

**FORM ADV****UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION AND REPORT BY  
EXEMPT REPORTING ADVISERS****Primary Business Name: TLG ADVISORS, INC.****CRD Number: 111052****Annual Amendment - Item 1 Identifying Information****Rev. 10/2021****3/16/2023 5:20:46 PM**

**WARNING:** Complete this form truthfully. False statements or omissions may result in denial of your application, revocation of your registration, or criminal prosecution. You must keep this form updated by filing periodic amendments. See Form ADV General Instruction 4.

**Item 1 Identifying Information**

Responses to this Item tell us who you are, where you are doing business, and how we can contact you. If you are filing an *umbrella registration*, the information in Item 1 should be provided for the *filing adviser* only. General Instruction 5 provides information to assist you with filing an *umbrella registration*.

A. Your full legal name (if you are a sole proprietor, your last, first, and middle names):

**TLG ADVISORS, INC.**

B. (1) Name under which you primarily conduct your advisory business, if different from Item 1.A.

**TLG ADVISORS, INC.**

*List on Section 1.B. of Schedule D any additional names under which you conduct your advisory business.*

(2) If you are using this Form ADV to register more than one investment adviser under an *umbrella registration*, check this box ☐

*If you check this box, complete a Schedule R for each relying adviser.*

C. If this filing is reporting a change in your legal name (Item 1.A.) or primary business name (Item 1.B.(1)), enter the new name and specify whether the name change is of

☐ your legal name or ☐ your primary business name:

D. (1) If you are registered with the SEC as an investment adviser, your SEC file number: **801-60458**

(2) If you report to the SEC as an *exempt reporting adviser*, your SEC file number:

(3) If you have one or more Central Index Key numbers assigned by the SEC ("CIK Numbers"), all of your CIK numbers:

**CIK Number**

1856219

E. (1) If you have a number ("CRD Number") assigned by the *FINRA's CRD* system or by the IARD system, your CRD number: **111052**

*If your firm does not have a CRD number, skip this Item 1.E. Do not provide the CRD number of one of your officers, employees, or affiliates.*

(2) If you have additional CRD Numbers, your additional CRD numbers:

No Information Filed

F. *Principal Office and Place of Business*

(1) Address (do not use a P.O. Box):

Number and Street 1:

26 WEST DRY CREEK CIRCLE

City:

LITTLETON

State:

Colorado

Number and Street 2:

SUITE 800

Country:

United States

ZIP+4/Postal Code:

80120

If this address is a private residence, check this box: ☐

*List on Section 1.F. of Schedule D any office, other than your principal office and place of business, at which you conduct investment advisory business. If you are applying for registration, or are registered, with one or more state securities authorities, you must list all of your offices in the state or states to which you are applying for registration or with whom you are registered. If you are applying for SEC registration, if you are registered only with the SEC, or if you are reporting to the SEC as an exempt reporting adviser, list the largest twenty-five offices in terms of numbers of employees as of the end of your most recently completed fiscal year.*

(2) Days of week that you normally conduct business at your *principal office and place of business*:☒ Monday - Friday ☐ Other:

Normal business hours at this location:

8:00 A.M. TO 4:00P.M.

(3) Telephone number at this location:

888-371-0013

(4) Facsimile number at this location, if any:

303-797-7297

(5) What is the total number of offices, other than your *principal office and place of business*, at which you conduct investment advisory business as of the end of your most recently completed fiscal year?

96

G. *Mailing address, if different from your principal office and place of business address:*

Number and Street 1:

Number and Street 2:

City:

State:

Country:

ZIP+4/Postal Code:

If this address is a private residence, check this box: ☐H. *If you are a sole proprietor, state your full residence address, if different from your principal office and place of business address in Item 1.F.:*

Number and Street 1:

Number and Street 2:

City:

State:

Country:

ZIP+4/Postal Code:

**Yes No**I. *Do you have one or more websites or accounts on publicly available social media platforms (including, but not limited to, Twitter, Facebook and LinkedIn)?*☒ ☐

*If "yes," list all firm website addresses and the address for each of the firm's accounts on publicly available social media platforms on Section 1.I. of Schedule D. If a website address serves as a portal through which to access other information you have published on the web, you may list the portal without listing addresses for all of the other information. You may need to list more than one portal address. Do not provide the addresses of websites or accounts on publicly available social media platforms where you do not control the content. Do not provide the individual electronic mail (e-mail) addresses of employees or the addresses of employee accounts on publicly available social media platforms.*

**J. Chief Compliance Officer**

(1) Provide the name and contact information of your Chief Compliance Officer. If you are an *exempt reporting adviser*, you must provide the contact information for your Chief Compliance Officer, if you have one. If not, you must complete Item 1.K. below.

Name:		Other titles, if any:	
Z. JANE RILEY		CCO	
Telephone number:		Facsimile number, if any:	
303-797-9080 EXT 1010		(303) 797-7297	
Number and Street 1:		Number and Street 2:	
26 WEST DRY CREEK CIRCLE		SUITE 800	
City:	State:	Country:	ZIP+4/Postal Code:
LITTLETON	Colorado	United States	80120

Electronic mail (e-mail) address, if Chief Compliance Officer has one:

JANE@LEADERSGROUP.NET

(2) If your Chief Compliance Officer is compensated or employed by any *person* other than you, a *related person* or an investment company registered under the Investment Company Act of 1940 that you advise for providing chief compliance officer services to you, provide the *person's* name and IRS Employer Identification Number (if any):

Name:

THE LEADERS GROUP, INC.

IRS Employer Identification Number:

84-1275292

**K. Additional Regulatory Contact Person:** If a person other than the Chief Compliance Officer is authorized to receive information and respond to questions about this Form ADV, you may provide that information here.

Name:		Titles:	
SEAN WICKERSHAM		PRESIDENT	
Telephone number:		Facsimile number, if any:	
303-797-9080 EXT 1030			
Number and Street 1:		Number and Street 2:	
26 W. DRY CREEK CIRCLE, SUITE 800			
City:	State:	Country:	ZIP+4/Postal Code:
LITTLETON	Colorado	United States	80120

Electronic mail (e-mail) address, if contact person has one:

SEAN.WICKERSHAM@LEADERSGROUP.NET

**Yes No**

**L. Do you maintain some or all of the books and records you are required to keep under Section 204 of the Advisers Act, or similar state law, somewhere other than your *principal office and place of business*?**

☒ ☐

If "yes," complete Section 1.L. of Schedule D.

**Yes No**

**M. Are you registered with a *foreign financial regulatory authority*?**

☐ ☒

Answer "no" if you are not registered with a foreign financial regulatory authority, even if you have an affiliate that is registered with a foreign financial regulatory authority. If "yes," complete Section 1.M. of Schedule D.

N. Are you a public reporting company under Sections 12 or 15(d) of the Securities Exchange Act of 1934? Yes No

☐ ☒

O. Did you have \$1 billion or more in assets on the last day of your most recent fiscal year? Yes No

☒ ☐

If yes, what is the approximate amount of your assets:

- ☒ \$1 billion to less than \$10 billion
- ☐ \$10 billion to less than \$50 billion
- ☐ \$50 billion or more

*For purposes of Item 1.O. only, "assets" refers to your total assets, rather than the assets you manage on behalf of clients. Determine your total assets using the total assets shown on the balance sheet for your most recent fiscal year end.*

P. Provide your *Legal Entity Identifier* if you have one:

*A legal entity identifier is a unique number that companies use to identify each other in the financial marketplace. You may not have a legal entity identifier.*

## SECTION 1.B. Other Business Names

List your other business names and the jurisdictions in which you use them. You must complete a separate Schedule D Section 1.B. for each business name.

Name: STARLIGHT PORTFOLIOS

Jurisdictions

<input type="checkbox"/> AL	<input type="checkbox"/> IL	<input type="checkbox"/> NE	<input type="checkbox"/> SC
<input type="checkbox"/> AK	<input type="checkbox"/> IN	<input type="checkbox"/> NV	<input type="checkbox"/> SD
<input type="checkbox"/> AZ	<input type="checkbox"/> IA	<input type="checkbox"/> NH	<input type="checkbox"/> TN
<input type="checkbox"/> AR	<input type="checkbox"/> KS	<input type="checkbox"/> NJ	<input type="checkbox"/> TX
<input type="checkbox"/> CA	<input type="checkbox"/> KY	<input type="checkbox"/> NM	<input type="checkbox"/> UT
<input checked="" type="checkbox"/> CO	<input type="checkbox"/> LA	<input type="checkbox"/> NY	<input type="checkbox"/> VT
<input type="checkbox"/> CT	<input type="checkbox"/> ME	<input type="checkbox"/> NC	<input type="checkbox"/> VI
<input type="checkbox"/> DE	<input type="checkbox"/> MD	<input type="checkbox"/> ND	<input type="checkbox"/> VA
<input type="checkbox"/> DC	<input type="checkbox"/> MA	<input type="checkbox"/> OH	<input type="checkbox"/> WA
<input type="checkbox"/> FL	<input type="checkbox"/> MI	<input type="checkbox"/> OK	<input type="checkbox"/> WV
<input type="checkbox"/> GA	<input type="checkbox"/> MN	<input type="checkbox"/> OR	<input type="checkbox"/> WI
<input type="checkbox"/> GU	<input type="checkbox"/> MS	<input type="checkbox"/> PA	<input type="checkbox"/> WY
<input type="checkbox"/> HI	<input type="checkbox"/> MO	<input type="checkbox"/> PR	<input type="checkbox"/> Other:
<input type="checkbox"/> ID	<input type="checkbox"/> MT	<input type="checkbox"/> RI	

List your other business names and the jurisdictions in which you use them. You must complete a separate Schedule D Section 1.B. for each business name.

Name: PACIFIC PEAK ADVISORS

Jurisdictions

<input type="checkbox"/> AL	<input type="checkbox"/> IL	<input type="checkbox"/> NE	<input type="checkbox"/> SC
<input type="checkbox"/> AK	<input type="checkbox"/> IN	<input type="checkbox"/> NV	<input type="checkbox"/> SD
<input checked="" type="checkbox"/> AZ	<input type="checkbox"/> IA	<input checked="" type="checkbox"/> NH	<input type="checkbox"/> TN
<input type="checkbox"/> AR	<input type="checkbox"/> KS	<input type="checkbox"/> NJ	<input type="checkbox"/> TX
<input checked="" type="checkbox"/> CA	<input type="checkbox"/> KY	<input checked="" type="checkbox"/> NM	<input type="checkbox"/> UT
<input checked="" type="checkbox"/> CO	<input type="checkbox"/> LA	<input type="checkbox"/> NY	<input type="checkbox"/> VT
<input type="checkbox"/> CT	<input type="checkbox"/> ME	<input type="checkbox"/> NC	<input type="checkbox"/> VI
<input type="checkbox"/> DE	<input type="checkbox"/> MD	<input type="checkbox"/> ND	<input type="checkbox"/> VA
<input type="checkbox"/> DC	<input type="checkbox"/> MA	<input type="checkbox"/> OH	<input type="checkbox"/> WA
<input type="checkbox"/> FL	<input type="checkbox"/> MI	<input type="checkbox"/> OK	<input type="checkbox"/> WV
<input type="checkbox"/> GA	<input type="checkbox"/> MN	<input type="checkbox"/> OR	<input type="checkbox"/> WI
<input type="checkbox"/> GU	<input type="checkbox"/> MS	<input type="checkbox"/> PA	<input checked="" type="checkbox"/> WY
<input type="checkbox"/> HI	<input type="checkbox"/> MO	<input type="checkbox"/> PR	<input type="checkbox"/> Other:
<input checked="" type="checkbox"/> ID	<input type="checkbox"/> MT	<input type="checkbox"/> RI	

List your other business names and the jurisdictions in which you use them. You must complete a separate Schedule D Section 1.B. for each business name.

