Form BD

OMB Approval

OMB Number: 3235-0012 Expires: April 30, 2026

Estimated average burden hours

per response:

2.75.

per amendment: 0.33.

Uniform Application for Broker-Dealer Registration

FORM BD INSTRUCTIONS

A. GENERAL INSTRUCTIONS

- 1. Form BD is the Uniform Application for Broker-Dealer Registration. Broker-Dealers must file this form to register with the Securities and Exchange Commission, the *self-regulatory organizations*, and *jurisdictions* through the Central Registration Depository ("CRD") system, operated by FINRA.
- 2. **UPDATING** By law, the *applicant* must promptly update Form BD information by submitting amendments whenever the information on file becomes inaccurate or incomplete for any reason.
- 3. **CONTACT EMPLOYEE** The individual listed as the contact employee must be authorized to receive all compliance information, communications, and mailings, and be responsible for disseminating it within the *applicant's* organization.

4. GOVERNMENT SECURITIES ACTIVITIES

- A. Broker-dealers registered or *applicants* applying for registration under Section 15(b) of the Exchange Act that conduct (or intend to conduct) a government securities business in addition to other broker-dealer activities (if any) must file a notice on Form BD by answering "yes" to Item 2B.
- B. Section 15C of the Securities Exchange Act of 1934 requires sole government securities broker-dealers to register with the SEC. To do so, answer "yes" to Item 2C if conducting *only* a government securities business.
- C. Broker-dealers registered under Section 15(b) of the Exchange Act that cease to conduct a government securities business must file notice when ceasing their activities in government securities. To do so, file an amendment to Form BD and answer "yes" to Item 2D.

NOTE: Broker-dealers registered under Section 15C may register under Section 15(b) by filing an amendment to Form BD and answering "yes" to Items 2A and 2D. By doing so, broker-dealer expressly consents to withdrawal of broker-dealer's registration under 15C of the Exchange Act.

5. **FEDERAL INFORMATION LAW AND REQUIREMENTS** An agency may not conduct or sponsor, and a *person* is not required to respond to, a collection of information unless it displays a currently valid control number. Sections 15, 15B, 15C, 17(a) and 23(a) of the Exchange Act authorize the Commission to collect the Information on this Form from registrants. See 15 U.S.C. §§78o, 78o-4, 78o-5, 78q and 78w. Filing of this Form is mandatory; however, the social security number information, which aids in identifying the *applicant*, is voluntary. The principal purpose of this Form is to permit the Commission to determine whether the *applicant* meets the statutory requirement to engage in the securities business. The Form also is used by *applicants* to register as broker-dealers with certain *self-regulatory organizations* and all of the states. The Commission and the Financial Industry Regulatory Authority, Inc. maintain the files of the information on this Form and will make the information publicly available. Any member of the public may direct to the Commission any comments concerning the accuracy of the burden estimate on application facing page of this Form, and any suggestions for reducing this burden. This collection of information has been reviewed by the Office of Management and Budget in accordance with the clearance requirements of 44 U.S.C. §3507. The information contained in this form is part of a system of records subject to the Privacy Act of 1974, as amended. The Securities and Exchange Commission has published in the Federal Register the Privacy Act Systems of Records Notice for these records.

B. PAPER FILING INSTRUCTIONS (FIRST TIME *APPLICANTS* FILING WITH CRD AND WITH SOME *JURISDICTIONS*)

1. FORMAT

- A. A full paper Form BD is required when the *applicant* is filing with the CRD for the first time. In addition, some *jurisdictions* may require a separate paper filing of Form BD. The *applicant* should contact the appropriate *jurisdiction(s)* for specific filing requirements.
- B. Attach an Execution Page (Page 1) with original manual signatures to the initial Form BD filing.
- C. Type all information.
- D. Give the name of the broker-dealer and date on each page.
- E. Use only the current version of Form BD and its Schedules or a reproduction of them.
- 2. **DISCLOSURE REPORTING PAGE (DRP)** Information concerning the *applicant* or *control affiliate* that relates to the occurrence of an event reportable under Item 11 must be provided on the *applicant's* appropriate DRP(BD). If a *control affiliate* is an individual or organization registered through the CRD, such *control affiliate* need only complete Part I of the *applicant's* appropriate DRP(BD). Details of the event must be submitted on the *control affiliate's* appropriate DRP(BD) or DRP(U-4). Attach a copy of the fully completed DRP(BD), or DRP(U-4) previously submitted. If a *control affiliate* is an individual or organization <u>not</u> registered through the CRD, provide complete answers to all of the items on the *applicant's* appropriate DRP(BD).

- 3. **SCHEDULES A, B AND C** File Schedules A and B only with initial applications for registration. Use Schedule C to update Schedules A and B. Individuals not required to file a Form U-4 (individual registration) with the CRD system who are listed on Schedules A, B, or C must attach page 2 of Form U-4. The *applicant* broker-dealer must be listed in Form U-4 Item 20 or 21. Signatures are not required.
- 4. **SCHEDULE D** Schedule D provides additional space for explaining answers to Item 1C(2), and "yes" answers to items 5, 7, 8, 9, 10, 12, and 13 of Form BD.

C. ELECTRONIC FILING INSTRUCTIONS (APPLICANTS/REGISTERED BROKER-DEALERS FILING AMENDMENTS WITH CRD)

1. FORMAT

- A. Items 1-13 must be answered and all fields requiring a response must be completed before the filing will be accepted.
- B. *Applicant* must complete the execution screen certifying that Form BD and amendments thereto have been executed properly and that the information contained therein is accurate and complete.
- C. To amend information, applicant must update the appropriate Form BD screens.
- D. A paper copy, with original manual signatures, of the initial Form BD filing and amendments to Disclosure Reporting Pages (DRPs BD) must be retained by the *applicant* and be made available for inspection upon a regulatory request.
- 2. **DISCLOSURE REPORTING PAGE (DRP)** Information concerning the *applicant* or *control affiliate* that relates to the occurrence of an event reportable under Item 11 must be provided on the *applicant's* appropriate DRP(BD). If a *control affiliate* is an individual or organization registered through the CRD, such *control affiliate* need only complete the *control affiliate* name and CRD number of the *applicant's* appropriate DRP(BD). Details for the event must be submitted on the *control affiliate*'s appropriate DRP(BD) or DRP(U-4). If a *control affiliate* is an individual or organization <u>not</u> registered through the CRD, provide complete answers to all of the questions and complete all fields requiring a response on the *applicant's* appropriate DRP(BD) screen.
- 3. **DIRECT AND INDIRECT OWNERS** Amend the Direct Owners and Executive Officers screen and the Indirect Owners screen when changes in ownership occur. *Control affiliates* that are individuals who are not required to file a Form U-4 (individual registration) with the CRD must complete page 2 of Form U-4 (i.e., submit/file the information elicited by the Personal Data Residential History, and Employment and Personal History sections of that Form). The *applicant* broker-dealer must be listed in Form U-4 Item 20 or 21.

The CRD mailing address for questions and correspondence is:

NASAA/FINRA CENTRAL REGISTRATION DEPOSITORY P.O. BOX 9495 GAITHERSBURG, MD 20898-9495

EXPLANATION OF TERMS(The following terms are italicized throughout this form.)

1. **GENERAL**

APPLICANT - The broker-dealer applying on or amending this form.

CONTROL - The power, directly or indirectly, to direct the management or policies of a company, whether through ownership of securities, by contract, or otherwise. Any *person* that (i) is a director, general partner or officer exercising executive responsibility (or having similar status or functions); (ii) directly or indirectly has the right to vote 25% or more of a class of a voting security or has the power to sell or direct the sale of 25% or more of a class of voting securities; or (iii) in the case of a partnership, has the right to receive upon dissolution, or has contributed, 25% or more of the capital, is presumed to control that company. (This definition is used solely for the purpose of Form BD.)

JURISDICTION - A state, the District of Columbia, the Commonwealth of Puerto Rico, the U.S. Virgin Islands, Guam, or any subdivision or regulatory body thereof PERSON - An individual, partnership, corporation, trust, or other organization.

SELF-REGULATORY ORGANIZATION - Any national securities or commodities exchange or registered securities association, or registered clearing agency.

2. FOR THE PURPOSE OF ITEM 5 AND SCHEDULE D

SUCCESSOR - An unregistered entity that assumes or acquires substantially all of the assets and liabilities, and that continues the business of, a registered predecessor broker-dealer, who ceases its broker-dealer activities. [See Securities Exchange Act Release No. 31661 (December 28, 1992), 58 FR 7 (January 4, 1993)]

3. FOR THE PURPOSE OF ITEM 11 AND THE CORRESPONDING DISCLOSURE REPORTING PAGES (DRPs)

CHARGED - Being accused of a crime in a formal complaint, information, or indictment (or equivalent formal charge).

CONTROL AFFILIATE – A *person* named in Items 1A, 9 or in Schedules A, B or C as a *control person* or any other individual or organization that directly or indirectly controls, is under common control with, or is controlled by, the *applicant*, including any current employee except one performing only clerical, administrative, support or similar functions, or who, regardless of title, performs no executive duties or has no senior policy making authority.

ENJOINED - Includes being subject to a mandatory injunction, prohibitory injunction, preliminary injunction, or a temporary restraining order.

FELONY - For *jurisdictions* that do not differentiate between a *felony* and a *misdemeanor*, a *felony* is an offense punishable by a sentence of at least one year imprisonment and/or a fine of at least \$1,000. The term also includes a general court martial.

FOREIGN FINANCIAL REGULATORY AUTHORITY - Includes (1) a foreign securities authority; (2) other governmental body or foreign equivalent of a *self-regulatory organization* empowered by a foreign government to administer or enforce its laws relating to the regulation of *investment* or *investment-related* activities; and (3) a foreign membership organization, a function of which is to regulate the participation of its members in the activities listed above.

