

FORM ADV**Part II - Page 1****Uniform Application for Investment Adviser Registration**

Name of Investment Adviser: Scott Rappoport, CLU, ChFC, Inc.						
Address:	(Number and Street)	(City)	(State)	(Zip Code)	Area Code:	Telephone Number:
	1952 Rt 22 East,	Bound Brook,	NJ	08805	(732)	560-1010

**This part of Form ADV gives information about the investment adviser and its business for the use of clients.
The information has not been approved or verified by any governmental authority.**

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(Schedules A B C D and E are included with Part I of this Form, for the use of regulatory bodies, and are not distributed to clients.)

**Potential persons who are to respond to the collection of information contained in this form
are not required to respond unless the form displays a currently valid OMB control number.**

Applicant:
Scott Rappoport, CLU, ChFC, Inc.

SEC File Number:
801- 66087

Date:
12/20/2007

1. A. Advisory Services and Fees. (check the applicable boxes)

For each type of service provided, state the approximate
% of total advisory billings from that service.
(See instruction below.)

Applicant:

- | | | |
|--|-----|---|
| <input checked="" type="checkbox"/> (1) Provides investment supervisory services | 100 | % |
| <input type="checkbox"/> (2) Manages investment advisory accounts not involving investment supervisory services | | % |
| <input type="checkbox"/> (3) Furnishes investment advice through consultations not included in either service described above | | % |
| <input type="checkbox"/> (4) Issues periodicals about securities by subscription | | % |
| <input type="checkbox"/> (5) Issues special reports about securities not included in any service described above | | % |
| <input type="checkbox"/> (6) Issues, not as part of any service described above, any charts, graphs, formulas, or other devices which clients may use to evaluate securities | | % |
| <input type="checkbox"/> (7) On more than an occasional basis, furnishes advice to clients on matters not involving securities | | % |
| <input type="checkbox"/> (8) Provides a timing service | | % |
| <input type="checkbox"/> (9) Furnishes advice about securities in any manner not described above | | % |

(Percentages should be based on applicant's last fiscal year. If applicant has not completed its first fiscal year, provide estimates of advisory billings for that year and state that the percentages are estimates.)

B. Does applicant call any of the services it checked above financial planning or some similar term? Yes No
☐ ☒

C. Applicant offers investment advisory services for: (check all that apply)

- | | |
|--|--|
| <input checked="" type="checkbox"/> (1) A percentage of assets under management | <input type="checkbox"/> (4) Subscription fees |
| <input type="checkbox"/> (2) Hourly charges | <input type="checkbox"/> (5) Commissions |
| <input checked="" type="checkbox"/> (3) Fixed fees (not including subscription fees) | <input type="checkbox"/> (6) Other |

D. For each checked box in A above, describe on Schedule F-

- the services provided, including the name of any publication or report issued by the adviser on a subscription basis or for a fee
- applicant's basic fee schedule, how fees are charged and whether its fees are negotiable
- when compensation is payable, and if compensation is payable before service is provided, how a client may get a refund or may terminate an investment advisory contract before its expiration date

2. Types of clients Applicant generally provides investment advice to: (check those that apply)

- | | |
|---|--|
| <input checked="" type="checkbox"/> A. Individuals | <input checked="" type="checkbox"/> E. Trusts, estates, or charitable organizations |
| <input type="checkbox"/> B. Banks or thrift institutions | <input checked="" type="checkbox"/> F. Corporations or business entities other than those listed above |
| <input type="checkbox"/> C. Investment companies | <input type="checkbox"/> G. Other (describe on Schedule F) |
| <input checked="" type="checkbox"/> D. Pension and profit sharing plans | |

Answer all items. Complete amended pages in full, circle amended items and file with execution page (page 1).

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Applicant:

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3. Types of Investments. Applicant offers advice on the following: (check those that apply)