Name: MACK FINANCIAL GROUP, INC

Jurisdictions

<input type="checkbox"/> AL	<input checked="" type="checkbox"/> IL	<input type="checkbox"/> NE	<input type="checkbox"/> SC
<input type="checkbox"/> AK	<input checked="" type="checkbox"/> IN	<input type="checkbox"/> NV	<input type="checkbox"/> SD
<input type="checkbox"/> AZ	<input type="checkbox"/> IA	<input type="checkbox"/> NH	<input checked="" type="checkbox"/> TN
<input type="checkbox"/> AR	<input type="checkbox"/> KS	<input type="checkbox"/> NJ	<input type="checkbox"/> TX
<input checked="" type="checkbox"/> CA	<input type="checkbox"/> KY	<input type="checkbox"/> NM	<input type="checkbox"/> UT
<input type="checkbox"/> CO	<input type="checkbox"/> LA	<input checked="" type="checkbox"/> NY	<input type="checkbox"/> VT
<input type="checkbox"/> CT	<input type="checkbox"/> ME	<input checked="" type="checkbox"/> NC	<input type="checkbox"/> VI
<input type="checkbox"/> DE	<input checked="" type="checkbox"/> MD	<input type="checkbox"/> ND	<input type="checkbox"/> VA
<input type="checkbox"/> DC	<input type="checkbox"/> MA	<input checked="" type="checkbox"/> OH	<input type="checkbox"/> WA
<input checked="" type="checkbox"/> FL	<input checked="" type="checkbox"/> MI	<input type="checkbox"/> OK	<input type="checkbox"/> WV
<input checked="" type="checkbox"/> GA	<input type="checkbox"/> MN	<input checked="" type="checkbox"/> OR	<input type="checkbox"/> WI
<input type="checkbox"/> GU	<input type="checkbox"/> MS	<input checked="" type="checkbox"/> PA	<input checked="" type="checkbox"/> WY
<input type="checkbox"/> HI	<input type="checkbox"/> MO	<input type="checkbox"/> PR	<input type="checkbox"/> Other:
<input type="checkbox"/> ID	<input type="checkbox"/> MT	<input type="checkbox"/> RI	

List your other business names and the jurisdictions in which you use them. You must complete a separate Schedule D Section 1.B. for each business name.

Name: CANTILEVER WEALTH MANAGEMENT LLC

Jurisdictions

<input type="checkbox"/> AL	<input checked="" type="checkbox"/> IL	<input type="checkbox"/> NE	<input type="checkbox"/> SC
<input type="checkbox"/> AK	<input type="checkbox"/> IN	<input type="checkbox"/> NV	<input type="checkbox"/> SD
<input type="checkbox"/> AZ	<input type="checkbox"/> IA	<input type="checkbox"/> NH	<input type="checkbox"/> TN
<input type="checkbox"/> AR	<input type="checkbox"/> KS	<input type="checkbox"/> NJ	<input type="checkbox"/> TX
<input type="checkbox"/> CA	<input type="checkbox"/> KY	<input type="checkbox"/> NM	<input type="checkbox"/> UT
<input type="checkbox"/> CO	<input type="checkbox"/> LA	<input type="checkbox"/> NY	<input type="checkbox"/> VT
<input type="checkbox"/> CT	<input type="checkbox"/> ME	<input type="checkbox"/> NC	<input type="checkbox"/> VI
<input type="checkbox"/> DE	<input type="checkbox"/> MD	<input type="checkbox"/> ND	<input type="checkbox"/> VA
<input type="checkbox"/> DC	<input type="checkbox"/> MA	<input type="checkbox"/> OH	<input type="checkbox"/> WA
<input type="checkbox"/> FL	<input type="checkbox"/> MI	<input type="checkbox"/> OK	<input checked="" type="checkbox"/> WV
<input type="checkbox"/> GA	<input type="checkbox"/> MN	<input type="checkbox"/> OR	<input type="checkbox"/> WI
<input type="checkbox"/> GU	<input type="checkbox"/> MS	<input checked="" type="checkbox"/> PA	<input type="checkbox"/> WY
<input type="checkbox"/> HI	<input type="checkbox"/> MO	<input type="checkbox"/> PR	<input type="checkbox"/> Other:
<input type="checkbox"/> ID	<input type="checkbox"/> MT	<input type="checkbox"/> RI	

List your other business names and the jurisdictions in which you use them. You must complete a separate Schedule D Section 1.B. for each business name.

Name: ASSET MANAGEMENT GROUP

Jurisdictions

<input type="checkbox"/> AL	<input type="checkbox"/> IL	<input type="checkbox"/> NE	<input type="checkbox"/> SC
<input type="checkbox"/> AK	<input type="checkbox"/> IN	<input type="checkbox"/> NV	<input type="checkbox"/> SD
<input type="checkbox"/> AZ	<input type="checkbox"/> IA	<input type="checkbox"/> NH	<input type="checkbox"/> TN
<input type="checkbox"/> AR	<input type="checkbox"/> KS	<input type="checkbox"/> NJ	<input type="checkbox"/> TX
<input type="checkbox"/> CA	<input type="checkbox"/> KY	<input type="checkbox"/> NM	<input type="checkbox"/> UT
<input type="checkbox"/> CO	<input type="checkbox"/> LA	<input type="checkbox"/> NY	<input type="checkbox"/> VT
<input checked="" type="checkbox"/> CT	<input type="checkbox"/> ME	<input type="checkbox"/> NC	<input type="checkbox"/> VI
<input type="checkbox"/> DE	<input type="checkbox"/> MD	<input type="checkbox"/> ND	<input type="checkbox"/> VA
<input type="checkbox"/> DC	<input type="checkbox"/> MA	<input type="checkbox"/> OH	<input type="checkbox"/> WA
<input type="checkbox"/> FL	<input type="checkbox"/> MI	<input type="checkbox"/> OK	<input type="checkbox"/> WV
<input type="checkbox"/> GA	<input type="checkbox"/> MN	<input type="checkbox"/> OR	<input type="checkbox"/> WI
<input type="checkbox"/> GU	<input type="checkbox"/> MS	<input type="checkbox"/> PA	<input type="checkbox"/> WY
<input type="checkbox"/> HI	<input type="checkbox"/> MO	<input type="checkbox"/> PR	<input type="checkbox"/> Other:
<input type="checkbox"/> ID	<input type="checkbox"/> MT	<input type="checkbox"/> RI	

List your other business names and the jurisdictions in which you use them. You must complete a separate Schedule D Section 1.B. for each business name.

Name: GARLIKOV ADVISORS INC

Jurisdictions

<input type="checkbox"/> AL	<input type="checkbox"/> IL	<input type="checkbox"/> NE	<input type="checkbox"/> SC
<input type="checkbox"/> AK	<input type="checkbox"/> IN	<input type="checkbox"/> NV	<input type="checkbox"/> SD
<input type="checkbox"/> AZ	<input type="checkbox"/> IA	<input type="checkbox"/> NH	<input type="checkbox"/> TN
<input type="checkbox"/> AR	<input type="checkbox"/> KS	<input type="checkbox"/> NJ	<input type="checkbox"/> TX
<input type="checkbox"/> CA	<input type="checkbox"/> KY	<input type="checkbox"/> NM	<input type="checkbox"/> UT
<input type="checkbox"/> CO	<input type="checkbox"/> LA	<input type="checkbox"/> NY	<input type="checkbox"/> VT
<input type="checkbox"/> CT	<input type="checkbox"/> ME	<input type="checkbox"/> NC	<input type="checkbox"/> VI
<input type="checkbox"/> DE	<input type="checkbox"/> MD	<input type="checkbox"/> ND	<input type="checkbox"/> VA
<input type="checkbox"/> DC	<input type="checkbox"/> MA	<input checked="" type="checkbox"/> OH	<input type="checkbox"/> WA
<input type="checkbox"/> FL	<input type="checkbox"/> MI	<input type="checkbox"/> OK	<input type="checkbox"/> WV
<input type="checkbox"/> GA	<input type="checkbox"/> MN	<input type="checkbox"/> OR	<input type="checkbox"/> WI
<input type="checkbox"/> GU	<input type="checkbox"/> MS	<input type="checkbox"/> PA	<input type="checkbox"/> WY
<input type="checkbox"/> HI	<input type="checkbox"/> MO	<input type="checkbox"/> PR	<input type="checkbox"/> Other:
<input type="checkbox"/> ID	<input type="checkbox"/> MT	<input type="checkbox"/> RI	

List your other business names and the jurisdictions in which you use them. You must complete a separate Schedule D Section 1.B. for each business name.

Name: RAABE & ASSOCIATES

Jurisdictions

<input type="checkbox"/> AL	<input type="checkbox"/> IL	<input type="checkbox"/> NE	<input type="checkbox"/> SC
<input type="checkbox"/> AK	<input type="checkbox"/> IN	<input type="checkbox"/> NV	<input type="checkbox"/> SD
<input type="checkbox"/> AZ	<input type="checkbox"/> IA	<input type="checkbox"/> NH	<input type="checkbox"/> TN
<input type="checkbox"/> AR	<input type="checkbox"/> KS	<input type="checkbox"/> NJ	<input type="checkbox"/> TX
<input type="checkbox"/> CA	<input type="checkbox"/> KY	<input type="checkbox"/> NM	<input type="checkbox"/> UT
<input type="checkbox"/> CO	<input type="checkbox"/> LA	<input type="checkbox"/> NY	<input type="checkbox"/> VT
<input type="checkbox"/> CT	<input type="checkbox"/> ME	<input type="checkbox"/> NC	<input type="checkbox"/> VI
<input type="checkbox"/> DE	<input type="checkbox"/> MD	<input type="checkbox"/> ND	<input type="checkbox"/> VA
<input type="checkbox"/> DC	<input type="checkbox"/> MA	<input type="checkbox"/> OH	<input checked="" type="checkbox"/> WA
<input type="checkbox"/> FL	<input type="checkbox"/> MI	<input type="checkbox"/> OK	<input type="checkbox"/> WV
<input type="checkbox"/> GA	<input type="checkbox"/> MN	<input type="checkbox"/> OR	<input type="checkbox"/> WI
<input type="checkbox"/> GU	<input type="checkbox"/> MS	<input type="checkbox"/> PA	<input type="checkbox"/> WY
<input type="checkbox"/> HI	<input type="checkbox"/> MO	<input type="checkbox"/> PR	<input type="checkbox"/> Other:
<input type="checkbox"/> ID	<input type="checkbox"/> MT	<input type="checkbox"/> RI	

List your other business names and the jurisdictions in which you use them. You must complete a separate Schedule D Section 1.B. for each business name.

Name: HANSON WEALTH MANAGEMENT

Jurisdictions

<input type="checkbox"/> AL	<input type="checkbox"/> IL	<input type="checkbox"/> NE	<input type="checkbox"/> SC
<input type="checkbox"/> AK	<input type="checkbox"/> IN	<input type="checkbox"/> NV	<input type="checkbox"/> SD
<input type="checkbox"/> AZ	<input type="checkbox"/> IA	<input type="checkbox"/> NH	<input type="checkbox"/> TN
<input type="checkbox"/> AR	<input type="checkbox"/> KS	<input type="checkbox"/> NJ	<input type="checkbox"/> TX
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<input type="checkbox"/> CO	<input type="checkbox"/> LA	<input type="checkbox"/> NY	<input type="checkbox"/> VT
<input type="checkbox"/> CT	<input type="checkbox"/> ME	<input type="checkbox"/> NC	<input type="checkbox"/> VI
<input type="checkbox"/> DE	<input type="checkbox"/> MD	<input type="checkbox"/> ND	<input type="checkbox"/> VA
<input type="checkbox"/> DC	<input type="checkbox"/> MA	<input type="checkbox"/> OH	<input type="checkbox"/> WA
<input type="checkbox"/> FL	<input type="checkbox"/> MI	<input type="checkbox"/> OK	<input type="checkbox"/> WV
<input type="checkbox"/> GA	<input checked="" type="checkbox"/> MN	<input type="checkbox"/> OR	<input type="checkbox"/> WI
<input type="checkbox"/> GU	<input type="checkbox"/> MS	<input type="checkbox"/> PA	<input type="checkbox"/> WY
<input type="checkbox"/> HI	<input type="checkbox"/> MO	<input type="checkbox"/> PR	<input type="checkbox"/> Other:
<input type="checkbox"/> ID	<input type="checkbox"/> MT	<input type="checkbox"/> RI	

List your other business names and the jurisdictions in which you use them. You must complete a separate Schedule D Section 1.B. for each business name.

