FORM ADV

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION AND REPORT BY EXEMPT REPORTING ADVISE

Primary Business Name: TLG ADVISORS, INC.

Annual Amendment - All Sections

3/28/2026 3:51:27 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 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 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:		Number and Street 2:	
475 SPRINGFIELD AVE			
City:	State:	Country:	ZIP+4/Postal Code:
SUMMIT	New Jersey	United States	07901

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 applyin 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 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 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 r
120

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:

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 a 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 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 (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 Chie 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:	
475 SPRINGFIELD AVE.			
City:	State:	Country:	ZIP+4/Postal Code:
SUMMIT	New Jersey	United States	07901

Electronic mail (e-mail) address, if Chief Compliance Officer has one:
JANE.RILEY@SIMPLICITYGROUP.COM

(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 C 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, 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:	
475 SPRINGFIELD AVE.			
City:	State:	Country:	ZIP+4/Postal Code:
SUMMIT	New Jersey	United States	07901

Electronic mail (e-mail) address, if contact person has one:
SEAN.WICKERSHAM@SIMPLICITYGROUP.COM

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 *princip business*?

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

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. I Schedule D.

N. Are you a public reporting company under Sections 12 or 15(d) of the Securities Exchange Act of 1934?

O. Did you have $1 billion or more in assets on the last day of your most recent fiscal year?
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 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

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

Jurisdictions

☐ AL	☑ IL	☐ NE	☐ SC
☐ AK	☑ IN	☐ NV	☐ SD
☐ AZ	☐ IA	☐ NH	☑ TN
☐ AR	☐ KS	☐ NJ	☐ TX
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☑ GA	☐ MN	☑ OR	☐ WI
☐ GU	☐ MS	☑ PA	☑ WY
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☐ 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: CANTILEVER WEALTH MANAGEMENT LLC

Jurisdictions

☐ AL	☑ IL	☐ NE	☐ SC
☐ AK	☐ IN	☐ NV	☐ SD
☐ AZ	☐ IA	☐ NH	☐ TN
☐ AR	☐ KS	☐ NJ	☐ TX
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☐ GU	☐ MS	☑ PA	☐ WY
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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

☐ AL	☐ IL	☐ NE	☐ SC
☐ AK	☐ IN	☐ NV	☐ SD
☐ AZ	☐ IA	☐ NH	☐ TN
☐ AR	☐ KS	☐ NJ	☐ TX
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☐ GU	☐ MS	☐ PA	☐ WY
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☐ 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: GARLIKOV ADVISORS INC

Jurisdictions

☐ AL	☐ IL	☐ NE	☐ SC
☐ AK	☐ IN	☐ NV	☐ SD
☐ AZ	☐ IA	☐ NH	☐ TN
☐ AR	☐ KS	☐ NJ	☐ TX
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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

☐ AL	☐ IL	☐ NE	☐ SC
☐ AK	☐ IN	☐ NV	☐ SD
☐ AZ	☐ IA	☐ NH	☐ TN
☐ AR	☐ KS	☐ NJ	☐ TX
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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

☐ AL	☐ IL	☐ NE	☐ SC
☐ AK	☐ IN	☐ NV	☐ SD
☐ AZ	☐ IA	☐ NH	☐ TN
☐ AR	☐ KS	☐ NJ	☐ TX
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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

☐ AL	☐ IL	☐ NE	☐ SC
☐ AK	☐ IN	☐ NV	☐ SD
☐ AZ	☐ IA	☐ NH	☐ TN
☐ AR	☐ KS	☐ NJ	☐ TX
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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	☐ IL	☐ NE	☐ SC
☐ AK	☐ IN	☐ NV	☐ SD
☐ AZ	☐ IA	☐ NH	☐ TN
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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	☐ IL	☐ NE	☐ SC
☐ AK	☐ IN	☐ NV	☐ SD
☐ AZ	☐ IA	☐ NH	☐ TN
☐ AR	☐ KS	☐ NJ	☐ TX
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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	☐ IL	☐ NE	☐ SC
☐ AK	☐ IN	☐ NV	☐ SD
☐ AZ	☐ IA	☐ NH	☐ TN
☐ AR	☐ KS	☐ NJ	☐ TX
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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	☑ IL	☐ NE	☐ SC
☐ AK	☐ IN	☐ NV	☐ SD
☐ AZ	☐ IA	☐ NH	☐ TN
☐ AR	☐ KS	☐ NJ	☐ TX
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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	☐ IL	☑ NE	☐ SC
☐ AK	☐ IN	☐ NV	☐ SD
☐ AZ	☐ IA	☐ NH	☐ TN
☐ AR	☐ KS	☐ NJ	☐ TX
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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	☐ IL	☐ NE	☐ SC
☐ AK	☐ IN	☐ NV	☐ SD
☐ AZ	☐ IA	☐ NH	☐ TN
☐ AR	☐ KS	☐ NJ	☐ TX
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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	☐ IL	☐ NE	☐ SC
☐ AK	☐ IN	☐ NV	☐ SD
☐ AZ	☐ IA	☐ NH	☐ TN
☐ AR	☐ KS	☐ NJ	☐ TX
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☐ 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: WEALTH STRATEGIES GROUP

Jurisdictions

☐ AL	☐ IL	☐ NE	☐ SC
☐ AK	☐ IN	☐ NV	☐ SD
☐ AZ	☐ IA	☐ NH	☑ TN
☐ AR	☑ KS	☐ NJ	☐ TX
☐ CA	☐ KY	☐ NM	☐ UT
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☐ GA	☐ MN	☐ OR	☐ WI
☐ GU	☐ MS	☐ PA	☐ WY
☐ HI	☐ MO	☐ PR	☐ 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: GERRARD ADVISORS LLC

Jurisdictions

☐ AL	☐ IL	☐ NE	☐ SC
☐ AK	☐ IN	☐ NV	☐ SD
☐ AZ	☐ IA	☐ NH	☐ TN
☐ AR	☐ KS	☐ NJ	☐ TX
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☐ GU	☐ MS	☐ PA	☐ WY
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☐ 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: PASSERELLE ADVISORS

Jurisdictions

☐ AL	☐ IL	☐ NE	☐ SC
☐ AK	☐ IN	☐ NV	☐ SD
☐ AZ	☐ IA	☐ NH	☐ TN
☐ AR	☐ KS	☐ NJ	☐ TX
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☐ 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: GOAL LINE CAPITAL

Jurisdictions

☐ AL	☐ IL	☐ NE	☐ SC
☐ AK	☐ IN	☐ NV	☐ SD
☐ AZ	☐ IA	☐ NH	☐ TN
☐ AR	☐ KS	☑ NJ	☐ TX
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☐ GU	☐ MS	☐ PA	☐ WY
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☐ 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: K&M WEALTH ADVISORS, LLC

Jurisdictions

☐ AL	☐ IL	☐ NE	☐ SC
☐ AK	☐ IN	☐ NV	☐ SD
☐ AZ	☐ IA	☐ NH	☐ TN
☐ AR	☐ KS	☐ NJ	☐ TX
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☐ GU	☐ MS	☐ PA	☐ WY
☐ HI	☐ MO	☐ PR	☐ Other:
☐ ID	☐ MT	☐ RI	

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 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 *employees*).

Number and Street 1:
180 S LAKE AVENUE, SUITE 510

Number and Street 2:

City:
PASADENA

State:
California

Country:
United States

ZIP+4/Postal Code:
91101

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

Telephone Number:
(626) 440-5101

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 (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)
- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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 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 *employees*).

Number and Street 1:		Number and Street 2:	
185 N MAIN STREET, STE 105			
City:	State:	Country:	ZIP+4/Postal Code:
COLLIERSVILLE	Tennessee	United States	38017

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

Telephone Number:	Facsimile Number, if any:
(901) 591-8553	

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 (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)
- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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:	
10551 NE GERTIE JOHNSON ROAD			
City:	State:	Country:	ZIP+4/Postal Code:
BAINBRIDGE ISLAND	Washington	United States	98110

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

Telephone Number:	Facsimile Number, if any:
(559) 733-3525	

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 (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)
- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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:	
5315 WESTCHESTER			
City:	State:	Country:	ZIP+4/Postal Code:
HOUSTON	Texas	United States	77005

If this address is a private residence, check this box: [x]

Telephone Number:	Facsimile Number, if any:
(832) 563-4455	

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 (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)
- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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 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 *employees*).

Number and Street 1:		Number and Street 2:	
20A E ROSEVILLE ROAD, SUITE 4			
City:	State:	Country:	ZIP+4/Postal Code:
LANCASTER	Pennsylvania	United States	17601

If this address is a private residence, check this box: [ ]

Telephone Number:	Facsimile Number, if any:
(717) 435-8856	

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 (Form BR), please provide the *CRD* Branch Number here:
650009

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)

- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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
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
employees).

Number and Street 1:
40 KENOZA AVENUE

Number and Street 2:

City:
HAVERHILL

State:
Massachusetts

Country:
United States

ZIP+4/Postal Code:
01830

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

Telephone Number:
(781) 408-7925

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
(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)

- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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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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
employees).

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
(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)

- [x] (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:
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 (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
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☐ (5) Registered municipal advisor
☑ (6) Accountant or accounting firm
☐ (7) Lawyer or law firm

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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 (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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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
employees).

Number and Street 1:
218 HILLSIDE DRIVE

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
WALESKA	Georgia	United States	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
(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
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☐ (5) Registered municipal advisor
☐ (6) Accountant or accounting firm
☐ (7) Lawyer or law firm

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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
employees).

Number and Street 1:
2935 PINE LAKE ROAD, SUITE I

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
LINCOLN	Nebraska	United States	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
(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

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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 (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

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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 (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)
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Number and Street 1:
406 GEORGETOWN COURT

Number and Street 2:

City:
WEXFORD

State:
Pennsylvania

Country:
United States

ZIP+4/Postal Code:
15090

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 (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
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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 (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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employees).

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 (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 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 *employees*).

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 (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

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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 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 *employees*).

Number and Street 1:
2300 EMERALD COURT

Number and Street 2:

City: CASTLE ROCK
State: Colorado
Country: United States
ZIP+4/Postal Code: 80104

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

Telephone Number: 3039798384
Facsimile Number, if any: 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 (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

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Number and Street 1:
3150 NW 42ND, APT E101

Number and Street 2:

City: COCONUT CREEK
State: Florida
Country: United States
ZIP+4/Postal Code: 33066

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

Telephone Number: (954) 249-3032
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 (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
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☐ (5) Registered municipal advisor
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Number and Street 1:
3333 WILSHIRE BLVD, SUITE 800

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
LOS ANGELES	California	United States	90010

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

Telephone Number:	Facsimile Number, if any:
(424) 634-0009	

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 (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?
4

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 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 *employees*).

Number and Street 1:		Number and Street 2:	
256 NAUTILUS			
City:	**State:**	**Country:**	**ZIP+4/Postal Code:**
PORT ARANSAS	Texas	United States	78373

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

Telephone Number:	Facsimile Number, if any:
(512) 538-6271	

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 (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 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 *employees*).

Number and Street 1:		Number and Street 2:	
1520 CARLEMONT DRIVE, SUITE J			
City:	**State:**	**Country:**	**ZIP+4/Postal Code:**
CRYSTAL LAKE	Illinois	United States	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 (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)
- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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 D

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:
(307) 287-0980

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 (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
- [x] (7) Lawyer or law firm

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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 (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)
- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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 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 *employees*).

Number and Street 1:		Number and Street 2:	
1915 HIGHLAND OAKS DRIVE			
City:	**State:**	**Country:**	**ZIP+4/Postal Code:**
WYLIE	Texas	United States	75098

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

Telephone Number:	Facsimile Number, if any:
(214) 864-6555	

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 (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)
- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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:		Number and Street 2:	
275 SOMERSET COURT			
City:	**State:**	**Country:**	**ZIP+4/Postal Code:**
SANDY SPRINGS	Georgia	United States	30350

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

Telephone Number:	Facsimile Number, if any:
(404) 694-4532	

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

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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
employees).

Number and Street 1:
25 WINDEMERE AVENUE

Number and Street 2:

City:
MOUNT ARLINGTON

State:
New Jersey

Country:
United States

ZIP+4/Postal Code:
07856

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

Telephone Number:
(917) 825-6114

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
(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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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
employees).

Number and Street 1:
111 TOWN SQUARE PLACE

Number and Street 2:

City:
JERSEY CITY

State:
New Jersey

Country:
United States

ZIP+4/Postal Code:
07310

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

Telephone Number:
(858) 204-2438

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
(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
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
employees).

Number and Street 1:
3823 OBRIANT PLACE

Number and Street 2:

City:
GREENSBORO

State:
North Carolina

Country:
United States

ZIP+4/Postal Code:
27410

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

Telephone Number:
(336) 455-1044

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
(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
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
employees).

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
(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:

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 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 *employees*).

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 (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

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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 (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:
103 GRANTON EDGE LANE

Number and Street 2:

City: SUMMERVILLE

State: South Carolina

Country: United States

ZIP+4/Postal Code: 29486

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 (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
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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 (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:
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 (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
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☐ (5) Registered municipal advisor
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☐ (7) Lawyer or law firm

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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 (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 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 *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 (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 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 *employees*).

