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FORM ADV UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: R.V. KUHNS & ASSOCIATES, INC. CRD Number: 18005

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ADV Part 1A, Page 1

WARNING: Complete this form truthfully. False statements or omissions may result in denial of your application, revocation of your registration, or criminal prosecution. You must keep this form updated by filing periodic amendments. See Form ADV General Instruction 3.

Item 1 Identifying Information

Responses to this Item tell us who you are, where you are doing business, and how we can contact you.

- Your full legal name (if you are a sole proprietor, your last, first, and middle names): R.V. KUHNS & ASSOCIATES, INC.
- В. Name under which you primarily conduct your advisory business, if different from Item 1.A. R.V. KUHNS & ASSOCIATES, INC.

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

- C. If this filing is reporting a change in your legal name (Item 1.A.) or primary business name (Item 1.B.), enter the new name and specify whether the name change is of
 - \square vour legal name or \square your primary business name:
- D. If you are registered with the SEC as an investment adviser, your SEC file number: 801-27679
- E. If you have a number ("CRD Number") assigned by FINRA's CRD system or by the IARD system, your CRD number: 18005

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.

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Item 1 Identifying Information (Continued)

F. Principal Office and Place of Business

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

Number and Street 2: Number and Street 1:

111 SW NAITO PARKWAY

City: State: Country: ZIP+4/Postal Code:

PORTLAND OR UNITED STATES 97204-3512

		FC	ORM ADV	
	City:	State:	Country:	ZIP+4/Postal Code:
and place of business address in Item 1.F.: Number and Street 1:			Number and Stre	et 2:
Н.				if different from your <i>principal office</i>
		a private residence, check		
	City:	State:	Country:	ZIP+4/Postal Code:
G.	Mailing address, if Number and Stree	different from your <i>prind</i> et 1:	cipal office and place Number and Stre	
	503-802-6936	ber at this location:		
	503-221-4200			
	8:00 A.M. TO !	nber at this location:		
		ess hours at this location:		
	,	iday C Other:		
		•	ct business at your	principal office and place of business:
	are registered largest five of	d. If you are applying for a ffices in terms of numbers	registration, or are s of employees.	e registered only, with the SEC, list the
	· ·	· ·		curities authorities, you must list all of ing for registration or with whom you
		•	3	ness. If you are applying for
				your principal office and place of
	If this address	s is a private residence, c	theck this box:	

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Item 1 Identifying Information (Continued)

YES NO

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I. Do you have World Wide Web site addresses?

 \odot \circ

If "yes," list these addresses on Section 1.1. of Schedule D. If a web address serves as a portal through which to access other information you have published on the World Wide Web, you may list the portal without listing addresses for all of the other information. Some advisers may need to list more than one portal address. Do not provide individual electronic mail addresses in response to this Item.

J. Contact *Employee*:

Name: Title:

ROGERS, LINDA D CONTROLLER
Telephone Number: Facsimile Number: (503)221-4200 (503)802-6936

Number and Street 1:

	111 SW NAITO P	ARKWAY				
	City:	State:	Country:	ZIP+4/Postal Co	de:	
	PORTLAND	OR	UNITED STATES	97204-3512		
	Electronic mail (e LINDA.ROGERS@	e-mail) address, if contact	ct <i>employee</i> has one:			
			ovee whom you have authorize	ed to receive informa	tion .	and
	•			a to receive innerma	.,,,,,	arra
					YFS	NO
K	Do you maintain	some or all of the books	and records you are required t			
K.	Section 204 of th	e Advisers Act, or simila		· ·	٠	
	If "yes," complet	e Section 1.K. of Schedu	ıle D.			
					YES	NO
L.	Are you registere	ed with a <i>foreign financia</i>	l regulatory authority?		\circ	\odot
	Answer "no" if yo	ou are not registered with	h a foreign financial regulatory	authority, even if		
	you have an affil	iate that is registered wi	th a foreign financial regulatory	authority. If "yes",		
	complete Section	1.L. of Schedule D.				
Prim	nary Business Na	ıme: R.V. KUHNS & AS	SOCIATES, INC.	CRD Numbe	r: 18	3005
ADV	/ - Amendment	, Page 4		Rev. 1	1/2	2010
6/2	4/2011 1:28:0	8 PM				
Iten	n 2 SEC Registra	tion				
			-	_		
	•		for SEC registration or submitti	ng an <i>annual updatir</i>	ng	
Α.			· ·		4(1)	
	-		-	• •		
	The contact employee should be an employee whom you have authorized to receive information a respond to questions about this Form ADV. YES K. Do you maintain some or all of the books and records you are required to keep under Section 204 of the Advisers Act, or similar state law, somewhere other than your principal office and place of business? If "yes," complete Section 1.K. of Schedule D. YES					
	See Part	1A Instruction 2.a. to de	etermine whether you should c	heck this box.		
	(2) have you	ur principal office and pla	ace of business in Wyoming;			
	(3) have you	ır principal office and pla	ace of business outside the Unit	ed States;		
	(4) are an ir	vestment adviser (or su	b-adviser) to an investment co	mpany registered un	der t	he

Number and Street 2:

See Part 1A Instruction 2.b. to determine whether you should check this box.

[(5) have been designated as a nationally recognized statistical rating organization;

Investment Company Act of 1940;

See Part 1A Instruction 2.c. to determine whether you should check this box. (6) are a pension consultant that qualifies for the exemption in rule 203A-2(b); See Part 1A Instruction 2.d. to determine whether you should check this box. (7) are relying on rule 203A-2(c) because you are an investment adviser that *controls*, is controlled by, or is under common control with, an investment adviser that is registered with the SEC, and your principal office and place of business is the same as the registered adviser; See Part 1A Instruction 2.e. to determine whether you should check this box. If you check this box, complete Section 2.A(7) of Schedule D. (8) are a newly formed adviser relying on rule 203A-2(d) because you expect to be eligible for SEC registration within 120 days; See Part 1A Instruction 2.f. to determine whether you should check this box. If you check this box, complete Section 2.A(8) of Schedule D.

