FORM ADV

OMB: 3235-0049

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: ING FINANCIAL PARTNERS, INC	IARD/CRD Number: 2882
	Rev. 11/2010

WARNING: Complete this form truthfully. False statements or omissions may result in denial of your application, revocation of your registration, or criminal prosecution. You must keep this form updated by filing periodic amendments. See Form ADV General Instruction 3.

Item 1 Identifying Information

Responses to this Item tell us who you are, where you are doing business, and how we can contact you.

A. Your full legal name (if you are a sole proprietor, your last, first, and middle names):
ING FINANCIAL PARTNERS, INC

B. Name under which you primarily conduct your advisory business, if different from Item 1.A.
ING FINANCIAL PARTNERS, INC
List on Section 1.B. of Schedule D any additional names under which you conduct your advisory business.

C. If this filing is reporting a change in your legal name (Item 1.A.) or primary business name (Item 1.B.), enter the new name and specify whether the name change is of
☐ your legal name or ☐ your primary business name:

D. If you are registered with the SEC as an investment adviser, your SEC file number:
801- 46585

E. If you have a number ("*CRD* Number") assigned by *FINRA's CRD* system or by the IARD system, your *CRD* number: 2882
If your firm does not have a CRD number, skip this Item 1.E. Do not provide the CRD number of one of your officers, employees, or affiliates.

F. *Principal Office and Place of Business*

(1) Address (do not use a P.O. Box):

Number and Street 1:		Number and Street 2:	
909 LOCUST STREET			
City:	State:	Country:	ZIP+4/Postal Code:
DES MOINES	IA	USA	50309

If this address is a private residence, check this box: ☐
List on Section 1.F. of Schedule D any office, other than your principal office and place of business, at which you conduct investment advisory business. If you are applying for registration, or are registered, with one or more state securities authorities, you must list all of your offices in the state or states to which you are applying for registration or with whom you are registered. If you are applying for registration, or are registered only, with the SEC, list the largest five offices in terms of numbers of employees.

(2) Days of week that you normally conduct business at your *principal office and place of business*:
◉ Monday-Friday ○ Other:
Normal business hours at this location:
8:00 AM - 4:30 PM

(3) Telephone number at this location:

1-800-356-2906

(4) Facsimile number at this location:
515-698-7886

G. Mailing address, if different from your *principal office and place of business* address:
Number and Street 1: Number and Street 2:

City: State: Country: ZIP+4/Postal Code:

If this address is a private residence, check this box: ☐

H. If you are a sole proprietor, state your full residence address, if different from your *principal office and place of business* address in Item 1.F.:
Number and Street 1: Number and Street 2:
City: State: Country: ZIP+4/Postal Code:

YES NO

I. Do you have World Wide Web site addresses? ◉ ○

If "yes," list these addresses on Section 1.I. of Schedule D. If a web address serves as a portal through which to access other information you have published on the World Wide Web, you may list the portal without listing addresses for all of the other information. Some advisers may need to list more than one portal address. Do not provide individual electronic mail addresses in response to this Item.

J. Contact *Employee*:
Name: Title:
Telephone Number: Facsimile Number:
Number and Street 1: Number and Street 2:
City: State: Country: ZIP+4/Postal Code:
Electronic mail (e-mail) address, if contact *employee* has one:
The contact employee should be an employee whom you have authorized to receive information and respond to questions about this Form ADV.

YES NO

K. Do you maintain some or all of the books and records you are required to keep under Section 204 of the Advisers Act, or similar state law, somewhere other than your *principal office and place of business*? ○ ◉
If "yes," complete Section 1.K. of Schedule D.

YES NO

L. Are you registered with a *foreign financial regulatory authority*? ○ ◉

Answer "no" if you are not registered with a foreign financial regulatory authority, even if you have an affiliate that is registered with a foreign financial regulatory authority. If "yes", complete Section 1.L. of Schedule D.

FORM ADV

OMB: 3235-0049

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: ING FINANCIAL PARTNERS, INC	**IARD/CRD Number: 2882**
	Rev. 11/2010

Item 2 SEC Registration

Responses to this Item help us (and you) determine whether you are eligible to register with the SEC. Complete this Item 2 only if you are applying for SEC registration or submitting an *annual updating amendment* to your SEC registration.

A. To register (or remain registered) with the SEC, you must check at least one of the Items 2.A (1) through 2.A(11), below. If you are submitting an *annual updating amendment* to your SEC registration and you are no longer eligible to register with the SEC, check Item 2.A(12). You:

☑ (1)have *assets under management* of $25 million (in U.S. dollars) or more;

See Part 1A Instruction 2.a. to determine whether you should check this box.

☐ (2)have your *principal office and place of business* in Wyoming;

☐ (3)have your *principal office and place of business* outside the United States;

☐ (4)are an investment adviser (or sub-adviser) to an investment company registered under the Investment Company Act of 1940;

See Part 1A Instruction 2.b. to determine whether you should check this box.

☐ (5)have been designated as a nationally recognized statistical rating organization;

See Part 1A Instruction 2.c. to determine whether you should check this box.

☐ (6)are a pension consultant that qualifies for the exemption in rule 203A-2(b);

See Part 1A Instruction 2.d. to determine whether you should check this box.

☐ (7)are relying on rule 203A-2(c) because you are an investment adviser that *controls*, is *controlled* by, or is under common *control* with, an investment adviser that is registered with the SEC, and your *principal office and place of business* is the same as the registered adviser;

See Part 1A Instruction 2.e. to determine whether you should check this box. If you check this box, complete Section 2.A(7) of Schedule D.

☐ (8)are a newly formed adviser relying on rule 203A-2(d) because you expect to be eligible for SEC registration within 120 days;

See Part 1A Instruction 2.f. to determine whether you should check this box. If you check this box, complete Section 2.A(8) of Schedule D.

☐ (9) are a multi-state adviser relying on rule 203A-2(e);

See Part 1A Instruction 2.g. to determine whether you should check this box. If you check this box, complete Section 2.A(9) of Schedule D.

☐ (10)are an Internet investment adviser relying on rule 203A-2(f);

See Part 1A Instructions 2.h. to determine whether you should check this box.

☐ (11)have received an SEC *order* exempting you from the prohibition against registration with the SEC;

If you checked this box, complete Section 2.A(11) of Schedule D.

☐ (12)are no longer eligible to remain registered with the SEC.

See Part 1A Instructions 2.i. to determine whether you should check this box.

B. Under state laws, SEC-registered advisers may be required to provide to *state securities authorities* a copy of the Form ADV and any amendments they file with the SEC. These are called *notice filings*. If this is an initial application, check the box(es) next to the state(s) that you would like to receive notice of this and all subsequent filings you submit to the SEC. If this is an amendment to direct your *notice filings* to additional state(s), check the box(es) next to the state(s) that you would like to receive notice of this and all subsequent filings you submit to the SEC. If this is an amendment to your registration to stop your *notice filings* from going to state(s) that currently receive them, uncheck the box(es) next to those state(s).

☑ AL	☑ ID	☑ MO	☑ PA
☑ AK	☑ IL	☑ MT	☑ PR
☑ AZ	☑ IN	☑ NE	☑ RI
☑ AR	☑ IA	☑ NV	☑ SC
☑ CA	☑ KS	☑ NH	☑ SD
☑ CO	☑ KY	☑ NJ	☑ TN
☑ CT	☑ LA	☑ NM	☑ TX
☑ DE	☑ ME	☑ NY	☑ UT
☑ DC	☑ MD	☑ NC	☑ VT
☑ FL	☑ MA	☑ ND	☐ VI
☑ GA	☑ MI	☑ OH	☑ VA
☐ GU	☑ MN	☑ OK	☑ WA
☑ HI	☑ MS	☑ OR	☑ WV
			☑ WI

If you are amending your registration to stop your notice filings from going to a state that currently receives them and you do not want to pay that state's notice filing fee for the coming year, your amendment must filed before the end of the year (December 31).

FORM ADV

OMB: 3235-0049

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: ING FINANCIAL PARTNERS, INC	**IARD/CRD Number: 2882**
	Rev. 11/2010

Item 3 Form Of Organization

A. How are you organized?

◉ Corporation ○ Sole Proprietorship ○ Limited Liability Partnership (LLP)

○ Partnership ○ Limited Liability Company (LLC) ○ Other (specify):

If you are changing your response to this Item, see Part 1A Instruction 4.

B. In what month does your fiscal year end each year?

December

C. Under the laws of what state or country are you organized?

State: Country:
Minnesota UNITED STATES

FORM ADV **OMB: 3235-0049**

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: ING FINANCIAL PARTNERS, INC	IARD/CRD Number: 2882
	Rev. 11/2010

Item 4 Successions

	YES	NO
A. Are you, at the time of this filing, succeeding to the business of a registered investment adviser?	○	◉

If "yes," complete Item 4.B. and Section 4 of Schedule D.

B. Date of Succession: (MM/DD/YYYY)

If you have already reported this succession on a previous Form ADV filing, do not report the succession again. Instead, check "No." See Part 1A Instruction 4.

FORM ADV **OMB: 3235-0049**

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: ING FINANCIAL PARTNERS, INC	IARD/CRD Number: 2882
	Rev. 11/2010

Item 5 Information About Your Advisory Business

Responses to this Item help us understand your business, assist us in preparing for on-site examinations, and provide us with data we use when making regulatory policy. Part 1A Instruction 5.a. provides additional guidance to newly-formed advisers for completing this Item 5.

Employees

A. Approximately how many *employees* do you have? Include full and part-time *employees* but do not include any clerical workers.

○ 1- 5 ○ 6-10 ○ 11-50 ○ 51-250 ○ 251-500
○ 501-1,000 ◉ More than 1,000
If more than 1,000, how many?
1070 (round to the nearest 1,000)

B.

(1) Approximately how many of these *employees* perform investment advisory functions (including research)?

○ 0 ○ 1-5 ○ 6-10 ○ 11-50 ○ 51-250
○ 251-500 ○ 501-1,000 ◉ More than 1,000
If more than 1,000, how many?
1070 (round to the nearest 1,000)

(2) Approximately how many of these *employees* are registered representatives of a broker-dealer?

○ 0 ○ 1-5 ○ 6-10 ○ 11-50 ○ 51-250
○ 251-500 ○ 501-1,000 ◉ More than 1,000
If more than 1,000, how many?
1070 (round to the nearest 1,000)

If you are organized as a sole proprietorship, include yourself as an employee in your responses to Items 5.A(1) and 5.B(2). If an employee performs more than one function, you should count that employee in each of your responses to Item 5.B(1) and 5.B(2).

(3) Approximately how many firms or other *persons* solicit advisory *clients* on your behalf?

◉ 0 ○ 1-5 ○ 6-10 ○ 11-50 ○ 51-250
○ 251-500 ○ 501-1,000 ○ More than 1,000
If more than 1,000, how many?
(round to the nearest 1,000)

In your response to Item 5.B(3), do not count any of your employees and count a firm only once -- do not count each of the firm's employees that solicit on your behalf.

Clients

C. To approximately how many *clients* did you provide investment advisory services during your most-recently completed fiscal year?

○ 0 ○ 1-10 ○ 11-25 ○ 26-100 ○ 101-250
○ 251-500 ◉ More than 500
If more than 500, how many?
(round to the nearest 500)
15000

D. What types of *clients* do you have? Indicate the approximate percentage that each type of *client* comprises of your total number of *clients*.

		None	Up to 10%	11-25%	26-50%	51-75%	More Than 75%
(1)	Individuals (other than *high net worth individuals*)	○	○	○	○	◉	○
(2)	*High net worth individuals*	○	○	◉	○	○	○
(3)	Banking or thrift institutions	◉	○	○	○	○	○
(4)	Investment companies (including mutual funds)	◉	○	○	○	○	○
(5)	Pension and profit sharing plans (other than plan participants)	○	◉	○	○	○	○
(6)	Other pooled investment vehicles (e.g., hedge						

	funds)	●	○	○	○	○	○
(7)	Charitable organizations	○	●	○	○	○	○
(8)	Corporations or other businesses not listed above	○	●	○	○	○	○
(9)	State or municipal *government entities*	●	○	○	○	○	○
(10)	Other:	●	○	○	○	○	○

The category "individuals" includes trusts, estates, 401(k) plans and IRAs of individuals and their family members, but does not include businesses organized as sole proprietorships.

Unless you provide advisory services pursuant to an investment advisory contract to an investment company registered under the Investment Company Act of 1940, check "None" in response to Item 5.D(4).

Compensation Arrangements

E. You are compensated for your investment advisory services by (check all that apply):

- ☑ (1) A percentage of assets under your management
- ☑ (2) Hourly charges
- ☐ (3) Subscription fees (for a newsletter or periodical)
- ☑ (4) Fixed fees (other than subscription fees)
- ☑ (5) Commissions
- ☐ (6) *Performance-based fees*
- ☐ (7) Other (specify):

Assets Under Management

	YES	NO
F. (1) Do you provide continuous and regular supervisory or management services to securities portfolios?	●	○

(2) If yes, what is the amount of your assets under management and total number of accounts?

	U.S. Dollar Amount	Total Number of Accounts
Discretionary:	(a) $ 439650109.00	(d) 2099
Non-Discretionary:	(b) $ 2595289895.00	(e) 14599
Total:	(c) $ 3034940004.00	(f) 16698

Part 1A Instruction 5.b. explains how to calculate your assets under management. You must follow these instructions carefully when completing this Item.

Advisory Activities

G. What type(s) of advisory services do you provide? Check all that apply.

- ☑ (1) Financial planning services
- ☑ (2) Portfolio management for individuals and/or small businesses
- ☐ (3) Portfolio management for investment companies
- ☐ (4) Portfolio management for businesses or institutional *clients* (other than investment companies)
- ☐ (5) Pension consulting services

☑ (6) Selection of other advisers
☐ (7) Publication of periodicals or newsletters
☐ (8) Security ratings or pricing services
☐ (9) Market timing services
☐ (10) Other (specify):

Do not check Item 5.G(3) unless you provide advisory services pursuant to an investment advisory contract to an investment company registered under the Investment Company Act of 1940.

H. If you provide financial planning services, to how many *clients* did you provide these services during your last fiscal year?

○ 0 ○ 1-10 ○ 11-25 ○ 26-50 ○ 51-100
○ 101-250 ○ 251-500 ◉ More than 500 If more than 500, how many? 1000(round to the nearest 500)

I. If you participate in a *wrap fee program*, do you (check all that apply):

☑ (1) *sponsor* the *wrap fee program* ?
☑ (2) act as a portfolio manager for the *wrap fee program*?

If you are a portfolio manager for a wrap fee program, list the names of the programs and their sponsors in Section 5.I(2) of Schedule D.

If your involvement in a wrap fee program is limited to recommending wrap fee programs to your clients , or you advise a mutual fund that is offered through a wrap fee program, do not check either Item 5.I(1) or 5.I(2).

FORM ADV

OMB: 3235-0049

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: ING FINANCIAL PARTNERS, INC	**IARD/CRD Number: 2882**
	Rev. 11/2010

Item 6 Other Business Activities

In this Item, we request information about your other business activities.

A. You are actively engaged in business as a (check all that apply):

☑ (1) Broker-dealer
☐ (2) Registered representative of a broker-dealer
☐ (3) Futures commission merchant, commodity pool operator, or commodity trading advisor
☐ (4) Real estate broker, dealer, or agent
☑ (5) Insurance broker or agent
☐ (6) Bank (including a separately identifiable department or division of a bank)
☐ (7) Other financial product salesperson (specify):

YES NO

	YES	NO
B. (1) Are you actively engaged in any other business not listed in Item 6.A. (other than giving investment advice)?	○	◉
(2) If yes, is this other business your primary business?	○	○
If "yes," describe this other business on Section 6.B. of Schedule D.		
(3) Do you sell products or provide services other than investment advice to your advisory *clients*?	◉	○

FORM ADV

OMB: 3235-0049

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: ING FINANCIAL PARTNERS, INC	IARD/CRD Number: 2882
	Rev. 11/2010

Item 7 Financial Industry Affiliations

In this Item, we request information about your financial industry affiliations and activities. This information identifies areas in which conflicts of interest may occur between you and your *clients*.

Item 7 requires you to provide information about you and your *related persons*. Your *related persons* are all of your *advisory affiliates* and any *related person* that is under common *control* with you.

A. You have a *related person* that is a (check all that apply):

- [x] (1) broker-dealer, municipal securities dealer, or government securities broker or dealer
- [x] (2) investment company (including mutual funds)
- [x] (3) other investment adviser (including financial planners)
- [ ] (4) futures commission merchant, commodity pool operator, or commodity trading advisor
- [x] (5) banking or thrift institution
- [ ] (6) accountant or accounting firm
- [ ] (7) lawyer or law firm
- [x] (8) insurance company or agency

☑ (9) pension consultant

☐ (10) real estate broker or dealer

☐ (11) sponsor or syndicator of limited partnerships

If you checked Items 7.A.(1) or (3), you must list on Section 7.A. of Schedule D all your related persons that are investment advisers, broker-dealers, municipal securities dealers, or government securities broker or dealers.

	Yes	No
B. Are you or any *related person* a general partner in an *investment-related* limited partnership or manager of an *investment-related* limited liability company, or do you advise any other "private fund" as defined under SEC rule 203(b)(3)-1?	☐	◉

If "yes," for each limited partnership or limited liability company, or (if applicable) private fund, complete Section 7.B. of Schedule D . If, however, you are an SEC-registered adviser and you have related persons that are SEC-registered advisers who are the general partners of limited partnerships or the managers of limited liability companies, you do not have to complete Section 7.B. of Schedule D with respect to those related advisers' limited partnerships or limited liability companies.

To use this alternative procedure, you must state in the Miscellaneous Section :(1) that you have related SEC-registered investment advisers that manage limited partnerships or limited liability companies that are not listed in Section 7.B. of Schedule D ; (2) that complete and accurate information about those limited partnerships or limited liability companies is available in Section 7.B. of Schedule D of the Form ADVs of your related SEC-registered advisers; and (3) whether your clients are solicited to invest in any of those limited partnerships or limited liability companies.

FORM ADV

OMB: 3235-0049

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: ING FINANCIAL PARTNERS, INC	IARD/CRD Number: 2882
	Rev. 11/2010

Item 8 Participation or Interest in *Client* Transactions

In this Item, we request information about your participation and interest in your *clients'* transactions. Like Item 7, this information identifies areas in which conflicts of interest may occur between you and your *clients*.

Like Item 7, Item 8 requires you to provide information about you and your *related persons*.

Proprietary Interest in *Client* Transactions

	Yes	No
A. Do you or any *related person*:		
(1) buy securities for yourself from advisory *clients*, or sell securities you own to advisory *clients* (principal transactions)?	◉	☐
(2) buy or sell for yourself securities (other than shares of mutual funds) that you also recommend to advisory *clients*?	◉	☐
(3) recommend securities (or other investment products) to advisory *clients* in which you or any *related person* has some other proprietary (ownership) interest (other than those mentioned in Items 8.A(1) or (2))?	◉	☐

Sales Interest in *Client* Transactions

	Yes	No
B. Do you or any *related person*:		
(1) as a broker-dealer or registered representative of a broker-dealer, execute		

securities trades for brokerage customers in which advisory *client* securities are sold to or bought from the brokerage customer (agency cross transactions)? ◉ ○

(2) recommend purchase of securities to advisory *clients* for which you or any *related person* serves as underwriter, general or managing partner, or purchaser representative? ◉ ○

(3) recommend purchase or sale of securities to advisory *clients* for which you or any *related person* has any other sales interest (other than the receipt of sales commissions as a broker or registered representative of a broker-dealer)? ◉ ○

Investment or Brokerage Discretion

	Yes	No
C. Do you or any *related person* have *discretionary authority* to determine the:		
(1) securities to be bought or sold for a *client's* account?	◉	○
(2) amount of securities to be bought or sold for a *client's* account?	◉	○
(3) broker or dealer to be used for a purchase or sale of securities for a *client's* account?	○	◉
(4) commission rates to be paid to a broker or dealer for a *client's* securities transactions?	○	◉
D. Do you or any *related person* recommend brokers or dealers to *clients*?	◉	○
E. Do you or any *related person* receive research or other products or services other than execution from a broker-dealer or a third party in connection with *client* securities transactions?	◉	○
F. Do you or any *related person*, directly or indirectly, compensate any *person* for *client* referrals?	○	◉

In responding to this Item 8.F., consider in your response all cash and non-cash compensation that you or a related person gave any person in exchange for client referrals, including any bonus that is based, at least in part, on the number or amount of client referrals.

