

CLIENT PROFILE FORM



200 Brush Run Road
Greensburg, PA 15601

- Trustmont Financial Group Trustmont Advisory Group
 Update Address Updated Profile 36-Month Update Update (Other)

MEMBER: FINRA/SIPC
 www.trustmontgroup.com
 Telephone: 724-468-5665
 Toll-Free: 800-618-3666
 Fax: 724-468-5675

The following information is required by FINRA. All spaces must be completed.

Account Registration (ex. John and Jane Smith) <input type="checkbox"/> Check if new account	
<input type="checkbox"/> Individual <input type="checkbox"/> 529 Plan <input type="checkbox"/> Custodial/UGMA/UTMA (Provide custodian and minor information) <input type="checkbox"/> If Other (please specify)	
<input type="checkbox"/> Joint Tenants <input type="checkbox"/> Partnership Retirement Type Please Choose _____ <input type="checkbox"/> Trust <input type="checkbox"/> Estate <input type="checkbox"/> Other	
<input type="checkbox"/> Corporation <input type="checkbox"/> Retirement _____	
Primary Owner First Name (Entity, Trust, Estate)	M.I.
Last Name	
Legal Address (No POBox)	
City	State Zip
Mailing Address (if different than legal)	
City	State Zip
Home Telephone	Cell Telephone
Social Security/ Tax ID #	Birth Date
Drivers License / State ID / Passport #	
State/Country Issued	Expiration Date
Citizenship	Email Address
Employer	Business Nature
Business Address	
Occupation	
Marginal Tax Bracket Owner Please choose one	Number of Dependents including self
Annual Income (all sources)	
<input type="radio"/> Less than \$50,000 <input type="radio"/> \$400,000 - \$499,999 <input type="radio"/> \$50,000 - \$99,999 <input type="radio"/> \$500,000 - \$749,999 <input type="radio"/> \$100,000 - \$199,999 <input type="radio"/> \$750,000 - \$999,999 <input type="radio"/> \$200,000 - \$299,999 <input type="radio"/> \$1,000,000 + <input type="radio"/> \$300,000 - \$399,999	
Total Net Worth-excluding primary residence (combined if joint account)	
<input type="radio"/> Less than \$100,000 <input type="radio"/> \$250,000- \$499,999 <input type="radio"/> \$1,000,000- \$2,999,999 <input type="radio"/> \$100,000 - \$249,999 <input type="radio"/> \$500,000-\$999,999 <input type="radio"/> \$3,000,000 +	
Liquid Net Worth (Combined if joint account)	
<input type="radio"/> Less than \$100,000 <input type="radio"/> \$250,000- \$499,999 <input type="radio"/> \$1,000,000- \$2,999,999 <input type="radio"/> \$100,000 - \$249,999 <input type="radio"/> \$500,000-\$999,999 <input type="radio"/> \$3,000,000 +	
Investment Objective (choose one)	
<input type="checkbox"/> Preservation of Principal / Income -Focus is on preserving principal and generating current income. <input type="checkbox"/> Balanced Growth - Focus is on generating current income and/or long-term capital growth.	
<input type="checkbox"/> Growth - Focus is on generating long - term capital growth. <input type="checkbox"/> Aggressive Growth / Aggressive Income - Focus is on generating growth and/or income at greater than market rates. <input type="checkbox"/> Speculation - Focus is on generating maximum possible returns	
Risk Tolerance Please indicate your risk tolerance specific to the investments in this account.	
<input type="checkbox"/> I am willing to accept MINIMAL RISK , even if that means my investment does not generate significant income or returns and may not keep pace with inflation. <input type="checkbox"/> I am willing to accept LOW RISK , including low volatility, and understand I could lose a modest amount of my investment. <input type="checkbox"/> I am willing to accept MODERATE RISK , including some volatility, to seek higher returns and understand I could lose a portion of my investment. <input type="checkbox"/> I am willing to accept HIGH RISK , including high volatility, and understand I could lose a substantial amount of my investment. <input type="checkbox"/> I am willing to accept MAXIMUM RISK and understand I could lose all of my investment.	



Liquidity Needs

On an annual basis, what are your expected withdrawal needs from this account?

- Less than \$1000
- \$1,000 to \$9,999
- \$10,000 to \$49,999
- \$50,000 to \$99,999
- \$100,000 to \$249,999
- \$250,000 +

Investment Time Horizon

When do you expect to cease accumulating assets in this account, and begin withdrawing significantly from the principal?

- Less than 1 year
- 1 to 3 years
- 4 to 6 years
- 7 to 8 years
- 9 to 11 years
- 12 years or more

Investment Experience

Please check the products/strategies that best reflect your investment experience to date.

- Bonds
- Stocks
- Mutual Funds
- Annuities
- Margin
- Futures
- Options
- Active Short Term Trading
- Exchange Traded Funds
- Inverse/Leveraged Products
- Alternative Investments
- None

Affiliations and Acknowledgments

Please check all that apply.

