### Investment Adviser Representatives

### Annual Compliance Questionnaire

**Please read and answer each question carefully in this Annual Compliance Questionnaire. Explanations and definitions are included to assist you. Please provide your initials at the beginning of each item or check the applicable box in response to each question. Sign, date, and return the Questionnaire to the Chief Compliance Officer within 10 business days.**

Legal Name of the Registered Investment Adviser:       (the “Company”)

**Personal Information**

Name:

CRD #:

Date of Completion:

**Acknowledgement of Receipt, Review, and Understanding of Company Policies and Procedures**

      I acknowledge receipt of and I have reviewed the Company’s current Compliance Manual (including the Company privacy policies); and, I understand that I am responsible for complying with all Company policies and procedures and with any future revisions thereto as provided to me by the Company.

      I acknowledge receipt of and I have reviewed the Company’s current Code of Ethics; and, I understand that I am responsible for complying with the Company’s Code of Ethics and personal securities transactions reporting requirements and any future revisions thereto as provided to me by the Company.

**A. Electronic Communications**

1. I understand that all business related electronic communications sent or received through my designated computer system or any personal device used for business purposes are subject to monitoring by authorized representatives of the Company. Such monitoring may include reading and printing incoming, outgoing, and stored electronic communications on this system.
2. I have been advised and I understand that electronic communications may be considered advertising under the Advisers Act. I agree to comply with all rules with regard to electronic communications set forth by the Company, the SEC, and other regulatory entities.

**B. Advertising**

1. I have reported all advertising conducted by me to the Company’s Compliance Department. I understand that advertising includes all communications sent to any written communication addressed to more than one person, or any notice or announcement in any publication or by radio, television, or electronic media, which offers securities analysis or reports or offers any investment advisory services regarding securities, and includes websites, social media sites, and blogs.

**C. Custody**

1. I do not maintain possession of any of the Company’s clients’ funds or securities (including cash, stock certificates, precious metals, etc.).
2. I do not have any arrangement, including trustee arrangements or general powers of attorney, under which I am authorized or permitted to withdraw or cause to be withdrawn any client funds or securities maintained with a custodian, including any broker-dealer, bank, trust company, credit union, or such similar institution holding client funds or securities.
3. I do not have client account login information that allows me to change the client’s address of record or to request a third party transfer of funds or securities without the client’s written confirmation for each occurrence.

**D. Covered Accounts,**[[1]](#footnote-2)  **Personal Securities Transactions, and Other Business Activities**

1. I have a direct or indirect ownership interest in, or I have discretionary trading authority over securities accounts at the following firms, not previously reported to the Company:

|  |  |  |
| --- | --- | --- |
| **Name of Custodian****(Broker/Dealer, Bank, Trust Co., etc.)** | **Account Name** | **Account Number** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

1. Are duplicate statements and confirmations currently being sent to the Company for all Covered Accounts listed above and have all Covered Accounts been previously reported? [ ]  Yes  [ ]  No

 If not, am I providing personal securities transactions reports on a quarterly basis and am I providing an annual holdings report to the Company? [ ]  Yes [ ]  No

1. Has anyone in your immediate family or anyone living in your household accepted employment with a registered investment Adviser, broker/dealer, trust company, or banking institution within the last year, not previously reported to the Company? [ ]  Yes [ ]  No
2. Do you, your spouse, your dependent children, or any other person to whom you provide financial support have an interest in a securities account at another securities firm, not previously reported to the Company? [ ]  Yes [ ]  No
3. Have you engaged in any private securities transaction (such as a hedge fund or other private placement) or any initial public offering without prior written approval from the CCO? [ ]  Yes [ ]  No **If yes, explain:**

      I will immediately notify the Chief Compliance Officer of the Company, if at any time in the future I have (or if any immediate family member or other person described above has) trading authorization over, or direct or indirect interest in, securities or commodities accounts with any other Covered Accounts.

