in the last numbered section of the Account Agreement (included in the Account Packet specified in Section I), which is incorporated by reference into this Account Application.</b></p> <table style="width: 100%; border-collapse: collapse; margin-top: 20px;"> <tr> <td style="width: 45%; border-bottom: 1px solid black;"></td> <td style="width: 35%; border-bottom: 1px solid black;"></td> <td style="width: 20%; border-bottom: 1px solid black;"></td> </tr> <tr> <td>Account Holder Signature</td> <td>Account Holder Name (print)</td> <td><b>Date (required)</b></td> </tr> <tr> <td style="border-bottom: 1px solid black;"></td> <td style="border-bottom: 1px solid black;"></td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td>Account Holder Signature</td> <td>Account Holder Name (print)</td> <td><b>Date (required)</b></td> </tr> <tr> <td style="border-bottom: 1px solid black;"></td> <td style="border-bottom: 1px solid black;"></td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td>Additional Account Holder Signatures</td> <td></td> <td><b>Date (required)</b></td> </tr> </table>				Account Holder Signature	Account Holder Name (print)	<b>Date (required)</b>				Account Holder Signature	Account Holder Name (print)	<b>Date (required)</b>				Additional Account Holder Signatures		<b>Date (required)</b>
Account Holder Signature	Account Holder Name (print)	<b>Date (required)</b>																	
Account Holder Signature	Account Holder Name (print)	<b>Date (required)</b>																	
Additional Account Holder Signatures		<b>Date (required)</b>																	

<b>ADVISOR USE ONLY</b>	<p>I have reviewed this document for completeness, accuracy, suitability, and proper disclosures. If this account was opened online and the automated check against the OFAC list of specially designated nationals (SDNs) resulted in a match to the client's name, I have confirmed that the client is not the same person listed by OFAC. If this account is opened by the home office, I have checked the list of SDNs and either the client's name does not appear or, if the client's name is the same as the name of a SDN, the client is not the person listed by OFAC. I have also provided the client with the CIP disclosure either in writing or verbally. For MAS, MAN, MWP, OMP and PWP accounts, I acknowledge and accept that I am a party to the applicable Account Agreement. I have determined that any liquidation of previously purchased investments to deposit assets into this account is suitable for the client and have disclosed to the client all costs incurred by the client to liquidate such investments.</p>			
	Advisory Firm Authorized Person Signature	Advisory Firm Authorized Person Name (print)	Rep ID	Date (required)

**Historical Trade-Off Between Risk, Volatility & Investment Return:**

This chart illustrates five investment objectives. Match your investment needs with the characteristics listed below each investment objective to determine which objective most accurately represents your situation.

