



**Allstate**  
You're in good hands.

Auto  
Home  
Life  
Retirement

MAIL TO: Allstate Financial Services, LLC  
2920 South 84<sup>th</sup> St.  
Lincoln, NE 68506-4142  
FAX TO: (877) 328-1982

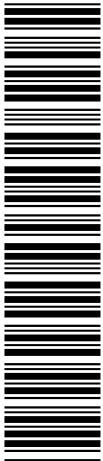
# ALLSTATE FINANCIAL SERVICES, LLC • NEW ACCOUNT DOCUMENT DIRECT MUTUAL FUNDS/NFS BROKERAGE

The information within this document helps us comply with various securities regulations and rules and the USA PATRIOT Act, a Federal law that requires all securities firms to obtain, verify, and record information that identifies each applicant.

**Please note:** If we cannot verify the information you provide, we may be required to restrict or deny your account.

## 1. ACCOUNT REGISTRATION

YOU MAY ONLY SELECT ONE REGISTRATION TYPE FROM THE BOX BELOW. If more than one registration type is selected, it will delay the processing of this New Account Document.



### Initial Transaction Placed

Check Only One:

- ☐ NFS (Brokerage)  
☐ Direct with Mutual Fund Company

### CHECK ONLY ONE:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Individual (Non-Qualified) | <input type="checkbox"/> Partnership     | <input type="checkbox"/> SIMPLE IRA    |
| <input type="checkbox"/> Joint-WROS (Non-Qualified) | <input type="checkbox"/> Estate          | <input type="checkbox"/> SEP IRA       |
| <input type="checkbox"/> Joint-TIC (Non-Qualified)  | <input type="checkbox"/> Traditional IRA | <input type="checkbox"/> 529 Plan      |
| <input type="checkbox"/> UTMA/UGMA                  | <input type="checkbox"/> IRA BDA         | <input type="checkbox"/> 401(k)        |
| <input type="checkbox"/> Transfer on Death          | <input type="checkbox"/> Rollover IRA    | <input type="checkbox"/> 403(b)        |
| <input type="checkbox"/> Trust                      | <input type="checkbox"/> Roth IRA        | <input type="checkbox"/> Solo 401(k)   |
| <input type="checkbox"/> Corporation                | <input type="checkbox"/> Roth IRA BDA    | <input type="checkbox"/> Coverdell ESA |
| <input type="checkbox"/> Other _____                |  |  |

## 2. ACCOUNT OWNER INFORMATION

☐ Primary Account Owner    ☐ Custodian    ☐ Trust

Name \_\_\_\_\_  
Legal Address (no PO Box) \_\_\_\_\_  
City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Work Phone \_\_\_\_\_  
Email Address \_\_\_\_\_  
Social or Tax ID# \_\_\_\_\_  
ID Type (Select One) ☐ Driver's License ☐ Passport ☐ State ID  
ID# \_\_\_\_\_ Expiration Date \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Country of Citizenship \_\_\_\_\_  
☐ Single ☐ Married    No. of Dependents \_\_\_\_\_  
Occupation \_\_\_\_\_ ☐ Retired  
Employer \_\_\_\_\_  
Employer's Address \_\_\_\_\_  
City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

☐ Joint Account Owner    ☐ Minor    ☐ Trustee

Name \_\_\_\_\_  
Legal Address (no PO Box) \_\_\_\_\_  
City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Work Phone \_\_\_\_\_  
Email Address \_\_\_\_\_  
Social or Tax ID# \_\_\_\_\_  
ID Type (Select One) ☐ Driver's License ☐ Passport ☐ State ID  
ID# \_\_\_\_\_ Expiration Date \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Country of Citizenship \_\_\_\_\_  
☐ Single ☐ Married    No. of Dependents \_\_\_\_\_  
Occupation \_\_\_\_\_ ☐ Retired  
Employer \_\_\_\_\_  
Employer's Address \_\_\_\_\_  
City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