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Primary Business Name: R.V. KUHNS & ASSOCIATES, INC. CRD Number: 18005 ADV - Amendment, Page 5 Rev. 11/2010

Item 2 SEC I	Registration (Continued)
(9)	are a multi-state adviser relying on rule 203A-2(e);
	See Part 1A Instruction 2.g. to determine whether you should check this box. If you check this box, complete Section 2.A(9) of Schedule D.
<u> </u>)) are an Internet investment adviser relying on rule 203A-2(f);
	See Part 1A Instructions 2.h. to determine whether you should check this box.
<u> </u>	1) have received an SEC <i>order</i> exempting you from the prohibition against registration with the SEC;
	If you checked this box, complete Section 2.A(11) of Schedule D.
☐ (12)	2) are no longer eligible to remain registered with the SEC.
	See Part 1A Instructions 2.i. to determine whether you should check this box.
а сору с	tate laws, SEC-registered advisers may be required to provide to <i>state securities authorities</i> of the Form ADV and any amendments they file with the SEC. These are called <i>notice filings</i> . In an initial application, check the box(es) next to the state(s) that you would like to receive

your <i>notice filing</i> receive notice of	s to additional state(s), check this and all subsequent fi	neck the box(es) next to the SE	s is an amendment to direct ne state(s) that you would like to C. If this is an amendment to		
		s from going to state(s) the	at currently receive them,		
AL	(es) next to those state(s)	л. П мо	□ _{PA}		
□ _{AK}	☑ IL	□ _{MT}	□ _{PR}		
□ _{AZ}		□ _{NE}	□ _{RI}		
□ AR	□ _{IA}	□ _{NV}	□ _{SC}		
☑ CA	□ _{KS}	□ _{NH}	□ _{SD}		
□ co	□ _{KY}	□ NJ	□ _{TN}		
□ _{CT}	☑ LA	□ _{NM}	□ _{TX}		
□ DE	□ ME	✓ NY	□ _{UT}		
□ DC	□ _{MD}	□ _{NC}	✓ VT		
▼ FL	□ _{MA}	□ _{ND}	□ _{VI}		
□ GA	□ MI	✓ OH	□ _{VA}		
□ _{GU}	□ _{MN}	□ ок	₩A		
□ HI	□ _{MS}	✓ OR	□ wv		
112			□ wi		
receives them ar	nd you do not want to pay It filed before the end of t	that state's notice filing for	n going to a state that currently ee for the coming year, your		
How are you orga					
CorporationPartnership	C Sole Proprietorship		ted Liability Partnership (LLP) er (specify):		
If you are chang	ing your response to this	Item, see Part 1A Instruct	ion 4.		
FORM ADV UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION					
mary Business Na	ıme: R.V. KUHNS & ASS	OCIATES, INC.	CRD Number: 1800!		
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m 3 Form Of Orga	anization (Continued)				
In what month December	does your fiscal year end	each year?			

		ountry: NITED STATES					
Iter	n 4 Successio						
						YES	NO
	adviser?	time of this filing, succe		s of a registered ir	nvestment	0	•
		ete Item 4.B. and Section	n 4 of Schedule D.				
В.	Date of Success	sion: (MM/DD/YYYY)					
	•	eady reported this succe in. Instead, check "No."	·	•	o not report th	ne	
Iter	n 5 Informatio	on About Your Adviso	ry Business				
	•	tem help us understand	•				ons,
	-	h data we use when mal			on 5.a. provid	es	
auu	itional guidance	e to newly-formed advis	ers for completing th	is item 5.			
<u>Em</u> į	<u>ployees</u>						
A.		y how many <i>employees</i> erical workers.	do you have? Include	e full and part-time	e <i>employees</i> b	ut do n	ot
	C _{1- 5}	C ₆₋₁₀	C ₁₁₋₅₀	⊙ 51-250	C ₂₅₁₋₅	500	
	C _{501-1,000}	O More than 1,000	If more than 1,00 (round to the ne	· · ·			
В.							
	(1) Approxim research)	ately how many of these?	e <i>employees</i> perform	investment advise	ory functions (includi	ng
	\circ 0	○ ₁₋₅	C ₆₋₁₀	⊙ 11-50	C 51-25	50	
	C ₂₅₁₋₅	O 501-1,000	C _{More than}	If more than 1 (round to the	1,000, how ma e nearest 1,00	-	
	(2) Approxim	ately how many of these	e <i>employees</i> are regi	stered representat	ives of a brok	er-deal	ler?
	⊙ 0	C ₁₋₅	C ₆₋₁₀	C ₁₁₋₅₀	C 51-25	50	
	C ₂₅₁₋₅	O ₀ 501-1,000	C _{More than}		than 1,000, how many? to the nearest 1,000)		
	to Items	e organized as a sole pro 5.A(1) and 5.B(2). If an loyee in each of your res	employee performs	more than one fur			

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Ite	tem 5 Information About Your Advisory Business (Continued)									
	(3)			other <i>persons</i> solici			nts on y			
		⊙ 0	C ₁₋₅	C ₆₋₁₀	О	11-50		C 51	-250	
		C ₂₅₁₋₅₀₀	C _{501-1,000}	C _{More than} 1,000				00, how earest 1		
		•		do not count any of employees that solid	-			count a	firm on	ly once
<u>Clie</u>	<u>ents</u>									
C.		proximately ho		you provide investm	ent ad	visory s	services	during	your m	ost-
	\circ_{0}	,	C ₁₋₁₀	C ₁₁₋₂₅	O 26	5-100		O 101	-250	
	⊙ 25	1-500	C More than 500	If more than 500, I (round to the neare						
D.	appro			icate the e of <i>client</i> comprises	None	Up to 10%	11- 25%	26- 50%	51- 75%	More Than 75%
	(1)	Individuals (other than <i>high net</i>	worth individuals)	•	0	0	0	0	0
	(2)	High net wo	rth individuals		0	⊙	0	0	0	0
	(3)	Banking or t	hrift institutions		⊙	0	0	0	0	0
	(4)	Investment	companies (includin	g mutual funds)	⊙	0	0	0	0	0
	(5)	Pension and participants	profit sharing plans)	(other than plan	0	0	0	0	•	0
	(6)	Other pooled funds)	d investment vehicle	es (e.g., hedge	•	O	0	0	0	0
	(7)	Charitable o	rganizations		0	0	\odot	0	0	0
	(8)	Corporations	s or other businesse	s not listed above	0	\odot	\circ	0	0	0
	(9)	State or mu	nicipal government	entities	\circ	\odot	\circ	0	\circ	0
	(10)	Other:			⊙	\circ	\circ	0	\circ	0
				its, estates, 401(k) p pusinesses organized					and the	ir
		any registerea	,	ursuant to an investr ent Company Act of						

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Item 5 Information About Your Advisory Business (Continued)							
Compens	Compensation Arrangements						
E. You a	are compensated for your inve	estment	advisory services by (c	heck all that apply):			
□(:	1) A percentage of assets und	ler your	management				
☑ (2	2) Hourly charges						
□(:	3) Subscription fees (for a new	wsletter	or periodical)				
☑ (4	4) Fixed fees (other than subs	scriptior	n fees)				
□ (!	5) Commissions						
□ (6	5) Performance-based fees						
☑ (7) Other (specify): BASIS PT.	ON POI	RTFOLIO VALUE				
Assets Ur	nder Management						
					YES	NO	
	o you provide continuous and ecurities portfolios?	regular	r supervisory or manage	ement services to	0	•	
(2) If	yes, what is the amount of y						
	lia anaki ana m		ollar Amount	Total Number of Account	:S		
	•	(a) \$ (b) \$		(d) (e)			
	otal:	(c) \$		(f)			
	art 1A Instruction 5.b. explain nese instructions carefully who			under management. You r	nust f	ollow	
Advisory	<u>Activities</u>						
G. Wha	at type(s) of advisory services	s do you	ı provide? Check all that	apply.			
	(1) Financial planning servic	es					
	(2) Portfolio management fo		duals and/or small busin	iesses			
	(3) Portfolio management fo	r invest	ment companies				
	(4) Portfolio management fo	r busine	esses or institutional clie	ents (other than investmer	nt		
	companies)						
	(5) Pension consulting service						
	(6) Selection of other advisers(7) Publication of periodicals or newsletters						
	(8) Security ratings or pricin						
	(9) Market timing services	g servic					
	(10) Other (specify): ASSET ALLOCATION ADVICE; MANAGER / INVESTMENT ADVICE; PERFORMANCE EVALUATION AND REPORTING; OTHER CONSULTING SERVICES.						