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 (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:
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 (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

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

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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:
(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 (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
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☐ (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:
3108 LITTLE ALDEN LAKE RD

Number and Street 2:

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 (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 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 *employees*).

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 (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:	
6600 CITY WEST PARKWAY SUITE 308			
City:	**State:**	**Country:**	**ZIP+4/Postal Code:**
EDEN PRAIRIE	Minnesota	United States	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 (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:
85 W. ALGONQUIN ROAD, SUITE 395

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
ARLINGTON HEIGHTS	Illinois	United States	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 (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

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

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Number and Street 1:
34 CHADBOURNE STREET

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
BLUFFTON	South Carolina	United States	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 (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)
- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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 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 *employees*).

Number and Street 1:		Number and Street 2:	
12800 WHITEWATER DRIVE, SUITE 100			
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 (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)
- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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:	
18801 VENTURA BLVD, SUITE 207			
City:	State:	Country:	ZIP+4/Postal Code:
SHERMAN OAKS	California	United States	91403

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

Telephone Number:	Facsimile Number, if any:
(818) 614-3931	

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 (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)
- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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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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
employees).

Number and Street 1:
13321 CALIFORNIA STREET, #315

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:
402-697-5074

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
(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)
- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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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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
employees).

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
(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)

- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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:	
7900 HIGH SCHOOL ROAD			
City:	State:	Country:	ZIP+4/Postal Code:
ELKINS PARK	Pennsylvania	United States	19027

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

Telephone Number:	Facsimile Number, if any:
(609) 870-2069	

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 (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)

- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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:	
520 LAKE COOK ROAD, SUITE 178			
City:	State:	Country:	ZIP+4/Postal Code:
DEERFIELD	Illinois	United States	60015

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

Telephone Number:	Facsimile Number, if any:
7737742600	

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 (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)

- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)

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☐ (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:
124 BROAD STREET

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
CLOVERDALE	California	United States	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 (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:
8711 PENROSE LANE, SUITE 200

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
OVERLAND PARK	Kansas	United States	66219

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 (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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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
employees).

Number and Street 1:
202 W LAKEWAY ROAD

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
GILLETTE	Wyoming	United States	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
(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
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☐ (5) Registered municipal advisor
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☐ (7) Lawyer or law firm

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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
employees).

Number and Street 1:
670 SHEPARD LANE, #101

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
FARMINGTON	Utah	United States	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
(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
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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 (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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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 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 *employees*).

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 (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)
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- ☐ (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:
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 (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

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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 (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 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 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 *employees*).

Number and Street 1:
125 S WACKER DRIVE, SUITE 300

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 (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:
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 (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:
2920 SANTIA DRIVE

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
TROY	Michigan	United States	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 (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)
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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:
1666 S WOLFE ROAD

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
SUNNYVALE	California	United States	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 (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:
7901 STRICKLAND ROAD, SUITE 102

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
RALEIGH	North Carolina	United States	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 (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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- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (3) Insurance broker or agent
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- [ ] (7) Lawyer or law firm

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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 (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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- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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 (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?
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- [ ] (5) Registered municipal advisor
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- [ ] (7) Lawyer or law firm

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Number and Street 1:		Number and Street 2:	
26 N 2ND STREET			
City:	State:	Country:	ZIP+4/Postal Code:
PICKENS	Mississippi	United States	39146

If this address is a private residence, check this box: [x]

Telephone Number:	Facsimile Number, if any:
(662) 468-3832	

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 (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?
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- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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:		Number and Street 2:	
8099 STAGE HILLS BLVD, SUITE 105			
City:	State:	Country:	ZIP+4/Postal Code:
BARTLETT	Tennessee	United States	38134

If this address is a private residence, check this box: [ ]

Telephone Number:	Facsimile Number, if any:
(901) 385-1234	

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 (Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?
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- [ ] (7) Lawyer or law firm

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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
employees).

Number and Street 1:		Number and Street 2:	
515 W CENTER AVENUE			
City:	State:	Country:	ZIP+4/Postal Code:
VISALIA	California	United States	93291

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

Telephone Number:	Facsimile Number, if any:
(559) 733-3525	

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
(Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?
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- [x] (1) Broker-dealer (registered or unregistered)
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- [ ] (7) Lawyer or law firm

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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
employees).

Number and Street 1:		Number and Street 2:	
23482 PERALTA DRIVE, SUITE B1			
City:	State:	Country:	ZIP+4/Postal Code:
LAGUNA HILLS	California	United States	92653

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

Telephone Number:	Facsimile Number, if any:
(949) 296-1161	

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
(Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?
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☐ (5) Registered municipal advisor
☐ (6) Accountant or accounting firm
☐ (7) Lawyer or law firm

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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
employees).

Number and Street 1:
14502 N DALE MABRY HIGHWAY, SUITE #200-134

Number and Street 2:

City: TAMPA
State: Florida
Country: United States
ZIP+4/Postal Co: 33618

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
(Form BR), please provide the *CRD* Branch Number here:

How many *employees* perform investment advisory functions from this office location?
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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
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
(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:
11235 DAVENPORT STREET, SUITE 105

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 (Form BR), please provide the *CRD* Branch Number here:

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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 (Form BR), please provide the *CRD* Branch Number here:

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☐ (5) Registered municipal advisor
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☐ (7) Lawyer or law firm

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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 (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)
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☐ (7) Lawyer or law firm

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Number and Street 1:
100 MAIN AVENUE NW, SUITE 300

Number and Street 2:

City: HICKORY
State: North Carolina
Country: United States
ZIP+4/Postal Code: 28601

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 (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)
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Number and Street 1:
2600 MAITLAND CENTER PKWY, SUITE 275

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 (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:
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 (Form BR), please provide the *CRD* Branch Number here:

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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 (Form BR), please provide the *CRD* Branch Number here:

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Number and Street 1:
407 LINCOLN ROAD, SUITE 8-G

Number and Street 2:

City: MIAMI BEACH
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 (Form BR), please provide the *CRD* Branch Number here:

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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 (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 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 *employees*).

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 (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:
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
(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
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
employees).

Number and Street 1:
2049 CENTURY PARK E, SUITE 1940

Number and Street 2:

City:
LOS ANGELES

State:
California

Country:
United States

ZIP+4/Postal Code:
90067

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
(Form BR), please provide the *CRD* Branch Number here:
779946

How many *employees* perform investment advisory functions from this office location?
5

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
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
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 (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)

- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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 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 *employees*).

Number and Street 1:
8 MACON STREET

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
MCDONOUGH	Georgia	United States	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 (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)

- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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 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 *employees*).

Number and Street 1:
91-1012 KANEHOALANI STREET, #B

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
KAPOLEI	Hawaii	United States	96707

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

Telephone Number:
(808) 840-3697

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 (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)
- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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:		Number and Street 2:	
1858 RINGLING BLVD, SUITE 200			
City:	State:	Country:	ZIP+4/Postal Code:
SARASOTA	Florida	United States	34236

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

Telephone Number:	Facsimile Number, if any:
(941) 541-5599	

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 (Form BR), please provide the *CRD* Branch Number here:
766488

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)
- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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 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 *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 (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)
- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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 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 *employees*).

Number and Street 1:		Number and Street 2:	
3625 DEL AMO BLVD, SUITE 330			
City:	State:	Country:	ZIP+4/Postal Code:
TORRANCE	California	United States	90503

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

Telephone Number:	Facsimile Number, if any:
(310) 698-0698	

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 (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)
- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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:	
45 RESEARCH DRIVE			
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 (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)

- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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:	
175 DERBY STREET, SUITE 33			
City:	State:	Country:	ZIP+4/Postal Code:
HINGHAM	Massachusetts	United States	02043

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

Telephone Number:	Facsimile Number, if any:
(512) 297-7815	

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 (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)

- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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:	
700 SPRING FOREST ROAD, SUITE 227			
City:	State:	Country:	ZIP+4/Postal Code:
RALEIGH	North Carolina	United States	27609

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

Telephone Number:	Facsimile Number, if any:
(917) 414-2583	

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 (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)

- [x] (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:
5901 W CENTURY BLVD, #750

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
LOS ANGELES	California	United States	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 (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:
109 DONELSON PIKE

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
NASHVILLE	Tennessee	United States	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 (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:
262 HALF HOLLOW ROAD

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
DIX HILLS	New York	United States	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 (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:
5251 W 116TH PLACE, SUITE 200

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
LEAWOOD	Kansas	United States	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 (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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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
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
employees).

Number and Street 1:
2850 GOLF ROAD

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
ROLLING MEADOWS	Illinois	United States	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
(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
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
employees).

Number and Street 1:
1700 LEILA DRIVE, SUITE 110

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
JACKSON	Mississippi	United States	39216

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
(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
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
employees).

Number and Street 1:
350 HIGHWAY 7 #241

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
EXCELSIOR	Minnesota	United States	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
(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
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
employees).

Number and Street 1:
1618 RISING RIDGE ROAD

Number and Street 2:

City:
MT AIRY

State:
Maryland

Country:
United States

ZIP+4/Postal Code:
21771

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

Telephone Number:
(301) 606-0707

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 (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 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 *employees*).

Number and Street 1:
1 CAPITOL MALL, SUITE 210

Number and Street 2:

City:
SACRAMENTO

State:
California

Country:
United States

ZIP+4/Postal Code:
95814

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

Telephone Number:
(916) 838-0866

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 (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:
25 N LIBERTY STREET

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
HARRISONBURG	Virginia	United States	22802

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

Telephone Number:	Facsimile Number, if any:
(540) 383-7613	

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 (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:	
95 S GREEN STREET			
City:	**State:**	**Country:**	**ZIP+4/Postal Code:**
TUPELO	Mississippi	United States	38804

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

Telephone Number:	Facsimile Number, if any:
(662) 205-4805	

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 (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 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 *employees*).

Number and Street 1:		Number and Street 2:	
466 KELLY STREET SE			
City:	**State:**	**Country:**	**ZIP+4/Postal Code:**
ATLANTA	Georgia	United States	30312

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

Telephone Number:
(770) 833-9736

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 (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)
- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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 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 *employees*).

Number and Street 1:
123 E JACKSON STREET, #203

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
BURNET	Texas	United States	78611

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

Telephone Number:
(512) 589-0103

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 (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)
- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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 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 *employees*).

Number and Street 1:
12 QUIMBY LANE

Number and Street 2:

City:	State:	Country:	ZIP+4/Postal Code:
BERNARDSVILLE	New Jersey	United States	07924

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

Telephone Number:
(908) 938-6361

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 (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)
- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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 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 *employees*).

Number and Street 1:		Number and Street 2:	
1660 HOTEL CIRCLE N, SUITE 304			
City:	State:	Country:	ZIP+4/Postal Code:
SAN DIEGO	California	United States	92108

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

Telephone Number:	Facsimile Number, if any:
(858) 344-9548	

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 (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)
- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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 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 *employees*).

Number and Street 1:		Number and Street 2:	
4500 BOWLING BLVD, SUITE 100			
City:	State:	Country:	ZIP+4/Postal Code:
LOUISVILLE	Kentucky	United States	40207

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

Telephone Number:	Facsimile Number, if any:
(502) 552-8586	

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 (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)
- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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
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
employees).

Number and Street 1:
410 SE 16TH COURT, APT 616

Number and Street 2:

City:
FORT LAUDERDALE

State:
Florida

Country:
United States

ZIP+4/Postal Code:
33316-2568

If this address is a private residence, check this box: [x]

Telephone Number:
(917) 238-0544

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
(Form BR), please provide the *CRD* Branch Number here:
884569

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)
- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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
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
employees).

Number and Street 1:
4501 23RD AVENUE S

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:
(701) 261-2829

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
(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)

- [x] (1) Broker-dealer (registered or unregistered)
- [ ] (2) Bank (including a separately identifiable department or division of a bank)
- [x] (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 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 *employees*).

Number and Street 1:		Number and Street 2:	
20198 MARKWARD CROSSING			
City:	State:	Country:	ZIP+4/Postal Code:
ESTERO	Florida	United States	33928

If this address is a private residence, check this box: [x]

Telephone Number:	Facsimile Number, if any:
(203) 927-7627	

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 (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)
- [x] (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:	
4501 N HIGHWAY A1A			
City:	State:	Country:	ZIP+4/Postal Code:
FORT PIERCE	Florida	United States	34949

If this address is a private residence, check this box: [x]

Telephone Number:	Facsimile Number, if any:
(407) 264-2996	

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 (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 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 *employees*).

Number and Street 1:
7979 E TUFTS AVENUE, SUITE 1050

Number and Street 2:

City:
DENVER

State:
Colorado

Country:
United States

ZIP+4/Postal Code:
80237

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

Telephone Number:
(303) 870-7280

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 (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
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☐ (5) Registered municipal advisor
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☐ (7) Lawyer or law firm

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Number and Street 1:
8515 THOUSAND PINES CIRCLE

Number and Street 2:

City:
WEST PALM BEACH

State:
Florida

Country:
United States

ZIP+4/Postal Code:
33411

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

Telephone Number:
(863) 253-3066

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 (Form BR), please provide the *CRD* Branch Number here:
881789

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 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 *employees*).

