



Home Office:
110 E. Iron Ave., Salina, KS 67401
Phone: (785) 825-5050 Fax-(785) 823-9207
www.FirstAssetFinancial.com

About this Application

The USA Patriot Act passed by the Congress of the United States in 2001 requires all financial institutions to obtain, verify & record information that identifies each person who opens an account. The Financial Industry Regulatory Authority and the U.S. Securities & Exchange Commission require additional information regarding applicants as well. This Account Application & Agreement records that information. Please read it carefully, as you will provide information to assist in making investment decisions and agree to certain provisions that will govern our relationship. When we accept it, this Application and all accompanying or supplemental documents form the entire Agreement between us for this account.

Unless otherwise indicated in this Application, the words "I," "we," "you," "your," "me/us," mean the applicant(s). The words "us" or "our" mean *First Asset Financial Inc.*, 110 E. Iron Ave, Salina, KS 67401 plus our branches, subsidiaries and affiliates.

Getting Started

Please fill out and sign this Application, along with any required supplemental forms identified through this application process. In order to complete this Application, you will need some or all of the following information:

- Identification Information (a picture ID, usually a driver's license)
- Social Security Number
- Approximate Federal tax rate
- Information about your annual income, readily available assets and net worth

Please remember to notify us if you experience a significant life change, such as the birth of a child, marriage, divorce, death of a spouse, loss of a job, change in financial situation, etc.

① Disclosures

PRIVACY NOTICE: The Gramm-Leach-Bliley Financial Services Modernization Act that was enacted in 2000 requires financial institutions to disclose their policy for collecting and sharing customer's nonpublic, personal information. First Asset Financial Inc. (FAF) does not disclose, nor do we wish to reserve the right to disclose non-public information to non-affiliated parties, except to non-affiliates in any transfer of account or proposed transfer of account process at FAF's discretion. Categories of non-public information include account information (on pages 3 & 4), investment information and any other non-public personal information that is not required in the normal course of business. FAF also takes steps to protect the confidentiality of the information and does not allow unauthorized persons access to non-public information.

Account Protection: Customer accounts maintained with FAF or its Clearing Broker are covered by SIPC protection up to \$500,000 (cash claims are limited to \$100,000). The SIPC brochure may be obtained by contacting SIPC at 202-371-8300 or at their web site www.sipc.org. Note that SIPC is limited to replacing securities that may disappear in bankruptcy of either firm, but do not protect the account from decline in value of securities held. The assets in the signatory's brokerage account are not insured by the FDIC, are not bank deposits and may lose value.

Do Not Call List: Even though my/our name(s) may appear on a state or federal "Do Not Call" list, my/our signature(s)/initials indicated permission for any representative of FAF to call me/us on any numbers listed on this form without regard to such list. My/Our relationship is of a nature that I/we desire to be called.

Fees: If you are establishing a brokerage account, fees charged for various services (such as research, administrative, et.) may exceed or be different than the fees listed on the Hilltop Securities Inc. Customer Information Brochure.

Other Provisions: The signatory of this document is of legal age. This agreement shall continue to the benefit of your successors and assigns, and shall be binding on the customer, his heirs, executors, administrators and assigns, and shall be governed by the laws of the State of Kansas.

You may access information about your Registered Representative at: <http://www.finra.org/Investors/ToolsCalculators/Brokercheck/>

Joint Accounts: If this is a joint account, unless we notify you otherwise and provide such documentation as you require, the brokerage account(s) or other account(s) shall be held by us jointly with rights of survivorship (payable to either or the survivor of us), each joint tenant irrevocably appoints the other as the attorney-in-fact to take all action on his or her behalf and to represent him or her in all respects in connection with this Agreement in all matters regarding the account.

First Asset's Privacy Notice, Business Continuation Plan (BCP), and other information can be found on our website under "Important Information" at: www.firstassetfinancial.com

(also recommended is: <http://www.sec.gov/answers/bd-persinfo.htm>)

AGREEMENT TO ARBITRATE ALL CONTROVERSIES:

It is agreed that any controversy between us arising out of your business or this agreement shall be submitted to arbitration conducted before the Financial Industry Regulatory Authority, Inc. and in accordance with its rules or American Arbitration Association, if mutually agreed upon.

Arbitration must be commenced by service upon the other party of a written demand for arbitration or a written notice of intention to arbitrate. This agreement contains a predispute 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.
- (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.
- (H) 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; or who is 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; or (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.