- | | |
|--|--|
| <input checked="" type="checkbox"/> A. Equity securities | <input checked="" type="checkbox"/> H. United States government securities |
| <input checked="" type="checkbox"/> (1) exchange-listed securities | <input type="checkbox"/> I. Options contracts on: |
| <input checked="" type="checkbox"/> (2) securities traded over-the-counter | <input type="checkbox"/> (1) securities |
| <input checked="" type="checkbox"/> (3) foreign issuers | <input type="checkbox"/> (2) commodities |
| <input checked="" type="checkbox"/> B. Warrants | <input type="checkbox"/> J. Futures contracts on: |
| <input checked="" type="checkbox"/> C. Corporate debt securities (other than commercial paper) | <input type="checkbox"/> (1) tangibles |
| <input checked="" type="checkbox"/> D. Commercial paper | <input type="checkbox"/> (2) intangibles |
| <input checked="" type="checkbox"/> E. Certificates of deposit | <input type="checkbox"/> K. Interests in partnerships investing in: |
| <input checked="" type="checkbox"/> F. Municipal securities | <input type="checkbox"/> (1) real estate |
| <input type="checkbox"/> G. Investment company securities: | <input type="checkbox"/> (2) oil and gas interests |
| <input checked="" type="checkbox"/> (1) variable life insurance | <input type="checkbox"/> (3) other (explain on Schedule F) |
| <input checked="" type="checkbox"/> (2) variable annuities | <input checked="" type="checkbox"/> L. Other (explain on Schedule F) |
| <input checked="" type="checkbox"/> (3) mutual fund shares | |

4. Methods of Analysis, Sources of Information, and Investment Strategies.**A.** Applicant's security analysis methods include: (check those that apply)

- | | |
|---|--|
| (1) <input type="checkbox"/> Charting | (4) <input type="checkbox"/> Cyclical |
| (2) <input checked="" type="checkbox"/> Fundamental | (5) <input type="checkbox"/> Other (explain on Schedule F) |
| (3) <input checked="" type="checkbox"/> Technical | |

B. The main sources of information applicant uses include: (check those that apply)

- | | |
|---|---|
| (1) <input checked="" type="checkbox"/> Financial newspapers and magazines | (5) <input type="checkbox"/> Timing services |
| (2) <input type="checkbox"/> Inspections of corporate activities | (6) <input checked="" type="checkbox"/> Annual reports, prospectuses, filings with the Securities and Exchange Commission |
| (3) <input checked="" type="checkbox"/> Research materials prepared by others | (7) <input checked="" type="checkbox"/> Company press releases |
| (4) <input type="checkbox"/> Corporate rating services | (8) <input type="checkbox"/> Other (explain on Schedule F) |

C The investment strategies used to implement any investment advice given to clients include: (check those that apply)

- | | |
|--|---|
| (1) <input checked="" type="checkbox"/> Long term purchases
(securities held at least a year) | (5) <input checked="" type="checkbox"/> Margin transactions |
| (2) <input checked="" type="checkbox"/> Short term purchases
(securities sold within a year) | (6) <input checked="" type="checkbox"/> Option writing, including covered options, uncovered options, or spreading strategies |
| (3) <input checked="" type="checkbox"/> Trading (securities sold within 30 days) | (7) <input type="checkbox"/> Other (explain on Schedule F) |
| (4) <input type="checkbox"/> Short sales | |

Answer all items. Complete amended pages in full, circle amended items and file with execution page (page 1).

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Date-
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5. Education and Business Standards.

Are there any general standards of education or business experience that applicant requires of those involved in determining or giving investment advice to clients? ----- Yes No
☒ ☐
 (If yes, describe these standards on Schedule F.)

6. Education and Business Background.

For:

- Each member of the investment committee or group that determines general investment advice to be given to clients, or
- if the applicant has no investment committee or group, each individual who determines general investment advice given to clients (if more than five, respond only for their supervisors)
- each principal executive officer of applicant or each person with similar status or performing similar functions.

On Schedule F, give the:

- | | |
|-----------------|--|
| • name | • formal education after high school |
| • year of birth | • business background for the preceding five years |

7. Other Business Activities. (check those that apply)

- ☒ A. Applicant is actively engaged in a business other than giving investment advice.
- ☒ B. Applicant sells products or services other than investment advice to clients.
- ☒ C. The principal business of applicant or its principal executive officers involves something other than providing investment advice.

(For each checked box describe the other activities, including the time spent on them, on Schedule F.)

8. Other Financial Industry Activities or Affiliations. (check those that apply)

- ☐ A. Applicant is registered (or has an application pending) as a securities broker-dealer.
- ☐ B. Applicant is registered (or has an application pending) as a futures commission merchant, commodity pool operator or commodity trading adviser.