1. While associated with the Company, have you been engaged in any other business enterprise, not previously reported? [ ]  Yes [ ]  No **\*\*If yes, submit an Outside Business Activity Form with this Compliance Questionnaire.**
2. While associated with the Company, have you received compensation from any person or entity where the Company has not pre-approved the arrangement? [ ]  Yes [ ]  No **If yes, explain:**
3. While associated with the Company, have you been associated[[2]](#footnote-3) with another Registered Investment Adviser or a Broker/Dealer, not affiliated with the Company? [ ]  Yes [ ]  No **If yes, explain:**
4. Have you **ever** borrowed or loaned money or securities from or to a client of the Company? [ ]  Yes [ ]  No

**If yes, explain:**

1. Have you reported all gifts given to or received from clients to the Company? [ ]  Yes [ ]  No [ ]  N/A **\*\*If no, submit a Gift Report with this Compliance Questionnaire.**
2. Have you reported all complaints received from clients to the Company? [ ]  Yes [ ]  No [ ]  N/A

**If no, explain:**

**Certification of Compliance with the Code of Ethics**

I hereby acknowledge, certify, represent, warrant, and agree that:

      I have reported all Reportable Securities holdings in which I have a Beneficial Ownership except for transactions, which are exempt from reporting, or for which I have received a written exception from the Chief Compliance Officer.

      I have obtained pre-clearance for all Reportable Securities transactions in which he or she has Beneficial Ownership, except for transactions, which are exempt from pre-clearance, or for which I have received a written exception from the Chief Compliance Officer.

      I have and will continue to comply with the Code of Ethics in all other respects.

**E. Form U-4 and Form ADV Part 2B Brochure Supplement**

You are required to make sure the information on your Form U-4 and Form ADV Part 2B Brochure Supplement is current.

1. I have reviewed, in detail, the latest Form U-4 and Form ADV Part 2B Brochure Supplement provided to me by the Company; and, all items, including all questions in Item 14 of Form U4, are accurate. [ ]  Yes [ ]  No \*\***If no, attach corrections to this Compliance Questionnaire.**

**Address Changes**

1. If your home address has changed in the past year, have you provided written notice to the Company’s Chief Compliance Officer? [ ]  Yes [ ]  No [ ]  N/A **\*\*If no, please attach written notice, including the effective date, to this Compliance Questionnaire.**
2. If your business address has changed in the past year, have you provided written notice to the Company’s Chief Compliance Officer? [ ]  Yes [ ]  No [ ]  N/A **\*\*If no, please attach written notice, including the effective date, to this Compliance Questionnaire.**

**Name Changes**

1. While associated with the Company, have you legally changed your name? [ ]  Yes [ ]  No
2. If yes, have you provided written notice to the Company’s Chief Compliance Officer? [ ]  Yes [ ]  No **\*\*If no, please attach written notice to this Compliance Questionnaire.**

      Upon the occurrence of any event listed in this section E, I acknowledge that I must notify the Chief Compliance Officer in writing immediately.

**F. Certifications and Signatures**

      I hereby certify that answers provided above are true and correct.

      I hereby certify that I will immediately notify the Chief Compliance Officer of the Company, if at any time in the future the information provided above changes.

(Optional) Comments:

Name of Associated Person Name of Chief Compliance Officer

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Signature Signature

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Date Date Reviewed

1. A Covered Account generally consists of any account in the name of the Firm or an Associated Person or in which the Firm or an Associated Person:

	1. Has any direct or indirect beneficial ownership interest and
	2. Exercises control or influence and/or
	3. An account carried in the name of, or for the direct beneficial interest of, a person related to the Associated Person (related person).A Covered Account excludes any such account over which the employee exercises no control or influence (i.e., an account over which a third party or entity exercises exclusive discretionary authority). [↑](#footnote-ref-2)
2. Associated includes acting as a registered investment adviser representative or as a solicitor. [↑](#footnote-ref-3)