# ALLSTATE FINANCIAL SERVICES, LLC • NEW ACCOUNT DOCUMENT

## DIRECT MUTUAL FUNDS/NFS BROKERAGE

### 3. RELATED ACCOUNTS AND/OR AFFILIATION INFORMATION

Primary Acct Owner

☐ Yes ☐ No

Joint Acct Owner

☐ Yes ☐ No

☐ Yes ☐ No

☐ Yes ☐ No

☐ Yes ☐ No

☐ Yes ☐ No

**Are you, your spouse, or any other immediate family members, including parents, in-laws, siblings and dependents:**

**Employed by or associated with the securities industry (for example, a representative of Allstate (EA or EFS), hold a Series 6 or Series 7 license, a member of a stock exchange, FINRA, a bank, a trust company, an insurance company, a sole proprietor, partner, officer, director, or branch manager of a broker-dealer firm) or a financial regulatory agency?**

If yes, please specify entity below. If employed by the entity and, if required, please provide a letter from your employer (with this New Account Document) approving establishment of this account.

☐ Broker-Dealer or Municipal Securities Dealer  
☐ FINRA

☐ Investment Advisor  
☐ State or Federal Securities Regulator

**An officer, director, policy-making executive officer or 10% (or more) shareholder in a publicly-owned company? (for example, do you own the company or hold a senior position at the company? Do you own 10% of the available stock in a company?)**

Name of company and symbol \_\_\_\_\_

Will someone other than the account holder have investment authorization on your account?

If yes, please attach the Limited Power of Attorney Form and indicate the name and relationship to the authorized individual (i.e. advisor, trust, family member).\*

**\*Do not indicate your Allstate Financial Services, LLC Personal Financial Representative (PFR) as having authorization on your account. PFRs are prohibited from acting as a personal custodian, guardian, trustee, executor or personal representative, or maintaining a Power of Attorney (POA) for any securities customer.**

### 4. INVESTOR PROFILE - HOUSEHOLD FINANCIAL BACKGROUND

#### Investment Objectives

Please Rank (i.e. 1, 2, 3...)

- \_\_\_ Preservation of Capital
- \_\_\_ Income
- \_\_\_ Growth - Capital Appreciation
- \_\_\_ Speculation
- \_\_\_ Tax Advantage

#### Prioritize Your Goals

Please Rank (i.e. 1, 2, 3...)

- \_\_\_ Retirement
- \_\_\_ Wealth Accumulation
- \_\_\_ Education
- \_\_\_ Provide for heirs
- \_\_\_ Health Care
- \_\_\_ Emergencies
- \_\_\_ Major Purchase
- \_\_\_ Other \_\_\_\_\_

#### Investment Time Horizon

Check One

- ☐ Short term (0-5 years)
- ☐ Intermediate (6-10 years)
- ☐ Long term (10+ years)

#### Risk Tolerance

Check One

- ☐ Aggressive
- ☐ Moderately Aggressive
- ☐ Moderate
- ☐ Moderately Conservative
- ☐ Conservative

#### Investment Experience

	None	1-5	6-10	11+yrs
Individual Stocks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Individual Bonds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mutual Funds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Variable Annuities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Variable Universal Life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fixed Annuities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Estimated Federal Tax Bracket

Check One

- ☐ 0 - 15%
- ☐ 25 - 27.5%
- ☐ Over 27.5%

#### Estimated Net Worth

- ☐ Under \$50,000
  - ☐ \$50,000 - \$100,000
  - ☐ \$100,001 - \$500,000
- If over \$500,000 list amount  
\$ \_\_\_\_\_

# ALLSTATE FINANCIAL SERVICES, LLC • NEW ACCOUNT DOCUMENT DIRECT MUTUAL FUNDS/NFS BROKERAGE

## 4. INVESTOR PROFILE - HOUSEHOLD FINANCIAL BACKGROUND (CONTINUED)

Please provide the value of each household asset below. You may also attach asset information to the New Account Document if it does not fit in the space provided.