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 Company Act of 1940.

FORM ADV UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Pri	mary Business N	lame: R.V. KUHNS	& ASSOCIATES, INC.	CRI) Number: 1800)5
AD	A Amendment, Page 9 4/2011 1:28:08 PM In 5 Information About Your Advisory Business (Continued) If you provide financial planning services, to how many clients did you provide to your last fiscal year? If you provide financial planning services, to how many clients did you provide to your last fiscal year? If you last fiscal year? If you participate in a wrap fee program, do you (check all that apply): If you participate in a wrap fee program, do you (check all that apply): If you participate in a wrap fee program? If you are a portfolio manager for the wrap fee program? If you are a portfolio manager for a wrap fee program, list the names of the program is limited to recommending wrap fee clients, or you advise a mutual fund that is offered through a wrap fee program Item 5.1(1) or 5.1(2). If 6 Other Business Activities In 6 Other Business Activities In 19 Broker-dealer In 19 Broker-dealer In 20 Registered representative of a broker-dealer In 3 Futures commission merchant, commodity pool operator, or commodity In 4 Real estate broker, dealer, or agent			Rev. 11/201	I C	
Item 5 Information About Your Advisory Business (Continued) H. If you provide financial planning services, to how many clients did you provide these services durin your last fiscal year? © 0						
Ite	m 5 Information	n About Your Advis	ory Business (Continu	ued)		
Н	. If you provide fi	inancial planning serv	vices, to how many clier	nts did you provide these	services during	
	-		_			
	⊙ 0					
	C ₁₀₁₋₂₅₀	C ₂₅₁₋₅₀₀	C More than 500	If more than 500, how (round to the neares	many? t 500)	
I.	If you participat	te in a <i>wrap fee prog</i> a	ram, do you (check all t	hat apply):		
	\square (1) sponsor	the wrap fee prograi	<i>m</i> ?			
	\square (2) act as a	portfolio manager fo	r the <i>wrap fee program</i>	?		
	If you are a poi	rtfolio manager for a	wrap fee program, list	the names of the progra	ms and their	
	sponsors in Sec	ction 5.1(2) of Schedu	ule D.			
	If your involver	ment in a wrap fee pı	rogram is limited to reco	ommending wrap fee pro	ngrams to your	
	-		d that is offered through	n a wrap fee program, d	o not check eithe	r
	Hem 5 Information About Your Advisory Business (Continued) H. If you provide financial planning services, to how many clients did you provide these services during your last fiscal year? © 0					
_				and details		
			•			
			s as a (check all that ap)	51y).		
			a broker-dealer			
				ator, or commodity trad	ing advisor	

	(5) Insuranc	ce broker or agent				
	\square (6) Bank (in	cluding a separately	identifiable department	or division of a bank)		
					YES NO	O
В			other business not liste	ed in Item 6.A. (other th	an C ©	1
	(2) If yes, is th	is other business you	ır primary business?		0 0)
	If "yes," de	escribe this other busi	iness on Section 6.B. of	Schedule D.		
					YES NO	2

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

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Item 7 Financial Industry Affiliations		
In this Item, we request information about your financial industry affiliations and activities. This infidentifies areas in which conflicts of interest may occur between you and your <i>clients</i> .	forma	ation
Item 7 requires you to provide information about you and your related persons. Your related person of your advisory affiliates and any related person that is under common control with you.	ıns ar	re all
A. You have a <i>related person</i> that is a (check all that apply): (1) broker-dealer, municipal securities dealer, or government securities broker or dealer (2) investment company (including mutual funds) (3) other investment adviser (including financial planners) (4) futures commission merchant, commodity pool operator, or commodity trading advisor (5) banking or thrift institution (6) accountant or accounting firm (7) lawyer or law firm (8) insurance company or agency (9) pension consultant (10) real estate broker or dealer (11) sponsor or syndicator of limited partnerships If you checked Items 7.A.(1) or (3), you must list on Section 7.A. of Schedule D all your repersons that are investment advisers, broker-dealers, municipal securities dealers, or gove securities broker or dealers.	elated	
	Yes	No
B. Are you or any <i>related person</i> a general partner in an <i>investment-related</i> limited partnership or manager of an <i>investment-related</i> limited liability company, or do you advise any other "private fund" as defined under SEC rule 203(b)(3)-1?	0	•
If "yes," for each limited partnership or limited liability company, or (if applicable) private fund, complete Section 7.B. of Schedule D. If, however, you are an SEC-registered adviser and you have related persons that are <u>SEC-registered advisers</u> who are the general partners of limited partnerships or the managers of limited liability companies, you do not have to complete Section 7.B. of Schedule D with respect to those related advisers' limited partnerships or limited liability companies.		
To use this alternative procedure, you must state in the Miscellaneous Section of Schedule D:(1) that you have related SEC-registered investment advisers that manage limited partnerships or limited liability companies that are not listed in Section 7.B. of Schedule D; (2) that complete and accurate information about those limited partnerships or limited		

liability companies is available in Section 7.B. of Schedule D of the Form ADVs of your related SEC-registered advisers; and (3) whether your clients are solicited to invest in any of those limited partnerships or limited liability companies.

Item 8 Participation or Interest in Client Transactions

In this Item, we request information about your participation and interest in your *clients'* transactions. Like Item 7, this information identifies areas in which conflicts of interest may occur between you and your *clients*.

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

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Item 8 Participation or Interest in <i>Client</i> Transactions (Continued)		
Proprietary Interest in Client Transactions		
A. Do you or any related person:	Yes	No
(1) buy securities for yourself from advisory <i>clients</i> , or sell securities you own to advisory <i>clients</i> (principal transactions)?	0	⊙
(2) buy or sell for yourself securities (other than shares of mutual funds) that you also recommend to advisory clients?	⊙	0
(3) recommend securities (or other investment products) to advisory <i>clients</i> in which you or any <i>related person</i> has some other proprietary (ownership) interest (other than those mentioned in Items 8.A(1) or (2))?	0	⊚
Sales Interest in <i>Client</i> Transactions		
B. Do you or any related person:	Yes	No
(1) as a broker-dealer or registered representative of a broker-dealer, execute securities trades for brokerage customers in which advisory <i>client</i> securities are sold to or bought from the brokerage customer (agency cross transactions)?	0	•
(2) recommend purchase of securities to advisory <i>clients</i> for which you or any <i>related person</i> serves as underwriter, general or managing partner, or purchaser representative?	0	⊙
(3) recommend purchase or sale of securities to advisory <i>clients</i> for which you or any <i>related person</i> has any other sales interest (other than the receipt of sales commissions as a broker or registered representative of a broker-dealer)?	0	⊙
Investment or Brokerage Discretion		
C. Do you or any related person have discretionary authority to determine the:	Yes	No
(1) securities to be bought or sold for a client's account?	\circ	\odot
(2) amount of securities to be bought or sold for a client's account?	\circ	\odot
(3) broker or dealer to be used for a purchase or sale of securities for a <i>client's</i> account?	\circ	\odot

