

April 7, 2003

Katherine A. England
Assistant Director
Division of Market Regulation
Securities and Exchange Commission
450 Fifth Street, N.W.
Washington, D.C. 20549-1001

Re: **File No. SR-NASD-2003-57** - Proposed Rule Change to Revise Uniform Application for Securities Industry Registration or Transfer (Form U-4) and Uniform Termination Notice for Securities Industry Registration (Form U-5)

Dear Ms. England:

Pursuant to Rule 19b-4, enclosed please find the above-numbered rule filing. Also enclosed is a 3-1/2" disk containing the rule filing in Microsoft Word 7.0 to facilitate production of the Federal Register release.

If you have any questions, please contact Shirley H. Weiss, Office of General Counsel, Regulatory Policy and Oversight, at (202) 728-8844; e-mail shirley.weiss@nasd.com. The fax number of the Office of General Counsel is (202) 728-8264.

Very truly yours,

Barbara Z. Sweeney
Senior Vice President
and Corporate Secretary

Enclosures

File No. SR-NASD-2003-57
Consists of 100 Pages
April 7, 2003

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C.

Form 19b-4

Proposed Rule Change

by

NATIONAL ASSOCIATION OF SECURITIES DEALERS, INC.

Pursuant to Rule 19b-4 under the
Securities Exchange Act of 1934

1. Text of Proposed Rule Change

(a) Pursuant to the provisions of Section 19(b)(1) of the Securities Exchange Act of 1934 ("Exchange Act"), the National Association of Securities Dealers, Inc. ("NASD") is filing with the Securities and Exchange Commission ("SEC" or "Commission") a proposed rule change to amend the Uniform Application for Securities Industry Registration or Transfer (Form U-4) and the Uniform Termination Notice for Securities Industry Termination (Form U-5) (collectively the "Forms"). The proposed Form U-4 and Form U-5 changes are attached in redline format as Exhibits 2 (Form U-4 Instructions), 3 (Form U-4), 4 (Form U-5 Instructions) and 5 (Form U-5).

(b) Not applicable.

(c) Not applicable.

2. Procedures of the Self-Regulatory Organization

(a) The proposed rule change was approved on March 24, 2003, by the Executive Committee of the NASD Board of Governors, which authorized the filing of the rule change with the Commission. The Nasdaq Stock Market, Inc. and NASD Dispute Resolution have been provided an opportunity to consult with respect to the proposed rule change, pursuant to the Plan of Allocation and Delegation of Functions by NASD to its Subsidiaries. No other action by NASD is necessary for the filing of the proposed rule change. Section 1(a)(ii) of Article VII of the NASD By-Laws permits the NASD Board of Governors to adopt changes or additions to NASD Rules without recourse to the membership for approval.

The proposed rule change is scheduled to take effect on June 30, 2003.

(b) Questions regarding this rule filing may be directed to Shirley H. Weiss, Associate General Counsel, Office of General Counsel, Regulatory Policy and Oversight, at (202) 728-8844.

3. Self-Regulatory Organization's Statement of the Purpose of, and Statutory Basis for, the Proposed Rule Change

(a) Purpose

The Form U-4 is the Uniform Application for Securities Industry Registration or Transfer. Representatives of broker-dealers and investment advisers must use this form to become registered in the appropriate jurisdictions and/or with appropriate self-regulatory organizations ("SROs"). The Form U-5 is the Uniform Termination Notice for Securities Industry Registration. Broker-dealers and investment advisers must use this form to terminate registration of an individual in the various SROs and jurisdictions. (Form U-4 and Form U-5 are together hereinafter referred to as the "Forms.")

The proposed revisions to the Forms would (1) add disclosure questions to the "Regulatory Disciplinary Actions" subsection of Section 14 (Disclosure Questions) of the Form U-4 to elicit information regarding events that might cause a person to be subject to a statutory disqualification as a result of additional categories of disqualification in the Exchange Act created by passage of the Sarbanes-Oxley Act of 2002 ("Sarbanes-Oxley Act"); (2) add a Disclosure Reporting Page ("DRP") and a question to the Form U-5 that parallels the DRP and Form U-4 question relating to terminations for cause; and (3) make certain technical, clarifying, and conforming changes on the Forms to facilitate accurate reporting.¹

New Disclosure Questions Required by Enactment of the Sarbanes-Oxley Act

Section 604 of the Sarbanes-Oxley Act amended the Exchange Act by adding new categories of "statutory disqualification." Under the expanded definition, members and their

¹ On April 6, 2003, the North American Securities Administrators Association, Inc. ("NASAA") voted to approve the proposed Forms revisions at its Membership meeting.

associated persons may be subject to a disqualification (i.e., may be required to obtain regulatory approval before becoming a member of NASD or becoming associated with an NASD member) if they are subject to certain orders issued by a state securities commission or state insurance commissioner (or any agency or officer performing like functions); state authorities that supervise or examine banks, savings associations, or credit unions; an appropriate federal banking authority, or the National Credit Union Administration. Specifically, persons (including members) may be subject to a statutory disqualification based on orders issued by the above agencies that (1) bar a person from association or from engaging in the business of securities, insurance, banking, savings association activities, or credit union activities or (2) are based on violations of any laws or regulations that prohibit fraudulent, manipulative, or deceptive conduct.²

The Form U-4 has historically been the vehicle for the reporting of events that may cause a person to become subject to statutory disqualification. NASD generally takes the lead in amending the Forms. Accordingly, with the concurrence of a working group of regulators, including state regulators, representatives of other SROs, and SEC observers, NASD is proposing to amend Section 14 (Disclosure Questions) of the Form U-4 to elicit reporting of regulatory actions that may now make individuals subject to a statutory disqualification under the expanded definition of "statutory disqualification" in the Exchange Act created by passage of the Sarbanes-Oxley Act.

The proposed rule change renumbers current Regulatory Action Disclosure Question 14D on the Form U-4 as Question 14D(1), adds Question 14D(2) to mirror the language in Section 15(b)(4)(H) of the Exchange Act, and modifies the "Regulatory Action DRP" on the Forms. To

² Section 15(b)(4)(H) of the Exchange Act.

aid in reporting events under Question 14D(2), NASD proposes amending the "Specific Instructions" section of the Form U-4 with respect to Section 14 (Disclosure Questions). NASD proposes adding two new defined terms, "final order" and "federal banking agency," to the "Explanation of Terms" section of the Form U-4. NASD also proposes amending the "Regulatory Action" DRP on the Form U-4 to aid in reporting events required to be reported pursuant to the Sarbanes-Oxley Act.

Modifications to the Form U-4 Relating to Fingerprinting Requirements

NASD proposes to streamline the language associated with questions under Section 2 (Fingerprint Information) and Section 6 (Registration Requests with Affiliated Firm) on the Form U-4 to clarify fingerprinting requirements, including electronic filing representations, exceptions to the fingerprint requirement, and fingerprint requirements for investment adviser representative only applicants.³

Under Section 2, NASD proposes to modify the "Electronic Filing Representation" subsection to address two situations that are not adequately covered by the current language. The first involves a firm's submitting fingerprint results on behalf of an individual whose fingerprints were processed through another SRO, in lieu of submitting fingerprint cards. The second occurs when a firm is seeking registration for an individual who (1) is currently employed by the firm (usually in an unregistered capacity) and (2) previously has been fingerprinted (either through NASD or another SRO).

³ In conjunction with the proposed changes relating to the fingerprint questions, NASD is proposing to amend the "Specific Instructions" section of the Form U-4 with respect to Section 2 (Fingerprint Information) and Section 6 (Registration Requests with Affiliated Firms).

The current electronic filing representation states that the firm is submitting or will promptly submit fingerprint cards as required by applicable SRO rules. In the two situations described above, firms will not be submitting fingerprint cards contemporaneously with, or within 30 days of, filing a Form U-4. The proposed language will allow firms and individuals to represent that the filing firm has continuously employed the individual since the last submission of a fingerprint card to NASD (and therefore is not required to resubmit a card at this time) or has continuously employed the individual since the individual had his or her fingerprints processed through another SRO, and the individual will submit (or has submitted) the processed results to the CRD system.

Also, under Section 2, NASD proposes to modify the "Exceptions to the Fingerprint Requirement" subsection. Currently, firms can claim an exception to the fingerprint requirement by affirming that the individual has been continuously employed by the filing firm in an unregistered capacity (and had previously submitted a fingerprint card in connection with that employment) or meets one or more exemptions under Rule 17f-2.⁴ The proposed modification to the "Exceptions to the Fingerprint Requirement" questions would allow a firm to select the specific permissive exemption under Rule 17f-2(a)(1)(i) and/or (a)(1)(iii). Additional proposed changes to Section 2 will clarify fingerprint filing requirements for investment adviser representative only applicants.

⁴ Rule 17f-2 governs the fingerprinting requirements of securities personnel. Rule 17f-2(a)(1)(i) permits an exemption for persons who are not engaged in the sale of securities; do not regularly have access to the keeping, handling, or processing of securities, monies, or books and records; and do not have supervisory responsibility over persons engaged in such activities. Rule 17f-2(a)(1)(iii) generally exempts the partners, directors, officers, and employees of a broker-dealer that is engaged exclusively in the sales of certain securities, such as variable contracts, limited partnership interests, and unit investment trusts.

Individuals use the Form U-4 to register with states in an investment adviser representative capacity (shown as "RA" on the Form U-4). Some states have advised NASD that individuals are confused about which radio button⁵ to select when applying solely for registration as an investment adviser. In some cases, these individuals have previously submitted a fingerprint card for registration with a broker-dealer. NASD proposes to amend the "Investment Adviser Representative Only Applicants" section by adding additional instructions under the heading "Fingerprint Information for *Affiliated Firms*" that will explain the fingerprint filing requirements for these applicants.

The proposed language will clarify the circumstances under which an individual may need to file a fingerprint card when submitting an application for state licensure as an investment adviser representative notwithstanding having previously submitted a fingerprint card with an unaffiliated broker-dealer. The proposed language will also address situations in which an investment adviser representative previously has satisfied a state fingerprint requirement by allowing the representative to make that representation on the Form U-4.⁶

Under Section 6 (Registration Requests With Affiliated Firms) of the Form U-4, NASD is proposing to add a fingerprint question to Section 6 (Registration Requests with Affiliated Firms) on the Form U-4 to create appropriate options for individuals requesting new registrations with a

⁵ A "radio button" is a navigation and selection device that allows a filer to select a particular option in an electronic filing environment.

⁶ This addition should be particularly helpful to investment adviser representatives who became licensed in a jurisdiction through the submission of a hard copy Form U-4 before that jurisdiction accepted electronic filings via the Investment Adviser Registration Depository and who are now being "transitioned" onto an electronic system via an electronically filed Form U-4 amendment.

firm affiliated with the filing firm.⁷ The proposed "Electronic or Other Filing Representation" subsection will provide three additional radio buttons. Filers can select the current standard representation (i.e., "I am submitting, have submitted, or promptly will submit to the appropriate SRO a fingerprint card..."). In the alternative, the proposed representations would enable the individual to indicate that (1) he or she has been employed continuously by the filing firm since the last submission of a fingerprint card and he or she is not required to resubmit a fingerprint card; or (2) the individual has been employed continuously by the filing firm and his or her fingerprints have been processed by an SRO other than NASD and the individual is submitting, has submitted, or promptly will submit the processed results for posting to CRD. Section 6 will also contain a radio button that allows the applicant to select an exemption to the fingerprint requirement pursuant to Rule 17f-2.

Conforming Changes

(1) NASD proposes replacing all references to "NASD Regulation" or "NASD Regulation, Inc." with "NASD" consistent with NASD's current corporate structure. NASD also proposes changing "U-4" to "U4" and "U-5" to "U5".

(2) NASD proposes making grammatical and other modifications that will make the Form U-4 and Form U-5 more consistent and better clarify the disclosure information that is required to be reported on the Forms. For example, NASD proposes rewording the summary field of the DRPs on the Form U-4 and Form U-5 to emphasize that those fields are optional for comments by representatives and firms, respectively.

⁷ "Affiliated firm" is a proposed new definition in the "Explanation of Terms" section of the Form U-4 to clarify the meaning of that term.

(3) NASD proposes adding to the Form U-5 a new disclosure question (Question 7F) and corresponding DRP to mirror Question 14J on the Form U-4. This question would allow firms to report that an individual was terminated after allegations of certain violations, fraud, wrongful taking of property, or failure to supervise, and would further clarify the individual's obligation to report the termination on the Form U-4. Currently, NASD staff must rely on the reason for termination or a firm-initiated internal review as reported (by the former employing firm) on an individual's Form U-5 to determine whether that individual is required to answer Question 14J affirmatively. The new Question 7F on the Form U-5 should clarify for NASD staff and terminated individuals the basis for and circumstances surrounding the termination (and whether it requires an affirmative answer on the corresponding Form U-4 question) and will enable firms appropriately to identify and provide supporting details regarding terminations for cause. Similarly, NASD proposes adding "resign or resigned" as an explained term on the Form U-5 to parallel the same term on the Form U-4 for purposes of the new Question 7F.

(5) NASD proposes modifying the Customer Complaint DRP on both Forms to distinguish the fields that are required for reporting a customer complaint, arbitration and/or litigation. The proposed changes add instructions and rearrange the questions in a more logical order; however, the content of the customer complaint disclosure question and DRP fields will not change.

(6) NASD proposes revising the language in Question 14F to clarify the intent of the reporting obligation.⁸

⁸ Currently, Question 14F asks, "Has your authorization to act as an attorney, accountant or federal contractor ever been revoked or suspended?" The proposed Question 14F asks, "Have you ever had an authorization to act as an attorney, accountant or federal contractor that was revoked or suspended?"

(7) NASD proposes changes to the current hair and eye color codes to match the codes used by the Federal Bureau of Investigation's fingerprint system.

(8) NASD proposes other consistency changes that relate to bolding or highlighting certain instructions in the DRPs to facilitate appropriate reporting on the Forms.

(b) Statutory Basis

NASD believes that the proposed rule change is consistent with the provisions of Exchange Act Section 15A(b)(6), which requires, among other things, that NASD rules must be designed to prevent fraudulent and manipulative acts and practices, to promote just and equitable principles of trade, and, in general, to protect investors and the public interest. NASD believes that the proposed rule change is designed to accomplish these ends by making changes to the Forms that will (1) add disclosure questions to elicit reporting of events that may cause a person to be subject to a statutory disqualification as a result of the expansion of the federal definition of statutory disqualification based on the enactment of the Sarbanes-Oxley Act; (2) add a DRP and question to the Form U-5 that parallels the Form U-4 DRP and question relating to terminations for cause; and (3) make other technical, clarifying, and conforming changes that are intended to facilitate accurate reporting.

4. Self-Regulatory Organization's Statement on Burden on Competition

NASD does not believe that the proposed rule change will result in any burden on competition that is not necessary or appropriate in furtherance of the purposes of the Exchange Act, as amended.

5. Self-Regulatory Organization's Statement on Comments on the Proposed Rule Change Received from Members, Participants, or Others

Written comments were neither solicited nor received.

6. Extension of Time Period for Commission Action

NASD does not consent at this time to an extension of the time period for Commission action specified in Section 19(b)(2) of the Exchange Act.

7. Basis for Summary Effectiveness Pursuant to Section 19(b)(3) or for Accelerated Effectiveness Pursuant to Section 19(b)(2)

Not applicable.

8. Proposed Rule Change Based on Rules of Another Self-Regulatory Organization or of the Commission

Not applicable.

9. Exhibits

1. Completed notice of proposed rule change for publication in the Federal Register.
2. Redlined version of the Form U-4 instructions.
3. Redlined version of the Form U-4.
4. Redlined version of the Form U-5 instructions.
5. Redlined version of the Form U-5.

Pursuant to the requirements of the Securities Exchange Act of 1934, NASD has duly caused this filing to be signed on its behalf by the undersigned thereunto duly authorized.

NASD, INC.

BY: _____
Barbara Z. Sweeney , Senior Vice President and
Corporate Secretary

Date: April 7, 2003

SECURITIES AND EXCHANGE COMMISSION
(Release No. 34- ; File No. SR-NASD-2003-57)

Self-Regulatory Organizations; Notice of Filing of Proposed Rule Change by National Association of Securities Dealers, Inc. to Revise Uniform Application for Securities Industry Registration or Transfer (Form U-4) and Uniform Termination Notice for Securities Industry Registration (Form U-5)

Pursuant to Section 19(b)(1) of the Securities Exchange Act of 1934 ("Act")¹ and Rule 19b-4 thereunder,² notice is hereby given that on April 7, 2003, the National Association of Securities Dealers, Inc. ("NASD") filed with the Securities and Exchange Commission ("SEC" or "Commission") the proposed rule change as described in Items I, II, and III below, which Items have been prepared by NASD. The Commission is publishing this notice to solicit comments on the proposed rule change from interested persons.

I. SELF-REGULATORY ORGANIZATION'S STATEMENT OF THE TERMS OF SUBSTANCE OF THE PROPOSED RULE CHANGE

NASD is proposing to revise the Uniform Application for Securities Industry Registration or Transfer (Form U-4) and Uniform Termination Notice for Securities Industry Registration (Form U-5) to: (1) add disclosure questions to the "Regulatory Disciplinary Actions" section of Section 14 (Disclosure Questions) of the Form U-4 to elicit information regarding events that might cause a person to be subject to a statutory disqualification as a result of additional categories of disqualification in the Securities Exchange Act of 1934 ("Exchange Act") created by passage of

¹ 15 U.S.C. § 78s(b)(1).

² 17 CFR § 240.19b-4.

the Sarbanes-Oxley Act of 2002 ("Sarbanes-Oxley Act"); (2) add a Disclosure Reporting Page (DRP) and a question to the Form U-5 that parallels the Form U-4 DRP and question relating to terminations for cause; and (3) make certain technical, clarifying, and conforming changes to facilitate accurate reporting and filing.

II. SELF-REGULATORY ORGANIZATION'S STATEMENT OF THE PURPOSE OF, AND STATUTORY BASIS FOR, THE PROPOSED RULE CHANGE

In its filing with the Commission, NASD included statements concerning the purpose of and basis for the proposed rule change and discussed any comments it received on the proposed rule change. The text of these statements may be examined at the places specified in Item IV below. NASD has prepared summaries, set forth in Sections (A), (B), and (C) below, of the most significant aspects of such statements.

(A) Self-Regulatory Organization's Statement of the Purpose of, and Statutory Basis for, the Proposed Rule Change

(a) Purpose

The Form U-4 is the Uniform Application for Securities Industry Registration or Transfer. Representatives of broker-dealers and investment advisers must use this form to become registered in the appropriate jurisdictions and/or with appropriate self-regulatory organizations ("SROs"). The Form U-5 is the Uniform Termination Notice for Securities Industry Registration. Broker-dealers and investment advisers must use this form to terminate registration of an individual in the various SROs and jurisdictions. (Form U-4 and Form U-5 are together hereinafter referred to as the "Forms.")

The proposed revisions to the Forms would (1) add disclosure questions to the "Regulatory Disciplinary Actions" subsection of Section 14 (Disclosure Questions) of the Form

U-4 to elicit information regarding events that might cause a person to be subject to a statutory disqualification as a result of additional categories of disqualification in the Exchange Act created by passage of the Sarbanes-Oxley Act of 2002 ("Sarbanes-Oxley Act"); (2) add a Disclosure Reporting Page ("DRP") and a question to the Form U-5 that parallels the DRP and Form U-4 question relating to terminations for cause; and (3) make certain technical, clarifying, and conforming changes on the Forms to facilitate accurate reporting.³

New Disclosure Questions Required by Enactment of the Sarbanes-Oxley Act

Section 604 of the Sarbanes-Oxley Act amended the Exchange Act by adding new categories of "statutory disqualification." Under the expanded definition, members and their associated persons may be subject to a disqualification (i.e., may be required to obtain regulatory approval before becoming a member of NASD or becoming associated with an NASD member) if they are subject to certain orders issued by a state securities commission or state insurance commissioner (or any agency or officer performing like functions); state authorities that supervise or examine banks, savings associations, or credit unions; an appropriate federal banking authority, or the National Credit Union Administration. Specifically, persons (including members) may be subject to a statutory disqualification based on orders issued by the above agencies that (1) bar a person from association or from engaging in the business of securities, insurance, banking, savings association activities, or credit union activities or (2) are based on violations of any laws or regulations that prohibit fraudulent, manipulative, or deceptive conduct.⁴

³ On April 6, 2003, the North American Securities Administrators Association, Inc. ("NASAA") voted to approve the proposed Forms revisions at its Membership meeting.

⁴ Section 15(b)(4)(H) of the Exchange Act.

The Form U-4 has historically been the vehicle for the reporting of events that may cause a person to become subject to statutory disqualification. NASD generally takes the lead in amending the Forms. Accordingly, with the concurrence of a working group of regulators, including state regulators, representatives of other SROs, and SEC observers, NASD is proposing to amend Section 14 (Disclosure Questions) of the Form U-4 to elicit reporting of regulatory actions that may now make individuals subject to a statutory disqualification under the expanded definition of "statutory disqualification" in the Exchange Act created by passage of the Sarbanes-Oxley Act.

The proposed rule change renumbers current Regulatory Action Disclosure Question 14D on the Form U-4 as Question 14D(1), adds Question 14D(2) to mirror the language in Section 15(b)(4)(H) of the Exchange Act, and modifies the "Regulatory Action DRP" on the Forms. To aid in reporting events under Question 14D(2), NASD proposes amending the "Specific Instructions" section of the Form U-4 with respect to Section 14 (Disclosure Questions). NASD proposes adding two new defined terms, "final order" and "federal banking agency," to the "Explanation of Terms" section of the Form U-4. NASD also proposes amending the "Regulatory Action" DRP on the Form U-4 to aid in reporting events required to be reported pursuant to the Sarbanes-Oxley Act.