FOUND - Includes adverse final actions, including consent decrees in which the respondent has neither admitted nor denied the findings, but does not include agreements, deficiency letters, examination reports, memoranda of understanding, letters of caution, admonishments, and similar informal resolutions of matters.

INVESTMENT OR INVESTMENT-RELATED – Pertaining to securities, commodities, banking, insurance, or real estate (including, but not limited to, acting as or being associated with a broker-dealer, municipal securities dealer, government securities broker or dealer, issuer, investment company, investment adviser, futures sponsor, bank, or savings association).

INVOLVED - Doing an act or aiding, abetting, counseling, commanding, inducing, conspiring with or failing reasonably to supervise another in doing an act.

MINOR RULE VIOLATION - A violation of a *self-regulatory organization* rule that has been designated as "minor" pursuant to a plan approved by the U.S. Securities and Exchange Commission. A rule violation may be designated as "minor" under a plan if the sanction imposed consists of a fine of \$2,500 or less, and if the sanctioned person does not contest the fine. (Check with the appropriate *self-regulatory organization* to determine if a particular rule violation has been designated as "minor" for these purposes).

MISDEMEANOR - For *jurisdictions* that do not differentiate between a *felony* and a *misdemeanor*, a *misdemeanor* is an offense punishable by a sentence of less than one year imprisonment and/or a fine of less than \$1,000. The term also includes a special court martial.

ORDER - A written directive issued pursuant to statutory authority and procedures, including orders of denial, suspension, or revocation; does not include special stipulations, undertakings or agreements relating to payments, limitations on activity or other restrictions unless they are included in an *order*.

PROCEEDING - Includes a formal administrative or civil action initiated by a governmental agency, *self-regulatory organization* or a *foreign financial regulatory authority*; a *felony* criminal indictment or information (or equivalent formal charge); or a *misdemeanor* criminal information (or equivalent formal charge). Does not include other civil litigation, investigations, or arrests or similar charges effected in the absence of a formal criminal indictment or information (or equivalent formal charge).

FORM BD

Page 1 (Execution Page)

Date:

Uniform Application for Broker-Dealer Registration

_ SEC File No: 8	3	Firm CRD No.:	

Offici	al Use
Offici	ai Use

Official Use Only

WARNING:

Failure to keep this form current and to file accurate supplementary information on a timely basis, or the failure to keep accurate books and records or otherwise to comply with the provisions of law applying to the conduct of business as a broker-dealer would violate the Federal securities laws and the laws of the *jurisdictions* and may result in disciplinary, administrative, injunctive or criminal action.

. E		□ APPLICATION	□ AMENDMENT	
_	xact name, principal b	ousiness address, mailing address, if	different, and telephone number	er of <i>applicant:</i>
A.	Full name of the app	olicant (if sole proprietor, state last, fi	rst and middle name):	
В.	IRS Empl. Ident. No.	<u> </u>		
C.	(1) Nar	me under which broker-dealer busine	ess primarily is conducted, if diff	erent from Item 1A.
	(2) List	on Schedule D, Page 1, Section I and	ny other name by which the firm	n conducts business and where it is
D.	If this filing makes a the	name change on behalf of the applic	cant, enter the new name and sp	pecify whether the name change is of
	☐ <i>applicant</i> name (1	IA) or □ business name (1C):		
	Please check above			
E.	Firm main address:	(Do not use a P.O. Box)		
	Number and Street	1:	Number and Street 2:	
	City:	State:	Country:	Zip+4/Postal Code:
	Branch offices or oth	ner business locations must be repor	ted on Schedule E.	
F.	Mailing address, if d	·		
	Number and Street	1:	Number and Street 2:	
	City:	State:	Country:	Zip+4/Postal Code:
G	Business Telephone	Number:	<u> </u>	
	Contact Employee:	Number.		
	Name:	Title:	Telephone Number	er:
<u></u>	UTION:			
		aws of the State(s) designated in Item 2 relating to eith	her the offer or sale of securities or commoditie	s, the undersigned and applicant hereby certify that the
or the populicani incression nection oceeditapplication ne application e application e application e under e information e under e informatical e properties application e under e informatical e informa	ors in such office, attorney for the on with the offer or sale of secur- ing against the applicant may be mit were a resident in said State licant consents that service of ar cant's broker-dealer activities, or to the applicant's contact emplo- ersigned, being first duly sworn, mation and statements contained	ities or commodities, or out of the violation or alleged commenced in any court of competent jurisdiction and s) and had lawfully been served with process in said s by civil action brought by or notice of any proceeding by or of any application for a protective decree filed by the type at the main address, or mailing address if differer	ppoint the administrator of each of those State(sd any notice, process, or pleading in any action violation of the laws of those State(s), and the adproper venue within said State(s) by service (State(s)). Defore the Securities and Exchange Commission Securities Investor Protection Corporation, maint, given in Items 1E and 1F. Lon behalf of, and with the authority of, said appin information filed herewith, all of which are made	(s) or such other person designated by law, and the n or proceeding against the applicant arising out of or in applicant hereby consents that any such action or of process upon said appointee with the same effect as on or any self-regulatory organization in connection with any be given by registered or certified mail or confirmed plicant. The undersigned and applicant represent that de a part hereof, are current, true and complete. The
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	FORM BD	Applicant Name:			Offici	al Use	C			
	Page 2	Date:	Firm CRD No.:							
2.		the appropriate box(es) each g d or registering as a broker-dea		organization, or <i>jurisd</i>	iction in whic	ch the				
	If applicant is register	red or registering with the SEC	, check here and answ	er Items 2A through 2I	D below.	[]				
٥ آ						YES I	NO			
MMISSI		gistered or registering as a bro change Act of 1934?	ker-dealer under Section	on 15(b) or Section 15	B of the	[]	[]			
HANGE CO	B. Is applicant registered or registering as a broker-dealer under Section 15(b) of the Securities Exchange Act of 1934 and also acting or intending to act as a government securities broker or dealer?									
SECURITIES AND EXCHANGE COMMISSION	der Section	[]	[]							
JRITIES	D. Is <i>applicant</i> ceasing its activities as a government securities broker or dealer?									
SECI		rs "yes" to Items 2A and 2D, ap ties broker or dealer under Sec								
SRO	[]FINRA []NYSE ARCA []NADAQ []CBOE BYX []CBOE EDGX []GEMX []EMERALD []BOX []NYSE CHX []C2 []CBOE BZX []BX []MRX []MIAX []IEX []NYSE AMER []NYSE NAT []CBOE EDGA []ISE []PHLX []PEARL []LTSE									
3.	[] District of Columbia [] Florida [] Georgia A. Indicate lega [] Corporat [] Partners B.	hip [] Limited Lia icant's fiscal year ends:	bility Company		[] Tenne [] Texas [] Utah [] Vermo [] Virgini [] Washi [] West \ [] Wyom	ont Islands a ngton /irginia nsin ing				
	where incor		reement was filed, or w formation: D	here applicant entity wate of formation: MM/E	vas formed): DD/YYYY					
		and, if applicable, Schedule B dules must be provided on Sche		part of all initial applica	ations. Amer	ndments to	•			
4.	If applicant i	is a sole proprietor, state full re urity Number:		Social Security Number	r.					
					Zip + 4/Post					
5.	Do not repo	at the time of this filing succee ort previous successions alread ntact CRD prior to submitting fo	y reported on Form BD).		YES N	() ()			
6.	Does <i>applic</i> broker or de	cant hold or maintain any funds ealer?	or securities or provide	e clearing services for	any other	[]	[]			
7.		cant refer or introduce customer inplete appropriate items on Sci				[]	[]			