FORM ADV

OMB: 3235-0049

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: ING FINANCIAL PARTNERS, INC	IARD/CRD Number: 2882
	Rev. 11/2010

Item 9 *Custody*

In this Item, we ask you whether you or a *related person* has *custody* of *client* assets and about your custodial practices.

	Yes	No
A. (1) Do you have *custody* of any advisory *clients'*:		
(a) cash or bank accounts?	○	◉
(b) securities?	○	◉

If you are registering or registered with the SEC, answer "No" to Item 9.A.(1)(a) and (b) if you have *custody* solely because (i) you deduct your advisory fees directly from your *clients'* accounts, or (ii) a *related person* maintains *client* funds or securities as a qualified custodian but you have overcome the presumption that you are not operationally independent (pursuant to Advisers Act rule 206(4)(2)-(d)(5)) from the *related person*.

(2) If you checked "yes" to Item 9.A(1)(a) or (b), what is the amount of *client* funds and securities and total number of *clients* for which you have *custody*:

U.S. Dollar Amount	Total Number of Clients
(a)$	(b)

If your related person serves as qualified custodian of client assets, do not include the amount of those assets and the number of those clients in your response to Item 9.A.(2). Instead, include that information in your response to Item 9.B.(2).

B. (1) Do any of your *related persons* have *custody* of any of your advisory *clients'*: **Yes** **No**

(a) cash or bank accounts? ○ ◉

(b) securities? ○ ◉

You are required to answer this item regardless of how you answered Item 9.A.(1)(a) or (b).

(2) If you checked "yes" to Item 9.B.(1)(a) or (b), what is the amount of *client* funds and securities and total number of *clients* for which your related persons have *custody*:

U.S. Dollar Amount	Total Number of Clients
(a)$	(b)

C. If you or your *related persons* have *custody* of *client* funds or securities, check all the following that apply:

(1) A qualified custodian(s) sends account statements at least quarterly to the investors in the pooled investment vehicle(s) you manage. ☐

(2) An independent public accountant audits annually the pooled investment vehicle(s) that you manage and the audited financial statements are distributed to the investors in the pools. ☐

(3) An independent public accountant conducts an annual surprise examination of *client* funds and securities. ☐

(4) An independent public accountant prepares an internal control report with respect to custodial services when you or your *related persons* are qualified custodians for *client* funds and securities. ☐

If you checked Item 9.C.(2), C.(3) or C.(4), list in Section 9.C. of Schedule D the accountants that are engaged to perform the audit or examination or prepare an internal control report.

D. Do you or your *related persons* act as qualified custodians for your *clients* in connection with advisory services you provide to *clients*? **Yes** **No**

(1) you act as a qualified custodian ○ ◉

(2) your *related persons* act as qualified custodians ○ ◉

If you checked "yes" to Item 9.D.(2), list in Section 9.D. of Schedule D all your *related persons* that act as qualified custodians for your *clients* in connection with advisory services you provide to *clients* (you do not have to list broker-dealers already identified as qualified custodians in Section 7.A. of Schedule D).

E. If you are filing your annual updating amendment and you were subject to a surprise examination by an independent public accountant during your last fiscal year, provide the date (MM/YYYY) the examination commenced:

Primary Business Name: ING FINANCIAL PARTNERS, INC	IARD/CRD Number: 2882
	Rev. 11/2010

Item 10 Control Persons

In this Item, we ask you to identify every *person* that, directly or indirectly, *controls* you.

If you are submitting an initial application, you must complete Schedule A and Schedule B. Schedule A asks for information about your direct owners and executive officers. Schedule B asks for information about your indirect owners. If this is an amendment and you are updating information you reported on either Schedule A or Schedule B (or both) that you filed with your initial application, you must complete Schedule C.

	YES	NO
Does any *person* not named in Item 1.A. or Schedules A, B, or C, directly or indirectly, *control* your management or policies?	○	◉

If yes, complete Section 10 of Schedule D.

FORM ADV **OMB: 3235-0049**

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: ING FINANCIAL PARTNERS, INC	IARD/CRD Number: 2882
	Rev. 11/2010

Item 11 Disclosure Information

In this Item, we ask for information about your disciplinary history and the disciplinary history of all your *advisory affiliates*. We use this information to determine whether to grant your application for registration, to decide whether to revoke your registration or to place limitations on your activities as an investment adviser, and to identify potential problem areas to focus on during our on-site examinations. One event may result in "yes" answers to more than one of the questions below.

Your *advisory affiliates* are: (1) all of your current *employees* (other than *employees* performing only clerical, administrative, support or similar functions); (2) all of your officers, partners, or directors (or any *person* performing similar functions); and (3) all *persons* directly or indirectly *controlling* you or *controlled* by you. If you are a "separately identifiable department or division" (SID) of a bank, see the Glossary of Terms to determine who your *advisory affiliates* are.

If you are registered or registering with the SEC, you may limit your disclosure of any event listed in Item 11 to ten years following the date of the event. If you are registered or registering with a state, you must respond to the questions as posed; you may, therefore, limit your disclosure to ten years following the date of an event only in responding to Items 11.A(1), 11.A (2), 11.B(1), 11.B(2), 11.D(4), and 11.H(1)(a). For purposes of calculating this ten-year period, the date of an event is the date the final order, judgment, or decree was entered, or the date any rights of appeal from preliminary orders, judgments, or decrees lapsed.

You must complete the appropriate Disclosure Reporting Page ("DRP") for "yes" answers to the questions in this Item 11.

For "yes" answers to the following questions, complete a Criminal Action DRP:

	YES	NO
A. In the past ten years, have you or any *advisory affiliate*:		
(1) been convicted of or plead guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any *felony*?	○	◉
(2) been *charged* with any *felony*?	○	◉

If you are registered or registering with the SEC, you may limit your response to Item 11.A(2) to charges that are currently pending.

	YES	NO
B. In the past ten years, have you or any *advisory affiliate*:		
(1) been convicted of or plead guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to a *misdemeanor* involving: investments or an *investment-related* business, or any fraud, false statements, or omissions, wrongful taking of property, bribery, perjury, forgery, counterfeiting, extortion, or a conspiracy to commit any of these offenses?	○	◉
(2) been *charged* with a *misdemeanor* listed in 11.B(1)?	○	◉

If you are registered or registering with the SEC, you may limit your response to Item 11.B(2) to charges that are currently pending.

For "yes" answers to the following questions, complete a Regulatory Action DRP:

	YES	NO
C. Has the SEC or the Commodity Futures Trading Commission (CFTC) ever:		

(1) *found* you or any *advisory affiliate* to have made a false statement or omission? ○ ◉

(2) *found* you or any *advisory affiliate* to have been *involved* in a violation of SEC or CFTC regulations or statutes? ◉ ○

(3) *found* you or any *advisory affiliate* to have been a cause of an *investment-related* business having its authorization to do business denied, suspended, revoked, or restricted? ○ ◉

(4) entered an *order* against you or any *advisory affiliate* in connection with *investment-related* activity? ◉ ○

(5) imposed a civil money penalty on you or any *advisory affiliate*, or *ordered* you or any *advisory affiliate* to cease and desist from any activity? ◉ ○

D. Has any other federal regulatory agency, any state regulatory agency, or any *foreign financial regulatory authority*:

(1) ever *found* you or any *advisory affiliate* to have made a false statement or omission, or been dishonest, unfair, or unethical? ◉ ○

(2) ever *found* you or any *advisory affiliate* to have been *involved* in a violation of *investment-related* regulations or statutes? ◉ ○

(3) ever *found* you or any *advisory affiliate* to have been a cause of an *investment-related* business having its authorization to do business denied, suspended, revoked, or restricted? ○ ◉

(4) in the past ten years, entered an *order* against you or any *advisory affiliate* in connection with an *investment-related* activity? ◉ ○

(5) ever denied, suspended, or revoked your or any *advisory affiliate's* registration or license, or otherwise prevented you or any *advisory affiliate*, by *order*, from associating with an *investment-related* business or restricted your or any *advisory affiliate's* activity? ○ ◉

E. Has any *self-regulatory organization* or commodities exchange ever:

(1) *found* you or any *advisory affiliate* to have made a false statement or omission? ○ ◉

(2) *found* you or any *advisory affiliate* to have been *involved* in a violation of its rules (other than a violation designated as a *"minor rule violation"* under a plan approved by the SEC)? ◉ ○

(3) *found* you or any *advisory affiliate* to have been the cause of an *investment-related* business having its authorization to do business denied, suspended, revoked, or restricted? ○ ◉

(4) disciplined you or any *advisory affiliate* by expelling or suspending you or the *advisory affiliate* from membership, barring or suspending you or the *advisory affiliate* from association with other members, or otherwise restricting your or the *advisory affiliate's* activities? ○ ◉

F. Has an authorization to act as an attorney, accountant, or federal contractor granted to you or any *advisory affiliate* ever been revoked or suspended? ○ ◉

G. Are you or any *advisory affiliate* now the subject of any regulatory *proceeding* that could result in a "yes" answer to any part of Item 11.C., 11.D., or 11.E.? ○ ◉

For "yes" answers to the following questions, complete a Civil Judicial Action DRP:

H. (1) Has any domestic or foreign court: **YES** **NO**

(a) in the past ten years, *enjoined* you or any *advisory affiliate* in connection with any *investment-related* activity? ○ ◉

(b) ever *found* that you or any *advisory affiliate* were *involved* in a violation of *investment-related* statutes or regulations? ○ ●

(c) ever dismissed, pursuant to a settlement agreement, an *investment-related* civil action brought against you or any *advisory affiliate* by a state or *foreign financial regulatory authority*? ○ ●

(2) Are you or any *advisory affiliate* now the subject of any civil *proceeding* that could result in a "yes" answer to any part of Item 11.H(1)? ○ ●

FORM ADV

OMB: 3235-0049

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: ING FINANCIAL PARTNERS, INC	IARD/CRD Number: 2882
	Rev. 11/2010

Item 12 Small Business

The SEC is required by the Regulatory Flexibility Act to consider the effect of its regulations on small entities. In order to do this, we need to determine whether you meet the definition of "small business" or "small organization" under rule 0-7.

Answer this Item 12 only if you are registered or registering with the SEC and you indicated in response to Item 5.F(2)(c) that you have assets under management of less than $25 million. You are not required to answer this Item 12 if you are filing for initial registration as a state adviser, amending a current state registration, or switching from SEC to state registration.

For purposes of this Item 12 only:

- Total Assets refers to the total assets of a firm, rather than the assets managed on behalf of *clients*. In determining your or another *person's* total assets, you may use the total assets shown on a current balance sheet (but use total assets reported on a consolidated balance sheet with subsidiaries included, if that amount is larger).
- Control means the power to direct or cause the direction of the management or policies of a *person*, whether through ownership of securities, by contract, or otherwise. Any *person* that directly or indirectly has the right to vote 25 percent or more of the voting securities, or is entitled to 25 percent or more of the profits, of another *person* is presumed to control the other *person*.

	YES	NO
A. Did you have total assets of $5 million or more on the last day of your most recent fiscal year?	○	○
If "yes," you do not need to answer Items 12.B. and 12.C.		
B. Do you:		
(1) *control* another investment adviser that had assets under management of $25 million or more on the last day of its most recent fiscal year?	○	○
(2) *control* another *person* (other than a natural person) that had total assets of $5 million or more on the last day of its most recent fiscal year?	○	○
C. Are you:		
(1) *controlled* by or under common *control* with another investment adviser that had assets under management of $25 million or more on the last day of its most recent fiscal year?	○	○
(2) *controlled* by or under common *control* with another *person* (other than a natural person) that had total assets of $5 million or more on the last day of its most recent fiscal year?	○	○

FORM ADV

OMB: 3235-0049

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: ING FINANCIAL PARTNERS, INC	IARD/CRD Number: 2882
	Rev. 11/2010

Part 2 Brochures

Note: These documents are available as Portable Document Format (PDF) files. If you do not have the Adobe Acrobat Reader to view PDF files, please click here to download.

Brochures

Brochure Name	Date Submitted	Date Last Confirmed
PART 2A OF FORM ADV: FIRM BROCHURE	03/31/2011	

FORM ADV

OMB: 3235-0049

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: ING FINANCIAL PARTNERS, INC	IARD/CRD Number: 2882
	Rev. 11/2010

Form ADV, Schedule A

Direct Owners and Executive Officers

1. Complete Schedule A only if you are submitting an initial application. Schedule A asks for information about your direct owners and executive officers. Use Schedule C to amend this information.
2. Direct Owners and Executive Officers. List below the names of:
   (a) each Chief Executive Officer, Chief Financial Officer, Chief Operations Officer, Chief Legal Officer, Chief Compliance Officer(Chief Compliance Officer is required and cannot be more than one individual), director, and any other individuals with similar status or functions;
   (b) if you are organized as a corporation, each shareholder that is a direct owner of 5% or more of a class of your voting securities, unless you are a public reporting company (a company subject to Section 12 or 15(d) of the Exchange Act);

   Direct owners include any *person* that owns, beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 5% or more of a class of your voting securities. For purposes of this Schedule, a *person* beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.
   (c) if you are organized as a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 5% or more of your capital;
   (d) in the case of a trust that directly owns 5% or more of a class of your voting securities, or that has the right to receive upon dissolution, or has contributed, 5% or more of your capital, the trust and each trustee; and
   (e) if you are organized as a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 5% or more of your capital, and (ii) if managed by elected managers, all elected managers.
3. Do you have any indirect owners to be reported on Schedule B? ◉ Yes ○ No
4. In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner or executive officer is an individual.
5. Complete the Title or Status column by entering board/management titles; status as partner, trustee, sole proprietor, elected manager, shareholder, or member; and for shareholders or

members, the class of securities owned (if more than one is issued).

6. Ownership codes are:

NA - less than 5%	B - 10% but less than 25%	D - 50% but less than 75%
A - 5% but less than 10%	C - 25% but less than 50%	E - 75% or more

7. (a) In the *Control Person* column, enter "Yes" if the *person* has *control* as defined in the Glossary of Terms to Form ADV, and enter "No" if the *person* does not have *control*. Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are *control persons*.

(b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

(c) Complete each column.

FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name)	DE/FE/I	Title or Status	Date Title or Status Acquired MM/YYYY	Ownership Code	*Control Person*	PR	*CRD* No. If None: S.S. No. and Date of Birth, IRS Tax No., or Employer ID No.
LION CONNECTICUT HOLDINGS INC.	DE	100% SHAREHOLDER	12/2002	E	Y	N	02-0488491
LINDBERG, KARL STEPHEN	I	PRESIDENT, CHIEF EXECUTIVE OFFICER & DIRECTOR	01/2004	NA	Y	N	1001270
STYCH, KEVIN PAUL	I	VICE PRESIDENT, SALES AND MARKETING	01/2004	NA	Y	N	1904094
COKINIS, CHRISTOPHER ALEX	I	VICE PRESIDENT, CHIEF COMPLIANCE OFFICER & SECRETARY	01/2004	NA	Y	N	1527389
KESTERSON, BARBARA JO	I	CHIEF OPERATING OFFICER, DIRECTOR	01/2009	NA	Y	N	2747533
HULTGREN, KRISTIN HENDERSON	I	CHIEF FINANCIAL OFFICER	03/2010	NA	Y	N	5506534
WILCOX, WILLIAM DAVID	I	DIRECTOR	02/2010	NA	Y	N	2906726
BARHORST, RONALD RICHARD	I	VICE-PRESIDENT	02/2010	NA	Y	N	1705311

FORM ADV **OMB: 3235-0049**

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: ING FINANCIAL PARTNERS, INC	**IARD/CRD Number: 2882**
	Rev. 11/2010

Form ADV, Schedule B

Indirect Owners

1. Complete Schedule B only if you are submitting an initial application. Schedule B asks for information about your indirect owners; you must first complete Schedule A, which asks for information about your direct owners. Use Schedule C to amend this information.
2. Indirect Owners. With respect to each owner listed on Schedule A (except individual owners), list below:
   (a) in the case of an owner that is a corporation, each of its shareholders that beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 25% or more of a class of a voting security of that corporation;

   For purposes of this Schedule, a *person* beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.
   (b) in the case of an owner that is a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 25% or more of the partnership's capital;
   (c) in the case of an owner that is a trust, the trust and each trustee; and
   (d) in the case of an owner that is a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 25% or more of the LLC's capital, and (ii) if managed by elected managers, all elected managers.
3. Continue up the chain of ownership listing all 25% owners at each level. Once a public reporting company (a company subject to Sections 12 or 15(d) of the Exchange Act) is reached, no further ownership information need be given.
4. In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner is an individual.
5. Complete the Status column by entering the owner's status as partner, trustee, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).
6. Ownership codes are:
   C - 25% but less than 50%
   D - 50% but less than 75%
   E - 75% or more
   F - Other (general partner, trustee, or elected manager)
7. (a) In the *Control Person* column, enter "Yes" if the *person* has *control* as defined in the Glossary of Terms to Form ADV, and enter "No" if the *person* does not have *control*. Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are *control persons*.
   (b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.
   (c) Complete each column.

FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name)	DE/FE/I	Entity in Which Interest is Owned	Status	Date Status Acquired MM/YYYY	Ownership Code	*Control Person*	PR	*CRD* No. If None: S.S. No. and Date of Birth, IRS Tax No. or Employer ID No.
ING GROEP, N.V.	FE	ING VERZEKERINGEN,	SOLE SHAREHOLDER	03/1991	E	Y	Y	FOREIGN

		N.V.						
ING VERZEKERINGEN, N.V.	FE	ING INSURANCE INTERNATIONAL B.V.	SOLE SHAREHOLDER	12/1963	E	Y	N	FOREIGN
ING INSURANCE INTERNATIONAL B.V.	FE	ING AMERICA INSURANCE HOLDING, INC.	SOLE SHAREHOLDER	04/1977	E	Y	N	FOREIGN
ING AMERICA INSURANCE HOLDING, INC.	FE	LION CONNECTICUT HOLDINGS, INC	SOLE SHAREHOLDER	12/2002	E	Y	N	02-0333654

FORM ADV

OMB: 3235-0049

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: ING FINANCIAL PARTNERS, INC	**IARD/CRD Number: 2882**
	Rev. 11/2010

Form ADV, Schedule D

Section 1.B. Other Business Names

List your other business names and the jurisdictions in which you use them. You must complete a separate Schedule D for each business name.

No Information Filed

Section 1.F. Other Offices

Complete the following information for each office, other than your *principal office and place of business*, at which you conduct investment advisory business. You must complete a separate Schedule D Page 1 for each location. If you are applying for registration, or are registered, only with the SEC, list only the largest five (in terms of numbers of *employees*).

No Information Filed

Section 1.I. World Wide Web Site Addresses

List your World Wide Web site addresses. You must complete a separate Schedule D for each World Wide Web site address.

World Wide Web Site Address: WWW.INGFINANCIALPARTNERS.COM

Section 1.K. Locations of Books and Records

Complete the following information for each location at which you keep your books and records, other than your *principal office and place of business*. You must complete a separate Schedule D Page 1 for each location.

No Information Filed

Section 1.L. Registration with *Foreign Financial Regulatory Authorities*

List the name, in English, of each *foreign financial regulatory authority* and country with which you are registered. You must complete a separate Schedule D Page 2 for each *foreign financial regulatory authority* with whom you are registered.

No Information Filed

Section 2.A(7) Affiliated Adviser

No Information Filed

Section 2.A(8) Newly Formed Adviser

If you are relying on rule 203A-2(d), the newly formed adviser exemption from the prohibition on registration, you are required to make certain representations about your eligibility for SEC registration. By checking the appropriate boxes, you will be deemed to have made the required representations. You must make both of these representations:

- ☐ I am not registered or required to be registered with the SEC or a *state securities authority* and I have a reasonable expectation that I will be eligible to register with the SEC within 120 days after the date my registration with the SEC becomes effective.
- ☐ I undertake to withdraw from SEC registration if, on the 120th day after my registration with the SEC becomes effective, I would be prohibited by Section 203A(a) of the Advisers Act from registering with the SEC.

Section 2.A(9) Multi-State Adviser

If you are relying on rule 203A-2(e), the multi-state adviser exemption from the prohibition on registration, you are required to make certain representations about your eligibility for SEC registration. By checking the appropriate boxes, you will be deemed to have made the required representations.