Number and Street 1:
580 S HARRISON LANE

Number and Street 2:

City:
DENVER

State:
Colorado

Country:
United States

ZIP+4/Postal Code:
80209

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

Telephone Number:
(443) 622-0945

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 (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)
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☐ (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 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 *employees*).

Number and Street 1:
100 NE 5TH STREET

Number and Street 2:
PMB# 6237

City:
OKLAHOMA CITY

State:
Oklahoma

Country:
United States

ZIP+4/Postal Code:
73104

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

Telephone Number:
405-252-0601

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 (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)
☐ (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, Face
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: https://www.linkedin.com/search/results/all/?fetchDeterministicClustersOnly=true&heroEntityKey=urn%

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

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

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 separa
each location.

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:
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:
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:
100 MAIN AVENUE NW, SUITE 300

Number and Street 1:
219 1ST AVENUE SW

Number and Street 2:

City:
HICKORY

State:
North Carolina

Country:
United States

ZIP+4/Postal Code:
28601

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:
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:
THE BROKERS NETWORK LLC

Number and Street 1:
2600 MAITLAND CENTER PKWY, SUITE 275

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:
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:
1858 RINGLING BLVD, SUITE 200

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) 541-5599

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:
180 S LAKE AVENUE, SUITE 510

Number and Street 2:

City:
PASADENA

State:
California

Country:
United States

ZIP+4/Postal Code:
91101

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

Telephone Number:
(626) 440-5101

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:
275 SOMERSET COURT

Number and Street 2:

City:
SANDY SPRINGS

State:
Georgia

Country:
United States

ZIP+4/Postal Code:
30350

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

Telephone Number:
(404) 694-4532

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:
1915 HIGHLAND OAKS DRIVE

Number and Street 2:

City:
WYLIE

State:
Texas

Country:
United States

ZIP+4/Postal Code:
75098

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

Telephone Number:
(214) 864-6555

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 ACCOUNT RECORDS

Name of entity where books and records are kept:
GIDEON STRATEGIC PARTNERS LLC

Number and Street 1:
2049 CENTURY PARK E, SUITE 1940

Number and Street 2:

City: LOS ANGELES
State: California
Country: United States
ZIP+4/Postal Code: 90067

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 RECORDS

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:
GERRARD ADVISORS LLC

Number and Street 1:
407 LINCOLN ROAD, SUITE 8-G

Number and Street 2:

City: MIAMI BEACH
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:
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 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:
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:
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 INC

Number and Street 1:
1700 LEILA DRIVE, SUITE 110

Number and Street 2:

City:
JACKSON

State:
Mississippi

Country:
United States

ZIP+4/Postal Code:
39216

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:
TLG ADVISORS INC

Number and Street 1:
11235 DAVENPORT STREET, SUITE 105

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:
20A E ROSEVILLE ROAD, SUITE 4

Number and Street 2:

City:
LANCASTER

State:
Pennsylvania

Country:
United States

ZIP+4/Postal Code:
17601

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

Telephone Number:
(717) 435-8856

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:
40 KENOZA AVENUE

Number and Street 2:

City:
HAVERHILL

State:
Massachusetts

Country:
United States

ZIP+4/Postal Code:
01830

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

Telephone Number:
(781) 408-7925

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 PINE LAKE ROAD, SUITE D

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:
(307) 287-0980

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:
8711 PENROSE LANE, SUITE 200

Number and Street 2:

City:
OVERLAND PARK

State:
Kansas

Country:
United States

ZIP+4/Postal Code:
66219

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:
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:
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 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:
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:
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:
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:
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:
103 GRANTON EDGE LANE

Number and Street 2:

City:
SUMMERVILLE

State:
South Carolina

Country:
United States

ZIP+4/Postal Code:
29486

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

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:
TLG ADVISORS INC

Number and Street 1:
202 W LAKEWAY ROAD

Number and Street 2:

City:
GILLETTE

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

Number and Street 1:		Number and Street 2:	
6600 CITY WEST PARKWAY		SUITE 308	
City:	State:	Country:	ZIP+4/Postal Code:
EDEN PRAIRE	Minnesota	United States	55344

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

Telephone Number:	Facsimile number, if any:
952-657-5056	

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:		Number and Street 2:	
9311 SE 36 STREET		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:
206-236-0201	

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:		Number and Street 2:	
350 HIGHWAY 7		#241	
City:	State:	Country:	ZIP+4/Postal Code:
EXCELSIOR	Minnesota	United States	55331

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

Telephone Number:	Facsimile number, if any:
763-231-7316	

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:
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:
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:
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:
ELEMENT INSURANCE PARTNERS

Number and Street 1:
13321 CALIFORNIA STREET, #315

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) 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:
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 INC

Number and Street 1:		Number and Street 2:	
14502 N DALE MABRY HIGHWAY, SUITE #200-134			
City:	State:	Country:	ZIP+4/Postal C
TAMPA	Florida	United States	33618

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

Telephone Number:	Facsimile number, if any:
(303) 589-4602	

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:		Number and Street 2:	
124 BROAD STREET			
City:	State:	Country:	ZIP+4/Postal Code:
CLOVERDALE	California	United States	95425

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

Telephone Number:	Facsimile number, if any:
7074732733	

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:		Number and Street 2:	
7791 BELFORT PARKWAY			
City:	State:	Country:	ZIP+4/Postal Code:
JACKSONVILLE	Florida	United States	32256

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

Telephone Number:	Facsimile number, if any:
904-296-4100	

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:
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

Number and Street 1:
3625 DEL AMO BLVD, SUITE 330

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:

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:
125 S WACKER DRIVE, SUITE 300

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:
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:
12800 WHITEWATER DRIVE, SUITE 100

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:
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:
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:
WEALTH STRATEGIES GROUP

Number and Street 1:
185 N MAIN STREET, STE 105

Number and Street 2:

City: COLLIERSVILLE
State: Tennessee
Country: United States
ZIP+4/Postal Code: 38017

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

Telephone Number:
(901) 591-8553

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:
2300 EMERALD COURT

Number and Street 2:

City:
CASTLE ROCK

State:
Colorado

Country:
United States

ZIP+4/Postal Code:
80104

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:
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:
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:
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:
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:
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:
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:
5315 WESTCHESTER

Number and Street 2:

City:
HOUSTON

State:
Texas

Country:
United States

ZIP+4/Postal Code:
77005

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

Telephone Number:
(832) 563-4455

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:
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:
TLG ADVISORS INC

Number and Street 1:
8099 STAGE HILLS BLVD, SUITE 105

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:
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:
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:
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:
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 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:
700 SPRING FOREST ROAD, SUITE 227

Number and Street 2:

City: RALEIGH
State: North Carolina
Country: United States
ZIP+4/Postal Code: 27609

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

Telephone Number:
(917) 414-2583

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:
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:
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:
91-1012 KANEHOALANI STREET, #B

Number and Street 2:

City:
KAPOLEI

State:
Hawaii

Country:
United States

ZIP+4/Postal Code:
96707

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

Telephone Number:
(808) 840-3697

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

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:
TLG ADVISORS, INC.

Number and Street 1:
25 WINDEMERE AVENUE

Number and Street 2:

City: MOUNT ARLINGTON
State: New Jersey
Country: United States
ZIP+4/Postal Code: 07856

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

Telephone Number:
(917) 825-6114

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 ACCOUNT RECORDS

Name of entity where books and records are kept:
TLG ADVISORS INC

Number and Street 1:
256 NAUTILUS

Number and Street 2:

City: PORT ARANSAS
State: Texas
Country: United States
ZIP+4/Postal Code: 78373

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:
406 GEORGETOWN COURT

Number and Street 2:

City: WEXFORD
State: Pennsylvania
Country: United States
ZIP+4/Postal Code: 15090

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:
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:
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:
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, INC.

Number and Street 1:
3823 OBRIANT PLACE

Number and Street 2:

City:
GREENSBORO

State:
North Carolina

Country:
United States

ZIP+4/Postal Code:
27410

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

Telephone Number:
(336) 455-1044

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:
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:
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:
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:
SCHMIDT FINANCIAL

Number and Street 1:
520 LAKE COOK ROAD, SUITE 178

Number and Street 2:

City:
DEERFIELD

State:
Illinois

Country:
United States

ZIP+4/Postal Code:
60015

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

Telephone Number:
(773) 774-2600

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:
ORANGE CAT LLC

Number and Street 1:
111 TOWN SQUARE PLACE

Number and Street 2:

City:
JERSEY CITY

State:
New Jersey

Country:
United States

ZIP+4/Postal Code:
07310

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

Telephone Number:
(858) 204-2438

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 ACCOUNT RECORDS

Name of entity where books and records are kept:
EVERLASTING WEALTH STRATEGIES LLC

Number and Street 1:
3150 NW 42ND, APT E101

Number and Street 2:

City:
COCONUT CREEK

State:
Florida

Country:
United States

ZIP+4/Postal Code:
33066

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

Telephone Number:
(954) 249-3032

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 ACCOUNT RECORDS

Name of entity where books and records are kept:
TLG ADVISORS, INC.

Number and Street 1:
3333 WILSHIRE BLVD, SUITE 800

Number and Street 2:

City:
LOS ANGELES

State:
California

Country:
United States

ZIP+4/Postal Code:
90010

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

Telephone Number:
(424) 634-0009

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 ACCOUNT RECORDS

Name of entity where books and records are kept:
TLG ADVISORS, INC.

Number and Street 1:
1618 RISING RIDGE ROAD

Number and Street 2:

City: MT AIRY
State: Maryland
Country: United States
ZIP+4/Postal Code: 21771

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

Telephone Number:
(301) 606-0707

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:
BENEFIT RFP, A SIMPLICITY COMPANY

Number and Street 1:
1 CAPITOL MALL, SUITE 210

Number and Street 2:

City: SACRAMENTO
State: California
Country: United States
ZIP+4/Postal Code: 95814

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

Telephone Number:
(916) 838-0866

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:
VALLEY VIEW ADVISORS

Number and Street 1:
25 N LIBERTY STREET

Number and Street 2:

City: HARRISONBURG
State: Vermont
Country: United States
ZIP+4/Postal Code: 22802

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

Telephone Number:
(540) 383-7613

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:
95 S GREEN STREET

Number and Street 2:

City: TUPELO
State: Mississippi
Country: United States
ZIP+4/Postal Code: 38804

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

Telephone Number:
(662) 205-4805

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:
466 KELLY STREET SE

Number and Street 2:

City: ATLANTA
State: Georgia
Country: United States
ZIP+4/Postal Code: 30312

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

Telephone Number:
(770) 833-9736

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:
123 E JACKSON STREET, #203

Number and Street 2:

City: BURNET
State: Texas
Country: United States
ZIP+4/Postal Code: 78611

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

Telephone Number:
(512) 589-0103

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:
GOAL LINE CAPITAL

Number and Street 1:
12 QUIMBY LANE

Number and Street 2:

City:
BERNARDSVILLE

State:
New Jersey

Country:
United States

ZIP+4/Postal Code:
07924

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

Telephone Number:
(908) 938-6361

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:
1660 HOTEL CIRCLE N, SUITE 304

Number and Street 2:

City:
SAN DIEGO

State:
California

Country:
United States

ZIP+4/Postal Code:
92108

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

Telephone Number:
(858) 344-9548

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:
4500 BOWLING BLVD, SUITE 100

Number and Street 2:

City:
LOUISVILLE

State:
Kentucky

Country:
United States

ZIP+4/Postal Code:
40207

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

Telephone Number:
(502) 552-8586

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:
410 SE 16TH COURT, APT 616

Number and Street 2:

City:
FORT LAUDERDALE

State:
Florida

Country:
United States

ZIP+4/Postal Code:
33316-2568

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

Telephone Number:
(917) 238-0544

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:
4501 23RD AVENUE S

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:
(701) 261-2829

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:
20198 MARKWARD CROSSING

Number and Street 2:

City:
ESTERO

State:
Florida

Country:
United States

ZIP+4/Postal Code:
33928

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

Telephone Number:
(203) 927-7627

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:
4501 N HIGHWAY A1A

Number and Street 2:

City: FORT PIERCE
State: Florida
Country: United States
ZIP+4/Postal Code: 34949

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

Telephone Number:
(407) 264-2996

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:
PEAK PRO FINANCIAL

Number and Street 1:
7979 E TUFTS AVENUE, SUITE 1050

Number and Street 2:

City: DENVER
State: Colorado
Country: United States
ZIP+4/Postal Code: 80237

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

Telephone Number:
(303) 870-7280

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:
8515 THOUSAND PINES CIRCLE

Number and Street 2:

City: WEST PALM BEACH
State: Florida
Country: United States
ZIP+4/Postal Code: 33411

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

Telephone Number:
(863) 253-3066

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:		Number and Street 2:	
580 S HARRISON LANE			
City:	**State:**	**Country:**	**ZIP+4/Postal Code:**
DENVER	Colorado	United States	80209

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

Telephone Number:	Facsimile number, if any:
(443) 622-0945	

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:
K&M WEALTH ADVISORS, LLC

Number and Street 1:		Number and Street 2:	
100 NE 5TH STREET		PMB# 6237	
City:	**State:**	**Country:**	**ZIP+4/Postal Code:**
OKLAHOMA CITY	Oklahoma	United States	73104

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

Telephone Number:	Facsimile number, if any:
405-252-0601	

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 BOOKS AND RECORDS

SECTION 1.M. Registration with Foreign Financial Regulatory Authorities

No Information Filed

Item 2 SEC Registration/Reporting

Responses to this Item help us (and you) determine whether you are eligible to register with the SEC. Complete this Item 2.A. only if you are applying for SEC registration or subm *amendment* to your SEC registration. If you are filing an *umbrella registration*, the information in Item 2 should be provided for the *filing adviser* only.