C. Applicant has arrangements that are material to its advisory business or its clients with a related person who is a-

- | | |
|--|--|
| <input type="checkbox"/> (1) broker-dealer | <input type="checkbox"/> (7) accounting firm |
| <input type="checkbox"/> (2) investment company | <input type="checkbox"/> (8) law firm |
| <input type="checkbox"/> (3) other investment adviser | <input checked="" type="checkbox"/> (9) insurance company or agency |
| <input type="checkbox"/> (4) financial planning firm | <input checked="" type="checkbox"/> (10) pension consultant |
| <input type="checkbox"/> (5) commodity pool operator, commodity trading adviser or futures commission merchant | <input type="checkbox"/> (11) real estate broker or dealer |
| <input type="checkbox"/> (6) banking or thrift institution | <input type="checkbox"/> (12) entity that creates or packages limited partnerships |

(For each checked box in C, on Schedule F identify the related person and describe the relationship and the arrangements.)

D. Is applicant or a related person a general partner in any partnership in which clients are solicited to invest? ----- Yes No
☐ ☒

(If yes, describe on Schedule F the partnerships and what they invest in.)

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Applicant:

Scott Rappoport, CLU, ChFC, Inc.

SEC File Number:

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Date:

12/20/2007

9. Participation or Interest in Client Transactions.

Applicant or a related person: (check those that apply)

- ☐ A. As principal, buys securities for itself from or sells securities it owns to any client.
- ☒ B. As broker or agent effects securities transactions for compensation for any client.
- ☐ C. As broker or agent for any person other than a client effects transactions in which client securities are sold to or bought from a brokerage customer.
- ☐ D. Recommends to clients that they buy or sell securities or investment products in which the applicant or a related person has some financial interest.
- ☒ E. Buys or sells for itself securities that it also recommends to clients.

(For each box checked, describe on Schedule F when the applicant or a related person engages in these transactions and what restrictions, internal procedures, or disclosures are used for conflicts of interest in those transactions.)

- 10. Conditions for Managing Accounts.** Does the applicant provide investment supervisory services, manage investment advisory accounts or hold itself out as providing financial planning or some similarly termed services and impose a minimum dollar value of assets or other conditions for starting or maintaining an account? Yes No ☐ ☒

(If yes, describe on Schedule F)

11. Review of Accounts. If applicant provides investment supervisory services, manages investment advisory accounts, or holds itself out as providing financial planning or some similarly termed services:

- A. Describe below the reviews and reviewers of the accounts. For reviews, include their frequency, different levels, and triggering factors. For reviewers, include the number of reviewers, their titles and functions, instructions they receive from applicant on performing reviews, and number of accounts assigned each.

Client accounts are reviewed on a continuous basis. All reviews are performed by Mr. Rappoport and/or Mr. Stolzer

A printed quarterly report is forwarded to all clients.

A number of accounts are employee directed 401(k) plans. An annual educational meeting is offered to plan sponsors for the benefit of participants

Educational Meetings may be conducted by Mr. Rappoport , Mr. Stolzer or Ms. Levison.

Advisor does not vote proxies. Advisor may consult with clients regarding proxies and recommend actions.

Client also provides Pension and 401k plan consulting which may be flat fee based. Advisor may not have access indiv or omnibus trust account(s). In that case client will provide research based reports only.

- B. Describe below the nature and frequency of regular reports to clients on their accounts.

Quarterly basis. Applicant also provides a monthly report to 401k trustees with publicly available information regarding mutual fund trailing period returns as published in Morningstar Principia.

Answer all items. Complete amended pages in full, circle amended items and file with execution page (page 1).

Applicant:
Scott Rappoport, CLU, ChFC, Inc.

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Date -
12/20/2007

12. Investment or Brokerage Discretion.

A. Does applicant or any related person have authority to determine, without obtaining specific client consent, the:

- | | |
|--|--|
| (1) securities to be bought or sold? | Yes No |
| | <input checked="" type="checkbox"/> <input type="checkbox"/> |
| (2) amount of the securities to be bought or sold? | Yes No |
| | <input checked="" type="checkbox"/> <input type="checkbox"/> |
| (3) broker or dealer to be used? | Yes No |
| | <input type="checkbox"/> <input checked="" type="checkbox"/> |
| (4) commission rates paid? | Yes No |
| | <input type="checkbox"/> <input checked="" type="checkbox"/> |

B. Does applicant or a related person suggest brokers to clients? ☐ ☒

For each yes answer to A describe on Schedule F any limitations on the authority. For each yes to A(3), A(4) or B, describe on Schedule F the factors considered in selecting brokers and determining the reasonableness of their commissions. If the value of products, research and services given to the applicant or a related person is a factor, describe:

the products, research and services

whether clients may pay commissions higher than those obtainable from other brokers in return for those products and services

whether research is used to service all of applicant's accounts or just those accounts paying for it and

any procedures the applicant used during the last fiscal year to direct client transactions to a particular broker in return for products and research services received.

