Firm Na	irm Name:		(1)	(2)	(3)	(4)	(5)	(6)
			Check	Yes (Y)	Dollar (\$)	Number	Percent (%)	
			Box	No (N)	Amount	#	Amount	
	ı				(in millions)	Amount	(one decimal)	Comments
7.01	a.	Company type (choose one):						
		Independent investment advisor *						
		Bank affiliated investment advisor						
		Broker affiliated investment advisor						
		Insurance affiliated investment advisor						
		Holding company subsidiary/affiliate						
		Mutual fund company						
		Other (describe separately in comments section)						
		* Choose only if your firm is not in any way affiliated with banks,						
		brokerage houses, insurance or mutual fund companies, or any other						
		company. Answer in comments section.						
		If you answer is "other", or if your answer needs explanation please						
		provide one in comments section.						
	b. Co	empany Registration						
		Is firm registered under the Investment Advisory Act of 1940 ? (Yor N)						
		Is firm registered with other regulatory agencies ? (Y or N)						
		If you answer "yes", please list the agencies and jurisidictions in comments						_
		section.						
	c.	Ownership type:						

Firm Na	Firm Name:		(1)	(2)	(3)	(4)	(5)	(6)
			Check	Yes (Y)	Dollar (\$)	Number	Percent (%)	
			Box	No (N)	Amount	#	Amount	
					(in millions)	Amount	(one decimal)	Comments
		Publicly owned						
		Employee owned						
		Subsidiary						
		Division						
		Other (please list the legal owners and percentages owned under column 5						
		in comments section)						
	d.	Ownership structure:						
		Corporation						
		Partnership						
		LLC						
		LLP						
		Other (please specify in comment section)						
	e.	Percent employee owned:						
		Number of employee equity owners						
		If firm is subsidiary of a parent organization please provide in comment						
		section the full legal name of that entity:						
		Percent of your firm that is minority-owned						
		Percent of your firm that is female-owned						
7.02		Litigation or legal proceedings:						
	a.	Over the past five (5) years has your organization or any officer or principal						

Firm Na	Firm Name:		(1)	(2)	(3)	(4)	(5)	(6)
			Check	Yes (Y)	Dollar (\$)	Number	Percent (%)	
			Box	No (N)	Amount	#	Amount	
	1				(in millions)	Amount	(one decimal)	Comments
		been involved in any business litigation or other legal proceedings related to						
		your investment activities? (Y or N) If yes, provide a brief explanation and						
		indicate current status in comments section.						
	b.	Is there any past, current or pending litigation against your firm (including						
		parent company) or any of its principals? (Y or N) If yes, provide brief						
		explanation in comments section.						
	c.	Are there any past, current or pending regulatory issues/findings against						
		your firm (including parent company) or any of its principals? (Y or N)						
		(include any and all fines in the comment section)						
	d.	Have any of your firm's professionals who have CFA designation ever						
		been disciplined by the CFAI ? (Y or N)						
		If answer yes to any of the above please provide a detailed explanation in the						
		comments section.						
7.03		Total Assets Under Management						
	a.	Breakdown by total assets and accounts currently under management by client						
		type in millions as of 12/31/18						
		Corporate- total assets and # of clients						

Firm Na	Firm Name:		(1)	(2)	(3)	(4)	(5)	(6)
			Check	Yes (Y)	Dollar (\$)	Number	Percent (%)	
			Box	No (N)	Amount	#	Amount	
					(in millions)	Amount	(one decimal)	Comments
		Public- total assets and # of clients						
		Endowment/foundation- total assets and # of clients						
		High net-worth/retail- total assets and # of clients						
		Non-US clients- total assets and # of clients						
		Other (please specify in comment section)						
		Total			\$ -	0		
		For firms listed above, please include total dollars and number of non-profit						
		clients.						
	b.	Breakdown by type of investment vehicle with benchmarks used in assets						
		Total separately managed assets and # of clients						
		Total commingled assets and # of clients*						
		*include all mutual funds, group trusts, limited partnerships and other						
		commingled						
		All other assets and # of clients**						
		** describe assets in comment section (i.e. subadvisory, etc.)						
		Total			\$ -	0		
7.04		Firm staffing						
	a.	Provide a breakdown of your firm wide staff into the following categories.						
		Investment Staff						