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

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Ite	m 8 Participation or Interest in <i>Client</i> Transactions (Continued)		
D.	Do you or any related person recommend brokers or dealers to clients?	•	О
E.	Do you or any <i>related person</i> receive research or other products or services other than execution from a broker-dealer or a third party in connection with <i>client</i> securities transactions?	O	•
F.	Do you or any <i>related person</i> , directly or indirectly, compensate any <i>person</i> for <i>client</i> referrals?	0	•
	In responding to this Item 8.F., consider in your response all cash and non-cash compensation that you or a related person gave any person in exchange for client reference including any bonus that is based, at least in part, on the number or amount of client referrals.	rrals,	
Ite	m 9 <i>Custody</i>		
	this Item, we ask you whether you or a <i>related person</i> has <i>custody</i> of <i>client</i> assets and a todial practices.	about your	
Α.	(1) Do you have <i>custody</i> of any advisory <i>clients'</i> :	Ye:	s No
	(a) cash or bank accounts?	0	•
	(b) securities?	0	•
	If you are registering or registered with the SEC, answer "No" to Item 9.A. (1)(a) and (a custody solely because (i) you deduct your advisory fees directly from your clients' accordated person maintains client funds or securities as a qualified custodian but you have presumption that you are not operationally independent (pursuant to Advisers Act rule (5)) from the related person.	ounts, or (ii) e overcome) a the
	(2) If you checked "yes" to Item 9.A(1)(a) or (b), what is the amount of <i>client</i> funds are total number of <i>clients</i> for which you have <i>custody</i> :	nd securities	and
	U.S. Dollar Amount Total Number of Clients (a)\$ (b)		
	If your related person serves as qualified custodian of client assets, do not include the assets and the number of those clients in your response to Item 9.A.(2). Instead, incluinformation in your response to Item 9.B.(2).		hose
В.	(1) Do any of your related persons have custody of any of your advisory clients':	Yes	s No
	(a) cash or bank accounts?	0	•

YES NO

	(b) securities?		O	⊚
	You are required to answer	this item regardless of how you answered Item 9.A.(1)(a) or (b).		
		Item 9.B.(1)(a) or (b), what is the amount of <i>client</i> funds and securents for which your related persons have <i>custody</i> : Total Number of Clients (b)	ities	
C.	If you or your related personapply:	ns have custody of client funds or securities, check all the following	that	
		sends account statements at least quarterly to the investors in the cle(s) you manage.		
	manage and the audited	accountant audits annually the pooled investment vehicle(s) that you difinancial statements are distributed to the investors in the pools. In accountant conducts an annual surprise examination of <i>client</i> funds a		
		accountant prepares an internal control report with respect to custod our related persons are qualified custodians for client funds and	ial	
		, C.(3) or C.(4), list in Section 9.C. of Schedule D the accountants the little or examination or prepare an internal control report.	hat a	are
D.	Do you or your <i>related perse</i> advisory services you provide	, , , , , , , , , , , , , , , , , , , ,	Yes	No
	(1) you act as a qualified cu	ıstodian	О	•
	(2) your related persons act	t as qualified custodians	c	•
	as qualified custodians for y	m 9.D.(2), list in Section 9.D. of Schedule D all your related persons your clients in connection with advisory services you provide to client ealers already identified as qualified custodians in Section 7.A. of Sc.	ts (y	ou
E.		updating amendment and you were subject to a surprise examination countant during your last fiscal year, provide the date (MM/YYYY) the		
te	m 10 Control Persons			
In	this Item, we ask you to ide	entify every <i>person</i> that, directly or indirectly, <i>controls</i> you.		
	Schedule A asks for information about you	nitial application, you must complete Schedule A and Schedule B. mation about your direct owners and executive officers. Schedule B ar indirect owners. If this is an amendment and you are updating on either Schedule A or Schedule B (or both) that you filed with you ask complete Schedule C.		

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 of Schedule D.

⊙

FORM ADV

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: R.V. KUHNS & ASSOCIATES, INC.

CRD Number: 18005

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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 your application for registration, 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-site examinations. One event may result in "yes" answers to more than one of the questions below.

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, partners, or directors (or any *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) of a bank, see the Glossary of Terms to determine who your *advisory affiliates* are.

If you are registered or registering with the SEC, you may limit your disclosure of any event listed in Item 11 to ten years following the date of the event. If you are 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 responding to Items 11.A(1), 11.A(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 entered, or the date any rights of 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.

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

or yes answers to the following questions, complete a criminal rection bit i		
A. In the past ten years, have you or any advisory affiliate:	YES	NO
(1) been convicted of or plead guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any felony?	0	⊙
(2) been charged with any felony?	0	•
If you are registered or registering with the SEC, you may limit your response to Item 11.A (2) to charges that are currently pending.		
B. In the past ten years, have you or any advisory affiliate:		
(1) been convicted of or plead guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to a <i>misdemeanor</i> involving: investments or an <i>investment-related</i> business, or any fraud, false statements, or omissions, wrongful taking of	0	•

property, bribery, perjury, forgery, counterfeiting, extortion, or a conspiracy to commit any of these offenses?(2) been <i>charged</i> with a <i>misdemeanor</i> listed in 11.B(1)?	o	•	
f you are registered or registering with the SEC, you may limit your response to Item 11.B (2) to charges that are currently pending.			

FORM ADV UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: R.V. KUHNS & ASSOCIATES, INC.

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Item 11 Disclosure Information (Continued)			
For "yes" answers to the following questions, complete a Regulatory Action DRP:			
C. Has the SEC or the Commodity Futures Trading Commission (CFTC) ever:	YES	NO	
(1) found you or any advisory affiliate to have made a false statement or omission?	\circ	\odot	
(2) found you or any advisory affiliate to have been involved in a violation of SEC or CFTC regulations or statutes?	0	⊙	
(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 restricted?	0	•	
(4) entered an <i>order</i> against you or any <i>advisory affiliate</i> in connection with <i>investment-related</i> activity?	0	⊙	
(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?	0	•	
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, been dishonest, unfair, or unethical?	or C	⊙	
(2) ever found you or any advisory affiliate to have been involved in a violation of investment-related regulations or statutes?	0	⊙	
(3) ever found you or any advisory affiliate to have been a cause of an investment-relate business having its authorization to do business denied, suspended, revoked, or restricted?	d C	•	
(4) in the past ten years, entered an order against you or any advisory affiliate in connection with an investment-related activity?	0	•	
(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 with an investment-related business or restricted your or any advisory affiliate's activity?	ng O	0	
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?	0	\odot	