Modifications to the Form U-4 Relating to Fingerprinting Requirements

NASD proposes to streamline the language associated with questions under Section 2 (Fingerprint Information) and Section 6 (Registration Requests with Affiliated Firm) on the Form U-4 to clarify fingerprinting requirements, including electronic filing representations, exceptions

to the fingerprint requirement, and fingerprint requirements for investment adviser representative only applicants.⁵

Under Section 2, NASD proposes to modify the "Electronic Filing Representation" subsection to address two situations that are not adequately covered by the current language. The first involves a firm's submitting fingerprint results on behalf of an individual whose fingerprints were processed through another SRO, in lieu of submitting fingerprint cards. The second occurs when a firm is seeking registration for an individual who (1) is currently employed by the firm (usually in an unregistered capacity) and (2) previously has been fingerprinted (either through NASD or another SRO).

The current electronic filing representation states that the firm is submitting or will promptly submit fingerprint cards as required by applicable SRO rules. In the two situations described above, firms will not be submitting fingerprint cards contemporaneously with, or within 30 days of, filing a Form U-4. The proposed language will allow firms and individuals to represent that the filing firm has continuously employed the individual since the last submission of a fingerprint card to NASD (and therefore is not required to resubmit a card at this time) or has continuously employed the individual since the individual had his or her fingerprints processed through another SRO, and the individual will submit (or has submitted) the processed results to the CRD system.

Also, under Section 2, NASD proposes to modify the "Exceptions to the Fingerprint Requirement" subsection. Currently, firms can claim an exception to the fingerprint requirement

⁵ In conjunction with the proposed changes relating to the fingerprint questions, NASD is proposing to amend the "Specific Instructions" section of the Form U-4 with respect to Section 2 (Fingerprint Information) and Section 6 (Registration Requests with Affiliated Firms).

by affirming that the individual has been continuously employed by the filing firm in an unregistered capacity (and had previously submitted a fingerprint card in connection with that employment) or meets one or more exemptions under Rule 17f-2. The proposed modification to the "Exceptions to the Fingerprint Requirement" questions would allow a firm to select the specific permissive exemption under Rule 17f-2(a)(1)(i) and/or (a)(1)(iii).⁶ Additional proposed changes to Section 2 will clarify fingerprint filing requirements for investment adviser representative only applicants.

Individuals use the Form U-4 to register with states in an investment adviser representative capacity (shown as "RA" on the Form U-4). Some states have advised NASD that individuals are confused about which radio button⁷ to select when applying solely for registration as an investment adviser. In some cases, these individuals have previously submitted a fingerprint card for registration with a broker-dealer. NASD proposes to amend the "Investment Adviser Representative Only Applicants" section by adding additional instructions under the heading "Fingerprint Information for *Affiliated Firms*" that will explain the fingerprint filing requirements for these applicants.

The proposed language will clarify the circumstances under which an individual may need to file a fingerprint card when submitting an application for state licensure as an investment adviser representative notwithstanding having previously submitted a fingerprint card with an

⁶ Rule 17f-2 governs the fingerprinting requirements of securities personnel. Rule 17f-2(a)(1)(i) permits an exemption for persons who are not engaged in the sale of securities; do not regularly have access to the keeping, handling, or processing of securities, monies, or books and records; and do not have supervisory responsibility over persons engaged in such activities. Rule 17f-2(a)(1)(iii) generally exempts the partners, directors, officers, and employees of a broker-dealer that is engaged exclusively in the sales of certain securities, such as variable contracts, limited partnership interests, and unit investment trusts.

⁷ A "radio button" is a navigation and selection device that allows a filer to select a particular option in an electronic filing environment.

unaffiliated broker-dealer. The proposed language will also address situations in which an investment adviser representative previously has satisfied a state fingerprint requirement by allowing the representative to make that representation on the Form U-4.⁸

Under Section 6 (Registration Requests With Affiliated Firms) of the Form U-4, NASD is proposing to add a fingerprint question to Section 6 (Registration Requests with Affiliated Firms) on the Form U-4 to create appropriate options for individuals requesting new registrations with a firm affiliated with the filing firm.⁹ The proposed "Electronic or Other Filing Representation" subsection will provide three additional radio buttons. Filers can select the current standard representation (i.e., "I am submitting, have submitted, or promptly will submit to the appropriate SRO a fingerprint card..."). In the alternative, the proposed representations would enable the individual to indicate that (1) he or she has been employed continuously by the filing firm since the last submission of a fingerprint card and he or she is not required to resubmit a fingerprint card; or (2) the individual has been employed continuously by the filing firm and his or her fingerprints have been processed by an SRO other than NASD and the individual is submitting, has submitted, or promptly will submit the processed results for posting to CRD. Section 6 will also contain a radio button that allows the applicant to select an exemption to the fingerprint requirement pursuant to Rule 17f-2.

⁸ This addition should be particularly helpful to investment adviser representatives who became licensed in a jurisdiction through the submission of a hard copy Form U-4 before that jurisdiction accepted electronic filings via the Investment Adviser Registration Depository and who are now being "transitioned" onto an electronic system via an electronically filed Form U-4 amendment.

⁹ "Affiliated firm" is a proposed new definition in the "Explanation of Terms" section of the Form U-4 to clarify the meaning of that term.

Conforming Changes

(1) NASD proposes replacing all references to "NASD Regulation" or "NASD Regulation, Inc." with "NASD" consistent with NASD's current corporate structure. NASD also proposes changing "U-4" to "U4" and "U-5" to "U5".

(2) NASD proposes making grammatical and other modifications that will make the Form U-4 and Form U-5 more consistent and better clarify the disclosure information that is required to be reported on the Forms. For example, NASD proposes rewording the summary field of the DRPs on the Form U-4 and Form U-5 to emphasize that those fields are optional for comments by representatives and firms, respectively.

(3) NASD proposes adding to the Form U-5 a new disclosure question (Question 7F) and corresponding DRP to mirror Question 14J on the Form U-4. This question would allow firms to report that an individual was terminated after allegations of certain violations, fraud, wrongful taking of property, or failure to supervise, and would further clarify the individual's obligation to report the termination on the Form U-4. Currently, NASD staff must rely on the reason for termination or a firm-initiated internal review as reported (by the former employing firm) on an individual's Form U-5 to determine whether that individual is required to answer Question 14J affirmatively. The new Question 7F on the Form U-5 should clarify for NASD staff and terminated individuals the basis for and circumstances surrounding the termination (and whether it requires an affirmative answer on the corresponding Form U-4 question) and will enable firms appropriately to identify and provide supporting details regarding terminations for cause. Similarly, NASD proposes adding "resign or resigned" as an explained term on the Form U-5 to parallel the same term on the Form U-4 for purposes of the new Question 7F.

(5) NASD proposes modifying the Customer Complaint DRP on both Forms to distinguish the fields that are required for reporting a customer complaint, arbitration and/or litigation. The proposed changes add instructions and rearrange the questions in a more logical order; however, the content of the customer complaint disclosure question and DRP fields will not change.

(6) NASD proposes revising the language in Question 14F to clarify the intent of the reporting obligation.¹⁰

(7) NASD proposes changes to the current hair and eye color codes to match the codes used by the Federal Bureau of Investigation's fingerprint system.

(8) NASD proposes other consistency changes that relate to bolding or highlighting certain instructions in the DRPs to facilitate appropriate reporting on the Forms.

(b) Statutory Basis

NASD believes that the proposed rule change is consistent with the provisions of Exchange Act Section 15A(b)(6), which requires, among other things, that NASD's rules must be designed to prevent fraudulent and manipulative acts and practices, to promote just and equitable principles of trade, and, in general, to protect investors and the public interest. NASD believes that the proposed rule change is designed to accomplish these ends by making changes to the Forms that would (1) add disclosure questions to elicit reporting of events that may cause a person to be subject to a statutory disqualification as a result of the expansion of the federal definition of statutory disqualification based on the enactment of the Sarbanes-Oxley Act; (2) add

¹⁰ Currently, Question 14F asks, "Has your authorization to act as an attorney, accountant or federal contractor ever been revoked or suspended?" The proposed Question 14F asks, "Have you ever had an authorization to act as an attorney, accountant or federal contractor that was revoked or suspended?"

a DRP and a question to the Form U-5 that parallels the Form U-4 DRP and question relating to terminations for cause; and (3) make other technical, clarifying, and conforming changes that are intended to facilitate accurate reporting.

(B) Self-Regulatory Organization's Statement on Burden on Competition

NASD does not believe that the proposed rule change will result in any burden on competition that is not necessary or appropriate in furtherance of the purposes of the Act, as amended.

(C) Self-Regulatory Organization's Statement on Comments on the Proposed Rule Change Received from Members, Participants, or Others

Written comments were neither solicited nor received.

III. DATE OF EFFECTIVENESS OF THE PROPOSED RULE CHANGE AND TIMING FOR COMMISSION ACTION

Within 35 days of the date of publication of this notice in the Federal Register or within such longer period (i) as the Commission may designate up to 90 days of such date if it finds such longer period to be appropriate and publishes its reasons for so finding or (ii) as to which the self-regulatory organization consents, the Commission will:

A. by order approve such proposed rule change, or

B. institute proceedings to determine whether the proposed rule change should be disapproved.

IV. SOLICITATION OF COMMENTS

Interested persons are invited to submit written data, views, and arguments concerning the foregoing. Persons making written submissions should file six copies thereof with the Secretary, Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549. Copies

of the submission, all subsequent amendments, all written statements with respect to the proposed rule change that are filed with the Commission, and all written communications relating to the proposed rule change between the Commission and any person, other than those that may be withheld from the public in accordance with the provisions of 5 U.S.C. 552, will be available for inspection and copying in the Commission's Public Reference Room. Copies of such filing will also be available for inspection and copying at the principal office of NASD. All submissions should refer to the file number in the caption above and should be submitted by [insert date 21 days from the date of publication].

For the Commission, by the Division of Market Regulation, pursuant to delegated authority, 17 CFR 200.30-3(a)(12).

Margaret H. McFarland
Deputy Secretary

Rev. Form U-4U4 (03/200206/2003)

Form U-4U4

Uniform Application for Securities Industry Registration or Transfer

GENERAL INSTRUCTIONS

The Form U-4U4 is the Uniform Application for Securities Industry Registration or Transfer. Representatives of broker-dealers, investment advisers, or issuers of securities must use this form to become registered in the appropriate *jurisdictions* and/or *SROs*. These instructions apply to the filing of Form U-4U4 electronically with the Central Registration Depository ("CRD[®]") or the Investment Adviser Registration Depository ("IARDSM"). Filers submitting paper filings should read the Special Instructions for Paper Filers in conjunction with the other instructions to the form. In addition, paper filers should contact the appropriate *jurisdiction* and/or *SRO* for specific filing instructions or requirements.

Filers must answer all questions and submit all requested information, unless otherwise directed in the Specific Instructions.

Use the Disclosure Reporting Page(s) (DRPs U-4U4) to provide details to the "Yes" answers on Section 14 (DISCLOSURE QUESTIONS). Upon request, you may be required to provide documents to clarify or support responses to the form.

An individual is under a continuing obligation to amend and update information required by Form U-4U4 as changes occur. Amendments must be filed electronically (unless the filer is an approved paper filer) by updating the appropriate section of Form U-4U4. A copy, with original signatures, of the initial Form U-4U4 and amendments to Disclosure Reporting Pages (DRPs U-4U4) must be retained by the *filing firm* and must be made available for inspection upon regulatory request. Social Security Numbers are collected for regulatory purposes and may be publicly disclosed by certain *jurisdictions*.

The Sections of the Form U-4U4 are as follows:

1. GENERAL INFORMATION
2. FINGERPRINT INFORMATION
3. REGISTRATION WITH UNAFFILIATED FIRMS
4. SRO REGISTRATIONS
5. JURISDICTION REGISTRATIONS
6. REGISTRATION REQUESTS WITH AFFILIATED FIRMS
7. EXAMINATION REQUESTS
8. PROFESSIONAL DESIGNATIONS
9. IDENTIFYING INFORMATION/NAME CHANGE
10. OTHER NAMES
11. RESIDENTIAL HISTORY
12. EMPLOYMENT HISTORY
13. OTHER BUSINESS
14. DISCLOSURE QUESTIONS
 - CRIMINAL DISCLOSURE (Questions 14A, 14B)
 - REGULATORY DISCIPLINARY ACTIONS (Questions 14C, 14D, 14E, 14F, 14G)

CIVIL JUDICIAL ACTIONS (Question 14H)

| CUSTOMER COMPLAINTS/ARBITRATIONS/CIVIL LITIGATIONS (Question 14I)

TERMINATIONS (Question 14J)

FINANCIAL (Questions 14K, 14L, 14M)

15. SIGNATURE

15A. INDIVIDUAL/APPLICANT'S ACKNOWLEDGMENT AND CONSENT

15B. FIRM/APPROPRIATE SIGNATORY REPRESENTATIONS

15C. TEMPORARY REGISTRATION ACKNOWLEDGMENT

15D. AMENDMENT INDIVIDUAL/APPLICANT'S ACKNOWLEDGMENT AND CONSENT

15E. FIRM/APPROPRIATE SIGNATORY AMENDMENT REPRESENTATIONS

15F. FIRM/APPROPRIATE SIGNATORY CONCURRENCE

| DISCLOSURE REPORTING PAGES (DRPs ~~U-4~~U4)

CRIMINAL DRP

REGULATORY ACTION DRP

INVESTIGATION DRP

CIVIL JUDICIAL DRP

| CUSTOMER COMPLAINT/ARBITRATION/CIVIL LITIGATION DRP

TERMINATION DRP

BANKRUPTCY/SIPC/COMPROMISE WITH CREDITORS DRP

BOND DRP

JUDGMENT/LIEN DRP

| Contact the appropriate *SRO* or *jurisdiction*, if you have questions about the Form ~~U-4~~U4.

EXPLANATION OF TERMS

The following definitions apply to terms that are italicized in Form ~~U-4U4~~.

AFFILIATED means under common ownership or control.

AFFILIATED FIRM means a broker-dealer under common ownership or control with the filing firm.

APPLICANT means the individual for whom the Form ~~U-4U4~~ is being filed. The term *applicant* may be used interchangeably with the term “individual.” The instructions also refer to the individual *applicant* as “you” in various places because individuals independently may complete all or portions of the Form ~~U-4U4~~ before it is filed by a *firm* on the individual’s behalf. For purposes of Form ~~U-4U4~~, an *applicant* is not a *firm*.

APPROPRIATE SIGNATORY means the individual the *firm* authorizes to execute the *applicant's* Form ~~U-4U4~~ on the *filing firm's* behalf. The *appropriate signatory* must meet the criteria established, if any, by the appropriate *SRO* or *jurisdiction*.

CHARGED means being accused of a crime in a formal complaint, information, or indictment (or equivalent formal charge).

CONTROL means the power to direct or cause the direction of the management or policies of a company, whether through ownership of securities, by contract, or otherwise. Any individual or *firm* that is a director, partner, or officer exercising executive responsibility (or having similar status or functions) or 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 is presumed to control that company.

DESIGNATED ENTITY means the entity designated as the filing depository by the U.S. Securities and Exchange Commission pursuant to the Investment Advisers Act of 1940.

ENJOINED includes being subject to a mandatory injunction, prohibitory injunction, preliminary injunction or a temporary restraining order.

FEDERAL BANKING AGENCY shall include any Federal banking agency as defined in Section 3 of the Federal Deposit Insurance Act (12 U.S.C. 1813(q)).

FELONY, for *jurisdictions* that do not differentiate between a *felony* or *misdemeanor*, is an offense punishable by a sentence of at least one year imprisonment and/or a fine of at least \$1,000. The term also includes a general court martial.

FILING FIRM means the *firm* named in Section 1 (GENERAL INFORMATION) on the Form ~~U-4U4~~.

FINAL ORDER, for purposes of Question 14D(2), means a written directive or declaratory statement issued by an appropriate federal or state agency (as identified in Question 14D(2)) pursuant to applicable statutory authority and procedures, that constitutes a final disposition or action by that federal or state agency.

FIRM means a broker-dealer, investment adviser, or issuer, as appropriate.

FIRM CRD NUMBER is a unique number assigned to each *firm* listed in the CRD or IARD systems.

FOREIGN FINANCIAL REGULATORY AUTHORITY includes a foreign securities authority; any other governmental body or foreign equivalent of a *self-regulatory organization* empowered by a foreign government to administer or enforce its laws relating to the regulation of *investment-related* activities; or a membership organization, a function of which is to regulate the participation of its members in *investment-related* activities listed above.

FOUND includes adverse final actions, including consent decrees in which the respondent has neither admitted nor denied the findings, but does not include agreements, deficiency letters, examination reports, memoranda of understanding, letters of caution, admonishments, and similar informal resolutions of matters.

INDIVIDUAL CRD NUMBER is a unique number assigned to each individual listed in the CRD or IARD system.

INVESTIGATION includes: (a) grand jury investigations; (b) U.S. Securities and Exchange Commission investigations after the “Wells” notice has been given; (c) NASD ~~Regulation, Inc.~~ investigations after the “Wells” notice has been given or after a person associated with a member, as defined in the NASD By-Laws, has been advised by the staff that it intends to recommend formal disciplinary action; (d) formal investigations by other *SROs*; or (e) actions or procedures designated as investigations by *jurisdictions*. The term *investigation* does not include subpoenas, preliminary or routine regulatory inquiries or requests for information, deficiency letters, “blue sheet” requests or other trading questionnaires, or examinations.

INVESTMENT-RELATED pertains to securities, commodities, banking, insurance, or real estate (including, but not limited to, acting as or being associated with a broker-dealer, issuer, investment company, investment adviser, futures sponsor, bank, or savings association).

INVOLVED means doing an act or aiding, abetting, counseling, commanding, inducing, conspiring with or failing reasonably to supervise another in doing an act.

JURISDICTION means a state, the District of Columbia, the Commonwealth of Puerto Rico, or any subdivision or regulatory body thereof.

MINOR RULE VIOLATION is a violation of a *self-regulatory organization* rule ~~that~~ ~~which~~ has been designated as “minor” pursuant to a plan approved by the U.S. Securities and Exchange Commission. A rule violation **may** be designated as “minor” under a plan if the sanction imposed

consists of a fine of \$2,500.00 or less, and if the sanctioned person does not contest the fine. Check with the appropriate *self-regulatory organization* to determine if a particular rule violation has been designated as “minor” for these purposes.

MISDEMEANOR, for *jurisdictions* that do not differentiate between a *felony* or *misdemeanor*, is an offense punishable by a sentence of less than one year imprisonment and/or a fine of less than \$1,000. The term also includes a special court martial.

ORDER means a written directive issued pursuant to statutory authority and procedures, including orders of denial, suspension, or revocation; does not include special stipulations, undertakings or agreements relating to payments, limitations on activity or other restrictions unless they are included in an order.

PROCEEDING includes a formal administrative or civil action initiated by a governmental agency, *self-regulatory organization* or *foreign financial regulatory authority*, a *felony* criminal indictment or information (or equivalent formal charge), or a *misdemeanor* criminal information (or equivalent formal charge), but does not include an arrest or similar charge effected in the absence of a formal criminal indictment or information (or equivalent formal charge). NOTE: *Investment-related* civil litigation, other than that specified above, is reportable under Question 14H on Form U-4~~U4~~. An *investigation* is reportable under Question 14G on Form U-4~~U4~~.

RESIGN or RESIGNED relates to separation from employment with any employer, is **not** restricted to *investment-related* employment, and includes any termination in which the allegations are a proximate cause of the separation, even if the individual~~you~~ initiated the separation.

SALES PRACTICE VIOLATIONS shall include any conduct directed at or involving a customer which would constitute a violation of: any rules for which a person could be disciplined by any *self-regulatory organization*; any provision of the Securities Exchange Act of 1934; or any state statute prohibiting fraudulent conduct in connection with the offer, sale or purchase of a security or in connection with the rendering of investment advice.

SELF-REGULATORY ORGANIZATION (“SRO”) means any national securities or commodities exchange, any national securities association (e.g., ~~the~~ NASD), or any registered clearing agency.

SPECIFIC INSTRUCTIONS
Completing the Form ~~U-4~~U4**1. GENERAL INFORMATION****First Name**

Enter the individual's first name. Do not use nicknames or abbreviations or make modifications to the individual's first name.

Middle Name

If the individual has a middle name, specify the full middle name. Do not use nicknames or abbreviations or make modifications to the individual's middle name. If the individual does not have a middle name, leave this field blank.

Last Name

Enter the individual's last name. Do not use nicknames or abbreviations or make modifications to the individual's last name. Include punctuation when and where appropriate.

Suffix

Enter any suffix that follows the individual's last name, such as Jr., Sr., etc. Include punctuation when and where appropriate.

Firm CRD Number

Enter the *Firm CRD Number*.

Firm Name

Enter the *firm's* complete name as listed on the Form BD or the Form ADV. Do not abbreviate, shorten, or modify the *firm* name in any way.

Employment Date

Enter the month, day, and year of hire. Do not enter the date of application for registration. Your entry must be numeric (MM/DD/YYYY).

CRD Branch Number

Enter the branch number assigned by the CRD system to identify your branch office. If your branch office or office of employment does not have a CRD assigned branch number, leave this field blank.

Firm Billing Code

Enter your *firm's* billing code. A billing code is an alpha/numeric value consisting of up to eight characters that your *firm* has established. If your *firm* does not use billing codes, leave this field blank.

Individual CRD Number

Enter the assigned *individual CRD number*.

Individual SSN

Enter the individual's Social Security Number. If the individual does not have a CRD number or a Social Security number, please contact NASDR's Gateway Call Center.

Office of Employment Address Street 1/Street 2

Enter the address where the individual is physically located for business purposes. A complete address must be furnished. Post office boxes are not acceptable. This address does not have to be the same as the *firm's* main address. You may enter additional identifying information in Office of Employment Address Street 2, if necessary.

City

Enter the name of the city where the individual is physically located for business purposes.

State

Enter the state where the individual is physically located for business purposes.

Country

Enter the name of the country where the individual is physically located for business purposes.

Postal Code

Enter the postal code where the individual is physically located for business purposes.

Private Residence Check Box

Check this box if the Office of Employment address is a private residence.