	FC	RM B	D	Applicant Name:	Officia	ıl Us	Official Use Only			
	F	Page 3		Date: Firm CRD No.:				Offiny		
8.		Does a	pplican	<i>t</i> have any arrangement with any other <i>person</i> , firm, or organization under wh	ich:					
	A.	any boo	ks or r	ecords of <i>applicant</i> are kept or maintained by such other <i>person</i> , firm or orgar	nization?	YES	NO []			
	В.	account	s, fund	s, or securities of the <i>applicant</i> are held or maintained by such other <i>person</i> ,		[]	[]			
	C.	organiza account		s, or securities of customers of the <i>applicant</i> are held or maintained by such o	other <i>person</i> ,	[]	[]			
		paragra	poses o	of 8B and 8C, do not include a bank or satisfactory control location as defined of Rule 15c3-3 under the Securities Exchange Act of 1934 (17 CFR 240.15c3	-3).					
				part of Item 8, complete appropriate items on Schedule D, Page 1, Section IV	<u>'</u> .					
9.			• .	on not named in Item 1 or Schedules A, B, or C, directly or indirectly:						
				nagement or policies of the applicant through agreement or otherwise?		[]	[]			
	В.			ally finance the business of applicant?		[]	[]			
		Do not answer "Yes" to 9B if the person finances the business of the applicant through: 1) a public offering of securities made pursuant to the Securities Act of 1933; 2) credit extended in the ordinary course of business by suppliers, banks, and others; or 3) a satisfactory subordination agreement, as defined in Rule 15c3-1 under the Securities Exchange Act of 1934 (17 CFR 240.15c3-1).								
				part of Item 9, complete appropriate items on Schedule D, Page 1, Section IV						
10.	D. A. Directly or indirectly, does <i>applicant control</i> , is <i>applicant controlled</i> by, or is <i>applicant</i> under common <i>control</i> with, any partnership, corporation, or other organization that is engaged in the securities or investment advisory business?									
	_			10A, complete appropriate items on Schedule D, Page 2, Section V.						
	В.	bank of or foreig	the Fe gn bank			[]	[]			
				10B, complete appropriate items on Schedule D, Page 3, Section VI.						
11.	Use Exp	the app lanation	ropriate of Terr	e DRP for providing details to "yes" answers to the questions in Item 11. Refe ns section of Form BD Instructions for explanations of italicized terms.	r to the					
	Α.	In the pa	ast ten	years has the applicant or a control affiliate:						
Ш		(1)		convicted of or pled guilty or nolo contendere ("no contest") in a domestic, fore y court to any <i>felony</i> ?	ign or	[]	[]			
SUR		(2)	been o	charged with any felony?		[]	[]			
7.00	В.	In the pa	ast ten	years has the applicant or a control affiliate:						
CRIMINAL DISCLOSURE		(1)	militar any fra	convicted of or pled guilty or nolo contendere ("no contest") in a domestic, fore y court to a <i>misdemeanor involving</i> : investments or an <i>investment-related</i> bus aud, false statements or omissions, wrongful taking of property, bribery, perjurerfeiting, extortion, or a conspiracy to commit any of these offenses?	siness, or	[]	[]			
S		(2)	been o	charged with a misdemeanor specified in 11B(1)?		[]	[]			
URE	C.	Has the ever:	U.S. S	ecurities and Exchange Commission or the Commodity Futures Trading Com	mission			-		
S07;		(1)	found	the applicant or a control affiliate to have made a false statement or omission	?	[]	[]			
N DISC		(2)	found statute	the <i>applicant</i> or a <i>control affiliate</i> to have been <i>involved</i> in a violation of its reges?	gulations or	[]	[]			
REGULATORY ACTION DISCLOSURE		(3) found the applicant or a control affiliate to have been a cause of an investment-related business having its authorization to do business denied, suspended, revoked, or restricted?								
LATOR		(4)	entere	ed an <i>order</i> against the <i>applicant</i> or a <i>control affiliate</i> in connection with <i>invest</i> y?	ment-related	[]	[]			
REGU		(5)		ed a civil money penalty on the <i>applicant</i> or a <i>control affiliate</i> , or <i>ordered</i> the a I affiliate to cease and desist from any activity?	applicant or a	[]	[]			

	FORM BD		Applicant Name:	Officia	al Us	е	Official Use Only	
		Page 4	Date: Firm CRD No.:					
	D.	Has any other for	ederal regulatory agency, any state regulatory agency, or foreign financial	regulatory				
			the <i>applicant</i> or a <i>control affiliate</i> to have made a false statement or omiss unfair, or unethical?	ion or been	YES []	[]		
			the <i>applicant</i> or a <i>control affiliate</i> to have been <i>involved</i> in a violation of <i>in</i> ulations or statutes?	vestment-	[]	[]		
RE			the <i>applicant</i> or a <i>control affiliate</i> to have been a cause of an <i>investment-r</i> aving its authorization to do business denied, suspended, revoked, or rest		[]	[]		
nson			ten years, entered an <i>order</i> against the <i>applicant</i> or a <i>control affiliate</i> in co estment-related activity?	nnection	[]	[]		
REGULATORY ACTION DISCLOSURE		otherwise,	d, suspended, or revoked the <i>applicant's</i> or a <i>control affiliate's</i> registration by <i>order</i> , prevented it from associating with an <i>investment-related</i> busines s activities?		[]	[]		
CTI	E.	Has any self-reg						
Y A		(1) found the a		[]	[]			
ULATOF		a violation	applicant or a control affiliate to have been involved in a violation of its rules designated as a "minor rule violation" under a plan approved by the U.S. S nge Commission)?		[]	[]		
REG			applicant or a control affiliate to have been the cause of an investment-rela aving its authorization to do business denied, suspended, revoked, or rest		[]	[]		
			the <i>applicant</i> or a <i>control affiliate</i> by expelling or suspending it from members suspending its association with other members, or otherwise restricting its		[]	[]		
	F. Has the <i>applicant's</i> or a <i>control affiliate's</i> authorization to act as an attorney, accountant, or federal contractor ever been revoked or suspended?							
	G.		or a <i>control affiliate</i> now the subject of any regulatory <i>proceeding</i> that cou any part of 11C, D, or E?	ld result in a	[]	[]		
	Н.	(1) Has any do	omestic or foreign court:					
CLOSURE			past ten years, <i>enjoined</i> the <i>applicant</i> or a <i>control affiliate</i> in connection with ment-related activity?	th any	[]	[]		
			ound that the applicant or a control affiliate was involved in a violation of ind I statutes or regulations?	vestment-	[]	[]		
CIVIL JUDICIAL DIS			ismissed, pursuant to a settlement agreement, an <i>investment-related</i> civil and the applicant or control affiliate by a state or foreign financial registry?		[]	[]		
CIVIL			cant or a control affiliate now the subject of any civil proceeding that could er to any part of 11H(1)?	result in a	[]	[]		
JRE	I.		years has the applicant or a control affiliate of the applicant ever been a se iate of a securities firm that:	curities firm			1	
107		(1) has been th	ne subject of a bankruptcy petition?		[]	[]		
FINANCIAL DISCLOSURE		(2) has had a t	rustee appointed or a direct payment procedure initiated under the Securit Act?	ies Investor	[]	[]		
NCIA	J.	Has a bonding	company ever denied, paid out on, or revoked a bond for the applicant?		[]	[]		
FINA	K.	Does the applic	ant have any unsatisfied judgments or liens against it?		[]	[]		

FORM BD		Applicant Name:	Official Use	Official Use Only
	Page 5	Date: Firm CRD No.:		
12.	any category that	siness engaged in (or to be engaged in, if not yet active) by the <i>applicant</i> . Do not accounts for (or is expected to account for) less than 1% of annual revenue from them that advisory business.		_
	A. Exchange mer	mber engaged in exchange commission business other than floor activities	[]EMC	
	B. Exchange mer	mber engaged in floor activities	[]EMF	
	C. Broker or deale	er making inter-dealer markets in corporate securities over-the-counter	[] IDM	
	D. Broker or deale	er retailing corporate equity securities over-the-counter	[]BDR	
	E. Broker or deale	er selling corporate debt securities	[]BDD	
	F. Underwriter or	selling group participant (corporate securities other than mutual funds)	[]USG	
	G. Mutual fund un	nderwriter or sponsor	[]MFU	
	H. Mutual fund re	tailer	[]MFR	
	I. 1. U.S. govern	nment securities dealer	[]GSD	
	2. U.S. govern	nment securities broker	[]GSB	
	J. Municipal secu	urities dealer	[]MSD	
	K. Municipal secu	urities broker	[]MSB	
	L. Broker or deale	er selling variable life insurance or annuities	[] VLA	
	M. Solicitor of time	e deposits in a financial institution	[]SSL	
	N. Real estate sy	ndicator	[]RES	
	O. Broker or deale	er selling oil and gas interests	[] OGI	
	P. Put and call br	oker or dealer or option writer	[]PCB	
	Q Broker or deale	er selling securities of only one issuer or associate issuers (other than mutual fund	ds) []BIA	
	R. Broker or deale	er selling securities of non-profit organizations (e.g., churches, hospitals)	[] NPB	
	S. Investment adv	visory services	[] IAD	
	T. 1. Broker or d	ealer selling tax shelters or limited partnerships in primary distributions	[]TAP	
	2. Broker or d	ealer selling tax shelters or limited partnerships in the secondary market	[]TAS	
	U. Non-exchange	member arranging for transactions in listed securities by exchange member	[]NEX	
	V. Trading securit	ties for own account	[]TRA	
	W. Private placem	nents of securities	[] PLA	
	X. Broker or deale	er selling interests in mortgages or other receivables	[] MRI	
	Y. Broker or deale	er involved in a networking, kiosk or similar arrangement with a:		
	1. bank, savin	ngs bank or association, or credit union	[]BNA	
	2. insurance of	company or agency	[] INA	
	Z. Other (give deta	ails on Schedule D, Page 1, Section II)	HTO[]	
13.		t effect transactions in commodity futures, commodities or commodity options as a ers or as a dealer for its own account?	YES NO	
		t engage in any other non-securities business? be each other business briefly on Schedule D, Page 1, Section II.	[] []	

Sc	chedule A of FORM BD	Applicant N	lame:					Official Us	se		
	EXECUTIVE OFFICERS (Answer for Form BD Item 3)	Date:			Firm Cl	RD No.:					
1.	Use Schedule A only in new appapplicant. Use Schedule B in ne Schedule C. Complete each co	ew applicati									
2.	List below the names of:										
	(a) each Chief Executive Officer Officer, Director, and individu					s Officer, C	hief Leg	gal Officer, Chief Com	oliance		
	(b) in the case of an <i>applicant</i> that is a corporation, each shareholder that directly owns 5% or more of a class of a voting security of the <i>applicant</i> , unless the <i>applicant</i> is a public reporting company (a company subject to Sections 12 or 15(d) of the Securities Exchange Act of 1934); Direct owners include any <i>person</i> that owns, beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 5% or more of a class of a voting security of the <i>applicant</i> . For purposes of this Schedule, a <i>person</i> beneficially owns any securities (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant or right to purchase the security.										
	(c) in the case of an <i>applicant</i> that is a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 5% or more of the partnership's capital; and										
	(d) in the case of a trust that directly owns 5% or more of a class of a voting security of the <i>applicant</i> , or that has the right to receive upon dissolution, or has contributed, 5% or more of the <i>applicant</i> 's capital, the trust and each trustee.										
	(e) in the case of an <i>applicant</i> that is a Limited Liability Company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 5% or more of the LLC's capital, and (ii) if managed by elected managers, all elected managers.										
3.	Are there any indirect owners of	the applica	ant required to be	repoi	ted on	Schedule E	3?	[] Yes [] No			
4.	In the "DE/FE/I" column, enter "I domiciled in a foreign country, o					nter "FE" if	owner i	s an entity incorporate	d or		
5.	Complete the "Title or Status" co shareholder; and for shareholde								etor, or		
6.	Ownership codes are: NA - less than 5% A - 5% but less than 10%		- 10% but less th - 25% but less th				0% but 5% or m	less than 75% nore			
7.	(a) In the "Control Person" colum "No" if the person does not h general partners, and trustee	ave control	. Note that under	r this	trol" as definitio	defined in ton most exe	the instr	uctions to this form, ar officers and all 25% ov	nd enter vners,		
	(b) In the "PR" column, enter "PI Exchange Act of 1934.	R" if the ow	ner is a public rep	oorting	g comp	any under	Sections	s 12 or 15(d) of the Se	curities		
-	FULL LEGAL NAME	DE/FE/I	Title or Status		Title or Acquired	Ownership Code	Control Person	CRD No. If None: S.S. No., IRS Tax No. or	Official Use		
(1	ndividuals: Last Name, First Name, Middle Name)			MM	YYYY		PR	Employer ID	Only		