(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 the SEC)?(3) found you or any advisory affiliate to have been the cause of an investment-related	0	
(other than a violation designated as a "minor rule violation" under a plan approved by the SEC)?		_
·		⊙
business having its authorization to do business denied, suspended, revoked, or restricted?	0	•
(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 association with other members, or otherwise restricting your or the advisory affiliate's activities?	0	⊚
FORM ADV UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRAT	ΓΙΟ	N
rimary Business Name: R.V. KUHNS & ASSOCIATES, INC. CRD Number		
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tem 11 Disclosure Information (Continued)		
rem 11 Disclosure Information (Continued) 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?	ГО	•
	0	•
 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.? or "yes" answers to the following questions, complete a Civil Judicial Action DRP: 	0	•
 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.? or "yes" answers to the following questions, complete a Civil Judicial Action DRP: H. (1) Has any domestic or foreign court: 	C YES	•
 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.? or "yes" answers to the following questions, complete a Civil Judicial Action DRP: 	0	•
 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.? or "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 	C YES	⊙ NO
 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.? or "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 	O YES O	O NO

"small 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 assets under management of less than \$25 million. You are not 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.

FORM ADV UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: R.V. KUHNS & ASSOCIATES, INC.

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Item 12 Small	Businesses ((Continued))
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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 total assets shown on a current 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 *person* that directly or indirectly 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 *person*.

		YE	-5 N	O
Α.	Did you have total assets of \$5 million or more on the last day of your most recent fiscal year?	С	9	9
If	yes," you do not need to answer Items 12.B. and 12.C.			
В.	Do you:			
	(1) control another investment adviser that had assets under management of \$25 millio or more on the last day of its most recent fiscal year?	n C	9	0
	(2) control another person (other than a natural person) that had total assets of \$5 milli or more on the last day of its most recent fiscal year?	on C	9	0
C.	Are you:			
	(1) controlled by or under common control with another investment adviser that had assets under management of \$25 million or more on the last day of its most recent fiscal year?	С	9	•
	(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 fiscal year?	C	9	•

FORM ADV UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: R.V. KUHNS & ASSOCIATES, INC. CRD Number: 18005

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You must complete this Part 1B only if you are applying for registration, or are registered, as an investment adviser with any of the *state securities authorities*.

Part 1B Item 1 - State Registration

Complete this Item 1 if you are submitting an initial application for state registration or requesting additional state registration(s). Check the boxes next to the states to which you are submitting this application. If you are already registered with at least one state and are applying for registration with

registration.	Do not check the	check the boxes next boxes next to the st egistration pending.				
		ID	□ мо		□ РА	
□ AK		-	□ _{MT}		□ _{PR}	
□ _{AZ}			□ _{NE}		□ _{RI}	
□ AR			□ _{NV}		□ _{SC}	
□ _{CA}		-	□ _{NH}		□ _{SD}	
СО		-	□ NJ		□ _{TN}	
СТ			□ _{NM}		□ _{TX}	
□ DE			□ _{NY}		□ UT	
□ DC		-	□ _{NC}		□ _{VT}	
□ _{FL}					□ _{VI}	
□ _{GA}			□ он		□ _{VA}	
□ _{GU}		-	□ ок		□ _{WA}	
□ ні		-	□ OR		□ wv	
					□ wi	
art 1B Item 2	2 - Additional I	nformation				
	ponsible for supe	ervision and complian	ce:			
Name:						
Title:						
Telephone	2:			Fax:		
Number a	nd Street 1:	Nun	nber and Str	eet 2:		
City:	State:	Cou	ntry:	ZIP+4/Postal	Code:	
Email add	ress, if available					
If this add	lress is a private	residence, check this	box: □			
	-	f required by your <i>ho</i>				
(1) Nam	ne of Issuing Inst	ırance Company:				
(2) Amo	ount of Bond:					
•	d Policy Number:					
(4) If reauired	d by your home s	state, are you in comp	oliance with v	your home state	e's minimum	Yes No
	quirements?	, , ,		,	-	

FORM ADV UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: R.V. KUHNS & ASSOCIATES, INC.

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Part 1B Item 2 - Additional Information (Continued)		
	Yes	No
For "yes" answers to the following question, complete a Bond DRP.		
C. Has a bonding company ever denied, paid out on, or revoked a bond for you?	\circ	\circ
For "yes" answers to the following question, complete a Judgment/Lien DRP:		
D. Do you have any unsatisfied judgments or liens against you?	\circ	\circ
For "yes" answers to the following questions, complete an Arbitration DRP:		
E. Are you, any <i>advisory affiliate</i> , or any <i>management person</i> currently the subject of, or have you, any <i>advisory affiliate</i> , or any <i>management person</i> been the subject of, an arbitration claim alleging damages in excess of \$2,500, involving any of the following:		
(1) any investment or an investment-related business of activity?	\circ	\circ
(2) fraud, false statement, or omission?	\circ	\circ
(3) theft, embezzlement, or other wrongful taking of property?	\circ	\circ
(4) bribery, forgery, counterfeiting, or extortion?	0	\circ
(5) dishonest, unfair, or unethical practices?	\circ	\circ
For "yes" answers to the following questions, complete a Civil Judicial Action DRP: F. Are you, any <i>advisory affiliate</i> , or any <i>management person</i> currently subject to, or have you, any <i>advisory affiliate</i> , or any <i>management person</i> been <i>found</i> liable in, a civil, <i>self-regulatory organization</i> , or administrative <i>proceeding</i> involving any of the following:		
(1) an investment or investment-related business or activity?	\circ	\circ
(2) fraud, false statement, or omission?	\circ	\circ
(3) theft, embezzlement, or other wrongful taking of property?	\circ	\circ
(4) bribery, forgery, counterfeiting, or extortion?	\circ	\circ
(5) dishonest, unfair, or unethical practices?	0	\circ
G. Other Business Activities		
(1) You are actively engaged in business as a(n) (check all that apply):		
☐ Attorney		
Certified Public Accountant		
☐ Tax Preparer		

FORM ADV UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: R.V. KUHNS & ASSOCIATES, INC. CRD Number: 18005

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Part 1B Item 2 - Additional Information (Continued)

- (2) If you are actively engaged in any business other than those listed in Item 6.A of Part 1A or Item 2.G(1) of Part 1B, describe the business and the approximate amount of time spent on that business:
- H. If you provide financial planning services, the investments made based on those services at the end of your last fiscal year totaled:

	Securities	Non-Securities
	Investments	Investments
Under \$100,000	0	0
\$100,001 to \$500,000	0	0
\$500,001 to \$1,000,000	0	0
\$1,000,001 to \$2,500,000	0	0
\$2,500,001 to \$5,000,000	0	0
More than \$5,000,000	O	0

If securities investments are over \$5,000,000, how much? (round to the nearest \$1,000,000)

If non-securities investments are over \$5,000,000, how much? (round to the nearest \$1,000,000)

Yes No

 \circ

 \circ

 \circ

 \circ

 \circ

 \circ

 \circ

I. Custody

- (1) Do you withdraw advisory fees directly from your *clients'* accounts? If you answered "yes", respond to the following:
 - (a) Do you send a copy of your invoice to the custodian or trustee at the same time that you send a copy to the *client*?
 - (b) Does the custodian send quarterly statements to your *clients* showing all disbursements for the custodian account, including the amount of the advisory fees?
 - (c) Do your *clients* provide written authorization permitting you to be paid directly for their accounts held by the custodian or trustee?
- (2) Do you act as a general partner for any partnership or trustee for any trust in which your advisory *clients* are either partners of the partnership or beneficiaries of the trust? If you answered "yes", respond to the following:
 - (a) As the general partner of a partnership, have you engaged an attorney or an independent certified public accountant to provide authority permitting each direct payment or any transfer of funds or securities from the partnership account?
- (3) Do you require the prepayment of fees of more than \$500 per *client* and for six months or more in advance?