If you are applying for registration as an investment adviser with the SEC, you must make both of these representations:

- ☐ I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of 30 or more states to register as an investment adviser with the securities authorities in those states.
- ☐ I undertake to withdraw from SEC registration if I file an amendment to this registration indicating that I would be required by the laws of fewer than 25 states to register as an investment adviser with the securities authorities of those states.

If you are submitting your *annual updating amendment*, you must make this representation:

- ☐ Within 90 days prior to the date of filing this amendment, I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of at least 25 states to register as an investment adviser with the securities authorities in those states.

Section 2.A(11) SEC Exemptive *Order*

No Information Filed

Section 4 Successions

Complete the following information if you are succeeding to the business of a currently-registered investment adviser. If you acquired more than one firm in the succession you are reporting on this Form ADV, you must complete a separate Schedule D Page 3 for each acquired firm. See Part 1A Instruction 4.

No Information Filed

Section 5.I(2) *Wrap Fee Programs*

If you are a portfolio manager for one or more *wrap fee programs*, list the name of each program and its *sponsor*. You must complete a separate Schedule D Page 3 for each *wrap fee program* for which you are a portfolio manager.

Name of *Wrap Fee Program*
PREFERRED ASSET MANAGEMENT

Name of *Sponsor*

ING FINANCIAL PARTNERS

Name of *Wrap Fee Program*
PRIME PORTFOLIO SERVICES

Name of *Sponsor*
ING FINANCIAL PARTNERS

Section 6.B. Description of Primary Business

No Information Filed

Section 7.A. Affiliated Investment Advisers and Broker-Dealers

You must complete the following information for each *related person* investment adviser and broker-dealer. You must complete a separate Schedule D Page 3 for each listed *related person*.

(1) Legal Name of *Related Person*:
ING CLARION PARTNERS, LLC

(2) Primary Business Name of *Related Person*:
ING CLARION PARTNERS, LLC

(3) *Related Person* is (check only one box):

- (•) Investment Adviser
- ( ) Broker-Dealer
- ( ) Dual (Investment Adviser and Broker-Dealer)

	Yes	No
(4) If the *related person* is a broker-dealer, is it a qualified custodian for your *clients* in connection with advisory services you provide to *clients*?	( )	( )
(5) If you are registering or registered with the SEC and you have answered "yes," have you overcome the presumption that you are not operationally independent (pursuant to Advisers Act rule 206(4)(2)-(d)(5)) from the *related person* broker-dealer, and thus are not required to obtain a surprise examination for your *clients'* funds or securities that are maintained at the *related person* ?	( )	( )

Related Person Adviser's SEC File Number (if any)
801- 16611

Related Person's CRD Number (if any):
108803

(1) Legal Name of *Related Person*:
SHAREBUILDER ADVISORS, LLC

(2) Primary Business Name of *Related Person*:
SHAREBUILDER ADVISORS, LLC

(3) *Related Person* is (check only one box):

- (•) Investment Adviser
- ( ) Broker-Dealer

○ Dual (Investment Adviser and Broker-Dealer)

	Yes	No
(4) If the *related person* is a broker-dealer, is it a qualified custodian for your *clients* in connection with advisory services you provide to *clients*?	○	○
(5) If you are registering or registered with the SEC and you have answered "yes," have you overcome the presumption that you are not operationally independent (pursuant to Advisers Act rule 206(4)(2)-(d)(5)) from the *related person* broker-dealer, and thus are not required to obtain a surprise examination for your *clients'* funds or securities that are maintained at the *related person* ?	○	○

Related Person Adviser's SEC File Number (if any)
801- 64662

Related Person's CRD Number (if any):
136865

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(1) Legal Name of *Related Person*:
ING INVESTMENT MANAGEMENT CO.

(2) Primary Business Name of *Related Person*:
ING INVESTMENT MANAGEMENT CO.

(3) *Related Person* is (check only one box):

◉ Investment Adviser

○ Broker-Dealer

○ Dual (Investment Adviser and Broker-Dealer)

	Yes	No
(4) If the *related person* is a broker-dealer, is it a qualified custodian for your *clients* in connection with advisory services you provide to *clients*?	○	○
(5) If you are registering or registered with the SEC and you have answered "yes," have you overcome the presumption that you are not operationally independent (pursuant to Advisers Act rule 206(4)(2)-(d)(5)) from the *related person* broker-dealer, and thus are not required to obtain a surprise examination for your *clients'* funds or securities that are maintained at the *related person* ?	○	○

Related Person Adviser's SEC File Number (if any)
801- 9046

Related Person's CRD Number (if any):

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(1) Legal Name of *Related Person*:
ING INVESTMENT MANAGEMENT ADVISORS B.V.

(2) Primary Business Name of *Related Person*:
ING INVESTMENT MANAGEMENT ADVISORS B.V.

(3) *Related Person* is (check only one box):

◉ Investment Adviser

○ Broker-Dealer

○ Dual (Investment Adviser and Broker-Dealer)

	Yes	No
(4) If the *related person* is a broker-dealer, is it a qualified custodian for your *clients* in connection with advisory services you provide to *clients*?	○	○
(5) If you are registering or registered with the SEC and you have answered "yes," have you overcome the presumption that you are not operationally independent (pursuant to Advisers Act rule 206(4)(2)-(d)(5)) from the *related person* broker-dealer, and thus are not required to obtain a surprise examination for your *clients'* funds or securities that are maintained at the *related person* ?	○	○

Related Person Adviser's SEC File Number (if any)
801- 40494

Related Person's CRD Number (if any):

(1) Legal Name of *Related Person*:
DIRECTED SERVICES LLC

(2) Primary Business Name of *Related Person*:
DIRECTED SERVICES LLC

(3) *Related Person* is (check only one box):

○ Investment Adviser

○ Broker-Dealer

◉ Dual (Investment Adviser and Broker-Dealer)

	Yes	No
(4) If the *related person* is a broker-dealer, is it a qualified custodian for your *clients* in connection with advisory services you provide to *clients*?	○	○
(5) If you are registering or registered with the SEC and you have answered "yes," have you overcome the presumption that you are not operationally independent (pursuant to Advisers Act rule 206(4)(2)-(d)(5)) from the *related person* broker-dealer, and thus are not required to obtain a surprise examination for your *clients'* funds or securities that are maintained at the *related person* ?	○	○

Related Person Adviser's SEC File Number (if any)
801- 32675

Related Person's CRD Number (if any):
21675

(1) Legal Name of *Related Person*:
ING ALTERNATIVE ASSET MANAGEMENT LLC

(2) Primary Business Name of *Related Person*:
ING ALTERNATIVE ASSET MANAGEMENT LLC

(3) *Related Person* is (check only one box):

- [x] Investment Adviser
- [ ] Broker-Dealer
- [ ] Dual (Investment Adviser and Broker-Dealer)

	Yes	No
(4) If the *related person* is a broker-dealer, is it a qualified custodian for your *clients* in connection with advisory services you provide to *clients*?	○	○
(5) If you are registering or registered with the SEC and you have answered "yes," have you overcome the presumption that you are not operationally independent (pursuant to Advisers Act rule 206(4)(2)-(d)(5)) from the *related person* broker-dealer, and thus are not required to obtain a surprise examination for your *clients'* funds or securities that are maintained at the *related person* ?	○	○

Related Person Adviser's SEC File Number (if any)
801- 51125

Related Person's CRD Number (if any):

(1) Legal Name of *Related Person*:
ING CLARION CAPITAL, LLC

(2) Primary Business Name of *Related Person*:
ING CLARION CAPITAL, LLC

(3) *Related Person* is (check only one box):

- [x] Investment Adviser
- [ ] Broker-Dealer
- [ ] Dual (Investment Adviser and Broker-Dealer)

	Yes	No
(4) If the *related person* is a broker-dealer, is it a qualified custodian for your *clients* in connection with advisory services you provide to *clients*?	○	○
(5) If you are registering or registered with the SEC and you have answered "yes," have you overcome the presumption that you are not operationally independent (pursuant to Advisers Act rule 206(4)(2)-(d)(5)) from the *related person* broker-dealer, and thus are not required to obtain a surprise examination for your *clients'* funds or securities that are maintained at the *related person* ?	○	○

Related Person Adviser's SEC File Number (if any)
801- 111289

Related Person's CRD Number (if any):

(1) Legal Name of *Related Person*:
ING FINANCIAL MARKETS LLC

(2) Primary Business Name of *Related Person*:

ING FINANCIAL MARKETS LLC

(3) *Related Person* is (check only one box):

- ○ Investment Adviser
- ◉ Broker-Dealer
- ○ Dual (Investment Adviser and Broker-Dealer)

	Yes	No
(4) If the *related person* is a broker-dealer, is it a qualified custodian for your *clients* in connection with advisory services you provide to *clients*?	○	○
(5) If you are registering or registered with the SEC and you have answered "yes," have you overcome the presumption that you are not operationally independent (pursuant to Advisers Act rule 206(4)(2)-(d)(5)) from the *related person* broker-dealer, and thus are not required to obtain a surprise examination for your *clients'* funds or securities that are maintained at the *related person* ?	○	○

Related Person Adviser's SEC File Number (if any)
801- 63468

Related Person's CRD Number (if any):
28872

(1) Legal Name of *Related Person*:
ING INVESTMENT MANAGEMENT ASIA/PACIFIC (HONG KONG) LTD

(2) Primary Business Name of *Related Person*:
ING INVESTMENT MANAGEMENT ASIA/PACIFIC (HONG KONG) LTD

(3) *Related Person* is (check only one box):

- ◉ Investment Adviser
- ○ Broker-Dealer
- ○ Dual (Investment Adviser and Broker-Dealer)

	Yes	No
(4) If the *related person* is a broker-dealer, is it a qualified custodian for your *clients* in connection with advisory services you provide to *clients*?	○	○
(5) If you are registering or registered with the SEC and you have answered "yes," have you overcome the presumption that you are not operationally independent (pursuant to Advisers Act rule 206(4)(2)-(d)(5)) from the *related person* broker-dealer, and thus are not required to obtain a surprise examination for your *clients'* funds or securities that are maintained at the *related person* ?	○	○

Related Person Adviser's SEC File Number (if any)
801- 64490

Related Person's CRD Number (if any):
136016

(1) Legal Name of *Related Person*:

ING INVESTMENT MANAGEMENT LLC

(2) Primary Business Name of *Related Person*:
ING INVESTMENT MANAGEMENT LLC

(3) *Related Person* is (check only one box):

- (•) Investment Adviser
- ( ) Broker-Dealer
- ( ) Dual (Investment Adviser and Broker-Dealer)

	Yes	No
(4) If the *related person* is a broker-dealer, is it a qualified custodian for your *clients* in connection with advisory services you provide to *clients*?	( )	( )
(5) If you are registering or registered with the SEC and you have answered "yes," have you overcome the presumption that you are not operationally independent (pursuant to Advisers Act rule 206(4)(2)-(d)(5)) from the *related person* broker-dealer, and thus are not required to obtain a surprise examination for your *clients'* funds or securities that are maintained at the *related person* ?	( )	( )

Related Person Adviser's SEC File Number (if any)
801- 55232

Related Person's CRD Number (if any):

(1) Legal Name of *Related Person*:
ING INVESTMENTS, LLC

(2) Primary Business Name of *Related Person*:
ING INVESTMENTS, LLC

(3) *Related Person* is (check only one box):

- (•) Investment Adviser
- ( ) Broker-Dealer
- ( ) Dual (Investment Adviser and Broker-Dealer)

	Yes	No
(4) If the *related person* is a broker-dealer, is it a qualified custodian for your *clients* in connection with advisory services you provide to *clients*?	( )	( )
(5) If you are registering or registered with the SEC and you have answered "yes," have you overcome the presumption that you are not operationally independent (pursuant to Advisers Act rule 206(4)(2)-(d)(5)) from the *related person* broker-dealer, and thus are not required to obtain a surprise examination for your *clients'* funds or securities that are maintained at the *related person* ?	( )	( )

Related Person Adviser's SEC File Number (if any)
801- 48202

Related Person's CRD Number (if any):

(1) Legal Name of *Related Person*:
ING FINANCIAL ADVISORS, LLC

(2) Primary Business Name of *Related Person*:
ING FINANCIAL ADVISORS, LLC

(3) *Related Person* is (check only one box):

- ○ Investment Adviser
- ○ Broker-Dealer
- ◉ Dual (Investment Adviser and Broker-Dealer)

	Yes	No
(4) If the *related person* is a broker-dealer, is it a qualified custodian for your *clients* in connection with advisory services you provide to *clients*?	○	○
(5) If you are registering or registered with the SEC and you have answered "yes," have you overcome the presumption that you are not operationally independent (pursuant to Advisers Act rule 206(4)(2)-(d)(5)) from the *related person* broker-dealer, and thus are not required to obtain a surprise examination for your *clients'* funds or securities that are maintained at the *related person* ?	○	○

Related Person Adviser's SEC File Number (if any)
801- 57637

Related Person's CRD Number (if any):
34815

(1) Legal Name of *Related Person*:
ING INVESTMENT ADVISORS, LLC

(2) Primary Business Name of *Related Person*:
ING INVESTMENT ADVISORS, LLC

(3) *Related Person* is (check only one box):

- ○ Investment Adviser
- ○ Broker-Dealer
- ◉ Dual (Investment Adviser and Broker-Dealer)

	Yes	No
(4) If the *related person* is a broker-dealer, is it a qualified custodian for your *clients* in connection with advisory services you provide to *clients*?	○	○
(5) If you are registering or registered with the SEC and you have answered "yes," have you overcome the presumption that you are not operationally independent (pursuant to Advisers Act rule 206(4)(2)-(d)(5)) from the *related person* broker-dealer, and thus are not required to obtain a surprise examination for your *clients'* funds or securities that are maintained at the *related person* ?	○	○

Related Person Adviser's SEC File Number (if any)
801- 57963

Related Person's CRD Number (if any):
3989

(1) Legal Name of *Related Person*:
POMONA MANAGEMENT LLC, DBA, POMONA CAPITAL

(2) Primary Business Name of *Related Person*:
POMONA CAPITAL

(3) *Related Person* is (check only one box):

- (•) Investment Adviser
- ( ) Broker-Dealer
- ( ) Dual (Investment Adviser and Broker-Dealer)

	Yes	No
(4) If the *related person* is a broker-dealer, is it a qualified custodian for your *clients* in connection with advisory services you provide to *clients*?	( )	( )
(5) If you are registering or registered with the SEC and you have answered "yes," have you overcome the presumption that you are not operationally independent (pursuant to Advisers Act rule 206(4)(2)-(d)(5)) from the *related person* broker-dealer, and thus are not required to obtain a surprise examination for your *clients'* funds or securities that are maintained at the *related person* ?	( )	( )

Related Person Adviser's SEC File Number (if any)
801- 69755

Related Person's CRD Number (if any):
148269

(1) Legal Name of *Related Person*:
ING CLARION REAL ESTATE SECURITIES, L.P.

(2) Primary Business Name of *Related Person*:
ING CLARION REAL ESTATE SECURITIES, L.P.

(3) *Related Person* is (check only one box):

- (•) Investment Adviser
- ( ) Broker-Dealer
- ( ) Dual (Investment Adviser and Broker-Dealer)

	Yes	No
(4) If the *related person* is a broker-dealer, is it a qualified custodian for your *clients* in connection with advisory services you provide to *clients*?	( )	( )
(5) If you are registering or registered with the SEC and you have answered "yes," have you overcome the presumption that you are not operationally independent (pursuant to Advisers Act rule 206(4)(2)-(d)(5)) from the *related person* broker-dealer, and thus are not required to obtain a surprise examination for your *clients'* funds or securities that are maintained at the *related person* ?	( )	( )

Related Person Adviser's SEC File Number (if any)
801- 49083

Related Person's CRD Number (if any):
106256

Section 7.B. Limited Partnership Participation or Other Private Fund Participation
You must complete a separate Schedule D Page 4 for each limited partnership in which you or a *related person* is a general partner, each limited liability company for which you or a *related person* is a manager, and each other private fund that you advise.
No Information Filed

Section 9.C. Independent Public Accountant

No Information Filed

Section 9.D. Related Person Qualified Custodian

No Information Filed

Section 10 *Control Persons*

You must complete a separate Schedule D Page 4 for each *control person* not named in Item 1.A. or Schedules A, B, or C that directly or indirectly *controls* your management or policies.

No Information Filed

Schedule D - Miscellaneous

You may use the space below to explain a response to an Item or to provide any other information.

WASHINGTON SQUARE SECURITIES, INC. IS REQUESTING THE REMOVAL OF THE DRP RELATING TO QUESTION 11H(2). 11H(2) WAS ANSWERED AFFIRMATIVELY IN ERROR. THE EVENT FOR WHICH THE QUESTION WAS ANSWERED AND THE DRP COMPLETED, WAS A CIVIL ACTION BETWEEN A CLIENT AND GENERAL AMERICAN LIFE INSURANCE COMPANY AND JACK SARGENT AND ASSOCIATES INC. ONE OF THE "ASSOCIATES" BECAME AN AFFILIATE OF WASHINGTON SQUARE SECURITIES, INC. THE CIVIL ACTION WAS DISMISSED PURSUANT TO A SETTLEMENT AGREEMENT BETWEEN THE CLIENT AND GENERAL AMERICAN LIFE INSURANCE COMPANY AND JACK SARGENT AND ASSOCIATES INC. NO ACTION WAS BROUGHT BY A STATE OR FOREIGN FINANCIAL REGULATORY AUTHORITY. WE REQUEST THAT THE DRP BE REMOVED SO WE MAY AMEND THE ANSWER TO QUESTION 11H(2) TO "NO" WHICH IS THE CORRECT RESPONSE TO THIS QUESTION.

FORM ADV

OMB: 3235-0049

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: ING FINANCIAL PARTNERS, INC	IARD/CRD Number: 2882
	Rev. 11/2010

Form ADV, DRPs

CRIMINAL DISCLOSURE REPORTING PAGE (ADV)

No Information Filed

REGULATORY ACTION DISCLOSURE REPORTING PAGE (ADV)

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP ADV) is an ◉ INITIAL ***OR*** ○ AMENDED response used to report details for affirmative responses to Items 11.C., 11.D., 11.E., 11.F. or 11.G. of Form ADV.

Check item(s) being responded to:

Regulatory Action

☐ 11.C(1)	☐ 11.C(5)	☑ 11.D(4)	☐ 11.E(3)
☐ 11.C(2)	☐ 11.D(1)	☐ 11.D(5)	☐ 11.E(4)
☐ 11.C(3)	☑ 11.D(2)	☐ 11.E(1)	☐ 11.F
☐ 11.C(4)	☐ 11.D(3)	☐ 11.E(2)	☐ 11.G

Use a separate DRP for each event or *proceeding*. The same event or *proceeding* may be reported for more than one *person* or entity using one DRP. File with a completed Execution Page.

One event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

PART I

A. The *person(s)* or entity(ies) for whom this DRP is being filed is (are):

◉ You (the advisory firm)

○ You and one or more of your *advisory affiliates*

○ One or more of your *advisory affiliates*

If this DRP is being filed for an *advisory affiliate*, give the full name of the *advisory affiliate* below (for individuals, Last name, First name, Middle name).

If the *advisory affiliate* has a *CRD* number, provide that number. If not, indicate "non-registered" by checking the appropriate box.

ADV DRP - *ADVISORY AFFILIATE*
No Information Filed

☐ This DRP should be removed from the ADV record because the *advisory affiliate(s)* is no longer associated with the adviser.

☐ This DRP should be removed from the ADV record because: (1) the event or *proceeding* occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or *advisory affiliate's* favor.

If you are registered or registering with a *state securities authority*, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.

B. If the *advisory affiliate* is registered through the IARD system or *CRD* system, has the *advisory affiliate* submitted a DRP (with Form ADV, BD or U-4) to the IARD or *CRD* for the event? If the answer is "Yes," no other information on this DRP must be provided.

○ *Yes* ○ *No*

NOTE: The completion of this form does not relieve the *advisory affiliate* of its obligation to update its IARD or *CRD* records.