Name: MILESTONE FINANCIAL SOLUTIONS

Jurisdictions

<input type="checkbox"/> AL	<input type="checkbox"/> IL	<input type="checkbox"/> NE	<input type="checkbox"/> SC
<input type="checkbox"/> AK	<input type="checkbox"/> IN	<input type="checkbox"/> NV	<input type="checkbox"/> SD
<input type="checkbox"/> AZ	<input type="checkbox"/> IA	<input type="checkbox"/> NH	<input type="checkbox"/> TN
<input type="checkbox"/> AR	<input type="checkbox"/> KS	<input type="checkbox"/> NJ	<input type="checkbox"/> TX
<input type="checkbox"/> CA	<input type="checkbox"/> KY	<input type="checkbox"/> NM	<input type="checkbox"/> UT
<input type="checkbox"/> CO	<input type="checkbox"/> LA	<input type="checkbox"/> NY	<input type="checkbox"/> VT
<input type="checkbox"/> CT	<input type="checkbox"/> ME	<input type="checkbox"/> NC	<input type="checkbox"/> VI
<input type="checkbox"/> DE	<input type="checkbox"/> MD	<input type="checkbox"/> ND	<input checked="" type="checkbox"/> VA
<input type="checkbox"/> DC	<input type="checkbox"/> MA	<input type="checkbox"/> OH	<input type="checkbox"/> WA
<input type="checkbox"/> FL	<input type="checkbox"/> MI	<input type="checkbox"/> OK	<input type="checkbox"/> WV
<input type="checkbox"/> GA	<input type="checkbox"/> MN	<input type="checkbox"/> OR	<input type="checkbox"/> WI
<input type="checkbox"/> GU	<input type="checkbox"/> MS	<input type="checkbox"/> PA	<input type="checkbox"/> WY
<input type="checkbox"/> HI	<input type="checkbox"/> MO	<input type="checkbox"/> PR	<input type="checkbox"/> Other:



☐ ID☐ MT☐ RI

List your other business names and the jurisdictions in which you use them. You must complete a separate Schedule D Section 1.B. for each business name.

Name: HN WEALTH MANAGEMENT

Jurisdictions

☐ AL☐ AK☐ AZ☐ AR☐ CA☐ CO☐ CT☐ DE☐ DC☒ FL☐ GA☐ GU☐ HI☐ ID☐ IL☐ IN☐ IA☐ KS☐ KY☐ LA☐ ME☐ MD☐ MA☐ MI☐ MN☐ MS☐ MO☐ MT☐ NE☐ NV☐ NH☐ NJ☐ NM☐ NY☐ NC☐ ND☐ OH☐ OK☐ OR☐ PA☐ PR☐ RI☐ SC☐ SD☐ TN☐ TX☐ UT☐ VT☐ VI☐ VA☐ WA☐ WV☐ WI☐ WY☐ Other:

List your other business names and the jurisdictions in which you use them. You must complete a separate Schedule D Section 1.B. for each business name.

Name: STRATEGIC PLANNING GROUP PLLC

Jurisdictions

☐ AL☐ AK☐ AZ☐ AR☐ CA☐ CO☐ CT☐ DE☐ DC☐ FL☐ GA☐ GU☐ IL☐ IN☐ IA☐ KS☐ KY☐ LA☐ ME☐ MD☐ MA☐ MI☐ MN☒ MS☐ NE☐ NV☐ NH☐ NJ☐ NM☐ NY☐ NC☐ ND☐ OH☐ OK☐ OR☐ PA☐ SC☐ SD☐ TN☐ TX☐ UT☐ VT☐ VI☐ VA☐ WA☐ WV☐ WI☐ WY

☐ HI☐ ID☐ MO☐ MT☐ PR☐ RI☐ Other:

List your other business names and the jurisdictions in which you use them. You must complete a separate Schedule D Section 1.B. for each business name.

Name: SENIOR FINANCIAL PLANNING LLC

Jurisdictions

☐ AL☐ AK☐ AZ☐ AR☐ CA☐ CO☐ CT☐ DE☐ DC☐ FL☒ GA☐ GU☐ HI☐ ID☐ IL☐ IN☐ IA☐ KS☐ KY☐ LA☐ ME☐ MD☐ MA☐ MI☐ MN☐ MS☐ MO☐ MT☐ NE☐ NV☐ NH☐ NJ☐ NM☐ NY☐ NC☐ ND☐ OH☐ OK☐ OR☐ PA☐ PR☐ RI☐ SC☐ SD☐ TN☐ TX☐ UT☐ VT☐ VI☐ VA☐ WA☐ WV☐ WI☐ WY☐ Other:

List your other business names and the jurisdictions in which you use them. You must complete a separate Schedule D Section 1.B. for each business name.

Name: RESOURCE INSURANCE & FINANCIAL GROUP

Jurisdictions

☐ AL☐ AK☐ AZ☐ AR☐ CA☐ CO☐ CT☐ DE☐ DC☐ FL☐ GA☒ IL☐ IN☐ IA☐ KS☐ KY☐ LA☐ ME☐ MD☐ MA☐ MI☐ MN☐ NE☐ NV☐ NH☐ NJ☐ NM☐ NY☐ NC☐ ND☐ OH☐ OK☐ OR☐ SC☐ SD☐ TN☐ TX☐ UT☐ VT☐ VI☐ VA☐ WA☐ WV☐ WI

☐ GU☐ HI☐ ID☐ MS☐ MO☐ MT☐ PA☐ PR☐ RI☐ WY☐ Other:

List your other business names and the jurisdictions in which you use them. You must complete a separate Schedule D Section 1.B. for each business name.

Name: CLARITY FINANCIAL

Jurisdictions

☐ AL☐ AK☐ AZ☐ AR☐ CA☐ CO☐ CT☐ DE☐ DC☐ FL☐ GA☐ GU☐ HI☐ ID☐ IL☐ IN☐ IA☐ KS☐ KY☐ LA☐ ME☐ MD☐ MA☐ MI☐ MN☐ MS☐ MO☐ MT☒ NE☐ NV☐ NH☐ NJ☐ NM☐ NY☐ NC☐ ND☐ OH☐ OK☐ OR☐ PA☐ PR☐ RI☐ SC☐ SD☐ TN☐ TX☐ UT☐ VT☐ VI☐ VA☐ WA☐ WV☐ WI☐ WY☐ Other:

List your other business names and the jurisdictions in which you use them. You must complete a separate Schedule D Section 1.B. for each business name.

Name: PACIFIC CAPITAL STRATEGIES, INC.

Jurisdictions

☐ AL☐ AK☐ AZ☐ AR☒ CA☐ CO☐ CT☐ DE☐ DC☐ FL☐ IL☐ IN☐ IA☐ KS☐ KY☐ LA☐ ME☐ MD☐ MA☐ MI☐ NE☐ NV☐ NH☐ NJ☐ NM☐ NY☐ NC☐ ND☐ OH☐ OK☐ SC☐ SD☐ TN☐ TX☐ UT☐ VT☐ VI☐ VA☒ WA☐ WV

☐ GA  
☐ GU  
☐ HI  
☐ ID

☐ MN  
☐ MS  
☐ MO  
☐ MT

☐ OR  
☐ PA  
☐ PR  
☐ RI

☐ WI  
☐ WY  
☐ Other:

List your other business names and the jurisdictions in which you use them. You must complete a separate Schedule D Section 1.B. for each business name.

Name: ABUNDANT WEALTH MANAGEMENT

Jurisdictions

☐ AL  
☐ AK  
☐ AZ  
☐ AR  
☐ CA  
☐ CO  
☒ CT  
☐ DE  
☐ DC  
☐ FL  
☐ GA  
☐ GU  
☐ HI  
☐ ID

☐ IL  
☐ IN  
☐ IA  
☐ KS  
☐ KY  
☐ LA  
☐ ME  
☐ MD  
☐ MA  
☐ MI  
☐ MN  
☐ MS  
☐ MO  
☐ MT

☐ NE  
☐ NV  
☐ NH  
☐ NJ  
☐ NM  
☐ NY  
☐ NC  
☐ ND  
☐ OH  
☐ OK  
☐ OR  
☐ PA  
☐ PR  
☐ RI

☐ SC  
☐ SD  
☐ TN  
☐ TX  
☐ UT  
☐ VT  
☐ VI  
☐ VA  
☐ WA  
☐ WV  
☐ WI  
☐ WY  
☐ Other:

List your other business names and the jurisdictions in which you use them. You must complete a separate Schedule D Section 1.B. for each business name.

Name: INSLEY INVESTMENT GROUP LLC

Jurisdictions

☐ AL  
☐ AK  
☐ AZ  
☐ AR  
☐ CA  
☐ CO  
☐ CT  
☒ DE  
☐ DC

☐ IL  
☐ IN  
☐ IA  
☐ KS  
☐ KY  
☐ LA  
☐ ME  
☐ MD  
☐ MA

☐ NE  
☐ NV  
☐ NH  
☐ NJ  
☐ NM  
☐ NY  
☐ NC  
☐ ND  
☐ OH

☐ SC  
☐ SD  
☐ TN  
☐ TX  
☐ UT  
☐ VT  
☐ VI  
☐ VA  
☐ WA

☐ FL  
☐ GA  
☐ GU  
☐ HI  
☐ ID

☐ MI  
☐ MN  
☐ MS  
☐ MO  
☐ MT

☐ OK  
☐ OR  
☐ PA  
☐ PR  
☐ RI

☐ WV  
☐ WI  
☐ WY  
☐ Other:

List your other business names and the jurisdictions in which you use them. You must complete a separate Schedule D Section 1.B. for each business name.

Name: GIDEON STRATEGIC PARTNERS,

Jurisdictions

☐ AL  
☐ AK  
☐ AZ  
☐ AR  
☒ CA  
☐ CO  
☐ CT  
☐ DE  
☐ DC  
☐ FL  
☐ GA  
☐ GU  
☐ HI  
☐ ID

☐ IL  
☐ IN  
☐ IA  
☐ KS  
☐ KY  
☐ LA  
☐ ME  
☐ MD  
☐ MA  
☐ MI  
☐ MN  
☐ MS  
☐ MO  
☐ MT

☐ NE  
☐ NV  
☐ NH  
☐ NJ  
☐ NM  
☐ NY  
☐ NC  
☐ ND  
☐ OH  
☐ OK  
☐ OR  
☐ PA  
☐ PR  
☐ RI

☐ SC  
☐ SD  
☐ TN  
☐ TX  
☐ UT  
☐ VT  
☐ VI  
☐ VA  
☐ WA  
☐ WV  
☐ WI  
☐ WY  
☐ Other:

List your other business names and the jurisdictions in which you use them. You must complete a separate Schedule D Section 1.B. for each business name.

Name: WEALTH STRATEGIES GROUP

Jurisdictions

☐ AL  
☐ AK  
☐ AZ  
☐ AR  
☐ CA  
☐ CO  
☐ CT  
☐ DE

☐ IL  
☐ IN  
☐ IA  
☒ KS  
☐ KY  
☐ LA  
☐ ME  
☐ MD

☐ NE  
☐ NV  
☐ NH  
☐ NJ  
☐ NM  
☐ NY  
☐ NC  
☐ ND

☐ SC  
☐ SD  
☒ TN  
☐ TX  
☐ UT  
☐ VT  
☐ VI  
☐ VA

☐ DC  
☐ FL  
☐ GA  
☐ GU  
☐ HI  
☐ ID

☐ MA  
☐ MI  
☐ MN  
☐ MS  
☐ MO  
☐ MT

☐ OH  
☐ OK  
☐ OR  
☐ PA  
☐ PR  
☐ RI

☐ WA  
☐ WV  
☐ WI  
☐ WY  
☐ Other:

## SECTION 1.F. Other Offices

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

5005 HORIZONS DRIVE, SUITE 100

Number and Street 2:

City:

COLUMBUS

State:

Ohio

Country:

United States

ZIP+4/Postal Code:

43220

If this address is a private residence, check this box: ☐

Telephone Number:

(614) 459-9000

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD Branch Number* here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)  
☐ (2) Bank (including a separately identifiable department or division of a bank)  
☒ (3) Insurance broker or agent  
☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)  
☐ (5) Registered municipal advisor  
☐ (6) Accountant or accounting firm  
☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location.

If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

3330 GOAT FELL

Number and Street 2:

City:

ANN ARBOR

State:

Michigan

Country:

United States

ZIP+4/Postal Code:

48108

If this address is a private residence, check this box: ☐

Telephone Number:

(734) 277-6676

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)

☐ (2) Bank (including a separately identifiable department or division of a bank)

☒ (3) Insurance broker or agent

☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

☐ (5) Registered municipal advisor

☐ (6) Accountant or accounting firm

☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

13702 COURSEY BLVD, BLDG 3B

Number and Street 2:

City:

BATON ROUGE

State:

Louisiana

Country:

United States

ZIP+4/Postal Code:

70817

If this address is a private residence, check this box: ☐

Telephone Number:

2253618424

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

534169

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:  
26218 OAKRIDGE DRIVE

Number and Street 2:

City:  
SPRING

State:  
Texas

Country:  
United States

ZIP+4/Postal Code:  
77380

If this address is a private residence, check this box: ☐

Telephone Number:  
(832) 381-2515

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

197846

How many *employees* perform investment advisory functions from this office location?

