

CLIENT ACCOUNT APPLICATION

For Joint Services Agreement

**GREEN INVESTMENT MANAGEMENT, INC.**500 W. 7th St. Ste. 827, Fort Worth, TX 76102

By completing and signing this application Client/Account Owner(s) is/are establishing Account subject to the terms and conditions in the Green Investment Management ("GIM") Joint Services Agreement Version 3.

1. Account Details

Account Title (name of this account)	Account Number
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2. Account Type (choose one)

Personal	Business / Entity
<input type="checkbox"/> Individual <input type="checkbox"/> Joint Tenants with Rights of Survivorship <input type="checkbox"/> Joint Tenants in Common <input type="checkbox"/> Joint Tenants by Entirely <input type="checkbox"/> Joint Community Property <input type="checkbox"/> Joint Community Property with Rights of Survivorship <input type="checkbox"/> Custodial - UTMA / UGMA <input type="checkbox"/> Guardianship / Conservatorship	<input type="checkbox"/> Trust <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Non-Profit Organization <input type="checkbox"/> Partnership <input type="checkbox"/> Estate <input type="checkbox"/> Qualified Retirement Plan
<input type="checkbox"/> Traditional IRA <input type="checkbox"/> Inherited IRA <input type="checkbox"/> Rollover IRA <input type="checkbox"/> Roth IRA <input type="checkbox"/> Inherited Roth IRA <input type="checkbox"/> SEP IRA <input type="checkbox"/> SIMPLE IRA	

3. Client / Account Owner(s) Information**Complete for Accounts Owned by Entities only - Corporation, Estate, Trust, LLC, Partnership, Etc.**

Entity Name (if applicable)	Entity Tax ID, EIM or SSN	Formation Date
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Primary Account Holder (owner, minor, trustee, executor, etc.)**Additional Account Holder (additional owner, custodian, trustee, etc.)**

First Name	Middle Name	Last Name	First Name	Middle Name	Last Name
Social Security Number		Date of Birth	Social Security Number		Date of Birth
Marital Status			Marital Status		
<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed			<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed		
Gender			Gender		
<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/> M <input type="checkbox"/> F		
Address					
City	State	Zip	City	State	Zip
Mobile Phone		Phone# <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work	Mobile Phone		Phone# <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work
Email (please print)					

Employment	Employment				
<input type="checkbox"/> Employed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Retired <input type="checkbox"/> Homemaker <input type="checkbox"/> Student <input type="checkbox"/> Unemployed	<input type="checkbox"/> Employed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Retired <input type="checkbox"/> Homemaker <input type="checkbox"/> Student <input type="checkbox"/> Unemployed				
Occupation (previous occupation if retired)	Occupation (previous occupation if retired)				
Employer (leave blank if self-employed or retired)	Employer (leave blank if self-employed or retired)				
Employer Address	Employer Address				
City	State	Zip	City	State	Zip



4. Client Suitability Profile

Annual Income (household)		Net Worth (excluding primary home)		Liquid Net Worth (cash, stocks, etc.)	
<input type="checkbox"/> Over \$250,000	<input type="checkbox"/> Over \$3 million	<input type="checkbox"/> Over \$3 million	<input type="checkbox"/> Over \$3 million	<input type="checkbox"/> Over \$3 million	<input type="checkbox"/> Over \$3 million
<input type="checkbox"/> \$100,001 - \$250,000	<input type="checkbox"/> \$1,000,001 - \$3 million	<input type="checkbox"/> \$1,000,001 - \$3 million	<input type="checkbox"/> \$1,000,001 - \$3 million	<input type="checkbox"/> \$1,000,001 - \$3 million	<input type="checkbox"/> \$1,000,001 - \$3 million
<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$500,001 - \$1 million
<input type="checkbox"/> \$25,001 - \$50,000	<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$100,001 - \$500,000
<input type="checkbox"/> \$0 - \$25,000	<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$50,001 - \$100,000
<input type="checkbox"/> \$0 - \$25,000	<input type="checkbox"/> \$0 - \$50,000	<input type="checkbox"/> \$0 - \$50,000	<input type="checkbox"/> \$0 - \$50,000	<input type="checkbox"/> \$0 - \$50,000	<input type="checkbox"/> \$0 - \$50,000
Income Stability	Investment Experience	Investment Horizon (est. holding period)		Risk Tolerance	
<input type="checkbox"/> Rising rapidly	<input type="checkbox"/> Extensive	<input type="checkbox"/> 10 years or more (long-term or retirement)		<input type="checkbox"/> Aggressive	
<input type="checkbox"/> Rising	<input type="checkbox"/> Moderate	<input type="checkbox"/> 6 - 9 years		<input type="checkbox"/> Moderate	
<input type="checkbox"/> Stable	<input type="checkbox"/> Limited	<input type="checkbox"/> 3 - 5 years		<input type="checkbox"/> Conservative	
<input type="checkbox"/> Declining	<input type="checkbox"/> None	<input type="checkbox"/> 1 - 3 years (near term)			
Investment Objective					
<input type="checkbox"/> Aggressive Growth - Seeking aggressive capital appreciation while accepting potentially large market fluctuations and increased risk of loss.					
<input type="checkbox"/> Growth - Seeking capital appreciation with little to no income while accepting considerable market fluctuations and risk of loss.					
<input type="checkbox"/> Income & Growth - Seeking a balance between capital appreciation and current income while accepting moderate fluctuations and risk of loss.					
<input type="checkbox"/> Current Income - Seeking current income with lower volatility and risk of loss.					