Any action brought under laws, regulations or statutes other than securities laws, regulations or statutes (e.g. statute of limitation, consumer protection statutes, etc.) shall be brought before a AAA arbitrator/panel or another agreed upon third party arbitrator.

② For MUTUAL FUND INVESTMENTS ONLY ----- Customer Representations & Info.

If applicable, in purchasing mutual funds, either now or in the future, I/we:

- ◆ State that the objectives of the investment applied for are in strict accordance with my/our own investment objectives for this portion of my/our portfolio.
- ◆ Further understand the value of my/our investment will fluctuate and, upon sale, less may be received than was paid for the investment. Dividend and interest payments may fluctuate and are not guaranteed by First Asset Financial Inc. (FAF).
- ◆ Understand that neither FAF nor the representative guarantees my/our account against loss, nor do they make any guarantee that the investment objectives will be met. The investment is NOT FDIC insured.
- ◆ Agree that any applicable sales charge or fees have been explained to my/our satisfaction. I/We understand that, should I/we qualify, mutual fund sales charges may be reduced through use of a letter of intent or rights of accumulation on Class A shares.
- ◆ Have fully disclosed my/our financial circumstances, risk tolerance and investment objectives to my/our FAF representative in connection with this investment and will contact the representative of any changes in investment objectives or circumstances in the future.
- ◆ If purchasing class B or C shares, I/we understand a contingent deferred sales charge may be applicable.

Check or Initial One Box

- ◆ **If purchasing mutual funds now or in the future, I/we expect to receive the prospectus:**
 - From Hilltop Securities Inc. (HTS) in the case of "wire" orders that have been/will be placed through my/our account. I/we will notify First Asset within one week if it does not arrive so that my representative can provide a copy to me/us.
 - From the mutual fund issuer, if we are using a paper application sent direct to the fund. In case of the prospectus not being delivered at or prior to the confirmation showing the investment, I/we will notify FAF in 5 days or will call to cancel.
 - Directly from the representative.

At this time it is my/our intention to remain in this fund family for: (check one)

- 2 years or less 3-6 years 7-10 years longer than 10 years

If you are purchasing mutual funds at this time or plan to do so in the future, please affirm your agreement and understanding of the above with *your initials* here>

Account Holder:	CO-Account Hldr.
X _____	X _____



FIRST ASSET FINANCIAL Member SIPC

Account Application & Agreement

Rep's Printed Last Name:

Home Office: 110 E. Iron Ave., Salina, KS 67401 Phone: (785) 825-5050 www.FirstAssetFinancial.com

Account Registration Type: (check only one--separate app. required for each registration)

Registration type checkboxes: Individual, IRA, Simple IRA, Trust, Custodian for Minor, Tenants in Common, SEP, Partnership, Joint Tenants with Rights of Survivorship, Corporation, Other

*Additional documents are required

Acct. Info.(optional):

Account Owner: Complete All Information Below for the Primary Account Owner (or Minor)

Primary Account Owner form fields: Name, Home Street Address, Mailing Address, Are you: Single/Married/Domestic Partner/Divorced/Widowed, Number of Dependents, Home/Cell/Business Phone Number, Email Address, Driver's License Number, Expiration, Issued by, Please specify if you are: Employed/Self-Employed/Unemployed/Retired/Homemaker/Student, Source of income, Employer Name, Occupation and/or Title, Employer Street Address, City, State, Zip Code, U.S. CITIZEN/Resident Alien/Non U.S. Resident Alien

Joint Account Owner: Complete All Information Below for the Joint Account Owner or Custodian

Joint Account Owner form fields: Name, Social Security Number, Date of Birth, Use the same contact information listed for the primary account holder, Home Street Address, City, State, Zip Code, Home/Cell/Business Phone Number, Email Address, Driver's License Number, Expiration, Issued by, Please specify if you are: Employed/Self-Employed/Unemployed/Retired/Homemaker/Student, Source of income, Employer Name, Occupation and/or Title, Employer Street Address, City, State, Zip Code, U.S. CITIZEN/Resident Alien/Non U.S. Resident Alien, Check here if you, your co-account holder, spouse, parents, children, or in-laws are licensed or employed by a registered broker/dealer, Check here if you, your co-account holder, spouse, parents, children, siblings or in-laws are a director, 10% shareholder or policy-making officer of a publicly traded company, Check here if you, your co-account holder, spouse, parents, children, or in-laws, siblings or any business associate is a senior political figure (SPF)

Household Financial Background - Please tell us your best estimate as to:

Household Financial Background table with columns: Your Combined Annual Income, Your Total Net Worth, Your Liquid Net Worth, Expected Time You Plan to Invest to Achieve Your Financial Goals, Your Estimated Tax Rate, Your Combined Annual Expenses, Your Anticipated Expenses, Descriptions

Timeframe for special expenses: N/A, Within 2 yrs, 3-5 yrs, 6+ yrs

Descriptions: 1Annual Income includes income from sources such as employment, alimony, social security, investment income, receipt of interest, etc. 2Net Worth is the value of your assets minus your liabilities. Do not include your primary residence among your assets or the mortgage as a liability. 3Liquid Net Worth includes those assets which can be converted quickly & easily into cash, such as stocks, bonds, mutual funds, bank accounts, etc. Do not count retirement accounts unless you access to them. 4Annual Expenses might include mortgage payments, rent, long-term debts, utilities, alimony or child support payments, etc. 5Anticipated Expenses might include a home purchase, remodeling a home, a car purchase, education, medical expenses, etc.

Your investments placed through First Asset Financial and/or its clearing firm will be:	Other than pulling out income, how long can you leave your funds invested?	Do you have mutual funds held elsewhere? (helpful in obtaining "break points" on mutual fund investments--this section is optional)	Investment Objectives Include (Rank 1 for first choice and 2 for second choice)	Please check the box that best describes your investment experience in the areas below:																		
<input type="checkbox"/> Less than 1/3 of my investable portfolio <input type="checkbox"/> 1/3 to 2/3 of my investable portfolio <input type="checkbox"/> More than 2/3 of my investable portfolio	<input type="checkbox"/> Under 3 years <input type="checkbox"/> 3 – 5 years <input type="checkbox"/> 6 – 10 years <input type="checkbox"/> 11 – 20 years <input type="checkbox"/> Over 20 years	<input type="checkbox"/> Yes <input type="checkbox"/> No What Fund Groups? _____ Approximate Dollar Amount: \$ _____	<input type="checkbox"/> Income <input type="checkbox"/> Growth <input type="checkbox"/> Speculation <input type="checkbox"/> Liquidation	<table border="0"> <tr> <td></td> <td><i>Investment</i></td> <td><i>Years Experience</i></td> </tr> <tr> <td>Mutual Funds</td> <td><input type="checkbox"/> 1-5</td> <td><input type="checkbox"/> 5+</td> </tr> <tr> <td>Individual Stocks</td> <td><input type="checkbox"/> 1-5</td> <td><input type="checkbox"/> 5+</td> </tr> <tr> <td>Bonds</td> <td><input type="checkbox"/> 1-5</td> <td><input type="checkbox"/> 5+</td> </tr> <tr> <td>Options</td> <td><input type="checkbox"/> 1-5</td> <td><input type="checkbox"/> 5+</td> </tr> <tr> <td>401(K) at work</td> <td><input type="checkbox"/> 1-5</td> <td><input type="checkbox"/> 5+</td> </tr> </table>		<i>Investment</i>	<i>Years Experience</i>	Mutual Funds	<input type="checkbox"/> 1-5	<input type="checkbox"/> 5+	Individual Stocks	<input type="checkbox"/> 1-5	<input type="checkbox"/> 5+	Bonds	<input type="checkbox"/> 1-5	<input type="checkbox"/> 5+	Options	<input type="checkbox"/> 1-5	<input type="checkbox"/> 5+	401(K) at work	<input type="checkbox"/> 1-5	<input type="checkbox"/> 5+
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⑥ Tell How You Intend to Use This Account & Your Tolerance for Market Fluctuations

Investing involves risk. Different investment products and strategies involve different degrees of risk. The higher the expected returns of a product or strategy, the greater the risk that you could lose some or most of your investment. Investments should be chosen based on your selection(s) below, timeframe, and tolerance for market fluctuations. *Please select the degree of risk you (and any co-account holders, if applicable) are willing to take with the assets in this managed account, in light of the purpose(s) you identified below (mark one choice in the box OR rank only 2 items-for 2 choices placing a "1" in the box for the highest priority and "2" for the next highest for funds in this account):*

- Moderately Conservative.** I am willing to accept lower risk to my initial principal, including low volatility, to seek a modest level of portfolio returns, even if that means this account does not generate significant income or returns and may not keep pace with inflation.
- Moderate.** I am willing to accept some risk to my initial principal and tolerate some volatility to seek higher returns, and understand that I could lose a portion of the money invested.
- Moderately Aggressive.** I am willing to accept high risk to my initial principal, including high volatility, to seek high returns over time, and understand that I could lose a substantial amount of money that is invested.
- Very Aggressive or Speculation.** I am willing to accept maximum risk to my principal to aggressively seek maximum returns, and understand I could lose most, or all, of the money invested.