2

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent



- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

1411 5TH STREET, SUITE 306

Number and Street 2:

City:

SANTA MONICA

State:

California

Country:

United States

ZIP+4/Postal Code:

90401

If this address is a private residence, check this box: ☐

Telephone Number:

(310) 579-9560

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

2

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

3388 FOUNDERS ROAD, SUITE 100

Number and Street 2:

City:

INDIANAPOLIS

State:

Indiana

Country:

United States

ZIP+4/Postal Code:

46268

If this address is a private residence, check this box: ☐

Telephone Number:

(317) 805-6701

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

706660

How many *employees* perform investment advisory functions from this office location?

6

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)☐ (2) Bank (including a separately identifiable department or division of a bank)☒ (3) Insurance broker or agent☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)☐ (5) Registered municipal advisor☐ (6) Accountant or accounting firm☐ (7) Lawyer or law firmDescribe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

2413 W ALGONQUIN ROAD, SUITE 506

Number and Street 2:

City:

ALGONQUIN

State:

Illinois

Country:

United States

ZIP+4/Postal Code:

60102

If this address is a private residence, check this box: ☐

Telephone Number:

(847) 459-8800

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

2551 ROSWELL RD STE 209

Number and Street 2:

City:

MARIETTA

State:

Georgia

Country:

United States

ZIP+4/Postal Code:

30062

If this address is a private residence, check this box: ☐

Telephone Number:

(770) 973-5220

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

23482 PERALTA DRIVE, SUITE B1

Number and Street 2:

City:

LAGUNA HILLS

State:

California

Country:

United States

ZIP+4/Postal Code:

92653

If this address is a private residence, check this box: ☐

Telephone Number:

(949) 296-1161

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

24800 DENSO DRIVE, SUITE140

Number and Street 2:

City:

SOUTHFIELD

State:

Michigan

Country:

United States

ZIP+4/Postal Code:

48033

If this address is a private residence, check this box: ☐

Telephone Number:

248-350-3400

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

664854

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)☐ (2) Bank (including a separately identifiable department or division of a bank)☒ (3) Insurance broker or agent☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)☐ (5) Registered municipal advisor☐ (6) Accountant or accounting firm☐ (7) Lawyer or law firmDescribe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

1464 WARWICK AVE

Number and Street 2:

City:

WARWICK

State:

Rhode Island

Country:

United States

ZIP+4/Postal Code:

02888

If this address is a private residence, check this box: ☐

Telephone Number:

(401) 780-9530

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please

provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

9869 S 168TH AVENUE, SUITE 1C

Number and Street 2:

City:

OMAHA

State:

Nebraska

Country:

United States

ZIP+4/Postal Code:

68136

If this address is a private residence, check this box: ☐

Telephone Number:

402-697-5074

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm

☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:  
120 VANTIS, SUITE 300

Number and Street 2:

City:  
ALISO VIEJO

State:  
California

Country:  
United States

ZIP+4/Postal Code:  
92656

If this address is a private residence, check this box: ☐

Telephone Number:  
949-737-2626

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?  
2

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)

☐ (2) Bank (including a separately identifiable department or division of a bank)

☒ (3) Insurance broker or agent

☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

☐ (5) Registered municipal advisor

☐ (6) Accountant or accounting firm

☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:  
8500 KEYSTONE CROSSING STE 300

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
INDIANAPOLIS	Indiana	United States	46240

If this address is a private residence, check this box: ☐

Telephone Number:	Facsimile Number, if any:
3177756110	

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?  
1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:	Number and Street 2:		
3108 LITTLE ALDEN LAKE RD			
City:	State:	Country:	ZIP+4/Postal Code:
DULUTH	Minnesota	United States	55803

If this address is a private residence, check this box: ☒

Telephone Number:	Facsimile Number, if any:
(612) 991-8906	

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:



How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

26 N 2ND STREET

Number and Street 2:

City:

PICKENS

State:

Mississippi

Country:

United States

ZIP+4/Postal Code:

39146

If this address is a private residence, check this box: ☒

Telephone Number:

(662) 468-3832

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD Branch Number* here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Number and Street 1:

7910 RALSTON ROAD, SUITE 7

Number and Street 2:

City:

ARVADA

State:

Colorado

Country:

United States

ZIP+4/Postal Code:

80002

If this address is a private residence, check this box: ☐

Telephone Number:

(303) 589-4602

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)

☐ (2) Bank (including a separately identifiable department or division of a bank)

☒ (3) Insurance broker or agent

☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

☐ (5) Registered municipal advisor

☐ (6) Accountant or accounting firm

☐ (7) Lawyer or law firm

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Number and Street 1:

5820 STAGE ROAD

Number and Street 2:

City:

BARTLETT

State:

Tennessee

Country:

United States

ZIP+4/Postal Code:

38134

If this address is a private residence, check this box: ☐

Telephone Number:

(901) 385-1234

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

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☐ (2) Bank (including a separately identifiable department or division of a bank)

☒ (3) Insurance broker or agent

☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

☐ (5) Registered municipal advisor

☐ (6) Accountant or accounting firm

☐ (7) Lawyer or law firm

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Number and Street 1:

4525 S WASATCH BLVD, SUITE 210

Number and Street 2:

City:

SALT LAKE CITY

State:

Utah

Country:

United States

ZIP+4/Postal Code:

84124

If this address is a private residence, check this box: ☐

Telephone Number:

(801) 647-50

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Number and Street 1:

300 S WACKER DRIVE, SUITE 2000A

Number and Street 2:

City:

CHICAGO

State:

Illinois

Country:

United States

ZIP+4/Postal Code:

60606

If this address is a private residence, check this box: ☐

Telephone Number:

(708) 220-5011

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

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- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Number and Street 1:

395 GUNTER AVENUE

Number and Street 2:

City:

GUNTERSVILLE

State:

Alabama

Country:

United States

ZIP+4/Postal Code:

35976

If this address is a private residence, check this box: ☐

Telephone Number:

(770) 389-9060

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD Branch Number* here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)☐ (2) Bank (including a separately identifiable department or division of a bank)☒ (3) Insurance broker or agent☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)☐ (5) Registered municipal advisor☐ (6) Accountant or accounting firm☐ (7) Lawyer or law firm

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Number and Street 1:

94 WOODCHUCK HOLLOW ROAD

Number and Street 2:

City:

COLD SPRING HARBOR

State:

New York

Country:

United States

ZIP+4/Postal Code:

11724

If this address is a private residence, check this box: ☐

Telephone Number:

(516) 677-6278

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Number and Street 1:

8 MACON STREET

Number and Street 2:

City:

MCDONOUGH

State:

Georgia

Country:

United States

ZIP+4/Postal Code:

30253

If this address is a private residence, check this box: ☐

Telephone Number:

(770) 389-9060

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)

- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Number and Street 1:

262 HALF HOLLOW ROAD

Number and Street 2:

City:

DIX HILLS

State:

New York

Country:

United States

ZIP+4/Postal Code:

11746

If this address is a private residence, check this box: ☐

Telephone Number:

(516) 695-4662

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

2850 GOLF ROAD

Number and Street 2:

City:

ROLLING MEADOWS

State:

Illinois

Country:

United States

ZIP+4/Postal Code:

60008

If this address is a private residence, check this box: ☐

Telephone Number:

(312) 982-7433

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)☐ (2) Bank (including a separately identifiable department or division of a bank)☒ (3) Insurance broker or agent☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)☐ (5) Registered municipal advisor☐ (6) Accountant or accounting firm☐ (7) Lawyer or law firm

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Number and Street 1:

4316 OLD CANTON ROAD, SUITE 100A

Number and Street 2:

City:

JACKSON

State:

Mississippi

Country:

United States

ZIP+4/Postal Code:

39211

If this address is a private residence, check this box: ☐



Telephone Number:  
(601) 982-1117

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:  
300062

How many *employees* perform investment advisory functions from this office location?  
1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)  
☐ (2) Bank (including a separately identifiable department or division of a bank)  
☒ (3) Insurance broker or agent  
☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)  
☐ (5) Registered municipal advisor  
☐ (6) Accountant or accounting firm  
☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:  
350 HIGHWAY 7 #241

Number and Street 2:

City:  
EXCELSIOR

State:  
Minnesota

Country:  
United States

ZIP+4/Postal Code:  
55331

If this address is a private residence, check this box: ☐

Telephone Number:  
(763) 231-7316

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?  
1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)

- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Number and Street 1:

10108 KRAUSE ROAD, SUITE 201

Number and Street 2:

City:

CHESTERFIELD

State:

Virginia

Country:

United States

ZIP+4/Postal Code:

23832

If this address is a private residence, check this box: ☐

Telephone Number:

8047680541

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD Branch Number* here:

698802

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

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Number and Street 1:

6330 N CENTER DRIVE, SUITE 140

Number and Street 2:

City:

NORFOLK

State:

Virginia

Country:

United States

ZIP+4/Postal Code:

23502

If this address is a private residence, check this box: ☐

Telephone Number:

(757) 366-0366

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

2

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)☐ (2) Bank (including a separately identifiable department or division of a bank)☒ (3) Insurance broker or agent☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)☐ (5) Registered municipal advisor☐ (6) Accountant or accounting firm☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

2001 BOMAR STREET

Number and Street 2:

City:

MARSHALL

State:

Texas

Country:

United States

ZIP+4/Postal Code:

75670

If this address is a private residence, check this box: ☐

Telephone Number:  
(484) 794-0574

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

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- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
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- ☐ (7) Lawyer or law firm

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Number and Street 1:

1520 CARLEMONT DRIVE, SUITE J

Number and Street 2:

City:

CRYSTAL LAKE

State:

Illinois

Country:

United States

ZIP+4/Postal Code:

60014

If this address is a private residence, check this box: ☐

Telephone Number:

(260) 312-4800

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

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- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
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Number and Street 1:  
1210 JACKSBORO PIKE

Number and Street 2:

City:  
LAFOLLETTE

State:  
Tennessee

Country:  
United States

ZIP+4/Postal Code:  
37766

If this address is a private residence, check this box: ☐

Telephone Number:  
(423) 562-3346

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?  
1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

518 W PALMETTO STREET

Number and Street 2:

City:

FLORENCE

State:

South Dakota

Country:

United States

ZIP+4/Postal Code:

29501

If this address is a private residence, check this box: ☐

Telephone Number:

(843) 229-0667

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)

☐ (2) Bank (including a separately identifiable department or division of a bank)

☒ (3) Insurance broker or agent

☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

☐ (5) Registered municipal advisor

☒ (6) Accountant or accounting firm

☐ (7) Lawyer or law firm

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Number and Street 1:

156 S SAGE HOLLOW

Number and Street 2:

City:

DRIPPING SPRINGS

State:

Texas

Country:

United States

ZIP+4/Postal Code:

78620

If this address is a private residence, check this box: ☐

Telephone Number:

(512) 538-6271

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

110 CHRISTIANA MEDICAL CENTER

Number and Street 2:

City:

NEWARK

State:

Delaware

Country:

United States

ZIP+4/Postal Code:

19702

If this address is a private residence, check this box: ☐

Telephone Number:

(302) 286-0777

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Number and Street 1:  
218 HILLSIDE DRIVE

Number and Street 2:

City:  
WALESKA

State:  
Georgia

Country:  
United States

ZIP+4/Postal Code:  
30183

If this address is a private residence, check this box: ☒

Telephone Number:  
(678) 923-3828

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Number and Street 1:

2935 PINE LAKE ROAD, SUITE I

Number and Street 2:

City:

LINCOLN

State:

Nebraska

Country:

United States

ZIP+4/Postal Code:

68516

If this address is a private residence, check this box: ☐

Telephone Number:

(402) 430-0841

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

2

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)☐ (2) Bank (including a separately identifiable department or division of a bank)☒ (3) Insurance broker or agent☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)☐ (5) Registered municipal advisor☐ (6) Accountant or accounting firm☐ (7) Lawyer or law firmDescribe any other *investment-related* business activities conducted from this office location:

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Number and Street 1:

7791 BELFORT PARKWAY

Number and Street 2:

City:

JACKSONVILLE

State:

Florida

Country:

United States

ZIP+4/Postal Code:

32256

If this address is a private residence, check this box: ☐

Telephone Number:

(904) 296-4100 129

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please

provide the *CRD* Branch Number here:  
219029

How many *employees* perform investment advisory functions from this office location?  
3

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)  
☐ (2) Bank (including a separately identifiable department or division of a bank)  
☒ (3) Insurance broker or agent  
☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)  
☐ (5) Registered municipal advisor  
☐ (6) Accountant or accounting firm  
☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