5. Advisor Information

Investment Advisor Firm ("Advisor Firm")		
Advisor Firm Address		
City	State	Zip
Investment Advisor Representative ("Advisor")		
Advisor Phone		Advisor Email Address

6. Advisor Firm's Fee

The annual fee below is for non-discretionary investment advisory services provided by Advisor and Advisor Firm listed in Section 5 pursuant to Section 2(V)(B) of the GIM Joint Services Agreement Version 3. The Combined "Management Fee" which includes GIM's Management Fee and the Advisor Firm's Fee should not exceed 3% annually.

Account Assets	
_____	%
_____	%
_____	%
_____	%
_____	%
_____	%
_____	%
_____	%

Account Number

7. Investment Model & Percentages

Select the Model(s) Client and/or Advisor have determined to be the most suitable. Manager will review the selection to determine if choice is appropriate considering financial and risk tolerance as provided in Section 4, Client Suitability Profile. ⁽¹⁾ Please indicate any investment restrictions in Section 8.

Please Note: Some custodians may only allow 1 Model per Account. The minimum balance required per model is \$25,000. No more than 3 Models should be selected per Account. Not all Models are available at all custodians.

% of Portfolio	Model Name
_____	GIM Guardian Models
_____	Fixed Income
_____	Balanced Income 30/70
_____	Balanced Retirement Income
_____	Conservative Balanced 50/50
_____	Balanced 60/40
_____	Balanced Growth 75/25
_____	Balanced Mosaic
_____	Global Stock
_____	Equity Mosaic
_____	Alternatives
_____	Sector
_____	Country
_____	Disruptive Technologies
_____	GIM Tax Aware Models
_____	Tax Free Bond
_____	Tax Aware 50/50
_____	Tax Aware 60/40
_____	Tax Aware 75/25
_____	GIM CRP Income Model
_____	GIM Cash Plus Model
_____	GIM Strategic Models
_____	Strategic Global Balanced
_____	Strategic Global Balanced Tax Aware
_____	Saratoga Capital Management Models
_____	Dynamic Moderate Balanced
_____	Dynamic Aggressive Balanced
_____	Other (with approval) _____
_____	Total (must equal 100%)

⁽¹⁾ If no allocation is chosen, client assets will be placed in cash. Advisor Firm will properly secure Client's permission prior to effecting securities transactions in Client Accounts managed on a non-discretionary basis pursuant to California Code of Regulation, Section 260.237.2(f)(1).

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8. Investment Restrictions

Client may provide Manager with reasonable individual restrictions here. Restrictions are subject to Manager approval.

9. Manager's Fee Adjustment (if applicable)

The annual fee is listed in Section 5 of GIM Joint Services Agreement. Adjustments are subject to Manager approval.

10. Management Fees Payment Method

Management fees will be deducted from Account unless one of the following options is selected:

- Client will pay fees with a check
- Redeem fees from a separate account _____

Note: Fees deducted from non-qualified variable annuities may be taxable.

13. Trusted Contact Person (optional)

By choosing to provide information for a Trusted Contact Person ("TCP"), Client authorizes Green Investment Management to contact and to disclose information about Client Account to the TCP in the following circumstances: to address possible financial exploitation, to confirm the specifics of current Client contact information, health status, or the identity of any legal guardian, executor, trustee or holder of a power of attorney, or as otherwise permitted by applicable law. This authorization does not provide the TCP with the ability to transact on Client Account. The TCP must be at least 18 years old and must be someone other than Account owner or Advisor.

First Name	Middle Initial	Last Name	Relationship
Phone Number		Email Address	

14. Signatures

By signing this Client Account Application, you affirm that you are of full legal age in the state of jurisdiction in which you reside and have the capacity to be bound by the terms and conditions of this Client Account Application. You further affirm that you have read, understood, and agree to the terms and conditions, policies, and disclosures of the Joint Services Agreement ("Agreement").

Client acknowledges receipt of GIM's Form ADV Part 2; a disclosure statement containing the equivalent information; or a disclosure statement containing at least the information required by 2A Appendix 1 of Form ADV, if the client is entering into a wrap fee program sponsored by the investment adviser. If the appropriate disclosure statement was not delivered to the client at least 48 hours prior to the client entering into any written or oral advisory contract with this investment adviser, then the client has the right to terminate the contract without penalty within five business days after entering into the contract. For the purposes of this provision, a contract is considered entered into when all parties to the contract have signed the contract, or, in the case of an oral contract, otherwise signified their acceptance, any other provisions of this contract notwithstanding. Client also acknowledges receipt of the Advisor Firm's Form ADV Part 2.

Client is aware of the fees for which Client is responsible including Manager's Fee (as disclosed in Agreement, Section 5), Custodial Fees (if applicable, as disclosed in Agreement, Section 6), Manager's Fee Adjustments (if applicable, as disclosed in Application, Section 9) and Advisor Firm Fees (if applicable, as disclosed in Application, Section 6. Client acknowledges that Client may pay more or less than other clients receiving the same services. **Client understands that Agreement, Section 2(V)(L), contains a predispute arbitration clause.**

Acceptance by Client / Account Holder(s):

Primary Account Holder Signature X	Print Name	Date
Additional Account Signature X	Print Name	Date

Acknowledged By:

Print Advisor Firm Name		
Advisor Firm Authorized Person Signature X	Print Name & Title	Date

Acceptance by Green Investment Management, Inc.

GIM Authorized Person's Signature X	Print Name	Date
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Account Number

11. Account Size

Approximate initial value of Account

12. Interested Third Party Information (optional)

Name
Company (if applicable)
Email Address