

Account Application

Advisory - Non-Retirement

A1

Account Number

Rep ID

Financial advisor instructions: To be used for all LPL 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 New Accounts at (858) 202-8325.

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

Section I: Account Information

1. Account Type (choose only one)

Account updates required by LPL Operations

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 financial advisor, LPL Financial ("LPL") and other related parties as applicable to your account.

- Strategic Asset Management (Account Packet - SAM) Optimum Market Portfolios Advisory (Account Packet - OMP)
 Strategic Asset Management II (Account Packet - SAM II) Model Wealth Portfolios (Account Packet - MWP)
 Manager Select (Account Packet - Manager Select) Personal Wealth Portfolios (Account Packet - PWP)

2. Registration Type (choose only one)

- Individual Guardianship/Conservatorship* Personal Trust* Corporate*
 Tenants in Common Custodian for Minor Partnership* Non-Profit Organization*
 Community Property Coverdell ESA* Limited Liability Company* Omnibus*
 Joint Tenants With Rights of Survivorship Estate*
 Other (Please specify):

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

Is this account for a Government Entity? Yes No

Is your account holder 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. Registration Information

Social Security Number or Tax ID

Country of Citizenship

Mailing Address

Fill in your current residency status: (choose only one)

- U.S. Citizen Resident Alien Non-Resident Alien

Account Address (no P. O. Boxes) Same as mailing address

Account Registration

Primary Phone

Secondary Phone



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 with minimal risk 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).

1. Primary Information

Primary Account Holder/Trustee/Minor/Auth. Officer			Occupation <small>(former if retired or unemployed)</small>		ID Type (Ex: Driver's License, Passport, etc.)	
Social Security Number			Date of Birth		No. of Dependents	
Residence Address (no P. O. Boxes) <input type="checkbox"/> Same as mailing address			Employer Name <input type="checkbox"/> Mark here if retired or unemployed		ID Number	
Primary Phone			Secondary Phone		Country of Citizenship	
			Employment Address (no P.O. boxes)		ID Issuance Date	
					ID Expiration Date	
					ID verified? <input type="radio"/> Yes <input type="radio"/> No	

Mark here and complete the below information if a FINRA employee or person associated with a broker/dealer or municipal securities dealer has a financial interest in, controls trading in, or has discretionary authority over this account (e.g., accounts for minor children). This includes situations where you are employed by FINRA or associated with a broker/dealer or municipal securities dealer. This also includes situations where your spouse, domestic partner, or other immediate family member is employed by FINRA or associated with a broker/dealer or municipal securities dealer.

LPL will notify FINRA, the broker/dealer, or the municipal securities dealer regarding this account and may transmit duplicate statements, confirmations and other information concerning the account. By completing and signing this new account application, you authorize LPL to provide transactional data as listed above to FINRA, the broker/dealer, or municipal securities dealer as applicable.

Full Name of Person Associated with Firm or FINRA		Relationship to Account Holder of Person Associated with Firm or FINRA		Name of Associated Firm (if FINRA, list FINRA)	
Address of Person Associated with Firm or FINRA		Corporate Compliance Mailing Address of firm			
<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.					Name of Corporation(s)

Account Number



Section III: Account Holder Information (continued)

2. Secondary Information

Secondary Account Holder/Trustee/Minor/Auth. Officer <input type="text"/>			Occupation (former if retired or unemployed) <input type="text"/>		ID Type (Ex: Driver's License, Passport, etc.) <input type="text"/>
Social Security Number <input type="text"/>	Date of Birth <input type="text"/>	No. of Dependents <input type="text"/>	Industry (former if retired) <input type="text"/>		ID Place of Issuance <input type="text"/>
Residence Address (no P. O. Boxes) <input type="checkbox"/> Same as mailing address <input type="text"/>			Employer Name <input type="checkbox"/> Mark here if retired or unemployed <input type="text"/>		ID Number <input type="text"/>
<input type="text"/>			Employment Address (no P.O. boxes) <input type="text"/>		ID Issuance Date <input type="text"/>
Primary Phone <input type="text"/>	Secondary Phone <input type="text"/>	Country of Citizenship <input type="text"/>	<input type="text"/>		ID Expiration Date <input type="text"/>
<input type="text"/>			<input type="text"/>		ID verified? <input type="radio"/> Yes <input type="radio"/> No

Mark here and complete the below information if a FINRA employee or person associated with a broker/dealer or municipal securities dealer has a financial interest in, controls trading in, or has discretionary authority over this account (e.g., accounts for minor children). This includes situations where you are employed by FINRA or associated with a broker/dealer or municipal securities dealer. This also includes situations where your spouse, domestic partner, or other immediate family member is employed by FINRA or associated with a broker/dealer or municipal securities dealer.

