

Advisory Account Suitability Form

Rep ID/G Number

Instructions: To be completed concurrently when opening an account with an external custodian under the HighPoint Advisor Group RIA. Please email the completed form to HighPoint Compliance at IFAdocs@hightpoint.com

1. Account Information

RIA Firm Name	Primary Advisor	Date Opened	This form is for:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> New Account <input type="checkbox"/> An Existing Account*
Name of External Custodian	External Custodian Account Number		
<input type="text"/>	<input type="text"/>		

*For existing accounts, use this form to report a change in the account holder's legal name, investment objective and/ or financial information

Section I: Account Information

1. Residency Information

Account Holder's current residency status: (choose only one)

U.S. Citizen Resident Alien Non-Resident Alien

Country of Citizenship

2. Registration Type

<input type="checkbox"/> Individual	<input type="checkbox"/> Personal Trust	<input type="checkbox"/> Partnership
<input type="checkbox"/> Joint Tenants with Rights of Survivorship	<input type="checkbox"/> FLA/SEP/SIMPLE	<input type="checkbox"/> Investment Club
<input type="checkbox"/> Tenants in Common	<input type="checkbox"/> Qualified Retirement Plan/403(b)(7)	<input type="checkbox"/> Guardianship/Conservatorship
<input type="checkbox"/> Traditional IRA	<input type="checkbox"/> Corporate	<input type="checkbox"/> Estate
<input type="checkbox"/> Beneficiary IRA	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Other (Please specify below)
<input type="checkbox"/> Roth IRA	<input type="checkbox"/> Custodian for Minor	<input type="text"/>

3. Account Registration

Section II: Investment Objective

1. Select the investment objective that most accurately reflects the goals for this account (choose only one):

- A. Income with Capital Preservation. Designed as a longer term accumulation account, this is the most conservative investment objective. Emphasis is placed on generation of current income and preservation of capital loss.
- B. Income with Moderate Growth. Emphasis is placed on generation of current income with a secondary focus on moderate capital growth.
- C. Growth with Income. Emphasis is placed on modest capital growth with some focus on generation of current income.
- D. Growth. Emphasis is placed on achieving high long-term growth and capital appreciation. There is little focus on generation of current income.
- E. Aggressive Growth. Emphasis is placed on aggressive growth and maximum capital appreciation. No focus on generation of current income. This objective has a very high level of risk and is for investors with a long term horizon.

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Section III: Financial Information and Experience

1. Investment Information

Enter the letter that corresponds to the correct range:

Annual income? Net worth? (exclusive of home) Liquid net worth? Approximate account value?

A. \$1 - \$25,000	B. \$25,000 - \$49,999	C. \$50,000 - \$99,999	D. \$100,000 - \$249,999
E. \$250,000 - \$499,999	F. \$500,000 - \$749,999	G. \$750,000 - \$999,999	H. \$1,000,000 and over

Source of Account Holder Wealth and Income (inheritance, employment salary, sale of real estate, etc.):

Federal income tax bracket? (%)

Investment Experience (number of years):

Annuities Mutual Funds Partnerships Margin Stocks Bonds
Options Other Other (please specify):

Section IV: Annual Fee

1. Annual Fee Information

Annual Fee Rate

Flat Fee \$

Note: If the account is billed on a tiered, incremental, or breakpoint fee schedule, enter the approximate rate expressed on an annualized basis.

Section V: Acknowledge and Execution

1. Branch Use Only

I hereby certify that:

- I agree to notify HighPoint Advisor Group of any changes to the account holder's legal name, investment objective or financial information.
- I may not participate in any securities transactions or strategies for this account which are not approved products or strategies of HighPoint Advisor Group.

Client Signature

Client Name (print)

Date

Joint Client Signature (if applicable)

Joint Client Name (print) (if applicable)

Date

Financial Advisor Signature (unless same as Branch Manager)

Financial Advisor Name (print)

Date

Joint Financial Advisor Signature (unless same as Branch Manager)

Financial Advisor Name (print)

Date

Branch Manager or CCO Signature (required)

Branch Manager or CCO (print)

Date