13. Additional Compensation.

Does the applicant or a related person have any arrangements, oral or in writing, where it:

- | | |
|---|--|
| A. is paid cash by or receives some economic benefit (including commissions, equipment or non-research services) from a non-client in connection with giving advice to clients? | Yes No |
| | <input checked="" type="checkbox"/> <input type="checkbox"/> |
| B. directly or indirectly compensates any person for client referrals? | Yes No |
| | <input checked="" type="checkbox"/> <input type="checkbox"/> |

(For each yes, describe the arrangements on Schedule F.)

14. Balance Sheet. Applicant must provide a balance sheet for the most recent fiscal year on Schedule G if applicant:

- has custody of client funds or securities; or
- requires prepayment of more than \$500 in fees per client and 6 or more months in advance

Has applicant provided a Schedule G balance sheet? ☐ ☒

**Schedule F of
Form ADV**

Continuation Sheet for Form ADV Part II

Applicant: Scott Rappoport, CLU, ChFC, Inc.	SEC File Number- 901- 66087	Date: 12/20/2007
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(Do not use this Schedule as a continuation sheet for Form ADV Part I or any other schedules.)

1. Full name of applicant exactly as stated in Item 1A of Part I of Form ADV: Scott Rappoport, CLU, ChFC, Inc.		IRS Empl. Ident. No. - 22-2979579
Item of Form (identify)	Answer	
5	Formal Education of appropriate Bachelors Degree or Higher in Business, Finance, Accounting, Law or similar area. and/or Professional Education and certifications, such as CLU, ChFC, CEBS; or NASD License combined with prior experience or minimum of five years of experience as a Registered Rep and/or Investment Advisor	
6.	<p>Scott Rappoport 12/26/62 Rutgers College - BA Economics & Finance 1984, CLU ChFC - 1989, CEBS - 1997</p> <p>CEO - Scott Rappoport CLU, ChFC, Inc. dba Benefit Sources & Solutions, 11/07 Present, President 05/89 - 11/07, CRD # 1352073</p> <p>Howard Stolzer 02/11/62 Berklee College of Music-BM Audio Rec. 1984, Rollins College-MBA 1992, CEBS 2001</p> <p>Exec VP, Chief Investment Officer, CCO - Scott Rappoport CLU, ChFC, Inc. dba Benefit Sources & Solutions 11/2007 - Present</p> <p>VP 4/98 - 11/2007, Account Mgr 12/96-3/98 Scott Rappoport CLU, ChFC, Inc. dba Benefit Sources & Solutions CRD# 1551722</p> <p>Carol Levison 08/20/49 Boston University-Psychology 197, Rutgers Law School-Newark - JD 1995, CLU-1981</p> <p>Manager Qualified Plans - Scott Rappoport CLU, ChFC, Inc. dba Benefit Sources & Solutions 11/2006 - Present</p> <p>Manager, Compliance Dept. ADP Retirement Services 1996-2006 CRD# 5459632 Series 65 - 2008</p>	
7 A, B, C,	<p>Applicant sells insurance products. The primary sales function is attributable to the sale of group health, other group insurance, individual health, individual life. A potential conflict exists.</p> <p>Applicant spends approximately 50% of time engaged in above activities.</p>	
9 B	If the purchase or sale as broker or is for compensation, such compensation would be fully disclosed at once.	
9 D	Any recommendation of a security in which either the applicant or its associated persons may have a financial interest is purely coincidental and applicant's associated persons would fully disclose any such interest to clients.	
9 E	<p>In the unlikely event that the interests of the applicant would happen to correspond with an advisory client's interests, full disclosure would be made to such client</p> <p>It is further noted that applicant is in and shall continue to be in total compliance with the Insider Trading and Securities Fraud Enforcement Act of 1988. Specifically, applicant has adopted a firm wide policy statement outlining insider trading compliance by applicant and its associated persons and other employees. This statement has been distributed to all associated persons and other employees of applicant and has been signed and dated by each such person. A copy of such firm wide policy is left with such person and the original is maintained in a master file. Further, applicant has adopted a written supervisory procedures statement highlighting the steps which shall be taken to implement the firm wide policy. These materials are also distributed to all associated persons and other employees of the applicant, are signed, dated and filed with the insider trading compliance materials. These are provisions adopted for (1) restricting access to files, (2) providing continuing education, (3) restricting and / or monitoring trading on those securities of which applicant's employees may have non-public information, (4) requiring all of applicant's employees to conduct their trading through a specified broker or reporting all transactions promptly to applicant, (5) monitoring the securities trading firm and its employees and associated persons, and (6) an ethics policy has been established and distributed to employees.</p> <p>Applicant or individuals associated with applicant may buy or sell securities identical to those recommended to customers for their personal account.</p> <p>It is the expressed policy of applicant that no person employed by applicant may purchase or sell any securities prior to a transaction(s) being implemented for an advisory account, and therefore preventing such employees from benefiting from transactions placed on behalf of advisory accounts.</p>	
Complete amended pages in full, circle amended items and file with execution page (page 1).		