A. To register (or remain registered) with the SEC, you must check **at least one** of the Items 2.A.(1) through 2.A.(12), below. If you are submitting an *annual updating amendm* you are no longer eligible to register with the SEC, check Item 2.A.(13). Part 1A Instruction 2 provides information to help you determine whether you may affirmatively respo

You (the adviser):

☑ (1) are a **large advisory firm** that either:

(a) has regulatory assets under management of $100 million (in U.S. dollars) or more; or

(b) has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent *annual updating amendment* and is registe

☐ (2) are a **mid-sized advisory firm** that has regulatory assets under management of $25 million (in U.S. dollars) or more but less than $100 million (in U.S. dollars) ar

(a) not required to be registered as an adviser with the *state securities authority* of the state where you maintain your *principal office and place of business*; or

(b) not subject to examination by the *state securities authority* of the state where you maintain your *principal office and place of business*;

*Click **HERE** for a list of states in which an investment adviser, if registered, would not be subject to examination by the state securities authority.*

(3) Reserved

☐ (4) have your *principal office and place of business* **outside the United States**;

☐ (5) are **an investment adviser (or subadviser) to an investment company** registered under the Investment Company Act of 1940;

☐ (6) are **an investment adviser to a company which has elected to be a business development company** pursuant to section 54 of the Investment Company Ac the election, and you have at least $25 million of regulatory assets under management;

☐ (7) are a **pension consultant** with respect to assets of plans having an aggregate value of at least $200,000,000 that qualifies for the exemption in rule 203A-2(a);

☐ (8) are a **related adviser** under rule 203A-2(b) that *controls*, is *controlled* by, or is under common *control* with, an investment adviser that is registered with the SEC, *place of business* is the same as the registered adviser;

If you check this box, complete Section 2.A.(8) of Schedule D.

☐ (9) are an **adviser** relying on rule 203A-2(c) because you **expect to be eligible for SEC registration within 120 days;**

If you check this box, complete Section 2.A.(9) of Schedule D.

☐ (10) are a **multi-state adviser** that is required to register in 15 or more states and is relying on rule 203A-2(d);

If you check this box, complete Section 2.A.(10) of Schedule D.

☐ (11) are an **Internet adviser** relying on rule 203A-2(e);

If you check this box, complete Section 2.A.(11) of Schedule D.

☐ (12) have **received an SEC order** exempting you from the prohibition against registration with the SEC;

If you check this box, complete Section 2.A.(12) of Schedule D.

☐ (13) are **no longer eligible** to remain registered with the SEC.

State Securities Authority Notice Filings* and State Reporting by *Exempt Reporting Advisers

C. Under state laws, SEC-registered advisers may be required to provide to *state securities authorities* a copy of the Form ADV and any amendments they file with the SEC. Thes addition, *exempt reporting advisers* may be required to provide *state securities authorities* with a copy of reports and any amendments they file with the SEC. If this is an initi the box(es) next to the state(s) that you would like to receive notice of this and all subsequent filings or reports you submit to the SEC. If this is an amendment to direct your additional state(s), check the box(es) next to the state(s) that you would like to receive notice of this and all subsequent filings or reports you submit to the SEC. If this is an to stop your *notice filings* or reports from going to state(s) that currently receive them, uncheck the box(es) next to those state(s).

Jurisdictions

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

If you are amending your registration to stop your notice filings or reports from going to a state that currently receives them and you do not want to pay that state's notice fil coming year, your amendment must be filed before the end of the year (December 31).

SECTION 2.A.(8) Related Adviser

If you are relying on the exemption in rule 203A-2(b) from the prohibition on registration because you *control*, are *controlled* by, or are under common *control* with an investment SEC and your *principal office and place of business* is the same as that of the registered adviser, provide the following information:

Name of Registered Investment Adviser

CRD Number of Registered Investment Adviser

SEC Number of Registered Investment Adviser
-

SECTION 2.A.(9) Investment Adviser Expecting to be Eligible for Commission Registration within 120 Days

If you are relying on rule 203A-2(c), the exemption from the prohibition on registration available to an adviser that expects to be eligible for SEC registration within 120 days, you representations about your eligibility for SEC registration. By checking the appropriate boxes, you will be deemed to have made the required representations. You must make both

☐ I am not registered or required to be registered with the SEC or a *state securities authority* and I have a reasonable expectation that I will be eligible to register with the SEC w registration with the SEC becomes effective.

☐ I undertake to withdraw from SEC registration if, on the 120th day after my registration with the SEC becomes effective, I would be prohibited by Section 203A(a) of the Advise SEC.

SECTION 2.A.(10) Multi-State Adviser

If you are relying on rule 203A-2(d), the multi-state adviser exemption from the prohibition on registration, you are required to make certain representations about your eligibility the appropriate boxes, you will be deemed to have made the required representations.

If you are applying for registration as an investment adviser with the SEC, you must make both of these representations:

☐ I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of 15 or more states to register as an investment adviser with the *stat* states.

☐ I undertake to withdraw from SEC registration if I file an amendment to this registration indicating that I would be required by the laws of fewer than 15 states to register as ar *state securities authorities* of those states.

If you are submitting your *annual updating amendment*, you must make this representation:

☐ Within 90 days prior to the date of filing this amendment, I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of at least 1 investment adviser with the *state securities authorities* in those states.

SECTION 2.A.(11) Internet Adviser

If you are relying on rule 203A-2(e), the Internet adviser exemption from the prohibition on registration, you are required to make a representation about your eligibility for SEC re appropriate box, you will be deemed to have made the required representation.

If you are applying for registration as an investment adviser with the SEC or changing your existing Item 2 response regarding your eligibility for SEC registration, you must make

☐ I will provide investment advice on an ongoing basis to more than one client exclusively through an *operational interactive website*.

If you are filing an annual updating amendment to your existing registration and are continuing to rely on the Internet adviser exemption for SEC registration, you must make this

☐ I have provided and will continue to provide investment advice on an ongoing basis to more than one client exclusively through an *operational interactive website*.

SECTION 2.A.(12) SEC Exemptive *Order*

If you are relying upon an SEC *order* exempting you from the prohibition on registration, provide the following information:

Application Number:
803-

Date of *order*:

Item 3 Form of Organization

If you are filing an *umbrella registration*, the information in Item 3 should be provided for the *filing adviser* only.

A. How are you organized?

- (•) Corporation
- ( ) Sole Proprietorship
- ( ) Limited Liability Partnership (LLP)
- ( ) Partnership
- ( ) Limited Liability Company (LLC)
- ( ) Limited Partnership (LP)
- ( ) Other (specify):

If you are changing your response to this Item, see Part 1A Instruction 4.

B. In what month does your fiscal year end each year?
DECEMBER

C. Under the laws of what state or country are you organized?

State	Country
Colorado	United States

If you are a partnership, provide the name of the state or country under whose laws your partnership was formed. If you are a sole proprietor, provide the name of the state o

If you are changing your response to this Item, see Part 1A Instruction 4.

Item 4 Successions

A. Are you, at the time of this filing, succeeding to the business of a registered investment adviser, including, for example, a change of your structure or legal status (e.g., form o of incorporation)?

If "yes", complete Item 4.B. and Section 4 of Schedule D.

B. Date of Succession: (MM/DD/YYYY)

If you have already reported this succession on a previous Form ADV filing, do not report the succession again. Instead, check "No." See Part 1A Instruction 4.

SECTION 4 Successions

No Information Filed

Item 5 Information About Your Advisory Business - Employees, Clients, and Compensation

Responses to this Item help us understand your business, assist us in preparing for on-site examinations, and provide us with data we use when making regulatory policy. Part 1A I additional guidance to newly formed advisers for completing this Item 5.

Employees

If you are organized as a sole proprietorship, include yourself as an employee in your responses to Item 5.A. and Items 5.B.(1), (2), (3), (4), and (5). If an employee performs mo count that employee in each of your responses to Items 5.B.(1), (2), (3), (4), and (5).

A. Approximately how many *employees* do you have? Include full- and part-time *employees* but do not include any clerical workers.
290

B. (1) Approximately how many of the *employees* reported in 5.A. perform investment advisory functions (including research)?
155
(2) Approximately how many of the *employees* reported in 5.A. are registered representatives of a broker-dealer?
270
(3) Approximately how many of the *employees* reported in 5.A. are registered with one or more *state securities authorities* as *investment adviser representatives*?
280
(4) Approximately how many of the *employees* reported in 5.A. are registered with one or more *state securities authorities* as *investment adviser representatives* for an inve
4
(5) Approximately how many of the *employees* reported in 5.A. are licensed agents of an insurance company or agency?
260
(6) Approximately how many firms or other *persons* solicit advisory *clients* on your behalf?
4

In your response to Item 5.B.(6), do not count any of your employees and count a firm only once – do not count each of the firm's employees that solicit on your behalf.

Clients

In your responses to Items 5.C. and 5.D. do not include as "clients" the investors in a private fund you advise, unless you have a separate advisory relationship with those investor

C. (1) To approximately how many *clients* for whom you do not have regulatory assets under management did you provide investment advisory services during your most rece
38
(2) Approximately what percentage of your *clients* are non-*United States persons*?
0%

D. *For purposes of this Item 5.D., the category "individuals" includes trusts, estates, and 401(k) plans and IRAs of individuals and their family members, but does not include bus proprietorships.*
The category "business development companies" consists of companies that have made an election pursuant to section 54 of the Investment Company Act of 1940. Unless yo pursuant to an investment advisory contract to an investment company registered under the Investment Company Act of 1940, do not answer (1)(d) or (3)(d) below.

Indicate the approximate number of your *clients* and amount of your total regulatory assets under management (reported in Item 5.F. below) attributable to each of the follow fewer than 5 *clients* in a particular category (other than (d), (e), and (f)) you may check Item 5.D.(2) rather than respond to Item 5.D.(1).

The aggregate amount of regulatory assets under management reported in Item 5.D.(3) should equal the total amount of regulatory assets under management reported in Ite

If a *client* fits into more than one category, select one category that most accurately represents the *client* to avoid double counting *clients* and assets. If you advise a registere development company, or pooled investment vehicle, report those assets in categories (d), (e), and (f) as applicable.

Type of *Client*	**(1) Number of *Client(s)***	**(2) Fewer than 5 *Clients***	**(3) Amount of M**
(a) Individuals (other than *high net worth individuals*)	4717	☐	$ 1
(b) *High net worth individuals*	301	☐	$
(c) Banking or thrift institutions		☑	
(d) Investment companies			
(e) Business development companies			
(f) Pooled investment vehicles (other than investment companies and business development companies)			
(g) Pension and profit sharing plans (but not the plan participants or government pension plans)	28	☐	$
(h) Charitable organizations	8	☐	$
(i) State or municipal *government entities* (including government pension plans)		☑	
(j) Other investment advisers		☑	
(k) Insurance companies		☑	
(l) Sovereign wealth funds and foreign official institutions		☑	
(m) Corporations or other businesses not listed above	107	☐	$
(n) Other:		☐	

Compensation Arrangements

E. You are compensated for your investment advisory services by (check all that apply):

- [x] (1) A percentage of assets under your management
- [x] (2) Hourly charges
- [ ] (3) Subscription fees (for a newsletter or periodical)
- [x] (4) Fixed fees (other than subscription fees)
- [ ] (5) Commissions
- [ ] (6) *Performance-based fees*
- [ ] (7) Other (specify):

Item 5 Information About Your Advisory Business - Regulatory Assets Under Management

Regulatory Assets Under Management

F. (1) Do you provide continuous and regular supervisory or management services to securities portfolios?

(2) If yes, what is the amount of your regulatory assets under management and total number of accounts?

		U.S. Dollar Amount		Total Number of Accounts
Discretionary:	(a)	$ 1,791,330,076	(d)	5,202
Non-Discretionary:	(b)	$ 504,535,556	(e)	1,525
Total:	(c)	$ 2,295,865,632	(f)	6,727

Part 1A Instruction 5.b. explains how to calculate your regulatory assets under management. You must follow these instructions carefully when completing this Item.

