



Statement of Investment Selection and Fee Disclosure for Enhanced Portfolio & Investment Centre® (EPIC) Program

ACCOUNT / CLIENT INFORMATION

Client Name, First M.I. Last		Primary Account SSN/Tax ID#
Co-Client Name, First M.I. Last		Co-Client SSN/Tax ID#
Account # (if available)	Estimated Account Value \$	Registration Type: (IRA, JTWROS, Individual, Trust, etc.)
Financial Adviser Name		Introducing Firm
Initial Deposit: <input type="checkbox"/> Check <input type="checkbox"/> Wire/ACH <input type="checkbox"/> Transfer (ACAT) <input type="checkbox"/> Transfer (check) <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Other _____		
Subsequent Deposits: <input type="checkbox"/> Check <input type="checkbox"/> Wire/ACH <input type="checkbox"/> Transfer (ACAT) <input type="checkbox"/> Transfer (check) <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Other _____		
Recurring Deposit Frequency ¹ : <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually <input type="checkbox"/> None Amount \$ _____ Start Date: _____		
Custodian: <input type="checkbox"/> Fidelity <input type="checkbox"/> Schwab		
Custodian Pricing: <input type="checkbox"/> Transaction-Based <input type="checkbox"/> Asset-Based		

¹Custodian Move Money form required.

RISK PROFILE QUESTIONNAIRE & MODEL PORTFOLIO SELECTION



☐ RiskPro Proposal with Model Portfolio Selection attached here and made a part of this SIS (*skip to Separate Fee Disclosure*)

This questionnaire is designed to gather information to help identify your investment objectives, time horizon and investment risk profile, to assist you in selecting an appropriate model portfolio.

Instructions: Select the answer that is most applicable to you. Once completed, a Risk Profile Score will be calculated for you. If you are completing the form manually, add the points in parenthesis assigned to each response. The total is your Risk Profile Score.

- 1) What is your age?
 - ☐ Over 66 (2.5)
 - ☐ 56-65 (5)
 - ☐ 45-55 (7.5)
 - ☐ Under 45 (10)
- 2) How much cash reserves do you have outside of your investment plan?
 - ☐ 3 months (2.5)
 - ☐ 6 months (5)
 - ☐ 9 months (7.5)
 - ☐ Over 12 months (10)
- 3) Indicate approximately how many years from today until you need to reach your primary investment goals?
 - ☐ Within 1 to 4 years (2.5)
 - ☐ Within 5 to 10 years (5)
 - ☐ Within 11 to 20 years (7.5)
 - ☐ More than 20 years (10)

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- 4) Which of the following statements best describes your reaction if the value of your portfolio suddenly declined by 15%?
 - ☐ I would be very concerned because I cannot accept fluctuations in the value of my portfolio (2)
 - ☐ I invest for long-term growth, and some income, but would be concerned about even a temporary decline (4)
 - ☐ I invest for long-term growth but would be very concerned if the downturn were more than 15% (6)
 - ☐ I invest for long-term growth and can accept some market fluctuation (8)
 - ☐ I invest for long-term growth and accept market fluctuations as normal market risk for an aggressive portfolio (10)

- 5) Which of the following statements most accurately reflects your feelings about the stock market?
 - ☐ I am uncomfortable investing in the stock market and would prefer money markets for investments (2.5)
 - ☐ While I would like the ability to participate in the stock market, I prefer more conservative positions and want a sizable portion of my holdings to be in fixed incomes (5)
 - ☐ I want to participate in the stock market but prefer a mix of fixed incomes and growth- oriented equities (7.5)
 - ☐ I am committed to the stock market and am comfortable that, overtime, I should be rewarded for the extra risks involved in growth-oriented investing (10)

- 6) When do you plan to begin withdrawing money from your investments?
 - ☐ Less than 3 years (2.5)
 - ☐ 3 to 5 years (5)
 - ☐ 6 to 10 years (7.5)
 - ☐ 11 years or more (10)

- 7) How optimistic are you about the long-term prospects for the economy?
 - ☐ Pessimistic (2.5)
 - ☐ Unsure (5)
 - ☐ Somewhat optimistic (7.5)
 - ☐ Very optimistic (10)

- 8) How long are you prepared to wait for your account to return to its original value after a down market?
 - ☐ Less than 18 months (2.5)
 - ☐ Between 18 months and two years (5)
 - ☐ Between two and three years (7.5)
 - ☐ More than three years (10)

- 9) Which of the following best describes your investment objectives?
 - ☐ Preserving principal and earning a moderate amount of current income (0)
 - ☐ Generating a high amount of current income (2.5)
 - ☐ Generating some current income and growing my assets (5)
 - ☐ Moderately growing my assets (7.5)
 - ☐ Growing my assets substantially (10)

- 10) What is your current annual income requirement from this portfolio?
 - ☐ More than 4% (2.5)
 - ☐ 2% to 4% (5)
 - ☐ 0% to 2% (7.5)
 - ☐ I don't need current income (10)

Total Risk Score _____



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MODEL PORTFOLIO SELECTION (Do not make a selection below if providing a RiskPro Proposal that includes a Model Portfolio selection):