**Schedule F of
Form ADV
Continuation Sheet for Form ADV Part II**

Applicant: Scott Rappoport CLU, ChFC, Inc.	SEC File Number- 901- 66087	Date: 12/20/2007
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(Do not use this Schedule as a continuation sheet for Form ADV Part I or any other schedules.)

1. Full name of applicant exactly as stated in Item 1A of Part I of Form ADV: Scott Rappoport CLU, ChFC, Inc.		IRS Empl. Ident. No. - 22-2979579
Item of Form (identify)	Answer	
9 E (continued)	<p>Applicant or any related person(s) may have an interest or position in a certain security(ies) which may also be recommended to a client.</p> <p>As these situations represent a conflict of interest, applicant has established the following restrictions in order to ensure its fiduciary responsibilities:</p> <ol style="list-style-type: none"> 1. A director, officer or employee of applicant shall not buy or sell securities for their personal portfolio(s) where their decision is substantially derived in whole or in part by reason of his or her employment unless the information is also available to the investing public on reasonable inquiry. No person of the applicant shall prefer his or her own interest to that of the advisory client. 2. Applicant maintains a list of all securities holdings for itself and anyone associated with this advisory practice. These holdings are reviewed on a regular basis by Mr. Scott Rappoport, President 3. Applicant requires that all individuals must act in accordance with all applicable federal and state regulations governing registered investment advisory practices. 4. Any individual not in observance of the above may be subject to termination. 5. A Code of ethics is in place that details guidelines for supervised employees. 6. Client is advised: Benefit Sources may offer guidance on proxy voting but does not vote proxies without express discussion with client. Client agrees to receive all proxy voting materials. 7. Benefit Sources employs electronic methods for records retention in addition to certain documents held in non-digital format. Some non-digital documents with sensitive individually identifiable information are destroyed on a periodic basis. Those documents may be scanned and stored in a segregated location on our server(s). 8. Our core portfolio management software is Portfoliocenter which is a product of a division of Charles Schwab. 	
13 A	Applicant sells insurance and investment products and will receive commission income on the sale of such products.	
13 B	<p>Applicant may use the services of paid solicitors.</p> <p>Applicant uses the services of Thomas J. Geraghty CRD# 4348159 as an outside solicitor on a regular basis. Compensation is paid for the referral of clients seeking group employee benefits products and services; i.e. medical insurance, employee directed 401(k) and other forms of Health and Welfare plans.</p> <p>Note that applicant does not maintain control over outside solicitors. Outside solicitors may also be employed as an outside solicitor or an Investment Advisor Representative with another firm.</p>	
Complete amended pages in full, circle amended items and file with execution page (page 1).		

**Schedule F of
Form ADV
Continuation Sheet for Form ADV Part II**

Applicant: Scott Rappoport CLU, ChFC, Inc	SEC File Number- 901- 66087	Date: 12/20/2007
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(Do not use this Schedule as a continuation sheet for Form ADV Part I or any other schedules.)

1. Full name of applicant exactly as stated in Item 1A of Part I of Form ADV:		IRS Empl. Ident. No. -
Item of Form (identify)	Answer	
Complete amended pages in full, circle amended items and file with execution page (page 1).		

