Account Application Advisory - Non-Retirement

		AI
Account Number		
	Rep ID	

Financial advisor instructions: To be used for all LPL Advisory non-retirement accounts. For more detailed information on the appropriate paperwork

		pes, please consult the appropriate accou removing account holders or to change th			resource ce	nter. For exist	ing accounts, this form
		New Accounts at (858) 202-8325.	3				
ΑΤΊ	ENTION: Any alterations must b	be initialed by all account holders.					
Se	ction I: Account Inforn	mation					
1. Account Type (choose only one)				Account updates required by LPL Operations			
	selected. This separate packe		ts of the applicable Account Packet referenced below based on the account typed any Program Brochures that detail the relationship between you, your financial your account.				
Strategic Asset Management (Account Packet - SAM Programs)				Optimum Market Portfolios Advisory (Account Packet - OMP) Model Wealth Portfolios (Account Packet - MWP) Personal Wealth Portfolios (Account Packet - PWP)			
Strategic Asset Management II (Account Packet - SAM Programs)							
Manager Select (Account Packet - Manager Select)							
2.	Registration Type (choose on	nly one)					
	O Individual	Guardianship/Conservatorship*	0	Personal Trust*	O Cor	porate*	
	Tenants in Common	Custodian for Minor	0	Partnership*	O Nor	n-Profit Organ	ization*
	Community Property	Overdell ESA*	\circ	Limited Liability Company*	Om	nibus*	
	Joint Tenants With Right of Survivorship	○ Estate*					
	Other (Please specify):						
*Additional documentation required. Financial advisor should refer to the detailed procedures for the registration type on the Resource Center.							
	Is this account for a Governmen	ent Entity?					○ Yes ○ No
	Is your account holder considered an "institutional account" based on one or more of the following definitions per FINRA Rule 4512(c): 1. A bank, savings and loan association, insurance company or registered investment company; 2. An investment adviser registered either with the SEC under Section 203 of the Investment Advisers Act or with a state securities commission (or any agency or office performing like functions); or 3. Any other person (whether a natural person, corporation, partnership, trust or otherwise) with total assets of at least \$50 million						0 0
3.	Registration Information						
	Social Security Number or Tax	ID		Fill in your current residency	status: (ch	oose only one)
				U.S. Citizen) Resident	Alien C	Non-Resident Alien
Account Registration Bob Smith			Country of Citizenship				
				Mailing Address			
	Home Phone	Mobile Phone		Business Phone		Fax Number	



Section II: Investment Objective and Risk Tolerance

Select the investment objective that most accurately reflects t	the goals for this account: (choose only one)										
The investment objectives are overall objectives for the entire account and may be inconsistent with a particular holding at any time. Please note that achievement of the stated investment objectives is a long-term goal for the account. These choices are listed in order from what is considered to be conservative to highest risk. There is no guarantee that the investment objective will be achieved.											
A. Income with Capital Preservation. Designed as a longer term accumulation account, this is considered generally the most conservative investment objective. Emphasis is placed on generation of current income with minimal risk of capital loss. Lowering the risk generally means lowering the potential income and overall return.											
 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 gro objective has a very high level of risk and is for investors w	owth and maximum capital appreciation. No focus o	on generation of current income. This
									ATTENTION: If you select an objective and cross it out to choose and	ther, the change must be initialed by all account holde	rs.
tion III: Account Holder Information		NO.									
orporate, LLC, non-profit organization, partnership, and investme mentation instead. For additional account holders, complete the :	ent club accounts, this section is NOT required. Co	mplete the appropriate supplementary									
	Supplemental Account Application (FTC).										
Primary Information Primary Account Holder/Trustee/Minor/Auth. Officer	Occupation (former if retired or unemployed)	ID Type (Ex: Driver's License, Passport, etc.)									
	Gedpation (termer in ratiled of unamployed)	Type (Ex. Biver's license, rassport, etc.)									
Social Security Number Date of Birth No. of Dependents	Industry (former if retired)	ID Place of Issuance									
Residence Address (no P. O. Boxes) Same as mailing address	Employer Name ☐ Mark here if retired or unemplo	yed ID Number									
	Employment Address (no P.O. boxes)	ID Issuance Date ID Expiration Date									
Country of Citizenship		ID verified? Yes No									
Home Phone Mobile Phone	Business Phone	ID verified? Yes No									
s this account for the benefit of a Politically Exposed Person (PEP)*? Yes No											
f yes, define PEP position:											
*A Politically Exposed Person (PEP) is defined as: 1. A current or former senior forn-laws); 3. Close associates - People who are widely and publicly known to mai transactions on behalf of the PEP; 4. Any corporation, business or other entity th	intain a close relationship with the PEP, including people who a	embers (e.g., parents, spouse, sibling, children, are in a position to conduct substantial financial									
The trusted contact person is intended to be a resource for LPL in exploitation (refer to account packet/agreement for more details, conduct transactions in your account.	n administering your accounts, protecting your asset i). Note: Your trusted contact person must be age	ts, and responding to possible financial 18 or older, and would not be able to									
I decline to provide a trusted contact person at this time.											
rusted Contact Name	Trusted Contact Email										
rusted Contact Address											
Trusted Contact Primary Phone Relationship	to Account Holder (Spouse, Relative, Friend, Profes	sional Relationship, Other)									