### TOTAL HOUSEHOLD PROFILE

	Qualified		Non-Qualified
<b>Proposed Investment Amount</b>			
Checking/Savings/Money Market/CDs			
Stocks/Bonds			
Mutual Funds			
Variable Annuities			
Fixed Annuities			
401(k), Pension, 457, etc.			
<b>Total for each column:</b>		+	
<b>Total Assets/Liquid Net Worth (both Qualified and Non-Qualified):</b>	=		

**Estimated Total Household Annual Income:** \$

**Please list source(s) of Household Income (i.e. Social Security, disability, salary, annuity payments, etc.):** \_\_\_\_\_

**Total Annual Household Expense (i.e. mortgage, nursing home, rent, living expenses):** \$

**In the case of an unforeseen emergency, what assets (from the above list) will be used to cover the emergency?** \_\_\_\_\_

## 5. SERVICING INSTRUCTIONS NFS (BROKERAGE) ONLY

**Complete only for Brokerage Accounts held through NFS.  
If Direct with Mutual Fund Company, proceed to Section 7.**

<b>Purchases</b> <i>*Default if nothing selected</i> <input type="checkbox"/> Hold Securities* <input type="checkbox"/> Send Securities <small>(if available in physical form)</small>	<b>Dividends and Interest</b> <i>*Default if nothing selected</i> <i>^Option n/a for IRA Accounts, please provide separate distribution form.</i> <input type="checkbox"/> Hold proceeds, Sweep into Money Fund <input type="checkbox"/> Reinvest Dividends:* <div style="margin-left: 20px;"> <input type="checkbox"/> Mutual Fund*   <input type="checkbox"/> Equity*         </div> <input type="checkbox"/> ^Pay Dividends & Interest <div style="margin-left: 20px;"> <input type="checkbox"/> Mutual Fund   <input type="checkbox"/> Equity         </div> Send Check: <div style="margin-left: 20px;"> <input type="checkbox"/> Weekly   <input type="checkbox"/> Monthly  <input type="checkbox"/> Semi-monthly   <input type="checkbox"/> Quarterly         </div>	<b>Automatic Trade Settlement - Money Funds</b> <i>*Default if nothing selected</i> By checking one of the following Fidelity Capital Reserves Class Funds, you authorize the initial investment of the funds in your account into the fund account. <div style="text-align: right; margin-top: 10px;"> <input type="checkbox"/> Prime Fund*  <input type="checkbox"/> Treasury Fund         </div>
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I/We are requesting duplicate account statements to be sent to the following name & address: \_\_\_\_\_

# ALLSTATE FINANCIAL SERVICES, LLC ▪ New Account Document

## DIRECT MUTUAL FUNDS/NFS BROKERAGE

### 6. ESTABLISHING A MONEYLINE - OPTIONAL FOR NFS (BROKERAGE) ONLY

**Please note: This feature is for NFS Brokerage Accounts only. To establish a moneyline with a mutual fund company, please use that fund company's paperwork to set it up.** This section is optional and should only be completed if you choose to add standing Electronic Funds Transfer (EFT). EFT allows you to move money between your account and your bank account (with an identical registration). EFT transactions are processed via the Automated Clearing House (ACH). **It may take up to 14 days to establish EFT instructions.** Once EFT instructions are established, please allow 2-3 days after the date a distribution is processed for funds to reach your bank or credit union.

This is your authorization and direction to Allstate Financial Services, LLC and National Financial Services, LLC to utilize these payment instructions when acting upon your request(s) to distribute money from this account for payment to the bank account(s).

**Please complete the following bank information.**

Bank Account Type: ☐ Checking ☐ Saving

Bank Name: \_\_\_\_\_

Bank Account Number: \_\_\_\_\_ Bank ABA Number: \_\_\_\_\_

Name(s) as it (they) appear(s) on Bank Account: \_\_\_\_\_

**Please attach voided check here**

Signature of Depositor

Signature of Joint Depositor, if any

<b>7. INITIAL TRANSACTION/SOURCE OF FUNDS</b>
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Full Name of Product being Purchased	Transaction Amount or Approximate Amount
	\$
	\$

**Please Note:** A personal check is an acceptable form of payment, however we do need to know the origin of the investment assets.  
**Personal check is not an acceptable choice for Source of Funds.**

<input type="checkbox"/> Current Income	<input type="checkbox"/> Savings account or CD	<input type="checkbox"/> Mutual Funds*
<input type="checkbox"/> Stocks or Bonds	<input type="checkbox"/> Inheritance or death benefit proceeds	<input type="checkbox"/> Money from a life insurance policy*
<input type="checkbox"/> Money from an annuity*	<input type="checkbox"/> Rollover of \$ from employer sponsored retirement plan (401(k), Pension, etc.)	<input type="checkbox"/> Other_____