220 2ND AVENUE S

Number and Street 2:

City:

FRANKLIN

State:

Tennessee

Country:

United States

ZIP+4/Postal Code:

37064

If this address is a private residence, check this box: ☐

Telephone Number:

(615) 628-3290

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)  
☐ (2) Bank (including a separately identifiable department or division of a bank)  
☒ (3) Insurance broker or agent  
☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)  
☐ (5) Registered municipal advisor

☐ (6) Accountant or accounting firm☐ (7) Lawyer or law firm

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Number and Street 1:

450 SKOKIE BLVD, SUITE 507

Number and Street 2:

City:

NORTHBROOK

State:

Illinois

Country:

United States

ZIP+4/Postal Code:

60062

If this address is a private residence, check this box: ☐

Telephone Number:

7737742600

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

3

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)☐ (2) Bank (including a separately identifiable department or division of a bank)☒ (3) Insurance broker or agent☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)☐ (5) Registered municipal advisor☐ (6) Accountant or accounting firm☐ (7) Lawyer or law firm

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Number and Street 1:  
425 RIESLING STREET

Number and Street 2:

City:  
CLOVERDALE

State:  
California

Country:  
United States

ZIP+4/Postal Code:  
95425

If this address is a private residence, check this box: ☐

Telephone Number:  
(707) 473-2733

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?  
1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
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- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Number and Street 1:  
11225 COLLEGE BLVD, SUITE 105

Number and Street 2:

City:  
OVERLAND PARK

State:  
Kansas

Country:  
United States

ZIP+4/Postal Code:  
66210

If this address is a private residence, check this box: ☐

Telephone Number:  
(913) 951-5448

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
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- ☐ (7) Lawyer or law firm

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Number and Street 1:

81 TIMBER CREEK ROAD

Number and Street 2:

City:

ROZET

State:

Wyoming

Country:

United States

ZIP+4/Postal Code:

82727

If this address is a private residence, check this box: ☐

Telephone Number:

(307) 689-0701

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

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- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
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Number and Street 1:

670 SHEPARD LANE, #101

Number and Street 2:

City:

FARMINGTON

State:

Utah

Country:

United States

ZIP+4/Postal Code:

84025

If this address is a private residence, check this box: ☐

Telephone Number:

(801) 447-9487

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)

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☒ (3) Insurance broker or agent

☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

☐ (5) Registered municipal advisor

☐ (6) Accountant or accounting firm

☐ (7) Lawyer or law firm

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Number and Street 1:

225 FRIEND STREET, SUITE 600

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
BOSTON	Maine	United States	02114

If this address is a private residence, check this box: ☐

Telephone Number:	Facsimile Number, if any:
(203) 661-3441	

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?  
1

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- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
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Number and Street 1:	Number and Street 2:		
12701 WHITEWATER DRIVE, SUITE 200			
City:	State:	Country:	ZIP+4/Postal Code:
MINNETONKA	Minnesota	United States	55343

If this address is a private residence, check this box: ☐

Telephone Number:	Facsimile Number, if any:
7634047105	

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

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- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
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Number and Street 1:

1666 S WOLFE ROAD

Number and Street 2:

City:

SUNNYVALE

State:

California

Country:

United States

ZIP+4/Postal Code:

94087

If this address is a private residence, check this box: ☐

Telephone Number:

(408) 685-2278

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD Branch Number* here:

How many *employees* perform investment advisory functions from this office location?

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- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
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Number and Street 1:

7901 STRICKLAND ROAD, SUITE 102

Number and Street 2:

City:

RALEIGH

State:

North Carolina

Country:

United States

ZIP+4/Postal Code:

27615

If this address is a private residence, check this box: ☐

Telephone Number:

(919) 271-6106

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)

☐ (2) Bank (including a separately identifiable department or division of a bank)

☒ (3) Insurance broker or agent

☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

☐ (5) Registered municipal advisor

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☐ (7) Lawyer or law firm

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Number and Street 1:

20 GOULD AVENUE

Number and Street 2:

City:

COUNCIL BLUFFS

State:

Iowa

Country:

United States

ZIP+4/Postal Code:

51503

If this address is a private residence, check this box: ☒

Telephone Number:

(402) 590-2020

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

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☒ (3) Insurance broker or agent

☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

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Number and Street 1:

1410 S SALISBURY BLVD

Number and Street 2:

City:

SALISBURY

State:

Maryland

Country:

United States

ZIP+4/Postal Code:

21801

If this address is a private residence, check this box: ☐

Telephone Number:

(410) 546-3999

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

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Are other business activities conducted at this office location? (check all that apply)

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- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
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Number and Street 1:  
515 W CENTER AVENUE

Number and Street 2:

City:  
VISALIA

State:  
California

Country:  
United States

ZIP+4/Postal Code:  
93291

If this address is a private residence, check this box: ☐

Telephone Number:  
(559) 733-3525

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD Branch Number* here:

How many *employees* perform investment advisory functions from this office location?  
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- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
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- ☐ (7) Lawyer or law firm

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Number and Street 1:

2920 SANTIA DRIVE

Number and Street 2:

City:

TROY

State:

Michigan

Country:

United States

ZIP+4/Postal Code:

48085

If this address is a private residence, check this box: ☒

Telephone Number:

(248) 953-3965

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD Branch Number* here:

How many *employees* perform investment advisory functions from this office location?

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Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)☐ (2) Bank (including a separately identifiable department or division of a bank)☒ (3) Insurance broker or agent☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)☐ (5) Registered municipal advisor☐ (6) Accountant or accounting firm☐ (7) Lawyer or law firm

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Number and Street 1:

2935 MARBLE CREST DRIVE

Number and Street 2:

City:

LAND O LAKES

State:

Florida

Country:

United States

ZIP+4/Postal Code:

34638

If this address is a private residence, check this box: ☒

Telephone Number:  
(303) 589-4602

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

306 ACADEMY AVENUE, SUITE 106

Number and Street 2:

City:

DUBLIN

State:

Georgia

Country:

United States

ZIP+4/Postal Code:

31021

If this address is a private residence, check this box: ☐

Telephone Number:

(478) 279-0196

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)

- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

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Number and Street 1:

11850 NICHOLAS STREET, SUITE 240

Number and Street 2:

City:

OMAHA

State:

Nebraska

Country:

United States

ZIP+4/Postal Code:

68154

If this address is a private residence, check this box: ☐

Telephone Number:

(402) 397-5440

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD Branch Number* here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

2280 45TH STREET S, SUITE C

Number and Street 2:

City:

FARGO

State:

North Dakota

Country:

United States

ZIP+4/Postal Code:

58104

If this address is a private residence, check this box: ☐

Telephone Number:

(608) 848-0403

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)

☐ (2) Bank (including a separately identifiable department or division of a bank)

☒ (3) Insurance broker or agent

☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

☐ (5) Registered municipal advisor

☐ (6) Accountant or accounting firm

☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

3597 E MONARCH SKY LANE, #240

Number and Street 2:

City:

MERIDIAN

State:

Idaho

Country:

United States

ZIP+4/Postal Code:

83646

If this address is a private residence, check this box: ☐

Telephone Number:  
(949) 455-0119

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

219 1ST AVENUE SW

Number and Street 2:

City:

HICKORY

State:

North Carolina

Country:

United States

ZIP+4/Postal Code:

28603

If this address is a private residence, check this box: ☐

Telephone Number:

(828) 455-9773

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)



- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Number and Street 1:

431 E HORATIO AVENUE, SUITE 210

Number and Street 2:

City:

MAITLAND

State:

Florida

Country:

United States

ZIP+4/Postal Code:

32751

If this address is a private residence, check this box: ☐

Telephone Number:

(407) 898-5521

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD Branch Number* here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location.

If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:  
1475 E CENTER STREET

Number and Street 2:

City:  
KINGSPORT

State:  
Tennessee

Country:  
United States

ZIP+4/Postal Code:  
37664

If this address is a private residence, check this box: ☐

Telephone Number:  
(423) 247-1123

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Number and Street 1:  
1990 MAIN STREET, SUITE 750

Number and Street 2:

City:  
SARASOTA

State:  
Florida

Country:  
United States

ZIP+4/Postal Code:  
34236

If this address is a private residence, check this box: ☐

Telephone Number:  
9413095239

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

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- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
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Number and Street 1:

429 LENOX AVENUE, OFFICE #401

Number and Street 2:

City:

MIAMI

State:

Florida

Country:

United States

ZIP+4/Postal Code:

33139

If this address is a private residence, check this box: ☐

Telephone Number:

8475258967

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

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- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Number and Street 1:

10551 NE GERTIE JOHNSON ROAD

Number and Street 2:

City:

BAINBRIDGE ISLAND

State:

Washington

Country:

United States

ZIP+4/Postal Code:

98110

If this address is a private residence, check this box: ☒

Telephone Number:

(559) 733-3525

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

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Are other business activities conducted at this office location? (check all that apply)

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Number and Street 1:

400 HWY 169 S, SUITE 200

Number and Street 2:

City:

ST LOUIS PARK

State:

Minnesota

Country:

United States

ZIP+4/Postal Code:

55426

If this address is a private residence, check this box: ☒

Telephone Number:

(916) 679-0281

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)☐ (2) Bank (including a separately identifiable department or division of a bank)☒ (3) Insurance broker or agent☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)☐ (5) Registered municipal advisor☐ (6) Accountant or accounting firm☐ (7) Lawyer or law firmDescribe any other *investment-related* business activities conducted from this office location:

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Number and Street 1:

580 EL CAMINO REAL, UNIT 3703

Number and Street 2:

City:

NAPLES

State:

Florida

Country:

United States

ZIP+4/Postal Code:

34119

If this address is a private residence, check this box: ☐

Telephone Number:

(412) 452-4105

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

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- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Number and Street 1:

5109 WATSON RD

Number and Street 2:

City:

ERIE

State:

Pennsylvania

Country:

United States

ZIP+4/Postal Code:

16505

If this address is a private residence, check this box: ☒

Telephone Number:

814-764-1049

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Number and Street 1:

5105 W GENESEE ST

Number and Street 2:

City:

CAMILLUS

State:

New York

Country:

United States

ZIP+4/Postal Code:

13031

If this address is a private residence, check this box: ☐

Telephone Number:

315-488-09014

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD Branch Number* here:

649021

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)

☐ (2) Bank (including a separately identifiable department or division of a bank)

☒ (3) Insurance broker or agent

☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

☐ (5) Registered municipal advisor

☐ (6) Accountant or accounting firm

☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

1805 S BELLAIRE ST, SUITE 320

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
DENVER	Colorado	United States	80222

If this address is a private residence, check this box: ☐

Telephone Number:	Facsimile Number, if any:
3039798384	3039791074

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:  
276630

How many *employees* perform investment advisory functions from this office location?  
2

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:	Number and Street 2:		
9311 SE 36TH ST	SUITE 105		
City:	State:	Country:	ZIP+4/Postal Code:
MERCER ISLAND	Washington	United States	98040

If this address is a private residence, check this box: ☐

Telephone Number:	Facsimile Number, if any:
(206) 235-0201	(206) 232-0715

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:  
279870



How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

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Number and Street 1:

6900 WISCONSIN AVENUE, 5TH FLOOR

Number and Street 2:

City:

CHEVY CHASE

State:

Maryland

Country:

United States

ZIP+4/Postal Code:

20815

If this address is a private residence, check this box: ☐

Telephone Number:

(301) 652-2500

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

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- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Number and Street 1:

21515 HAWTHORNE BL #1059

Number and Street 2:

City:

TORRANCE

State:

California

Country:

United States

ZIP+4/Postal Code:

90503

If this address is a private residence, check this box: ☐

Telephone Number:

(310) 698-0698

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD Branch Number* here:

534179

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)

☐ (2) Bank (including a separately identifiable department or division of a bank)

☒ (3) Insurance broker or agent

☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

☐ (5) Registered municipal advisor

☐ (6) Accountant or accounting firm

☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

45 RESEARCH DRIVE

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
ANN ARBOR	Michigan	United States	48103

If this address is a private residence, check this box: ☐

Telephone Number:	Facsimile Number, if any:
(734) 786-6140	

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?  
1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Number and Street 1:	Number and Street 2:		
2200 CENTURY PKWY, SUITE 735			
City:	State:	Country:	ZIP+4/Postal Code:
ATLANTA	Georgia	United States	30345

If this address is a private residence, check this box: ☐

Telephone Number:	Facsimile Number, if any:
(404) 547-0223	

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Number and Street 1:

7268 CHANDAN BLVD

Number and Street 2:

City:

MACHESNEY PARK

State:

Illinois

Country:

United States

ZIP+4/Postal Code:

61115

If this address is a private residence, check this box: ☐

Telephone Number:

(815) 900-7817

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD Branch Number* here:

How many *employees* perform investment advisory functions from this office location?