So	chedule B of FORM	BD /	Applicant Name:					_		Official Use		
	INDIRECT OWNERS (Answer for Form BD Item		Date:			Firm CF	RD No.:					
	(Allswel for Form DD item	3)										
1.	Use Schedule B only in no A in new applications to p column.											
2.	With respect to each own	er listed	on Schedule A, (e	xcept ind	lividu	al own	ers), list be	low:				
	(a) in the case of an owner that is a corporation, each of its shareholders that beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 25% or more of a class of a voting security of that corporation; For purposes of this Schedule, a person beneficially owns any securities (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in- law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant or right to purchase the security.											
	(b) in the case of an owner that is a partnership, all general partners, and those limited and special partners that have the right to receive upon dissolution, or have contributed, 25% or more of the partnership's capital; and											
	(c) in the case of an owner that is a trust, the trust and each trustee.											
	(d) in the case of an owner that is a Limited Liability Company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 25% or more of the LLC's capital, and (ii) if managed by elected managers, all elected managers.											
3.	3. Continue up the chain of ownership listing all 25% owners at each level. Once a public reporting company (a company subject to Sections 12 or 15(d) of the Securities Exchange Act of 1934) is reached, no ownership information further up the chain of ownership need be given.											
4.	In the "DE/FE/I" column, e domiciled in a foreign cou						enter "FE" if	own	er is	s an entity incorporate	ed or	
5.	Complete the "Status" col securities owned (if more			partner, t	truste	ee, sha	reholder, et	c., a	nd i	f shareholder, class o	f	
6.	Ownership Codes are: C - 25% but less than 50)% D	- 50% but less th	an 75%	E	- 75	5% or more	F	-	Other General Partne	ers	
7.	(a) In the "Control Person" enter "No" if the person owners, general partne	<i>n</i> does n	ot have <i>control</i> . N	lote that	unde	r this d						
	(b) In the "PR" column, en Securities Exchange A			ublic rep	ortin	g comp	any under	Sect	ions	12 or 15(d) of the		
(Indi	FULL LEGAL NAME viduals: Last Name, First Name, Middle	DE/FE/I	Entity in Which Interest is Owned	Status		e Status quired	Ownership Code	Con Per:		CRD No. If None: S.S. No., IRS Tax No. or	Official Use	
(a	Name)				ММ	YYYY			PR	Employer ID	Only	

Schedule C of FORM B		nnlican	Name:							Official Us	se
SCHEDULES A & B (Amendments to answers for For BD Item 3)			TVallic.			Firm C	RD No.:		_		
This Schedule C is used to an completing this Schedule C.											ions for
In the Type of Amendment (" about the same person)						-				, , ,	mation
3. Ownership Codes are: NA - less than 5% E A - 5% but less than 10% C							than 75% F	= - O	ther	General Partners	
4. List below all changes to Se	hed	ule A:	(DIRECT	OWNE	RS ANI) EXE	CUTIVE OF	FICI	ERS	5)	
FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name	DE/F E/	Type of Amd.	Title or	Status	Status	Title or Acquired	Ownership Code	Con Per:	son	CRD No. If None: S.S. No., IRS Tax No. or Employer ID	Official Use Only
					MM	YYYY			PR		
5. List below all changes to So	ام ما	ula Di	(NDIDEC	T 0\4/4	IEDC)						
			•			Status	Ownership	Con	trol	CRD No. If None:	Official
(Individuals: Last Name, First Name, Middle Name)	Ám	nd. Inte	rest is Owned		Acqu	iired	Code	Pers	son	S.S. No., IRS Tax No. or Employer ID	Use Only
					ММ	YYYY			PR		
		\perp									
	_										

Schedule D of FORM BD	Applicant Name:		Official Use	Offic Us Onl					
Page 1	Date:	Firm CRD No	.:		T				
Use this Schedule D Page 1 to report previously submitted details. Do not This is an [] INITIAL [] AMEN		nitted information.		anges/updates to					
Section I Other Business	Names								
(Check if applicable) [] Item 1C(2)									
List each of the "other" names and t				Jurisdiction					
1. Name	Jurisdiction	Jurisdiction 2. Name							
3. Name	Jurisdiction	4. Name		Jurisdiction					
Section II Other Business	<u> </u>								
(Check one) [] Item Applicant must complete a separate		each affirmative respo	onse in this section.						
Briefly describe any other business (ITEM 12Z); or any other non-securities business (ITEM 13B). Use reverse side of this sheet for additional comments if necessary.									
Section III Successions									
(Check if applicable) [] Item 5									
Date of Succession MM DD YYYY / /	Name of Predecessor								
Firm CRD Number	IRS Employer Identification	on Number (if any)	SEC File Number (if any)						
Briefly describe details of the <i>succe</i> side of this sheet for additional com		ets or liabilities not assi	umed by the <i>succes</i>	sor. Use reverse					
Section IV Introducing and	d Clearing Arrangemen	ts / Control Persons	/ Financings						
Applicant must complete a separate multiple responses to any item. Co or agreement became effective. Where the change is the change in the change is the change in the change.	mplete the "Effective Dat	each affirmative respo te" box with the Month	onse in this section in , Day and Year that	the arrangement					
Firm or Organization Name		CRE	Number (if any)						
Business Address (Street, City, State/Country, Zip + 4	4 Postal Code)	MM	ctive Date DD YYYY	Termination Date MM DD YYYY / /					
Individual Name (if applicable) (Last, First, Middle)		CRE	Number (if any)						
Business Address (if applicable) (Street, City, State/Co	ountry, Zip + 4 Postal Code)	MM	ctive Date DD YYYY	Termination Date MM DD YYYY / /					
Briefly describe the nature of reference (ITEM 9A); or the method and amounecessary.									

Schedule D of FORM BD	Applicant Name:		Official Use							
Page 2	Date:	Firm CRD No.:								
Use this Schedule D Page 2 to repreviously submitted details. Do not corporations, organizations, institut copies of Schedule D Page 2 if necessity.	t repeat previously submitted ir ons and individuals necessary	formation. Supply de	etails for all p	oartnerships,						
Use the "Effective Date" box to enterecent change in the affiliation.	r the Month, Day, and Year tha	t the affiliation was ef	ffective or the	e date of the most						
This is an [] INITIAL [] AMENDED detail filing for Form BD Item 10A										
[] 10A. Directly or indirectly, does applicant control, is applicant controlled by, or is applicant under common control with, any partnership, corporation, or other organization that is engaged in the securities or investment advisory business?										
Section V Complete this	ection for control issues rela	ting to ITEM 10A on	ıly.							
The details supplied relate to:		-								
1. Partnership, Corporation, or Organization Na	me		CRD Number (if a	any)						
(check only one)	3. santuals and liseast.									
This Partnership, Corporation, or Organization [Business Address (Street, City, State/Country, Zip +] controls applicant [] is controlled by the state of th	Effective Date MM DD YYYY	ommon <i>control</i> with	Termination Date MM DD YYYY / /	-					
Is Partnership, Corporation or Organization a foreign entity? [] Yes [] No	ride country of domicile ation: Check "Yes" or "N activities of this pa corporation, or org	rtnership Securities	s []Yes []No	Investment Advisory []Yes []No Activities:						
Partnership, Corporation, or Organization Na		,	CRD Number (if a	iny)	_					
(check only one)										
This Partnership, Corporation, or Organization [Business Address (Street, City, State/Country, Zip +] controls applicant [] is controlled by the start of th	Effective Date MM DD YYYY	ommon <i>control</i> with	Termination Date MM DD YYYY / /	-					
Is Partnership, Corporation or Organization a foreign entity? [] Yes [] No	vide country of domicile ation: Check "Yes" or "N activities of this pacorporation, or org	rtnership Securities	s []Yes []No	Investment Advisory []Yes []No Activities:						
Briefly describe the <i>control</i> relationship. Use reverse	side of this sheet for additional comments if ne	cessary.								
3. Partnership, Corporation, or Organization Na	me		CRD Number (if a	nny)						
(check only one) This Partnership, Corporation, or Organization [] controls applicant [] is controlled by	applicant [] is under co	ommon <i>control</i> with	applicant						
Business Address (Street, City, State/Country, Zip +	#/Postal Code)	Effective Date MM DD YYYY / /		Termination Date MM DD YYYY / /						
Is Partnership, Corporation or Organization a foreign entity? [] Yes [] No	vide country of domicile ation: Check "Yes" or "N activities of this particle corporation, or org	rtnership Securities	s[]Yes[]No	Investment Advisory [] Yes [] No Activities:						
Briefly describe the control relationship. Use reverse	side of this sheet for additional comments if ne	cessary.								
If applicant has more than 3 organi.	rations to report, complete addi	tional Schedule D Pa	ge 2s.		1					