LPL will notify FINRA, the broker/dealer, or the municipal securities dealer regarding this account and may transmit duplicate statements, confirmations and other information concerning the account. By completing and signing this new account application, you authorize LPL to provide transactional data as listed above to FINRA, the broker/dealer, or municipal securities dealer as applicable.

Full Name of Person Associated with Firm or FINRA <input type="text"/>	Relationship to Account Holder of Person Associated with Firm or FINRA <input type="text"/>	Name of Associated Firm (if FINRA, list FINRA) <input type="text"/>
Address of Person Associated with Firm or FINRA <input type="text"/>		Corporate Compliance Mailing Address of firm <input type="text"/>

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.

Section IV: Financial Information and Experience

1. Investment Information

Enter the letter that corresponds to the correct range:

Annual income? <input type="text"/>	Net worth? (exclusive of home) <input type="text"/>	Liquid net worth?* <input type="text"/>	Approximate account value?** <input type="text"/>
A. \$1 - \$24,999	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

Specify the exact Source of Account Holder Wealth and Income (e.g. 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 assets/investments (includes positions held outside and by LPL in this and other accounts)? Please indicate percentage of assets in whole numbers exclusive of primary home (must equal 100%). Do not provide percentages in fractions or decimals.

Real Estate	___%	Mutual Funds	___%	Checking / Savings	___%	Annuities	___%
Insurance	___%	Stocks	___%	Alternative Investments	___%	Bonds	___%
Other	___%	If Other, please explain <input type="text"/>					

*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.

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Section IV: Financial Information and Experience (continued)

2. Investment Time Horizon and Liquidity Needs

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 Program Account Information

1. Primary Financial Advisor Information

Primary Financial Advisor Name		Business Address	
<input type="text"/>		<input type="text"/>	
Total Account Fee	Business Phone		
<input type="text"/> (%)	<input type="text"/>	<input type="text"/>	

2. Commissions on Trades from Accounts Outside of LPL (Optional)

Financial Advisor(s): mark here if you wish to apply a fee credit to the assets (cash or securities) being deposited into this account that originated from a firm other than LPL Financial and a commission was earned by you within the past two years. Please provide trade details below to apply for a fee credit:

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. Specific Securities Restrictions

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

Restrict common stock securities: (enter symbol)

Restrictions do not apply to mutual funds. (attach additional pages if necessary)

Other Restrictions (for SAM/SAM II and PWP accounts only): Please explain any other restrictions below. This includes any industry group, sector or social category restrictions that apply to a PWP account. Financial advisor should refer to the Resource Center for detailed information on the restriction options available for PWP accounts. (attach additional pages if necessary)

*Certain restrictions may require further review with LPL and your financial advisor.

Initials Initials

Account Number



Section VI: Manager Select Account Information

1. Complete This Section for Manager Select Accounts Only

Portfolio Manager Name	Asset Class*	Investment Style*
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

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

1. Margin Disclosure Statement Information

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.

Date Margin Disclosure Statement provided: ALL account holders must initial.

<input type="text"/>	<input type="text"/>
Initials	Initials

Section VIII: Account Holder Acknowledgment and Execution

1. Delivery Preferences If you have provided your email address in this application, you may elect to receive documents from LPL electronically.

- Yes, I want to receive documents from LPL electronically (including account statements, trade confirmations and performance reports). I acknowledge that I need to (i) maintain an active email account to receive notifications from LPL when documents are available and (ii) login to Account View and accept its terms and conditions of use before I am able to view the documents electronically.
- No, I do not want to receive documents from LPL electronically. Please send me paper copies of all communications related to my account. This is the default selection if "Yes" is not selected above.