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- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Number and Street 1:

800 WATERFRONT DRIVE, 3RD FLOOR

Number and Street 2:

City:

PITTSBURGH

State:

Pennsylvania

Country:

United States

ZIP+4/Postal Code:

15222

If this address is a private residence, check this box: ☐

Telephone Number:

(412) 465-1493

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

279860

How many *employees* perform investment advisory functions from this office location?

13

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)

☐ (2) Bank (including a separately identifiable department or division of a bank)

☒ (3) Insurance broker or agent

☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

☐ (5) Registered municipal advisor

☐ (6) Accountant or accounting firm

☐ (7) Lawyer or law firm

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Number and Street 1:

8762 LONGS PEAK CIRCLE

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
WINDSOR	Colorado	United States	80550

If this address is a private residence, check this box: ☐

Telephone Number:	Facsimile Number, if any:
(970) 795-2137	

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?  
1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Number and Street 1:	Number and Street 2:		
9915 MIRA MESA BLVD, SUITE 110			
City:	State:	Country:	ZIP+4/Postal Code:
SAN DIEGO	California	United States	92131

If this address is a private residence, check this box: ☐

Telephone Number:	Facsimile Number, if any:
(858) 546-8686	

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Number and Street 1:

120 N 2ND AVE #108

Number and Street 2:

City:

KETCHUM

State:

Idaho

Country:

United States

ZIP+4/Postal Code:

83340

If this address is a private residence, check this box: ☒

Telephone Number:

(949) 737-2626

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD Branch Number* here:

How many *employees* perform investment advisory functions from this office location?

2

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

6600 CITY WEST PARKWAY SUITE 308

Number and Street 2:

City:

EDEN PRAIRIE

State:

Minnesota

Country:

United States

ZIP+4/Postal Code:

55344

If this address is a private residence, check this box: ☒

Telephone Number:

952-657-5056

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

☐ (1) Broker-dealer (registered or unregistered)

☐ (2) Bank (including a separately identifiable department or division of a bank)

☒ (3) Insurance broker or agent

☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

☐ (5) Registered municipal advisor

☐ (6) Accountant or accounting firm

☐ (7) Lawyer or law firm

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Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

85 W. ALGONQUIN ROAD, SUITE 395

Number and Street 2:

City:

ARLINGTON HEIGHTS

State:

Illinois

Country:

United States

ZIP+4/Postal Code:

60005



If this address is a private residence, check this box: ☐

Telephone Number:

847-392-4100

Facsimile Number, if any:

847-637-1278

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

534192

How many *employees* perform investment advisory functions from this office location?

3

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)

☐ (2) Bank (including a separately identifiable department or division of a bank)

☒ (3) Insurance broker or agent

☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

☐ (5) Registered municipal advisor

☐ (6) Accountant or accounting firm

☐ (7) Lawyer or law firm

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Number and Street 1:

34 CHADBOURNE STREET

Number and Street 2:

City:

BLUFFTON

State:

South Carolina

Country:

United States

ZIP+4/Postal Code:

29910

If this address is a private residence, check this box: ☒

Telephone Number:

(310) 422-0801

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

700 CANAL STREET

Number and Street 2:

City:

STAMFORD

State:

Connecticut

Country:

United States

ZIP+4/Postal Code:

06902

If this address is a private residence, check this box: ☐

Telephone Number:

(203) 661-3441

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Number and Street 1:

18801 VENTURA BLVD, SUITE 207

Number and Street 2:

City:

SHERMAN OAKS

State:

California

Country:

United States

ZIP+4/Postal Code:

91403

If this address is a private residence, check this box: ☐

Telephone Number:

(818) 614-3931

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD Branch Number* here:

534180

How many *employees* perform investment advisory functions from this office location?

3

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)☐ (2) Bank (including a separately identifiable department or division of a bank)☒ (3) Insurance broker or agent☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)☐ (5) Registered municipal advisor☐ (6) Accountant or accounting firm☐ (7) Lawyer or law firm

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Number and Street 1:

17610 E NICHOLS PLACE

Number and Street 2:

City:

CENTENNIAL

State:

Colorado

Country:

United States

ZIP+4/Postal Code:

80016

If this address is a private residence, check this box: ☒

Telephone Number:

303-766-9599

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

279898

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)

☐ (2) Bank (including a separately identifiable department or division of a bank)

☒ (3) Insurance broker or agent

☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

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☐ (6) Accountant or accounting firm

☐ (7) Lawyer or law firm

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Number and Street 1:

1479 FALKIRK LANE NW

Number and Street 2:

City:

KENNESAW

State:

Georgia

Country:

United States

ZIP+4/Postal Code:

30152

If this address is a private residence, check this box: ☐

Telephone Number:

(770) 217-7542

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

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- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Number and Street 1:

7900 HIGH SCHOOL ROAD

Number and Street 2:

City:

ELKINS PARK

State:

Pennsylvania

Country:

United States

ZIP+4/Postal Code:

19027

If this address is a private residence, check this box: ☐

Telephone Number:

(609) 870-2069

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

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- ☐ (6) Accountant or accounting firm
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Number and Street 1:

5806 119TH AVENUE SE, SUITE A

Number and Street 2:

City:

BELLEVUE

State:

Washington

Country:

United States

ZIP+4/Postal Code:

98006

If this address is a private residence, check this box: ☐

Telephone Number:

(253) 653-5331

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD Branch Number* here:

How many *employees* perform investment advisory functions from this office location?

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Number and Street 1:

3655 EVONVALE GLEN

Number and Street 2:

City:

CUMMING

State:

Georgia

Country:

United States

ZIP+4/Postal Code:

30041

If this address is a private residence, check this box: ☒

Telephone Number:

(770) 715-9349

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
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Number and Street 1:

9208 FALLS OF NEUSE ROAD, SUITE 115

Number and Street 2:

City:

RALEIGH

State:

North Carolina

Country:

United States

ZIP+4/Postal Code:

27615

If this address is a private residence, check this box: ☐

Telephone Number:

(919) 633-3210

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)

- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
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- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

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Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

109 DONELSON PIKE

Number and Street 2:

City:

NASHVILLE

State:

Tennessee

Country:

United States

ZIP+4/Postal Code:

37214

If this address is a private residence, check this box: ☐

Telephone Number:

(615) 871-4767

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:



Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

7840 JUG STREET

Number and Street 2:

City:

ALEXANDRIA

State:

Ohio

Country:

United States

ZIP+4/Postal Code:

43001

If this address is a private residence, check this box: ☒

Telephone Number:

(614) 352-8625

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)☐ (2) Bank (including a separately identifiable department or division of a bank)☒ (3) Insurance broker or agent☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)☐ (5) Registered municipal advisor☐ (6) Accountant or accounting firm☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

636 E 6 1/2 STREET

Number and Street 2:

City:

HOUSTON

State:

Texas

Country:

United States

ZIP+4/Postal Code:

77007

If this address is a private residence, check this box: ☒

Telephone Number:  
(713) 294-1045

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

175 DERBY STREET, SUITE 33

Number and Street 2:

City:

HINGHAM

State:

Massachusetts

Country:

United States

ZIP+4/Postal Code:

02043

If this address is a private residence, check this box: ☐

Telephone Number:

(512) 297-7815

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)

- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

5901 W CENTURY BLVD, #750

Number and Street 2:

City:

LOS ANGELES

State:

California

Country:

United States

ZIP+4/Postal Code:

90045

If this address is a private residence, check this box: ☐

Telephone Number:

(626) 676-4232

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☐ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location.

If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

5251 W 116TH PLACE, SUITE 200

Number and Street 2:

City:

LEAWOOD

State:

Kansas

Country:

United States

ZIP+4/Postal Code:

66211

If this address is a private residence, check this box: ☒

Telephone Number:

(913) 593-1917

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

☒ (1) Broker-dealer (registered or unregistered)

☐ (2) Bank (including a separately identifiable department or division of a bank)

☒ (3) Insurance broker or agent

☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

☐ (5) Registered municipal advisor

☐ (6) Accountant or accounting firm

☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Section 1.F. for each location. If you are applying for SEC registration, if you are registered only with the SEC, or if you are an *exempt reporting adviser*, list only the largest twenty-five offices (in terms of numbers of *employees*).

Number and Street 1:

13 COLLINS STREET

Number and Street 2:

City:

DEWEY BEACH

State:

Delaware

Country:

United States

ZIP+4/Postal Code:

19971

If this address is a private residence, check this box: ☐

Telephone Number:

(651) 283-6966

Facsimile Number, if any:

If this office location is also required to be registered with FINRA or a *state securities authority* as a branch office location for a broker-dealer or investment adviser on the Uniform Branch Office Registration Form (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?

1

Are other business activities conducted at this office location? (check all that apply)

- ☒ (1) Broker-dealer (registered or unregistered)
- ☐ (2) Bank (including a separately identifiable department or division of a bank)
- ☒ (3) Insurance broker or agent
- ☐ (4) Commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (5) Registered municipal advisor
- ☐ (6) Accountant or accounting firm
- ☐ (7) Lawyer or law firm

Describe any other *investment-related* business activities conducted from this office location:

### SECTION 1.I. Website Addresses

List your website addresses, including addresses for accounts on publicly available social media platforms where you control the content (including, but not limited to, Twitter, Facebook and/or LinkedIn). You must complete a separate Schedule D Section 1.I. for each website or account on a publicly available social media platform.

Address of Website/Account on Publicly Available Social Media Platform: HTTP://WWW.TLGADVISORS.NET

Address of Website/Account on Publicly Available Social Media Platform: HTTP://WWW.STARLIGHTPORTFOLIOS.COM

### SECTION 1.L. Location of Books and Records

Complete the following information for each location at which you keep your books and records, other than your *principal office and place of business*. You must complete a separate Schedule D, Section 1.L. for each location.

Name of entity where books and records are kept:

THE BROKERS NETWORK LLC

Number and Street 1:

431 E HORATIO AVENUE, SUITE 210

Number and Street 2:

City:

MAITLAND

State:

Florida

Country:

United States

ZIP+4/Postal Code:

32751

If this address is a private residence, check this box: ☐

Telephone Number:  
(407) 898-5521

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

94 WOODCHUCK HOLLOW ROAD

Number and Street 2:

City:

COLD SPRING HARBOR

State:

New York

Country:

United States

ZIP+4/Postal Code:

11724

If this address is a private residence, check this box: ☒

Telephone Number:

(516) 677-6278

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

2200 CENTURY PKWY, SUITE 735

Number and Street 2:

City:

ATLANTA

State:

Georgia

Country:

United States

ZIP+4/Postal Code:

30345

If this address is a private residence, check this box: ☐

Telephone Number:

4045470223

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS.