FORM ADV

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: R.V. KUHNS & ASSOCIATES, INC.

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Part 1B Item 2 - Additional Information (Continued)

Yes No

J. If you are organized as a sole proprietorship, please answer the following:

ARD - [User Name: amoehring, OrgID: 18005]	Page 21 of 34
(1) (a) Have you passed, on or after January 1, 2000, the Series 65 examination?	0 0
(b) Have you passed, on or after January 1, 2000, the Series 66 examination and passed, at any time, the Series 7 examination?	also C C
(2) (a) Do you have any investment advisory professional designations?	0 0
If "no", you do not need to answer Item 2.J(2)(b).	
(b) I have earned and I am in good standing with the organization that issued the following credential:	
Certified Financial Planner ("CFP")	
Chartered Financial Analyst ("CFA")	
Chartered Financial Consultant ("ChFC")	
Chartered Investment Counselor ("CIC")	
Personal Financial Specialist ("PFS")	
None of the above	
(3) Your Social Security Number:	
·	Number: 18005
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Section 12 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 securities. For purposes of this Schedule, a *person* beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.

- (c) if you are organized as a partnership, <u>all</u> general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 5% or more of your capital;
- (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 your capital, the trust and each 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 capital, and (ii) if managed by elected managers, all elected managers.
- 3. Do you have any indirect owners to be reported on Schedule B? $^{\circ}$ Yes $^{\circ}$ 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 executive officer is an individual.
- 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 shareholders or members, the class of securities owned (if more than one is issued).

- 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*. Note that under this definition, 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	DE/FE/I	Title or Status	Date	Ownership	Control	PR	CRD No.
NAME			Title or	Code	Person		If None:
(Individuals:			Status				S.S. No.
Last Name,			Acquired				and Date
First Name,			MM/YYYY				of Birth,
Middle Name)							IRS Tax
							No., or
							Employer
							ID No.
GRATSINGER,	I	CEO/DIRECTOR/PRINCIPAL	12/2008	С	Υ	N	XXX-XX-
REBECCA A							XXXX
BEARD,	I	VICE	12/2008	В	Υ	N	XXX-XX-
MARCIA		PRESIDENT/DIRECTOR/PRINCIPAL					XXXX
DENE							
PANKEY							

Rev. 11/2010

GRATSINGER, SCOTT P	I	CHIEF INFORMATION OFFICER/PRINCIPAL	10/2001	С	N	N	XXX-XX- XXXX
VOYTKO, JAMES MICHAEL	I	PRESIDENT/DIRECTOR/PRINCIPAL	12/2010	А	Y	N	XXX-XX- XXXX
EALY, SEAN, C.	I	DIR. OF INV. MGR RESEARCH/PRINCIPAL	01/2010	А	N	N	5643650
KEVAN, JOSHUA, R	I	SR. CONSULTANT/DIRECTOR/PRINCIPAL	12/2008	А	Y	N	5643658
PALMERI, ROBERT, STEPHEN	I	DIR. OF EAST COAST OPERATIONS/DIRECTOR/PRINCIPAL	12/2008	A	Y	N	1720012
WAIBEL, CHARLES, JOSEPH	I	SR. CONSULTANT/PRINCIPAL	05/2006	А	N	N	2974431
KOWOLIK, JONATHAN, K.	I	CONSULTANT/PRINCIPAL	01/2010	А	N	N	5786095
MOEHRING, ASHLEE, D.	I	CONSULTANT/CHIEF COMPLIANCE OFFICER/PRINCIPAL	12/2010	NA	N	N	5873283

FORM ADV UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: R.V. KUHNS & ASSOCIATES, INC. CRD Number: 18005

ADV - Amendment, SCHEDULE B

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Form ADV, Schedule B

Indirect Owners

- 1. Complete Schedule B only if you are submitting an initial application. Schedule B asks for information about your indirect owners; you must first complete Schedule A, which asks for information 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 more of a class of a voting security of that corporation;
 - For purposes of this Schedule, a *person* beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.
 - (b) in the case of an owner that is a partnership, <u>all</u> general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 25% or more of the partnership's capital;
 - (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 the LLC's capital, and (ii) if 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 reached, no further ownership 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 individual.
- 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 securities owned (if more than one is issued).

6. Ownership codes

C - 25% but less than

E - 75% or more

are:

50%

D - 50% but less than

F - Other (general partner, trustee, or elected

75% 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*. Note that under this definition, 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.

No Indirect Owner Information Filed

FORM ADV

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: R.V. KUHNS & ASSOCIATES, INC.

CRD Number: 18005

ADV - Amendment, SCHEDULE C

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Form ADV, Schedule C

Amendments to Schedules A and B

- 1. Use Schedule C only to amend information requested on either Schedule A or Schedule B. Refer to Schedule A and Schedule B for specific instructions for completing this Schedule C. Complete each column.
- 2. In the Type of Amendment column, indicate "A" (addition), "D" (deletion), or "C" (change in information about the same *person*).

3. Ownership codes

NA - less than

C - 25% but less

G - Other (general partner, trustee,

are:

5%

than 50%

or elected member)

A - 5% but less than 10%

D - 50% but less

than 75%

B - 10% but less

E - 75% or more

than 25%

4. List below all changes to Schedule A (Direct Owners and Executive Officers):

No Changes to Direct Owner / Executive Officer Information Filed

5. List below all changes to Schedule B (Indirect Owners):

No Changes to Indirect Owner Information Filed

FORM ADV UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: R.V. KUHNS & ASSOCIATES, INC. CRD Number: 18005 ADV - Amendment, SCHEDULE D Page 1 Rev. 11/2010

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Form	ADV,	Schedule	D	Page	1

Certain items in Part 1A of Form ADV require additional information on Schedule D. Use this Schedule D Page 1 to report details for items listed below. Report only new information or changes/updates to previously submitted information. Do not repeat previously submitted information.