You may revoke your election to receive electronic documents or request paper copies of electronic documents at any time by logging into Account View or contacting your Financial Advisor.

2. Suppression of Confirmations (for PWP, MWP and Manager Select accounts only):

By initialing below, I hereby elect not 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.

<input type="text"/>	<input type="text"/>
Initials	Initials

3. Name Differences/One and the Same Information (not to be used in lieu of court documentation for legal name changes)

List any name differences that you are known by or commonly use in the space provided. By listing the names below and signing Section VIII, you are authorizing LPL to accept transactions and follow instructions under all names listed.

4. Acknowledgment

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:

- 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.
- I have received the Advisory Program Brochure included as part of the applicable Account Packet and the Brochure Supplement of the financial advisor servicing my advisory account.
- I understand and acknowledge that I have granted discretionary authority in the Account Agreement to trade securities in my account to my financial advisor in the case of SAM/SAM II accounts, to my financial advisor and LPL in the case of OMP, PWP and MWP accounts, and to the Portfolio Manager in the case of Manager Select accounts.

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4. Acknowledgment (continued)

- 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.
- 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.
- 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.
- I acknowledge that proceeds from liquefied home equity on my primary residence will not be used to fund this account.
- 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.
- I understand the differences between an advisory and brokerage account and by signing below affirm my decision, based on discussions with my financial advisor and information provided to me, to work with my financial advisor in an advisory relationship.

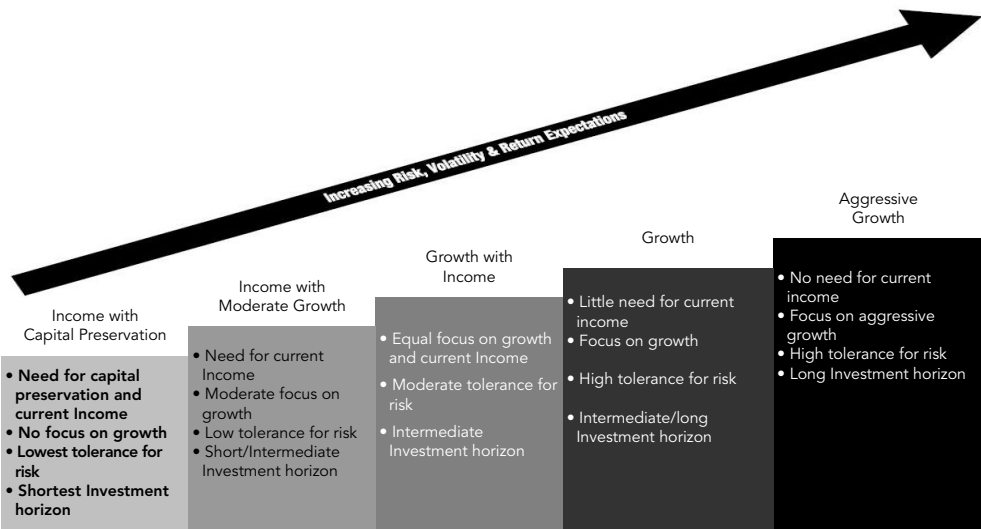
Under penalties of perjury, I hereby certify that: (1) The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been 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, (3) I am a U.S. person (including a U.S. resident alien), and (4) I attest I am exempt from FATCA Reporting. (However, if you provide an IRS W-8 form, it will supersede this statement and you may be subject to FATCA Reporting.) (Cross out (2) if subject to backup withholding.) The Internal Revenue Service does not require my consent to any provision of this document other than the certifications required to avoid backup withholding.

Account Holder Signature	Account Holder Name (print)	Date (required)
Account Holder Signature	Account Holder Name (print)	Date (required)

5. Branch Use Only

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 account holder's name, I have confirmed that the account holder 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 account holder's name does not appear or, if the account holder's name is the same as the name of a SDN, the account holder is not the person listed by OFAC. I have also provided the account holder with the CIP disclosure either in writing or verbally. 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 account holder and have disclosed to the account holder all costs incurred by the account holder to liquidate such investments.

Financial Advisor / Authorized Person Signature	Financial Advisor / Authorized Person Name (print)	Rep ID	Date (required)
Joint Financial Advisor / Authorized Person Signature	Joint Financial Advisor / 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.

Account Number