2. FINGERPRINT INFORMATION

Electronic Filing Representation

Select the radio button to affirm the following: "By selecting this option, I represent that I am submitting, have submitted, or promptly will submit to the appropriate SRO ~~a the hard-copy fingerprint cards as required under~~ via U.S. Mail or delivery service as required under applicable SRO rules; or, By selecting this option, I represent that I have been employed continuously by the filing firm since the last submission of a fingerprint card to CRD and am not required to resubmit a fingerprint card at this time; or, By selecting this option, I represent that I have been employed continuously by the filing firm and my fingerprints have been processed by an SRO other than NASD. I am submitting, have submitted, or promptly will submit the processed results for posting to CRD." (Paper filers should skip this representation and should submit cards with their filing if required to do so.)

Fingerprint Bar Code

Enter the bar code as it appears on the individual's fingerprint card. Submission of the bar code is optional.

Exceptions to the Fingerprint Requirement

If the individual is not required to submit a fingerprint card with an initial Form ~~U-4~~ U4, select the radio button that affirms, "By selecting one or more of the following two options, I affirm that I am exempt from the federal fingerprint requirement because I/filing firm currently satisfy(ies) the requirements of at least one of the permissive exemptions indicated below pursuant to Rule 17f-2 under the Securities Exchange Act of 1934, including any notice or application requirements specified therein;" and select one or more of the check boxes: due to one of the reasons listed below in this section, select the radio-button/box next to the appropriate item.

[Check box] Rule 17f-2(a)(1)(i)

[Check box] Rule 17f-2(a)(1)(iii)

~~? I have been continuously employed by the filing firm in an unregistered capacity since the last submission of a fingerprint card; or~~

~~? I am exempt from the fingerprint requirement because I meet one or more of the exemptions established by Rule 17f-2 under the Securities Exchange Act of 1934.~~

Investment Adviser Representative Only Applicants

~~Please refer to the cover page of this form for a list of jurisdictions that require fingerprints for Investment Adviser Representatives (RAs). Contact the specific jurisdiction about any fingerprint requirements.~~ Complete the following sections:

~~Investment A~~ adviser R ~~representative O~~ nly representation

- I affirm that I am applying only as an investment adviser representative and that I am not also applying or have not also applied with this firm to become a broker-dealer representative. If this radio button/box is selected, continue below.

~~Fingerprint representations for Investment Adviser Representative only applicants~~

- I am applying for registration only in *jurisdictions* that do not have fingerprint card filing requirements, or
- I am applying for registration in *jurisdictions* that have fingerprint card filing requirements and I am submitting, have submitted, or promptly will submit the appropriate fingerprint card directly to the *jurisdictions* for processing pursuant to applicable jurisdiction rules.

3. REGISTRATION WITH UNAFFILIATED FIRMS

Some *jurisdictions* prohibit "dual registration," which occurs when an individual chooses to maintain a concurrent registration as a representative/agent with two or more *firms* (either BD or IA *firms*) that are not *affiliated*. *Jurisdictions* that prohibit dual registration would not, for example, permit a broker-dealer agent working with brokerage *firm* A to maintain a registration with brokerage *firm* B if *firms* A and B are not owned or controlled by a common parent. Before seeking a dual registration status, you should consult the applicable rules or statutes of the *jurisdictions* with which you seek registration for prohibitions on dual registrations or any liability provisions.

Please indicate whether the individual will maintain a "dual registration" status by answering the questions in this section. (Note: An individual should answer 'yes' only if the individual is currently registered and is seeking registration with a *firm* (either BD or IA) that is not *affiliated* with the individual's current employing *firm*. If this is an initial application, an individual must answer 'no' to these questions; a "dual registration" may be initiated only after an initial registration has been established).

Answer "yes" or "no" to the following questions:

A. Will *applicant* maintain registration with a broker-dealer that is not *affiliated* with the *filing firm*?

If you answer "yes," list the *firm(s)* in Section 12 (EMPLOYMENT HISTORY).

B. Will *applicant* maintain registration with an investment adviser that is not *affiliated* with the *filing firm*?

If you answer "yes," list the *firm(s)* in Section 12 (EMPLOYMENT HISTORY).

4. SRO REGISTRATION

~~Investment A~~adviser ~~R~~representative ~~O~~only ~~(RA-only)~~ applicants may skip this item.

Registration with SRO(s)

Indicate with which *SRO(s)* the individual seeks to register by selecting the appropriate *SRO* registration request box(es).

"Other" Box

See Special Instructions for Paper Filers.

5. JURISDICTION REGISTRATION

Select the type of registration you are seeking: broker Dealer Agent (AG) and/or Investment Adviser Representative (RA).

Select the appropriate *jurisdiction*(s) to register as an an ~~Broker-Dealer-Agent (AG)~~ and/or an ~~Investment Adviser Representative (RA)~~.

Agent of an Issuer If you are seeking registration as an Agent of an Issuer (AI), select the box marked AI, then enter the two-letter *jurisdiction* code for each *jurisdiction* in which you seek to register. (Note: This instruction applies to paper filers only.)

6. REGISTRATION REQUESTS WITH AFFILIATED FIRMS

If the individual seeks registration with *firm*(s) *affiliated* with the *filing firm*, complete the following to make a request for registration with the additional *affiliated firm*(s).

Affiliated Firm CRD Number

Enter the *affiliated firm's* CRD Number.

Affiliated Firm Name

Enter the *affiliated firm's* name. This should be the name of the *affiliated firm* as listed on the Form BD or Form ADV. Agents of Issuers should enter the *affiliated* issuer name in this field. Do not abbreviate, shorten or otherwise modify the *firm* name in any way.

Affiliated Firm Designation - Broker-Dealer or Investment Adviser (BD/IA)

Select the appropriate radio button (paper filers check the appropriate box) marked as "BD" or "IA" to indicate whether the *affiliated firm* is a broker-dealer or an investment adviser.

Employment Date with Affiliated Firm

Enter the month, day, and year of hire by the *affiliated firm*. Do not enter the date of application for registration. Your entry must be numeric (MM/DD/YYYY).

Affiliated Firm CRD Branch Number

Enter the branch number assigned by the CRD system to identify your branch office with the *affiliated firm*.

Affiliated Firm Billing Code

Enter your *firm's* billing code. A billing code is an alpha/numeric value consisting of up to eight characters that your *firm* has established. If your *firm* does not use billing codes, leave this field blank.

Office of Employment Address Street 1 /Street 2

Enter the address where the individual is physically located for business purposes. A complete address must be furnished. Post office boxes are not acceptable. This address does not have to be the same as the *firm's* main address. You may enter additional identifying information in Office of Employment Address Street 2, if necessary.

City

Enter the name of the city where the individual is physically located for business purposes.

State

Enter the state where the individual is physically located for business purposes.

Country

Enter the name of the country where the individual is physically located for business purposes.

Postal Code

Enter the postal code where the individual is physically located for business purposes.

Designation for Registrations with SROs and Jurisdictions Identical to Filing Firm

Select this radio button/box to indicate that you wish to register with the same *SROs* and *jurisdictions* that you registered with for association with the *filing firm*.

Designation for Registrations with SROs and Jurisdictions that Differ from Your Registrations with Filing Firm

For electronic filers, select the button/box if you wish to register with SROs and jurisdictions that differ from your SRO and jurisdictions registrations with the filing firm. After you make this designation, additional screens for SROs and jurisdictions will appear for you to complete as appropriate.

Fingerprint Information for Affiliated Firms**Electronic or Other Filing Representation**

Select a radio button to affirm: "By selecting this option, I represent that I am submitting, have submitted, or promptly will submit to the appropriate SRO a fingerprint card as required under applicable SRO rules; or, By selecting this option, I represent that I have been employed continuously by the affiliated firm since the last submission of a fingerprint card to CRD and am not required to resubmit a fingerprint card at this time; or, I am not required to submit a fingerprint card at this time because the fingerprint card submitted by the filing firm applies; or, By selecting this option, I represent that I have been employed continuously by the affiliated firm and my fingerprints have been processed by an SRO other than NASD. I am submitting, have submitted, or promptly will submit the processed results for posting to CRD.

Fingerprint Bar Code

Enter the bar code as it appears on the individual's fingerprint card. Submission of the bar code is optional.

Exceptions to the Fingerprint Requirement

If the individual is not required to submit a fingerprint card with an initial Form U4, select the radio button that affirms, "By selecting one or more of the following two options, I affirm that I am exempt from the federal fingerprint requirement because I/filing firm currently satisfy(ies) the requirements of at least one of the permissive exemptions indicated below pursuant to Rule 17f-2 under the Securities Exchange Act of 1934, including any notice or application requirements specified therein:" and select one or more of the check boxes:

- _____ [Check box] Rule 17f-2(a)(1)(i)
_____ [Check box] Rule 17f-2(a)(1)(iii)

Investment Adviser Representative Only Applicants

- I affirm that I am applying only as an investment adviser representative and that I am not also applying or have not also applied with this firm to become a broker-dealer representative. If this radio button/box is selected, continue below.
 - I am applying for registration only in jurisdictions that do not have fingerprint card filing requirements, or
 - I am applying for registration in jurisdictions that have fingerprint card filing requirements and I am submitting, have submitted, or promptly will submit the appropriate fingerprint card directly to the jurisdictions for processing pursuant to applicable jurisdiction rules.

7. EXAMINATION REQUESTS

Scheduling or Rescheduling Examinations

Complete this section only if you are scheduling or rescheduling an examination or continuing education session. Do not select the ~~s~~Series 63 (~~S63~~) or ~~Series 65 (Series 65)~~ examinations in this section if you have completed Section 5 (JURISDICTION REGISTRATION) and have selected registration in a *jurisdiction*. If you have completed Section 5 (JURISDICTION REGISTRATION), and requested an ~~n~~ ~~Broker-Dealer Agent (AG)~~ registration in a *jurisdiction* that requires that you pass the ~~Series-63~~ examination, an ~~n~~ ~~Series-63~~ examination will be automatically scheduled for you upon submission of this Form ~~U-4U4~~. If you have completed Section 5 (JURISDICTION REGISTRATION), and requested an ~~n~~ ~~Investment Adviser Representative (RA)~~ registration in a *jurisdiction* that requires that you pass the ~~Series-65~~ examination, an ~~n~~ ~~Series-65~~ examination will be automatically scheduled for you upon submission of this Form ~~U-4U4~~.

"Other" Box

Paper filers should check the "Other" box only to request other examinations not currently listed on the Form ~~U-4U4~~.

8. PROFESSIONAL DESIGNATIONS

Select the designation(s) you currently maintain. If you maintain one or more of the designations listed in Section 8 (PROFESSIONAL DESIGNATIONS), you may be eligible for a waiver from the examination(s) required to become an ~~Investment Adviser Representative (RA)~~. Refer to the UNIFORM FORMS REFERENCE GUIDE for additional information about designations. Note: This field is optional unless you are seeking a waiver from the examination(s) required to become an ~~Investment Adviser Representative (RA)~~.

9. IDENTIFYING INFORMATION/NAME CHANGE

This section will be pre-populated with the identifying information provided in Section 1 (GENERAL INFORMATION).

If the individual's name has changed, enter the new name.

First Name

Enter the individual's first name. Do not use nicknames or abbreviations or make modifications to the individual's first name.

Middle Name

If the individual has a middle name, specify the full middle name. Do not use nicknames or abbreviations or make modifications to the individual's middle name. If the individual does not have a middle name, leave this field blank.

Last Name

Enter the individual's last name. Do not use nicknames or abbreviations or make modifications to the individual's last name. Include punctuation when and where appropriate.

Suffix

Enter any suffix that follows the individual's last name, such as Jr., Sr., etc. Include punctuation when and where appropriate.

Date of Birth

Enter your date of birth. Your entry must be numeric (MM/DD/YYYY).

State/Province of Birth

Enter the name of the state or province where you were born.

Country of Birth

Enter the name of the country where you were born.

Sex

Select the appropriate button to indicate your gender.

Height (ft)/(in)

Enter your height, measured in feet and inches.

Weight (lbs)

Enter your weight, measured in pounds.

Hair Color

Enter your hair color.

Eye Color

Enter your eye color.

10. OTHER NAMES

Enter all other names that you have used or are using, or by which you are known or have been known, other than your legal name, since the age of 18. This field must include, for example, nicknames, aliases, and names used before or after marriage.

11. RESIDENTIAL HISTORY

Provide your residential addresses for the past five (5) years. Leave no gaps greater than three (3) months between addresses. Begin by entering your current residential address. Enter "Present" as the end date for your current address. Post Office boxes are not acceptable. Report changes as they occur.

From (MM/YYYY)

Enter the month and year you began residing at this address.

To (MM/YYYY)

Enter the month and year you stopped residing at this address. Enter "Present" as the end date for your current address.

Street Address 1/Street Address 2

Enter your street address here. Post office boxes are not acceptable. Include the street name; building name or number; and unit, suite, apartment or condominium number, as applicable; as well as other identifying information. Continue on Street Address 2 if you need more space.

City

Enter your city.

State

Enter the state of residence relating to this address.

Country

Enter the name of the country of residence for this address.

Postal Code

Enter the postal code for this address.

12. EMPLOYMENT HISTORY

Provide your employment and personal history for the past ten (10) years. Leave no gaps greater than three (3) months between entries. All entries must include the beginning and end dates of employment. Begin by entering your current employment. Enter "Present" as the end date for your current employment. Include in your response the *firm* named in Section 1 (GENERAL INFORMATION); the *firm(s)* named in Section 3 (REGISTRATION

WITH UNAFFILIATED FIRMS); and the *firm(s)* named in Section 6 (REGISTRATION REQUESTS WITH AFFILIATED FIRMS). Account for full-time and part-time employment, self-employment, military service, and homemaking. Include unemployment, full-time education, extended travel, and other similar statuses.

From (MM/YYYY)

Enter the month and year you started this position. Your entry must be numeric (MM/DD/YYYY).

To (MM/YYYY)

Enter the month and year you ended this position. Your entry must be numeric (MM/DD/YYYY). Enter "Present" as the end date for your current employment.

Name

Enter the name of the employing *firm* or company for this position.

City

Enter the name of the city where you are/were employed in this position.

State

Enter the name of the state where you are/were employed in this position. Paper filers should enter the two-character state identification.

Country

Enter the name of the country where you are/were employed in this position.

Investment-Related Business

Enter "yes" or "no" to indicate whether the employer is or was an *investment-related* business at the time of your employment, regardless of the position that you hold or held at the time of employment.

Position Held

Enter your last title or position held with this employer.

13. OTHER BUSINESS

Enter "yes" or "no" to indicate whether you currently are engaged in any other business, either as a proprietor, partner, officer, director, employee, trustee, agent, or otherwise. Exclude non-*investment-related* activity that is exclusively charitable, civic, religious or fraternal, and is recognized as tax exempt.

If you answer "yes" to this question, provide the following information:

- name and address of the other business
 - the nature of the other business, including whether it is *investment-related*
 - your position, title, or association with the other business, including your duties
 - the start date of your relationship with the other business
 - the approximate number of hours per month you devote to the other business
 - the number of hours you devote to the other business during securities trading hours
-

14. DISCLOSURE QUESTIONS

Check the appropriate "yes" or "no" response for each question. Provide complete details explaining any "yes" answers on the appropriate Disclosure Reporting Pages (DRPs).

Note that an affirmative answer to certain disclosure questions may make an individual subject to a statutory disqualification as defined in Section 3(a)(39) and Section 15(b)(4) of the Securities Exchange Act of 1934.

Questions 14D(1) and 14D(2) are not mutually exclusive. For purposes of Question 14D(1), state regulatory agency means any state regulatory agency and is not limited to state financial regulatory agencies. For purposes of Question 14D(2), all terms have the same meanings as intended by Congress and interpreted by the U.S. Securities and Exchange Commission under parallel provisions contained in Section 3(a)(39) and Section 15(b)(4) of the Securities Exchange Act of 1934.

Criminal Disclosure

14A - *Felony* Criminal Disclosure

14B - *Misdemeanor* Criminal Disclosure

Regulatory Action Disclosure

14C - Regulatory Action by SEC or CFTC

14D(1) - Regulatory Action by other federal regulator, state regulator, or foreign financial regulator-

14D(2) – Final order of state securities commission, state authority that supervises or examines banks, savings associations, or credit unions, state insurance commission, appropriate Federal Banking agency, or National Credit Union Administration

14E - Regulatory Action by SRO or commodities exchange

14F - Professional Suspension

14G - Formal Pending Action/*Investigation*

Civil Judicial Actions

14H - Civil Judicial Actions

Customer Complaints

14I - Customer Complaints

Terminations

14J - Terminations for Cause

Financial

14K - ~~Bankruptcy~~, ~~and SSIPC~~ and Compromise with Creditors

14L - Bonding Payouts or Revocations

14M - Unsatisfied Judgments and Liens

15. SIGNATURES

Please Read Carefully

All signatures required on this Form ~~U-4~~U4 filing must be made in this section.

A "signature" includes a manual signature or an electronically transmitted equivalent. For purposes of an electronic form filing, a signature is effected by typing a name in the designated signature field. By typing a name in this field, the signatory acknowledges and represents that the entry constitutes in every way, use, or aspect, his or her legally binding signature.

The form includes signature fields for the individual/*applicant* and for the *Appropriate Signatory*. *Firms* are responsible for obtaining the individual/*applicant's* consent to the

undertakings and attestations enumerated in Section 15A (INDIVIDUAL/APPLICANT'S ACKNOWLEDGMENT AND CONSENT). *Firms* also are responsible for complying with all records retention requirements applicable to this form.

When making entries in this section, both the Date and Name/Signature fields must be completed as follows:

Date. For individual/*applicant*, enter the date that the application or amendment is being signed. For *Appropriate Signatory* entries, enter the date that the application or amendment is being filed. Entries must be numeric (MM/DD/YYYY). Future dates may not be entered in this section.

Name/Signature of Individual or Appropriate Signatory. Enter the name of the individual or the *Appropriate Signatory*. The signatory's full legal name must be displayed under the signature. The name must be typed or printed as it appears in signature form. By typing a name in this field, the signatory acknowledges that this entry constitutes in every way, use, or aspect, his or her legally binding signature.

15A INDIVIDUAL/APPLICANT'S ACKNOWLEDGMENT AND CONSENT

This section must be completed on all initial or Temporary Registration form filings.

15B FIRM/APPROPRIATE SIGNATORY REPRESENTATIONS

This section must be completed on all initial or Temporary Registration form filings.

15C TEMPORARY REGISTRATION ACKNOWLEDGMENT

This section must be completed on Temporary Registration form filings to be able to receive Temporary Registration.

15D INDIVIDUAL/APPLICANT'S AMENDMENT ACKNOWLEDGMENT AND CONSENT

This section must be completed on any amendment filing that amends any information in Section 14 (Disclosure Questions) or any Disclosure Reporting Page (DRP).

15E FIRM/APPROPRIATE SIGNATORY AMENDMENT REPRESENTATIONS

This section must be completed on all amendment form filings.

15F FIRM/APPROPRIATE SIGNATORY CONCURRENCE

This section must be completed to concur with a U-4 filing made by another firm (IA/BD) on behalf of an individual that is also registered with that other firm (IA/BD).

APPENDIX
Drop-Down Pick Lists

General

State: Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Puerto Rico, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin, Wyoming

Identifying Information/Name Changes

Hair Color: ~~Auburn, b~~Bald, black, blonde, ~~brown or strawberry, brown, dirty blonde, gray_~~
~~or partially gray, grey black, light brown, mixed,~~ red/~~auburn, salt/pepper,~~ sandy,
~~strawberry blonde,~~ white, unknown, blue, green, orange, pink, purple.

Eye Color: ~~Amber, B~~black, blue, ~~blue/green/grey,~~ brown, gray, green, ~~_, grey,~~ hazel, maroon, multicolored, pink, unknown~~violet.~~

DRPs

Bankruptcy/SIPC/Compromise with Creditors

Action Type: Bankruptcy, compromise, declaration, liquidated, other, receivership.

If not pending, provide disposition type: Direct Payment Procedure, Discharged, Dismissed, Dissolved, Other, SIPA Trustee Appointed, Satisfied/Released.

Bond

Disposition Type: Denied, Payout, Revoked.

Civil Judicial

Principal relief sought: Cease and Desist, Civil Penalty(ies)/Fine(s), Disgorgement, Injunction, Money Damages (Private/Civil Complaint), Other, Restitution, Restraining Order.

Principal product type: Annuity(ies)-Fixed, Annuity(ies)-Variable, CD(s), Commodity Option(s), Debt-Asset Backed, Debt-Corporate, Debt, Government, Debt-Municipal, Derivative(s), Direct Investment(s)-DDP & LP Interest(s), Equity-OTC, Equity Listed (Common & Preferred Stock), Futures-Commodity, Futures-Financial, Index Option(s), Insurance, Investment Contract(s), Money Market Fund(s), Mutual Fund(s), No Product, Options, Other, Penny Stock(s), Unit Investment Trust(s).

How was matter resolved: Consent, Dismissed, Judgment Rendered, Opinion, Other, Settled, Withdrawn.

Customer Complaint/Arbitration/Civil Litigation

Customer's state of residence: Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Puerto Rico, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin, Wyoming

Principal product type: Annuity(ies)-Fixed, Annuity(ies)-Variable, CD(s), Commodity Option(s), Debt-Asset Backed, Debt-Corporate, Debt, Government, Debt-Municipal, Derivative(s), Direct Investment(s)-DDP & LP Interest(s), Equity-OTC, Equity Listed (Common & Preferred Stock), Futures-

Commodity, Futures-Financial, Index Option(s), Insurance, Investment Contract(s), Money Market Fund(s), Mutual Fund(s), No Product, Options, Other, Penny Stock(s), Unit Investment Trust(s).

If the arbitration is not pending, what was the disposition?: Award to Applicant, Award to Customer, Decision for Applicant, Decision for Customer, Denied, Dismissed, Judgment (other than monetary), No Action, Other, Settled, Withdrawn.

If the litigation is not pending, what was the disposition?: Decision for Applicant, Decision for Customer, Denied, Dismissed, Judgment (other than monetary), Monetary Judgment to Applicant, Monetary Judgment to Customer, No Action, Other, Settled, Withdrawn.

Judgment/Lien

Judgment/Lien Type: Civil, Default, Tax.