Schedule D of FORM BD	Applicant Name:			Official Use	Official Use Only
Page 3	Date:	ı	Firm CRD No.:		
previously submitted details. Do no corporations, organizations, instituti	Use this Schedule D Page 3 to repeat details for Item 10B. Report only new information or changes/updates to previously submitted details. Do not repeat previously submitted information. Supply details for all partnerships, corporations, organizations, institutions and individuals necessary to answer each item completely. Use additional copies of Schedule D Page 3 if necessary.				
Use the "Effective Date" box to enter the Month, Day, and Year that the affiliation was effective or the date of the most recent change in the affiliation.					
This is an [] INITIAL [] AMENDED detail filing for Form BD Item 10B					
[] 10B. Directly or indirectly, is <i>applicant controlled</i> by any bank holding company, national bank, state member bank of the Federal Reserve System, state non-member bank, savings bank or association, credit union, or foreign bank?					
Section VI Complete this s	ection for control issue	es relating	to ITEM 10B only.		
Provide the details for each organiz institution in the applicant's chain of				organization or	
		ber (if applicable)			
Institution Type (i.e., bank holding company, national bank, state member bank of the Federal Reserve System, state non-member bank, savings association, credit union, or foreign bank)		Effective Date MM DD \	YYYY		
,			Termination Date MM DD \	YYY	
Business Address (Street, City, State/Country	, Zip + 4/Postal Code)		If foreign, country of domicile	or incorporation	
Briefly describe the <i>control</i> relationship. Use	reverse side of this sheet for add	ditional comm	nents, if necessary.		
2. Financial Institution Name		CRD Num	ber (if applicable)		
Institution Type (i.e., bank holding company, r Federal Reserve System, state non-member l foreign bank)			Effective Date MM DD \	/YYY	
			Termination Date MM DD \	YYY	
Business Address (Street, City, State/Country	r, Zip + 4/Postal Code)		If foreign, country of domicile	or incorporation	
Briefly describe the <i>control</i> relationship. Use	reverse side of this sheet for add	ditional comm	nents, if necessary.		
3. Financial Institution Name		CRD Num	nber (if applicable)		1
	ink holding company, national bank, state member bank of the m, state non-member bank, savings association, credit union, or		Effective Date MM DD /	/YYY	
roreign bank)		Termination Date MM DD \ / /	YYY	1	
Business Address (Street, City, State/Country, Zip + 4/Postal Code)		If foreign, country of domicile	or incorporation		
Briefly describe the <i>control</i> relationship. Use reverse side of this sheet for additional comments, if necessary.					
4. Financial Institution Name		CRD Num	ber (if applicable)		
Institution Type (i.e., bank holding company, r Federal Reserve System, state non-member l foreign bank)			Effective Date MM DD \	/YYY	
			Termination Date MM DD \	/YYY	
Business Address (Street, City, State/Country	r, Zip + 4/Postal Code)		If foreign, country of domicile	or incorporation	1
Briefly describe the <i>control</i> relationship. Use	reverse side of this sheet for add	ditional comm	nents, if necessary.		
If applicant has more than 4 organizations/institutions to report, complete additional Schedule D page 3s.					

Sched	Schedule E of FORM BD Applicant Name:		Official Use	
			Firm CRD No.:	
General:	other business location. Each is branch office or other business I	INSTRU report branch offices or other bus tem must be completed unless o ocation is using a name in conne	CTIONS iness locations of the applicant. Repe	eat Items 1-12 for each branch office or sof this schedule as necessary. If this can the applicant's name, such name
Specific: Item 1.	"Delete" when a branch office o	dd" when a branch office or other	business location is opened and the a	
Item 2.	information. em 2. CRD will assign this branch number when the <i>applicant</i> adds a branch office or other business location as discussed in Item 1 above. If			
Item 3.	known, complete this item for all deletions and amendments. em 3. The Billing Code is an alpha/numeric value consisting of up to eight characters. It is the responsibility of the firm to establish and maintain its own unique billing codes. This is not a required field.			
Item 4. Item 5. Item 6.	Complete this item <u>only</u> when the lifthe branch office or other busi	ne <i>applicant</i> changes the address	cluded; post office box designations a s of an existing branch office or other space on premises within a bank, say on in the space, provided	business location.
Item 7. Item 8. Item 9.	Complete this item for all entries Provide the CRD number for the	s. Enter the name of the supervise branch office supervisor name. Provide the date that the branch	or or registered representative in cha	
Item 11. (Check "Yes" or "No" to denote what an insurance agency agre for its own expenses or has its employment and remuneration "independent contractors" for ta	nether the location is a business ement) with the main office and a expenses paid by a party other that of its registered representative ax purposes; or (D) engages in a	any one or more of the following will a an the <i>applicant;</i> (B) has primary resp es; (C) deems 5% or more of its to separate market making and/or unde	a written agreement or contract (other pply: the location (A) assumes liability consibility for decisions relating to the otal registered representatives to be erwriting activities.
			· · · · · · · · · · · · · · · · · · ·	gistering or reporting with a <i>jurisdiction</i> .
	only one box: [] Add []		ent	
	Branch Number Code		Institution Name (if applicable) 7.	
o. Dilling			Supervisor Name	
4			8CRD Number of Supervisor	
Olicot				
P.O. B	ox (if applicable), Suite, Floor		9. Effective Date (MM/DD/YYYY) 10. OSJ [] Yes [] No	
-	tate/Country, Zip Code + 4/Post		44	
_	nt is changing the address, ente		11. [] Yes [] No	
5. Street			If Yes, indicate each Item 11 subset	.,
P.O. B	ox (if applicable), Suite, Floor		A[] B[] C[] D[1
Citv. S	tate/Country, Zip Code + 4/Post	al Code	12. FINRA [] Jurisdiction []	
	only one box: [] Add []		nt	
2. CRD E	Branch Number		6. Institution Name (if applicable)	
3. Billing	Code		7Supervisor Name	
4			8.	
Street			CRD Number of Supervisor 9.	
	ox (if applicable), Suite, Floor		Effective Date (MM/DD/YYYY) 10. OSJ [] Yes [] No	
•	tate/Country, Zip Code + 4/Post			
If application 5.	nt is changing the address, ente		11. [] Yes [] No If Yes, indicate each Item 11 subset	that applies
Street			A[] B[] C[] D[.,
P.O. B	ox (if applicable), Suite, Floor	· · · · · · · · · · · · · · · · · · ·		•
City, S	tate/Country, Zip Code + 4/Post	al Code	12. FINRA [] Jurisdiction []	

CRIMINAL DISCLOSURE REPORTING PAGE (BD)