Risk Score	Risk Profile	RiskPro® Tolerance Range*	Select only one Model Portfolio:
22 to 43.2	Conservative	+/-0.00% to +/-12.00%	MMS Conservative
43.3 to 53.2	Moderate Conservative	+/-12.01% to +/-17.67%	MMS Moderate Conservative
53.3 to 68.7	Moderate	+/-17.68% - +/-26.51%	MMS Moderate
68.8 to 84.3	Moderate Growth	+/-26.52% to +/-35.35%	MMS Moderate Growth
84.4 to 100	Aggressive	+/-35.36% to +/-44.20%	MMS Aggressive

*Tolerance Range represents the forward looking statistical probable range of the Model Portfolio's absolute returns based on the historical performance of the Model's underlying securities. The range illustrates the upper and lower limits of the Model Portfolio's risk tolerance as a percent of probable gain or loss. The range is hypothetical and inherently limited given it does not reflect fees, trading in actual accounts, economic or market conditions among other factors impacting TPFG's decision making. TPFG generally manages the models within the range of risk however there is no guarantee the range will not be exceeded. For the Aggressive Risk Profile the range is frequently less than 35.36%. All investments contain risk to include the total loss of invested principle.

☐ **The Risk Profile for the model portfolio selected is different than the Risk Profile noted in the Risk Profile Questionnaire but is appropriate for the objectives for this account.**

SPECIAL INSTRUCTIONS

Please note below any special instructions or other limitations the Client wishes to place on this account. The Pacific Financial Group, Inc. ("TPFG") will use its best efforts to accommodate the Special Instructions. In the event TPFG is not able to accommodate the Special Instruction, TPFG in its sole discretion may resign from managing the account.

Describe any Special Instructions that apply to TPFG's management of the Model Portfolio held in this Account:

Separate Fee Disclosure

TPFG has entered into a written agreement with the Financial Adviser's supervising firm ("Introducing Firm") whereby TPFG has agreed to pay the Adviser, via the Introducing Firm, the Adviser Fee for introducing Client to TPFG and for providing to the Client the Adviser Services identified in the Investment Management Agreement ("IMA"). Clients do not pay more on account of TPFG sharing the Program Fee with Adviser. TPFG and the Introducing Firm are not affiliated. When participating in the Program, the Client will pay a Program Fee, comprised of the TPFG Fee and Adviser Fee as noted in the table below. The Program fee is paid quarterly, in advance, and is calculated by multiplying the effective annual Program Fee to the market value of the Account as of the last day of trading for any calendar quarter, and dividing the product by the number of days in the applicable quarter, or pro-rated for any partial quarter during which the Account was invested. The effective annual Program Fee is calculated on a tiered basis which means the Program fee is assessed against each account value range as noted in the table below. When a "Flat Fee" is selected, the effective annual program fee is the sum of the TPFG Fee and the Adviser Fee. Unless Client makes alternative arrangements, TPFG will deduct the Program Fee from the Client's Account in accordance with the terms set forth in the IMA and remit the Adviser Fee to the Adviser. TPFG or Adviser may amend the fees paid by providing Client with prior written notice; provided, however, that the Program Fee will not exceed the Total Program Fee listed in the Fee Schedule.



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Certain Strategist will pay TPGF a fee for making their strategies available in the Program. When TPGF receives compensation from a strategist, the TPGF Fee is reduced by the amount received. In some instances, TPGF charges a reduced Fee to all Clients, which is less than the amount of the TPGF Fee based on the offset approach. See TPGF's Form ADV 2 for additional information about fees and conflicts of interest. The Program Fee does not include other fees or expenses to include the internal fees or expenses charged by mutual funds, exchange traded funds, or other investment vehicles held in the Account, or trading costs or account maintenance fees assessed by the Account Custodian

ASSETS UNDER MANAGEMENT

SELECT ONE:	Up to \$250,000		\$250,001 to \$500,000		\$500,001 to \$1,000,000		\$1,000,001 to \$2,000,000		\$2,000,001 and above	
Fee Schedule	TPFG Fee	Adviser Fee	TPFG Fee	Adviser Fee	TPFG Fee	Adviser Fee	TPFG Fee	Adviser Fee	TPFG Fee	Adviser Fee

OR Enter your own Flat Fee Below:

0.45% TPGF | _____ % Financial Adviser

Notwithstanding anything in the Fee Schedule to the contrary, please note that for the MMS Models, the TPGF Fee is reduced to 0.30%.

CLIENT ACKNOWLEDGEMENT AND INSTRUCTIONS TO TPGF:

By signing below, the undersigned Client(s) confirms that after reviewing the Program and the selected Model Portfolio with the undersigned Financial Adviser, the model selected is consistent with the client's investment objectives, time horizon and risk level. Client has been provided and has reviewed all appropriate disclosures to include Model fact sheets, TPGF's disclosure brochure which further describes the Programs and services offered by TPGF. Client has reviewed and received the Separate Fee Disclosure describing the Program fees and expenses. Client authorizes TPGF to allocate and administer the Account in accordance with the terms and conditions as set forth in this SIS and IMA as may be amended from time to time.

Client Signature	Date
Co-Client Signature	Date

FINANCIAL ADVISER ACKNOWLEDGEMENT

By signing below, I confirm that I am Client's Financial Adviser for this Account and that I provided Client with sufficient information for Client to understand the Program, fees and allocation selected. After reviewing the Program information with the Client and evaluating the Client's investment needs, time horizon, and risk appetite, the Model selected is appropriate for the Client. I have also provided the Client with all necessary disclosures to include without limitation, applicable prospectuses, TPGF's ADV 2A and B, and the Separate Fee Disclosure as incorporated in this document.

Financial Adviser Signature	Financial Adviser Name	Date
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