If no, how was matter resolved?: Discharged, Released, Removed, Satisfied.

Regulatory Action

Principal Sanction: Cease and Desist, Civil Penalty(ies)/Fine(s), Disgorgement, Injunction, Money Damages (Private/Civil Complaint), Other, Restitution, Restraining Order.

| Principal product type: Annuity(ies)-Fixed, Annuity(ies)-Variable, Banking Products (Other than CDs), CD(s), Commodity Option(s), Debt-Asset Backed, Debt-Corporate, Debt, Government, Debt-Municipal, Derivative(s), Direct Investment(s)-DDP & LP Interest(s), Equity-OTC, Equity Listed (Common & Preferred Stock), Futures-Commodity, Futures-Financial, Index Option(s), Insurance, Investment Contract(s), Money Market Fund(s), Mutual Fund(s), No Product, Options, Other, Penny Stock(s), Unit Investment Trust(s).

How was matter resolved: Acceptance, Waiver & Consent (AWC), Consent, Decision, Decision & Order of Offer of Settlement, Dismissed, Order, Other, Settled, Stipulation and Consent, Vacated, Withdrawn.

Termination

Termination Type: Discharged, Permitted to Resign, Voluntary Resignation.

SPECIAL INSTRUCTIONS FOR PAPER FILERS

| If you plan to file the Form U-4U4 on paper rather than electronically through Web CRD or IARD, please refer to the following instructions for paper filings. These instructions should be read in conjunction with the other instructions (General Instructions, Specific Instructions, and the Explanation of Terms) contained in this Form U-4U4. Please note that paper filings generally are not generally permitted for broker-dealer registrations.

Submission of Forms

| When applying for the first time, you must file a complete Form U-4U4. To amend your Form U-4U4, you must:

- Complete Section 1 (GENERAL INFORMATION).
- Update/amend the appropriate section(s) of the Form [U-4U4](#).
- Update/amend the appropriate Disclosure Reporting Pages.
- Include necessary signatures.
- Submit the amendment to the appropriate *SRO* or *jurisdictions*.

The *firm* must retain and, upon request, must make available for regulatory inspection, a copy of the signed initial Form [U-4U4](#) and a copy of each amendment to the Form [U-4U4](#).

1. GENERAL INFORMATION

You should note the following:

Individual CRD Number. Provide the *individual's CRD number* that was generated by the CRD system for the individual. If the *individual's CRD number* has not been generated or is not known, leave this item blank.

Firm CRD Number. Provide the *firm's CRD number* that was generated by the CRD system for the *firm*. If the *firm's CRD number* has not been generated or is not known, leave this item blank.

Firm Name. If you are an Agent of an Issuer, enter in the field labeled "*Firm Name*" the name of the issuer of the securities whom you represent. Do not abbreviate, shorten, or modify the name in any way.

CRD Branch Number. This is not a required field.

2. FINGERPRINT INFORMATION

You must submit to the appropriate *SRO* or *jurisdiction* fingerprint cards if required to do so.

4. & 5. REGISTRATIONS

- Select the appropriate *SRO* or *jurisdiction* registration category with whom you are seeking registration by selecting the appropriate request box(es).
- If you are an Agent of an Issuer (AI), select the box marked AI; then enter the two-letter *jurisdiction* identification for the relevant state(s). Contact the appropriate *jurisdiction* for instructions regarding [AI agent of the issuer](#) registration processing.
- Use the "Other" box only to request registration categories not listed on the Form [U-4U4](#).
- Applicable fees should be submitted with your filing.

6. REGISTRATION REQUESTS WITH AFFILIATED FIRMS

This section does not apply for paper filers.

7. EXAMINATION REQUESTS

| Check the "Other" box only to request examination categories not listed on the Form [4U4](#).

9. IDENTIFYING INFORMATION/NAME CHANGE

Hair Color Enter your hair color from the list of choices appended to this form.

Eye Color Enter your eye color from the list of choices appended to this form.

| **15F. FIRM/APPROPRIATE SIGNATORY CONCURRENCE**

This section does not apply for paper filers.

Rev. Form U4U4 (03/200206/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
1. GENERAL INFORMATION	

First Name: <input type="text"/>	Middle Name: <input type="text"/>	Last Name: <input type="text"/>	Suffix: <input type="text"/>
Firm CRD #: <input type="text"/>	Firm Name: <input type="text"/>	Employment Date (MM/DD/YYYY): <input type="text"/>	CRD Branch #: <input type="text"/>
Firm Billing Code: <input type="text"/>	Individual CRD #: <input type="text"/>	Individual SSN: <input type="text"/>	
Office of Employment Address Street 1: <input type="text"/>		Office of Employment Address Street 2: <input type="text"/>	
City: <input type="text"/>	State: <input type="text"/>	Country: <input type="text"/>	Postal Code: <input type="text"/>
Private Residence Check Box: If the Office of Employment address is a private residence, check this box. ?			

Rev. Form U4U4 (03/200206/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
2. FINGERPRINT INFORMATION	

Electronic Filing Representation

? [Radio button] By selecting this option, I represent that I am submitting, have submitted, or promptly will submit to the appropriate SRO a fingerprint card as required under applicable SRO rules; or

[Radio button] By selecting this option, I represent that I have been employed continuously by the filing firm since the last submission of a fingerprint card to CRD and am not required to resubmit a fingerprint card at this time; or,

[Radio button] By selecting this option, I represent that I have been employed continuously by the filing firm and my fingerprints have been processed by an SRO other than NASD. I am submitting, have submitted, or promptly will submit the processed results for posting to CRD.

~~By selecting this option, I represent that I am submitting or promptly will submit to the appropriate SRO a fingerprint card as required under applicable SRO rules.~~

? Fingerprint card barcode

Exceptions to the Fingerprint Requirement

? By selecting one or more of the following two options, I affirm that I am exempt from the federal

fingerprint requirement because I/filing firm currently satisfy(ies) the requirements of at least one of the permissive exemptions indicated below pursuant to Rule 17f-2 under the Securities Exchange Act of 1934, including any notice or application requirements specified therein:

[Check box] Rule 17f-2(a)(1)(i)

[Check box] Rule 17f-2(a)(1)(iii)

By selecting this option, I affirm that:-

? I have been employed continuously by the *filing firm* in an unregistered capacity since the last submission of a fingerprint card; or

- I am exempt from the fingerprint requirement because I meet one or more of the exemptions established by Rule 17f-2 under the Securities Exchange Act of 1934.

Investment Adviser Representative Only Applicants

? I affirm that I am applying only as an investment adviser representative and that I am not also applying or have not also applied with this firm to become a broker-dealer representative. If this radio button/box is selected, continue below.

? I am applying for registration only in jurisdictions that do not have fingerprint card filing requirements, or

? I am applying for registration in jurisdictions that have fingerprint card filing requirements and I am submitting, have submitted, or promptly will submit the appropriate fingerprint card directly to the jurisdictions for processing pursuant to applicable jurisdiction rules.

Rev. Form U4U4 (03/2002/06/2003)

LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
3. REGISTRATION WITH UNAFFILIATED FIRMS	

Some jurisdictions prohibit "dual registration," which occurs when an individual chooses to maintain a concurrent registration as a representative/agent with two or more *firms* (either BD or IA *firms*) that are not *affiliated*. *Jurisdictions* that prohibit dual registration would not, for example, permit a broker-dealer agent working with brokerage *firm* A to maintain a registration with brokerage *firm* B if *firms* A and B are not owned or controlled by a common parent. Before seeking a dual registration status, you should consult the applicable rules or statutes of the jurisdictions with which you seek registration for prohibitions on dual registrations or any liability provisions.

Please indicate whether the individual will maintain a "dual registration" status by answering the questions in this section. (Note: An individual should answer 'yes' only if the individual is currently registered and is seeking registration with a *firm* (either BD or IA) that is not *affiliated* with the individual's current employing *firm*. If this is an initial application, an individual must answer 'no' to these questions; a "dual registration" may be initiated only after an initial registration has been established).

Answer "yes" or "no" to the following questions:	Yes	No
A. Will <i>applicant</i> maintain registration with a broker-dealer that is not <i>affiliated</i> with the <i>filing firm</i> ? If you answer "yes," list the <i>firm</i> (s) in Section 12 (Employment History).	?	?
B. Will <i>applicant</i> maintain registration with an investment adviser that is not <i>affiliated</i> with the <i>filing firm</i> ? If you answer "yes," list the <i>firm</i> (s) in Section 12 (Employment History).	?	?

Specialist (S14A)										
PM - Floor Member Conducting Public Business										
PC - Floor Clerk Conducting Public Business										
SC - Specialist Clerk (S21)										
TA - Trading Assistant (S25)										
SF - Single Stock Futures (S43)										
FP - Municipal Fund (S51)										
IF - In-Firm Delivery Proctor										
Other _____ (Paper Form Only)										

Rev. Form <u>U4U4</u> (03/2002/06/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
5. JURISDICTION REGISTRATIONS	

Check appropriate <i>jurisdiction(s)</i> for AG (Broker-dDealer Agent (AG)) and/or RA (Investment Adviser Rerrepresentative (RA)) registration requests.											
JURISDICTION	AG	RA	JURISDICTION	AG	RA	JURISDICTION	AG	RA	JURISDICTION	AG	RA
Alabama			Illinois			Montana			Puerto Rico		
Alaska			Indiana			Nebraska			Rhode Island		
Arizona			Iowa			Nevada			South Carolina		
Arkansas			Kansas			New Hampshire			South Dakota		
California			Kentucky			New Jersey			Tennessee		
Colorado			Louisiana			New Mexico			Texas		
Connecticut			Maine			New York			Utah		
Delaware			Maryland			North Carolina			Vermont		
District of Columbia			Massachusetts			North Dakota			Virginia		
Florida			Michigan			Ohio			Washington		
Georgia			Minnesota			Oklahoma			West Virginia		
Hawaii			Mississippi			Oregon			Wisconsin		
Idaho			Missouri			Pennsylvania			Wyoming		
AGENT OF THE ISSUER TERMINATION (AI) Indicate 2 letter <i>jurisdiction</i> code(s): _____											

Rev. Form <u>U4U4</u> (03/2002/06/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111

FIRM NAME : 1	Reference #: 3184614888606412
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6. REGISTRATION REQUESTS WITH AFFILIATED FIRMS

Will <i>applicant</i> maintain registration with <i>firm(s)</i> under common ownership or control with the <i>filing firm</i> ? If "yes", fill in the details to indicate a request for registration with additional <i>firm(s)</i> .
--

? Yes ? No

If the individual seeks registration with *firm(s) affiliated* with the *filing firm*, complete the following to make a request for registration with the additional *affiliated firm(s)* other than the *filing firm*.

Affiliated Firm CRD #	Affiliated Firm Name		
<input type="text"/>	<input type="text"/>		
Employment Date (MM/DD/YYYY)	Affiliated Firm CRD Branch #	Affiliated Firm Billing Code	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Office of Employment Address Street 1:		Office of Employment Address Street 2:	
<input type="text"/>		<input type="text"/>	
City:	State:	Country:	Postal Code:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Private Residence Check Box:

If the Office of Employment address is a private residence, check this box. ?

? Check here to request the same *SRO* and *jurisdiction R*registrations for this *affiliated firm* that are requested on this application for the *filing firm*.

? Check here to request different *SRO* and *jurisdiction R*registrations than requested on this application for your *filing firm*.

Electronic or Other Filing Representation

[Radio Button] By selecting this option, I represent that I am submitting, have submitted, or promptly will submit to the appropriate SRO a fingerprint card as required under applicable SRO rules; or,

[Radio Button] By selecting this option, I represent that I have been employed continuously by the affiliated firm since the last submission of a fingerprint card to CRD and am not required to resubmit a fingerprint card at this time; or,

[Radio Button] I am not required to submit a fingerprint card at this time because the fingerprint card submitted by the filing firm applies; or,

[Radio Button] By selecting this option, I represent that I have been employed continuously by the affiliated firm and my fingerprints have been processed by an SRO other than NASD. I am submitting, have submitted, or promptly will submit the processed results for posting to CRD.

Fingerprint card barcode _____

Exceptions to the Fingerprint Requirement

[Radio Button] By selecting one or more of the following two options, I affirm that I am exempt from the federal fingerprint requirement because I/filing firm currently satisfy(ies) the requirements of at least one of the permissive exemptions indicated below pursuant to Rule 17f-2 under the Securities Exchange Act of 1934, including any notice or application requirements specified therein:

[Check Box] Rule 17f-2(a)(1)(i)

[Check Box] Rule 17f-2(a)(1)(iii)

Investment Adviser Representative Only

• I affirm that I am applying only as an investment adviser representative and that I am not also applying or have not also applied with this firm to become a broker-dealer representative. If this radio button/box is selected, continue below.

○ I am applying for registration only in jurisdictions that do not have fingerprint card filing

Rev. Form U4U4 (03/200206/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
7. EXAMINATION REQUESTS	

Scheduling or Rescheduling Examinations Complete this section only if you are scheduling or rescheduling an examination or continuing education session. Do not select the Series 63 ([S63](#)) or [Series 65 \(S65\)](#) examinations in this section if you have completed Section 5 (JURISDICTION REGISTRATION) and have selected registration in a *jurisdiction*. If you have completed Section 5 (JURISDICTION REGISTRATION), and requested an ~~an Broker-Dealer Agent (AG)~~ registration in a *jurisdiction* that requires that you pass the ~~Series-63~~ examination, an [Series-63](#) examination will be automatically scheduled for you upon submission of this Form [U4U4](#). If you have completed Section 5 (JURISDICTION REGISTRATION), and requested an ~~Investment Adviser Representative (RA)~~ registration in a *jurisdiction* that requires that you pass the ~~Series-65~~ examination, an [Series-65](#) examination will be automatically scheduled for you upon submission of this Form [U4U4](#).

<input type="checkbox"/> S3	<input type="checkbox"/> S11	<input type="checkbox"/> S22	<input type="checkbox"/> S32	<input type="checkbox"/> S51	
<input type="checkbox"/> S4	<input type="checkbox"/> S12	<input type="checkbox"/> S24	<input type="checkbox"/> S33	<input type="checkbox"/> S52	<input type="checkbox"/> S72
<input type="checkbox"/> S5	<input type="checkbox"/> S14	<input type="checkbox"/> S25	<input type="checkbox"/> S37	<input type="checkbox"/> S53	<input type="checkbox"/> S73
<input type="checkbox"/> S6	<input type="checkbox"/> S14A	<input type="checkbox"/> S26	<input type="checkbox"/> S38	<input type="checkbox"/> S55	<input type="checkbox"/> S82
<input type="checkbox"/> S7	<input type="checkbox"/> S15	<input type="checkbox"/> S27	<input type="checkbox"/> S39	<input type="checkbox"/> S62	<input type="checkbox"/> S101
<input type="checkbox"/> S7A	<input type="checkbox"/> S16	<input type="checkbox"/> S28	<input type="checkbox"/> S42	<input type="checkbox"/> S63	<input type="checkbox"/> S106
<input type="checkbox"/> S9	<input type="checkbox"/> S17	<input type="checkbox"/> S30	<input type="checkbox"/> S43	<input type="checkbox"/> S65	<input type="checkbox"/> S201
<input type="checkbox"/> S10	<input type="checkbox"/> S21	<input type="checkbox"/> S31		<input type="checkbox"/> S66	

Other _____ (Paper Form Only)

OPTIONAL: Foreign Exam City _____	Date (MM/DD/YYYY) _____
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If you have taken an exam prior to registering through the CRD system please enter the exam type and date taken.

Exam type: <input style="width:90%;" type="text"/>	Date taken (MM/DD/YYYY): <input style="width:90%;" type="text"/>
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Rev. Form U4U4 (03/200206/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
8. PROFESSIONAL DESIGNATIONS	

Select each designation you currently maintain.	
<input type="checkbox"/> Certified Financial Planner	
<input type="checkbox"/> Chartered Financial Consultant (ChFC)	
<input type="checkbox"/> Personal Financial Specialist (PFS)	
<input type="checkbox"/> Chartered Financial Analyst (CFA)	
<input type="checkbox"/> Chartered Investment Counselor (CIC)	

Rev. Form U4U4 (03/200206/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412

9. IDENTIFYING INFORMATION/NAME CHANGE

First Name: <input type="text"/>	Middle Name: <input type="text"/>	Last Name: <input type="text"/>
Suffix: <input type="text"/>	Date of Birth (MM/DD/YYYY) <input type="text"/>	
State/Province of Birth <input type="text"/>	Country of Birth <input type="text"/>	Sex ? Male ? Female
Height (ft) <input type="text"/>	Height (in) <input type="text"/>	Weight (lbs) <input type="text"/>
Hair Color <input type="text"/>	Eye Color <input type="text"/>	

Rev. Form U4U4 (03/200206/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
10. OTHER NAMES	

Enter all other names that you have used or are using, or by which you are known or have been known, other than your legal name, since the age of 18. This field should include, for example, nicknames, aliases, and names used before or after marriage.

First Name <input type="text"/>	Middle Name <input type="text"/>	Last Name <input type="text"/>	Suffix <input type="text"/>
---	--	--	---------------------------------------

Rev. Form U4U4 (03/200206/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
11. RESIDENTIAL HISTORY	

Starting with the current address, give all addresses for the past 5 years. Report changes as they occur.

From (MM/YYYY) <input type="text"/>	To (MM/YYYY) <input type="text"/>
Address Street 1 <input type="text"/>	Address Street 2 <input type="text"/>
City <input type="text"/>	State <input type="text"/>
Country <input type="text"/>	Postal Code <input type="text"/>

Rev. Form U4U4 (03/200206/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
12. EMPLOYMENT HISTORY	

Provide complete employment history for the past 10 years. Include the *firm(s)* noted in Section 1 (GENERAL INFORMATION) and Section 6 (REGISTRATION REQUESTS WITH AFFILIATED FIRMS). Include all *firm(s)* from Section 3 (REGISTRATION WITH UNAFFILIATED FIRMS). Account for all time including full and part-time employments, ~~self-employment~~ self-employment, military service, and homemaking. Also include statuses

such as unemployed, full-time education, extended travel, or other similar statuses.
Report changes as they occur.

From (MM/YYYY) <input type="text"/>	To (MM/YYYY) <input type="text"/>	Name of Firm or Company <input type="text"/>
City <input type="text"/>	State <input type="text"/>	Country <input type="text"/>
Investment-Related Business? ? Yes ? No	Position Held <input type="text"/>	

Rev. Form U4U4 (03/200206/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
13. OTHER BUSINESS	

Are you currently engaged in any other business either as a proprietor, partner, officer, director, employee, trustee, agent or otherwise? (Please exclude non *investment-related* ~~activity which~~ **activity** that is exclusively charitable, civic, religious or fraternal and is recognized as tax exempt.) If YES, please provide the following details: the name of the other business, whether the business is *investment-related*, the address of the other business, the nature of the other business, your position, title, or relationship with the other business, the start date of your relationship, the approximate number of hours/month you devote to the other business, the number of hours you devote to the other business during securities trading hours, and briefly describe your duties relating to the other business.

? Yes ? No
If 'Yes', please enter details below.

Rev. Form U4U4 (03/200206/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412

14. DISCLOSURE QUESTIONS

IF THE ANSWER TO ANY OF THE FOLLOWING QUESTIONS IS 'YES', COMPLETE DETAILS OF ALL EVENTS OR PROCEEDINGS ON APPROPRIATE DRP(S)

REFER TO THE EXPLANATION OF TERMS SECTION OF FORM [U4U4](#) INSTRUCTIONS FOR EXPLANATIONS OF ITALICIZED TERMS.

Criminal Disclosure

	YES	NO
14A. (1) Have you ever:		
(a) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any <i>felony</i> ?	?	?
(b) b Been <i>charged</i> with any <i>felony</i> ?	?	?
(2) Based upon activities that occurred while you exercised <i>control</i> over it, has an organization ever:		

	(a) been convicted of or pled guilty or nolo contendere ('no contest') in a domestic or foreign court to any <i>felony</i> ?	?	?
	(b) b Been charged with any <i>felony</i> ?	?	?
14B. (1)	Have you ever:	YES	NO
	been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign or military court to a <i>misdemeanor involving</i> : investments	?	?
(a)	or an <i>investment-related</i> business or any fraud, false statements or omissions, wrongful taking of property, bribery, perjury, forgery, counterfeiting, extortion, or a conspiracy to commit any of these offenses?	?	?
(b)	been charged with a <i>misdemeanor</i> specified in 14B(1)(a)?	?	?
(2)	Based upon activities that occurred while you exercised control over it, has an organization ever:		
(a)	been convicted of or pled guilty or nolo contendere ("no contest") in a domestic or foreign court to a <i>misdemeanor</i> specified in 14B(1)(a)?	?	?
(b)	been charged with a <i>misdemeanor</i> specified in 14B(1)(a)?	?	?
Regulatory Disciplinary Actions			
14C.	Has the U.S. Securities and Exchange Commission or the Commodity Futures Trading Commission ever:	YES	NO
(1)	<i>found</i> you to have made a false statement or omission?	?	?
(2)	<i>found</i> you to have been <i>involved</i> in a violation of its regulations or statutes?	?	?
(3)	<i>found</i> you to have been a cause of an <i>investment-related</i> business having its authorization to do business denied, suspended, revoked, or restricted?	?	?
(4)	entered an <i>order</i> against you in connection with <i>investment-related</i> activity?	?	?
(5)	imposed a civil money penalty on you, or <i>ordered</i> you to cease and desist from any activity?	?	?
14D. (1)	Has any other Federal regulatory agency or any state regulatory agency or foreign financial regulatory authority ever:	YES	NO
(1a)	<i>found</i> you to have made a false statement or omission or been dishonest, unfair or unethical?	?	?
(2b)	<i>found</i> you to have been <i>involved</i> in a violation of <i>investment-related</i> regulation(s) or statute(s)?	?	?
(3c)	<i>found</i> you to have been a cause of an <i>investment-related</i> business having its authorization to do business denied, suspended, revoked or restricted?	?	?
(4d)	entered an <i>order</i> against you in connection with an <i>investment-related</i> activity?	?	?
(5e)	otherwise, by <i>order</i> , prevented you from associating with an <i>investment-related</i> business or restricted your activities?	?	?