PART II

1. Regulatory Action initiated by:
   ○ SEC ○ Other Federal ◉ State ○ *SRO* ○ Foreign
   (Full name of regulator, *foreign financial regulatory authority*, federal, state, or *SRO*)
   FLORIDA DEPT OF BANKING & FINANCE, DIV. OF SECURITIES

2. Principal Sanction:
   Other
   Other Sanctions:
   STIPULATION AND CONTROL AGREEMENT

3. Date Initiated (MM/DD/YYYY):
   04/26/2000 ◉ Exact ○ Explanation
   If not exact, provide explanation:

4. Docket/Case Number:
   2962-S-5/00

5. *Advisory Affiliate* Employing Firm when activity occurred which led to the regulatory action (if applicable):
   N/A

6. Principal Product Type:
No Product
Other Product Types:

7. Describe the allegations related to this regulatory action (your response must fit within the space provided):
DURING A REVIEW OF PENDING BRANCH OFFICE APPLICATIONS, THE FLORIDA DEPT. OF BANKING & FINANCE, DIV. OF SECURITIES, DETERMINED THAT WSSI OPERATED THESE LOCATIONS IN THE STATE WITHOUT THE BENEFIT OF REGISTRATION SINCE APRIL 1, 2000, WHEN WSSI FAILED TO RENEW ON A TIMELY BASIS.

8. Current status ? ○ Pending ○ On Appeal ◉ Final

9. If on appeal, regulatory action appealed to (SEC, *SRO*, Federal or State Court) and Date Appeal Filed:

If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.

10. How was matter resolved:
Stipulation and Consent

11. Resolution Date (MM/DD/YYYY):
06/20/2000 ◉ Exact ○ Explanation
If not exact, provide explanation:

12. Resolution Detail:

A. Were any of the following Sanctions *Ordered* (check all appropriate items)?

☐ Monetary/Fine Amount:$

☐ Revocation/Expulsion/Denial

☐ Censure

☐ Bar

☐ Disgorgement/Restitution

☐ Cease and Desist/Injunction

☐ Suspension

B. Other Sanctions *Ordered*:
$5,000 TO COVER THE COSTS OF THE PROCEEDINGS

Sanction detail: if suspended, *enjoined* or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an *advisory affiliate*, date paid and if any portion of penalty was waived:
$5,000 TO COVER THE COSTS OF THE PROCEEDINGS, ALL OF WHICH WAS PAID BY WSSI. COSTS WERE PAID BY WSSI ON JUNE 5, 2000.

13. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the space provided.)
MATTER RESOLVED ON JUNE 20, 2000.

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP ADV) is an ◉ INITIAL ***OR*** ○ AMENDED response used to report details for affirmative responses to Items 11.C., 11.D., 11.E., 11.F. or 11.G. of Form ADV.

Check item(s) being responded to:

Regulatory Action			
☐ 11.C(1)	☐ 11.C(5)	☑ 11.D(4)	☐ 11.E(3)
☐ 11.C(2)	☐ 11.D(1)	☐ 11.D(5)	☐ 11.E(4)
☐ 11.C(3)	☑ 11.D(2)	☐ 11.E(1)	☐ 11.F
☐ 11.C(4)	☐ 11.D(3)	☐ 11.E(2)	☐ 11.G

Use a separate DRP for each event or *proceeding*. The same event or *proceeding* may be reported for more than one *person* or entity using one DRP. File with a completed Execution Page.

One event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

PART I

A. The *person(s)* or entity(ies) for whom this DRP is being filed is (are):

◉ You (the advisory firm)

○ You and one or more of your *advisory affiliates*

○ One or more of your *advisory affiliates*

If this DRP is being filed for an *advisory affiliate*, give the full name of the *advisory affiliate* below (for individuals, Last name, First name, Middle name).

If the *advisory affiliate* has a *CRD* number, provide that number. If not, indicate "non-registered" by checking the appropriate box.

ADV DRP - *ADVISORY AFFILIATE*
No Information Filed

☐ This DRP should be removed from the ADV record because the *advisory affiliate(s)* is no longer associated with the adviser.

☐ This DRP should be removed from the ADV record because: (1) the event or *proceeding* occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or *advisory affiliate's* favor.

If you are registered or registering with a *state securities authority*, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.

B. If the *advisory affiliate* is registered through the IARD system or *CRD* system, has the *advisory affiliate* submitted a DRP (with Form ADV, BD or U-4) to the IARD or *CRD* for the event? If the answer is "Yes," no other information on this DRP must be provided.

○ Yes ○ No

NOTE: The completion of this form does not relieve the *advisory affiliate* of its obligation to update its IARD or *CRD* records.

PART II

1. Regulatory Action initiated by:
○ SEC ○ Other Federal ◉ State ○ *SRO* ○ Foreign
(Full name of regulator, *foreign financial regulatory authority*, federal, state, or *SRO*)
STATE OF ILLINOIS SECURITIES DEPARTMENT

2. Principal Sanction:
Civil and Administrative Penalt(ies) /Fine(s)
Other Sanctions:
RESTITUTION

3. Date Initiated (MM/DD/YYYY):
09/12/2008 ◉ Exact ○ Explanation
If not exact, provide explanation:

4. Docket/Case Number:
FILE NO. 0600566

5. *Advisory Affiliate* Employing Firm when activity occurred which led to the regulatory action (if applicable):

6. Principal Product Type:
Investment Contract(s)
Other Product Types:

7. Describe the allegations related to this regulatory action (your response must fit within the space provided):
THE ILLINOIS SECURITIES DEPARTMENT ("DEPARTMENT") ALLEGES THAT TWO FORMER REGISTERED REPRESENTATIVES OF ING FINANCIAL PARTNERS, INC. ("FIRM"), NEVIN GILLETTE AND RICHARD WELLS, PROCURED FUNDS FROM CERTAIN INVESTORS BY TELLING SUCH INVESTORS THAT THEY WOULD INVEST SUCH FUNDS IN SO CALLED GUARANTEED INVESTMENT CONTRACTS AND OTHER INSTRUMENTS (GILLETTE) AND SO CALLED MUTUAL BOND TRUSTS OR OTHER INSTRUMENTS (WELLS), WHEN IN FACT NEITHER GILLETTE NOR WELLS MADE SUCH INVESTMENTS BUT RATHER CONVERTED INVESTORS' FUNDS TO THEIR OWN USE AND BENEFIT. THE DEPARTMENT ALSO ALLEGES THE FIRM AND ITS PREDECESSOR FIRM LOCUST STREET SECURITIES, INC. DID NOT ENGAGE IN OVERSIGHT THAT UNCOVERED GILLETTE'S OR WELLS' MISCONDUCT.

8. Current status ? ○ Pending ○ On Appeal ◉ Final

9. If on appeal, regulatory action appealed to (SEC, *SRO*, Federal or State Court) and Date Appeal Filed:

If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.

10. How was matter resolved:

Consent

11. Resolution Date (MM/DD/YYYY):

09/12/2008 ◉ Exact ○ Explanation

If not exact, provide explanation:

12. Resolution Detail:

A. Were any of the following Sanctions *Ordered* (check all appropriate items)?

☑ Monetary/Fine Amount:$ 110000

☐ Revocation/Expulsion/Denial

☐ Censure

☐ Bar

☑ Disgorgement/Restitution

☐ Cease and Desist/Injunction

☐ Suspension

B. Other Sanctions *Ordered*:

Sanction detail: if suspended, *enjoined* or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an *advisory affiliate*, date paid and if any portion of penalty was waived:
WITHOUT ADMITTING THE DEPARTMENT'S FINDINGS AND CONCLUSIONS, THE FIRM ENTERED INTO A CONSENT ORDER WITH THE DEPARTMENT REQUIRING THE FIRM TO PAY $110,000 TO THE SECRETARY OF STATE, SECURITIES INVESTOR EDUCATION FUND WITHIN TEN (10) DAYS OF THE EFFECTIVE DATE OF THE CONSENT ORDER AND PURSUANT TO THIS AGREEMENT THE FIRM MADE SETTLEMENT OFFERS TO CERTAIN FORMER CUSTOMERS OF GILLETTE IN THE AMOUNT OF $4,230,538 AND SETTLEMENTS OFFERS TO CERTAIN FORMER CUSTOMERS OF WELLS IN THE AMOUNT OF $336,788.22.

13. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the space provided.)

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP ADV) is an ◉ INITIAL ***OR*** ○ AMENDED response used to report details for affirmative responses to Items 11.C., 11.D., 11.E., 11.F. or 11.G. of Form ADV.

Check item(s) being responded to:

Regulatory Action

☐ 11.C(1)	☐ 11.C(5)	☑ 11.D(4)	☐ 11.E(3)
☐ 11.C(2)	☐ 11.D(1)	☐ 11.D(5)	☐ 11.E(4)
☐ 11.C(3)	☑ 11.D(2)	☐ 11.E(1)	☐ 11.F
☐ 11.C(4)	☐ 11.D(3)	☐ 11.E(2)	☐ 11.G

Use a separate DRP for each event or *proceeding*. The same event or *proceeding* may be reported for more than one *person* or entity using one DRP. File with a completed Execution Page.

One event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

PART I

A. The *person(s)* or entity(ies) for whom this DRP is being filed is (are):

- (●) You (the advisory firm)
- ( ) You and one or more of your *advisory affiliates*
- ( ) One or more of your *advisory affiliates*

If this DRP is being filed for an *advisory affiliate*, give the full name of the *advisory affiliate* below (for individuals, Last name, First name, Middle name).

If the *advisory affiliate* has a *CRD* number, provide that number. If not, indicate "non-registered" by checking the appropriate box.

ADV DRP - *ADVISORY AFFILIATE*
No Information Filed

[ ] This DRP should be removed from the ADV record because the *advisory affiliate(s)* is no longer associated with the adviser.

[ ] This DRP should be removed from the ADV record because: (1) the event or *proceeding* occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or *advisory affiliate's* favor.

If you are registered or registering with a *state securities authority*, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.

B. If the *advisory affiliate* is registered through the IARD system or *CRD* system, has the *advisory affiliate* submitted a DRP (with Form ADV, BD or U-4) to the IARD or *CRD* for the event? If the answer is "Yes," no other information on this DRP must be provided.

( ) *Yes* ( ) *No*

NOTE: The completion of this form does not relieve the *advisory affiliate* of its obligation to update its IARD or *CRD* records.

PART II

1. Regulatory Action initiated by:

( ) SEC ( ) Other Federal (●) State ( ) *SRO* ( ) Foreign

(Full name of regulator, *foreign financial regulatory authority*, federal, state, or *SRO*)

STATE OF VERMONT DEPARTMENT OF BANKING, INSURANCE, SECURITIES AND HEALTH CARE ADMINISTRATION

2. Principal Sanction:

Civil and Administrative Penalt(ies) /Fine(s)

Other Sanctions:

3. Date Initiated (MM/DD/YYYY):
08/30/2007 (●) Exact ( ) Explanation
If not exact, provide explanation:

4. Docket/Case Number:
07-062-I

5. *Advisory Affiliate* Employing Firm when activity occurred which led to the regulatory action (if applicable):

6. Principal Product Type:
No Product
Other Product Types:

7. Describe the allegations related to this regulatory action (your response must fit within the space provided):
THE VERMONT INSURANCE DEPARTMENT RECEIVED INFORMATION THAT ING FINANCIAL PARTNERS FAILED TO ESTABLISH PROCEDURES TO COMPLY WITH THE REPORTING REQUIREMENTS OF TITLE 8, SECTION 4813 O (A) OF THE VERMONT STATUTES WITH RESPECT TO REPORTING PUBLICLY AVAILABLE SECURITIES ADMINISTRATIVE ACTIONS TO THE INSURANCE DEPARTMENT.

8. Current status ? ( ) Pending ( ) On Appeal (●) Final

9. If on appeal, regulatory action appealed to (SEC, *SRO*, Federal or State Court) and Date Appeal Filed:

If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.

10. How was matter resolved:
Stipulation and Consent

11. Resolution Date (MM/DD/YYYY):
08/30/2007 (●) Exact ( ) Explanation
If not exact, provide explanation:

12. Resolution Detail:

A. Were any of the following Sanctions *Ordered* (check all appropriate items)?

- [x] Monetary/Fine Amount:$ 500
- [ ] Revocation/Expulsion/Denial
- [ ] Disgorgement/Restitution
- [ ] Censure
- [ ] Cease and Desist/Injunction
- [ ] Bar
- [ ] Suspension

B. Other Sanctions *Ordered*:

Sanction detail: if suspended, *enjoined* or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an *advisory affiliate*, date paid and if any portion of penalty was waived:
THE FIRM WAS ORDERED TO PAY AN ADMINISTRATIVE PENALTY OF $500 WHICH WAS PAID ON AUGUST 23, 2007.

13. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the space provided.)
THE VERMONT INSURANCE DEPARTMENT RECEIVED INFORMATION THAT ING FINANCIAL PARTNERS FAILED TO ESTABLISH PROCEDURES TO COMPLY WITH THE REPORTING REQUIREMENTS OF TITLE 8, SECTION 4813 O (A) OF THE VERMONT STATUTES WITH RESPECT TO REPORTING PUBLICLY AVAILABLE SECURITIES ADMINISTRATIVE ACTIONS TO THE INSURANCE DEPARTMENT. THE DEPARTMENT AND THE FIRM ENTERED INTO A STIPULATION AND CONSENT ORDER IN WHICH THE FIRM NEITHER ADMITTED NOR DENIED THAT IT FAILED TO ESTABLISH SUCH PROCEDURES. THE FIRM WAS ORDERED TO PAY A $500 ADMINISTRATIVE FINE.

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP ADV) is an ◉ INITIAL ***OR*** ○ AMENDED response used to report details for affirmative responses to Items 11.C., 11.D., 11.E., 11.F. or 11.G. of Form ADV.

Check item(s) being responded to:

Regulatory Action

☐ 11.C(1)	☐ 11.C(5)	☐ 11.D(4)	☐ 11.E(3)
☐ 11.C(2)	☐ 11.D(1)	☐ 11.D(5)	☐ 11.E(4)
☐ 11.C(3)	☐ 11.D(2)	☐ 11.E(1)	☐ 11.F
☐ 11.C(4)	☐ 11.D(3)	☑ 11.E(2)	☐ 11.G

Use a separate DRP for each event or *proceeding*. The same event or *proceeding* may be reported for more than one *person* or entity using one DRP. File with a completed Execution Page.

One event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

PART I

A. The *person(s)* or entity(ies) for whom this DRP is being filed is (are):

○ You (the advisory firm)

◉ You and one or more of your *advisory affiliates*

○ One or more of your *advisory affiliates*

If this DRP is being filed for an *advisory affiliate*, give the full name of the *advisory affiliate* below (for individuals, Last name, First name, Middle name).

If the *advisory affiliate* has a *CRD* number, provide that number. If not, indicate "non-registered" by checking the appropriate box.

ADV DRP - *ADVISORY AFFILIATE*		
CRD Number:	13572	This *advisory affiliate* is ◉ a Firm ○ an Individual
Registered:	◉ Yes ○ No	
Name:	FINANCIAL NETWORK INVESTMENT CORPORATION (For individuals, Last, First, Middle)	
CRD Number:	10299	This *advisory affiliate* is ◉ a Firm ○ an Individual
Registered:	◉ Yes ○ No	
Name:	MULTI-FINANCIAL SECURITIES CORPORATION (For individuals, Last, First, Middle)	
CRD Number:	15340	This *advisory affiliate* is ◉ a Firm ○ an Individual
Registered:	◉ Yes ○ No	
Name:	PRIMEVEST FINANCIAL SERVICES, INC. (For individuals, Last, First, Middle)	

☐ This DRP should be removed from the ADV record because the *advisory affiliate(s)* is no longer associated with the adviser.

☐ This DRP should be removed from the ADV record because: (1) the event or *proceeding* occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or *advisory affiliate's* favor.

If you are registered or registering with a *state securities authority*, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.

B. If the *advisory affiliate* is registered through the IARD system or *CRD* system, has the *advisory affiliate* submitted a DRP (with Form ADV, BD or U-4) to the IARD or *CRD* for the event? If the answer is "Yes," no other information on this DRP must be provided.

◉ *Yes* ○ *No*

NOTE: The completion of this form does not relieve the *advisory affiliate* of its obligation to update its IARD or *CRD* records.

PART II

1. Regulatory Action initiated by:

○ SEC ○ Other Federal ○ State ◉ *SRO* ○ Foreign

(Full name of regulator, *foreign financial regulatory authority*, federal, state, or *SRO*)

NATIONAL ASSOCIATION OF SECURITIES DEALERS (NASD)

2. Principal Sanction:

Civil and Administrative Penalt(ies) /Fine(s)

Other Sanctions:

CENSURE

3. Date Initiated (MM/DD/YYYY):
07/27/2006 (•) Exact ( ) Explanation
If not exact, provide explanation:

4. Docket/Case Number:
NO. EAF0400760002

5. *Advisory Affiliate* Employing Firm when activity occurred which led to the regulatory action (if applicable):

6. Principal Product Type:
Mutual Fund(s)
Other Product Types:

7. Describe the allegations related to this regulatory action (your response must fit within the space provided):
ING FINANCIAL PARTNERS AND ITS CONTROL AFFILIATES [PRIMEVEST FINANCIAL SERVICES, INC, FINANCIAL NETWORK INVESTMENT CORPORATION, INC, MULTI-FINANCIAL SECURITIES CORPORATION, INC.] (THE "FIRMS") SIGNED AN ACCEPTANCE, WAIVER AND CONSENT IN WHICH THE NASD FOUND THAT THE FIRMS MAINTAINED A STRATEGIC PARTNER PROGRAM WHEREBY THE FIRMS RECEIVED DIRECTED BROKERAGE COMMISSIONS FROM MUTUAL FUNDS TO PAY FOR PARTICIPATION IN THE PROGRAM, WHICH VIOLATED NASD RULES 2830(K)(1) AND 2110.

8. Current status ? ( ) Pending ( ) On Appeal (•) Final

9. If on appeal, regulatory action appealed to (SEC, *SRO*, Federal or State Court) and Date Appeal Filed:

If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.

10. How was matter resolved:
Acceptance, Waiver & Consent(AWC)

11. Resolution Date (MM/DD/YYYY):
07/27/2006 (•) Exact ( ) Explanation
If not exact, provide explanation:

12. Resolution Detail:

A. Were any of the following Sanctions *Ordered* (check all appropriate items)?

- [x] Monetary/Fine Amount:$ 1291000
- [ ] Revocation/Expulsion/Denial
- [ ] Disgorgement/Restitution
- [x] Censure
- [ ] Cease and Desist/Injunction
- [ ] Bar
- [ ] Suspension

B. Other Sanctions *Ordered*:

Sanction detail: if suspended, *enjoined* or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an *advisory affiliate*, date paid and if any portion of penalty was waived:
TOTAL MONETARY FINE - $7,000,000 FINANCIAL NETWORK INVESTMENT CORPORATION - $3,415,000 ING FINANCIAL PARTNERS - $1,291,000 PRIMEVEST FINANCIAL SERVICES - $1,066,000 MULTI-FINANCIAL SECURITIES CORPORATION - $1,228,000

13. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the space provided.)
ING FINANCIAL PARTNERS AND ITS CONTROL AFFILIATES [PRIMEVEST FINANCIAL SERVICES, INC, FINANCIAL NETWORK INVESTMENT CORPORATION, INC, MULTI-FINANCIAL SECURITIES CORPORATION, INC] (THE "FIRMS") SIGNED AN ACCEPTANCE, WAIVER AND CONSENT ON 07/27/2006. THE FIRMS WERE FINED A TOTAL OF $7,000,000 AND CENSURED. ING FINANCIAL PARTNERS IS RESPONSIBLE FOR A FINE AMOUNT OF $1,291,000.

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP ADV) is an ○ INITIAL ***OR*** ◉ AMENDED response used to report details for affirmative responses to Items 11.C., 11.D., 11.E., 11.F. or 11.G. of Form ADV.

Check item(s) being responded to:

Regulatory Action

☐ 11.C(1)	☑ 11.C(5)	☐ 11.D(4)	☐ 11.E(3)
☑ 11.C(2)	☐ 11.D(1)	☐ 11.D(5)	☐ 11.E(4)
☐ 11.C(3)	☐ 11.D(2)	☐ 11.E(1)	☐ 11.F
☑ 11.C(4)	☐ 11.D(3)	☐ 11.E(2)	☐ 11.G

Use a separate DRP for each event or *proceeding*. The same event or *proceeding* may be reported for more than one *person* or entity using one DRP. File with a completed Execution Page.

