

FINANCIAL INSURANCE PREMIUM INDICATION FORM

Name of Firm: _____

Name of Contact: _____ Email: _____

Mailing Address: _____

Phone Number: _____ Website: _____

Number of Advisors: _____ Total Number of Employees (Including Advisors): _____

Please list any professional designations (required for discounts): _____

| Custodians Used (Check All That Apply) | | | |
|--|-----------------------------------|-----------------------------------|--|
| <input type="checkbox"/> Schwab | <input type="checkbox"/> Fidelity | <input type="checkbox"/> Pershing | <input type="checkbox"/> Other (List): |

| Assets Under Management | |
|-------------------------|----|
| Discretionary | \$ |
| Non-Discretionary | \$ |

| Revenue (Dollars) | % Fee only Revenue | % Commission Revenues |
|-------------------|--------------------|-----------------------|
| \$ | | |

| Professional Services by Percentage (must equal 100%) | | | |
|--|---|--|---|
| Nature of Practice | % | Nature of Practice | % |
| Asset Monitoring (No LPOA to direct trades) | | Discretionary Asset Management – Individual (LPOA) | |
| Discretionary Asset Management – ERISA (LPOA) | | Investment Management Consulting (No LPOA) | |
| Non-Discretionary Asset Management (LPOA with prior consent) | | Third Party Pension Administration (not claims) | |
| Hourly Advice | | Timing Services | |
| Modular/Comprehensive Financial Plan Preparation/Advice | | Product Sales Not Based on Financial Plan | |
| Product Sales Based on Financial Plan | | Tax Preparation | |
| Referral to Third Party Managers | | Accounting Services Other Than Tax Prep | |
| Wrap Accounts | | Other (Describe): | |

SEC or regulatory exam within the past 24 months? Yes No (If yes, provide details on a separate page)

Use Alternative Investments? Yes No (If yes, provide details on a separate page)

Been the subject of a claim in the past 5 years? Yes No (If yes, provide details on a separate page)

| Provide the percentage of total assets you advise in each of the following categories (must equal 100%) | | | |
|--|---|---|--|
| % | Classes and Types of Assets Managed and Assets Advises | % | Classes and Types of Assets Managed and Assets Advises |
| | Mutual Funds (all investment styles) | | Foreign Securities (traded 100% outside the US) |
| | Cash | | Certificates of Deposit |
| | Closed-End Investment Companies | | Unit Investment Trusts (UIT) |
| | Variable Annuities | | Unlisted Stocks |
| | Investment Grade Bonds | | Unregistered Securities |
| | Listed Stocks | | Index Linked Securities |
| | Exchange Traded Funds (excluding leveraged and inverse) | | Junk Bonds / Below Investment Grade |
| | Leverage Exchange Trading Funds | | Promissory Notes / Leases / Receivables |
| | Inverse Exchange Traded Funds | | Hedge Funds |
| | Municipal Securities | | Fund of Hedge Funds |
| | Options | | Guaranteed Investment Contracts (GIC) |
| | REITs Publicly Traded | | Collective Investment Trusts / Fund (CIT / CIF) |
| | REITs / REIFs Privately Traded | | Tangibles (gold, silver, collectables, coins, etc.) |
| | Limited Partnerships/General Partnerships or similar Pooled Investment Vehicles | | Asset-Backed Securities, Mortgage- Backed Securities, CMO, CDOs |
| | Exchange Traded Notes (ETN) | | Church Bonds |
| | Other: | | Other Derivatives or Structured Products |

| Current Insurance Information | | | |
|-------------------------------|--|------------|--|
| Effective Date | | Retro Date | |
| Insurance Company | | Limits | |
| Deductible | | Premium | |

Provide a copy of your current in-force policy. If directors and officers liability is requested, we will also need financials and a list of advisors.

Please advise us if you are interested in additional information and/or quotes on the following lines of insurance coverage:

- Fiduciary Liability
- ERISA Fiduciary Fidelity Bond
- Commercial Crime Coverage
- Employment Practices Liability
- Cyber Liability
- Commercial Property and Casualty Insurance

Upon completion, please email this completed form to rachelirwin@uhlagency.com. Thank you.