14D(2)

Have you been subject to any final order of a state securities commission (or any agency or officer performing like functions), state authority that supervises or examines banks, savings associations, or credit unions, state insurance commission (or any agency or office performing like functions), an appropriate federal banking agency, or the National Credit Union Administration, that:

YES NO

- (a) bars you from association with an entity regulated by such commission, authority, agency, or officer, or from engaging in the business of securities, insurance, banking, savings association activities, or credit union activities; or
- (b) constitutes a final order based on violations of any laws or regulations that prohibit fraudulent, manipulative, or deceptive conduct?

Has any self-regulatory organization or commodities exchange ever:

YES NO

14E.

- (1) *found* you to have made a false statement or omission? ? ?
- (2) *found* you 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 U.S. Securities and Exchange Commission)? ? ?
- (3) *found* you to have been the cause of an *investment-related* business having its authorization to do business denied, suspended, revoked or restricted? ? ?
- (4) disciplined you by expelling or suspending you from membership, barring or suspending your association with its members, or restricting your activities? ? ?

14F.

Have you ever had an authorization to act as an attorney, accountant or federal contractor that was revoked or suspended? ~~Has your authorization to act as an attorney, accountant or federal contractor ever been revoked or suspended?~~

? ?

14G.

Have you been notified, in writing, that you are now the subject of any:

- (1) regulatory complaint or *proceeding* that could result in a "yes" answer to any part of 14C, D or E? (*If yes, complete the Regulatory Action Disclosure Reporting Page.*) ? ?
- (2) *investigation* that could result in a "yes" answer to any part of 14A, B, C, D or E? (*If yes, complete the Investigation Disclosure Reporting Page.*) ? ?

Civil Judicial Actions

14H. (1)

Has any domestic or foreign court ever:

YES NO

- (a) *enjoined* you in connection with any *investment-related* activity? ? ?
- (b) *found* that you were *involved* in a violation of any *investment-related* statute(s) or regulation(s)? ? ?
- (c) dismissed, pursuant to a settlement agreement, an *investment-related* civil action brought against you by a state or *foreign financial regulatory authority*? ? ?

(2)	Are you named in any pending <i>investment-related</i> civil action that could result in a "yes" answer to any part of 14H(1)?	?	?
Customer Complaints			
14I.	(1) Have you ever been named as a respondent/defendant in an <i>investment-related</i> , consumer-initiated arbitration or civil litigation which alleged that you were <i>involved</i> in one or more <i>sales practice violations</i> and which:	YES	NO
	(a) is still pending, or;	?	?
	(b) resulted in an arbitration award or civil judgment against you, regardless of amount, or;	?	?
	(c) was settled for an amount of \$10,000 or more?	?	?
(2)	(2) Have you ever been the subject of an <i>investment-related</i> , consumer-initiated complaint, not otherwise reported under question 14I(1) above, which alleged that you were <i>involved</i> in one or more <i>sales practice violations</i> , and which complaint was settled for an amount of \$10,000 or more?	?	?
(3)	(3) Within the past twenty four (24) months, have you been the subject of an <i>investment-related</i> , consumer-initiated, written complaint, not otherwise reported under question 14I(1) or (2) above, which:		
	alleged that you were <i>involved</i> in one or more <i>sales practice violations</i> and contained a claim for compensatory damages of \$5,000 or more (if no damage		
	(a) amount is alleged, the complaint must be reported unless the firm has made a good faith determination that the damages from the alleged conduct would be less than \$5,000), or;	?	?
	(b) alleged that you were <i>involved</i> in forgery, theft, misappropriation or conversion of funds or securities?	?	?
Terminations			
14J.	Have you ever voluntarily resigned, been discharged or permitted to resign after allegations were made that accused you of:	YES	NO
	(1) violating <i>investment-related</i> statutes, regulations, rules, or industry standards of conduct?	?	?
	(2) fraud or the wrongful taking of property?	?	?
	(3) failure to supervise in connection with <i>investment-related</i> statutes, regulations, rules or industry standards of conduct?	?	?
Financial			
14K.	Within the past 10 years:	YES	NO
	(1) have you made a compromise with creditors, filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition?	?	?
	(2) based upon events that occurred while you exercised <i>control</i> over it, has an organization made a compromise with creditors, filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition?	?	?
	(3) based upon events that occurred while you exercised <i>control</i> over it, has a broker or dealer been the subject of an involuntary bankruptcy petition, or had a trustee appointed, or had a direct payment procedure initiated under the Securities Investor Protection Act?	?	?

14L.	Has a bonding company ever denied, paid out on, or revoked a bond for you?	YES	NO
		?	?
14M.	Do you have any unsatisfied judgments or liens against you?	YES	NO
		?	?

Rev. Form U4U4 (03/2002/06/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
15. SIGNATURES	

Please Read Carefully
 All signatures required on this Form **U4U4** filing must be made in this section.

A "signature" includes a manual signature or an electronically transmitted equivalent. For purposes of an electronic form filing, a signature is effected by typing a name in the designated signature field. By typing a name in this field, the signatory acknowledges and represents that the entry constitutes in every way, use, or aspect, his or her legally binding signature.

15A INDIVIDUAL/APPLICANT'S ACKNOWLEDGMENT AND CONSENT
 This section must be completed on all initial or Temporary Registration form filings.

15B FIRM/APPROPRIATE SIGNATORY REPRESENTATIONS
 This section must be completed on all initial or Temporary Registration form filings.

15C TEMPORARY REGISTRATION ACKNOWLEDGMENT
 This section must be completed on Temporary Registration form filings to be able to receive Temporary **R**egistration.

15D INDIVIDUAL/APPLICANT'S AMENDMENT ACKNOWLEDGMENT AND CONSENT
 This section must be completed on any amendment filing that amends any information in Section 14 (Disclosure Questions) or any Disclosure Reporting Page (DRP).

15E FIRM/APPROPRIATE SIGNATORY AMENDMENT REPRESENTATIONS
 This section must be completed on all amendment form filings.

15F FIRM/APPROPRIATE SIGNATORY CONCURRENCE
 This section must be completed to concur with a **U4U4** filing made by another *firm* (IA/BD) on behalf of an individual that is also registered with that other *firm* (IA/BD).

15A. INDIVIDUAL/APPLICANT'S ACKNOWLEDGMENT AND CONSENT

1. I swear or affirm that I have read and understand the items and instructions on this form and that my answers (including attachments) are true and complete to the best of my knowledge. I understand that I am subject to administrative, civil or criminal penalties if I give false or misleading answers. I apply for registration with the *jurisdictions* and *SROs* indicated in Section 4 (SRO REGISTRATION) and Section 5 (JURISDICTION REGISTRATION) as may be amended from time to time and, in consideration of the *jurisdictions* and *SROs* receiving and considering my application, I submit to the authority of the *jurisdictions* and *SROs* and agree to comply with all provisions, conditions and covenants of the statutes, constitutions, certificates of incorporation, by-laws and rules and regulations of the *jurisdictions* and *SROs* as they are or may be adopted, or amended from time to time. I further agree to be subject to and comply with all requirements, rulings, orders, directives and decisions of, and penalties, prohibitions and limitations imposed by the *jurisdictions* and *SROs*, subject to right of appeal or review as provided by law.
2. I agree that neither the *jurisdictions* or *SROs* nor any person acting on their behalf shall be liable to me for action taken or omitted to be taken in official capacity or in the scope of employment, except as otherwise provided in the statutes, constitutions, certificates of incorporation, by-laws or the rules and regulations of the *jurisdictions* and *SROs*.
3. I authorize the *jurisdictions*, *SROs*, and the *designated entity* to give any information they may have concerning me to any employer or prospective employer, any federal, state or municipal agency, or any other *SRO* and I release the *jurisdictions*, *SROs*, and the *designated entity*, and any person acting on their behalf from any and all liability of whatever nature by reason of furnishing such information.
4. I agree to arbitrate any dispute, claim or controversy that may arise between me and my *firm*, or a customer, or any other person, that is required to be arbitrated under the rules, constitutions, or by-laws of the *SROs* indicated in Section 4 (SRO REGISTRATION) as may be amended from time to time and that any arbitration award rendered against me may be entered as a judgment in any court of competent *jurisdiction*.
5. For the purpose of complying with the laws relating to the offer or sale of securities or commodities or investment advisory activities, I irrevocably appoint the administrator of each *jurisdiction* indicated in Section 5 (JURISDICTION REGISTRATION) as may be amended from time to time, or such other person designated by law, and the successors in such office, my attorney upon whom may be served any notice, process, pleading, subpoena or other document in any action or *proceeding* against me arising out of or in connection with the offer or sale of securities or commodities, or investment advisory activities or out of the violation or alleged violation of the laws of such *jurisdictions*. I consent that any such action or *proceeding* against me may be commenced in any court of competent *jurisdiction* and proper venue by service of process upon the appointee as if I were a resident of, and had been lawfully served with process in the *jurisdiction*. I request that a copy of any notice, process, pleading, subpoena or other document served hereunder be mailed to my current residential address as reflected in this form or any amendment thereto.
6. I consent that the service of any process, pleading, subpoena, or other document in any *investigation* or administrative *proceeding* conducted by the SEC, CFTC or a *jurisdiction* or in any civil action in which the SEC, CFTC or a *jurisdiction* are plaintiffs, or the notice of any *investigation* or *proceeding* by any *SRO* against the *applicant*, may be made by personal service or by regular, registered or certified mail or confirmed telegram to me at my most recent business or home address as reflected in this Form U4U4, or any amendment thereto, by leaving such documents or notice at such address, or by any other legally permissible means.
7. I further stipulate and agree that any civil action or administrative *proceeding* instituted by the SEC, CFTC or a *jurisdiction* may be commenced by the service of process as described herein, and that service of an administrative subpoena shall be effected by such service, and that service as aforesaid shall be taken and held in all courts and administrative tribunals to be valid and binding as if personal

- service thereof had been made.
- I authorize all my employers and any other person to furnish to any *jurisdiction, SRO, designated entity*, employer, prospective employer, or any agent acting on its behalf, any information they have, including without limitation my creditworthiness, character, ability, business activities, educational background, general reputation, history of my employment and, in the case of former employers, complete reasons for my termination. Moreover, I release each employer, former employer and each other person from any and all liability, of whatever nature, by reason of furnishing any of the above information, including that information reported on the Uniform Termination Notice for Securities Industry Registration (Form U5U5). I recognize that I may be the subject of an investigative consumer report and waive any requirement of notification with respect to any investigative consumer report ordered by any *jurisdiction, SRO, designated entity*, employer, or prospective employer. I understand that I have the right to request complete and accurate disclosure by the *jurisdiction, SRO, designated entity*, employer or prospective employer of the nature and scope of the requested investigative consumer report.
- 8.
- I understand and certify that the representations in this form apply to all employers with whom I seek registration as indicated in Section 1 (GENERAL INFORMATION) or Section 6 (REGISTRATION REQUESTS WITH AFFILIATED FIRMS) of this form. I agree to update this form by causing an amendment to be filed on a timely basis whenever changes occur to answers previously reported. Further, I represent that, to the extent any information previously submitted is not amended, the information provided in this form is currently accurate and complete.
- 9.
- I authorize any employer or prospective employer to file electronically on my behalf any information required in this form or any amendment thereto; I certify that I have reviewed and approved the information to be submitted to any *jurisdiction* or *SRO* on this Form U4U4 Application; I agree that I will review and approve all disclosure information that will be filed electronically on my behalf; I further agree to waive any objection to the admissibility of the electronically filed records in any criminal, civil, or administrative *proceeding*.
- 10.

Applicant or *applicant's* agent has typed *applicant's* name under this section to attest to the completeness and accuracy of this record. The *applicant* recognizes that this typed name constitutes, in every way, use or aspect, his or her legally binding signature.

Date (MM/DD/YYYY)

Signature of Applicant

15B. FIRM/APPROPRIATE SIGNATORY REPRESENTATIONS

To the best of my knowledge and belief, the *applicant* is currently bonded where required, and, at the time of approval, will be familiar with the statutes, constitution(s), rules and by-laws of the agency, *jurisdiction* or *SRO* with which this application is being filed, and the rules governing registered persons, and will be fully qualified for the position for which application is being made herein. I agree that, notwithstanding the approval of such agency, *jurisdiction* or *SRO* which hereby is requested, I will not employ the *applicant* in the capacity stated herein without first receiving the approval of any authority that may be required by law.

This *firm* has communicated with all of the *applicant's* previous employers for the past three years and has documentation on file with the names of the persons contacted and the date of contact. In addition, I have taken appropriate steps to verify the accuracy and completeness of the information contained in and with this application.

I have provided the *applicant* an opportunity to review the information contained herein and the *applicant* has approved this information and signed the Form U4U4.

Date (MM/DD/YYYY) <input style="width: 95%;" type="text"/>	Signature of Appropriate Signatory <input style="width: 95%;" type="text"/>
--	---

15C. TEMPORARY REGISTRATION ACKNOWLEDGMENT

If an *applicant* has been registered in a *jurisdiction* or *self regulatory organization (SRO)* in the 30 days prior to the date an application for registration is filed with the Central Registration Depository or Investment Adviser Registration Depository, he or she may qualify for a Temporary Registration to conduct securities business in that *jurisdiction* or *SRO* if this acknowledgment is executed and filed with the Form [U4U4](#) at the *applicant's firm*. This acknowledgment must be signed only if the *applicant* intends to apply for a Temporary Registration while the application for registration is under review.

I request a Temporary Registration in each *jurisdiction* and/or *SRO* requested on this Form [U4U4](#), while my registration with the *jurisdiction(s)* and/or *SRO(s)* requested is under review;

I am requesting a Temporary Registration with the *firm* filing on my behalf for the *jurisdiction s)* and/or *SRO(s)* noted in Section 4 (SRO REGISTRATION) and/or Section 5 (JURISDICTION REGISTRATION) of this Form [U4U4](#);

I understand that I may request a Temporary Registration only in those *jurisdiction(s)* and/or *SRO(s)* in which I have been registered with my prior *firm* within the previous 30 days;

I understand that I may not engage in any securities activities requiring registration in a *jurisdiction* and/or *SRO* until I have received notice from the CRD or IARD that I have been granted a Temporary Registration in that *jurisdiction* and/or *SRO*;

I agree that until the Temporary Registration has been replaced by a registration, any *jurisdiction* and/or *SRO* in which I have applied for registration may withdraw the Temporary Registration;

If a *jurisdiction* or *SRO* withdraws my Temporary Registration, my application will then be held pending in that *jurisdiction* and/or *SRO* until its review is complete and the registration is granted or denied, or the application is withdrawn;

I understand and agree that, in the event my Temporary Registration is withdrawn by a *jurisdiction* and/or *SRO*, I must immediately cease any securities activities requiring a registration in that *jurisdiction* and/or *SRO* until it grants my registration;

I understand that by executing this Acknowledgment I am agreeing not to challenge the withdrawal of a Temporary Registration; however, I do not waive any right I may have in any *jurisdiction* and/or *SRO* with respect to any decision by that *jurisdiction* and/or *SRO* to deny my application for registration.

Date (MM/DD/YYYY) <input style="width: 95%;" type="text"/>	Signature of Applicant <input style="width: 95%;" type="text"/>
--	---

15D. AMENDMENT INDIVIDUAL/APPLICANT'S ACKNOWLEDGMENT AND CONSENT

Date (MM/DD/YYYY) <input style="width: 95%;" type="text"/>	Signature of Applicant <input style="width: 95%;" type="text"/>
--	---

15E. FIRM/APPROPRIATE SIGNATORY AMENDMENT REPRESENTATIONS

Date (MM/DD/YYYY) <input style="width: 95%;" type="text"/>	Signature of Appropriate Signatory <input style="width: 95%;" type="text"/>
--	---

Rev. Form U4U4 (03/200206/2003)	
LASTNAME, FIRSTNAME : 111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
U4U4 - Bankruptcy/SIPC/Compromise with Creditors DRP	

This Disclosure Reporting Page is an ? **INITIAL OR** ? **AMENDED** response to report details for affirmative responses to *Questions 14K(1), 14K(2) and 14K(3)* on Form [U4U4](#);

Check question(s) you are responding to:

Bankruptcy/SIPC/Compromise with Creditors

? **14K(1)** ? **14K(2)** ? **14K(3)**

If events result in affirmative answers to both 14K(1) and 14K(2), details to each must be provided on separate DRPs.

1. Action Type:

2. Action Date (MM/DD/YYYY) *(Provide date bankruptcy was filed, or date SIPC was initiated, or date of compromise with creditor):*

? **Exact** ? **Explanation**

If not exact, provide explanation:

3. If the financial action relates to an organization over which you exercise(d) *control*, enter organization name and your position, title or relationship:

Was the organization *investment-related*? ? **Yes** ? **No**

4. Court action brought in (Name of Federal, State or Foreign Court), Location of Court (City or County and State or Country), Docket/Case Number and Bankruptcy Chapter Number (if Federal Bankruptcy Filing):

5. Is action currently pending? ? **Yes** ? **No**

6. If not pending, provide Disposition Type:

7. Disposition Date (MM/DD/YYYY):

? **Exact** ? **Explanation**

If not exact, provide explanation:

8. Provide a brief summary of events leading to the action and if not discharged, explain. (Your information must fit within the space provided.):

9. If a SIPA trustee was appointed or a direct payment procedure was begun, enter the amount paid or agreed to be paid by you; or the name of the trustee:

<p>Currently Open? ? Yes ? No</p> <p>Date Direct Payment Initiated/Filed or Trustee Appointed (MM/DD/YYYY):</p> <input type="text"/> <p>? Exact ? Explanation</p> <p>If not exact, provide explanation:</p> <input type="text"/>
<p>10. <u>Comment (Optional). You may use this field to provide a brief summary of the circumstances leading to the action as well as the current status or final disposition. Your information must fit within the space provided. Provide details to any status/disposition. Include details as to creditors, terms, conditions, amounts due and settlement schedule (if applicable). (Your information must fit within the space provided.):</u></p> <input type="text"/>

Rev. Form U4U4 (03/200206/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
U4U4 - Bond DRP	

<p>This Disclosure Reporting Page is an ? INITIAL OR ? AMENDED response to report details for affirmative response to Question 14L on Form U4U4;</p> <p>Check question you are responding to:</p> <p style="text-align: center;">Bond ? 14L</p> <p>If multiple, unrelated events result in the same affirmative answer, details must be provided on separate DRPs.</p> <p>1. Firm Name: (Policy Holder)</p> <input type="text"/> <p>2. Bonding Company Name:</p> <input type="text"/> <p>3. Disposition Type:</p> <input type="text"/> <p>4. Disposition Date (MM/DD/YYYY):</p> <input type="text"/> <p>? Exact ? Explanation</p> <p>If not exact, provide explanation:</p> <input type="text"/> <p>5. If disposition resulted in Payout, list Payout Amount and Date Paid:</p> <input type="text"/> <p>6. <u>Comment (Optional). You may use this field to provide a brief summary of the circumstances leading to the</u></p>

action as well as the current status or final disposition. Your information must fit within the space provided.
~~Summarize the details of circumstances leading to the necessity of the bonding company action. (Your information must fit within the space provided.)~~

Rev. Form U4U4 (03/200206/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
U4U4 - Civil Judicial DRP	

This Disclosure Reporting Page is an **? INITIAL OR ? AMENDED** response to report details for affirmative response to **Question 14H** on Form [U4U4](#):

Check question(s) you are responding to:

Civil Judicial			
? 14H(1)(a)	? 14H(1)(b)	? 14H(1)(c)	? 14H(2)

One event may result in more than one affirmative answer to the above items. Use only one DRP to report details related to the same event. Unrelated civil judicial actions must be reported on separate DRPs.

1. Court Action initiated by: (Name of regulator, *foreign financial regulatory authority, SRO*, commodities exchange, Agency, Firm, Private Plaintiff, etc.)

2. Principal Relief Sought:

Other Relief Sought:

3. Filing Date of Court Action (MM/DD/YYYY):

? Exact ? Explanation

If not exact, provide explanation:

4. Principal Product Type:

Other Product Types:

5. Formal Action was brought in (include name of Federal, Military, State or Foreign Court, Location of Court - City or County and State or Country, Docket/Case Number):

6.	Employing <i>Firm</i> when activity occurred which led to the civil judicial action: <input type="text"/>								
7.	Describe the allegations related to this civil action. (Your information must fit within the space provided.): <input type="text"/>								
8.	Current Status? ? Pending ? On Appeal ? Final								
9.	If on appeal, action appealed to (provide name of court): Date Appeal Filed (MM/DD/YYYY): <input type="text"/>								
10.	If pending, date notice/process was served (MM/DD/YYYY): <input type="text"/> ? Exact ? Explanation If not exact, provide explanation: <input type="text"/>								
If Final or On Appeal, complete all items below. For Pending Actions, complete Item 14 only.									
11.	How was matter resolved: <input type="text"/>								
12.	Resolution Date (MM/DD/YYYY): <input type="text"/> ? Exact ? Explanation If not exact, provide explanation: <input type="text"/>								
13.	Resolution Detail: A. Were any of the following Sanctions Ordered or Relief Granted? (Check appropriate items): <table><tr><td>? Monetary/Fine</td><td>Amount: \$ <input type="text"/></td></tr><tr><td>? Revocation/Expulsion/Denial</td><td>? Disgorgement/Restitution</td></tr><tr><td>? Censure</td><td>? Cease and Desist/Injunction</td></tr><tr><td>? Bar</td><td>? Suspension</td></tr></table> B. Other Sanctions: <input type="text"/>	? Monetary/Fine	Amount: \$ <input type="text"/>	? Revocation/Expulsion/Denial	? Disgorgement/Restitution	? Censure	? Cease and Desist/Injunction	? Bar	? Suspension
? Monetary/Fine	Amount: \$ <input type="text"/>								
? Revocation/Expulsion/Denial	? Disgorgement/Restitution								
? Censure	? Cease and Desist/Injunction								
? Bar	? Suspension								

C. Sanction detail: if suspended, *enjoined* or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by 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 disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you, date paid and if any portion of penalty was waived:

14. **Comment (Optional).** You may use this field to provide a ~~Provide a~~ brief summary of the circumstances leading to the action, as well as the current status or disposition and/or finding(s). Your information must fit within the space provided. ~~related to action(s), allegation(s), disposition(s) and/or finding(s) disclosed above. (Your information must fit within the space provided.)~~

Rev. Form U4U4 (03/200206/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
U4U4 - Criminal DRP	

This Disclosure Reporting Page is an ? **INITIAL OR** ? **AMENDED** response to report details for affirmative responses to *Questions 14A and 14B* on Form [U4U4](#);

Check question(s) you are responding to:

Criminal			
? 14A(1)(a)	? 14A(2)(a)	? 14B(1)(a)	? 14B(2)(a)
? 14A(1)(b)	? 14A(2)(b)	? 14B(1)(b)	? 14B(2)(b)

Use this DRP to report all charges arising out of the same event. One event may result in more than one affirmative answer to the above items. Multiple counts of the same charge arising out of the same event should be reported on the same DRP. Unrelated criminal actions, including separate cases arising out of the same event, must be reported on separate DRPs.