	This Disclosure Reporting Page (DRP RD) is an I 1 IMI	ITIAL OR [] AMENDED response used to report details for
	affirmative responses to <i>Items 11A and 11B</i> of Form E	
	Check [√] item(s) being responded to:	
	11A. In the past ten years has the applicant or a co	ontrol affiliate:
	[] (1) been convicted of or pled guilty or nolo court to any felony?	contendere ("no contest") in a domestic, foreign or military
	[] (2) been charged with any felony?	
	11B. In the past ten years has the applicant or a co	ontrol affiliate:
	to a <i>misdemeanor involving</i> : investmen statements or omissions, wrongful takin extortion, or a conspiracy to commit an	·
	[] (2) been charged with a misdemeanor spe	ecified in 11B(1)?
	separate DRP for each event or <i>proceeding</i> . An event using one DRP. File with a completed Execution Page.	or <i>proceeding</i> may be reported for more than one <i>person</i> or
crimin DRP t		rent(s) should be reported on the same DRP. Unrelated ame event, must be reported on separate DRPs. Use this event may result in more than one affirmative answer to the
Part I DRP (compl	of the <i>applicant's</i> appropriate DRP (BD). Details of the (BD) or DRP (U-4). If a <i>control affiliate</i> is an individual of	te DRP (BD). The completion of this DRP does not relieve
Applic	cable court documents (i.e., criminal complaint, informati	on or indictment as well as judgment of conviction or
senter	ncing documents) must be provided to the CRD if not prosure in lieu of answering the questions on this DRP.	
PAR	Π	
PAR	The <i>person(s)</i> or entity(ies) for whom this DRP is being	g filed is (are):
PAR	The person(s) or entity(ies) for whom this DRP is being	g filed is (are):
PAR	The <i>person(s)</i> or entity(ies) for whom this DRP is being [] The <i>Applicant</i>	g filed is (are):
PAR	The person(s) or entity(ies) for whom this DRP is being [] The Applicant [] Applicant and one or more control affiliate(s)	g filed is (are):
PAR	The person(s) or entity(ies) for whom this DRP is being [] The Applicant [] Applicant and one or more control affiliate(s) [] One or more control affiliate(s)	
PAR	The person(s) or entity(ies) for whom this DRP is being [] The Applicant [] Applicant and one or more control affiliate(s) [] One or more control affiliate(s)	g filed is (are): full name of the <i>control affiliat</i> e below (for individuals, Last
PAR	The person(s) or entity(ies) for whom this DRP is being [] The Applicant [] Applicant and one or more control affiliate(s) [] One or more control affiliate(s) If this DRP is being filed for a control affiliate, give the f name, First name, Middle name). If the control affiliate is registered with the CRD, provide	full name of the <i>control affiliate</i> below (for individuals, Last
PAR	The person(s) or entity(ies) for whom this DRP is being [] The Applicant [] Applicant and one or more control affiliate(s) [] One or more control affiliate(s) If this DRP is being filed for a control affiliate, give the finame, First name, Middle name).	full name of the <i>control affiliate</i> below (for individuals, Last
PAR	The person(s) or entity(ies) for whom this DRP is being [] The Applicant [] Applicant and one or more control affiliate(s) [] One or more control affiliate(s) If this DRP is being filed for a control affiliate, give the finame, First name, Middle name). If the control affiliate is registered with the CRD, provide checking the appropriate checkbox. NAME OF APPLICANT	full name of the <i>control affiliate</i> below (for individuals, Last e the CRD number. If not, indicate "non-registered" by
PAR	The person(s) or entity(ies) for whom this DRP is being [] The Applicant [] Applicant and one or more control affiliate(s) [] One or more control affiliate(s) If this DRP is being filed for a control affiliate, give the f name, First name, Middle name). If the control affiliate is registered with the CRD, provide checking the appropriate checkbox.	full name of the <i>control affiliat</i> e below (for individuals, Last e the CRD number. If not, indicate "non-registered" by
PAR	The person(s) or entity(ies) for whom this DRP is being [] The Applicant [] Applicant and one or more control affiliate(s) [] One or more control affiliate(s) [] If this DRP is being filed for a control affiliate, give the finame, First name, Middle name). If the control affiliate is registered with the CRD, provide checking the appropriate checkbox. NAME OF APPLICANT BD DRP - CONTROL AFFILIATE CRD NUMBER	full name of the <i>control affiliate</i> below (for individuals, Last e the CRD number. If not, indicate "non-registered" by APPLICANT CRD NUMBER
PAR	The person(s) or entity(ies) for whom this DRP is being [] The Applicant [] Applicant and one or more control affiliate(s) [] One or more control affiliate(s) If this DRP is being filed for a control affiliate, give the finame, First name, Middle name). If the control affiliate is registered with the CRD, provide checking the appropriate checkbox. NAME OF APPLICANT BD DRP - CONTROL AFFILIATE CRD NUMBER Registered: [] Yes [] No	full name of the <i>control affiliate</i> below (for individuals, Last e the CRD number. If not, indicate "non-registered" by APPLICANT CRD NUMBER
PAR	The person(s) or entity(ies) for whom this DRP is being [] The Applicant [] Applicant and one or more control affiliate(s) [] One or more control affiliate(s) [] If this DRP is being filed for a control affiliate, give the finame, First name, Middle name). If the control affiliate is registered with the CRD, provide checking the appropriate checkbox. NAME OF APPLICANT BD DRP - CONTROL AFFILIATE CRD NUMBER	full name of the <i>control affiliate</i> below (for individuals, Last e the CRD number. If not, indicate "non-registered" by APPLICANT CRD NUMBER
PAR	The person(s) or entity(ies) for whom this DRP is being [] The Applicant [] Applicant and one or more control affiliate(s) [] One or more control affiliate(s) [] One or more control affiliate(s) If this DRP is being filed for a control affiliate, give the finame, First name, Middle name). If the control affiliate is registered with the CRD, provide checking the appropriate checkbox. NAME OF APPLICANT BD DRP - CONTROL AFFILIATE CRD NUMBER Registered: [] Yes [] No NAME (For individuals, Last, First, Middle)	full name of the <i>control affiliate</i> below (for individuals, Last e the CRD number. If not, indicate "non-registered" by APPLICANT CRD NUMBER
PAR	The person(s) or entity(ies) for whom this DRP is being [] The Applicant [] Applicant and one or more control affiliate(s) [] One or more control affiliate(s) If this DRP is being filed for a control affiliate, give the finame, First name, Middle name). If the control affiliate is registered with the CRD, provide checking the appropriate checkbox. NAME OF APPLICANT BD DRP - CONTROL AFFILIATE CRD NUMBER Registered: [] Yes [] No NAME (For individuals, Last, First, Middle) [] This DRP should be removed from the BD associated with the BD. If the control affiliate is registered through the CRD, has	full name of the <i>control affiliate</i> below (for individuals, Last e the CRD number. If not, indicate "non-registered" by APPLICANT CRD NUMBER This Control Affiliate is [] Firm [] Individual
	The person(s) or entity(ies) for whom this DRP is being [] The Applicant [] Applicant and one or more control affiliate(s) [] One or more control affiliate(s) If this DRP is being filed for a control affiliate, give the finame, First name, Middle name). If the control affiliate is registered with the CRD, provide checking the appropriate checkbox. NAME OF APPLICANT BD DRP - CONTROL AFFILIATE CRD NUMBER Registered: [] Yes [] No NAME (For individuals, Last, First, Middle) [] This DRP should be removed from the BD associated with the BD. If the control affiliate is registered through the CRD, has	This Control Affiliate is [] Firm [] Individual D record because the control affiliate (s) are no longer s the control affiliate submitted a DRP (with Form U-4) or BD

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CRIMINAL DISCLOSURE REPORTING PAGE (BD) (continuation)

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	harge(s) were brought against an organization over which the applicant or control affiliate exercise(d) control: Er panization name, whether or not the organization was an investment-related business and the applicant's or cont liate's position, title or relationship.
	rmal Charge(s) were brought in: (include name of Federal, Military, State or Foreign Court, Location of Court – C County <u>and</u> State or Country, Docket/Case number).
Ev	ent Disclosure Detail (Use this for both organizational and individual charges.)
A.	Date First Charged (MM/DD/YYYY): [] Exact [] Explanation
lf n	ot exact, provide explanation:
B.	Event Disclosure Detail (include Charge(s)/Charge Description(s), and for each charge provide: <u>1.</u> number of counts, <u>2.</u> <i>felony</i> or <i>misdemeanor</i> , <u>3.</u> plea for each charge, and <u>4.</u> product type if charge is <i>investment-related</i>)
C.	Did any of the Charge(s) within the Event involve a <i>Felony</i> ? [] Yes [] No
D. E.	Current status of the Event? [] Pending [] On Appeal [] Final Event Status Date (complete unless status is Pending) (MM/DD/YYYY): [] Exact [] Explanation
If n	ot exact, provide explanation:
pre	sposition Disclosure Detail: Include for each charge, <u>A.</u> Disposition Type [e.g., convicted, acquitted, dismissed strial, etc.], <u>B.</u> Date, <u>C.</u> Sentence/Penalty, <u>D.</u> Duration [if sentence-suspension, probation, etc.], <u>E.</u> Start Date of nalty, <u>F.</u> Penalty/Fine Amount and <u>G.</u> Date Paid.
dat	ovide a brief summary of the circumstances leading to the charge(s) as well as the disposition. Include the relevies when the conduct which was the subject of the charge(s) occurred. (The information must fit within the spacious vided.)
<u>-</u> - -	<u> </u>

REGULATORY ACTION DISCLOSURE REPORTING PAGE (BD)

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REGULATORY ACTION DISCLOSURE REPORTING PAGE (BD)