One event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

PART I

A. The *person(s)* or entity(ies) for whom this DRP is being filed is (are):

○ You (the advisory firm)

○ You and one or more of your *advisory affiliates*

◉ One or more of your *advisory affiliates*

If this DRP is being filed for an *advisory affiliate*, give the full name of the *advisory affiliate* below (for individuals, Last name, First name, Middle name).

If the *advisory affiliate* has a *CRD* number, provide that number. If not, indicate "non-registered" by checking the appropriate box.

ADV DRP - *ADVISORY AFFILIATE*

CRD Number:

This *advisory affiliate* is ◉ a Firm ○ an Individual

Registered: ○ Yes ◉ No

Name: ING GROEP N.V.
(For individuals, Last, First, Middle)

☐ This DRP should be removed from the ADV record because the *advisory affiliate(s)* is no longer associated with the adviser.

☐ This DRP should be removed from the ADV record because: (1) the event or *proceeding* occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or *advisory affiliate's* favor.

If you are registered or registering with a *state securities authority*, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.

B. If the *advisory affiliate* is registered through the IARD system or *CRD* system, has the *advisory affiliate* submitted a DRP (with Form ADV, BD or U-4) to the IARD or *CRD* for the event? If the answer is "Yes," no other information on this DRP must be provided.

○ *Yes* ◉ *No*

NOTE: The completion of this form does not relieve the *advisory affiliate* of its obligation to update its IARD or *CRD* records.

PART II

1. Regulatory Action initiated by:
◉ SEC ○ Other Federal ○ State ○ *SRO* ○ Foreign
(Full name of regulator, *foreign financial regulatory authority*, federal, state, or *SRO*)
SECURITIES AND EXCHANGE COMMISSION

2. Principal Sanction:
Cease and Desist
Other Sanctions:

3. Date Initiated (MM/DD/YYYY):
07/26/2005 ◉ Exact ○ Explanation
If not exact, provide explanation:

4. Docket/Case Number:
FILE NO. 3-11991

5. *Advisory Affiliate* Employing Firm when activity occurred which led to the regulatory action (if applicable):

6. Principal Product Type:
Equity Listed (Common & Preferred Stock)
Other Product Types:
PERFORMANCE SHARES AND OPTION AWARDS FOR ING EMPLOYEES

7. Describe the allegations related to this regulatory action (your response must fit within the space provided):
VIOLATIONS OF SECTION 5 OF THE SECURITIES ACT OF 1933.

8. Current status ? ○ Pending ○ On Appeal ◉ Final

9. If on appeal, regulatory action appealed to (SEC, *SRO*, Federal or State Court) and Date Appeal Filed:

If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.

10. How was matter resolved:
Order

11. Resolution Date (MM/DD/YYYY):
07/26/2005 ◉ Exact ○ Explanation
If not exact, provide explanation:

12. Resolution Detail:

A. Were any of the following Sanctions *Ordered* (check all appropriate items)?

☐ Monetary/Fine Amount:$
☐ Revocation/Expulsion/Denial
☐ Censure
☐ Bar
☐ Disgorgement/Restitution
☑ Cease and Desist/Injunction
☐ Suspension

B. Other Sanctions *Ordered*:
N/A
Sanction detail: if suspended, *enjoined* or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an *advisory affiliate*, date paid and if any portion of penalty was waived:
N/A

13. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the space provided.)
ON JULY 26, 2005, THE SEC ENTERED A CEASE-AND-DESIST ORDER (THE "ORDER") AGAINST ING BANK N.V. AND ING GROEP N.V., THE LATTER BEING AN ADVISORY AFFILIATE. ACCORDING TO THE ORDER, BETWEEN JUNE 4, 2002 AND JANUARY 29, 2004, ING BANK, N.V. RESOLD APPROXIMATELY $202 MILLION IN CERTAIN ING SECURITIES AND

SECURITIES OF ING AFFILIATES WHICH HAD BEEN ACQUIRED IN THE SECONDARY MARKET. ALTHOUGH THESE SECURITIES HAD INITIALLY BEEN SOLD PURSUANT TO REGISTRATION STATEMENTS OR VALID EXEMPTIONS, THE SEC DETERMINED THAT THEIR RESALE WITHOUT REGISTERING OR HAVING A VALID EXEMPTION FOR THE RESALE VIOLATED SECTION 5 OF THE SECURITIES ACT OF 1933 ("1933 ACT"). IN ADDITION, THE SEC DETERMINED THAT CERTAIN "PERFORMANCE SHARES" AND OPTIONS AWARDS TO ING EMPLOYEES VIOLATED SECTION 5 OF THE 1933 ACT BECAUSE NO REGISTRATION STATEMENT OR EXEMPTION WAS IN EFFECT FOR THE OFFER AND SALE OF THOSE SECURITIES. ACCORDING TO THE ORDER, ING VOLUNTARILY REPORTED THESE VIOLATIONS TO THE SEC, VOLUNTARILY PROVIDED ADDITIONAL INFORMATION TO THE SEC, AND FULLY COOPERATED WITH THE INVESTIGATION. ING ALSO VOLUNTARILY INSTITUTED REMEDIAL MEASURES. THE ORDER IMPOSED NO MONETARY PENALTIES.

GENERAL INSTRUCTIONS

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Check item(s) being responded to:

Regulatory Action

☐ 11.C(1)	☐ 11.C(5)	☑ 11.D(4)	☐ 11.E(3)
☐ 11.C(2)	☑ 11.D(1)	☐ 11.D(5)	☐ 11.E(4)
☐ 11.C(3)	☑ 11.D(2)	☐ 11.E(1)	☐ 11.F
☐ 11.C(4)	☐ 11.D(3)	☐ 11.E(2)	☐ 11.G

Use a separate DRP for each event or *proceeding*. The same event or *proceeding* may be reported for more than one *person* or entity using one DRP. File with a completed Execution Page.

One event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

PART I

A. The *person(s)* or entity(ies) for whom this DRP is being filed is (are):

◉ You (the advisory firm)

○ You and one or more of your *advisory affiliates*

○ One or more of your *advisory affiliates*

If this DRP is being filed for an *advisory affiliate*, give the full name of the *advisory affiliate* below (for individuals, Last name, First name, Middle name).

If the *advisory affiliate* has a *CRD* number, provide that number. If not, indicate "non-registered" by checking the appropriate box.

ADV DRP - *ADVISORY AFFILIATE*
No Information Filed

☐ This DRP should be removed from the ADV record because the *advisory affiliate(s)* is no longer associated with the adviser.

☐ This DRP should be removed from the ADV record because: (1) the event or *proceeding* occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or *advisory affiliate's* favor.

If you are registered or registering with a *state securities authority*, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.

B. If the *advisory affiliate* is registered through the IARD system or *CRD* system, has the *advisory affiliate* submitted a DRP (with Form ADV, BD or U-4) to the IARD or *CRD* for the event? If the answer is "Yes," no other information on this DRP must be provided.

○ *Yes* ○ *No*

NOTE: The completion of this form does not relieve the *advisory affiliate* of its obligation to update its IARD or *CRD* records.

PART II

1. Regulatory Action initiated by:
○ SEC ○ Other Federal ◉ State ○ *SRO* ○ Foreign
(Full name of regulator, *foreign financial regulatory authority*, federal, state, or *SRO*)
COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION- DIVISION OF SECURITIES

2. Principal Sanction:
Restitution
Other Sanctions:

3. Date Initiated (MM/DD/YYYY):
10/20/2000 ◉ Exact ○ Explanation
If not exact, provide explanation:

4. Docket/Case Number:
SEC-2002-00037

5. *Advisory Affiliate* Employing Firm when activity occurred which led to the regulatory action (if applicable):

6. Principal Product Type:
Other
Other Product Types:
US CAPITAL FUNDING NOTES AND ETS PAYPHONES

7. Describe the allegations related to this regulatory action (your response must fit within the space provided):
COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION ALLEGES THE FOLLOWING: WASHINGTON SQUARE SECURITIES, INC. (WSSI) WAS AND IS A BROKER-DEALER REGISTERED UNDER THE VIRGINIA SECURITIES ACT ANS WAS AS PROMULGATED UNDER THE ACT RESPONSIBLE FOR THE ACTIONS OF IT'S REGISTERED AGENTS, WILLIAM GUY, CANDACE BLOODSWORTH AND DAVID HENDERSON. VIRGINIA ALLEGES VIOLATIONS

OF THE VIRGINIA SECURITIES ACT AS A RESULT OF THE ACTIONS OF THE AFOREMENTIONED FORMER WSSI REGISTERED REPRESENATIVES. VIRGINIA STATE CORPORATION COMMISSION ALLEGES THAT THESE REPRESENTATIVES, WHILE REGISTERED WITH WSSI VIOLATED THE VA SECURITIES ACT BY OMISSIONS, MISREPRESENTATION, TRANSACTION OF BUSINESS AS AN UNREGISTERED AGENT, SALE OF UNREGISTERED SECURITIES, SALE OF SECURITIES NOT RECORDED ON THE REGULAR BOOKS OF WSSI, UNSUITABLE INVESTMENTS AND FRAUD AND DECEIT.

8. Current status ? ○ Pending ○ On Appeal ◉ Final

9. If on appeal, regulatory action appealed to (SEC, *SRO*, Federal or State Court) and Date Appeal Filed:

If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.

10. How was matter resolved:
Decision & Order of Offer of Settlement

11. Resolution Date (MM/DD/YYYY):
11/04/2002 ◉ Exact ○ Explanation
If not exact, provide explanation:

12. Resolution Detail:

A. Were any of the following Sanctions *Ordered* (check all appropriate items)?

- ☐ Monetary/Fine Amount:$
- ☐ Revocation/Expulsion/Denial
- ☑ Disgorgement/Restitution
- ☐ Censure
- ☐ Cease and Desist/Injunction
- ☐ Bar
- ☐ Suspension

B. Other Sanctions *Ordered*:

Sanction detail: if suspended, *enjoined* or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an *advisory affiliate*, date paid and if any portion of penalty was waived:
RESTITUTION: WSSI AGREED TO PAY VIRGINIA INVESTORS 55% OF THE FACE AMOUNT OF EACH RESPECTIVE INVESTMENT AND TO PAY $15,000.00 TO THE COMMISSION TO DEFRAY THE COST OF THE INVESTIGATION. PROVIDED ALL 6 RESIDENTS AGREE TO THE ASSIGNMENT OF CLAIMS AGAINST HENDERSON, GUY AND BLOODSWORTH AND PROVIDE FULL AND FINAL RELEASE OF ANY AND ALL CLAIMS THE "RESIDENTS" MAY HAVE AGAINST WSSI, THE TOTAL PAYMENT TO ALL 6 RESIDENTS WOULD BE $218,015.62. JULY 3, 2003, DECLARATION OF COMPLIANCE CONCLUDED THE MATTER. NO RESIDENT REFUSED THE SETTLEMENT OFFER.

13. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the space provided.)

WASHINGTON SQUARE SECURITIES, INC. (WSSI) HAS ENTERED INTO AN OFFER OF SETTLEMENT WITH THE VIRGINIA CORPORATION COMMISSION. WITHOUT ADMITTING OR DENYING ANY ALLEGATIONS, WSSI HAS AGREED TO THE FOLLOWING: WSSI WILL PAY A PERCENTAGE TO VIRGINIA RESIDENTS IN EXCHANGE FOR AN ASSIGNMENT OF EACH "RESIDENTS" CLAIMS AGAINST HENDERSON, GUY AND BLOODSWORTH, ASSIGNMENT OF EACH "RESIDENTS" CLAIM TO EACH INVESTMENT AT ISSUE, INCLUDING ANY AND ALL CLAIMS AGAINST THE ISSUER AND A COMPLETE, FULL AND FINAL RELEASE OF ANY AND ALL CLAIMS THAT EACH OF THE "RESIDENTS" MAY HAVE AGAINST WSSI. TOTAL PAYMENT TO ALL 6 RESIDENTS WOULD BE $218,015.62. WSSI WILL PROVIDE THE DIVISION WITH WRITTEN EVIDENCE OF IT'S COMPLIANCE OF THE AFOREMENTIONED TERMS WITHIN 30 DAYS OF THE DATE THE FINAL PAYMENT IS REMITTED TO THE "RESIDENTS" OR FROM THE DATE THE FINAL OUTSTANDING OFFER IS REJECTED. WSSI WILL EXERCISE REASONABLE & DILIGENT SUPERVISION OF IT'S AGENTS & WILL PAY THE COMMISSION $15000.00. JULY 3, 2003, DECLARATION OF COMPLIANCE CONCLUDED THE MATTER. NO RESIDENT REFUSED THE SETTLEMENT OFFER.

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP ADV) is an ○ INITIAL ***OR*** ◉ AMENDED response used to report details for affirmative responses to Items 11.C., 11.D., 11.E., 11.F. or 11.G. of Form ADV.

Check item(s) being responded to:

Regulatory Action

☐ 11.C(1)	☐ 11.C(5)	☑ 11.D(4)	☐ 11.E(3)
☐ 11.C(2)	☐ 11.D(1)	☐ 11.D(5)	☐ 11.E(4)
☐ 11.C(3)	☑ 11.D(2)	☐ 11.E(1)	☐ 11.F
☐ 11.C(4)	☐ 11.D(3)	☐ 11.E(2)	☐ 11.G

Use a separate DRP for each event or *proceeding*. The same event or *proceeding* may be reported for more than one *person* or entity using one DRP. File with a completed Execution Page.

One event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

PART I

A. The *person(s)* or entity(ies) for whom this DRP is being filed is (are):

◉ You (the advisory firm)

○ You and one or more of your *advisory affiliates*

○ One or more of your *advisory affiliates*

If this DRP is being filed for an *advisory affiliate*, give the full name of the *advisory affiliate* below (for individuals, Last name, First name, Middle name).

If the *advisory affiliate* has a *CRD* number, provide that number. If not, indicate "non-registered" by checking the appropriate box.

ADV DRP - *ADVISORY AFFILIATE*

No Information Filed

☐ This DRP should be removed from the ADV record because the *advisory affiliate(s)* is no longer associated with the adviser.

☐ This DRP should be removed from the ADV record because: (1) the event or *proceeding* occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or *advisory affiliate's* favor.

If you are registered or registering with a *state securities authority*, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.

B. If the *advisory affiliate* is registered through the IARD system or *CRD* system, has the *advisory affiliate* submitted a DRP (with Form ADV, BD or U-4) to the IARD or *CRD* for the event? If the answer is "Yes," no other information on this DRP must be provided.

○ *Yes* ○ *No*

NOTE: The completion of this form does not relieve the *advisory affiliate* of its obligation to update its IARD or *CRD* records.

PART II

1. Regulatory Action initiated by:
○ SEC ○ Other Federal ◉ State ○ *SRO* ○ Foreign
(Full name of regulator, *foreign financial regulatory authority*, federal, state, or *SRO*)
COMMONWEALTH OF MASSACHUSETTS SECURITIES DIVISION

2. Principal Sanction:
Restitution
Other Sanctions:
CENSURE, CEASE AND DESIST, CIVIL AND ADMINISTRATIVE PENALTY(IES)/FINE(S)

3. Date Initiated (MM/DD/YYYY):
03/21/2007 ◉ Exact ○ Explanation
If not exact, provide explanation:

4. Docket/Case Number:
E-2006-0095

5. *Advisory Affiliate* Employing Firm when activity occurred which led to the regulatory action (if applicable):

6. Principal Product Type:
No Product
Other Product Types:

7. Describe the allegations related to this regulatory action (your response must fit within the space provided):
THE DIVISION HAS ALLEGED THAT DURING THE PERIOD OF AT LEAST DECEMBER 1, 2004 THROUGH SEPTEMBER 22, 2006 PETER TZAMALAS DEFRAUDED INVESTORS IN THE EASTERN MASSACHUSETTS GREEK COMMUNITY, BY INDUCING THOSE INVESTORS TO TRANSFER

FUNDS TO HIM UNDER THE AUSPICES OF HIGH INTEREST RATE LOANS, WHEN IN FACT MR. TZAMALAS CONVERTED THOSE FUNDS TO HIS OWN USE AND BENEFIT. THE COMPLAINT ALSO ALLEGES THAT ING FINANCIAL PARTNERS, INC. AND ITS PREDECESSOR FIRM WASHINGTON SQUARE SECURITIES, INC. FAILED TO REASONABLY AND PROPERLY SUPERVISE MR. TZAMALAS.

8. Current status ? ○ Pending ○ On Appeal ◉ Final

9. If on appeal, regulatory action appealed to (SEC, *SRO*, Federal or State Court) and Date Appeal Filed:

If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.

10. How was matter resolved:
Consent

11. Resolution Date (MM/DD/YYYY):
10/22/2007 ◉ Exact ○ Explanation
If not exact, provide explanation:

12. Resolution Detail:

A. Were any of the following Sanctions *Ordered* (check all appropriate items)?

☑ Monetary/Fine Amount:$ 100000
☐ Revocation/Expulsion/Denial
☑ Disgorgement/Restitution
☑ Censure
☑ Cease and Desist/Injunction
☐ Bar
☐ Suspension

B. Other Sanctions *Ordered*:

Sanction detail: if suspended, *enjoined* or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an *advisory affiliate*, date paid and if any portion of penalty was waived:
ING FINANCIAL PARTNERS ("IFP") CONSENTED TO CEASE AND DESIST FROM FURTHER VIOLATIONS OF THE MASSACHUSETTS UNIFORM SECURITIES ACT, A CENSURE, $100,000 ADMINISTRATIVE FINE, AND AGREED TO PROVIDE THE COMMONWEALTH OF MASSACHUSETTS SECURITIES DIVISION ("DIVISION") AN ACCOUNTING OF ALL IFP CUSTOMERS KNOWN BY THE FIRM TO HAVE PROVIDED MONEY TO FORMER REGISTERED REPRESENTATIVE PETER TZAMALAS AS REFERENCED ABOVE AND TO FULLY COMPENSATE THESE IFP CUSTOMERS FOR LOSSES PLUS INTEREST ATTRIBUTED TO THE ALLEGED WRONGDOING PERPETRATED BY MR. TZAMALAS. THE FINE AND CUSTOMER RETITUTION MUST BE PAID WITHIN 30 DAYS AFTER THE ENTRY OF THE CONSENT ORDER. THIS AGREEMENT INCLUDES THOSE INDIVIDUALS AND AMOUNTS IDENTIFIED AT THE TIME OF THE EXECUTION OF THE CONSENT ORDER AS WELL AS ANY INDIVIDUALS AND AMOUNTS WHICH ARE PROPERLY IDENTIFIED AND VERIFIED WITHIN 90 DAYS OF THE DATE OF ENTRY OF THE CONSENT ORDER. IT IS ALSO ORDER THAT IFP PROVIDE THE DIVISION WITH AN ACCOUNTING OF THE COMPUTATION AND

DISTRIBUTION OF ALL AMOUNTS PAID TO FORMER IFP CUSTOMERS OF MR. TZAMALAS WITHIN 180 DAYS OF THE ENTRY OF THE CONSENT ORDER.

13. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the space provided.)
IFP SUBMITTED AN OFFER OF SETTLEMENT TO THE DIVISION IN CONNECTION WITH THE ALLEGED WRONGDOINGS COMMITTED BY MR. TZAMALAS. IN THE OFFER OF SETTLEMENT, WHICH WAS ACCEPTED BY THE DIVISION ON OCTOBER 22, 2007, IFP, WITHOUT ADMITTING OR DENYING THE ALLEGATIONS DESCRIBED ABOVE IN RESPONSE TO QUESTION #7, ENTERED INTO A CONSENT ORDER WITH THE DIVISION ON OCTOBER 22, 2007. IFP THEREBY CONSENTED TO THE ABOVE DESCRIBED SANCTIONS INCLUDING A CENSURE, ADMINISTRATIVE FINE, CEASE AND DESIST, ACCOUNTING, AND ORDER TO PAY RESTITUTION TO CUSTOMERS.

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP ADV) is an ○ INITIAL ***OR*** ◉ AMENDED response used to report details for affirmative responses to Items 11.C., 11.D., 11.E., 11.F. or 11.G. of Form ADV.

Check item(s) being responded to:

Regulatory Action

☐ 11.C(1)	☐ 11.C(5)	☑ 11.D(4)	☐ 11.E(3)
☐ 11.C(2)	☐ 11.D(1)	☐ 11.D(5)	☐ 11.E(4)
☐ 11.C(3)	☑ 11.D(2)	☐ 11.E(1)	☐ 11.F
☐ 11.C(4)	☐ 11.D(3)	☐ 11.E(2)	☐ 11.G

Use a separate DRP for each event or *proceeding*. The same event or *proceeding* may be reported for more than one *person* or entity using one DRP. File with a completed Execution Page.