Applicable court documents (i.e., criminal complaint, information or indictment as well as judgment of conviction or sentencing documents) must be provided to the CRD if not previously submitted.

1. If charge(s) were brought against an organization over which you exercise(d) *control*: Enter Organization Name, whether or not the organization was an *investment-related* business and your position, title or relationship.

2. Formal Charge(s) were brought in: (include name of Federal, Military, State or Foreign Court, Location of Court - City or County and State or Country, Docket/Case number).

3. **Event Disclosure Detail** (Use this for both organizational and individual charges.)

A. Date First Charged (MM/DD/YYYY):

? Exact ? Explanation

If not exact, provide explanation:

B. Event Disclosure Detail (include Charge(s)/Charge Description(s), and for each charge provide: **1.** number of counts, **2.** felony or misdemeanor, **3.** plea for each charge, and **4.** product type if charge is investment-related):

C. Did any of the Charge(s) within the Event involve a *Felony*? ? Yes ? No

D. Current status of the Event? ? Pending ? On Appeal ? Final

E. Event Status Date (complete unless status is Pending) (MM/DD/YYYY):

? Exact ? Explanation

If not exact, provide explanation:

4. Disposition Disclosure Detail

Include for each charge, A. Disposition Type [e.g., convicted, acquitted, dismissed, pretrial, etc.], B. Date, C. Sentence/Penalty, D. Duration [if sentence-suspension, probation, etc.], E. Start Date of Penalty, F. Penalty/Fine Amount and G. Date Paid.

5. **Comment (Optional).** You may use this field to provide a **Provide a** brief summary of **the** circumstances leading to the charge(s) as well as the **current status or final** disposition. ~~Include the relevant dates when the conduct which was the subject of the charge(s) occurred.~~ (Your information must fit within the space provided.)

Rev. Form **U4U4 (03/200206/2003)**

LASTNAME, FIRSTNAME : 1111111

SSN # : 111-11-1111

FIRM NAME : 1

Reference #: 3184614888606412

U4U4 - Customer Complaint/Arbitration/Civil Litigation DRP

This Disclosure Reporting Page is an ? **INITIAL OR** ? **AMENDED** response to report details for affirmative response to **Question 14I** on Form **U4U4**;

Check question(s) you are responding to:

Customer Complaint/Arbitration/Civil Litigation

14I(1)(a)	14I(1)(b)	14I(1)(c)	14I(2)	14I(3)(a)	14I(3)(b)
<p>One event may result in more than one affirmative answer to the above items. Use only one DRP to report details related to one customer complaint/arbitration/civil litigation. Use a separate DRP for each customer complaint/arbitration/civil litigation.</p>					
<p>DRP Instructions:</p> <ul style="list-style-type: none"> • <u>In all matters (i.e., customer complaints, arbitrations/CFTC reparations, civil litigations), complete items 1-6.</u> • <u>If the matter involves only a customer complaint, also complete items 7-12, as appropriate.</u> • <u>If the customer complaint has evolved into an arbitration/CFTC reparation or civil litigation, amend the existing DRP by completing items 9 and 10.</u> • <u>If the matter involves an arbitration or CFTC reparation, complete items 13-19, as appropriate.</u> • <u>If the matter involves a civil litigation, complete items 20-27.</u> • <u>Item 28 is an optional field and applies to all event types (i.e., customer complaint, arbitration/CFTC reparation, civil litigation).</u> 					
<p><u>Complete items 1-6 for all events.</u></p>					
<p>1. Customer Name(s): <input style="width: 550px; height: 50px;" type="text"/></p>					
<p>2. Customer(s) State of Residence: <input style="width: 250px; height: 20px;" type="text"/> Other state(s) of residence/detail: <input style="width: 550px; height: 40px;" type="text"/></p>					
<p>3. Employing <i>Firm</i> when activities occurred which led to the complaint: <input style="width: 250px; height: 20px;" type="text"/></p>					
<p>4. <u>Allegation(s) and a brief summary of events related to the allegation(s) including dates when activities leading to the allegation(s) occurred:</u> <u>Date Complaint was received (MM/DD/YYYY):</u> <input style="width: 100px; height: 20px;" type="text"/> <u>? Exact? Explanation</u> <u>If not exact, provide explanation:-</u> <input style="width: 550px; height: 40px;" type="text"/></p>					
<p>5. Allegation(s) and a brief summary of events related to the allegation(s) including dates when activities leading to the allegation(s) occurred: <u>Principal Product Type:</u> <u>Other Product Type:</u> <input style="width: 550px; height: 40px;" type="text"/></p>					
<p>6. <u>Principal Product Type:-</u> <input style="width: 250px; height: 40px;" type="text"/></p>					
<p><u>If the matter involves only a customer complaint, complete items 7-12 as appropriate.</u> <u>Other Product Types:- Alleged Compensatory Damage Amount:</u> <input style="width: 550px; height: 20px;" type="text"/></p>					

<p><u>If the matter involves only a customer complaint, complete items 7-12 as appropriate.</u></p>	
7.	<p>Alleged Compensatory Damage Amount: <u>Date customer complaint was received:</u> <input type="text"/> \$ <input type="text"/></p>
<p>Is <u>the customer</u> complaint pending? ? Yes ? No</p>	
8.	<p><u>If the customer complaint has evolved into an arbitration/CFTC reparation or civil litigation, amend the existing DRP by completing items 9 and 10.</u></p>
9.	<p>If the <u>customer</u> complaint is not pending, provide status: If status is settlement, complete items<u>questions</u> 11 and 12; If status is arbitration/reparation, complete items<u>questions</u> 13-19; If status is litigation, complete items<u>questions</u> 20-27. Complete question 28 for all statuses. ? No Action ? Withdrawn ? Denied ? Settled ? Arbitration/Reparation ? Litigation</p>
10.	<p>Status Date (MM/DD/YYYY): <input type="text"/> ? Exact ? Explanation If not exact, provide explanation: <input type="text"/></p>
11.	<p>Settlement Amount (if settled without a<u>Arbitration</u>, L<u>itigation</u> or r<u>Reparation</u>): <input type="text"/> \$ <input type="text"/></p>
12.	<p>Individual Contribution Amount: <input type="text"/> \$ <input type="text"/></p>
<p><u>If the matter involves an arbitration or CFTC reparation, complete items 13-19, as appropriate.</u> F- <u>ARBITRATION OR CFTC REPARATION</u></p>	
13.	<p>Arbitration/Reparation claim filed with (NASD, AAA, NYSE, CBOE, CFTC, etc.) and Docket/Case Number: <input type="text"/></p>
14.	<p>Date notice/process was served (MM/DD/YYYY): <input type="text"/> ? Exact ? Explanation If not exact, provide explanation: <input type="text"/></p>
15.	<p>Is arbitration/reparation pending? ? Yes ? No</p>
16.	<p>If the arbitration/reparation is not pending, what was the disposition? <input type="text"/></p>
17.	<p>Disposition Date (MM/DD/YYYY): <input type="text"/></p>

<p>? Exact ? Explanation If not exact, provide explanation:</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	
18. Amount of Monetary Compensation (award, settlement, reparation amount):	\$ <input style="width: 100px;" type="text"/>
19. Individual Contribution Amount:	\$ <input style="width: 150px;" type="text"/>
<p><u>If the matter involves a civil litigation, complete items 20-27. F-CIVIL LITIGATION</u></p>	
<p>20. Court that case was filed in (include name of Federal, Military, State or Foreign Court, Location of Court - City or County and State or Country, Docket/Case number).</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	
<p>21. Date notice/process was served (MM/DD/YYYY):</p> <div style="border: 1px solid black; width: 100px; height: 20px;"></div> <p>? Exact ? Explanation If not exact, provide explanation:</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	
<p>22. Is the civil litigation pending? ? Yes ? No</p>	
<p>23. If the civil litigation is not pending, what was the disposition?</p> <div style="border: 1px solid black; width: 150px; height: 20px;"></div>	
<p>24. Disposition Date (MM/DD/YYYY):</p> <div style="border: 1px solid black; width: 100px; height: 20px;"></div> <p>? Exact ? Explanation If not exact, provide explanation:</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	
25. Amount of Monetary Compensation (judgment, restitution, settlement amount):	\$ <input style="width: 100px;" type="text"/>
26. Individual Contribution Amount:	\$ <input style="width: 150px;" type="text"/>
<p>27. If the action is currently on appeal enter date appeal filed (MM/DD/YYYY):</p> <div style="border: 1px solid black; width: 100px; height: 20px;"></div> <p>? Exact ? Explanation If not exact, provide explanation:</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	
<p>28. <u>Comment (Optional). You may use this field to provide a brief summary of the circumstances leading to the customer complaint, arbitration/CFTC reparation and/or civil litigation as well as the current status or final disposition(s). Your information must fit within the space provided. Provide details as to dispositions, including any limits or conditions. (The information must fit within the space provided.)</u></p>	

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Rev. Form U4U4 (03/200206/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
U4U4 - Investigation DRP	

This Disclosure Reporting Page is an ? **INITIAL OR** ? **AMENDED** response to report details for affirmative response to *Question 14G(2)* on Form [U4U4](#);

Check question you are responding to:

**Investigation
? 14G(2)**

Complete this DRP only if you are answering "yes" to Item 14G(2). If you answered "yes" to Item 14G(1), complete the Regulatory Action DRP. If you have been notified that the *investigation* has been concluded without formal action, complete items 1, 2, 3 and 4 of this DRP to update. One event may result in more than one *investigation*. If more than one authority is investigating you, use a separate DRP to provide details.

1. Notice Received From: (Name of Regulator, Agency, *SRO*, etc. initiating the *investigation*):

2. Notice Date (MM/DD/YYYY):

? Exact ? Explanation
If not exact, provide explanation:

3. Describe briefly the nature of the *investigation*, if known, or details of the resolution. (Your information must fit within the space provided.):

4. Date Resolved (MM/DD/YYYY):

? Exact ? Explanation
If not exact, provide explanation:

Rev. Form U4U4 (03/200206/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412

U4U4 - Judgment/Lien DRP

This Disclosure Reporting Page is an ? **INITIAL OR ? AMENDED** response to report details for affirmative response to *Question 14M* on Form U4U4;

Check question you are responding to:

Judgment/Lien

? 14M

If multiple, unrelated events result in the same affirmative answer, details must be provided on separate DRPs.

1. Judgment/Lien Amount:

2. Judgment/Lien Holder:

3. Judgment/Lien Type:

4. Date Filed (MM/DD/YYYY):

? **Exact ? Explanation**

If not exact, provide explanation:

5. Is Judgment/Lien outstanding? ? **Yes ? No**

If No, provide status date (MM/DD/YYYY):

? **Exact ? Explanation**

If not exact, provide explanation:

If No, how was matter resolved?

6. Court (Name of Federal, State or Foreign Court), Location of Court (City or County and State or Country) and Docket/Case Number:

7. Comment (Optional). You may use this field to provide a brief summary of the circumstances leading to the action as well as the current status or final disposition. Your information must fit within the space provided. Provide a brief summary of events leading to the action and any payment schedule details including current status (if applicable). (Your information must fit within the space provided.)-

LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
U4U4 - Regulatory Action DRP	

This Disclosure Reporting Page is an **? INITIAL OR ? AMENDED** response to report details for affirmative responses to *Questions 14C, 14D, 14E, 14F and 14G(1)* on Form **U4U4**;

Check question(s) you are responding to:

Regulatory Action			
? 14C(1)	? 14C(5)	? 14D(4)	? 14E(3)
? 14C(2)	? 14D(1)(a) <u>14D(1)(d)</u>	? 14D(5)	? 14E(4)
? 14C(3)	? 14D(1)(b) <u>14D(1)(e)</u>	? 14E(1)	? 14F
? 14C(4)	? 14D(1)(c)	? 14E(2)	? 14G(1)
	? 14D(2)(a)		
	? 14D(3 2)(b)		

One event may result in more than one affirmative answer within each of the above items. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

1. Regulatory Action initiated by:
? SEC ? Other ? Federal ? State ? SRO ? Foreign **O Federal Banking Agency**
O National Credit Union Administration
 (Full name of regulator, *foreign financial regulatory authority*, Federal, State, SRO, or commodities exchange, or National Credit Union Administration)

2. Principal Sanction:

Other Sanctions:

3. Date Initiated (MM/DD/YYYY):
? Exact ? Explanation
 If not exact, provide explanation:

4. Docket/Case Number:

5. Employing *Firm* when activity occurred which led to the regulatory action:

6. Principal Product Type:

Other Product Types:

7.	Describe the allegations related to this regulatory action. (Your information must fit within the space provided.): <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>								
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: <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>								
If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.									
10.	How was matter resolved: <div style="border: 1px solid black; width: 250px; height: 20px; margin-top: 5px;"></div>								
11.	Resolution Date (MM/DD/YYYY): <div style="border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"></div> ? Exact ? Explanation If not exact, provide explanation: <div style="border: 1px solid black; width: 550px; height: 40px; margin-top: 5px;"></div>								
12.	Resolution Detail: A. Were any of the following Sanctions-sanctions Ordered ordered ? (Check all appropriate items): <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">? Monetary/Fine</td> <td style="width: 50%;">Amount: \$ <div style="border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"></div></td> </tr> <tr> <td>? Revocation/Expulsion/Denial</td> <td>? Disgorgement/Restitution</td> </tr> <tr> <td>? Censure</td> <td>? Cease and Desist/Injunction</td> </tr> <tr> <td>? Bar</td> <td>? Suspension</td> </tr> </table> B. Other Sanctions-sanctions Ordered ordered : <div style="border: 1px solid black; width: 550px; height: 40px; margin-top: 5px;"></div> C. Sanction detail: if suspended, <i>enjoined</i> or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by 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 disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you, date paid and if any portion of penalty was waived: <div style="border: 1px solid black; width: 550px; height: 40px; margin-top: 5px;"></div>	? Monetary/Fine	Amount: \$ <div style="border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"></div>	? Revocation/Expulsion/Denial	? Disgorgement/Restitution	? Censure	? Cease and Desist/Injunction	? Bar	? Suspension
? Monetary/Fine	Amount: \$ <div style="border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"></div>								
? Revocation/Expulsion/Denial	? Disgorgement/Restitution								
? Censure	? Cease and Desist/Injunction								
? Bar	? Suspension								
13.	<u>Comment (Optional). You may use this field to provide a brief summary of the circumstances leading to the action as well as the current status or disposition and/or finding(s). Your information must fit within the space provided. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates. (Your information must fit within the space provided.)</u> <div style="border: 1px solid black; width: 550px; height: 20px; margin-top: 5px;"></div>								

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Rev. Form U4U4 (03/200206/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
U4U4 - Termination DRP	

This Disclosure Reporting Page is an **? INITIAL OR ? AMENDED** response to report details for affirmative response to **Question 14J** on Form [U4U4](#);

Check question(s) you are responding to:

Termination		
? 14J(1)	? 14J(2)	? 14J(3)

One event may result in more than one affirmative answer to the above items. Use only one DRP to report details related to the same termination. Use a separate DRP for each termination reported.

1. Firm Name:

2. Termination Type:

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

? Exact ? Explanation
 If not exact, provide explanation:

4. Allegation(s):

5. Principal Product Type:

 Other Product Types:

6. ~~Describe circumstances relating to termination. Including event dates and facts to sufficiently describe conduct leading to termination. (Your information must fit within the space provided.):~~ **Comment (Optional). You may use this field to provide a brief summary of the circumstances leading to the termination. Your information must fit within the space provided.**

Rev. Form [U-5U5](#) (~~03/2002~~[06/2003](#))

Form [U-5U5](#)
 Uniform Termination Notice
 for
 Securities Industry
 Registration

GENERAL INSTRUCTIONS

The Form [U-5U5](#) is the Uniform Termination Notice for Securities Industry Registration. Broker-dealers, investment advisers, or issuers of securities must use this form to terminate the registration of an individual in the appropriate [jurisdictions](#) and/or [self-regulatory organizations](#) ("SROs"). These instructions apply to the filing of Form [U-5U5](#) electronically with the Central Registration Depository ("CRD[®]") or the Investment Adviser Registration Depository ("IARDSM"). Filers submitting paper filings should read the Special Instructions for Paper Filers in conjunction with the other instructions to the form. In addition, paper filers should contact the appropriate [jurisdiction](#) and/or *SRO* for specific filing instructions or requirements.

Filers must answer all questions and submit all requested information, unless otherwise directed in the Specific Instructions. Only Section 2 (CURRENT RESIDENTIAL ADDRESS), Section 7 (DISCLOSURE QUESTIONS) and Disclosure Reporting Page(s) (DRPs [U-5U5](#)) may be amended on this Form [U-5U5](#). If the Form [U-5U5](#) has been completed for a [full termination](#), a copy of this form must be provided to the terminated individual.

For [full termination](#) filings, complete Section 7 (DISCLOSURE QUESTIONS) and use the Disclosure Reporting Page(s) (DRPs [U-5U5](#)) to provide details to the "Yes" answers. For [partial terminations](#), disclosures should be made through the Form [U-4U4](#). Upon request, additional documents may be required to clarify or support responses to the form.

Firms are under a continuing obligation to amend and update Section 7 (DISCLOSURE QUESTIONS) until final disposition, including reportable matters that occur and become known after initial submission of this form. Amendments must be filed electronically (unless the filer is an approved paper filer) by updating the appropriate section of Form [U-5U5](#).

The Sections of the Form [U-5U5](#) are as follows:

1. GENERAL INFORMATION
2. CURRENT RESIDENTIAL ADDRESS
3. FULL TERMINATION
4. DATE TERMINATED
5. PARTIAL TERMINATIONS
- 5A. SRO PARTIAL TERMINATIONS
- 5B. JURISDICTION PARTIAL TERMINATIONS
6. AFFILIATED FIRM TERMINATIONS

7. DISCLOSURE QUESTIONS (Full Terminations and Amendments Only)

INVESTIGATION DISCLOSURE (Question 7A)

INTERNAL REVIEW DISCLOSURE (Question 7B)

CRIMINAL DISCLOSURE (Question 7C)

REGULATORY ACTION DISCLOSURE (Question 7D)

CUSTOMER COMPLAINT/ARBITRATION/CIVIL LITIGATION DISCLOSURE (Question 7E) _____

TERMINATION DISCLOSURE (Question 7F)-

8. SIGNATURE

8A. FIRM ACKNOWLEDGMENT

8B. INDIVIDUAL ACKNOWLEDGMENT AND CONSENT

DISCLOSURE REPORTING PAGES (DRPs U-5U5) (Full Terminations and Amendments Only)

CRIMINAL DRP

CUSTOMER COMPLAINT/ARBITRATION/CIVIL LITIGATION DRP

INTERNAL REVIEW DRP

INVESTIGATION DRP

REGULATORY ACTION DRP

TERMINATION DRP

EXPLANATION OF TERMS

The following definitions apply to terms that are italicized in this form.

AFFILIATED means under common ownership or control.

APPROPRIATE SIGNATORY means the individual the *firm* authorizes to execute the individual's Form ~~U-5U5~~ on the *filing firm's* behalf. The *appropriate signatory* must meet the criteria established, if any, by the appropriate *SRO* or *jurisdiction*.

CHARGED means being accused of a crime in a formal complaint, information, or indictment (or equivalent formal charge).

DATE TERMINATED means the effective date of the termination of the registration or, in cases where registration has not yet been made effective, the date of the withdrawal of the application for registration.

DISCIPLINARY ACTION includes a formal action such as denial, revocation or suspension of a registration, or a censure, fine, cease and desist order, order of prohibition, temporary restraining order, injunction, bar or expulsion, but does not include a *minor rule violation*, deficiency letter, examination report, memorandum of understanding, letter of caution, admonishment, and similar informal resolutions of matters.

FEDERAL BANKING AGENCY shall include any Federal banking agency as defined in Section 3 of the Federal Deposit Insurance Act (12 U.S.C. 1813(q)).

FELONY, for *jurisdictions* that do not differentiate between a *felony* or *misdemeanor*, is an offense punishable by a sentence of at least one year imprisonment and/or a fine of at least \$1,000. The term also includes a general court martial.

FILING FIRM means the *firm* named in Section 1 (GENERAL INFORMATION) on the Form ~~U-5U5~~.

FIRM means a broker-dealer, investment adviser, or issuer, as appropriate.

FIRM CRD NUMBER is a unique number assigned to each *firm* listed in the CRD or IARD systems.

FOREIGN FINANCIAL REGULATORY AUTHORITY includes a foreign securities authority; any other governmental body or foreign equivalent of a *self-regulatory organization* empowered by a foreign government to administer or enforce its laws relating to the regulation of *investment-related* activities; or a membership organization, a function of which is to regulate the participation of its members in *investment-related* activities listed above.

FULL TERMINATION means the termination of registration with all *self-regulatory organizations* and all *jurisdictions*.

INDIVIDUAL CRD NUMBER is a unique number assigned to each individual listed in the CRD or IARD system.