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Regulatory Action initiated by: [] SEC	al [] State	[] 000 [1 Foreign	
[] SEC [] Other Feder (Full name of regulator, foreign] Foreign e or <i>SRO</i>)	
<u> </u>		, ,	,	
Dain sin al Camatiana (als asla anno				
Principal Sanction: (check appr	,			
[] Civil and Administrative Per	nalty(ies)/Fine(s)	[] Disgorgement	[] Restitution	
[] Bar [] Cease and Desist		[] Expulsion [] Injunction	[] Revocatio [] Suspensio	
Censure		[] Prohibition	[] Undertaki	
[] Denial		[] Reprimand		
Other Sanctions:				
Date Initiated (MM/DD/YYYY)			[] Exact []	Explanation
If not exact, provide explanation	:			
Docket/Case Number:				
Control Affiliate Employing Firm	when activity occurr	red which led to the re	gulatory action (if appli	icable):
		red which led to the re	gulatory action (if appli	icable):
Principal Product Type: (check	appropriate item)	red which led to the re		·
Principal Product Type: (check	appropriate item)		[] Investr	nent Contract(s)
Principal Product Type: (check [] Annuity(ies) - Fixed [] Annuity(ies) - Variable	appropriate item) [] Derivative(s) [] Direct Investme	red which led to the re	[] Investr	nent Contract(s) Market Fund(s)
Principal Product Type: (check [] Annuity(ies) - Fixed [] Annuity(ies) - Variable [] CD(s)	appropriate item) [] Derivative(s) [] Direct Investme [] Equity - OTC	ent(s) - DPP & LP Inte	[] Investrerest(s) [] Money	ment Contract(s) Market Fund(s) Fund(s)
Principal Product Type: (check [] Annuity(ies) - Fixed [] Annuity(ies) - Variable	appropriate item) [] Derivative(s) [] Direct Investme [] Equity - OTC	ent(s) - DPP & LP Inte	[] Investrerest(s) [] Money	ment Contract(s) Market Fund(s) Fund(s) duct
Principal Product Type: (check [] Annuity(ies) - Fixed [] Annuity(ies) - Variable [] CD(s) [] Commodity Option(s)	appropriate item) [] Derivative(s) [] Direct Investme [] Equity - OTC [] Equity Listed (6)	ent(s) - DPP & LP Inte Common & Preferred modity	[] Investrerest(s) [] Money [] Mutual Stock) [] No Pro	ment Contract(s) Market Fund(s) Fund(s) duct
Principal Product Type: (check [] Annuity(ies) - Fixed [] Annuity(ies) - Variable [] CD(s) [] Commodity Option(s) [] Debt - Asset Backed [] Debt - Corporate [] Debt - Government	appropriate item) [] Derivative(s) [] Direct Investme [] Equity - OTC [] Equity Listed (([] Futures - Comi [] Futures - Finar [] Index Option(s	ent(s) - DPP & LP Inte Common & Preferred : modity ncial	[] Investrerest(s) [] Money [] Mutual Stock) [] No Pro [] Options [] Penny [] Unit Inv	ment Contract(s) Market Fund(s) Fund(s) duct s Stock(s) vestment Trust(s)
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Principal Product Type: (check [] Annuity(ies) - Fixed [] Annuity(ies) - Variable [] CD(s) [] Commodity Option(s) [] Debt - Asset Backed [] Debt - Corporate [] Debt - Government [] Debt - Municipal Other Product Types:	appropriate item) [] Derivative(s) [] Direct Investme [] Equity - OTC [] Equity Listed (([] Futures - Comi [] Futures - Finar [] Index Option(s)	ent(s) - DPP & LP Inte Common & Preferred i modity ncial)	[] Investrerest(s) [] Money [] Mutual Stock) [] No Pro [] Options [] Penny [] Unit Inv	ment Contract(s) Market Fund(s) Fund(s) duct s Stock(s) vestment Trust(s)
Principal Product Type: (check [] Annuity(ies) - Fixed [] Annuity(ies) - Variable [] CD(s) [] Commodity Option(s) [] Debt - Asset Backed [] Debt - Corporate [] Debt - Government [] Debt - Municipal Other Product Types:	appropriate item) [] Derivative(s) [] Direct Investme [] Equity - OTC [] Equity Listed (([] Futures - Comi [] Futures - Finar [] Index Option(s)	ent(s) - DPP & LP Inte Common & Preferred i modity ncial)	[] Investrerest(s) [] Money [] Mutual Stock) [] No Pro [] Options [] Penny [] Unit Inv	ment Contract(s) Market Fund(s) Fund(s) duct s Stock(s) vestment Trust(s)
Principal Product Type: (check [] Annuity(ies) - Fixed [] Annuity(ies) - Variable [] CD(s) [] Commodity Option(s) [] Debt - Asset Backed [] Debt - Corporate [] Debt - Government [] Debt - Municipal Other Product Types:	appropriate item) [] Derivative(s) [] Direct Investme [] Equity - OTC [] Equity Listed (([] Futures - Comi [] Futures - Finar [] Index Option(s)	ent(s) - DPP & LP Inte Common & Preferred i modity ncial)	[] Investrerest(s) [] Money [] Mutual Stock) [] No Pro [] Options [] Penny [] Unit Inv	ment Contract(s) Market Fund(s) Fund(s) duct s Stock(s) vestment Trust(s)
Principal Product Type: (check [] Annuity(ies) - Fixed [] Annuity(ies) - Variable [] CD(s) [] Commodity Option(s) [] Debt - Asset Backed [] Debt - Corporate [] Debt - Government [] Debt - Municipal Other Product Types:	appropriate item) [] Derivative(s) [] Direct Investme [] Equity - OTC [] Equity Listed (([] Futures - Comi [] Futures - Finar [] Index Option(s)	ent(s) - DPP & LP Inte Common & Preferred i modity ncial)	[] Investrerest(s) [] Money [] Mutual Stock) [] No Pro [] Options [] Penny [] Unit Inv	ment Contract(s) Market Fund(s) Fund(s) duct s Stock(s) vestment Trust(s)
Principal Product Type: (check [] Annuity(ies) - Fixed [] Annuity(ies) - Variable [] CD(s) [] Commodity Option(s) [] Debt - Asset Backed [] Debt - Corporate [] Debt - Government [] Debt - Municipal Other Product Types:	appropriate item) [] Derivative(s) [] Direct Investme [] Equity - OTC [] Equity Listed (([] Futures - Comi [] Futures - Finar [] Index Option(s [] Insurance	ent(s) - DPP & LP Inte Common & Preferred modity ncial)	[] Investrerest(s) [] Money [] Mutual Stock) [] No Pro [] Options [] Penny [] Unit Inv	ment Contract(s) Market Fund(s) Fund(s) duct s Stock(s) vestment Trust(s)

REGULATORY ACTION DISCLOSURE REPORTING PAGE (BD)

(continuation)

If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.

10.	How was matter resolved: (check appropriate item)	
	[] Acceptance, Waiver & Consent (AWC) [] Consent [] Decision & Order of Offer of Settlement [] Dismissed [] Decision [] Order	[] Settled[] Stipulation and Consent[] Vacated
11.	Resolution Date (MM/DD/YYYY)	[] Exact [] Explanation
	If not exact, provide explanation:	
12.	A. Were any of the following Sanctions Ordered? (Check all appropriate	e items):
	[] Monetary/Fine [] Revocation/Expulsion/Denial Amount \$ [] Censure [] Cease and Des B. Other Sanctions Ordered:	[] Disgorgement/Restitution sist/Injunction [] Bar [] Suspension
	Street Garnottonia Gracifed.	
	C. Sanction detail: If suspended, <i>enjoined</i> or barred, provide duration in (General Securities Principal, Financial Operations Principal, etc.). It condition of the sanction, provide length of time given to requalify/ret condition has been satisfied. If disposition resulted in a fine, penalty compensation, provide total amount, portion levied against <i>applicant</i> of penalty was waived:	f requalification by exam/retraining was a rain, type of exam required and whether , restitution, disgorgement or monetary
13.	Provide a brief summary of details related to the action status and (or) disconditions and dates. (The information must fit within the space provided	

CIVIL JUDICIAL ACTION DISCLOSURE REPORTING PAGE (BD)

	This Disclosure Paparting Dags (DRD RD) is an [] INITIAL CD [] AMENDED response used to report datable for				
	This Disclosure Reporting Page (DRP BD) is an [] INITIAL OR [] AMENDED response used to report details for affirmative responses to <i>Item 11H</i> of Form BD;				
	Check [√] item(s) being responded to:				
	11H(1) Has any domestic or foreign court:				
	(a) in the past ten years, enjoined the applicant or a control affiliate in connection with any investment-related activity?				
	 (b) ever found that the applicant or a control affiliate was involved in a violation of investment-related statutes or regulations? 				
	[] (c) ever dismissed, pursuant to a settlement agreement, an investment-related civil action brought against the applicant or a control affiliate by a state or foreign financial regulatory authority?				
	11H(2) [] Is the <i>applicant</i> or a <i>control affiliate</i> now the subject of any civil <i>proceeding</i> that could result in a "yes" answer to any part of 11H?				
	separate DRP for each event or <i>proceeding</i> . An event or <i>proceeding</i> may be reported for more than one <i>person</i> or entity using one File with a completed Execution Page.				
	event may result in more than one affirmative answer to Item 11H. Use only one DRP to report details related to the same event. ated civil judicial actions must be reported on separate DRPs.				
	t is not a requirement that documents be provided for each event or <i>proceeding</i> . Should they be provided, they will not be accepted as lisclosure in lieu of answering the questions on this DRP.				
applica contro	antrol affiliate is an individual or organization registered through the CRD, such control affiliate need only complete Part I of the ant's appropriate DRP (BD). Details of the event must be submitted on the control affiliate's appropriate DRP (BD) or DRP (U-4). If a black affiliate is an individual or organization not registered through the CRD, provide complete answers to all the items on the applicant's priate DRP (BD). The completion of this DRP does not relieve the control affiliate of its obligation to update its CRD records.				
PAR	RT I				
	The person(s) or entity(ies) for whom this DRP is being filed is (are):				
	[] The Applicant				
	[] Applicant and one or more control affiliate(s)				
	[] One or more control affiliate(s)				
	If this DRP is being filed for a <i>control affiliate</i> , give the full name of the <i>control affiliate</i> below (for individuals, Last name, First name, Middle name).				
	If the <i>control affiliate</i> is registered with the CRD, provide the CRD number. If not, indicate "non-registered" by checking the appropriate checkbox.				
	NAME OF APPLICANT CRD NUMBER				
Į					
	BD DRP – CONTROL AFFILIATE				
	BD DRP - CONTROL AFFILIATE CRD NUMBER This Control Affiliate is [] Firm [] Individual				
	CRD NUMBER This Control Affiliate is [] Firm [] Individual				
	CRD NUMBER This Control Affiliate is [] Firm [] Individual Registered: [] Yes [] No				
В.	CRD NUMBER This Control Affiliate is [] Firm [] Individual Registered: [] Yes [] No NAME (For individuals, Last, First, Middle) [] This DRP should be removed from the BD record because the control affiliate(s) are no longer associated				
В.	CRD NUMBER This Control Affiliate is [] Firm [] Individual Registered: [] Yes [] No NAME (For individuals, Last, First, Middle) [] This DRP should be removed from the BD record because the control affiliate(s) are no longer associated with the BD. If the control affiliate is registered through the CRD, has the control affiliate submitted a DRP (with Form U-4) or BD				

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CIVIL JUDICIAL ACTION DISCLOSURE REPORTING PAGE (BD)

(continuation)

1.	Court Action initiated by: (Name of regulator, foreign financial regulatory authority, SRO, commodities exchange, agency, firm, private plaintiff, etc.)
2.	Principal Relief Sought: (check appropriate item)
	[] Cease and Desist
	Other Relief Sought:
,	
3.	Filing Date of Court Action (MM/DD/YYYY) [] Exact [] Explanation
	If not exact, provide explanation:
4.	Principal Product Type: (check appropriate item)
	[] Annuity(ies) - Fixed [] Derivative(s) [] Investment Contract(s) [] Annuity(ies) - Variable [] Direct Investment(s) - DPP & LP Interest(s) [] Money Market Fund(s) [] CD(s) [] Equity - OTC [] Mutual Fund(s) [] Commodity Option(s) [] Equity Listed (Common & Preferred Stock) [] No Product [] Debt - Asset Backed [] Futures - Commodity [] Options [] Debt - Corporate [] Futures - Financial [] Penny Stock(s) [] Debt - Government [] Index Option(s) [] Unit Investment Trust(s) [] Debt - Municipal [] Insurance [] Other
5.	Formal Action was brought in (include name of Federal, State or Foreign Court, Location of Court - City or County and State or Country, Docket/Case Number):
6.	Control Affiliate Employing Firm when activity occurred which led to the civil judicial action (if applicable):
7.	Describe the allegations related to this civil action. (The information must fit within the space provided.):
8.	Current Status? [] Pending [] On Appeal [] Final
9.	If on appeal, action appealed to (provide name of court): Date Appeal Filed (MM/DD/YYYY):
40	If you die you date you find from your and (MM/DDAAAA)
10.	If pending, date notice/process was served (MM/DD/YYYY) [] [] Exact [] Explanation
	If not exact, provide explanation:

CIVIL JUDICIAL ACTION DISCLOSURE REPORTING PAGE (BD) (continuation)

If Final or On Appeal, complete all items below. For Pending Actions, complete Item 14 only.