- Associated Person of Trustmont
- Associated person of another FINRA member

TRUSTED CONTACT:

A trusted contact person is intended to be a resource in protecting your assets and responding to possible financial exploitation. A trusted contact is NOT an authorized party on the account, and no instructions from them will be accepted to effect transactions and/or change information related to the account. Your trusted contact must be someone other than an account owner, and cannot be the Registered Representative. A trusted contact may be contacted if: Trustmont has questions or concerns about your whereabouts or health status; Trustmont suspects that you may be the victim of fraud or financial exploitation; Trustmont suspects that you may no longer be able to handle your financial affairs; Trustmont needs to confirm the identity of any legal guardian, executor, trustee, authorized trader, or holder of a power of attorney; or, Trustmont has any other concerns or is unable to contact you. You may provide more than one trusted contact person by completing and signing additional Trusted Contact sections of this form.

First Name: _____ Last Name: _____

Address: _____ Apt/Suite No: _____

City: _____ State: _____ Zip: _____ Country: _____ Phone Number: _____

Relationship to the Primary Owner/Co-Owner: _____

Client declines to provide a Trusted Contact

ELECTRONIC COMMUNICATIONS AUTHORIZATION:

By providing an email address below you are consenting to electronic delivery of all Trustmont disclosure requirements.

Email address we should use for notification: _____

PRE-DISPUTE ARBITRATION AGREEMENT:

PLEASE READ THE FOLLOWING CUSTOMER AGREEMENT BEFORE SIGNING YOUR NAME.

This agreement contains a pre-dispute arbitration clause. By signing an arbitration agreement, the parties agree as follows:

- (A) all parties to this agreement are giving up the right to sue each other in court, including the right to a trial by jury, except as provided by the rules of the arbitration forum in which a claim is filed.
- (B) Arbitration awards are generally final and binding; a party's ability to have a court reverse or modify an arbitration award is very limited.
- (C) The ability of the parties to obtain documents, witness statements and other discovery is generally more limited in arbitration than in court proceedings.
- (D) The arbitrators do not have to explain the reason(s) for their award unless, in an eligible case, a joint request for an explained decision has been submitted by all parties to the panel at least 20 days prior to the first scheduled hearing date.
- (E) The Panel of Arbitrators will typically include a minority of arbitrators who were or are affiliated with the securities industry.
- (F) The rules of some arbitration forums may impose time limits for bringing a claim in arbitration. In some cases, a claim that is ineligible for arbitration may be brought in court.
- (G) The rules of the arbitration forum in which the claim is filed, and any amendments thereto, shall be incorporated into this agreement.

I agree that all controversies that may arise between us concerning any order or transaction, or the continuation, performance or breach of this or any other agreement between us, whether entered into before on, or after the date this account is opened, shall be determined by arbitration before a panel of independent arbitrators set up by the Financial Industry Regulatory Authority (FINRA). If I do not notify you in writing within five (5) days after I receive from you a written demand for arbitration, then I authorize you to make such a designation on my behalf. I understand that judgment upon any arbitration award may be entered in any court of competent jurisdiction.

No person shall bring a putative or certified class action to arbitration, nor seek to enforce any pre-dispute arbitration agreement against any person who has initiated in court a putative class action; who is a member of a putative class who has not opted out of the class with respect to any claims encompassed by the putative class action until:

- (i) The class certification is denied;
- (ii) The class is decertified; or
- (iii) The customer is excluded from the class by the court.

Such forbearance to enforce an agreement to arbitrate shall not constitute a waiver of any rights under this agreement except to the extent stated herein.

I/We acknowledge that all personal and suitability information provided herein is true and accurate. I/we agree to report promptly, **in writing**, any inaccuracy or discrepancy in our account or change in our personal information contained in the new account form to Trustmont. I/WE HAVE CAREFULLY READ THE CUSTOMER AGREEMENT IMBEDDED INTO THIS FORM AND AGREE TO ALL THE TERMS AND CONDITIONS CONTAINED THEREIN. Evidenced by the signatures below.

Account Owner's Signature _____ Date _____

Co-Owner's Signature _____ Date _____

Signature of Registered Representative _____ REP # _____ Date _____

Signature of Principal _____ Date _____



This page must be submitted with page one--it cannot be accepted without the first page.
Client(s) listed on this page MUST have relevant information on page one (except beneficiary of 529 Plan).

Registration # 2 Trustmont Financial Group Trustmont Advisory Group

Account Registration (ex. John and Jane Smith) Check if new account

Individual 529 Plan Custodial/UGMA/UTMA (Provide custodian and minor information) Other (please specify)
 Joint Tenants Partnership Retirement Type Please Choose Trust
 Corporation Retirement Estate

Investment Objective (choose one)

Preservation of Principal / Income - Focus is on preserving principal and generating current income.
 Aggressive Growth / Aggressive Income - Focus is on generating growth and/or income at greater than market rates.
 Balanced Growth - Focus is on generating current income and/or long-term capital growth.
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Risk Tolerance Please indicate your risk tolerance specific to the investments in this account.

I am willing to accept **MINIMAL RISK**, even if that means my investment does not generate significant income or returns and may not keep pace with inflation.
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 \$10,000 to \$49,999 \$250,000 +

Investment Time Horizon

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Less than 1 year 7 to 8 years
 1 to 3 years 9 to 11 years
 4 to 6 years 12 years or more

Registration # 3 Trustmont Financial Group Trustmont Advisory Group

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Account Owner's Signature _____ Date _____

Co-Owner's Signature _____ Date _____

Signature of Registered Representative _____ REP # _____ Date _____

Signature of Principal _____ Date _____