**\*AFS, LLC PFR: Please complete an AFS, LLC Switch Letter (Investment Replacement Form), if applicable.  
Also include a complete current statement from previous investment.**

<b>8. SUITABILITY NOTES</b>	
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This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

# ALLSTATE FINANCIAL SERVICES, LLC ▪ NEW ACCOUNT DOCUMENT

## DIRECT MUTUAL FUNDS/NFS BROKERAGE

### 9. PURCHASING MUTUAL FUNDS

**Mutual funds are offered in various share classes. Each class has its own sales charge and affiliated expenses, which will reduce the total return. The performance of a mutual fund is not guaranteed and past performance does not guarantee future results. FINRA offers a Mutual Fund Expense Analyzer online at [www.finra.org](http://www.finra.org) to help compare how sales loads and expenses can impact returns on mutual fund investments.**

#### **CLASS A SHARES:**

Class A shares may have a front-end charge that is assessed on the purchase amount as described in the prospectus. Class A shares impose an asset-based investment management fee and other operating expenses.

- I/We understand mutual fund companies may offer discounts, called breakpoints, on the front-end sales charge if you make a large purchase, already hold other mutual funds offered by the same fund family; or commit to regularly purchasing the mutual fund shares. I/We understand that I/we can refer to the mutual fund's prospectus for details on the breakpoint privileges offered. I/We also understand that these discounts are most commonly associated with Class A shares and by selecting another share class,
- I/we may forego the use of these options. If purchasing at the Net Asset Value breakpoint level, a sales charge may be imposed upon liquidation during a stated holding period as detailed in the prospectus.
- I/We acknowledge that by diversifying my/our investment with more than one mutual fund family, I/we have chosen to forego possible breakpoint privileges offered by investing with one fund family.
- In order to qualify for breakpoint discounts for mutual funds held in other accounts, including 401(k) plans, IRAs, 529 plans and variable annuity sub-accounts or held in the names of certain related parties, I/we acknowledge that I/we must provide AFS, LLC with information which represents my/our total holdings in mutual funds, and that by not providing this information I/we may forego breakpoint discounts.

#### **CLASS B SHARES:**

Class B shares normally impose a contingent deferred sales charge which is paid when shares are redeemed. Class B shares also impose asset-based expenses that are typically higher than Class A shares.

- I/We understand that Class A shares of the same mutual fund may offer a reduced sales charge for investment amounts at or above the aggregate purchase price.
- Class B shares are subject to declining sales charge that will be imposed upon liquidation prior to the stated holding period.

#### **CLASS C SHARES:**

Class C shares may impose a sales charge at the time of purchase and usually impose a charge if shares are sold within a specified time frame as detailed in the prospectus. Class C shares typically impose higher asset-based expense charges than Class A shares. In most cases, expenses are higher than both Class A and B shares if held for an extended time period.

- I/We understand that Class A shares of the same mutual fund may offer a reduced sales charge for investment amounts at or above the aggregate purchase price.
- Class C shares may be subject to a surrender charge on funds liquidated prior to the stated holding period.

**By signing this document, I/we acknowledge that I/we have read and understand each of the above statements.**

# ALLSTATE FINANCIAL SERVICES, LLC • NEW ACCOUNT DOCUMENT

## DIRECT MUTUAL FUNDS/NFS BROKERAGE

### 9. PURCHASING MUTUAL FUNDS (CONTINUED)

FINRA offers a 529 College Savings Expense Analyzer online at [www.finra.org](http://www.finra.org) that helps investors compare most college savings plans and provides details on the associated fees that can vary per plan and share class.

- I/We understand that tax advantages, contribution limits and taxes on qualified withdrawals vary from state to state and may depend on residency of the state sponsoring the plan. I/We understand that changes in the law may adversely affect the operation and tax treatment of the Section 529 Plan. It is important that I/we consult with my/our tax advisor regarding Section 529 Plan state tax regulations and how they impact me/us.
- I/We understand that Section 529 Plan assets may affect the Plan beneficiary's eligibility to receive aid for higher education expenses.
- I/We understand that investment options vary greatly in different 529 Plans. I/We believe this investment meets our objectives and that I/we understand the risks, costs and liquidity of this investment.