One event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

PART I

A. The *person(s)* or entity(ies) for whom this DRP is being filed is (are):

◉ You (the advisory firm)

○ You and one or more of your *advisory affiliates*

○ One or more of your *advisory affiliates*

If this DRP is being filed for an *advisory affiliate*, give the full name of the *advisory affiliate* below (for individuals, Last name, First name, Middle name).

If the *advisory affiliate* has a *CRD* number, provide that number. If not, indicate "non-registered" by checking the appropriate box.

ADV DRP - *ADVISORY AFFILIATE*

No Information Filed

☐ This DRP should be removed from the ADV record because the *advisory affiliate(s)* is no longer associated with the adviser.

☐ This DRP should be removed from the ADV record because: (1) the event or *proceeding* occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or *advisory affiliate's* favor.

If you are registered or registering with a *state securities authority*, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.

B. If the *advisory affiliate* is registered through the IARD system or *CRD* system, has the *advisory affiliate* submitted a DRP (with Form ADV, BD or U-4) to the IARD or *CRD* for the event? If the answer is "Yes," no other information on this DRP must be provided.

○ *Yes* ○ *No*

NOTE: The completion of this form does not relieve the *advisory affiliate* of its obligation to update its IARD or *CRD* records.

PART II

1. Regulatory Action initiated by:
○ SEC ○ Other Federal ◉ State ○ *SRO* ○ Foreign
(Full name of regulator, *foreign financial regulatory authority*, federal, state, or *SRO*)
STATE OF NEVADA, SECURITIES DIVISION

2. Principal Sanction:
Civil and Administrative Penalt(ies) /Fine(s)
Other Sanctions:
INSPECTION FEES

3. Date Initiated (MM/DD/YYYY):
03/05/2010 ◉ Exact ○ Explanation
If not exact, provide explanation:

4. Docket/Case Number:
CI09-265-DB

5. *Advisory Affiliate* Employing Firm when activity occurred which led to the regulatory action (if applicable):
ING FINANCIAL PARTNERS, INC.

6. Principal Product Type:
No Product
Other Product Types:

7. Describe the allegations related to this regulatory action (your response must fit within the space provided):
NEVADA SECURITIES DIVISION ("DIVISION") ALLEGES THAT A DESIGNATED SUPERVISOR OF THE FIRM FAILED TO TAKE ACTION OVER A PERIOD OF TIME TO ENSURE THAT A REGISTERED REPRESENTATIVE UNDER HIS SUPERVISION SUBMITTED CORRESPONDENCE AND CORRESPONDENCE LOGS FOR REVIEW. THE DIVISION ALLEGES A VIOLATION OF FIRM

POLICY AND UNSPECIFIED FINRA RULES AND STATE LAW.

8. Current status ? ○ Pending ○ On Appeal ◉ Final

9. If on appeal, regulatory action appealed to (SEC, *SRO*, Federal or State Court) and Date Appeal Filed:

If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.

10. How was matter resolved:
Consent

11. Resolution Date (MM/DD/YYYY):
04/07/2010 ◉ Exact ○ Explanation
If not exact, provide explanation:

12. Resolution Detail:

A. Were any of the following Sanctions *Ordered* (check all appropriate items)?

☑ Monetary/Fine Amount:$ 3000

☐ Revocation/Expulsion/Denial

☐ Censure

☐ Bar

☐ Disgorgement/Restitution

☐ Cease and Desist/Injunction

☐ Suspension

B. Other Sanctions *Ordered*:
INSPECTION FEE IN THE AMOUNT OF $1,000

Sanction detail: if suspended, *enjoined* or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an *advisory affiliate*, date paid and if any portion of penalty was waived:
WITHOUT ADMITTING OR DENYING THE DIVISION'S FINDINGS AND CONCLUSIONS, THE RESPONDENT ENTERED INTO AN ADMINISTRATIVE CONSENT ORDER WITH THE DIVISION REQUIRING PAYMENT OF A $3000 CIVIL PENALTY AND AN INSPECTION FEE IN THE AMOUNT OF $1,000.

13. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the space provided.)

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP ADV) is an ○ INITIAL ***OR*** ◉ AMENDED response used to report details for affirmative responses to Items 11.C., 11.D., 11.E., 11.F. or 11.G. of Form ADV.

Check item(s) being responded to:

Regulatory Action

☐ 11.C(1)	☐ 11.C(5)	☑ 11.D(4)	☐ 11.E(3)
☐ 11.C(2)	☐ 11.D(1)	☐ 11.D(5)	☐ 11.E(4)
☐ 11.C(3)	☑ 11.D(2)	☐ 11.E(1)	☐ 11.F
☐ 11.C(4)	☐ 11.D(3)	☐ 11.E(2)	☐ 11.G

Use a separate DRP for each event or *proceeding*. The same event or *proceeding* may be reported for more than one *person* or entity using one DRP. File with a completed Execution Page.

One event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

PART I

A. The *person(s)* or entity(ies) for whom this DRP is being filed is (are):

◉ You (the advisory firm)

○ You and one or more of your *advisory affiliates*

○ One or more of your *advisory affiliates*

If this DRP is being filed for an *advisory affiliate*, give the full name of the *advisory affiliate* below (for individuals, Last name, First name, Middle name).

If the *advisory affiliate* has a *CRD* number, provide that number. If not, indicate "non-registered" by checking the appropriate box.

ADV DRP - *ADVISORY AFFILIATE*
No Information Filed

☐ This DRP should be removed from the ADV record because the *advisory affiliate(s)* is no longer associated with the adviser.

☐ This DRP should be removed from the ADV record because: (1) the event or *proceeding* occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or *advisory affiliate's* favor.

If you are registered or registering with a *state securities authority*, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.

B. If the *advisory affiliate* is registered through the IARD system or *CRD* system, has the *advisory affiliate* submitted a DRP (with Form ADV, BD or U-4) to the IARD or *CRD* for the event? If the answer is "Yes," no other information on this DRP must be provided.

○ *Yes* ○ *No*

NOTE: The completion of this form does not relieve the *advisory affiliate* of its obligation to update its IARD or *CRD* records.

PART II

1. Regulatory Action initiated by:

○ SEC ○ Other Federal ◉ State ○ *SRO* ○ Foreign
(Full name of regulator, *foreign financial regulatory authority*, federal, state, or *SRO*)
STATE OF UTAH DIVISION OF SECURITIES

2. Principal Sanction:
Censure
Other Sanctions:
SUSPENSION, FINE, BAR, REVOCATION

3. Date Initiated (MM/DD/YYYY):
05/16/2007 ◉ Exact ○ Explanation
If not exact, provide explanation:

4. Docket/Case Number:
SD070032; SD070033

5. *Advisory Affiliate* Employing Firm when activity occurred which led to the regulatory action (if applicable):

6. Principal Product Type:
Annuity(ies) - Variable
Other Product Types:

7. Describe the allegations related to this regulatory action (your response must fit within the space provided):
THE UTAH SECURITIES DIVISION ALLEGES THAT KELLY SCOTT (CRD #2199834) CONDUCTED SEVERAL SEMINARS IN APRIL 2006 THAT UTILIZED UNAPPROVED MATERIALS AND INCLUDED MISREPRESENTATIONS AND OMISSIONS OF MATERIAL FACTS RELATING TO VARIABLE ANNUITIES. THE DIVISION ALSO ALLEGES THAT ING FINANCIAL PARTNERS FAILED TO SUPERVISE MR. SCOTT IN CONNECTION WITH THE SEMINARS AND ASSOCIATED MATERIALS AND THAT MR. SCOTT'S BUSINESS ENTITY, RETIREMENT ADVISORS, HELD ITSELF OUT AS AN UNLICENSED INVESTMENT ADVISER.

8. Current status ? ○ Pending ○ On Appeal ◉ Final

9. If on appeal, regulatory action appealed to (SEC, *SRO*, Federal or State Court) and Date Appeal Filed:

If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.

10. How was matter resolved:
Stipulation and Consent

11. Resolution Date (MM/DD/YYYY):
03/12/2008 ◉ Exact ○ Explanation
If not exact, provide explanation:

12. Resolution Detail:

A. Were any of the following Sanctions *Ordered* (check all appropriate items)?

☑ Monetary/Fine Amount:$ 75000

☐ Revocation/Expulsion/Denial

☐ Disgorgement/Restitution

☐ Censure

☐ Cease and Desist/Injunction

☐ Bar

☐ Suspension

B. Other Sanctions *Ordered*:
UNDERTAKINGS

Sanction detail: if suspended, *enjoined* or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an *advisory affiliate*, date paid and if any portion of penalty was waived:
WITHOUT ADMITTING OR DENYING THE DIVISION'S FINDINGS AND CONCLUSIONS, THE FIRM ENTERED INTO A STIPULATION AND CONSENT ORDER WITH THE DIVISION REQUIRING THE FIRM TO PAY A FINE OF $75,000 WITHIN 30 DAYS OF THE ENTRY OF THIS ORDER AND TO COMPLY WITH CERTAIN UNDERTAKINGS INCLUDING: 1. WITHIN 6 MONTHS FIRM WILL CONDUCT TRAINING SESSIONS FOR ALL UTAH-DOMICILED REGISTERED REPRESENTATIVES ("RRS") ON SEMINARS, PRESENTATIONS TO THE PUBLIC, AND THE USE OF SEMINAR MATERIALS; 2. WITHIN 6 MONTHS FIRM WILL PROVIDE SPECIFIC TRAINING TO ITS UTAH-DOMICILED RRS ON SELLING VARIABLE ANNUITY PRODUCTS. THE TRAINING WILL ALSO BE PROVIDED IN THE FIRST 90 DAYS OF AFFILIATION TO ALL UTAH-DOMICILED RRS WHO JOIN THE FIRM FOR TWO YEARS FROM THE DATE OF THE ORDER; 3. WITHIN 6 MONTHS FIRM WILL CONDUCT AN ADDITIONAL INTERNAL REVIEW OF THE FIRM'S PROCESS FOR REVIEWING AND APPROVING ALL MATERIALS ADVERTISING A SEMINAR OR USED IN A SEMINAR PRESENTED BY A RR AND REPORT THE RESULTS TO THE DIVISION; 4. FOR A PEROID OF 2 YEARS FIRM WILL PROVIDE ADVANCE NOTICE TO THE DIVISION AT THE TIME FIRM APPROVES A SCHEDULED DATE FOR A SEMINAR TO BE CONDUCTED IN UTAH; 5. FOR A PEROID OF 1 YEAR A REPRESENTATIVE FROM FIRM'S HOME OFFICE OR A UTAH OSJ WILL ATTEND AT LEAST ONE SEMINAR CONDUCTED BY EACH OF THE FIRM'S RRS CONDUCTING SEMINARS IN UTAH; 6. FOR A PERIOD OF 2 YEARS FIRM WILL SEND THE DIVISION COPIES OF EACH COMPLAINT IT RECEIVES FROM CUSTOMERS LISTING A PRIMARY UTAH ADDRESS, OR THAT INVOLVE A UTAH-DOMICILED RR, THAT ALLEGES SALES PRACTIVE VIOLATIONS IN THE SALE OF A VARIABLE ANNUITY; 7. FOR A PEROID OF 2 YEARS FIRM WILL PROMPTLY NOTIFY THE DIVISION IF FIRM HAS TAKEN ANY DISCIPLINARY ACTION AGAINST A RR FOR USING UNAPPROVED ADVERTISING OR SALES MATERIALS OR CONDUCTING AN UNAPPROVED SEMINAR AND; 8. WITHIN 6 MONTHS FIRM WILL CONDUCT AN INTERNAL REVIEW OF EACH UTAH-DOMICILED RR WITH GROSS DEALER CONCESSION OF MORE THAN $50,000 FOR THE PRIOR CALENDAR YEAR FROM SALES RELATED TO SECURITIES AND VARIABLE ANNUITIES.

13. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the space provided.)
ON MAY 16, 2007 THE UTAH SECURITIES DIVISION ISSUED TO KELLY SCOTT (CRD #2199834) AND ING FINANCIAL PARTNERS, INC. ("FIRM") A PETITION TO REVOKE THE LICENSE OF MR. SCOTT, BAR HIM FROM THE SECURITIES INDUSTRY, CENSURE AND SUSPEND THE FIRM, AND IMPOSE FINES AGAINST BOTH MR. SCOTT AND THE FIRM. THE UTAH SECURITIES DIVISION ALSO ISSUED ON MAY 16, 2007 AN ORDER TO SHOW CAUSE AGAINST THE FIRM AND MR. SCOTT'S BUSINESS ENTITY, RETIREMENT ADVISORS. BOTH THE PETITION AND THE ORDER TO SHOW CAUSE WERE ISSUED IN CONNECTION WITH THE

ALLEGATIONS DESCRIBED IN RESPONSE TO QUESTION #7. THE FIRM ENTERED INTO A STIPULATION AND CONSENT ORDER RESOLVING THE DIVISION'S MAY 16, 2007 PETITION TO CENSURE, SUSPEND OR FINE THE FIRM. THE DIVISION FOUND THAT MR. SCOTT'S SEMINARS CONTAINED MISREPRESENTATIONS AND OMISSIONS OF MATERIAL FACT. THE FIRM APPROVED THE SEMINAR INVITATION USED FOR AN APRIL 18, 2006 SEMINAR. THE DIVISION CONCLUDED THAT THE FIRM HAD FAILED TO REASONABLY SUPERVISE MR. SCOTT. THE FIRM NEITHER ADMITTED NOR DENIED THE DIVISION'S FINDINGS AND CONCLUSIONS.

GENERAL INSTRUCTIONS

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Check item(s) being responded to:

Regulatory Action			
☐ 11.C(1)	☐ 11.C(5)	☑ 11.D(4)	☐ 11.E(3)
☐ 11.C(2)	☐ 11.D(1)	☐ 11.D(5)	☐ 11.E(4)
☐ 11.C(3)	☑ 11.D(2)	☐ 11.E(1)	☐ 11.F
☐ 11.C(4)	☐ 11.D(3)	☐ 11.E(2)	☐ 11.G

Use a separate DRP for each event or *proceeding*. The same event or *proceeding* may be reported for more than one *person* or entity using one DRP. File with a completed Execution Page.

One event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

PART I

A. The *person(s)* or entity(ies) for whom this DRP is being filed is (are):

◉ You (the advisory firm)

○ You and one or more of your *advisory affiliates*

○ One or more of your *advisory affiliates*

If this DRP is being filed for an *advisory affiliate*, give the full name of the *advisory affiliate* below (for individuals, Last name, First name, Middle name).

If the *advisory affiliate* has a *CRD* number, provide that number. If not, indicate "non-registered" by checking the appropriate box.

ADV DRP - *ADVISORY AFFILIATE*
No Information Filed

☐ This DRP should be removed from the ADV record because the *advisory affiliate(s)* is no longer associated with the adviser.

☐ This DRP should be removed from the ADV record because: (1) the event or *proceeding* occurred more than ten years ago or (2) the adviser is registered or applying for registration

with the SEC and the event was resolved in the adviser's or *advisory affiliate's* favor.

If you are registered or registering with a *state securities authority*, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.

B. If the *advisory affiliate* is registered through the IARD system or *CRD* system, has the *advisory affiliate* submitted a DRP (with Form ADV, BD or U-4) to the IARD or *CRD* for the event? If the answer is "Yes," no other information on this DRP must be provided.

○ *Yes* ○ *No*

NOTE: The completion of this form does not relieve the *advisory affiliate* of its obligation to update its IARD or *CRD* records.

PART II

1. Regulatory Action initiated by:
○ SEC ○ Other Federal ◉ State ○ *SRO* ○ Foreign
(Full name of regulator, *foreign financial regulatory authority*, federal, state, or *SRO*)
STATE OF WISCONSIN DEPARTMENT OF FINANCIAL INSTITUTIONS DIVISION OF SECURITIES

2. Principal Sanction:
Censure
Other Sanctions:

3. Date Initiated (MM/DD/YYYY):
07/05/2006 ◉ Exact ○ Explanation
If not exact, provide explanation:

4. Docket/Case Number:
S-04192(LX)

5. *Advisory Affiliate* Employing Firm when activity occurred which led to the regulatory action (if applicable):

6. Principal Product Type:
Mutual Fund(s)
Other Product Types:

7. Describe the allegations related to this regulatory action (your response must fit within the space provided):
THE DIVISION HAS ALLEGED THAT ING FINANCIAL PARTNERS' REPRESENTATIVE BRIAN HENKEL MADE UNSUITABLE RECOMMENDATIONS TO A CLIENT FROM APPROXIMATELY DECEMBER 1998 THROUGH NOVEMBER 1999 BY RECOMMENDING CLASS C MUTUAL FUNDS. THE STATE HAS FURTHER ALLEGED THAT THE FIRM FAILED TO REASONABLY SUPERVISE ITS AGENT TO PREVENT THE MAKING OF UNSUITABLE RECOMMENDATIONS TO THIS PARTICULAR CLIENT.

8. Current status ? ○ Pending ○ On Appeal ◉ Final

9. If on appeal, regulatory action appealed to (SEC, *SRO*, Federal or State Court) and Date Appeal Filed:

If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.

10. How was matter resolved:
Consent

11. Resolution Date (MM/DD/YYYY):
08/28/2006 ◉ Exact ○ Explanation
If not exact, provide explanation:

12. Resolution Detail:

A. Were any of the following Sanctions *Ordered* (check all appropriate items)?

- ☐ Monetary/Fine Amount:$
- ☐ Revocation/Expulsion/Denial
- ☑ Censure
- ☐ Bar
- ☐ Disgorgement/Restitution
- ☐ Cease and Desist/Injunction
- ☐ Suspension

B. Other Sanctions *Ordered*:

Sanction detail: if suspended, *enjoined* or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an *advisory affiliate*, date paid and if any portion of penalty was waived:
THE STATE ENTERED AN ORDER OF CENSURE AGAINST THE FIRM IN WHICH THE FIRM WAS CENSURED FOR AND PROHIBITED FROM FAILING TO REASONABLY SUPERVISE ITS AGENT TO PREVENT THE MAKING OF UNSUITABLE RECOMMENDATIONS AS PRESCRIBED BY SEC. 551.34(1)(G), WIS. STATS.

13. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the space provided.)
THE FIRM DECIDED NOT TO CONTEST THE ISSUANCE OF THE ORDER OF CENSURE AND NEITHER ADMITTED NOR DENIED THE ALLEGATIONS MADE BY THE STATE. THE FIRM CHOSE TO WAIVE ITS RIGHT TO A HEARING WITH RESPECT TO THIS MATTER AND CONSENTED TO THE ISSUANCE OF THE ORDER.

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP ADV) is an ○ INITIAL ***OR*** ◉ AMENDED response used to report details for affirmative responses to Items 11.C., 11.D., 11.E., 11.F. or 11.G. of Form ADV.

Check item(s) being responded to:

Regulatory Action

☐ 11.C(1)	☐ 11.C(5)	☐ 11.D(4)	☐ 11.E(3)
☐ 11.C(2)	☐ 11.D(1)	☐ 11.D(5)	☐ 11.E(4)

☐ 11.C(3)	☑ 11.D(2)	☐ 11.E(1)	☐ 11.F
☐ 11.C(4)	☐ 11.D(3)	☐ 11.E(2)	☐ 11.G

Use a separate DRP for each event or *proceeding*. The same event or *proceeding* may be reported for more than one *person* or entity using one DRP. File with a completed Execution Page.

One event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

PART I

A. The *person(s)* or entity(ies) for whom this DRP is being filed is (are):

◉ You (the advisory firm)

○ You and one or more of your *advisory affiliates*

○ One or more of your *advisory affiliates*

If this DRP is being filed for an *advisory affiliate*, give the full name of the *advisory affiliate* below (for individuals, Last name, First name, Middle name).

If the *advisory affiliate* has a *CRD* number, provide that number. If not, indicate "non-registered" by checking the appropriate box.

ADV DRP - *ADVISORY AFFILIATE*
No Information Filed

☐ This DRP should be removed from the ADV record because the *advisory affiliate(s)* is no longer associated with the adviser.

☐ This DRP should be removed from the ADV record because: (1) the event or *proceeding* occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or *advisory affiliate's* favor.

