

Addendum to Schedule A of the Investment Management Agreement

Client Name _____ Joint Client Name _____ Date of Original IMA _____

Account 1: New Update

Change Billing Instructions			
Bill Each Account Separately Bill to Account: _____ Change Existing Debit Account From _____ to _____			
Custodian	Account Title	Account #	Fee Structure
			<input type="radio"/> Tiered <input type="radio"/> Flat Rate _____%
Investment Objective	Risk Tolerance	Time Horizon	
<input type="radio"/> Preservation of Capital <input type="radio"/> Growth & Income <input type="radio"/> Capital Appreciation <input type="radio"/> Speculation <input type="radio"/> Income	<input type="radio"/> Conservative <input type="radio"/> Moderately Conservative <input type="radio"/> Moderate <input type="radio"/> Moderately Aggressive <input type="radio"/> Aggressive	<input type="radio"/> Near Term <input type="radio"/> Very Short Term <input type="radio"/> Intermediate <input type="radio"/> Long Term <input type="radio"/> Legacy Account	

Account 2: New Update

Change Billing Instructions			
Bill Each Account Separately Bill to Account: _____ Change Existing Debit Account From _____ to _____			
Custodian	Account Title	Account #	Fee Structure
			<input type="radio"/> Tiered <input type="radio"/> Flat Rate _____%
Investment Objective	Risk Tolerance	Time Horizon	
<input type="radio"/> Preservation of Capital <input type="radio"/> Growth & Income <input type="radio"/> Capital Appreciation <input type="radio"/> Speculation <input type="radio"/> Income	<input type="radio"/> Conservative <input type="radio"/> Moderately Conservative <input type="radio"/> Moderate <input type="radio"/> Moderately Aggressive <input type="radio"/> Aggressive	<input type="radio"/> Near Term <input type="radio"/> Very Short Term <input type="radio"/> Intermediate <input type="radio"/> Long Term <input type="radio"/> Legacy Account	

Account 3 New Update

Change Billing Instructions			
Bill Each Account Separately Bill to Account: _____ Change Existing Debit Account From _____ to _____			
Custodian	Account Title	Account #	Fee Structure
			<input type="radio"/> Tiered <input type="radio"/> Flat Rate _____%
Investment Objective	Risk Tolerance	Time Horizon	
<input type="radio"/> Preservation of Capital <input type="radio"/> Growth & Income <input type="radio"/> Capital Appreciation <input type="radio"/> Speculation <input type="radio"/> Income	<input type="radio"/> Conservative <input type="radio"/> Moderately Conservative <input type="radio"/> Moderate <input type="radio"/> Moderately Aggressive <input type="radio"/> Aggressive	<input type="radio"/> Near Term <input type="radio"/> Very Short Term <input type="radio"/> Intermediate <input type="radio"/> Long Term <input type="radio"/> Legacy Account	

Certification & Signature(s):

1. Client(s) acknowledges they have received the Spire Wealth Management, LLC form CRS.
2. This addendum does not imply a guarantee with respect to the attainment of Client's investment goals and objectives.

Client Name (Please Print)	Client Signature	Date
Joint Client Name (Please Print)	Joint Client Signature	Date
IAR Name (Please Print)	IAR Signature	Date
Spire Principal (Please Print)	Spire Principal Signature	Date