(3) What is the approximate amount of your total regulatory assets under management (reported in Item 5.F.(2)(c) above) attributable to *clients* who are non-*United States p*

$ 0

Item 5 Information About Your Advisory Business - Advisory Activities

Advisory Activities

G. What type(s) of advisory services do you provide? Check all that apply.

- [x] (1) Financial planning services
- [x] (2) Portfolio management for individuals and/or small businesses
- [ ] (3) Portfolio management for investment companies (as well as "business development companies" that have made an election pursuant to section 54 of the Investme
- [x] (4) Portfolio management for pooled investment vehicles (other than investment companies)
- [x] (5) Portfolio management for businesses (other than small businesses) or institutional *clients* (other than registered investment companies and other pooled investmer
- [x] (6) Pension consulting services
- [x] (7) Selection of other advisers (including *private fund* managers)
- [ ] (8) Publication of periodicals or newsletters
- [ ] (9) Security ratings or pricing services
- [ ] (10) Market timing services
- [x] (11) Educational seminars/workshops
- [x] (12) Other(specify): PLACEMENT OF INSTITUTIONAL FUNDS

Do not check Item 5.G.(3) unless you provide advisory services pursuant to an investment advisory contract to an investment company registered under the Investment Com subadviser. If you check Item 5.G.(3), report the 811 or 814 number of the investment company or investment companies to which you provide advice in Section 5.G.(3) of S

H. If you provide financial planning services, to how many *clients* did you provide these services during your last fiscal year?

- ○ 0
- ○ 1 - 10
- ○ 11 - 25
- ◉ 26 - 50
- ○ 51 - 100
- ○ 101 - 250
- ○ 251 - 500
- ○ More than 500

If more than 500, how many?
(round to the nearest 500)

In your responses to this Item 5.H., do not include as "clients" the investors in a private fund you advise, unless you have a separate advisory relationship with those investor

I. (1) Do you participate in a *wrap fee program*?

(2) If you participate in a *wrap fee program*, what is the amount of your regulatory assets under management attributable to acting as:

(a) *sponsor* to a *wrap fee program*
$

(b) portfolio manager for a *wrap fee program*?
$

(c) *sponsor* to and portfolio manager for the same *wrap fee program*?
$

If you report an amount in Item 5.I.(2)(c), do not report that amount in Item 5.I.(2)(a) or Item 5.I.(2)(b).

If you are a portfolio manager for a wrap fee program, list the names of the programs, their sponsors and related information in Section 5.I.(2) of Schedule D.

If your involvement in a wrap fee program is limited to recommending wrap fee programs to your clients, or you advise a mutual fund that is offered through a wrap fee prog enter any amounts in response to Item 5.I.(2).

J. (1) In response to Item 4.B. of Part 2A of Form ADV, do you indicate that you provide investment advice only with respect to limited types of investments?

(2) Do you report *client* assets in Item 4.E. of Part 2A that are computed using a different method than the method used to compute your regulatory assets under manageme

K. Separately Managed Account *Clients*

(1) Do you have regulatory assets under management attributable to *clients* other than those listed in Item 5.D.(3)(d)-(f) (separately managed account *clients*)?

If yes, complete Section 5.K.(1) of Schedule D.

(2) Do you engage in borrowing transactions on behalf of any of the separately managed account *clients* that you advise?

If yes, complete Section 5.K.(2) of Schedule D.

(3) Do you engage in derivative transactions on behalf of any of the separately managed account *clients* that you advise?

If yes, complete Section 5.K.(2) of Schedule D.

(4) After subtracting the amounts in Item 5.D.(3)(d)-(f) above from your total regulatory assets under management, does any custodian hold ten percent or more of this rem regulatory assets under management?

If yes, complete Section 5.K.(3) of Schedule D for each custodian.

L. Marketing Activities

(1) Do any of your *advertisements* include:

(a) Performance results?

(b) A reference to specific investment advice provided by you (as that phrase is used in rule 206(4)-1(a)(5))?

(c) *Testimonials* (other than those that satisfy rule 206(4)-1(b)(4)(ii))?

(d) *Endorsements* (other than those that satisfy rule 206(4)-1(b)(4)(ii))?

(e) *Third-party ratings*?

(2) If you answer "yes" to L(1)(c), (d), or (e) above, do you pay or otherwise provide cash or non-cash compensation, directly or indirectly, in connection with the use of *testi* or *third-party ratings*?

(3) Do any of your *advertisements* include *hypothetical performance* ?

(4) Do any of your *advertisements* include *predecessor performance* ?

SECTION 5.G.(3) Advisers to Registered Investment Companies and Business Development Companies

No Information Filed

SECTION 5.I.(2) *Wrap Fee Programs*

No Information Filed

SECTION 5.K.(1) Separately Managed Accounts

After subtracting the amounts reported in Item 5.D.(3)(d)-(f) from your total regulatory assets under management, indicate the approximate percentage of this remaining amount following categories of assets. If the remaining amount is at least $10 billion in regulatory assets under management, complete Question (a). If the remaining amount is less than under management, complete Question (b).

Any regulatory assets under management reported in Item 5.D.(3)(d), (e), and (f) should not be reported below.

If you are a subadviser to a separately managed account, you should only provide information with respect to the portion of the account that you subadvise.

End of year refers to the date used to calculate your regulatory assets under management for purposes of your *annual updating amendment* . Mid-year is the date six months befo column should add up to 100% and numbers should be rounded to the nearest percent.

Investments in derivatives, registered investment companies, business development companies, and pooled investment vehicles should be reported in those categories. Do not rep

related or underlying portfolio assets. Cash equivalents include bank deposits, certificates of deposit, bankers' acceptances and similar bank instruments.

Some assets could be classified into more than one category or require discretion about which category applies. You may use your own internal methodologies and the conventions determining how to categorize assets, so long as the methodologies or conventions are consistently applied and consistent with information you report internally and to current and you should not double count assets, and your responses must be consistent with any instructions or other guidance relating to this Section.

(a)

Asset Type	Mid-y
(i) Exchange-Traded Equity Securities	%
(ii) Non Exchange-Traded Equity Securities	%
(iii) U.S. Government/Agency Bonds	%
(iv) U.S. State and Local Bonds	%
(v) *Sovereign Bonds*	%
(vi) Investment Grade Corporate Bonds	%
(vii) Non-Investment Grade Corporate Bonds	%
(viii) Derivatives	%
(ix) Securities Issued by Registered Investment Companies or Business Development Companies	%
(x) Securities Issued by Pooled Investment Vehicles (other than Registered Investment Companies or Business Development Companies)	%
(xi) Cash and Cash Equivalents	%
(xii) Other	%

Generally describe any assets included in "Other"

(b)

Asset Type
(i) Exchange-Traded Equity Securities
(ii) Non Exchange-Traded Equity Securities
(iii) U.S. Government/Agency Bonds
(iv) U.S. State and Local Bonds
(v) *Sovereign Bonds*
(vi) Investment Grade Corporate Bonds
(vii) Non-Investment Grade Corporate Bonds
(viii) Derivatives
(ix) Securities Issued by Registered Investment Companies or Business Development Companies
(x) Securities Issued by Pooled Investment Vehicles (other than Registered Investment Companies or Business Development Companies)
(xi) Cash and Cash Equivalents
(xii) Other

Generally describe any assets included in "Other"

SECTION 5.K.(2) Separately Managed Accounts - Use of *Borrowings* and Derivatives

☑ **No information is required to be reported in this Section 5.K.(2) per the instructions of this Section 5.K.(2)**

If your regulatory assets under management attributable to separately managed accounts are at least $10 billion, you should complete Question (a). If your regulatory assets unde separately managed accounts are at least $500 million but less than $10 billion, you should complete Question (b).

(a) In the table below, provide the following information regarding the separately managed accounts you advise. If you are a subadviser to a separately managed account, you sh with respect to the portion of the account that you subadvise. End of year refers to the date used to calculate your regulatory assets under management for purposes of your a Mid-year is the date six months before the end of year date.

In column 1, indicate the regulatory assets under management attributable to separately managed accounts associated with each level of gross notional exposure. For purpose exposure of an account is the percentage obtained by dividing (i) the sum of (a) the dollar amount of any *borrowings* and (b) the *gross notional value* of all derivatives, by (ii) management of the account.

In column 2, provide the dollar amount of *borrowings* for the accounts included in column 1.

In column 3, provide aggregate *gross notional value* of derivatives divided by the aggregate regulatory assets under management of the accounts included in column 1 with re derivatives specified in 3(a) through (f).

You may, but are not required to, complete the table with respect to any separately managed account with regulatory assets under management of less than $10,000,000.

Any regulatory assets under management reported in Item 5.D.(3)(d), (e), and (f) should not be reported below.

(i) Mid-Year

Gross Notional Exposure	(1) Regulatory Assets Under Management	(2) *Borrowings*	(3) Derivative Exposures

			(a) *Interest Rate Derivative*	(b) *Foreign Exchange Derivative*	(c) *Credit Derivative*	(d) *Equity Derivative*	(e)
Less than 10%	$	$	%	%	%	%	
10-149%	$	$	%	%	%	%	
150% or more	$	$	%	%	%	%	

Optional: Use the space below to provide a narrative description of the strategies and/or manner in which *borrowings* and derivatives are used in the management of the sepa you advise.

(ii) End of Year

Gross Notional Exposure	**(1) Regulatory Assets Under Management**	**(2) *Borrowings***	**(3) Derivative Exposures**				
			(a) *Interest Rate Derivative*	**(b) *Foreign Exchange Derivative***	**(c) *Credit Derivative***	**(d) *Equity Derivative***	**(e)**
Less than 10%	$	$	%	%	%	%	
10-149%	$	$	%	%	%	%	
150% or more	$	$	%	%	%	%	

Optional: Use the space below to provide a narrative description of the strategies and/or manner in which *borrowings* and derivatives are used in the management of the sepa you advise.

(b) In the table below, provide the following information regarding the separately managed accounts you advise as of the date used to calculate your regulatory assets under man *annual updating amendment*. If you are a subadviser to a separately managed account, you should only provide information with respect to the portion of the account that you

In column 1, indicate the regulatory assets under management attributable to separately managed accounts associated with each level of gross notional exposure. For purpose exposure of an account is the percentage obtained by dividing (i) the sum of (a) the dollar amount of any *borrowings* and (b) the *gross notional value* of all derivatives, by (ii) management of the account.

In column 2, provide the dollar amount of *borrowings* for the accounts included in column 1.

You may, but are not required to, complete the table with respect to any separately managed accounts with regulatory assets under management of less than $10,000,000.

Any regulatory assets under management reported in Item 5.D.(3)(d), (e), and (f) should not be reported below.

Gross Notional Exposure	**(1) Regulatory Assets Under Management**	**(**
Less than 10%	$	
10-149%	$	
150% or more	$	

Optional: Use the space below to provide a narrative description of the strategies and/or manner in which *borrowings* and derivatives are used in the management of the sepa you advise.

SECTION 5.K.(3) Custodians for Separately Managed Accounts

Complete a separate Schedule D Section 5.K.(3) for each custodian that holds ten percent or more of your aggregate separately managed account regulatory assets under manag

(a) Legal name of custodian:
FIDELITY BROKERAGE SERVICES LLC

(b) Primary business name of custodian:
FIDELITY BROKERAGE SERVICES LLC

(c) The location(s) of the custodian's office(s) responsible for *custody* of the assets :

City:	State:	Country:
SMITHFIELD	Rhode Island	United States

(d) Is the custodian a *related person* of your firm?

(e) If the custodian is a broker-dealer, provide its SEC registration number (if any)
8 - 23292

(f) If the custodian is not a broker-dealer, or is a broker-dealer but does not have an SEC registration number, provide its *legal entity identifier* (if any)

(g) What amount of your regulatory assets under management attributable to separately managed accounts is held at the custodian?
$ 100,574,889

(a) Legal name of custodian:
SEI INVESTMENTS DISTRIBUTION CO.

(b) Primary business name of custodian:
SEI INVESTMENTS DISTRIBUTION CO.

(c) The location(s) of the custodian's office(s) responsible for *custody* of the assets :

City:	State:	Country:
OAKS	Pennsylvania	United States

(d) Is the custodian a *related person* of your firm?

(e) If the custodian is a broker-dealer, provide its SEC registration number (if any)
8 - 27897

(f) If the custodian is not a broker-dealer, or is a broker-dealer but does not have an SEC registration number, provide its *legal entity identifier* (if any)

(g) What amount of your regulatory assets under management attributable to separately managed accounts is held at the custodian?
$ 257,067,035

(a) Legal name of custodian:
CHARLES SCHWAB & CO., INC.

(b) Primary business name of custodian:
CHARLES SCHWAB & CO., INC.

(c) The location(s) of the custodian's office(s) responsible for *custody* of the assets :

City:	State:	Country:
LONE TREE	Colorado	United States

(d) Is the custodian a *related person* of your firm?

(e) If the custodian is a broker-dealer, provide its SEC registration number (if any)
8 - 16514

(f) If the custodian is not a broker-dealer, or is a broker-dealer but does not have an SEC registration number, provide its *legal entity identifier* (if any)

(g) What amount of your regulatory assets under management attributable to separately managed accounts is held at the custodian?
$ 65,649,359

(a) Legal name of custodian:
PERSHING ADVISOR SOLUTIONS LLC

(b) Primary business name of custodian:
PERSHING ADVISOR SOLUTIONS LLC

(c) The location(s) of the custodian's office(s) responsible for *custody* of the assets :

City:	State:	Country:
JERSEY CITY	New Jersey	United States

(d) Is the custodian a *related person* of your firm?