11. How was matter resolved: (check appropriate item)	
[] Consent [] Judgment Rendered [] Settled [] Dismissed [] Opinion [] Withdrawn	[] Other
12. Resolution Date (MM/DD/YYYY)	[] Exact [] Explanation
If not exact, provide explanation:	
13. Resolution Detail	
A. Were any of the following Sanctions Ordered or Relief Granted? (Che	eck appropriate items):
[] Monetary/Fine	
B. Other Sanctions:	
C. Sanction Detail: If suspended, <i>enjoined</i> or barred, provide duration in (General Securities Principal, Financial Operations Principal, etc.). If condition of the sanction, provide length of time given to requalify/retracondition has been satisfied. If disposition resulted in a fine, penalty, compensation, provide total amount, portion levied against <i>applicant</i> of penalty was waived:	requalification by exam/retraining was a ain, type of exam required and whether restitution, disgorgement or monetary
14. Provide a brief summary of circumstances related to action(s), allegati disclosed above. (The information must fit within the space provided.):	

BANKRUPTCY / SIPC DISCLOSURE REPORTING PAGE (BD)

	This Disclosure Reporting Page (DRP BD) is an [] INITIAL <i>OR</i> [1 AMENDED response used to report details for
	affirmative responses to <i>Item 11I</i> on Form BD;	17 WILLIADED TOSPONSO USED TO TEPOTE DETAILS TO
	Check $[\![\!]\!]$ item(s) being responded to:	
	111 In the past ten years has the applicant or a control affiliate control affiliate of a securities firm that:	of the applicant ever been a securities firm or a
	[] (1) has been the subject of a bankruptcy petition?	
	[] (2) has had a trustee appointed or a direct payment pr Protection Act?	rocedure initiated under the Securities Investor
	separate DRP for each event or <i>proceeding</i> . An event or <i>proceedin</i> using one DRP. File with a completed Execution Page.	ng may be reported for more than one person or
	ot a requirement that documents be provided for each event or <i>proce</i> ted as disclosure in lieu of answering the questions on this DRP.	eeding. Should they be provided, they will not be
of the (BD) of answer	ontrol affiliate is an individual or organization registered through CRD applicant's appropriate DRP (BD). Details of the event must be subtracted DRP (U-4). If a control affiliate is an individual or organization not ers to all the items on the applicant's appropriate DRP (BD). The code of its obligation to update its CRD records.	omitted on the <i>control affiliate's</i> appropriate DRP t registered through the CRD, provide complete
PAR	T I	
	The person(s) or entity(ies) for whom this DRP is being filed is (ar	re):
	[] The Applicant	
	[] Applicant and one or more control affiliate(s)	
	[] One or more control affiliate(s)	
	If this DRP is being filed for a <i>control affiliate</i> , give the full name of name, First name, Middle name).	f the <i>control affiliate</i> below (for individuals, Last
	If the <i>control affiliate</i> is registered with the CRD, provide the CRD checking the appropriate checkbox.	number. If not, indicate "non-registered" by
	NAME OF APPLICANT	APPLICANT CRD NUMBER
	BD DRP – CONTROL AFFILIATE	
	CRD NUMBER Th	nis Control Affiliate is [] Firm [] Individual
	Registered: [] Yes [] No	
	NAME (For individuals, Last, First, Middle)	
	[] This DRP should be removed from the BD record becassociated with the BD.	cause the <i>control affiliate(s)</i> are no longer
B.	If the control affiliate is registered through the CRD, has the control DRP to the CRD System for the event? If the answer is "Yes," no	
	[] Yes	
	Note: The completion of this Form does <u>not</u> relieve the <i>control aff</i> .	filiate of its obligation to update its CRD records.
PAR	•	filiate of its obligation to update its CRD records.
PAR 1.	Action Type: (check appropriate item)	filiate of its obligation to update its CRD records.
	Action Type: (check appropriate item) [] Bankruptcy [] Declaration [] Receivership	
	Action Type: (check appropriate item) [] Bankruptcy [] Declaration [] Receivership [] Compromise [] Liquidated [] Other	
	Action Type: (check appropriate item) [] Bankruptcy [] Declaration [] Receivership	
1.	Action Type: (check appropriate item) [] Bankruptcy [] Declaration [] Receivership [] Compromise [] Liquidated [] Other	ixact [] Explanation

BANKRUPTCY / SIPC DISCLOSURE REPORTING PAGE (BD) (continuation)

ſ	If the financial action relates to an organization over which the applicant or the control affiliate exercise(d) control, enter organization name and the applicant's or control affiliate's position, title or relationship:		
L	Was the Organization investment-related? [] Yes [] No		
ſ	Court action brought in (Name of Federal, State or Foreign Court), Location of Court (City or County <u>and</u> State or Country), Docket/Case Number and Bankruptcy Chapter Number (if Federal Bankruptcy Filing):		
L	Is action currently pending? [] Yes [] No		
	If not pending, provide Disposition Type: (check appropriate item)		
	[] Direct Payment Procedure [] Dismissed [] Satisfied/Released		
	[] Discharged [] Dissolved [] SIPA Trustee Appointed [] Other		
	Disposition Date (MM/DD/YYYY): [] Exact [] Explanation		
	If not exact, provide explanation:		
	Provide a brief summary of events leading to the action and if not discharged, explain. (The information must fit within the space provided.):		
L	If a SIPA trustee was appointed or a direct payment procedure was begun, enter the amount paid or agreed to b paid by you; or the name of the trustee:		
L	Currently open? [] Yes [] No		
	Date Direct Payment Initiated/Filed or Trustee Appointed (MM/DD/YYYY): [] Exact [] Explana		
	If not exact, provide explanation:		
	Provide details of any status/disposition. Include details as to creditors, terms, conditions, amounts due and settlement schedule (if applicable). (The information must fit within the space provided.)		

BOND DISCLOSURE REPORTING PAGE (BD)

	GENERAL IN:	STRUCTIONS			
This Disclosure Reporting Page (DRP BD) is an [] INITIAL <i>OR</i> [] AMENDED response used to report details for affirmative responses to <i>Item 11J</i> on Form BD; Check [√] item(s) being responded to: 11J [] Has a bonding company ever denied, paid out on or revoked a bond for the <i>applicant</i> ?					
Use a separate DRP for each event or <i>proceeding</i> . An event or <i>proceeding</i> may be reported for more than one <i>person</i> or entity using one DRP. File with a completed Execution Page. It is not a requirement that documents be provided for each event or <i>proceeding</i> . Should they be provided, they will not be accepted as disclosure in lieu of answering the questions on this DRP.					
NAME OF APPLICANT:		APPLICANT CRD NUMBER:			
1.	Firm Name: (Policy Holder)				
2.	Bonding Company Name:				
3.	Disposition Type: (check appropriate item) [] Denied [] Payout [] Revoked				
4.	Disposition Date (MM/DD/YYYY): [] Exact [] Explanation				
	If not exact, provide explanation:				
5.	If disposition resulted in Payout, list Payout Amount and Date Paid:				
6.	Summarize the details of circumstances leading to the necessity of the bonding company action: (The informatio must fit within the space provided.)				

JUDGMENT / LIEN DISCLOSURE REPORTING PAGE (BD)

	GENERAL INSTRUCTIONS				
This Disclosure Reporting Page (DRP BD) is an [] INITIAL OR [] AMENDED response used to report details for affirmative responses to Item 11K of Form BD;					
Check [√] item(s) being responded to:					
□ 11K Does the <i>applicant</i> have any unsatisfied judgments or liens against it?					
Use a separate DRP for each event or <i>proceeding</i> . An event or <i>proceeding</i> may be reported for more than one <i>person</i> or entity using one DRP.					
File with a completed Execution Page.					
It is not a requirement that documents be provided for each event or <i>proceeding</i> . Should they be provided, they will not be accepted as disclosure in lieu of answering the questions on this DRP.					
NAME OF APPLICANT:		APPLICANT CRD NUMBER:			
1.	Judgment/Lien Amount:				
2.	Judgment/Lien Holder:				
3.	Judgment/Lien Type: (check appropriate item)				
Ο.	[] Civil [] Default [] Tax				
4.	Date Filed (MM/DD/YYYY): [] Exact [] Explanation				
Ī	If not exact, provide explanation:				
	ii not exact, provide explanation.				
5.	Is Judgment/Lien outstanding? [] Yes [] No				
F	If No, provide status date (MM/DD/YYYY): [] Exact	[] Explanation			
	If not exact, provide explanation:				
	If No, how was matter resolved? (check appropriate item)				
	[] Discharged [] Released [] Removed [] Satisfied				
6.	Court (Name of Federal, State or Foreign Court), Location of Court (City or County Number:	and State or Country) and Docket/Case			
	Trainings.				
7.	Provide a brief summary of events leading to the action and any payment schedule applicable). (The information must fit within the space provided.):	e details including current status (if			