Firm Na	Firm Name:		(1)	(2)	(3)	(4)	(5)	(6)
			Check	Yes (Y)	Dollar (\$)	Number	Percent (%)	•
			Вох	No (N)	Amount	#	Amount	
					(in millions)	Amount	(one decimal)	Comments
		Portfolio manager						
		Economists						
		Analysts						
		Traders						
		Other professionals						
		Total Investment Staff				0		
		Non-Investment Staff						
		Administration						
		Marketing/client services						
		Legal						
		Systems						
		Other staff						
		Total Non-Investment staff				0		
		Grand total of staff				0		
7.05		Investment Performance			Asset Value			
	a.	Total Assets Under Management (Gross of Fees)			in Millions		% Return	
		1 Year for 2018						
		3 Years for 2016- 2018						
		5 Years from 2014-2018						

Firm Name:	m Name:		(2)	(3)	(4)	(5)	(6)
		Check	Yes (Y)	Dollar (\$)	Number	Percent (%)	
		Вох	No (N)	Amount	#	Amount	
				(in millions)	Amount	(one decimal)	Comments
	10 Years from 2009-2018						
b.	Total Assets Under Management (Net of Fees)						
	1 Year for 2018						
	3 Years for 2016- 2018						
	5 Years from 2014-2018						
	10 Years from 2009-2018						
c.	Equities Under Managment (Gross of Fees)						
	1 Year for 2018						
	3 Years for 2016- 2018						
	5 Years from 2014-2018						
	10 Years from 2009-2018						
d.	Fixed Income Under Managment (Gross of Fees)						
	1 Year for 2018						
	3 Years for 2016- 2018						
	5 Years from 2014-2018						
	10 Years from 2009-2018						
e.	Money Market Under Management (Gross of Fees)						
	1 Year for 2018						
	3 Years for 2016- 2018						

Firm Name	Firm Name:		(2)	(3)	(4)	(5)	(6)
		Check	Yes (Y)	Dollar (\$)	Number	Percent (%)	
		Box	No (N)	Amount	#	Amount	
				(in millions)	Amount	(one decimal)	Comments
	5 Years from 2014-2018						
	10 Years from 2009-2018						
7.06	Reporting						
	List of Sample reports provided*						
	* List frequency and purpose of of report in comment section						
	Please provide samples as part of submission.						
7.07	Audited Financial Statements *						
	Year Ending 2018 (in Millions)			In Millions			
	Total Assets						
	Total Liabilities						
	Total Retained Earnings						
	Total Revenues						
	Total Expense Before Taxes						
	Total Taxes						

rm Name:		(2)	(3)	(4)	(5)	(6)
	Check	Yes (Y)	Dollar (\$)	Number	Percent (%)	
	Box	No (N)	Amount	#	Amount	
			(in millions)	Amount	(one decimal)	Comments
Net Profit						
Year Ending 2017 (in Millions)						
Total Assets						
Total Liabilities						
Total Retained Earnings						
Total Revenues						
Total Expense Before Taxes						
Total Taxes						
Net Profit						
Year Ending 2016 (in Millions)						
Total Assets						
Total Liabilities						
Total Retained Earnings						
Total Revenues						
Total Expense Before Taxes						
Total Taxes						
Net Profit						
*Please provide audited statements as part of submission.						

Firm Name	Firm Name:		(2)	(3)	(4)	(5)	(6)
		Check	Yes (Y)	Dollar (\$)	Number	Percent (%)	
		Box	No (N)	Amount (in millions)	# Amount	Amount (one decimal)	Comments
7.08	ADV Filings						
	Eligible to file ADV (Y or N)						
	Date filed (list date filed in comment section)						
7.09	Insurance Information						
	*Please identify types of insurance, coverages, deductibles						
	and other relevant information in comment section. Please						
	expand this section as necessary.						
7.10	Non Brafit comovience						
7.10	Non-Profit experience Percent of clients that are Non-Profit						
	Percent of firm assets that are for non-profits						
	i ereene of firm assets that are for non-profits			In Millions			
	Aggregate value of non-profit assets under firm management						
7.11	Fee Schedule						

Firm Na	Firm Name:		(1)	(2)	(3)	(4)	(5)	(6)
			Check	Yes (Y)	Dollar (\$)	Number	Percent (%)	
				No (N)	Amount	#	Amount	
					(in millions)	Amount	(one decimal)	Comments
		Calculation for total fees assuming \$15.9 M portfolio			In full \$ Value			
		Calculation of fee (Basis Points) *						
		* Explain methodolgy for calculation in comment section						