

**Sowell Management Quarterly Political Contributions Certification for
Investment Advisor Representatives and Access Persons**

Investment Advisor Representatives and Access Persons should Certify as to items (1), (2) and (3) below

I certify that in the three-month period ending on _____:

(1) **Choose either Yes or No:**

Sowell Management policies prohibit Investment Advisor Representatives and Access Persons from making any political contribution for the purpose of influencing or inducing the obtaining or retaining of investment advisory services business. Furthermore, Sowell Management policies prohibit Investment Advisor Representatives and Access Persons from directing, suggesting or soliciting any other person to make any political contribution, or coordinated any political contributions, for the purpose of influencing or inducing the obtaining or retaining of investment advisory services business.

I certify that I have complied with these policies: _____ [Yes] _____ [No]

(2) **Choose either (a) or (b):**

- a) I have not coordinated or solicited a political contribution on behalf of a state or local official or candidate for state or local office, or a state or local political party. _____ (initial if applicable)
- a) I have coordinated or solicited a political contribution on behalf of a state or local official or candidate for state or local office, or a state or local political party as described below:

Date of Contribution	Date of Pre-Clearance	Candidate/Party	Election	Amount

(3) **Choose either (a) or (b):**

- a) I have not made (or directed to be made) any political contribution to a state or local official or to a candidate for state or local office. _____ (initial if applicable)
- b) I have made (or directed to be made) the following contributions to state or local officials or candidates for state or local office:

Date of Contribution	Date of Pre-Clearance	Candidate/Party	Election	Amount

BY SIGNING BELOW.

I declare and affirm that the information listed above has been examined by me and is in all things true and correct and Sowell Management may rely on this disclosure.

Signature: _____ Date: _____

Name: _____
(Please Print)