**Schedule G of
Form ADV
Balance Sheet**

Applicant:

Scott Rappoport CLU, ChFC, Inc

SEC File Number:

801- 66087

Date:

12/20/2007

(Answers in Response to Form ADV Part II Item 14.)

1. Full name of applicant exactly as stated in Item 1A of Part I of Form ADV:	IRS Empl. Ident. No.:
<p style="text-align: center;">Instructions</p> <p>1. The balance sheet must be:</p> <p style="padding-left: 40px;">A. Prepared in accordance with generally accepted accounting principles</p> <p style="padding-left: 40px;">B. Audited by an independent public accountant</p> <p style="padding-left: 40px;">C. Accompanied by a note stating the principles used to prepare it, the basis of included securities, and any other explanations required for clarity.</p> <p>2. Securities included at cost should show their market or fair value parenthetically.</p> <p>3. Qualifications and any accompanying independent accountant's report must conform to Article 2 of Regulation S-X (17 CFR 210.2-01 et. seq.),</p> <p>4. Sole proprietor investment advisers:</p> <p style="padding-left: 40px;">A. Must show investment advisory business assets and liabilities separate from other business and personal assets and liabilities</p> <p style="padding-left: 40px;">B. May aggregate other business and personal assets and liabilities unless there is an asset deficiency in the total financial position.</p>	

Complete amended pages in full, circle amended items and file with execution page (page 1).

**Schedule H of
Form ADV
Page 1**

Applicant:
Scott Rappoport CLU, ChFC, Inc

SEC File Number:
801- 66087

DATE: 12/20/2007
MM/DD/YY

(for sponsors of wrap fee programs)

Name of wrap fee program or programs described in attached brochure:

- 1. Applicability of Schedule.** This Schedule must be completed by applicants that are compensated under a wrap fee program for sponsoring, organizing, or administering the program, or for selecting, or providing advice to clients regarding the selection of, other investment advisers in the program ("sponsors"). A wrap fee program is any program under which a specified fee or fees not based directly upon transactions in a client's account is charged for investment advisory services (which may include portfolio management or advice concerning the selection of other investment advisers) and execution of client transactions.
- 2. Use of Schedule.** This Schedule sets forth the information the sponsor must include in the wrap fee brochure it is required to deliver or offer to deliver to clients and prospective clients of its wrap fee programs under Rule 204-3 under the federal Advisers Act and similar rules of the jurisdictions. The wrap fee brochure prepared in response to this Schedule must be filed with the Commission and the jurisdictions as part of Form ADV by completing the identifying information on this Schedule and attaching the brochure. Brochures should be prepared separately, not on copies of this Schedule. Any wrap fee brochure filed with the Commission as part of an amendment to Form ADV shall contain in the upper right hand corner of the cover page the sponsor's registration number (801-).
- 3. General Contents of Brochure.** Unlike Parts I and II of this form, this Schedule is not organized in "check-the-box" format. These instructions, including the requests for information in Item 7 below, should not be repeated in the brochure. Rather, this Schedule describes minimum disclosures that must be made in the brochure to satisfy the sponsor's duty to disclose all material facts about the sponsor and its wrap fee programs. **Nothing in this Schedule relieves the sponsor from any obligation under any provision of the federal Advisers Act or rules thereunder, or other federal or state law to disclose information to its advisory clients or prospective advisory clients not specifically required by this Schedule.**
- 4. Multiple Sponsors.** If two or more persons fall within the definition of "sponsor" in Item I above for a single wrap fee program, only one such sponsor need complete the Schedule. The sponsors may choose among themselves the sponsor that will complete the Schedule.
- 5. Omission of Inapplicable Information.** Any information not specifically required by this Schedule that is included in the brochure should be applicable to clients and prospective clients of the sponsor's wrap fee programs. If the sponsor is required to complete this Schedule with respect to more than one wrap fee program, the sponsor may omit from the brochure furnished to clients and prospective clients of any wrap fee program or programs information required by this Schedule that is not applicable to clients or prospective clients of that wrap fee program or programs. If a sponsor of more than one wrap fee program prepares separate wrap fee brochures for clients of different programs, each brochure prepared must be filed with the Commission and the jurisdictions attached to a separate copy of this Schedule. Each such brochure must state that the sponsor sponsors other wrap fee programs and state how brochures for those programs may be obtained.
- 6. Updating.** Sponsors are required to file an amendment to the brochure promptly after any information in the brochure becomes materially inaccurate. Amendments may be made by use of a "sticker," i.e., a supplement affixed to the brochure that indicates what information is being added or updated and states the new or revised information, as long as the resulting brochure is readable. Stickers should be dated and should be incorporated into the text of the brochure when the brochure itself is revised.
- 7. Contents of Brochure.** Include in the brochure prepared in response to this Schedule:
 - (a) on the cover page, the sponsor's name, address, telephone number, and the following legend in bold type or some other prominent fashion:

This brochure provides clients with information about [name of sponsor] and the [name of program or programs] that should be considered before becoming a client of the [name of program or programs]. This information has not been approved or verified by any governmental authority.
 - (b) a table of contents reflecting the subject headings in the sponsor's brochure;
 - (c) the amount of the wrap fee charged for each program or, if fees vary according to a schedule established by the sponsor, a table setting forth the fee schedule, whether such fees are negotiable, the portion of the total fee (or the range of such amounts) paid to persons providing advice to clients regarding the purchase or sale of specific securities under the program ("portfolio managers"), and the services provided under each program (including the types of portfolio management services);

**Schedule H of
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Page 2**

Applicant: Scott Rappoport CLU, ChFC, Inc	SEC File Number: 801- 66087	DATE: 12/20/2007 MM/DD/YY
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- (d) a statement that the program may cost the client more or less than purchasing such services separately and a statement of the factors that bear upon the relative cost of the program (*e.g.*, the cost of the services if provided separately and the trading activity in the client's account);
- (e) if applicable, a statement that the person recommending the program to the client receives compensation as a result of the client's participation in the program, that the amount of this compensation may be more than what the person would receive if the client participated in other programs of the sponsor or paid separately for investment advice, brokerage, and other services, and that the person may therefore have a financial incentive to recommend the wrap fee program over other programs or services;
- (f) a description of the nature of any fees that the client may pay in addition to the wrap fee and the circumstances under which these fees may be paid (including, if applicable, mutual fund expenses and mark-ups, mark-downs or spreads paid to market makers from whom securities were obtained by the wrap fee broker);
- (g) how the program's portfolio managers are selected and reviewed, the basis upon which portfolio managers are recommended or chosen for particular clients, and the circumstances under which the sponsor will replace or recommend the replacement of the portfolio manager;
- (h) (1) if applicable, a statement to the effect that portfolio manager performance information is not reviewed by the sponsor or a third party and/or that performance information is not calculated on a uniform and consistent basis,

(2) if performance information is reviewed to determine its accuracy, the name of the party who reviews the information and a brief description of the nature of the review,

(3) a reference to any standards (*i.e.*, industry standards or standards used solely by the sponsor) under which performance information may be calculated;
- (i) a description of the information about the client that is communicated by the sponsor to the client's portfolio manager, and how often or under what circumstances the sponsor provides updated information about the client to the portfolio manager;
- (j) any restrictions on the ability of clients to contact and consult with portfolio managers-;
- (k) in narrative text, the information required by Items 7 and 8 of Part II of this form and as applicable to clients of the wrap fee program, the information required by Items 2, 5, 6, 9A and C, 10, 11, 13 and 14 of Part II;
- (l) if any practice or relationship disclosed in response to Item 7, 8, 9A, 9C and 13 of Part II presents a conflict between the interests of the sponsor and those of its clients, explain the nature of any such conflict of interest; and
- (in) if the sponsor or its divisions or employees covered under the same investment adviser registration as the sponsor act as portfolio managers for a wrap fee program described in the brochure, a brief, general description of the investments and investment strategies utilized by those portfolio managers.

8. Organization and Cross References. Except for the cover page requirements in Item 7(a) above, information contained in the brochure need not follow the order of the items listed in Item 7. However, the brochure should not be organized in such a manner that important information called for by the form is obscured.

Set forth below the page(s) of the brochure on which the various disclosures required by Item 7 are provided.

Page(s)		Page(s)		Page (s)	
Item	7(a)	Item	7(f)	Item	7(j)
	cover		#7(g)		#7(k)
	#7(b)		#7(h)		#7(l)
	#7(c)		#7(i)		#7(m)
	#7(d)				
	#7(e)				

Form ADV (Paper Version)
UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION

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 investment adviser will, within five days of a state's request, provide to that state a copy of the investment adviser's Form ADV Part II.

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: 1/15/2008

Printed Name: Scott Rappoport Title: CEO

Adviser CRD Number: 118158