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

9915 MIRA MESA BLVD, SUITE 110

Number and Street 2:

City:

SAN DIEGO

State:

California

Country:

United States

ZIP+4/Postal Code:

92131

If this address is a private residence, check this box: ☐

Telephone Number:

(858) 546-8686

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

6900 WISCONSIN AVENUE, 5TH FLOOR

Number and Street 2:

City:

CHEVY CHASE

State:

Maryland

Country:

United States

ZIP+4/Postal Code:

20815

If this address is a private residence, check this box: ☐

Telephone Number:

3016522500

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS

Number and Street 1:

1479 FALKIRK LANE NW

Number and Street 2:

City:

KENNESAW

State:

Georgia

Country:

United States

ZIP+4/Postal Code:

30152

If this address is a private residence, check this box: ☐

Telephone Number:

770-217-7542

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

1666 S WOLFE ROAD

Number and Street 2:

City:

SUNNYVALE

State:

California

Country:

United States

ZIP+4/Postal Code:

94087

If this address is a private residence, check this box: ☐

Telephone Number:

4086852278

Facsimile number, if any:



This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

11225 COLLEGE BLVD, SUITE 105

Number and Street 2:

City:

OVERLAND PARK

State:

Kansas

Country:

United States

ZIP+4/Postal Code:

66210

If this address is a private residence, check this box: ☐

Telephone Number:

9139515448

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

SCHMIDT FINANCIAL

Number and Street 1:

450 SKOKIE BLVD, SUITE 507

Number and Street 2:

City:

NORTHBROOK

State:

Illinois

Country:

United States

ZIP+4/Postal Code:

60062

If this address is a private residence, check this box: ☐

Telephone Number:

450 SKOKIE BLV

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS

Number and Street 1:

17610 E. NICHOLS PLACE

Number and Street 2:

City:

CENTENNIAL

State:

Colorado

Country:

United States

ZIP+4/Postal Code:

80016

If this address is a private residence, check this box: ☐

Telephone Number:

303-766-9599

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

425 RIESLING STREET

Number and Street 2:

City:

CLOVERDALE

State:

California

Country:

United States

ZIP+4/Postal Code:

95425

If this address is a private residence, check this box: ☐

Telephone Number:

7074732733

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

700 CANAL STREET

Number and Street 2:

City:

STAMFORD

State:

Connecticut

Country:

United States

ZIP+4/Postal Code:

06902

If this address is a private residence, check this box: ☐

Telephone Number:

(203) 661-3441

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

81 TIMBER CREEK ROAD

Number and Street 2:

City:

ROZET

State:

Wyoming

Country:

United States

ZIP+4/Postal Code:

82727

If this address is a private residence, check this box: ☐

Telephone Number:

3076890701

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

THE YATES AGENCY

Number and Street 1:

1475 E CENTER STREET

Number and Street 2:

City:

KINGSPORT

State:

Tennessee

Country:

United States

ZIP+4/Postal Code:

37664

If this address is a private residence, check this box: ☐

Telephone Number:

(423) 247-1123

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

10551 NE GERTIE JOHNSON ROAD

Number and Street 2:

City:

BAINBRIDGE ISLAND

State:

Washington

Country:

United States

ZIP+4/Postal Code:

98110

If this address is a private residence, check this box: ☒

Telephone Number:

(559) 733-3525

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

400 HWY 169 S, SUITE 200

Number and Street 2:

City:

ST LOUIS PARK

State:

Minnesota

Country:

United States

ZIP+4/Postal Code:

55426

If this address is a private residence, check this box: ☒

Telephone Number:

(916) 679-0281

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

8762 LONGS PEAK CIRCLE

Number and Street 2:

City:

WINDSOR

State:

Colorado

Country:

United States

ZIP+4/Postal Code:

80550

If this address is a private residence, check this box: ☐

Telephone Number:

(970) 795-2137

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

218 HILLSIDE DRIVE

Number and Street 2:

City:

WALESKA

State:

Georgia

Country:

United States

ZIP+4/Postal Code:

30183

If this address is a private residence, check this box: ☒

Telephone Number:

(678) 923-3828

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

395 GUNTER AVENUE

Number and Street 2:

City:

GUNTERSVILLE

State:

Alabama

Country:

United States

ZIP+4/Postal Code:

35976

If this address is a private residence, check this box: ☐

Telephone Number:

(678) 787-4728

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

7268 CHANDAN BLVD

Number and Street 2:

City:

MACHESNEY PARK

State:

Illinois

Country:

United States

ZIP+4/Postal Code:

61115

If this address is a private residence, check this box: ☒

Telephone Number:

8159007817

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

E4 INSURANCE SERVICES LLC

Number and Street 1:

2280 45TH STREET S, SUITE C

Number and Street 2:

City:

FARGO

State:

North Dakota

Country:

United States

ZIP+4/Postal Code:

58104

If this address is a private residence, check this box: ☐

Telephone Number:

(608) 848-0403

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

FINANCIAL PROFESSIONALS GROUP

Number and Street 1:

3597 E MONARCH SKY LANE, #240

Number and Street 2:

City:

MERIDIAN

State:

Idaho

Country:

United States

ZIP+4/Postal Code:

83646

If this address is a private residence, check this box: ☐

Telephone Number:

(949) 455-0119

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

FLETCHER INSURANCE GROUP DBA FLETCHER INS GROUP & FIN SERVICES

Number and Street 1:

7901 STRICKLAND ROAD, SUITE 102

Number and Street 2:

City:

RALEIGH

State:

North Carolina

Country:

United States

ZIP+4/Postal Code:

27615

If this address is a private residence, check this box: ☐

Telephone Number:

(919) 271-6106

Facsimile number, if any:



This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

220 2ND AVENUE S

Number and Street 2:

City:

FRANKLIN

State:

Tennessee

Country:

United States

ZIP+4/Postal Code:

37064

If this address is a private residence, check this box: ☐

Telephone Number:

(615) 628-3290

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

45 RESEARCH DRIVE

Number and Street 2:

City:

ANN ARBOR

State:

Michigan

Country:

United States

ZIP+4/Postal Code:

48103

If this address is a private residence, check this box: ☐

Telephone Number:

(734) 786-6140

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

2413 W ALGONQUIN ROAD, SUITE 506

Number and Street 2:

City:

ALGONQUIN

State:

Illinois

Country:

United States

ZIP+4/Postal Code:

60102

If this address is a private residence, check this box: ☐

Telephone Number:

(847) 459-8800

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

GIDEON STRATEGIC PARTNERS LLC

Number and Street 1:

1411 5TH STREET, SUITE 306

Number and Street 2:

City:

SANTA MONICA

State:

California

Country:

United States

ZIP+4/Postal Code:

90401

If this address is a private residence, check this box: ☐

Telephone Number:

(310) 579-9560

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

INTEGRITY FINANCIAL

Number and Street 1:

20 GOULD AVENUE

Number and Street 2:

City:

COUNCIL BLUFFS

State:

Iowa

Country:

United States

ZIP+4/Postal Code:

51503

If this address is a private residence, check this box: ☒

Telephone Number:

(402) 590-2020

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

2935 MARBLE CREST DRIVE

Number and Street 2:

City:

LAND O LAKES

State:

Florida

Country:

United States

ZIP+4/Postal Code:

34638

If this address is a private residence, check this box: ☒

Telephone Number:

(303) 589-4602

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

262 HALF HOLLOW ROAD

Number and Street 2:

City:

DIX HILLS

State:

New York

Country:

United States

ZIP+4/Postal Code:

11746

If this address is a private residence, check this box: ☒

Telephone Number:

(516) 695-4662

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

TLG ADVISORS

Number and Street 1:

9311 SE 36 STREET

Number and Street 2:

SUITE 105

City:

MERCER ISLAND

State:

Washington

Country:

United States

ZIP+4/Postal Code:

98040

If this address is a private residence, check this box: ☐

Telephone Number:

206-236-0201

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS

Number and Street 1:

350 HIGHWAY 7

Number and Street 2:

#241

City:

EXCELSIOR

State:

Minnesota

Country:

United States

ZIP+4/Postal Code:

55331

If this address is a private residence, check this box: ☐

Telephone Number:

763-231-7316

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

1210 JACKSBORO PIKE

Number and Street 2:

City:

LAFOLLETTE

State:

Texas

Country:

United States

ZIP+4/Postal Code:

37766

If this address is a private residence, check this box: ☐

Telephone Number:

(423) 562-3346

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

TLG ADVISORS

Number and Street 1:

6600 CITY WEST PARKWAY

Number and Street 2:

SUITE 308

City:

EDEN PRAIRE

State:

Minnesota

Country:

United States

ZIP+4/Postal Code:

55344

If this address is a private residence, check this box: ☐

Telephone Number:

952-657-5056

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

306 ACADEMY AVENUE, SUITE 106

Number and Street 2:

City:

DUBLIN

State:

Georgia

Country:

United States

ZIP+4/Postal Code:

31021

If this address is a private residence, check this box: ☐

Telephone Number:

(478) 279-0196

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

225 FRIEND STREET, SUITE 600

Number and Street 2:

City:

BOSTON

State:

Maine

Country:

United States

ZIP+4/Postal Code:

02114

If this address is a private residence, check this box: ☐

Telephone Number:

2036613441

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

120 N 2ND AVE #108

Number and Street 2:

City:

KETCHUM

State:

Idaho

Country:

United States

ZIP+4/Postal Code:

83340

If this address is a private residence, check this box: ☐

Telephone Number:

9497372626

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

26 N 2ND STREET

Number and Street 2:

City:

PICKENS

State:

Mississippi

Country:

United States

ZIP+4/Postal Code:

39146

If this address is a private residence, check this box: ☒

Telephone Number:

6624683832

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

WILLIAM STAPLES INS & FINANCIAL SVCS INC

Number and Street 1:

1410 S SALISBURY BLVD

Number and Street 2:

City:

SALISBURY

State:

Maryland

Country:

United States

ZIP+4/Postal Code:

21801

If this address is a private residence, check this box: ☐

Telephone Number:

(410) 546-3999

Facsimile number, if any:



This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

TLG ADVISORS

Number and Street 1:

85 W. ALGONQUIN ROAD, SUITE 395

Number and Street 2:

City:

ARLINGTON HEIGHTS

State:

Illinois

Country:

United States

ZIP+4/Postal Code:

60005

If this address is a private residence, check this box: ☐

Telephone Number:

847-392-4100

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

CLARITY FINANCIAL

Number and Street 1:

2935 PINE LAKE ROAD, SUITE I

Number and Street 2:

City:

LINCOLN

State:

Nebraska

Country:

United States

ZIP+4/Postal Code:

68516

If this address is a private residence, check this box: ☐

Telephone Number:

(402) 430-0841

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

CRESTWOOD AGENCY LLC

Number and Street 1:

515 W CENTER AVENUE

Number and Street 2:

City:

VISALIA

State:

California

Country:

United States

ZIP+4/Postal Code:

93291

If this address is a private residence, check this box: ☐

Telephone Number:

(559) 733-3525

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS

Number and Street 1:

8500 KEYSTONE CROSSING

Number and Street 2:

SUITE 300

City:

INDIANAPOLIS

State:

Indiana

Country:

United States

ZIP+4/Postal Code:

46240

If this address is a private residence, check this box: ☐

Telephone Number:

317-775-6110

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

156 S SAGE HOLLOW

Number and Street 2:

City:

DRIPPING SPRINGS

State:

Texas

Country:

United States

ZIP+4/Postal Code:

78620

If this address is a private residence, check this box: ☒

Telephone Number:

(512) 538-6271

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

2920 SANTIA DRIVE

Number and Street 2:

City:

TROY

State:

Michigan

Country:

United States

ZIP+4/Postal Code:

48085

If this address is a private residence, check this box: ☒

Telephone Number:

(248) 953-3965

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

11850 NICHOLAS STREET, SUITE 240

Number and Street 2:

City:

OMAHA

State:

Nebraska

Country:

United States

ZIP+4/Postal Code:

68154

If this address is a private residence, check this box: ☐

Telephone Number:

(402) 397-5440

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

3330 GOAT FELL

Number and Street 2:

City:

ANN ARBOR

State:

Michigan

Country:

United States

ZIP+4/Postal Code:

48108

If this address is a private residence, check this box: ☒

Telephone Number:

(734) 277-6676

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

ELEMENT INSURANCE PARTNERS

Number and Street 1:

9869 SOUTH 168 AVE STE C

Number and Street 2:

City:

OMAHA

State:

Nebraska

Country:

United States

ZIP+4/Postal Code:

68136

If this address is a private residence, check this box: ☐

Telephone Number:

(402) 697-5074

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

10108 KRAUSE ROAD, SUITE 201

Number and Street 2:

City:

CHESTERFIELD

State:

Virginia

Country:

United States

ZIP+4/Postal Code:

23832

If this address is a private residence, check this box: ☐

Telephone Number:

8047680541

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

4316 OLD CANTON ROAD, SUITE 100A

Number and Street 2:

City:

JACKSON

State:

Mississippi

Country:

United States

ZIP+4/Postal Code:

39211

If this address is a private residence, check this box: ☐

Telephone Number:

6019821117

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

WEALTH ADVANTAGE GROUP

Number and Street 1:

5005 HORIZONS DRIVE, SUITE 100

Number and Street 2:

City:

COLUMBUS

State:

Ohio

Country:

United States

ZIP+4/Postal Code:

43220

If this address is a private residence, check this box: ☐

Telephone Number:

(614) 459-9000

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

1805 S BELLAIRE ST, SUITE 320

Number and Street 2:

City:

DENVER

State:

Colorado

Country:

United States

ZIP+4/Postal Code:

80222

If this address is a private residence, check this box: ☐

Telephone Number:

(303) 979-8384

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

4525 S WASATCH BLVD, SUITE 210

Number and Street 2:

City:

SALT LAKE CITY

State:

Utah

Country:

United States

ZIP+4/Postal Code:

84124

If this address is a private residence, check this box: ☐

Telephone Number:

(801) 647-5030

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

670 SHEPARD LANE, #101

Number and Street 2:

City:

FARMINGTON

State:

Utah

Country:

United States

ZIP+4/Postal Code:

84025

If this address is a private residence, check this box: ☐

Telephone Number:

(801) 447-9487

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

1990 MAIN STREET, SUITE 750

Number and Street 2:

City:

SARASOTA

State:

Florida

Country:

United States

ZIP+4/Postal Code:

34236

If this address is a private residence, check this box: ☐

Telephone Number:

(941) 309-5243

Facsimile number, if any:



This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

2001 BOMAR STREET

Number and Street 2:

City:

MARSHALL

State:

Texas

Country:

United States

ZIP+4/Postal Code:

75670

If this address is a private residence, check this box: ☐

Telephone Number:

(484) 794-0574

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

429 LENOX AVENUE, OFFICE #401

Number and Street 2:

City:

MIAMI

State:

Florida

Country:

United States

ZIP+4/Postal Code:

33139

If this address is a private residence, check this box: ☐

Telephone Number:

8475258967

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

34 CHADBOURNE STREET

Number and Street 2:

City:

BLUFFTON

State:

South Carolina

Country:

United States

ZIP+4/Postal Code:

29910

If this address is a private residence, check this box: ☒

Telephone Number:

3104220801

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

3388 FOUNDERS ROAD, SUITE 100

Number and Street 2:

City:

INDIANAPOLIS

State:

Indiana

Country:

United States

ZIP+4/Postal Code:

46268

If this address is a private residence, check this box: ☐

Telephone Number:

3178056701

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS

Number and Street 1:

1464 WARWICK AVENUE

Number and Street 2:

City:

WARWICK

State:

Rhode Island

Country:

United States

ZIP+4/Postal Code:

02888

If this address is a private residence, check this box: ☐

Telephone Number:

401-780-9530

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

6330 N CENTER DRIVE, SUITE 140

Number and Street 2:

City:

NORFOLK

State:

Virginia

Country:

United States

ZIP+4/Postal Code:

23502

If this address is a private residence, check this box: ☐

Telephone Number:

(757) 366-0366

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

1520 CARLEMONT DRIVE, SUITE J

Number and Street 2:

City:

CRYSTAL LAKE

State:

Illinois

Country:

United States

ZIP+4/Postal Code:

60014

If this address is a private residence, check this box: ☐

Telephone Number:

(260) 312-4800

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

7910 RALSTON ROAD, SUITE 7

Number and Street 2:

City:

ARVADA

State:

Colorado

Country:

United States

ZIP+4/Postal Code:

80002

If this address is a private residence, check this box: ☐

Telephone Number:

(303) 589-4602

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

580 EL CAMINO REAL, UNIT 3703

Number and Street 2:

City:

NAPLES

State:

Florida

Country:

United States

ZIP+4/Postal Code:

34119

If this address is a private residence, check this box: ☒

Telephone Number:

4124524105

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

12701 WHITEWATER DRIVE, SUITE 200

Number and Street 2:

City:

MINNETONKA

State:

Minnesota

Country:

United States

ZIP+4/Postal Code:

55343

If this address is a private residence, check this box: ☐

Telephone Number:

7634047105

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

2850 GOLF ROAD

Number and Street 2:

City:

ROLLING MEADOWS

State:

Illinois

Country:

United States

ZIP+4/Postal Code:

60008

If this address is a private residence, check this box: ☐

Telephone Number:

3129827433

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

GLOBAL RELAY

Number and Street 1:

220 CAMBIE STREET, 2ND FLOOR

Number and Street 2:

City:

VANCOUVER

State:

Country:

Canada

ZIP+4/Postal Code:

If this address is a private residence, check this box: ☐

Telephone Number:

6044846630

Facsimile number, if any:

This is (check one):

- ☐ one of your branch offices or affiliates.  
☒ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

EMAIL

Name of entity where books and records are kept:

TLG ADVISORS

Number and Street 1:

2551 ROSWELL ROAD

Number and Street 2:

SUITE 209

City:

MARIETTA

State:

Georgia

Country:

United States

ZIP+4/Postal Code:

30062

If this address is a private residence, check this box: ☐

Telephone Number:

770-973-5220

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS

Number and Street 1:

3108 LITTLE ALDEN LAKE ROAD

Number and Street 2:

City:

DULUTH

State:

Minnesota

Country:

United States

ZIP+4/Postal Code:

55803

If this address is a private residence, check this box: ☐

Telephone Number:

612-991-8906

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS

Number and Street 1:

7791 BELFORT PARKWAY

Number and Street 2:

City:

JACKSONVILLE

State:

Florida

Country:

United States

ZIP+4/Postal Code:

32256

If this address is a private residence, check this box: ☐

Telephone Number:

904-296-4100

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS

Number and Street 1:

5105 W. GENESEE ST.

Number and Street 2:

City:

CAMILLUS

State:

New York

Country:

United States

ZIP+4/Postal Code:

13031

If this address is a private residence, check this box: ☐

Telephone Number:

315-488-0901

Facsimile number, if any:



This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

800 WATERFRONT DRIVE, 3RD FLOOR

Number and Street 2:

City:

PITTSBURGH

State:

Pennsylvania

Country:

United States

ZIP+4/Postal Code:

15222

If this address is a private residence, check this box: ☐

Telephone Number:

4124651493

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

PREMIER PLANNING GROUP NC LLC

Number and Street 1:

219 1ST AVENUE SW

Number and Street 2:

City:

HICKORY

State:

North Carolina

Country:

United States

ZIP+4/Postal Code:

28603

If this address is a private residence, check this box: ☐

Telephone Number:

(828) 455-9773

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

13702 COURSEY BLVD, BLDG 3B

Number and Street 2:

City:

BATON ROUGE

State:

Louisiana

Country:

United States

ZIP+4/Postal Code:

70817

If this address is a private residence, check this box: ☐

Telephone Number:

2253618424

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS

Number and Street 1:

18801 VENTURA BLVD, SUITE 207

Number and Street 2:

City:

SHERMAN OAKS

State:

California

Country:

United States

ZIP+4/Postal Code:

91403

If this address is a private residence, check this box: ☐

Telephone Number:

310-477-0694

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

8 MACON STREET

Number and Street 2:

City:

MCDONOUGH

State:

Georgia

Country:

United States

ZIP+4/Postal Code:

30253

If this address is a private residence, check this box: ☐

Telephone Number:

(770) 389-9060

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

518 W PALMETTO STREET

Number and Street 2:

City:

FLORENCE

State:

South Carolina

Country:

United States

ZIP+4/Postal Code:

29501

If this address is a private residence, check this box: ☐

Telephone Number:

(843) 229-0667

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

5820 STAGE ROAD

Number and Street 2:

City:

BARTLETT

State:

Tennessee

Country:

United States

ZIP+4/Postal Code:

38134

If this address is a private residence, check this box: ☐

Telephone Number:

(901) 385-1234

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

300 S WACKER DRIVE, SUITE 2000A

Number and Street 2:

City:

CHICAGO

State:

Illinois

Country:

United States

ZIP+4/Postal Code:

60606

If this address is a private residence, check this box: ☐

Telephone Number:

(708) 220-5011

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

23482 PERALTA DRIVE, SUITE B1

Number and Street 2:

City:

LAGUNA HILLS

State:

California

Country:

United States

ZIP+4/Postal Code:

92653

If this address is a private residence, check this box: ☐

Telephone Number:

(949) 296-1161

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

120 VANTIS, SUITE 300

Number and Street 2:

SUITE 1060

City:

ALISO VIEJO

State:

California

Country:

United States

ZIP+4/Postal Code:

92656

If this address is a private residence, check this box: ☐

Telephone Number:

9497372626

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

FINANCIAL ADVISORY ASSOCIATES

Number and Street 1:

24800 DENSO DR, STE 140

Number and Street 2:

City:

SOUTHFIELD

State:

Michigan

Country:

United States

ZIP+4/Postal Code:

48033

If this address is a private residence, check this box: ☐

Telephone Number:

(248) 350-3400

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

LEADERS FINANCIAL GROUP

Number and Street 1:

26218 OAKRIDGE DR

Number and Street 2:

City:

SPRING

State:

Texas

Country:

United States

ZIP+4/Postal Code:

77380

If this address is a private residence, check this box: ☐

Telephone Number:

(832) 381-2515

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS

Number and Street 1:

21515 HAWTHORNE BLVD.

Number and Street 2:

#1059

City:

TORRANCE

State:

California

Country:

United States

ZIP+4/Postal Code:

90503

If this address is a private residence, check this box: ☐

Telephone Number:

310-698-0698

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS

Number and Street 1:

5109 WATSON ROAD

Number and Street 2:

City:

ERIE

State:

Pennsylvania

Country:

United States

ZIP+4/Postal Code:

16505

If this address is a private residence, check this box: ☐

Telephone Number:

814-746-1049

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

INSLEY INVESTMENT GROUP LLC

Number and Street 1:

110 CHRISTIANA MEDICAL CENTER

Number and Street 2:

City:

NEWARK

State:

Delaware

Country:

United States

ZIP+4/Postal Code:

19702

If this address is a private residence, check this box: ☐

Telephone Number:

(302) 286-0777

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT FILES

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

7900 HIGH SCHOOL ROAD

Number and Street 2:

City:

ELKINS PARK

State:

Pennsylvania

Country:

United States

ZIP+4/Postal Code:

19027

If this address is a private residence, check this box: ☐

Telephone Number:

(609) 870-2069

Facsimile number, if any:



This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS, INC

Number and Street 1:

5806 119TH AVENUE SE, SUITE A

Number and Street 2:

City:

BELLEVUE

State:

Washington

Country:

United States

ZIP+4/Postal Code:

98006

If this address is a private residence, check this box: ☐

Telephone Number:

(253) 653-5331

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISOR, INC.

Number and Street 1:

3655 EVONVALE GLEN

Number and Street 2:

City:

CUMMING

State:

Georgia

Country:

United States

ZIP+4/Postal Code:

30041

If this address is a private residence, check this box: ☒

Telephone Number:

(770) 715-9349

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVIORS INC

Number and Street 1:

9208 FALLS OF NEUSE ROAD, SUITE 115

Number and Street 2:

City:

RALEIGH

State:

North Carolina

Country:

United States

ZIP+4/Postal Code:

27615

If this address is a private residence, check this box: ☐

Telephone Number:

(919) 633-3210

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS, INC

Number and Street 1:

109 DONELSON PIKE

Number and Street 2:

City:

NASHVILLE

State:

Tennessee

Country:

United States

ZIP+4/Postal Code:

37214

If this address is a private residence, check this box: ☐

Telephone Number:

(615) 871-4767

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

7840 JUG STREET

Number and Street 2:

City:

ALEXANDRIA

State:

Ohio

Country:

United States

ZIP+4/Postal Code:

43001

If this address is a private residence, check this box: ☒

Telephone Number:

(614) 352-8625

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

636 E 6 1/2 STREET

Number and Street 2:

City:

HOUSTON

State:

Texas

Country:

United States

ZIP+4/Postal Code:

77007

If this address is a private residence, check this box: ☒

Telephone Number:

(713) 294-1045

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

175 DERBY STREET, SUITE 33

Number and Street 2:

City:

HINGHAM

State:

Massachusetts

Country:

United States

ZIP+4/Postal Code:

02043

If this address is a private residence, check this box: ☐

Telephone Number:

(512) 297-7815

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

5901 W CENTURY BLVD, #750

Number and Street 2:

City:

LOS ANGELES

State:

California

Country:

United States

ZIP+4/Postal Code:

90045

If this address is a private residence, check this box: ☐

Telephone Number:

(626) 676-4232

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

WEALTH STRATEGIES GROUP

Number and Street 1:

5251 W 116TH PLACE, SUITE 200

Number and Street 2:

City:

LEAWOOD

State:

Kansas

Country:

United States

ZIP+4/Postal Code:

66211

If this address is a private residence, check this box: ☒

Telephone Number:

(913) 593-1917

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.  
☐ a third-party unaffiliated recordkeeper.  
☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

Name of entity where books and records are kept:

TLG ADVISORS INC

Number and Street 1:

13 COLLINS STREET

Number and Street 2:

City:

DEWEY BEACH

State:

Delaware

Country:

United States

ZIP+4/Postal Code:

19971

If this address is a private residence, check this box: ☐

Telephone Number:

(651) 283-6966

Facsimile number, if any:

This is (check one):

- ☒ one of your branch offices or affiliates.
- ☐ a third-party unaffiliated recordkeeper.
- ☐ other.

Briefly describe the books and records kept at this location.

CLIENT RECORDS

#### **SECTION 1.M. Registration with Foreign Financial Regulatory Authorities**

No Information Filed