INVESTIGATION includes: (a) grand jury investigations; (b) U.S. Securities and Exchange Commission investigations after the “Wells” notice has been given; (c) NASD ~~Regulation, Inc.~~ investigations after the “Wells” notice has been given or after a person associated with a member, as defined in the NASD By-Laws, has been advised by the staff that it intends to recommend formal disciplinary action; (d) formal investigations by other *SROs*; or (e) actions or procedures designated as investigations by *jurisdictions*. The term *investigation* does not include subpoenas, preliminary or routine regulatory inquiries or requests for information, deficiency letters, “blue sheet” requests or other trading questionnaires, or examinations.

INVESTMENT-RELATED pertains to securities, commodities, banking, insurance, or real estate (including, but not limited to, acting as or being associated with a broker-dealer, issuer, investment company, investment adviser, futures sponsor, bank, or savings association).

INVOLVED means doing an act or aiding, abetting, counseling, commanding, inducing, conspiring with or failing reasonably to supervise another in doing an act.

JURISDICTION means a state, the District of Columbia, the Commonwealth of Puerto Rico, or any subdivision or regulatory body thereof.

MINOR RULE VIOLATION is a violation of a *self-regulatory organization* rule ~~that~~ ~~which~~ has been designated as “minor” pursuant to a plan approved by the U.S. Securities and Exchange Commission. A rule violation **may** be designated as “minor” under a plan if the sanction imposed consists of a fine of \$2,500.00 or less, and if the sanctioned person does not contest the fine. Check with the appropriate *self-regulatory organization* to determine if a particular rule violation has been designated as “minor” for these purposes.

MISDEMEANOR, for *jurisdictions* that do not differentiate between a *felony* or *misdemeanor*, is an offense punishable by a sentence of less than one year imprisonment and/or a fine of less than \$1,000. The term also includes a special court martial.

MULTIPLE TERMINATION applies when an individual is to be terminated with more than one *firm* under common ownership or control. To effect a multiple termination, list the primary *firm* in Section 1 (GENERAL INFORMATION) and list all other affiliates with which the individual is registered in Section 6 (AFFILIATED FIRM TERMINATIONS). *Multiple termination* is available only to those *firms* who have reported such common ownership under Form BD Item 10 and Schedule D.

PARTIAL TERMINATION means the termination of registration or registration category with one or more, but not all, *SROs* or *jurisdictions*.

PROCEEDING includes a formal administrative or civil action initiated by a governmental agency, *self-regulatory organization* or *foreign financial regulatory authority*, a *felony* criminal indictment or information (or equivalent formal charge), or a *misdemeanor* criminal information (or equivalent formal charge), but does not include an arrest or similar charge effected in the absence of a formal criminal indictment or information (or equivalent formal charge).

RESIGN or RESIGNED relates to separation from employment with any employer, is not restricted to *investment-related* employment, and includes any termination in which the allegations are a proximate cause of the separation, even if the individual initiated the separation.

SALES PRACTICE VIOLATIONS shall include any conduct directed at or involving a customer which would constitute a violation of: any rules for which a person could be disciplined by any *self-regulatory organization*; any provision of the Securities and Exchange Act of 1934; or any state statute prohibiting fraudulent conduct in connection with the offer, sale or purchase of a security or in connection with the rendering of investment advice.

SELF-REGULATORY ORGANIZATION (“SRO”) means any national securities or commodities exchange, any national securities association (e.g., ~~the~~ NASD), or any registered clearing agency.

SPECIFIC INSTRUCTIONS

for completing the Form [U-5U5](#)

NOTICE TO THE INDIVIDUAL WHO IS THE SUBJECT OF THIS FILING

Note: Even if you are no longer registered, you continue to be subject to the jurisdiction of regulators for at least two years after your registration is terminated and may have to provide information about your activities while associated with this *firm*. Therefore, you must forward any residential address changes for two years following your termination date or last Form [U-5U5](#) amendment to: CRD Address Changes, CRD P.O. Box 9495, Gaithersburg, MD 20898-9495.

1. GENERAL INFORMATION SECTION

First Name

Enter the individual's first name. Do not use nicknames or abbreviations or make modifications to the individual's first name.

Middle Name

If the individual has a middle name, specify the full middle name. Do not use nicknames or abbreviations or make modifications to the individual's middle name. If the individual does not have a middle name, leave this field blank.

Last Name

Enter the individual's last name. Do not use nicknames or abbreviations or make modifications to the individual's last name. Include punctuation when and where appropriate.

Suffix

Enter any suffix that follows the individual's last name, such as Jr., Sr., etc. Include punctuation when and where appropriate.

Firm CRD Number

Enter the *Firm CRD Number*.

Firm Name

Enter the *firm's* complete name as listed on the Form BD or the Form ADV. Do not abbreviate, shorten, or modify the *firm* name in any way.

CRD Branch Number

Enter the branch number assigned by the CRD system to identify the individual's branch office.

Firm NFA Number

If this form will be filed with the National Futures Association (NFA), enter the *firm's* assigned, unique NFA registration number in this field.

Firm Billing Code

Enter the *firm's* billing code. A billing code is an alpha/numeric value consisting of up to eight characters that the *firm* has established. If the *firm* does not use billing codes, leave this field blank.

Individual CRD Number

Enter the assigned *Individual CRD number*.

Individual SSN

Enter the individual's Social Security Number in this field. If the individual does not

possess a CRD number or a Social Security number, please contact NASD's Gateway Call Center.

Individual NFA Number

If this form will be filed with the National Futures Association (NFA), enter the individual's assigned, unique NFA registration number in this field.

Office of Employment Address Street 1/Street 2

Enter the address where the individual is physically located for business purposes. A complete address must be furnished. Post office boxes are not acceptable. This address does not have to be the same as the *firm's* main address. Enter additional identifying information in Office of Employment Address Street 2, if necessary.

City

Enter the name of the city where the individual is physically located for business purposes.

State

Enter the state where the individual is physically located for business purposes.

Country

Enter the name of the country where the individual is physically located for business purposes.

Postal Code

Enter the postal code where the individual is physically located for business purposes.

Private Residence Check Box

Check this box if the Office of Employment address is a private residence.

NOTICE TO THE FIRM

This is the last reported residential address. If this is not current, please enter the current residential address.

2. CURRENT RESIDENTIAL ADDRESS

Complete this section for both *full termination* and *partial termination* requests. Provide the individual's current residential address. Report changes as they occur.

From (MM/YYYY)

Enter the month and year the individual began residing at this address.

Street Address 1/Address 2

Enter the individual's street address here. Post office boxes are not acceptable. Include the street name; building name or number; and unit, suite, apartment or condominium number, as applicable; as well as other identifying information.

City

Enter the city of residence relating to this address.

State

Enter the state of residence relating to this address.

Country

Enter the name of the country of residence for this address.

Postal Code

Enter the postal code for this address.

3. FULL TERMINATION

A "yes" response will terminate ALL registrations with all SROs and all jurisdictions. For a *full termination*, complete the Reason for Termination and Section 4 (DATE TERMINATED). Do not complete Section 5 (PARTIAL TERMINATIONS). For a *partial termination*, check "no" and complete Section 5 (PARTIAL TERMINATIONS).

Reason for Termination (Full Terminations Only)

For a *full termination*, provide the reason for termination from the following selections: "Voluntary," "Deceased," "Permitted to Resign," "Discharged," or "Other." If "Permitted to Resign," "Discharged," or "Other," is checked, provide an explanation in the space provided.

4. DATE TERMINATED (Full and Partial Terminations)

For both *full* and *partial terminations*, enter the actual date that the termination is effective. Fill in the month, day, and year (MM/DD/YYYY). A complete entry must be made in this section.

5. PARTIAL TERMINATIONS

For a *partial termination*, do not complete the Reason for Termination in Section 3 (FULL TERMINATION) or Section 7 (DISCLOSURE QUESTIONS). The Reason for Termination and Section 7 (DISCLOSURE QUESTIONS) should only be completed on Form U-5U5 for *full termination* requests.

5A. SRO PARTIAL TERMINATIONS

Investment ~~A~~adviser ~~R~~representative (~~RA~~) ~~only~~ (~~RA-only~~) applicants may skip this section.

Check the appropriate boxes to indicate the *SROs* and registration categories the individual seeks to terminate. Refer to the individual's current CRD record for categories that may be terminated. The individual must retain registration with at least one *SRO* unless the *firm* is an intra-state broker-dealer.

"Other" Box

See Special Instructions for Paper Filers.

5B. JURISDICTION PARTIAL TERMINATIONS

Select the type of registration: ~~B~~roker-~~D~~dealer ~~A~~agent (AG) and/or an ~~I~~nvestment ~~A~~adviser ~~R~~representative (RA).

To terminate registration as an ~~n~~-~~Broker-Dealer-Agent~~-(AG) or an ~~Investment Adviser-Representative~~-(RA), select the appropriate *jurisdiction(s)*.

Agent of an Issuer

To terminate an Agent of the Issuer (AI) registration with one or more *jurisdictions*, contact the appropriate *jurisdiction(s)* for instructions. For purposes of a paper filing, select the box marked AI. To terminate the registration(s), enter the *jurisdiction* identification for the relevant *jurisdiction(s)*. Print out additional copies of blank form pages as necessary; complete and attach to the filing. (Note: This applies to paper filers only. For electronic filers, this field will be inactive.)

6. AFFILIATED FIRM TERMINATIONS

Indicate by answering "yes" or "no" whether the individual's registration will be terminated with one or more *firms affiliated* with the *filing firm*. For *partial terminations*, select the *affiliated firm(s)* from which the individual seeks to terminate registrations and indicate the registrations the individual seeks to terminate. For *full terminations*, select the *affiliated firm(s)* from which the individual seeks to terminate.

- File separate Sections 5A and 5B for each *affiliated firm* if the *SRO* and/or *jurisdiction* terminations requested with the *firms* named in this section differ from the terminations requested with the *filing firm*.

Affiliated Firm CRD Number

Enter the *affiliated firm's* CRD Number here.

Affiliated Firm Name

Enter the *affiliated firm's* name here. This should be the name of the *affiliated firm* as listed on the Form BD or Form ADV. Do not abbreviate, shorten or otherwise modify the *firm* name in any way.

Affiliated Firm Designation - Broker-Dealer or Investment Adviser (BD/IA)

Select the appropriate radio button (paper filers check the appropriate box) marked as "BD" or "IA" to indicate whether the *affiliated firm* is a broker-dealer or an investment adviser.

Affiliated Firm CRD Branch Number

Enter the branch number assigned by the CRD system to identify the individual's branch office with the *affiliated firm*.

Affiliated Firm Billing Code

Enter the billing code of the *affiliated firm*. A billing code is an alpha/numeric value consisting of up to eight characters established by the *firm*. If the *firm* does not use billing codes, leave this field blank.

Office of Employment Address Street 1/Street 2

Enter the address where the individual is physically located for business purposes. A complete address must be furnished. Post office boxes are not acceptable. This address does not have to be the same as the *firm's* main address. Enter additional identifying information in Office of Employment Address Street 2, if necessary.

City

Enter the name of the city where the individual is physically located for business purposes. A complete address must be furnished. Post office boxes are not acceptable. This address does not have to be the same as the *firm's* main address.

State

Enter the state where the individual is physically located for business purposes.

Country

Enter the name of the country where the individual is physically located for business purposes.

Postal Code

Enter the postal code where the individual is physically located for business purposes.

7. DISCLOSURE QUESTIONS

Disclosures

This section applies to *full terminations* only.

To complete this section, check "yes" or "no" for each question. Refer to the Explanation of Terms if necessary. For any "yes" answer, provide a detailed explanation on the appropriate Disclosure Reporting Page (DRP [U-5U5](#)). The Disclosure Questions are as follows:

- 7A Investigation Disclosure
- 7B Internal Review Disclosure
- 7C Criminal Disclosure
- 7D Regulatory Action Disclosure
- 7E Customer Complaint/[Arbitration/Civil Litigation](#) Disclosure

[7F Termination Disclosure](#)

About Internal Review

Generally, the Internal Review Disclosure question in Question 7B and the Internal Review

Reporting Page (DRP [U-5U5](#)) are used to report matters relating to compliance, **not** matters of a competitive nature. Responses should **not** include situations relating to disputes between the *firm* and the individual over ownership or possession of information or records pertaining to business conducted by the individual.

If a “yes” answer is provided to the Internal Review Disclosure question, the individual whose name appears in Section 1 (GENERAL INFORMATION) of this form may provide a brief summary of the event on Part II of the Internal Review Disclosure Reporting Page ([U-5U5](#)).

8. SIGNATURE

All signatures required on the Form [U-5U5](#) filing must be made in this section. A “signature” includes a manual signature or an electronically transmitted equivalent.

Date

Enter the date that the form was signed by the *Appropriate Signatory*. The entry must be numeric (MM/DD/YYYY). Future dates may not be entered in this section.

Signature of *Appropriate Signatory*

NOTE: A signatory entry is required for all filings.

For purposes of an electronic form filing, a signature is effected by typing a name in the designated signature field. Enter the full legal signature as it appears in typed or printed form. By typing a name in this field, the signatory acknowledges and represents that the entry constitutes in every way, use, or aspect, his or her legally binding signature.

For paper filers, enter the full legal signature as it appears in typed or printed form. The signatory’s full legal name must also be displayed under the signature. The name must be typed or printed as it appears in the signature form.

Person to Contact for Further Information

Enter the name of the person to contact for additional information regarding the matters reported on this form. Include the telephone number for the person listed.

8A FIRM ACKNOWLEDGMENT

This section must be completed on all [U-5U5](#) form filings submitted by the *firm*.

8B INDIVIDUAL ACKNOWLEDGMENT AND CONSENT

This section must be completed on amendment [U-5U5](#) form filings where the individual is submitting changes to Part II of the INTERNAL REVIEW DRP or changes to Section 2 (CURRENT RESIDENTIAL ADDRESS).

APPENDIX

Drop-Down Pick Lists

Select as appropriate from the following pick lists the answers to the questions that contain drop-down choices. The choices below match the pick lists that appear on the electronic screens.

Termination

Reason for Termination: *Discharged, *Other, *Permitted to Resign, Deceased, Voluntary.

General

State: Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Puerto

Rico, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin, Wyoming

DRPs

Customer Complaint/Arbitration/Civil Litigation

Customer's state of residence: Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Puerto Rico, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin, Wyoming

Principal product type: Annuity(ies)-Fixed, Annuity(ies)-Variable, CD(s), Commodity Option(s), Debt-Asset Backed, Debt-Corporate, Debt, Government, Debt-Municipal, Derivative(s), Direct Investment(s)-DDP & LP Interest(s), Equity-OTC, Equity Listed (Common & Preferred Stock), Futures-Commodity, Futures-Financial, Index Option(s), Insurance, Investment Contract(s), Money Market Fund(s), Mutual Fund(s), No Product, Options, Other, Penny Stock(s), Unit Investment Trust(s).

If the arbitration/reparation is not pending, what was the disposition?:

Award to Applicant, Award to Customer, Decision for Applicant, Decision for Customer, Denied, Dismissed, Judgment (other than monetary), No Action, Other, Settled, Withdrawn.

If the civil litigation is not pending, what was the disposition?: Decision for Applicant, Decision for Customer, Denied, Dismissed, Judgment (other than monetary), Monetary Judgment to Applicant, Monetary Judgment to Customer, No Action, Other, Settled, Withdrawn

Regulatory Action

Principal Sanction: Bar, Cease and Desist, Censure, Civil and Administrative Penalty(ies)/Fine(s), Denial, Disgorgement, Expulsion, Injunction, Other, Prohibition, Reprimand, Restitution, Revocation, Suspension, Undertaking.

Principal product type: Annuity(ies)-Fixed, Annuity(ies)-Variable, CD(s), **Banking Products (other than CDs)**, Commodity Option(s), Debt-Asset Backed, Debt-Corporate, Debt, Government, Debt-Municipal, Derivative(s), Direct Investment(s)-DDP & LP Interest(s), Equity-OTC, Equity Listed (Common & Preferred Stock), Futures-Commodity, Futures-Financial, Index Option(s), Insurance, Investment Contract(s), Money Market Fund(s), Mutual Fund(s), No Product, Options, Other, Penny Stock(s), Unit Investment Trust(s).

How was matter resolved: Acceptance, Waiver & Consent (AWC), Consent, Decision, Decision & Order of Offer of Settlement, Dismissed, Order, Other, Settled, Stipulation and Consent, Vacated, Withdrawn.

SPECIAL INSTRUCTIONS FOR PAPER FILERS

To file the Form **U-5-US** on paper rather than electronically through Web CRD or IARD, please refer to the following instructions for paper filings. **These instructions should be read in conjunction with the other instructions (General Instructions, Specific Instructions, and the Explanation of Terms) contained in this Form **U-5US**.** Please note that paper filings **generally** are **generally**-not permitted for broker-dealer terminations.

Initial filings of the Form [U-5U5](#) on paper must be complete and contain responses to all the questions and data fields relating to the *full* or *partial termination* requested. Make permitted amendments (i.e., to Section 2 (CURRENT RESIDENTIAL ADDRESS), Section 7 (DISCLOSURE QUESTIONS) and Disclosure Reporting Pages (DRPs [U-5](#))) by updating the appropriate sections on the paper version of Form [U-5U5](#). When making amendments, re-enter the information contained in Section 1 (GENERAL INFORMATION) so that the individual and *firm* can be properly identified. A copy of the Form [U-5U5](#), with original signatures, and all amendments must be retained by the *filing firm* and must be made available for inspection upon regulatory request.

1. General Information

Firm Name. Agents of issuers should enter the issuer name in the field that requests the *firm* name. Do not abbreviate, shorten, or modify the *firm* name in any way.

Individual CRD Number. Provide the *individual's CRD number* that was generated by the CRD system for the individual. If the *individual's CRD number* has not been generated or is not known, leave this item blank.

Firm CRD Number. Provide the *firm's CRD number* that was generated by the CRD system for the *firm*. If the *firm's CRD number* has not been generated or is not known, leave this item blank.

3. Full Termination

Reason for Termination. Select the Reason for Termination from the list of choices appended to this form.

5A. SRO Partial Terminations

Paper filers should check the "Other" box only to terminate registration categories not listed on the Form U-5.

5B. Jurisdiction Partial Terminations

To terminate an Agent of an Issuer (AI) registration with one or more *jurisdictions*, contact the appropriate *jurisdiction(s)* for instructions. For purposes of a paper filing, select the box marked AI. To terminate the registration(s), enter the *jurisdiction* identification for the relevant *jurisdiction(s)*.

6. Affiliated Firms Terminations

This section does not apply for paper filers.

Rev. Form U-5U5 (03/200206/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412

NOTICE TO THE INDIVIDUAL WHO IS THE SUBJECT OF THIS FILING
<i>Even if you are no longer registered you continue to be subject to the jurisdiction of regulators for at least two years after your registration is terminated and may have to provide information about your activities while associated with this firm. Therefore, you must forward any residential address changes for two years following your termination date or last Form U-5U5 amendment to: CRD Address Changes, P.O. Box 9495, Gaithersburg, MD 20898-9495.</i>
1. GENERAL INFORMATION

First Name: <input type="text"/>	Middle Name: <input type="text"/>	Last Name: <input type="text"/>	Suffix: <input type="text"/>
Firm CRD #: <input type="text"/>	Firm Name: <input type="text"/>	CRD Branch #: <input type="text"/>	Firm NFA #: <input type="text"/>
Firm Billing Code: <input type="text"/>	Individual CRD #: <input type="text"/>	Individual SSN: <input type="text"/>	Individual NFA #: <input type="text"/>
Office of Employment Address Street 1: <input type="text"/>		Office of Employment Address Street 2: <input type="text"/>	
City: <input type="text"/>	State: <input type="text"/>	Country: <input type="text"/>	Postal Code: <input type="text"/>
Private Residence Check Box: If the Office of Employment address is a private residence, check this box. ?			

Rev. Form U-5U5 (03/200206/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
2. CURRENT RESIDENTIAL ADDRESS	

NOTICE TO THE FIRM			
<i>This is the last reported residential address. If this is not current, please enter the current residential address.</i>			
From (MM/YYYY) <input type="text"/>	To (MM/YYYY) <input type="text"/>		
Address Street 1 <input type="text"/>		Address Street 2 <input type="text"/>	
City <input type="text"/>	State: <input type="text"/>	Country <input type="text"/>	Postal Code <input type="text"/>

Rev. Form U-5U5 (03/200206/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412

Representative (S38)											
REGISTRATION CATEGORY	NASD	NYSE	AMEX	BSE	CSE	PCX	CBOE	CHX	PHLX	ISE	
ET - Equity Trader (S55)											
AM - Allied Member											
AP - Approved Person											
LE - Securities Lending Representative											
LS - Securities Lending Supervisor											
ME - Member Exchange											
FE - Floor Employee											
OF - Officer											
CO - Compliance Official (S14)											
REGISTRATION CATEGORY	NASD	NYSE	AMEX	BSE	CSE	PCX	CBOE	CHX	PHLX	ISE	
CF - Compliance Official Specialist (S14A)											
PM - Floor Member Conducting Public Business											
PC - Floor Clerk Conducting Public Business											
SC - Specialist Clerk (S21)											
TA - Trading Assistant (S25)											
SF - Single Stock Futures (S43)											
FP - Municipal Fund (S51)											
IF - In-Firm Delivery Proctor											
Other _____ (Paper Form Only)											

Rev. Form U-SUS (03/2002/06/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
5B. JURISDICTION PARTIAL TERMINATIONS	

Check appropriate *jurisdiction(s)* for broker-dealer agent (AG) (~~Broker-Dealer Agent~~) and/or investment adviser representative (RA) (~~Investment Adviser Representative~~) termination.