I plan to use this account for the following: (check all that apply)	Tell Us How You Are Funding This Account: (check all that might)	How Do You Make Your Investment Decisions? (Optional) (check all that apply)
<input type="checkbox"/> Generate income for current (or future) use <input type="checkbox"/> Partially fund my retirement <input type="checkbox"/> Wholly fund my retirement <input type="checkbox"/> Steadily accumulate wealth over the long term <input type="checkbox"/> Preserve wealth & pass it on to my heirs <input type="checkbox"/> Pay for educational expenses <input type="checkbox"/> Market speculation <input type="checkbox"/> Create wealth & pass it on to my heirs <input type="checkbox"/> Trade frequently to try to make profits <input type="checkbox"/> Other:(explain) _____	<input type="checkbox"/> Income from Earnings <input type="checkbox"/> Investments/Transfer from Brokerage Account <input type="checkbox"/> Gift <input type="checkbox"/> Sale of business or real estate <input type="checkbox"/> Inheritance <input type="checkbox"/> Pension/ IRA/ or Retirement Savings <input type="checkbox"/> Spouse/ Parent/ Relative <input type="checkbox"/> Legal/Insurance payout <input type="checkbox"/> Social Security Benefits <input type="checkbox"/> Home equity line of credit/reverse mortgage <input type="checkbox"/> Other: _____	<input type="checkbox"/> I generally make my own decisions and/or consult with my co-applicants(s). <input type="checkbox"/> I consult with my broker, investment advisor, CPA, or other professional source. <input type="checkbox"/> I wish to use a "third party money manager" to manage my accounts. <input type="checkbox"/> I want my broker to make decisions without prior notification to me. (discretionary account) <input type="checkbox"/> I discuss investment decisions with family and/or friends.
Back-Up Contact Information (optional)		

If we are unable to reach you for 60 days or more, you authorize us to contact the person listed below and to disclose information about you in order to obtain the specifics of your contact information, health status, and the identity of any legal guardian, executor, trustee, or holder of a power of attorney. (This section is optional, but could be very important to you at some future time.)

Note: Your back-up contact should not be a co-applicant

First Name _____	Middle Initial _____	Last Name _____	Relationship to Primary Applicant/Co-Applicant _____
Work Phone _____	Home Phone _____	Cell Phone _____	Email Address _____

⑦ Confirmations and Signatures – Please Read Carefully

I understand that the person originating this account **may** offer products, services, or insurance policies NOT offered by nor under the supervision of First Asset Financial Inc. (FAF). Any product sold by this person to you that is **not** registered as a security with the State or Federal Regulators should be construed as **not** being managed through FAF. By signing this Application, you affirm that you have received and read this Application and the supplemental documents, including pages 1 & 2, governing this relationship. I understand that my Representative is considered a fiduciary for any retirement accounts under current DOL regulations. You affirm that the information that you have provided is accurate and you agree to notify us of any changes in the information provided.

Please check as appropriate boxes below (Note: All three boxes must be checked either YES or NO):

- YES NO I agree to hold FAF harmless regarding any issues regarding such non-security products or services referred to above.
- YES NO Tax Withholding Certification: Under penalty of perjury, I certify that: (1) I am a U.S. citizen, U.S. resident alien or other U.S. person, and the Social Security Number or Taxpayer Identification Number provided in this Application is correct; and (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding; or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends; or (c) the IRS has notified me that I am no longer subject to backup withholding.
- YES NO I have received a copy of this Application or will request one immediately after signing.

THIS AGREEMENT CONTAINS A PRE-DISPUTE ARBITRATION CLAUSE. BY SIGNING BELOW, I HAVE READ AND AGREE TO THE CONDITIONS SET FORTH IN THIS PRE-DISPUTE ARBITRATION TERMS ON PAGES 1 AND OTHER CONDITIONS IN THIS AGREEMENT.

X _____	_____	X _____	_____
Signature of Account Owner	Date	Signature of Co-Account Owner	Date
Printed Last Name of Account Owner: _____		Application Reviewed by: _____	

Representative Signature: _____	Principal: _____
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Date	Date