(e) If the custodian is a broker-dealer, provide its SEC registration number (if any)
8 - 47425

(f) If the custodian is not a broker-dealer, or is a broker-dealer but does not have an SEC registration number, provide its *legal entity identifier* (if any)

(g) What amount of your regulatory assets under management attributable to separately managed accounts is held at the custodian?
$ 96,435,584

Item 6 Other Business Activities

In this Item, we request information about your firm's other business activities.

A. You are actively engaged in business as a (check all that apply):

- ☐ (1) broker-dealer (registered or unregistered)
- ☐ (2) registered representative of a broker-dealer
- ☐ (3) commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- ☐ (4) futures commission merchant
- ☐ (5) real estate broker, dealer, or agent
- ☐ (6) insurance broker or agent
- ☐ (7) bank (including a separately identifiable department or division of a bank)
- ☐ (8) trust company
- ☐ (9) registered municipal advisor
- ☐ (10) registered security-based swap dealer
- ☐ (11) major security-based swap participant
- ☐ (12) accountant or accounting firm
- ☐ (13) lawyer or law firm
- ☐ (14) other financial product salesperson (specify):

If you engage in other business using a name that is different from the names reported in Items 1.A. or 1.B.(1), complete Section 6.A. of Schedule D.

B. (1) Are you actively engaged in any other business not listed in Item 6.A. (other than giving investment advice)?

(2) If yes, is this other business your primary business?

If "yes," describe this other business on Section 6.B.(2) of Schedule D, and if you engage in this business under a different name, provide that name.

(3) Do you sell products or provide services other than investment advice to your advisory *clients*?

If "yes," describe this other business on Section 6.B.(3) of Schedule D, and if you engage in this business under a different name, provide that name.

SECTION 6.A. Names of Your Other Businesses

No Information Filed

SECTION 6.B.(2) Description of Primary Business

Describe your primary business (not your investment advisory business):

If you engage in that business under a different name, provide that name:

SECTION 6.B.(3) Description of Other Products and Services

Describe other products or services you sell to your *client*. You may omit products and services that you listed in Section 6.B.(2) above.
INSURANCE PRODUCTS

If you engage in that business under a different name, provide that name:

Item 7 Financial Industry Affiliations

In this Item, we request information about your financial industry affiliations and activities. This information identifies areas in which conflicts of interest may occur between you ar

A. This part of Item 7 requires you to provide information about you and your *related persons*, including foreign affiliates. Your *related persons* are all of your *advisory affiliates* a common *control* with you.

You have a *related person* that is a (check all that apply):

- [x] (1) broker-dealer, municipal securities dealer, or government securities broker or dealer (registered or unregistered)
- [x] (2) other investment adviser (including financial planners)
- [ ] (3) registered municipal advisor
- [ ] (4) registered security-based swap dealer
- [ ] (5) major security-based swap participant
- [ ] (6) commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
- [ ] (7) futures commission merchant
- [ ] (8) banking or thrift institution
- [ ] (9) trust company
- [x] (10) accountant or accounting firm
- [x] (11) lawyer or law firm
- [x] (12) insurance company or agency
- [ ] (13) pension consultant
- [ ] (14) real estate broker or dealer
- [ ] (15) sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles
- [ ] (16) sponsor, general partner, managing member (or equivalent) of pooled investment vehicles

Note that Item 7.A. should not be used to disclose that some of your employees perform investment advisory functions or are registered representatives of a broker-dealer. T employees who perform investment advisory functions should be disclosed under Item 5.B.(1). The number of your firm's employees who are registered representatives of a disclosed under Item 5.B.(2).

Note that if you are filing an umbrella registration, you should not check Item 7.A.(2) with respect to your relying advisers, and you do not have to complete Section 7.A. in S advisers. You should complete a Schedule R for each relying adviser.

For each related person, including foreign affiliates that may not be registered or required to be registered in the United States, complete Section 7.A. of Schedule D.

You do not need to complete Section 7.A. of Schedule D for any related person if: (1) you have no business dealings with the related person in connection with advisory servi (2) you do not conduct shared operations with the related person; (3) you do not refer clients or business to the related person, and the related person does not refer prospe (4) you do not share supervised persons or premises with the related person; and (5) you have no reason to believe that your relationship with the related person otherwise your clients.

You must complete Section 7.A. of Schedule D for each related person acting as qualified custodian in connection with advisory services you provide to your clients (other tha agent pursuant to rule 206(4)-2(b)(1)), regardless of whether you have determined the related person to be operationally independent under rule 206(4)-2 of the Advisers A

SECTION 7.A. Financial Industry Affiliations

Complete a separate Schedule D Section 7.A. for each *related person* listed in Item 7.A.

1. Legal Name of *Related Person*:
   THE LEADERS GROUP, INC.

2. Primary Business Name of *Related Person*:
   THE LEADERS GROUP, INC.

3. *Related Person's* SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)
   8 - 47639
   or
   Other

4. *Related Person's*
   (a) *CRD* Number (if any):
   37157
   (b) CIK Number(s) (if any):
   No Information Filed

5. *Related Person* is: (check all that apply)
   - (a) [x] broker-dealer, municipal securities dealer, or government securities broker or dealer
   - (b) [ ] other investment adviser (including financial planners)
   - (c) [ ] registered municipal advisor
   - (d) [ ] registered security-based swap dealer
   - (e) [ ] major security-based swap participant
   - (f) [ ] commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
   - (g) [ ] futures commission merchant
   - (h) [ ] banking or thrift institution
   - (i) [ ] trust company
   - (j) [ ] accountant or accounting firm
   - (k) [ ] lawyer or law firm
   - (l) [ ] insurance company or agency
   - (m) [ ] pension consultant
   - (n) [ ] real estate broker or dealer

(o) ☐ sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles

(p) ☐ sponsor, general partner, managing member (or equivalent) of pooled investment vehicles

6. Do you *control* or are you *controlled* by the *related person*?

7. Are you and the *related person* under common *control*?

8. (a) Does the *related person* act as a qualified custodian for your *clients* in connection with advisory services you provide to *clients*?

(b) If you are registering or registered with the SEC and you have answered "yes," to question 8.(a) above, have you overcome the presumption that you are not operational (pursuant to rule 206(4)-2(d)(5)) from the *related person* and thus are not required to obtain a surprise examination for your *clients'* funds or securities that are maintai *person*?

(c) If you have answered "yes" to question 8.(a) above, provide the location of the *related person's* office responsible for *custody* of your *clients'* assets:

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: ☐

9. (a) If the *related person* is an investment adviser, is it exempt from registration?

(b) If the answer is yes, under what exemption?

10. (a) Is the *related person* registered with a *foreign financial regulatory authority* ?

(b) If the answer is yes, list the name and country, in English of each *foreign financial regulatory authority* with which the *related person* is registered.

No Information Filed

11. Do you and the *related person* share any *supervised persons*?

12. Do you and the *related person* share the same physical location?

Item 7 *Private Fund* Reporting

B. Are you an adviser to any *private fund*?

If "yes," then for each private fund that you advise, you must complete a Section 7.B.(1) of Schedule D, except in certain circumstances described in the next sentence and in I Part 1A. If you are registered or applying for registration with the SEC or reporting as an SEC exempt reporting adviser, and another SEC-registered adviser or SEC exempt repo information with respect to any such private fund in Section 7.B.(1) of Schedule D of its Form ADV (e.g., if you are a subadviser), do not complete Section 7.B.(1) of Schedule D fund. You must, instead, complete Section 7.B.(2) of Schedule D.

In either case, if you seek to preserve the anonymity of a private fund client by maintaining its identity in your books and records in numerical or alphabetical code, or similar de 2(d), you may identify the private fund in Section 7.B.(1) or 7.B.(2) of Schedule D using the same code or designation in place of the fund's name.

SECTION 7.B.(1) *Private Fund* Reporting

No Information Filed

SECTION 7.B.(2) *Private Fund* Reporting

No Information Filed

Item 8 Participation or Interest in *Client* Transactions

In this Item, we request information about your participation and interest in your *clients*' transactions. This information identifies additional areas in which conflicts of interest may *clients*. Newly-formed advisers should base responses to these questions on the types of participation and interest that you expect to engage in during the next year.

Like Item 7, Item 8 requires you to provide information about you and your *related persons*, including foreign affiliates.

Proprietary Interest in *Client* Transactions

A. Do you or any *related person*:

(1) buy securities for yourself from advisory *clients*, or sell securities you own to advisory *clients* (principal transactions)?

(2) buy or sell for yourself securities (other than shares of mutual funds) that you also recommend to advisory *clients*?

(3) recommend securities (or other investment products) to advisory *clients* in which you or any *related person* has some other proprietary (ownership) interest (other than Items 8.A.(1) or (2))?

Sales Interest in *Client* Transactions

B. Do you or any *related person*:

(1) as a broker-dealer or registered representative of a broker-dealer, execute securities trades for brokerage customers in which advisory *client* securities are sold to or bou customer (agency cross transactions)?

(2) recommend to advisory *clients*, or act as a purchaser representative for advisory *clients* with respect to, the purchase of securities for which you or any *related person* se general or managing partner?

(3) recommend purchase or sale of securities to advisory *clients* for which you or any *related person* has any other sales interest (other than the receipt of sales commission registered representative of a broker-dealer)?

Investment or Brokerage Discretion

C. Do you or any *related person* have *discretionary authority* to determine the:

(1) securities to be bought or sold for a *client's* account?

(2) amount of securities to be bought or sold for a *client's* account?

(3) broker or dealer to be used for a purchase or sale of securities for a *client's* account?

(4) commission rates to be paid to a broker or dealer for a *client's* securities transactions?

D. If you answer "yes" to C.(3) above, are any of the brokers or dealers *related persons*?

E. Do you or any *related person* recommend brokers or dealers to *clients*?

F. If you answer "yes" to E. above, are any of the brokers or dealers *related persons*?

G. (1) Do you or any *related person* receive research or other products or services other than execution from a broker-dealer or a third party ("soft dollar benefits") in connectio transactions?

(2) If "yes" to G.(1) above, are all the "soft dollar benefits" you or any *related persons* receive eligible "research or brokerage services" under section 28(e) of the Securities

H. (1) Do you or any *related person*, directly or indirectly, compensate any *person* that is not an *employee* for *client* referrals?

(2) Do you or any *related person*, directly or indirectly, provide any *employee* compensation that is specifically related to obtaining *clients* for the firm (cash or non-cash com the *employee's* regular salary)?

I. Do you or any *related person*, including any *employee*, directly or indirectly, receive compensation from any *person* (other than you or any *related person*) for *client* referrals?

In your response to Item 8.I., do not include the regular salary you pay to an employee.

In responding to Items 8.H. and 8.I., consider all cash and non-cash compensation that you or a related person gave to (in answering Item 8.H.) or received from (in answeri exchange for client referrals, including any bonus that is based, at least in part, on the number or amount of client referrals.

Item 9 Custody

In this Item, we ask you whether you or a *related person* has *custody* of *client* (other than *clients* that are investment companies registered under the Investment Company Act of custodial practices.

A. (1) Do you have *custody* of any advisory *clients'*:

(a) cash or bank accounts?

(b) securities?

If you are registering or registered with the SEC, answer "No" to Item 9.A.(1)(a) and (b) if you have custody solely because (i) you deduct your advisory fees directly from yo related person has custody of client assets in connection with advisory services you provide to clients, but you have overcome the presumption that you are not operationally Advisers Act rule 206(4)-2(d)(5)) from the related person.

(2) If you checked "yes" to Item 9.A.(1)(a) or (b), what is the approximate amount of *client* funds and securities and total number of *clients* for which you have *custody*:

U.S. Dollar Amount	Total Number of *Clients*
(a) $	(b)

If you are registering or registered with the SEC and you have custody solely because you deduct your advisory fees directly from your clients' accounts, do not include the ar number of those clients in your response to Item 9.A.(2). If your related person has custody of client assets in connection with advisory services you provide to clients, do not assets and number of those clients in your response to 9.A.(2). Instead, include that information in your response to Item 9.B.(2).

B. (1) In connection with advisory services you provide to *clients*, do any of your *related persons* have *custody* of any of your advisory *clients'*:

(a) cash or bank accounts?

(b) securities?

You are required to answer this item regardless of how you answered Item 9.A.(1)(a) or (b).

(2) If you checked "yes" to Item 9.B.(1)(a) or (b), what is the approximate amount of *client* funds and securities and total number of *clients* for which your *related persons* h

U.S. Dollar Amount	Total Number of *Clients*
(a) $	(b)

C. If you or your *related persons* have *custody* of *client* funds or securities in connection with advisory services you provide to *clients*, check all the following that apply:

(1) A qualified custodian(s) sends account statements at least quarterly to the investors in the pooled investment vehicle(s) you manage.

(2) An *independent public accountant* audits annually the pooled investment vehicle(s) that you manage and the audited financial statements are distributed to the investors

(3) An *independent public accountant* conducts an annual surprise examination of *client* funds and securities.