If you are registered or registering with a *state securities authority*, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.

B. If the *advisory affiliate* is registered through the IARD system or *CRD* system, has the *advisory affiliate* submitted a DRP (with Form ADV, BD or U-4) to the IARD or *CRD* for the event? If the answer is "Yes," no other information on this DRP must be provided.

○ *Yes* ○ *No*

NOTE: The completion of this form does not relieve the *advisory affiliate* of its obligation to update its IARD or *CRD* records.

PART II

1. Regulatory Action initiated by:

○ SEC ○ Other Federal ◉ State ○ *SRO* ○ Foreign

(Full name of regulator, *foreign financial regulatory authority*, federal, state, or *SRO*)

INDIANA SECURITIES DIVISION

2. Principal Sanction:
Other
Other Sanctions:
CONSENT AGREEMENT, ADMINISTRATIVE FINE

3. Date Initiated (MM/DD/YYYY):
07/16/2008 (•) Exact ( ) Explanation
If not exact, provide explanation:

4. Docket/Case Number:
08-0065 CA

5. *Advisory Affiliate* Employing Firm when activity occurred which led to the regulatory action (if applicable):

6. Principal Product Type:
No Product
Other Product Types:

7. Describe the allegations related to this regulatory action (your response must fit within the space provided):
THE INDIANA SECURITIES DIVISION ALLEGES THAT THE FIRM DID NOT FILE AN INDIANA COMPLIANCE REPORT IN A TIMELY MANNER WHICH IS A VIOLATION OF THE INDIANA SECURITIES ACT.

8. Current status ? ( ) Pending ( ) On Appeal (•) Final

9. If on appeal, regulatory action appealed to (SEC, *SRO*, Federal or State Court) and Date Appeal Filed:

If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.

10. How was matter resolved:
Consent

11. Resolution Date (MM/DD/YYYY):
08/06/2008 (•) Exact ( ) Explanation
If not exact, provide explanation:

12. Resolution Detail:

A. Were any of the following Sanctions *Ordered* (check all appropriate items)?

[x] Monetary/Fine Amount:$ 1000

[ ] Revocation/Expulsion/Denial
[ ] Disgorgement/Restitution
[ ] Censure
[ ] Cease and Desist/Injunction
[ ] Bar
[ ] Suspension

B. Other Sanctions *Ordered*:

Sanction detail: if suspended, *enjoined* or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an *advisory affiliate*, date paid and if any portion of penalty was waived:
WITHOUT ADMITTING OR DENYING THE INDIANA SECURITIES DIVISION'S ("DIVISION") ALLEGATIONS DESCRIBED ABOVE, THE FIRM ENTERED INTO A CONSENT AGREEMENT WITH THE DIVISION WEREIN THE FIRM PAID A COST OF INVESTIGATION FEE IN THE AMOUNT OF $1,000 AND AGREED NOT TO VIOLATE THE INDIANA SECURITIES ACT, INDIANA CODE 23-2-1, AND THE PROVISIONS OF THE INDIANA ADMINISTRATIVE CODE IN THE FUTURE.

13. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the space provided.)

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP ADV) is an ○ INITIAL ***OR*** ◉ AMENDED response used to report details for affirmative responses to Items 11.C., 11.D., 11.E., 11.F. or 11.G. of Form ADV.

Check item(s) being responded to:

Regulatory Action

☐ 11.C(1)	☐ 11.C(5)	☑ 11.D(4)	☐ 11.E(3)
☐ 11.C(2)	☐ 11.D(1)	☐ 11.D(5)	☐ 11.E(4)
☐ 11.C(3)	☐ 11.D(2)	☐ 11.E(1)	☐ 11.F
☐ 11.C(4)	☐ 11.D(3)	☐ 11.E(2)	☐ 11.G

Use a separate DRP for each event or *proceeding*. The same event or *proceeding* may be reported for more than one *person* or entity using one DRP. File with a completed Execution Page.

One event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

PART I

A. The *person(s)* or entity(ies) for whom this DRP is being filed is (are):

◉ You (the advisory firm)

○ You and one or more of your *advisory affiliates*

○ One or more of your *advisory affiliates*

If this DRP is being filed for an *advisory affiliate*, give the full name of the *advisory affiliate* below (for individuals, Last name, First name, Middle name).

If the *advisory affiliate* has a *CRD* number, provide that number. If not, indicate "non-registered" by checking the appropriate box.

ADV DRP - *ADVISORY AFFILIATE*
No Information Filed

☐ This DRP should be removed from the ADV record because the *advisory affiliate(s)* is no longer associated with the adviser.

☐ This DRP should be removed from the ADV record because: (1) the event or *proceeding* occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or *advisory affiliate's* favor.

If you are registered or registering with a *state securities authority*, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.

B. If the *advisory affiliate* is registered through the IARD system or *CRD* system, has the *advisory affiliate* submitted a DRP (with Form ADV, BD or U-4) to the IARD or *CRD* for the event? If the answer is "Yes," no other information on this DRP must be provided.

○ *Yes* ○ *No*

NOTE: The completion of this form does not relieve the *advisory affiliate* of its obligation to update its IARD or *CRD* records.

PART II

1. Regulatory Action initiated by:
○ SEC ○ Other Federal ◉ State ○ *SRO* ○ Foreign
(Full name of regulator, *foreign financial regulatory authority*, federal, state, or *SRO*)
COMMONWEALTH OF VIRGINIA, STATE CORPORATION COMMISSION

2. Principal Sanction:
Restitution
Other Sanctions:

3. Date Initiated (MM/DD/YYYY):
05/23/2008 ◉ Exact ○ Explanation
If not exact, provide explanation:

4. Docket/Case Number:
SEC-2008-00030

5. *Advisory Affiliate* Employing Firm when activity occurred which led to the regulatory action (if applicable):
ING FINANCIAL PARTNERS, INC.

6. Principal Product Type:
No Product
Other Product Types:

7. Describe the allegations related to this regulatory action (your response must fit within the

space provided):

BASED ON AN INVESTIGATION CONDUCTED BY THE VIRGINIA DIVISION OF SECURITIES AND RETAIL FRANCHISING ("DIVISION"), IT IS ALLEGED THAT DURING THE YEAR 1999 THROUGH AUGUST 15, 2001, WASHINGTON SQUARE SECURITIES, INC. (NOW KNOWN AS ING FINANCIAL PARTNERS, INC.("FIRM")) VIOLATED SECURITIES RULE 21 VAC 5-20-260 B BY FAILING TO EXERCISE DILIGENT SUPERVISION OVER THE SECURITIES ACTIVITIES OF ITS FORMER REGISTERED REPRESENTATIVE SCOTT KRAMNICK (CRD #1959753) AND AGENTS OF THE KRAMNICK AGENCY.

8. Current status ? ○ Pending ○ On Appeal ◉ Final

9. If on appeal, regulatory action appealed to (SEC, *SRO*, Federal or State Court) and Date Appeal Filed:

If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.

10. How was matter resolved:
Other

11. Resolution Date (MM/DD/YYYY):
05/23/2008 ◉ Exact ○ Explanation
If not exact, provide explanation:

12. Resolution Detail:

A. Were any of the following Sanctions *Ordered* (check all appropriate items)?

☐ Monetary/Fine Amount:$
☐ Revocation/Expulsion/Denial
☐ Censure
☐ Bar
☑ Disgorgement/Restitution
☐ Cease and Desist/Injunction
☐ Suspension

B. Other Sanctions *Ordered*:
AS A PROPOSAL TO SETTLE ALL MATTERS ARISING FROM THESE ALLEGATIONS, THE FIRM HAS MADE AN OFFER OF SETTLEMENT TO THE VIGINIA STATE CORPORATION COMMISSION WHEREIN THE FIRM WILL ABIDE BY AND COMPLY WITH VARIOUS TERMS AND UNDERTAKINGS.

Sanction detail: if suspended, *enjoined* or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an *advisory affiliate*, date paid and if any portion of penalty was waived:
WITHOUT ADMITTING OR DENYING THE DIVISION'S ALLEGATIONS, THE FIRM ENTERED INTO A SETTLEMENT ORDER WITH THE VIRGINIA STATE CORPORATION COMMISSION ("COMMISSION") WHEREIN THE FIRM WILL ABIDE BY AND COMPLY WITH THE FOLLOWING TERMS AND UNDERTAKINGS: 1. THE FIRM HAS MADE A RESCISSION OFFER TO CERTAIN FORMER CUSTOMERS OF THE KRAMNICK AGENCY; 2. THE FIRM PROVIDED THE DIVISION WITH A DECLARATION, EXECUTED BY THE CHIEF COMPLIANCE OFFICER THAT CONTAINED THE DATE THE RESCISSION LETTER WAS SENT

TO EACH CUSTOMER ALONG WITH THE DATE UPON WHICH EACH INVESTOR RESPONDED TO THE RESCISSION OFFER, THE INVESTOR'S RESPONSE AND, IF APPLICABLE, THE AMOUNT AND THE DATE THAT PAYMENT WAS SENT TO THE INVESTOR ALONG WITH A STATEMENT IDENTIFYING ANY INVESTOR WHO REFUSED THE RESCISSION OFFER, IF APPLICABLE; 3. THE FIRM WILL PROVIDE THE DIVISION WITH A COPY OF ALL FUTURE CORRESPONDENCE THAT IT SENDS TO EACH INVESTOR TO WHOM THE FIRM HAS MADE RESCISSION; 4. THE FIRM WILL NOT VIOLATE THE ACT IN THE FUTURE AND; 5. AS OF THE DATE OF ENTRY OF THIS ORDER, THE FIRM WILL EXERCISE REASONABLE AND DILIGENT SUPERVISION OF ITS AGENTS IN ACCORDANCE WITH THE RULES OF THE COMMISSION. THE DIVISION ACKNOWLEDGES THE VIOLATIONS TOOK PLACE PRIOR TO THE MERGER OF LOCUST STREET SECURITIES, INC. AND WASHINGTON SQUARE SECURITIES, INC., THAT THE SUCCESSOR FIRM HAS MADE SIGNIFICANT CHANGES AND ENHANCEMENTS TO ITS SUPERVISORY PROCESSES AND SYSTEMS, AND ALSO THE FIRM HAS MADE AN OFFER OF RESTITUTION TO CERTAIN FORMER CUSTOMERS OF THE KRAMNICK AGENCY. THESE FACTS HAVE BEEN CONSIDERED BY THE DIVISION IN REACHING THIS SETTLEMENT.

13. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the space provided.)

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP ADV) is an ○ INITIAL ***OR*** ◉ AMENDED response used to report details for affirmative responses to Items 11.C., 11.D., 11.E., 11.F. or 11.G. of Form ADV.

Check item(s) being responded to:

Regulatory Action

☐ 11.C(1)	☐ 11.C(5)	☐ 11.D(4)	☐ 11.E(3)
☐ 11.C(2)	☐ 11.D(1)	☐ 11.D(5)	☐ 11.E(4)
☐ 11.C(3)	☐ 11.D(2)	☐ 11.E(1)	☐ 11.F
☐ 11.C(4)	☐ 11.D(3)	☑ 11.E(2)	☐ 11.G

Use a separate DRP for each event or *proceeding*. The same event or *proceeding* may be reported for more than one *person* or entity using one DRP. File with a completed Execution Page.

One event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

PART I

A. The *person(s)* or entity(ies) for whom this DRP is being filed is (are):

◉ You (the advisory firm)

○ You and one or more of your *advisory affiliates*

○ One or more of your *advisory affiliates*

If this DRP is being filed for an *advisory affiliate*, give the full name of the *advisory affiliate*

below (for individuals, Last name, First name, Middle name).

If the *advisory affiliate* has a *CRD* number, provide that number. If not, indicate "non-registered" by checking the appropriate box.

ADV DRP - *ADVISORY AFFILIATE*
No Information Filed

☐ This DRP should be removed from the ADV record because the *advisory affiliate(s)* is no longer associated with the adviser.

☐ This DRP should be removed from the ADV record because: (1) the event or *proceeding* occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or *advisory affiliate's* favor.

If you are registered or registering with a *state securities authority*, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.

B. If the *advisory affiliate* is registered through the IARD system or *CRD* system, has the *advisory affiliate* submitted a DRP (with Form ADV, BD or U-4) to the IARD or *CRD* for the event? If the answer is "Yes," no other information on this DRP must be provided.

○ *Yes* ○ *No*

NOTE: The completion of this form does not relieve the *advisory affiliate* of its obligation to update its IARD or *CRD* records.

PART II

1. Regulatory Action initiated by:
   ○ SEC ○ Other Federal ○ State ◉ *SRO* ○ Foreign
   (Full name of regulator, *foreign financial regulatory authority*, federal, state, or *SRO*)
   NASD

2. Principal Sanction:
   Censure
   Other Sanctions:
   CIVIL AND ADMINISTRATIVE PENALTY(IES)/FINE(S)

3. Date Initiated (MM/DD/YYYY):
   04/27/2007 ◉ Exact ○ Explanation
   If not exact, provide explanation:

4. Docket/Case Number:
   20060039805-01

5. *Advisory Affiliate* Employing Firm when activity occurred which led to the regulatory action (if applicable):

6. Principal Product Type:
   No Product
   Other Product Types:

7. Describe the allegations related to this regulatory action (your response must fit within the space provided):

SEC RULE 15C3-3 AND NASD CONDUCT RULE 2110 - FROM DECEMBER 1, 2005 THROUGH JANUARY 21, 2006 ING FINANCIAL PARTNERS, INC. ("FIRM") FAILED TO PROMPTLY FORWARD CHECKS SUBMITTED WITH APPLICATION WAY BUSINESS TO ISSUERS OR TO RETURN CHECKS TO CUSTOMERS. BY FAILING TO PROMPTLY FORWARD CHECKS DURING THE RELEVANT TIME PERIOD, THE FIRM DID NOT COMPLY WITH THE REQUIREMENTS OF THE EXEMPTION SET FORTH IN SEC RULE 15C3-3(K)(2)(II). THUS, THE FIRM BECAME FULLY SUBJECT TO THE REQUIREMENTS OF SEC RULE 15C3-3. BECAUSE THE FIRM WAS OPERATING UNDER AN EXEMPTION TO SEC RULE 15C3-3, IT DID MEET ALL THE REQUIREMENTS OF THE RULE, INCLUDING THE REQUIREMENT TO MAINTAIN A SPECIAL RESERVE ACCOUNT FOR THE EXCLUSIVE BENEFIT OF CUSTOMERS PURSUANT TO SEC RULE 15C3-3(E).

8. Current status ? ○ Pending ○ On Appeal ◉ Final

9. If on appeal, regulatory action appealed to (SEC, *SRO*, Federal or State Court) and Date Appeal Filed:

If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.

10. How was matter resolved:
Acceptance, Waiver & Consent(AWC)

11. Resolution Date (MM/DD/YYYY):
04/27/2007 ◉ Exact ○ Explanation
If not exact, provide explanation:

12. Resolution Detail:

A. Were any of the following Sanctions *Ordered* (check all appropriate items)?

☑ Monetary/Fine Amount:$ 10000

☐ Revocation/Expulsion/Denial

☐ Disgorgement/Restitution

☑ Censure

☐ Cease and Desist/Injunction

☐ Bar

☐ Suspension

B. Other Sanctions *Ordered*:

Sanction detail: if suspended, *enjoined* or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an *advisory affiliate*, date paid and if any portion of penalty was waived:
THE FIRM CONSENTED TO THE IMPOSITION OF A CENSURE AND A FINE IN THE AMOUNT OF $10,000

13. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the space provided.)

WITHOUT ADMITTING OR DENYING THE ALLEGATIONS DESCRIBED ABOVE, THE FIRM ENTERED INTO AN ACCEPTANCE, WAIVER & CONSENT ON APRIL 27, 2007 WITH THE NASD. THE FIRM THEREBY CONSENTED TO THE IMPOSITION OF A $10,000 FINE AND CENSURE.

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP ADV) is an ○ INITIAL ***OR*** ◉ AMENDED response used to report details for affirmative responses to Items 11.C., 11.D., 11.E., 11.F. or 11.G. of Form ADV.

Check item(s) being responded to:

Regulatory Action

☐ 11.C(1)	☐ 11.C(5)	☐ 11.D(4)	☐ 11.E(3)
☐ 11.C(2)	☐ 11.D(1)	☐ 11.D(5)	☐ 11.E(4)
☐ 11.C(3)	☐ 11.D(2)	☐ 11.E(1)	☐ 11.F
☐ 11.C(4)	☐ 11.D(3)	☑ 11.E(2)	☐ 11.G

Use a separate DRP for each event or *proceeding*. The same event or *proceeding* may be reported for more than one *person* or entity using one DRP. File with a completed Execution Page.

One event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

PART I

A. The *person(s)* or entity(ies) for whom this DRP is being filed is (are):

◉ You (the advisory firm)

○ You and one or more of your *advisory affiliates*

○ One or more of your *advisory affiliates*

If this DRP is being filed for an *advisory affiliate*, give the full name of the *advisory affiliate* below (for individuals, Last name, First name, Middle name).

If the *advisory affiliate* has a *CRD* number, provide that number. If not, indicate "non-registered" by checking the appropriate box.

ADV DRP - *ADVISORY AFFILIATE*
No Information Filed

☐ This DRP should be removed from the ADV record because the *advisory affiliate(s)* is no longer associated with the adviser.

☐ This DRP should be removed from the ADV record because: (1) the event or *proceeding* occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or *advisory affiliate's* favor.

If you are registered or registering with a *state securities authority*, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a

DRP for any event listed in Item 11 that occurred more than ten years ago.

B. If the *advisory affiliate* is registered through the IARD system or *CRD* system, has the *advisory affiliate* submitted a DRP (with Form ADV, BD or U-4) to the IARD or *CRD* for the event? If the answer is "Yes," no other information on this DRP must be provided.

○ *Yes* ○ *No*

NOTE: The completion of this form does not relieve the *advisory affiliate* of its obligation to update its IARD or *CRD* records.

PART II

1. Regulatory Action initiated by:
○ SEC ○ Other Federal ○ State ◉ *SRO* ○ Foreign
(Full name of regulator, *foreign financial regulatory authority*, federal, state, or *SRO*)
NASD

2. Principal Sanction:
Censure
Other Sanctions:
$7,500 FINE

3. Date Initiated (MM/DD/YYYY):
09/16/2005 ◉ Exact ○ Explanation
If not exact, provide explanation:

4. Docket/Case Number:
E102003160101

5. *Advisory Affiliate* Employing Firm when activity occurred which led to the regulatory action (if applicable):

6. Principal Product Type:
No Product
Other Product Types:

7. Describe the allegations related to this regulatory action (your response must fit within the space provided):
A REVIEW OF FORTY SETTLEMENT AGREEMENTS EXECUTED BY WASHINGTON SQUARE SECURITIES, INC. WITH VARIOUS CUSTOMERS FROM JANUARY 2003 TO JUNE 2003, REVEALED THAT ELEVEN OF THE AGREEMENTS CONTAINED CONFIDENTALITY CLAUSES THAT APPEARED TO CURTAIL THE CUSTOMER ABILITY TO COOPERATE WITH SELF-REGULATORY ORGANIZATIONS SUCH AS THE NASD. BY REASON OF THE FOREGOING, WSSI (N/K/A ING FINANCIAL PARTNERS, INC.) VIOLATED NASD CONDUCT RULE 2110.

8. Current status ? ○ Pending ○ On Appeal ◉ Final

9. If on appeal, regulatory action appealed to (SEC, *SRO*, Federal or State Court) and Date Appeal Filed:

If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.

10. How was matter resolved:

Acceptance, Waiver & Consent(AWC)

11. Resolution Date (MM/DD/YYYY):

09/16/2005 ◉ Exact ○ Explanation

If not exact, provide explanation:

12. Resolution Detail:

A. Were any of the following Sanctions *Ordered* (check all appropriate items)?

☑ Monetary/Fine Amount:$ 7500

☐ Revocation/Expulsion/Denial

☐ Disgorgement/Restitution

☑ Censure

☐ Cease and Desist/Injunction

☐ Bar

☐ Suspension

B. Other Sanctions *Ordered*:

Sanction detail: if suspended, *enjoined* or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an *advisory affiliate*, date paid and if any portion of penalty was waived:
ING FINANCIAL PARTNERS, INC. CONSENTED TO THE IMPOSITION OF A CENSURE AND A FINE IN THE AMOUNT OF $7500.

13. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the space provided.)
WITHOUT ADMITTING OR DENYING THE ALLEGATIONS DESCRIBED ABOVE, THE FIRM ENTERED INTO AN AWC ON SEPTEMBER 16, 2005 WITH THE NASD. THE FIRM THEREBY CONSENTED TO THE IMPOSITION OF THE FINE AND CENSURE.

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP ADV) is an ○ INITIAL ***OR*** ◉ AMENDED response used to report details for affirmative responses to Items 11.C., 11.D., 11.E., 11.F. or 11.G. of Form ADV.

Check item(s) being responded to:

Regulatory Action

☐ 11.C(1)	☐ 11.C(5)	☐ 11.D(4)	☐ 11.E(3)
☐ 11.C(2)	☐ 11.D(1)	☐ 11.D(5)	☐ 11.E(4)
☐ 11.C(3)	☐ 11.D(2)	☐ 11.E(1)	☐ 11.F
☐ 11.C(4)	☐ 11.D(3)	☑ 11.E(2)	☐ 11.G

Use a separate DRP for each event or *proceeding*. The same event or *proceeding* may be reported for more than one *person* or entity using one DRP. File with a completed Execution Page.

One event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

PART I

A. The *person(s)* or entity(ies) for whom this DRP is being filed is (are):

- (●) You (the advisory firm)
- ( ) You and one or more of your *advisory affiliates*
- ( ) One or more of your *advisory affiliates*

If this DRP is being filed for an *advisory affiliate*, give the full name of the *advisory affiliate* below (for individuals, Last name, First name, Middle name).

If the *advisory affiliate* has a *CRD* number, provide that number. If not, indicate "non-registered" by checking the appropriate box.

ADV DRP - *ADVISORY AFFILIATE*
No Information Filed

[ ] This DRP should be removed from the ADV record because the *advisory affiliate(s)* is no longer associated with the adviser.

[ ] This DRP should be removed from the ADV record because: (1) the event or *proceeding* occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or *advisory affiliate's* favor.

If you are registered or registering with a *state securities authority*, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.

B. If the *advisory affiliate* is registered through the IARD system or *CRD* system, has the *advisory affiliate* submitted a DRP (with Form ADV, BD or U-4) to the IARD or *CRD* for the event? If the answer is "Yes," no other information on this DRP must be provided.

( ) *Yes* ( ) *No*

NOTE: The completion of this form does not relieve the *advisory affiliate* of its obligation to update its IARD or *CRD* records.

PART II

1. Regulatory Action initiated by:
( ) SEC ( ) Other Federal ( ) State (●) *SRO* ( ) Foreign
(Full name of regulator, *foreign financial regulatory authority*, federal, state, or *SRO*)
NASD

2. Principal Sanction:
Civil and Administrative Penalt(ies) /Fine(s)
Other Sanctions:
CENSURE AND RESTITUTION

3. Date Initiated (MM/DD/YYYY):

04/02/2004 (●) Exact ( ) Explanation
If not exact, provide explanation:

4. Docket/Case Number:
C04040015

5. *Advisory Affiliate* Employing Firm when activity occurred which led to the regulatory action (if applicable):

6. Principal Product Type:
Mutual Fund(s)
Other Product Types:

7. Describe the allegations related to this regulatory action (your response must fit within the space provided):
WSSI, ACTING THROUGH ITS AGENTS, EFFECTED PURCHASES OF LARGE POSITIONS OF CLASS B MUTUAL FUND SHARES IN SEVEN CUSTOMER ACCOUNTS BETWEEN MAY 1999 AND JUNE 2001. THE CUSTOMERS WERE DEPRIVED OF THE BENEFITS OF BREAKPOINTS AND LOWER 12B-1 FEES THAT THEY WOULD HAVE RECEIVED HAD THEY PURCHASED CLASS A SHARES. THE FIRM FAILED TO ESTABLISH AND ENFORE A SUPERVISORY SYSTEM REASONABLY DESIGNED TO SCRUTINIZE CLASS B SHARE PURCHASES IN ORDER TO DETECT AND PREVENT UNSUITABLY LARGE CLASS B SHARE PURCHASES.

8. Current status ? ( ) Pending ( ) On Appeal (●) Final

9. If on appeal, regulatory action appealed to (SEC, *SRO*, Federal or State Court) and Date Appeal Filed:

If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.

10. How was matter resolved:
Acceptance, Waiver & Consent(AWC)

11. Resolution Date (MM/DD/YYYY):
04/02/2004 (●) Exact ( ) Explanation
If not exact, provide explanation:

12. Resolution Detail:

A. Were any of the following Sanctions *Ordered* (check all appropriate items)?

- [x] Monetary/Fine Amount:$ 50000
- [ ] Revocation/Expulsion/Denial
- [x] Disgorgement/Restitution
- [x] Censure
- [ ] Cease and Desist/Injunction
- [ ] Bar
- [ ] Suspension

B. Other Sanctions *Ordered*:

Sanction detail: if suspended, *enjoined* or barred, provide duration including start date

and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an *advisory affiliate*, date paid and if any portion of penalty was waived:
WITHOUT ADMITTING OR DENYING THE ALLEGATIONS, WSSI CONSENTED TO THE DESCRIBED SANCTIONS OF THE AWC. THE FIRM WAS CENSURED, FINED $50000.00, AND ORDERED TO PAY $48,955.35 IN PARTIAL RESTITUTION TO PUBLIC CUSTOMERS WHO PURCHASED B SHARES. THE RESTITUTION MUST BE PAID WITHIN 30 DAYS AFTER THE ACCEPTANCE OF THE AWC.

13. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the space provided.)
THE DETAILS OF THIS ACTION HAVE BEEN THOROUGHLY ADDRESSED IN PREVIOUS QUESTIONS WITHIN THIS DISCLOSURE.

GENERAL INSTRUCTIONS

This Disclosure Reporting Page (DRP ADV) is an ○ INITIAL ***OR*** ◉ AMENDED response used to report details for affirmative responses to Items 11.C., 11.D., 11.E., 11.F. or 11.G. of Form ADV.

Check item(s) being responded to:

Regulatory Action

☐ 11.C(1)	☐ 11.C(5)	☐ 11.D(4)	☐ 11.E(3)
☐ 11.C(2)	☐ 11.D(1)	☐ 11.D(5)	☐ 11.E(4)
☐ 11.C(3)	☐ 11.D(2)	☐ 11.E(1)	☐ 11.F
☐ 11.C(4)	☐ 11.D(3)	☑ 11.E(2)	☐ 11.G

Use a separate DRP for each event or *proceeding*. The same event or *proceeding* may be reported for more than one *person* or entity using one DRP. File with a completed Execution Page.

One event may result in more than one affirmative answer to Items 11.C., 11.D., 11.E., 11.F. or 11.G. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.

PART I

A. The *person(s)* or entity(ies) for whom this DRP is being filed is (are):

◉ You (the advisory firm)

○ You and one or more of your *advisory affiliates*

○ One or more of your *advisory affiliates*

If this DRP is being filed for an *advisory affiliate*, give the full name of the *advisory affiliate* below (for individuals, Last name, First name, Middle name).

If the *advisory affiliate* has a *CRD* number, provide that number. If not, indicate "non-registered" by checking the appropriate box.

ADV DRP - *ADVISORY AFFILIATE*

No Information Filed

☐ This DRP should be removed from the ADV record because the *advisory affiliate(s)* is no longer associated with the adviser.

☐ This DRP should be removed from the ADV record because: (1) the event or *proceeding* occurred more than ten years ago or (2) the adviser is registered or applying for registration with the SEC and the event was resolved in the adviser's or *advisory affiliate's* favor.

If you are registered or registering with a *state securities authority*, you may remove a DRP for an event you reported only in response to Item 11.D(4), and only if that event occurred more than ten years ago. If you are registered or registering with the SEC, you may remove a DRP for any event listed in Item 11 that occurred more than ten years ago.

B. If the *advisory affiliate* is registered through the IARD system or *CRD* system, has the *advisory affiliate* submitted a DRP (with Form ADV, BD or U-4) to the IARD or *CRD* for the event? If the answer is "Yes," no other information on this DRP must be provided.

○ *Yes* ○ *No*

NOTE: The completion of this form does not relieve the *advisory affiliate* of its obligation to update its IARD or *CRD* records.

PART II

1. Regulatory Action initiated by:
○ SEC ○ Other Federal ○ State ◉ *SRO* ○ Foreign
(Full name of regulator, *foreign financial regulatory authority*, federal, state, or *SRO*)
NASD DEPARTMENT OF ENFORCEMENT

2. Principal Sanction:
Civil and Administrative Penalt(ies) /Fine(s)
Other Sanctions:
CENSURE

3. Date Initiated (MM/DD/YYYY):
11/30/2004 ◉ Exact ○ Explanation
If not exact, provide explanation:
CAF040100

4. Docket/Case Number:

5. *Advisory Affiliate* Employing Firm when activity occurred which led to the regulatory action (if applicable):

6. Principal Product Type:
No Product
Other Product Types:

7. Describe the allegations related to this regulatory action (your response must fit within the space provided):
THE FIRM VIOLATED NASD CONDUCT RULES 2110, 3010, AND NASD BYLAWS ARTICLE V, SECTION (2)(C) AND (3)(B) BY FAILING TO FILE IN A TIMELY MANNER CERTAIN FORM U4

AND U5 AMENDMENTS. FROM JANUARY 2002 THROUGH MARCH 2004, 160 AMENDMENTS WERE LATE, REPRESENTING 77% OF THE REQUIRED AMENDMENTS RELATING TO CUSTOMER COMPLAINTS, REGULATORY ACTIONS, AND CRIMINAL DISCLOSURES. THE FIRM'S SUPERVISORY PROCEDURES AND SYSTEMS WERE NOT REASONABLY DESIGNED TO ACHIEVE COMPLIANCE WITH ITS ARTICLE V REPORTING REQUIREMENTS.

8. Current status ? ○ Pending ○ On Appeal ◉ Final

9. If on appeal, regulatory action appealed to (SEC, *SRO*, Federal or State Court) and Date Appeal Filed:

If Final or On Appeal, complete all items below. For Pending Actions, complete Item 13 only.

10. How was matter resolved:
Acceptance, Waiver & Consent(AWC)

11. Resolution Date (MM/DD/YYYY):
11/30/2004 ◉ Exact ○ Explanation
If not exact, provide explanation:

12. Resolution Detail:

A. Were any of the following Sanctions *Ordered* (check all appropriate items)?

☑ Monetary/Fine Amount:$ 200000

☐ Revocation/Expulsion/Denial

☐ Disgorgement/Restitution

☑ Censure

☐ Cease and Desist/Injunction

☐ Bar

☐ Suspension

B. Other Sanctions *Ordered*:
UNDERTAKINGS

Sanction detail: if suspended, *enjoined* or barred, provide duration including start date and capacities affected (General Securities Principal, Financial Operations Principal, etc.). If requalification by exam/retraining was a condition of the sanction, provide length of time given to requalify/retrain, type of exam required and whether condition has been satisfied. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation, provide total amount, portion levied against you or an *advisory affiliate*, date paid and if any portion of penalty was waived:
THE FIRM IS CENSURED, FINED $200,000 TO BE PAID WITHIN 10 DAYS OF NOTICE OF ACCEPTANCE OF THE AWC, AND IS REQUIRED TO COMPLY WITH CERTAIN UNDERTAKINGS. THE FIRM'S INTERNAL AUDIT DEPARTMENT SHALL CONDUCT AN AUDIT FOR THE PERIOD FROM JAN 1, 2004 THROUGH SEPT 20, 2004 TO ASSESS THE EFFECTIVENESS OF ITS SYSTEM AND PROCEDURES TO ENSURE THE TIMLEY FILING OF FORM U4 AND U% AMENDMENTS. A REPORT OF FINDINGS SHALL BE PREPARED AND SHALL INCLUDE RECOMMENDATIONS. A SIMILAR AUDIT MUST BE CONDUCTED FOR THE NEXT FOUR CALENDAR QUARTERS BEGINNING 4TH QUARTER 2004. NO LATER THAN 90 DAYS AFTER NOTICE OF ACCEPTANCE OF THIS AWC, AN OFFICER OF THE FIRM SHALL CERTIFY IN WRITING TO THE NASD THAT AN AUDIT WAS CONDUCTED AND THAT THE OFFICER HAS REVIEWED THE CURRENT AUDIT REPORT. NO LATER THAN 60 DAYS AFTER THE DATE OF THE REPORT, AN OFFICER SHALL CERTIFY IN WRITING TO THE NASD THAT THE FIRM HAS IMPLEMENTED ANY RECOMMENDATIONS WITHIN A SPECIFIED TIME PERIOD. NO LATER THAN 60 DAYS AFTER THE LAST DAY OF THE NEXT

FOUR QUARTERS, AN OFFICER SHALL CERTIFY IN WRITING TO THE NASD THAT AN AUDIT WAS CONDUCTED, THE CURRENT AUDIT REPORT WAS REVIEWED, AND THE RECOMMENDATIONS IMPLEMENTED. NO LATER THAN 6 MONTHS AFTER THE ACCEPTANCE OF THIS AWC, AN OFFICER SHALL CERTIFY IN WRITING TO THE NASD THAT THE FIRM HAS REVIEWED ITS REPORTING SYSTEM AND PROCEDURES AND THEY ARE REASONABLY DESIGNED TO ACHIEVE COMPLIANCE WITH REPORTING REQUIREMENTS.

13. Provide a brief summary of details related to the action status and (or) disposition and include relevant terms, conditions and dates (your response must fit within the space provided.)
WITHOUT ADMITTING OR DENYING THE ALLEGATIONS DESCRIBED ABOVE, THE FIRM ON NOV 30, 2004 ENTERED INTO AN AWC WITH THE NASD DEPARTMENT OF ENFORCEMENT. THE FIRM THEREBY CONSENTED TO THE ABOVE DESCRIBED SANCTIONS, INCLUDING A FINE, CENSURE, AND VARIOUS UNDERTAKINGS.

CIVIL JUDICIAL ACTION DISCLOSURE REPORTING PAGE (ADV)

No Information Filed

FORM ADV

OMB: 3235-0049

UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

Primary Business Name: ING FINANCIAL PARTNERS, INC	**IARD/CRD Number: 2882**
	Rev. 11/2010

Form ADV, Signature Page

DOMESTIC INVESTMENT ADVISER EXECUTION PAGE

You must complete the following Execution Page to Form ADV. This execution page must be signed and attached to your initial application for SEC registration and all amendments to registration.

Appointment of Agent for Service of Process

By signing this Form ADV Execution Page, you, the undersigned adviser, irrevocably appoint the Secretary of State or other legally designated officer, of the state in which you maintain your *principal office and place of business* and any other state in which you are submitting a *notice filing*, as your agents to receive service, and agree that such *persons* may accept service on your behalf, of any notice, subpoena, summons, *order* instituting *proceedings*, demand for arbitration, or other process or papers, and you further agree that such service may be made by registered or certified mail, in any federal or state action, administrative *proceeding* or arbitration brought against you in any place subject to the jurisdiction of the United States, if the action, *proceeding* or arbitration (a) arises out of any activity in connection with your investment advisory business that is subject to the jurisdiction of the United States, and (b) is *founded*, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these acts, or (ii) the laws of the state in which you maintain your *principal office and place of business* or of any state in which you are submitting a *notice filing*.

Signature

I, the undersigned, sign this Form ADV on behalf of, and with the authority of, the investment adviser. The investment adviser and I both certify, under penalty of perjury under the laws of the United States of America, that the information and statements made in this ADV, including exhibits

and any other information submitted, are true and correct, and that I am signing this Form ADV Execution Page as a free and voluntary act.

I certify that the adviser's books and records will be preserved and available for inspection as required by law. Finally, I authorize any *person* having custody or possession of these books and records to make them available to federal and state regulatory representatives.

Signature: CHRISTOPHER A. COKINIS	Date: MM/DD/YYYY 03/31/2011
Printed Name: CHRISTOPHER A. COKINIS	Title: VICE PRESIDENT, CHIEF COMPLIANCE OFFICER
Adviser *CRD* Number: 2882	

NON-RESIDENT **INVESTMENT ADVISER EXECUTION PAGE**

You must complete the following Execution Page to Form ADV. This execution page must be signed and attached to your initial application for SEC registration and all amendments to registration.

1. Appointment of Agent for Service of Process

By signing this Form ADV Execution Page, you, the undersigned adviser, irrevocably appoint each of the Secretary of the SEC, and the Secretary of State or other legally designated officer, of any other state in which you are submitting a *notice filing*, as your agents to receive service, and agree that such *persons* may accept service on your behalf, of any notice, subpoena, summons, *order* instituting *proceedings*, demand for arbitration, or other process or papers, and you further agree that such service may be made by registered or certified mail, in any federal or state action, administrative *proceeding* or arbitration brought against you in any place subject to the jurisdiction of the United States, if the action, *proceeding*, or arbitration (a) arises out of any activity in connection with your investment advisory business that is subject to the jurisdiction of the United States, and (b) is *founded*, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these acts, or (ii) the laws of any state in which you are submitting a *notice filing*.

2. Appointment and Consent: Effect on Partnerships

If you are organized as a partnership, this irrevocable power of attorney and consent to service of process will continue in effect if any partner withdraws from or is admitted to the partnership, provided that the admission or withdrawal does not create a new partnership. If the partnership dissolves, this irrevocable power of attorney and consent shall be in effect for any action brought against you or any of your former partners.

3. *Non-Resident* Investment Adviser Undertaking Regarding Books and Records

By signing this Form ADV, you also agree to provide, at your own expense, to the U.S. Securities and Exchange Commission at its principal office in Washington D.C., at any Regional or District Office of the Commission, or at any one of its offices in the United States, as specified by the Commission, correct, current, and complete copies of any or all records that you are required to maintain under Rule 204-2 under the Investment Advisers Act of 1940. This undertaking shall be binding upon you, your heirs, successors and assigns, and any *person* subject to your written irrevocable consents or powers of attorney or any of your general partners and *managing agents*.

Signature

I, the undersigned, sign this Form ADV on behalf of, and with the authority of, the *non-resident* investment adviser. The investment adviser and I both certify, under penalty of perjury under the

laws of the United States of America, that the information and statements made in this ADV, including exhibits and any other information submitted, are true and correct, and that I am signing this Form ADV Execution Page as a free and voluntary act.

I certify that the adviser's books and records will be preserved and available for inspection as required by law. Finally, I authorize any *person* having custody or possession of these books and records to make them available to federal and state regulatory representatives.

Signature:	Date: MM/DD/YYYY
Printed Name:	Title:
Adviser *CRD* Number: 2882	

State Registered Investment Adviser Execution Page

You must complete the following Execution Page to Form ADV. This execution page must be signed and attached to your initial application for state registration and all amendments to registration.

1. Appointment of Agent for Service of Process

By signing this Form ADV Execution Page, you, the undersigned adviser, irrevocably appoint the legally designated officers and their successors, of the state in which you maintain your *principal office and place of business* and any other state in which you are applying for registration or amending your registration, as your agents to receive service, and agree that such persons may accept service on your behalf, of any notice, subpoena, summons, *order* instituting *proceedings*, demand for arbitration, or other process or papers, and you further agree that such service may be made by registered or certified mail, in any federal or state action, administrative *proceeding* or arbitration brought against you in any place subject to the jurisdiction of the United States, if the action, *proceeding*, or arbitration (a) arises out of any activity in connection with your investment advisory business that is subject to the jurisdiction of the United States, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these acts, or (ii) the laws of the state in which you maintain your *principal office and place of business* or of any state in which you are applying for registration or amending your registration.

2. State-Registered Investment Adviser Affidavit

If you are subject to state regulation, by signing this Form ADV, you represent that, you are in compliance with the registration requirements of the state in which you maintain your principal place of business and are in compliance with the bonding, capital, and recordkeeping requirements of that state.

Signature

I, the undersigned, sign this Form ADV on behalf of, and with the authority of, the investment adviser. The investment adviser and I both certify, under penalty of perjury under the laws of the United States of America, that the information and statements made in this ADV, including exhibits and any other information submitted, are true and correct, and that I am signing this Form ADV Execution Page as a free and voluntary act.

I certify that the adviser's books and records will be preserved and available for inspection as required by law. Finally, I authorize any *person* having *custody* or possession of these books and records to make them available to federal and state regulatory representatives.

Signature	Date MM/DD/YYYY
CRD Number 2882	
Printed Name	Title