JURISDICTION	AG	RA	JURISDICTION	AG	RA	JURISDICTION	AG	RA	JURISDICTION	AG	RA
Alabama			Illinois			Montana			Puerto Rico		
Alaska			Indiana			Nebraska			Rhode Island		
Arizona			Iowa			Nevada			South Carolina		
Arkansas			Kansas			New Hampshire			South Dakota		

California		Kentucky		New Jersey		Tennessee	
Colorado		Louisiana		New Mexico		Texas	
Connecticut		Maine		New York		Utah	
Delaware		Maryland		North Carolina		Vermont	
District of Columbia		Massachusetts		North Dakota		Virginia	
Florida		Michigan		Ohio		Washington	
Georgia		Minnesota		Oklahoma		West Virginia	
Hawaii		Mississippi		Oregon		Wisconsin	
Idaho		Missouri		Pennsylvania		Wyoming	

AGENT OF THE ISSUER TERMINATION (AI) Indicate 2 letter jurisdiction code(s): _____

Rev. Form U-5U5 (03/200206/2003)			
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111		
FIRM NAME : 1	Reference #: 3184614888606412		
<p>Is this a <i>multiple termination</i> with one or more <i>firms affiliated</i> with the <i>filing firm</i>? If "yes" to the above question and the termination requests for the <i>filing firm</i> are identical to the termination requests of each <i>affiliated firm</i>, then mark the same termination request for each affiliate. If the termination requests of the <i>affiliated firm(s)</i> differ from those of the <i>filing firm</i>, complete the <i>SRO</i> and/or <i>jurisdiction</i> sections for each <i>affiliated firm</i>.</p> <p style="text-align: center;">? Yes ? No</p>			
Affiliated Firm CRD #	Affiliated Firm Name		
<input type="text"/>	<input type="text"/>		
Affiliated Firm CRD Branch #	Affiliated Firm Billing Code		
<input type="text"/>	<input type="text"/>		
Office of Employment Address Street 1:	Office of Employment Address Street 2:		
<input type="text"/>	<input type="text"/>		
City:	State:	Country:	Postal Code:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Private Residence Check Box:			
If the Office of Employment address is a private residence, check this box. ?			

Rev. Form U-5U5 (03/200206/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
7. DISCLOSURE QUESTIONS	
<p>IF THE ANSWER TO ANY OF THE FOLLOWING QUESTIONS IN SECTION 7 IS 'YES', COMPLETE DETAILS OF ALL EVENTS OR PROCEEDINGS ON APPROPRIATE DRP(S). IF THE INFORMATION IN SECTION 7 HAS ALREADY BEEN REPORTED ON FORM U-4U4 OR FORM U-5U5, DO NOT RESUBMIT DRPs FOR THESE ITEMS. REFER TO THE EXPLANATION OF TERMS SECTION OF FORM U-5U5 INSTRUCTIONS FOR EXPLANATION OF ITALICIZED WORDS.</p>	
Investigation Disclosure	
YES	NO

<p>7A. Currently is, or at termination was, the individual the subject of an <i>investigation</i> or <i>proceeding</i> by a domestic or foreign governmental body or <i>self-regulatory organization</i> with jurisdiction over <i>investment-related</i> businesses? (<u>Note: Provide details of an <i>investigation</i> on an Investigation Disclosure Reporting Page and details regarding a <i>proceeding</i> on a Regulatory Action Disclosure Reporting Page.</u>)</p>	?		NO
Internal Review Disclosure			
<p>7B. Currently is, or at termination was, the individual under internal review for fraud or wrongful taking of property, or violating <i>investment-related</i> statutes, regulations, rules or industry standards of conduct?</p>	?		?
Criminal Disclosure			
<p>7C. While employed by or associated with your <i>firm</i>, or in connection with events that occurred while the individual was employed by or associated with your <i>firm</i>, was the individual:</p>	YES		NO
<p>1. convicted of or did the individual plead guilty or nolo contendere ("no contest") in a domestic, foreign or military court to any <i>felony</i>?</p>	?		?
<p>2. <u>charged</u> with any <i>felony</i>?</p>	?		?
<p>3. convicted of or did the individual plead guilty or nolo contendere ("no contest") in a domestic, foreign or military court to a <i>misdemeanor involving</i>: investments or an <i>investment-related</i> business, or any fraud, false statements or omissions, wrongful taking of property, bribery, perjury, forgery, counterfeiting, extortion, or a conspiracy to commit any of these offenses?</p>	?		?
<p>4. <i>charged</i> with a <i>misdemeanor</i> specified in 7(C)(3)?</p>	?		?
Regulatory Action Disclosure			
<p>7D. While employed by or associated with your <i>firm</i>, or in connection with events that occurred while the individual was employed by or associated with your <i>firm</i>, was the individual <i>involved</i> in any <i>disciplinary action</i> by a domestic or foreign governmental body or <u>self regulatory organization</u> (other than those designated as a "<i>minor rule violation</i>" under a plan approved by the U.S. Securities and Exchange Commission) with jurisdiction over the <i>investment-related</i> businesses?</p>	YES	?	NO
Customer Complaint Disclosure			
<p>7E. 1. In connection with events that occurred while the individual was employed by or associated with your <i>firm</i>, was the individual named as a respondent/defendant in an <u>investment-related</u>, consumer-</p>	YES		NO

initiated arbitration or civil litigation which alleged that the individual was *involved* in one or more *sales practice violations* and which:

- | | | |
|--|---|---|
| (a) is still pending, or; | ? | ? |
| (b) resulted in an arbitration award or civil judgment against the individual, regardless of amount, or; | ? | ? |
| (c) was settled for an amount of \$10,000 or more. | ? | ? |
| 2. In connection with events that occurred while the individual was employed by or associated with your <i>firm</i> , was the individual the subject of an <u>investment-related</u> , consumer-initiated complaint, not otherwise reported under question 7(E)(1) above, which alleged that the individual was <i>involved</i> in one or more <i>sales practice violations</i> , and which complaint was settled for an amount of \$10,000 or more? | ? | ? |
| 3. In connection with events that occurred while the individual was employed or associated with your <i>firm</i> , was the individual the subject of an <u>investment-related</u> , consumer-initiated, written complaint, not otherwise reported under questions 7(E)(1) or 7(E)(2) above, which: | | |
| (a) would be reportable under question 14I(3)(a) on Form <u>U-4U4</u> , if the individual were still employed by your <i>firm</i> , but which has not previously been reported on the individual's Form <u>U-4U4</u> by your <i>firm</i> ; | ? | ? |
| or | | |
| (b) would be reportable under question 14I(3)(b) on Form <u>U-4U4</u> , if the individual were still employed by your <i>firm</i> , but which has not previously been reported on the individual's Form <u>U-4U4</u> by your <i>firm</i> . | ? | ? |

7F Did the individual voluntarily resign from your firm, or was the individual discharged or permitted to resign from your firm, after allegations were made that accused the individual of:

- (1) violating investment-related statutes, regulations, rules or industry standards of conduct?
- (2) fraud or the wrongful taking of property?
- (3) failure to supervise in connection with investment-related statutes, regulations, rules or industry standards of conduct?

Rev. Form <u>U-5U5</u> (03/200206/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
8. SIGNATURE	

Please Read Carefully
 All signatures required on this Form U-5U5 filing must be made in this section.
 A "Signature" includes a manual signature or an electronically transmitted equivalent. For purposes of an electronic form filing, a signature is effected by typing a name in the designated signature field. By typing a name in this field, the signatory acknowledges and represents that the entry constitutes in every way, use, or aspect, his or her legally binding signature.

8A. FIRM ACKNOWLEDGMENT

This section must be completed on all [U-5U5](#) form filings submitted by the *firm*.

INDIVIDUAL ACKNOWLEDGMENT AND CONSENT

8B.

This section must be completed on amendment [U-5U5](#) form filings where the individual is submitting changes to Part II of the INTERNAL REVIEW DRP or changes to Section 2 (CURRENT RESIDENTIAL ADDRESS).

8A. FIRM ACKNOWLEDGMENT

I VERIFY THE ACCURACY AND COMPLETENESS OF THE INFORMATION CONTAINED IN AND WITH THIS FORM.

Person to contact for further information

Telephone # of person to contact

Signature of *Appropriate Signatory*

Date (MM/DD/YYYY)

8B. INDIVIDUAL ACKNOWLEDGMENT AND CONSENT

I VERIFY THE ACCURACY AND COMPLETENESS OF THE INFORMATION CONTAINED IN SECTION 2 (CURRENT RESIDENTIAL ADDRESS) AND/OR IN PART II OF THE INTERNAL REVIEW DRP.

Individual Signature

Date (MM/DD/YYYY)

Rev. Form [U-5U5 \(03/2002/06/2003\)](#)

LASTNAME, FIRSTNAME : 1111111

SSN # : 111-11-1111

FIRM NAME : 1

Reference #: 3184614888606412

U5 - Investigation DRP

This Disclosure Reporting Page is an **INITIAL OR AMENDED** response to report details for affirmative response to **Question 7(A)** on Form [U-5U5](#);

Check question being responded to:

Investigation

? 7(A)

If the *investigation* has been concluded without formal action, complete items 1, 2, 3 and 4 of this DRP to update. One event may result in more than one *investigation*. If more than one authority is investigating, use a separate DRP to provide details.

1. Notice Received From: (Name of Regulator, Agency, *SRO*, etc. initiating the *investigation*):

2. Notice Date (MM/DD/YYYY):

? **Exact ? Explanation**

If not exact, provide explanation:

3. Describe briefly the nature of the *investigation*, if known, or details of the resolution. (The information must fit within the space provided.):

4. Date Resolved (MM/DD/YYYY):	
<input type="text"/>	
? Exact ? Explanation	
If not exact, provide explanation:	
<input type="text"/>	

Rev. Form U-5U5 (03/2002/06/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
U5 - Internal Review DRP	

This Disclosure Reporting Page is an **INITIAL OR AMENDED** response to report details for affirmative response to **Question 7(B)** on Form [U-5U5](#);

Check question being responded to:

**Internal Review
? 7(B)**

If the individual has been notified that the internal review has been concluded without formal action, complete items 3 and 4 of this DRP to update.

PART I

1. Notice Received From: (Name of firm initiating the internal review):

2. Date internal review initiated (MM/DD/YYYY):

? Exact ? Explanation

If not exact, provide explanation:

3. Describe briefly the nature of the internal review or details of the conclusion. (The information must fit within the space provided.):

4. Date internal review concluded (MM/DD/YYYY):

? Exact ? Explanation

If not exact, provide explanation:

PART II

INDIVIDUAL SUBJECT MAY USE THIS SPACE FOR DETAILS TO AFFIRMATIVE ANSWERS OF ITEM **45 7(B)** ONLY

The individual who is the subject of the internal review may provide a brief summary of this event. The summary must fit within the space provided below. This summary may be submitted electronically to the CRD by the terminating *firm* or may be sent to: CRD, P.O. Box 9495, Gaithersburg, MD 20898-9495.

Rev. Form U-5U5 (03/200206/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
U5 - Criminal DRP	

This Disclosure Reporting Page is an **INITIAL OR AMENDED** response to report details for affirmative responses to **Questions 7(C)(1), 7(C)(2), 7(C)(3) and 7(C)(4)** on Form **U-5U5**;

Check question(s) being responded to:

Criminal			
? 7(C)(1)	? 7(C)(2)	? 7(C)(3)	? 7(C)(4)
<p>Use this DRP to report all charges arising out of the same event. One event may result in more than one affirmative answer to the above items. Multiple counts of the same charge arising out of the same event should be reported on the same DRP. Unrelated criminal actions, including separate cases arising out of the same event, must be reported on separate DRPs.</p> <p>Applicable court documents (i.e., criminal complaint, information or indictment as well as judgment of conviction or sentencing documents) must be provided to the CRD if not previously submitted.</p>			

1. Formal Charge(s) were brought in: (include name of Federal, Military, State or Foreign Court, Location of Court - City or County and State or Country, Docket/Case number).

2. **Event Disclosure Detail** (Use this for both organizational and individual charges.)

A. Date First Charged

(MM/DD/YYYY):

? **Exact ? Explanation**

If not exact, provide explanation:

B. Event Disclosure Detail (include Charge(s)/Charge Description(s), and for each charge provide: **1. number of counts, 2. felony or misdemeanor, 3. plea for each charge, and 4. product type if charge is investment-related**):

C. Did any of the Charge(s) within the Event involve a *Felony*? ? **Yes ? No**

D. Current status of the Event? ? **Pending ? On Appeal ? Final**

E. Event Status Date (complete unless status is Pending)

(MM/DD/YYYY):

? **Exact ? Explanation**

If not exact, provide explanation:

3. Disposition Disclosure Detail

Include for each charge, A. Disposition Type [e.g., convicted, acquitted, dismissed, pretrial, etc.], B. Date, C. Sentence/Penalty, D. Duration [if sentence-suspension, probation, etc.], E. Start Date of Penalty, F. Penalty/Fine Amount and G. Date Paid.

4. Comment (Optional). You may use this field to provide a brief summary of the circumstances leading to the charge(s) as well as the **current status or final** disposition. ~~Include the relevant dates when the conduct which was the subject of the charge(s) occurred. (Your~~ The information must fit within the space provided.)

Rev. Form [U-505 \(03/2002/06/2003\)](#)

LASTNAME, FIRSTNAME : 1111111

SSN # : 111-11-1111

FIRM NAME : 1

Reference #: 3184614888606412

U5 - Customer Complaint/Arbitration/Civil Litigation DRP

This Disclosure Reporting Page is an **INITIAL OR AMENDED** response to report details for affirmative responses to **Questions 7(E)(1), 7(E)(2) and 7(E)(3)** on Form **U-505**;

Check question(s) being responded to:

Customer Complaint/Arbitration/Civil Litigation

? 7(E)(1)(a) ? 7(E)(1)(b) ? 7(E)(1)(c) ? 7(E)(2) ? 7(E)(3)(a) ? 7(E)(3)(b)

One event may result in more than one affirmative answer to the above items. Use only one DRP to report details related to one customer complaint/arbitration/civil litigation. Use a separate DRP for each customer complaint/arbitration/civil litigation.

DRP Instructions:

- In all matters (i.e., customer complaints, arbitrations/CFTC reparations, civil litigations), complete items 1-6.
- If the matter involves only a customer complaint, also complete items 7-12, as appropriate.
- If the customer complaint has evolved into an arbitration/CFTC reparation or civil litigation, amend the existing DRP by completing items 9 and 10.
- If the matter involves an arbitration or CFTC reparation, complete items 13-19, as appropriate.
- If the matter involves a civil litigation, complete items 20-27.
- Item 28 is an optional field and applies to all event types (i.e., customer complaint, arbitration/CFTC reparation/civil litigation).

Complete items 1-6 for all events.-

1. Customer Name(s):

2. Customer(s) State of Residence:

 Other state(s) of residence/detail:

3. Employing Firm when activities occurred which led to the complaint:

4. Allegation(s) and a brief summary of events related to the allegation(s) including dates when activities leading to the allegation(s) occurred:
Date Complaint was received (MM/DD/YYYY):-

? Exact? Explanation
If not exact, provide explanation:-

5. Principal Product Type:

Other Product Types:

	<p><u>Allegation(s) and a brief summary of events related to the allegation(s) including dates when activities leading to the allegation(s) occurred:-</u></p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
6.	<p><u>Alleged Compensatory Damage Amount:</u> _____ \$</p> <p><u>Principal Product Type:-</u></p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <p>Other Product Types:</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
7.	<p><u>If the matter involves only a customer complaint, complete items 7-12, as appropriate.</u></p> <div style="border: 1px solid black; width: 100%; height: 20px; text-align: center;">\$</div> <p><u>Date customer complaint was received (MM/DD/YYYY):</u></p> <p style="margin-left: 40px;"><u>Exact</u> <u>Explanation</u></p> <p><u>If not exact, provide explanation:</u></p> <p><u>Alleged Compensatory Damage Amount:</u></p>
8.	<p>Is <u>the customer</u> complaint pending? ? Yes ? No</p> <p><u>If the customer complaint has evolved into an arbitration/CFTC reparation or civil litigation, amend the existing DRP by completing items 9 and 10.</u></p>
9.	<p>If the <u>customer</u> complaint is not pending, provide status: If status is settlement, complete <u>questions items</u> 11 and 12; If status is arbitration/reparation, complete <u>questions items</u> 13-19; If status is litigation, complete <u>questions items</u> 20-27. <u>Complete question 28 for all statuses.</u></p> <p>? No Action ? Withdrawn ? Denied ? Settled ? Arbitration/Reparation ? Litigation</p>
10.	<p>Status Date (MM/DD/YYYY):</p> <div style="border: 1px solid black; width: 100%; height: 20px;"></div> <p>? Exact ? Explanation</p> <p>If not exact, provide explanation:</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
11.	<p>Settlement Amount (if settled without <u>a</u>Arbitration, <u>L</u>itigation or <u>r</u>epARATION):</p> <div style="border: 1px solid black; width: 100%; height: 20px; text-align: center;">\$</div>
12.	<p>Individual Contribution Amount:</p> <div style="border: 1px solid black; width: 100%; height: 20px; text-align: center;">\$</div>
<p><u>IF ARBITRATION OR CFTC REPARATION</u> <u>If the matter involves an arbitration or CFTC reparation, complete items 13-19, as appropriate.</u></p>	
13.	<p>Arbitration/Reparation claim filed with (NASD, AAA, NYSE, CBOE, CFTC, etc.) and Docket/Case Number:</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
14.	<p>Date notice/process was served (MM/DD/YYYY):</p> <div style="border: 1px solid black; width: 100%; height: 20px;"></div>

	? Exact ? Explanation	If not exact, provide explanation: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
15.	Is <u>the</u> arbitration/reparation pending? ? Yes ? No	
16.	If the arbitration/reparation is not pending, what was the disposition?	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
17.	Disposition Date (MM/DD/YYYY): <div style="border: 1px solid black; height: 20px; width: 100%;"></div> ? Exact ? Explanation	If not exact, provide explanation: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
18.	Amount of Monetary Compensation (award, settlement, reparation amount):	\$ <div style="border: 1px solid black; width: 100px; height: 20px;"></div>
19.	Individual Contribution Amount:	\$ <div style="border: 1px solid black; width: 150px; height: 20px;"></div>
<u>IF CIVIL LITIGATION</u> If the matter involves a civil litigation, complete items 20-27.		
20.	Court that case was filed in (include name of Federal, Military, State or Foreign Court, Location of Court - City or County <u>and</u> State or Country, Docket/Case number). <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	
21.	Date notice/process was served (MM/DD/YYYY): <div style="border: 1px solid black; height: 20px; width: 100%;"></div> ? Exact ? Explanation	If not exact, provide explanation: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
22.	Is the civil litigation pending? ? Yes ? No	
23.	If the civil litigation is not pending, what was the disposition? <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
24.	Disposition Date (MM/DD/YYYY): <div style="border: 1px solid black; height: 20px; width: 100%;"></div> ? Exact ? Explanation	If not exact, provide explanation: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
25.	Amount of Monetary Compensation (judgment, restitution, settlement amount):	\$ <div style="border: 1px solid black; width: 100px; height: 20px;"></div>
26.	Individual Contribution Amount:	\$ <div style="border: 1px solid black; width: 150px; height: 20px;"></div>
27.	If the action is currently on appeal enter date appeal filed (MM/DD/YYYY):	

	<input type="checkbox"/> ? Exact ? Explanation
If not exact, provide explanation: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	
28. Comment (Optional). You may use this field to provide a brief summary of the circumstances leading to the customer complaint, arbitration/CFTC reparation and/or civil litigation as well as the current status or final disposition(s). details as to dispositions, including any limits or conditions. (The <u>Your</u> information must fit within the space provided.) <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	

Rev. Form U-5U5 (03/2002/06/2003)	
LASTNAME, FIRSTNAME : 1111111	SSN # : 111-11-1111
FIRM NAME : 1	Reference #: 3184614888606412
U5 - Regulatory Action DRP	

This Disclosure Reporting Page is an **INITIAL OR AMENDED** response to report details for affirmative response to **Question 7(D)** on Form [U-5U5](#);

Check question being responded to:

**Regulatory Action
? 7(D)**

One event may result in more than one affirmative answer to the above item. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

1. Regulatory Action initiated by:
? SEC ? Other Federal State ? SRO ? Foreign Federal Banking Agency National Credit Union Administration
 (Full name of regulator, *foreign financial regulatory authority*, Federal, State, SRO, commodities exchange, or National Credit Union Administration)

2. Principal Sanction:

Other Sanctions:

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

? Exact ? Explanation
 If not exact, provide explanation:

[Empty box]

4. Docket/Case Number:

[Empty box]

5. Employing *Firm* when activity occurred which led to the regulatory action:

[Empty box]

6. Principal Product Type:

[Empty box]

Other Product Types:

[Empty box]

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

[Empty box]

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:

[Empty box]

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

10. How was matter resolved:

[Empty box]

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

[Empty box]

? **Exact ? Explanation**

If not exact, provide explanation:

[Empty box]

12. Resolution Detail:

A. Were any of the following **S**sanctions **O**ordered? (Check all appropriate items):

? **Monetary/Fine**

Amount: \$

[Empty box]

? **Revocation/Expulsion/Denial**

? **Disgorgement/Restitution**

? **Censure**

? **Cease and Desist/Injunction**

? **Bar**

? **Suspension**

B. Other **S**sanctions **O**ordered:

[Empty box]

C. Sanction detail: if suspended, *enjoined* or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by 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 disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against the individual, date paid and if any portion of penalty was waived:

13. Comment (Optional). You may use this field to provide a brief summary of the circumstances leading to the action as well as the current details related to the action status and (or) disposition and/or finding(s). ~~include relevant terms, conditions and dates.~~ (The Your information must fit within the space provided.)

U5 – Termination DRP

This Disclosure Reporting Page is an O Initial or O Amended response to report details for affirmative response to Question 7F on Form U5:

Check question(s) you are responding to:

Termination

7F(1) 7F(2) 7F(3)

One event may result in more than one affirmative answer to the above items. Use only one DRP to report details related to the same termination. Use a separate DRP for each termination reported.

1. Firm Name

2. Termination Type

3. Termination Date (MM/DD/YYYY)

 Exact Explanation

 If not exact, provide explanation:

4. Allegation(s):

5. Principal Product Type:

Other Product Types:

6. Comment (Optional). You may use this field to provide a brief summary of the circumstances leading to the termination. Your information must fit within the space provided.