(4) An *independent public accountant* prepares an internal control report with respect to custodial services when you or your *related persons* are qualified custodians for *clie*

If you checked Item 9.C.(2), C.(3) or C.(4), list in Section 9.C. of Schedule D the accountants that are engaged to perform the audit or examination or prepare an internal cor 9.C.(2), you do not have to list auditor information in Section 9.C. of Schedule D if you already provided this information with respect to the private funds you advise in Sectio

D. Do you or your *related person(s)* act as qualified custodians for your *clients* in connection with advisory services you provide to *clients*?

(1) you act as a qualified custodian

(2) your *related person(s)* act as qualified custodian(s)

If you checked "yes" to Item 9.D.(2), all related persons that act as qualified custodians (other than any mutual fund transfer agent pursuant to rule 206(4)-2(b)(1)) must be Schedule D, regardless of whether you have determined the related person to be operationally independent under rule 206(4)-2 of the Advisers Act.

E. If you are filing your *annual updating amendment* and you were subject to a surprise examination by an *independent public accountant* during your last fiscal year, provide the examination commenced:

F. If you or your *related persons* have *custody* of *client* funds or securities, how many *persons*, including, but not limited to, you and your *related persons,* act as qualified custoc connection with advisory services you provide to *clients?*
0

SECTION 9.C. *Independent Public Accountant*

You must complete the following information for each *independent public accountant* engaged to perform a surprise examination, perform an audit of a pooled investment vehicle internal control report. You must complete a separate Schedule D Section 9.C. for each *independent public accountant*.

(1) Name of the *independent public accountant*:
SPICER JEFFRIES

(2) The location of the *independent public accountant's* office responsible for the services provided:

Number and Street 1:		Number and Street 2:	
4601 DTC BLVD STE 700			
City:	State:	Country:	ZIP+4/Postal Code:
DENVER	Colorado	United States	80237

(3) Is the *independent public accountant* registered with the Public Company Accounting Oversight Board?

If "yes," Public Company Accounting Oversight Board-Assigned Number:
349

(4) If "yes" to (3) above, is the *independent public accountant* subject to regular inspection by the Public Company Accounting Oversight Board in accordance with its rules?

(5) The *independent public accountant* is engaged to:

A. ☑ audit a pooled investment vehicle
B. ☑ perform a surprise examination of *clients'* assets
C. ☐ prepare an internal control report

(6) Since your last *annual updating amendment*, did all of the reports prepared by the *independent public accountant* that audited the pooled investment vehicle or that examine unqualified opinions?

○ Yes
○ No
◉ Report Not Yet Received

If you check "Report Not Yet Received", you must promptly file an amendment to your Form ADV to update your response when the accountant's report is available.

Item 10 Control Persons

In this Item, we ask you to identify every *person* that, directly or indirectly, *controls* you. If you are filing an *umbrella registration*, the information in Item 10 should be provided fo

If you are submitting an initial application or report, you must complete Schedule A and Schedule B. Schedule A asks for information about your direct owners and executive office information about your indirect owners. If this is an amendment and you are updating information you reported on either Schedule A or Schedule B (or both) that you filed with yo you must complete Schedule C.

A. Does any *person* not named in Item 1.A. or Schedules A, B, or C, directly or indirectly, *control* your management or policies?

If yes, complete Section 10.A. of Schedule D.

B. If any *person* named in Schedules A, B, or C or in Section 10.A. of Schedule D is a public reporting company under Sections 12 or 15(d) of the Securities Exchange Act of 193 of Schedule D.

SECTION 10.A. *Control Persons*

No Information Filed

SECTION 10.B. *Control Person* Public Reporting Companies

No Information Filed

Item 11 Disclosure Information

In this Item, we ask for information about your disciplinary history and the disciplinary history of all your *advisory affiliates*. We use this information to determine whether to grant to decide whether to revoke your registration or to place limitations on your activities as an investment adviser, and to identify potential problem areas to focus on during our on-si result in "yes" answers to more than one of the questions below. In accordance with General Instruction 5 to Form ADV, "you" and "your" include the *filing adviser* and all *relying a registration*.

Your *advisory affiliates* are: (1) all of your current *employees* (other than *employees* performing only clerical, administrative, support or similar functions); (2) all of your officers, p *person* performing similar functions); and (3) all *persons* directly or indirectly *controlling* you or *controlled* by you. If you are a "separately identifiable department or division" (SID Terms to determine who your *advisory affiliates* are.

If you are registered or registering with the SEC or if you are an exempt reporting adviser, you may limit your disclosure of any event listed in Item 11 to ten years following the da registered or registering with a state, you must respond to the questions as posed; you may, therefore, limit your disclosure to ten years following the date of an event only in resp (2), 11.B.(1), 11.B.(2), 11.D.(4), and 11.H.(1)(a). For purposes of calculating this ten-year period, the date of an event is the date the final order, judgment, or decree was entere appeal from preliminary orders, judgments, or decrees lapsed.

You must complete the appropriate Disclosure Reporting Page ("DRP") for "yes" answers to the questions in this Item 11.

Do any of the events below involve you or any of your *supervised persons*?

For "yes" answers to the following questions, complete a Criminal Action DRP:

A. In the past ten years, have you or any *advisory affiliate*:
   (1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any *felony*?
   (2) been *charged* with any *felony*?

   If you are registered or registering with the SEC, or if you are reporting as an exempt reporting adviser, you may limit your response to Item 11.A.(2) to charges that are cur

B. In the past ten years, have you or any *advisory affiliate*:
   (1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to a *misdemeanor* involving: investments or an *investment-rela* fraud, false statements, or omissions, wrongful taking of property, bribery, perjury, forgery, counterfeiting, extortion, or a conspiracy to commit any of these offenses?
   (2) been *charged* with a *misdemeanor* listed in Item 11.B.(1)?

   If you are registered or registering with the SEC, or if you are reporting as an exempt reporting adviser, you may limit your response to Item 11.B.(2) to charges that are cur

For "yes" answers to the following questions, complete a Regulatory Action DRP:

C. Has the SEC or the Commodity Futures Trading Commission (CFTC) ever:
   (1) *found* you or any *advisory affiliate* to have made a false statement or omission?
   (2) *found* you or any *advisory affiliate* to have been *involved* in a violation of SEC or CFTC regulations or statutes?
   (3) *found* you or any *advisory affiliate* to have been a cause of an *investment-related* business having its authorization to do business denied, suspended, revoked, or restrict
   (4) entered an *order* against you or any *advisory affiliate* in connection with *investment-related* activity?
   (5) imposed a civil money penalty on you or any *advisory affiliate*, or *ordered* you or any *advisory affiliate* to cease and desist from any activity?

D. Has any other federal regulatory agency, any state regulatory agency, or any *foreign financial regulatory authority*:
   (1) ever *found* you or any *advisory affiliate* to have made a false statement or omission, or been dishonest, unfair, or unethical?
   (2) ever *found* you or any *advisory affiliate* to have been *involved* in a violation of *investment-related* regulations or statutes?
   (3) ever *found* you or any *advisory affiliate* to have been a cause of an *investment-related* business having its authorization to do business denied, suspended, revoked, or re
   (4) in the past ten years, entered an *order* against you or any *advisory affiliate* in connection with an *investment-related* activity?
   (5) ever denied, suspended, or revoked your or any *advisory affiliate's* registration or license, or otherwise prevented you or any *advisory affiliate*, by *order*, from associating *related* business or restricted your or any *advisory affiliate's* activity?

E. Has any *self-regulatory organization* or commodities exchange ever:
   (1) *found* you or any *advisory affiliate* to have made a false statement or omission?
   (2) *found* you or any *advisory affiliate* to have been *involved* in a violation of its rules (other than a violation designated as a "*minor rule violation*" under a plan approved by
   (3) *found* you or any *advisory affiliate* to have been the cause of an *investment-related* business having its authorization to do business denied, suspended, revoked, or restri
   (4) disciplined you or any *advisory affiliate* by expelling or suspending you or the *advisory affiliate* from membership, barring or suspending you or the *advisory affiliate* from members, or otherwise restricting your or the *advisory affiliate's* activities?

F. Has an authorization to act as an attorney, accountant, or federal contractor granted to you or any *advisory affiliate* ever been revoked or suspended?

G. Are you or any *advisory affiliate* now the subject of any regulatory *proceeding* that could result in a "yes" answer to any part of Item 11.C., 11.D., or 11.E.?

For "yes" answers to the following questions, complete a Civil Judicial Action DRP:

H. (1) Has any domestic or foreign court:
   (a) in the past ten years, *enjoined* you or any *advisory affiliate* in connection with any *investment-related* activity?
   (b) ever *found* that you or any *advisory affiliate* were *involved* in a violation of *investment-related* statutes or regulations?
   (c) ever dismissed, pursuant to a settlement agreement, an *investment-related* civil action brought against you or any *advisory affiliate* by a state or *foreign financial reg*
   (2) Are you or any *advisory affiliate* now the subject of any civil *proceeding* that could result in a "yes" answer to any part of Item 11.H.(1)?

Item 12 Small Businesses

The SEC is required by the Regulatory Flexibility Act to consider the effect of its regulations on small entities. In order to do this, we need to determine whether you meet the defin organization" under rule 0-7.

Answer this Item 12 only if you are registered or registering with the SEC **and** you indicated in response to Item 5.F.(2)(c) that you have regulatory assets under management of l required to answer this Item 12 if you are filing for initial registration as a state adviser, amending a current state registration, or switching from SEC to state registration.

For purposes of this Item 12 only:

- Total Assets refers to the total assets of a firm, rather than the assets managed on behalf of *clients*. In determining your or another *person's* total assets, you may use the to balance sheet (but use total assets reported on a consolidated balance sheet with subsidiaries included, if that amount is larger).
- *Control* means the power to direct or cause the direction of the management or policies of a *person*, whether through ownership of securities, by contract, or otherwise. Any has the right to vote 25 percent or more of the voting securities, or is entitled to 25 percent or more of the profits, of another *person* is presumed to *control* the other *perso*

A. Did you have total assets of $5 million or more on the last day of your most recent fiscal year?

If "yes," you do not need to answer Items 12.B. and 12.C.

B. Do you:

(1) *control* another investment adviser that had regulatory assets under management (calculated in response to Item 5.F.(2)(c) of Form ADV) of $25 million or more on the la recent fiscal year?

(2) *control* another *person* (other than a natural person) that had total assets of $5 million or more on the last day of its most recent fiscal year?

C. Are you:

(1) *controlled* by or under common *control* with another investment adviser that had regulatory assets under management (calculated in response to Item 5.F.(2)(c) of Form more on the last day of its most recent fiscal year?

(2) *controlled* by or under common *control* with another *person* (other than a natural person) that had total assets of $5 million or more on the last day of its most recent fisc

Schedule A

Direct Owners and Executive Officers

1. Complete Schedule A only if you are submitting an initial application or report. Schedule A asks for information about your direct owners and executive officers. Use Schedule C
2. Direct Owners and Executive Officers. List below the names of:
   (a) each Chief Executive Officer, Chief Financial Officer, Chief Operations Officer, Chief Legal Officer, Chief Compliance Officer(Chief Compliance Officer is required if you are regis and cannot be more than one individual), director, and any other individuals with similar status or functions;
   (b) if you are organized as a corporation, each shareholder that is a direct owner of 5% or more of a class of your voting securities, unless you are a public reporting company (or 15(d) of the Exchange Act);
   Direct owners include any *person* that owns, beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 5% or more of a class of your voting secu Schedule, a *person* beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, fathe law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or
   (c) if you are organized as a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 5% or
   (d) in the case of a trust that directly owns 5% or more of a class of your voting securities, or that has the right to receive upon dissolution, or has contributed, 5% or more of trustee; and
   (e) if you are organized as a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 5% or more of your capita managers, all elected managers.
3. Do you have any indirect owners to be reported on Schedule B? (•) Yes ( ) No
4. In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner or exec
5. Complete the Title or Status column by entering board/management titles; status as partner, trustee, sole proprietor, elected manager, shareholder, or member; and for shareho securities owned (if more than one is issued).
6. Ownership codes are: NA - less than 5% B - 10% but less than 25% D - 50% but less than 75%
   A - 5% but less than 10% C - 25% but less than 50% E - 75% or more
7. (a) In the *Control Person* column, enter "Yes" if the *person* has *control* as defined in the Glossary of Terms to Form ADV, and enter "No" if the *person* does not have *control*. Not executive officers and all 25% owners, general partners, elected managers, and trustees are *control persons*.
   (b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.
   (c) Complete each column.

FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name)	**DE/FE/I**	**Title or Status**	**Date Title or Status Acquired MM/YYYY**	**Ownership Code**	***Control Person***	**PR**	***CRD* No. If None: S. Tax No. or Employe**
RILEY, ZORAH, JANE	I	CHIEF COMPLIANCE OFFICER	06/2001	NA	Y	N	3015509
WICKERSHAM, SEAN, DAVID	I	PRESIDENT	02/2018	NA	Y	N	4994630
Mann, Warren, Brennan	I	PRINCIPAL OPERATIONS OFFICER	01/2022	NA	Y	N	4871135
SIMPLICITY FINANCIAL MARKETING HOLDINGS INC	DE	OWNER	08/2023	E	Y	N	26-1553695
DONALDSON, BRUCE, GEORGE	I	BOARD MEMBER	08/2023	NA	Y	N	5851175
MCCANN, ERIN, BARTLETT	I	BOARD MEMBER	08/2023	NA	Y	N	2943981
LEIDNER, MITCHELL, MARC	I	BOARD MEMBER	08/2023	NA	Y	N	2420094
Tiller, Benjamin, Ryan	I	DIRECTOR OF ADVISORY SERVICES	01/2024	NA	Y	N	5742792

Schedule B

Indirect Owners

1. Complete Schedule B only if you are submitting an initial application or report. Schedule B asks for information about your indirect owners; you must first complete Schedule A, about your direct owners. Use Schedule C to amend this information.
2. Indirect Owners. With respect to each owner listed on Schedule A (except individual owners), list below:
   (a) in the case of an owner that is a corporation, each of its shareholders that beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 25% or mo of that corporation;

   For purposes of this Schedule, a *person* beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise o purchase the security.