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 for each business name. No Information Filed

Section 1.F. Other Offices

Complete the following	illiorifiation for cach of	ince, other than your prine	ipai office and place of business,
at which you conduct investment advisory business. You must complete a separate Schedule D Pa			a separate Schedule D Page 1
for each location. If you	u are applying for regis	tration, or are registered, o	only with the SEC, list only the
largest five (in terms of numbers of <i>employees</i>).			
Number and Street 1:		Number and Street 2	!:
600 UNIVERSITY STRE	ET	SUITE 1725	
City:	State:	Country:	ZIP+4/Postal Code:
SEATTLE	WA	UNITED STATES	98101
If this address is a private residence, check this box:			
Telephone Number at	this location:	Facsimile number at	this location:
(206)623-2600		(503)802-6938	
Number and Street 1:		Number and Street 2	!:
ONE PENN PLAZA		SUITE 2128	
City	State:	Country:	ZIP+4/Postal Code:
City:	State.	Country	
NEW YORK	NY	UNITED STATES	10119-0002
NEW YORK		UNITED STATES	10119-0002
NEW YORK	NY vate residence, check th	UNITED STATES	
NEW YORK If this address is a priv	NY vate residence, check th	UNITED STATES	
NEW YORK If this address is a priv Telephone Number at	NY vate residence, check th	UNITED STATES nis box: Facsimile number at	this location:
NEW YORK If this address is a prival Telephone Number at (646)805-7075	NY vate residence, check th	UNITED STATES nis box: Facsimile number at (503)802-6938	this location:
NEW YORK If this address is a prival Telephone Number at 1 (646)805-7075 Number and Street 1:	NY vate residence, check th	UNITED STATES nis box: Facsimile number at (503)802-6938	this location:
NEW YORK If this address is a priv Telephone Number at (646)805-7075 Number and Street 1: 5356 MAIN STREET	NY vate residence, check th this location:	UNITED STATES nis box: Facsimile number at (503)802-6938 Number and Street 2	this location:
NEW YORK If this address is a prival Telephone Number at 16 (646)805-7075 Number and Street 1: 5356 MAIN STREET City: WAITSFIELD	NY vate residence, check the this location: State:	UNITED STATES nis box: Facsimile number at (503)802-6938 Number and Street 2 Country: UNITED STATES	this location: ZIP+4/Postal Code:
NEW YORK If this address is a prival Telephone Number at 16 (646)805-7075 Number and Street 1: 5356 MAIN STREET City: WAITSFIELD	NY vate residence, check the this location: State: VT vate residence, check the the thick the t	UNITED STATES nis box: Facsimile number at (503)802-6938 Number and Street 2 Country: UNITED STATES	this location: ZIP+4/Postal Code: 05673

Number and Street 1: Number and Street 2:

190 SO. LASALLE STREET SUITE 560

City: State: Country: ZIP+4/Postal Code:

CHICAGO IL UNITED STATES 60603

If this address is a private residence, check this box: \Box

Telephone Number at this location: Facsimile number at this location:

503-221-4200 (503)802-6938

Number and Street 1: Number and Street 2:

208 SW FIRST SUITE 260

City: State: Country: ZIP+4/Postal Code:

PORTLAND OR UNITED STATES 97204

If this address is a private residence, check this box: \Box

Telephone Number at this location: Facsimile number at this location:

(503)221-4200 (503) 802-6938

Section 1.1. World Wide Web Site Addresses

List your World Wide Web site addresses. You must complete a separate Schedule D for each World Wide Web site address.

World Wide Web Site Address: WWW.RVKUHNS.COM

Section 1.K. Locations of Books and Records

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

Name of entity where books and records are kept:

IRON MOUNTAIN, INC.

Number and Street 1: Number and Street 2:

2116 NW 20TH AVENUE

City: State: Country: ZIP+4/Postal Code:

PORTLAND OR UNITED STATES 97209

If this address is a private residence, check this box: \Box

Telephone Number: Facsimile number:

800 888-2774 This is (check one):

one of your branch offices or affiliates.

C a third-party unaffiliated recordkeeper.

Other.

Briefly describe the books and records kept at this location.

PERFORMANCE REPORTS, HR RECORDS, RFP/FINALS REPORTS, AND ACCOUNTING RECORDS.

Name of entity where books and records are kept:

IRON MOUNTAIN, INC.

Number and Street 1: Number and Street 2:

3587 NW YEON AVENUE

City: State: Country: ZIP+4/Postal Code:

PORTLAND OR UNITED STATES 97209

If this address is a private re	esidence, check thi	is box:	
Telephone Number:		simile number:	
800 888-2774			
This is (check one):			
one of your branch office	ces or affiliates.		
C a third-party unaffiliated	d recordkeeper.		
⊙ other.			
Briefly describe the books ar			
PERFORMANCE REPORTS, HR RECORDS, RFP/FINALS REPORTS, AND ACCOUNTING RECORDS.			COUNTING RECORDS.
Name of entity where books	and records are k	ept:	
IRON MOUNTAIN, INC. Number and Street 1:		Number and Street 2:	
7530 NORTH LEADBETTER R	OAD	Number and Street 2:	
City:	State:	Country:	ZIP+4/Postal Code:
PORTLAND	OR	UNITED STATES	97203
If this address is a private re	esidence check thi		
Telephone Number:	esidence, check thi	Facsimile number:	
800 888-2774		r desirine ridiriseri	
This is (check one):			
O one of your branch office	ces or affiliates.		
C a third-party unaffiliated			
⊙ other.	•		
Briefly describe the books ar	nd records kept at	this location.	
PERFORMANCE REPORTS, HI	R RECORDS, RFP/F	FINALS REPORTS, AND ACC	COUNTING RECORDS.
Name of entity where books	and records are k	ept:	
IRON MOUNTAIN, INC.		N	
Number and Street 1: 7828 NORTH LEADBETTER R	040	Number and Street 2:	
City:	State:	Country:	ZIP+4/Postal Code:
PORTLAND	OR	UNITED STATES	97203
If this address is a private re		-	
Telephone Number:	esidence, check thi	Facsimile number:	
800 888-2774			
This is (check one):			
O one of your branch office	ces or affiliates.		
C a third-party unaffiliated			
other.	•		
Briefly describe the books ar	nd records kept at	this location.	
PERFORMANCE REPORTS, HI	•		COUNTING RECORDS.

FORM ADV

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: R.V. KUHNS & ASSOCIATES, INC.

CRD Number: 18005

ADV - Amendment, SCHEDULE D, Page 2

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Form ADV, Schedule D Page 2		
Use this Schedule D Page 2 to report details for items listed below. Report only new information or		
changes/updates to previously submitted information. Do not repeat previously submitted information.		
Section 1.L. Registration with Foreign Financial Regulatory Authorities		
List the name, in English, of each foreign financial regulatory authority and country with which you are		
registered. You must complete a separate Schedule D Page 2 for each <i>foreign financial regulatory</i>		
authority with whom you are registered.		
No Information Filed		
Section 2.A(7) Affiliated Adviser		
No Information Filed		
Section 2.A(8) Newly Formed Adviser		
If you are relying on rule 203A-2(d), the newly formed adviser exemption from the prohibition on		
registration, you are required to make certain 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 of these representations:		
I am not registered or required to be registered with the SEC or a <i>state securities authority</i> and I have a reasonable expectation that I will be eligible to register with the SEC within 120 days after		
the date my 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 Advisers Act from		
registering with the SEC.		
Section 2.A(9) Multi-State Adviser		
If you are relying on rule 203A-2(e), the multi-state adviser exemption from the prohibition on		
registration, you are required to make certain representations about your eligibility for SEC registration.		
By checking 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 30 or more states to register as an investment adviser with the securities authorities in those 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 25 states to register as an		
investment adviser with the securities authorities of those states.		