   (b) in the case of an owner that is a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed partnership's capital;

   (c) in the case of an owner that is a trust, the trust and each trustee; and

   (d) in the case of an owner that is a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 25% or more of t managed by elected managers, all elected managers.
3. Continue up the chain of ownership listing all 25% owners at each level. Once a public reporting company (a company subject to Sections 12 or 15(d) of the Exchange Act) is re information need be given.
4. In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner is an i
5. Complete the Status column by entering the owner's status as partner, trustee, elected manager, shareholder, or member; and for shareholders or members, the class of securi issued).
6. Ownership codes are: C - 25% but less than 50% E - 75% or more
   D - 50% but less than 75% F - Other (general partner, trustee, or elected manager)
7. (a) In the *Control Person* column, enter "Yes" if the *person* has *control* as defined in the Glossary of Terms to Form ADV, and enter "No" if the *person* does not have *control*. No most executive officers and all 25% owners, general partners, elected managers, and trustees are *control persons*.
   (b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.
   (c) Complete each column.

FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name)	**DE/FE/I**	**Entity in Which Interest is Owned**	**Status**	**Date Status Acquired MM/YYYY**	**Ownership Code**	***Control Person***	**PR**	***CRD* No. If Birth, IRS**
SIMPLICITY FINANCIAL MARKETING GROUP HOLDINGS INC.	DE	SIMPLICITY FINANCIAL MARKETING HOLDINGS INC	SHAREHOLDER	02/2018	E	Y	N	82-4380464
PEQUOD MIDCO INC	DE	SIMPLICITY FINANCIAL MARKETING GROUP HOLDINGS INC.	SHAREHOLDER	12/2020	E	Y	N	85-3494153
PEQUOD TOPCO INC	DE	PEQUOD MIDCO INC	SHAREHOLDER	12/2020	E	Y	N	85-3481836
SYMMETRY INVESTOR AGGREGATOR, LP	DE	SIMPLICITY GROUP HOLDINGS, LP	LIMITED PARTNER	12/2024	D	Y	N	99-4775212
SIMPLICITY GROUP HOLDINGS, LP	DE	PEQUOD TOPCO INC	SHAREHOLDER	10/2020	E	Y	N	85-3533047
SKYKNIGHT CAPITAL FIND IV, L.P.	DE	SYMMETRY INVESTOR AGGREGATOR, LP	LIMITED PARTNER	01/2023	C	Y	N	92-2011162
SKYKNIGHT FINANCIAL HOLDINGS, L.P.	DE	SYMMETRY INVESTOR AGGREGATOR, LP	LIMITED PARTNER	07/2024	C	Y	N	99-4026379
DRAGONEER OPPORTUNITIES FUND VI, L.P.	DE	SYMMETRY INVESTOR AGGREGATOR, LP	LIMITED PARTNER	08/2021	C	Y	N	98-1618627

Schedule D - Miscellaneous

You may use the space below to explain a response to an Item or to provide any other information.

Schedule R

No Information Filed

DRP Pages

CRIMINAL DISCLOSURE REPORTING PAGE (ADV)

No Information Filed

REGULATORY ACTION DISCLOSURE REPORTING PAGE (ADV)

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP ADV) is an ○ INITIAL ***OR*** ◉ AMENDED response used to report details for affirmative responses to Items 11.C., 11.D., 11.E., 11.F. or 11.G.

Regulatory Action

Check item(s) being responded to:

☐ 11.C(1)	☐ 11.C(2)	☐ 11.C(3)	☐ 11.C(4)	☐ 11.C(5
☐ 11.D(1)	☑ 11.D(2)	☐ 11.D(3)	☐ 11.D(4)	☑ 11.D(5
☐ 11.E(1)	☑ 11.E(2)	☐ 11.E(3)	☑ 11.E(4)	
☐ 11.F.	☐ 11.G.			

Use a separate DRP for each event or *proceeding* . The same event or *proceeding* may be reported for more than one *person* or entity using one DRP. File with a completed Execut

One event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gi one regulator, provide details for each action on a separate DRP.

PART I

A. The *person(s)* or entity(ies) for whom this DRP is being filed is (are):

○ You (the advisory firm)

○ You and one or more of your *advisory affiliates*

◉ One or more of your *advisory affiliates*

If this DRP is being filed for an *advisory affiliate*, give the full name of the *advisory affiliate* below (for individuals, Last name, First name, Middle name).
If the *advisory affiliate* has a *CRD* number, provide that number. If not, indicate "non-registered" by checking the appropriate box.

ADV DRP - *ADVISORY AFFILIATE*

CRD Number:	2171289	This *advisory affiliate* is ○ a Firm ◉ an Individual
Registered:	◉ Yes ○ No	
Name:	BUCARO, PHILLIP, JOHN (For individuals, Last, First, Middle)	

CRD Number:	256420	This *advisory affiliate* is ○ a Firm ◉ an Individual
Registered:	◉ Yes ○ No	
Name:	Jacobs, James, Allen (For individuals, Last, First, Middle)	

☐ This DRP should be removed from the ADV record because the *advisory affiliate(s)* is no longer associated with the adviser.
☐ This DRP should be removed from the ADV record because: (1) the event or *proceeding* occurred more than ten years ago or (2) the adviser is registered or applying for reporting as an *exempt reporting adviser* with the SEC and the event was resolved in the adviser's or *advisory affiliate's* favor.

If you are registered or registering with a *state securities authority* , you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that eve years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.

☐ This DRP should be removed from the ADV record because it was filed in error, such as due to a clerical or data-entry mistake. Explain the circumstances:

B. If the *advisory affiliate* is registered through the IARD system or *CRD* system, has the *advisory affiliate* submitted a DRP (with Form ADV, BD or U-4) to the IARD or *CRD* for "Yes," no other information on this DRP must be provided.

◉ Yes ○ No

NOTE: The completion of this form does not relieve the *advisory affiliate* of its obligation to update its IARD or *CRD* records.

PART II

1. Regulatory Action initiated by:

○ SEC ○ Other Federal ○ State ○ *SRO* ○ Foreign
(Full name of regulator, *foreign financial regulatory authority*, federal, state, or *SRO*)

2. Principal Sanction:

Other Sanctions:

3. Date Initiated (MM/DD/YYYY):

○ Exact ○ Explanation

If not exact, provide explanation:

4. Docket/Case Number:

5. *Advisory Affiliate* Employing Firm when activity occurred which led to the regulatory action (if applicable):

6. Principal Product Type:

Other Product Types:

7. Describe the allegations related to this regulatory action (your response must fit within the space provided):

8. Current Status? ○ Pending ○ On Appeal ○ Final

9. If on appeal, regulatory action appealed to (SEC, *SRO,* Federal or State Court) and Date Appeal Filed:

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

10. How was matter resolved:

11. Resolution Date (MM/DD/YYYY):

○ Exact ○ Explanation

If not exact, provide explanation:

12. Resolution Detail:

A. Were any of the following Sanctions *Ordered* (check all appropriate items)?

☐ Monetary/Fine Amount: $

☐ Revocation/Expulsion/Denial

☐ Censure

☐ Bar

☐ Disgorgement/Restitution

☐ Cease and Desist/Injunction

☐ Suspension

B. Other Sanctions *Ordered:*

Sanction detail: if suspended, *enjoined* or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Princip
exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If dis
penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an *advisory affiliate*, date paid and if any portion of p

13. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the space

CIVIL JUDICIAL ACTION DISCLOSURE REPORTING PAGE (ADV)

No Information Filed

Part 2

Exemption from brochure delivery requirements for SEC-registered advisers

SEC rules exempt SEC-registered advisers from delivering a firm brochure to some kinds of clients. If these exemptions excuse you from delivering a brochure to *all* of your advis
prepare a brochure.

Are you exempt from delivering a brochure to all of your clients under these rules?

If no, complete the ADV Part 2 filing below.

Amend, retire or file new brochures:

Brochure ID	Brochure Name	Brochure Type(s)
412605	TLG ADVISORS FORM ADV BROCHURE 2025	Individuals, High net worth individuals, F plans, Foundations/charities, Other instit Financial Planning Services, Selection of
427512	2026 BROCHURE OF TLG ADVISORS	Individuals, High net worth individuals, F plans, Pension consulting, Foundations/c Other institutional, Financial Planning Se Advisers/Solicitors

Part 3

CRS	Type(s)	Affiliate Info
	Investment Adviser	

Execution Pages

DOMESTIC INVESTMENT ADVISER EXECUTION PAGE

You must complete the following Execution Page to Form ADV. This execution page must be signed and attached to your initial submission of Form ADV to the SEC and all amendm

Appointment of Agent for Service of Process

By signing this Form ADV Execution Page, you, the undersigned adviser, irrevocably appoint the Secretary of State or other legally designated officer, of the state in which you ma *place of business* and any other state in which you are submitting a *notice filing*, as your agents to receive service, and agree that such *persons* may accept service on your behalf summons, *order* instituting *proceedings*, demand for arbitration, or other process or papers, and you further agree that such service may be made by registered or certified mail, i administrative *proceeding* or arbitration brought against you in any place subject to the jurisdiction of the United States, if the action, *proceeding*, or arbitration (a) arises out of a your investment advisory business that is subject to the jurisdiction of the United States, and (b) is *founded*, directly or indirectly, upon the provisions of: (i) the Securities Act of Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these acts, or (you maintain your *principal office and place of business* or of any state in which you are submitting a *notice filing*.

Signature

I, the undersigned, sign this Form ADV on behalf of, and with the authority of, the investment adviser. The investment adviser and I both certify, under penalty of perjury under th America, that the information and statements made in this ADV, including exhibits and any other information submitted, are true and correct, and that I am signing this Form ADV voluntary act.

I certify that the adviser's books and records will be preserved and available for inspection as required by law. Finally, I authorize any *person* having *custody* or possession of thes them available to federal and state regulatory representatives.

Signature:
Z JANE RILEY

Date: MM/DD/YYYY
03/28/2026

Printed Name:
Z JANE RILEY

Title:
CHIEF COMPLIANCE OFFICER

Adviser *CRD* Number:
111052

***NON-RESIDENT* INVESTMENT ADVISER EXECUTION PAGE**

You must complete the following Execution Page to Form ADV. This execution page must be signed and attached to your initial submission of Form ADV to the SEC and all amendm

1. Appointment of Agent for Service of Process

By signing this Form ADV Execution Page, you, the undersigned adviser, irrevocably appoint each of the Secretary of the SEC, and the Secretary of State or other legally designate which you are submitting a *notice filing*, as your agents to receive service, and agree that such persons may accept service on your behalf, of any notice, subpoena, summons, *orc* demand for arbitration, or other process or papers, and you further agree that such service may be made by registered or certified mail, in any federal or state action, administrat brought against you in any place subject to the jurisdiction of the United States, if the action, *proceeding* or arbitration (a) arises out of any activity in connection with your invest subject to the jurisdiction of the United States, and (b) is *founded*, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these acts, or (ii) the laws of any state in which you a

2. Appointment and Consent: Effect on Partnerships

If you are organized as a partnership, this irrevocable power of attorney and consent to service of process will continue in effect if any partner withdraws from or is admitted to th admission or withdrawal does not create a new partnership. If the partnership dissolves, this irrevocable power of attorney and consent shall be in effect for any action brought ag partners.

3. *Non-Resident* Investment Adviser Undertaking Regarding Books and Records

By signing this Form ADV, you also agree to provide, at your own expense, to the U.S. Securities and Exchange Commission at its principal office in Washington D.C., at any Regio Commission, or at any one of its offices in the United States, as specified by the Commission, correct, current, and complete copies of any or all records that you are required to n the Investment Advisers Act of 1940. This undertaking shall be binding upon you, your heirs, successors and assigns, and any *person* subject to your written irrevocable consents your general partners and *managing agents*.

Signature

I, the undersigned, sign this Form ADV on behalf of, and with the authority of, the *non-resident* investment adviser. The investment adviser and I both certify, under penalty of per United States of America, that the information and statements made in this ADV, including exhibits and any other information submitted, are true and correct, and that I am signi as a free and voluntary act.

I certify that the adviser's books and records will be preserved and available for inspection as required by law. Finally, I authorize any *person* having *custody* or possession of thes them available to federal and state regulatory representatives.

Signature:

Date: MM/DD/YYYY

Printed Name:

Title:

Adviser *CRD* Number:
111052