If you are submitting your <i>annual updating amendment</i> , you must make this	representation:
Within 90 days prior to the date of filing this amendment, I have review	
and federal laws and have concluded that I am required by the laws of	at least 25 states to
register as an investment adviser with the securities authorities in those	e states.
FORM ADV	
UNIFORM APPLICATION FOR INVESTMENT ADVISE	R REGISTRATION
Primary Business Name: R.V. KUHNS & ASSOCIATES, INC.	CRD Number: 18005
ADV - Amendment, SCHEDULE D, Page 3	Rev. 11/2010
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Form ADV, Schedule D Page 3	
Use this Schedule D Page 3 to report details for items listed below. Report only	
changes/updates to previously submitted information. Do not repeat previously	/ submitted information.
Section 2.A(11) SEC Exemptive Order	
No Information Filed	
1.5 Inclination Filed	
Section 4 Successions	
Complete the following information if you are succeeding to the business of a	• •
investment adviser. If you acquired more than one firm in the succession you	_
ADV, you must complete a separate Schedule D Page 3 for each acquired firm	1. See Part 1A Instruction 4.
No Information Filed	
Section 5.I (2) Wrap Fee Programs	
	mo of each program and its
If you are a portfolio manager for one or more <i>wrap fee programs</i> , list the natisponsor. You must complete a separate Schedule D Page 3 for each <i>wrap fee</i>	· =
a portfolio manager.	
No Information Filed	
No Information Filed	
Section 6.B. Description of Primary Business	
No Information Filed	
No Information Filed	
Section 7.A. Affiliated Investment Advisers and Broker-Dealers	

No Information Filed

FORM ADV UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: R.V. KUHNS & ASSOCIATES, INC.

CRD Number: 18005

ADV - Amendment, SCHEDULE D, Page 4

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Form ADV, Schedule D Page 4

Use this Schedule D Page 4 to report details for items listed below. Report only new information or changes/updates to previously submitted information. Do not repeat previously submitted information.

Section 7.B. Limited Partnership Participation or Other Private Fund Participation

You must complete a separate Schedule D Page 4 for each limited partnership in which you or a *related person* is a general partner, each limited liability company for which you or a *related person* is a manager, and each other private fund that you advise.

No Information Filed

Section 9.C. Independent Public Accountant

No Information Filed

Section 9.D. Related Person Qualified Custodian

No Information Filed

Section 10 Control Persons

You must complete a separate Schedule D Page 4 for each *control person* not named in Item 1.A. or Schedules A, B, or C that directly or indirectly *controls* your management or policies.

No Information Filed

FORM ADV UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: R.V. KUHNS & ASSOCIATES, INC.

CRD Number: 18005

ADV - Amendment, SCHEDULE D, Page 5

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Form ADV, Schedule D Page 5

Rev. 11/2010

Use this Schedule D Page 5 to report details for items listed below. Report only new information or changes/updates to previously submitted information. Do not repeat previously submitted information.

Schedule D - Miscellaneous

You may use the space below to explain a response to an Item or to provide any other information. THE ADVISOR HAS INDICATED IN ITEM 7A(7) THAT IT HAS A RELATED PERSON WHO IS A LAWYER OR LAW FIRM. THIS BOX IS CHECKED SOLELY BECAUSE ONE OF THE ADVISOR'S EMPLOYEES IS A LAWYER.

FORM ADV UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: R.V. KUHNS & ASSOCIATES, INC. CRD Number: 18005

ADV - Amendment, DRP Pages

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CRIMINAL DISCLOSURE REPORTING PAGE (ADV)
No Information Filed
REGULATORY ACTION DISCLOSURE REPORTING PAGE (ADV)
No Information Filed
CIVIL JUDICIAL ACTION DISCLOSURE REPORTING PAGE (ADV)
No Information Filed
Bond DRPs
No Information Filed

	Judgment/Lien DRPs
	No Information Filed
Arbitration DRPs	
	No Information Filed

FORM ADV

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: R.V. KUHNS & ASSOCIATES, INC.

ADV - Amendment, Execution Pages

6/24/2011 1:28:08 PM

CRD Number: 18005

Rev. 11/2010

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 application for SEC registration and all amendments to registration.

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 maintain your *principal office and 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, of any notice, subpoena, 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, in any federal or state action, 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 any activity in connection with 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 1933, the Securities Exchange 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 (ii) the laws of the state in which 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 the laws of the 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 signing this Form ADV Execution Page 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 these books and records to make them available to federal and state regulatory representatives.

Signature: Date: MM/DD/YYYY

ASHLEE MOEHRING 06/24/2011

Printed Name: Title:

ASHLEE MOEHRING CHIEF COMPIANCE OFFICER

Adviser CRD Number:

18005

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 application for SEC registration and all amendments to registration.

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 designated officer, of 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, of any notice, subpoena, 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, in any federal or state action, 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 any activity in connection with 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 1933, the Securities Exchange 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 (ii) the laws of any state in which you are submitting a *notice filing*.

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 the partnership, provided that the 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 against you or any of your former 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 Regional or District Office of the 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 maintain under Rule 204-2 under 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 or powers of attorney or any of 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 perjury under the laws of the 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 signing this Form ADV Execution Page 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 these books and records to make them available to federal and state regulatory representatives.

Signature:	Date: MM/DD/YYYY
Printed Name:	Title:
Adviser <i>CRD</i> Number: 18005	

State Registered 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 application for state registration and all amendments to registration.

1. Appointment of Agent for Service of Process

By signing this Form ADV Execution Page, you, the undersigned adviser, irrevocably appoint the legally designated officers and their successors, of the state in which you maintain your *principal office and place of business* and any other state in which you are applying for registration or amending your registration, as your agents to receive service, and agree that such persons may accept service on your behalf, of any notice, subpoena, 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, in any federal or state action, 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 any activity in connection with 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 1933, the Securities Exchange 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 (ii) the laws of the state in which you maintain your *principal office and place of business* or of any state in which you are applying for registration or amending your registration.

2. State-Registered Investment Adviser Affidavit

If you are subject to state regulation, by signing this Form ADV, you represent that, you are in compliance with the registration requirements of the state in which you maintain your principal place of business and are in compliance with the bonding, capital, and recordkeeping requirements of that state.

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 the laws of the 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 signing this Form ADV Execution Page 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 these books and records to make them available to federal and state regulatory representatives.

5 , 1	
Signature	Date MM/DD/YYYY
CRD Number 18005	
Printed Name	Title

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