**By signing this document, I/we acknowledge that I/we have read and understand each of the above statements.**

### 10. ROLLOVER IRA - PLAN PARTICIPANT ACKNOWLEDGEMENT

I am a participant in a qualified retirement plan ("the Plan") and I am eligible to take a distribution from my Plan.

The Personal Financial Representative has provided me with information and education materials regarding my distribution options, which include the following:

1. Subject to any Plan restriction, I may leave my Plan account balance in the Plan;
2. Assuming I have another job and my new employer offers me a retirement plan that permits rollovers, I may transfer or roll over my Plan account balance into my new employer's plan;
3. I may transfer or roll over my Plan account balance to an Individual Retirement Account (IRA) with a bank, brokerage firm, insurance company or other financial institution that offers IRA programs; or
4. I may have my Plan account balance distributed directly to me with the understanding that there will be immediate income tax consequences, and possible excise taxes.

By my signature on this New Account Document, I acknowledge I have received materials that discussed the advantages and disadvantages of each of the four options listed above. The Personal Financial Representative also provided me with information regarding the investment fees and other costs associated with opening an IRA. I also realize that I have access to plan expense information that is periodically provided to me by my Plan Sponsor.

I have decided to roll over my Plan account balance to an IRA. I understand that the fees that I pay in my IRA will be different from and may be higher than the fees charged by my previous retirement plan or other options that may be available to me.

For more information, please see the FINRA investor alert titled, "The IRA Rollover: 10 tips to Making a Sound Decision", available at [www.finra.org/Investors/ProtectYourself/InvestorAlerts](http://www.finra.org/Investors/ProtectYourself/InvestorAlerts).

#### IRA One-Rollover-Per-Year Rule

Beginning January 1, 2015, you can only make one rollover from an IRA to another (or the same) IRA in any 12-month period, regardless of the number of IRAs you own per the Section 408(d)(3)(B) of the Internal Revenue Code as discussed in the IRS Announcement 2014-15. You can, however, continue to make as many trustee-to-trustee transfers between IRAs as you want. You can also make as many conversions from traditional IRAs to Roth IRAs as you want. This rule applies to all of a given customer's aggregated IRA accounts, including Traditional, Roth, SEP and SIMPLE IRAs. Please ensure that when customers are moving an IRA, the check must be made payable to the receiving IRA, not to the customer. A check made directly to the customer is considered a rollover. A check made to an institution is considered a trustee-to-trustee transfer. The information contained in this document does not constitute personal tax advice, and does not purport to be complete or describe the consequences that may apply given your particular situation. Please consult a professional tax advisor regarding any applicable tax laws.

**By signing this document, I/we acknowledge that I/we have read and understand each of the above statements.**

# ALLSTATE FINANCIAL SERVICES, LLC • NEW ACCOUNT DOCUMENT

## DIRECT MUTUAL FUNDS/NFS BROKERAGE

### 11. REQUIRED SIGNATURES

- I/We understand that the information contained in this document or provided by my/our Personal Financial Representative does not constitute personal tax advice, and does not purport to be complete or describe the consequences that may apply to me/us given my/our particular situation. I/We should consult a professional tax advisor regarding any applicable tax laws.
- I/We understand that this transaction is subject to processing and approval and that my/our funds may not be immediately invested.
- I/We acknowledge that I/we have received and understand the Customer Agreement that will govern my/our account and agree to be bound by that agreement as currently in effect and as amended from time to time.
- I/We represent that all information supplied by me/us is accurate and complete and that you are legally entitled to rely on such information, and agree to report promptly to you any material change in such information. I/We understand that if any items are left blank in this Agreement, I/we will be deemed to have declined to provide such information.
- I/We have received a disclosure document, called a prospectus that explains product specifics and provides me/us with the information needed to make an informed decision. I/We should read it carefully and maintain the prospectus for future reference.
- I/We understand that Allstate Financial Services, LLC can terminate this relationship with 60 days prior written notice and may close my/our account(s) and liquidate the assets in my/our account(s).
- I/We have read through the "Purchasing Mutual Funds" and "Rollover IRA - Plan Participant Acknowledgement" disclosure statements within this document and by signing this document verifies that I/we read and understand each of the statements.
- Please review the following statement concerning the predispute arbitration clause also located in the Customer Agreement on page 5, item 26:

THIS AGREEMENT CONTAINS A PREDISPUTE ARBITRATION CLAUSE. BY SIGNING AN ARBITRATION AGREEMENT THE PARTIES AGREE AS FOLLOWS:

- A. ALL PARTIES TO THIS AGREEMENT ARE GIVING UP THE RIGHT TO SUE EACH OTHER IN COURT. INCLUDING THE RIGHT TO A TRIAL BY JURY, EXCEPT AS PROVIDED BY THE RULES OF THE ARBITRATION FORUM IN WHICH A CLAIM IS FILED.
- B. ARBITRATION AWARDS ARE GENERALLY FINAL AND BINDING; A PARTY'S ABILITY TO HAVE A COURT REVERSE OR MODIFY AN ARBITRATION AWARD IS VERY LIMITED.
- C. THE ABILITY OF THE PARTIES TO OBTAIN DOCUMENTS, WITNESS STATEMENTS AND OTHER DISCOVERY IS GENERALLY MORE LIMITED IN ARBITRATION THAN IN COURT PROCEEDINGS.
- D. THE ARBITRATORS DO NOT HAVE TO EXPLAIN THE REASON(S) FOR THEIR AWARD.
- E. THE PANEL OF ARBITRATORS WILL TYPICALLY INCLUDE A MINORITY OF ARBITRATORS WHO WERE OR ARE AFFILIATED WITH THE SECURITIES INDUSTRY.
- F. THE RULES OF SOME ARBITRATION FORUMS MAY IMPOSE TIME LIMITS FOR BRINGING A CLAIM IN ARBITRATION. IN SOME CASES, A CLAIM THAT IS INELIGIBLE FOR ARBITRATION MAY BE BROUGHT IN COURT.
- G. THE RULES OF THE ARBITRATION FORUM IN WHICH THE CLAIM IS FILED AND ANY AMENDMENTS THERETO, SHALL BE INCORPORATED INTO THIS AGREEMENT.

NO PERSON SHALL BRING A PUTATIVE OR CERTIFIED CLASS ACTION TO ARBITRATION, NOR SEEK TO ENFORCE ANY PREDISPUTE ARBITRATION AGREEMENT AGAINST ANY PERSON WHO HAS INITIATED IN COURT A PUTATIVE CLASS ACTION; OR WHO IS A MEMBER OF A PUTATIVE CLASS WHO HAS NOT OPTED OUT OF THE CLASS WITH RESPECT TO ANY CLAIMS ENCOMPASSED BY THE PUTATIVE CLASS ACTION UNTIL; (i) THE CLASS CERTIFICATION IS DENIED, OR (ii) THE CLASS IS DECERTIFIED; OR (iii) THE CUSTOMER IS EXCLUDED FROM THE CLASS BY THE COURT. SUCH FORBEARANCE TO ENFORCE AN AGREEMENT TO ARBITRATE SHALL NOT CONSTITUTE A WAIVER OF ANY RIGHTS UNDER THIS AGREEMENT EXCEPT TO THE EXTENT STATED HEREIN.

I/WE AGREE THAT ANY CONTROVERSY BETWEEN YOU AND ME/US ARISING OUT OF OR RELATING TO THIS AGREEMENT SHALL BE SETTLED BY ARBITRATION BEFORE AND IN ACCORDANCE WITH THE RULES OF EITHER (a) THE AMERICAN ARBITRATION ASSOCIATION OR (b) THE FINANCIAL INDUSTRY REGULATORY AUTHORITY, OR (c) THE MUNICIPAL SECURITIES RULEMAKING BOARD (AS APPLICABLE), AS I/WE MAY ELECT. IF I/WE DO NOT MAKE SUCH ELECTION BY REGISTERED MAIL ADDRESSED TO YOU AT YOUR MAIN OFFICE WITHIN FIVE (5) DAYS AFTER RECEIPT OF NOTIFICATION FROM YOU REQUESTING SUCH ELECTION, THEN I/WE AUTHORIZE YOU TO MAKE SUCH ELECTION ON MY/OUR BEHALF. ANY ARBITRATION HEREUNDER SHALL BE BEFORE AT LEAST THREE (3) ARBITRATORS AND THE AWARD OF THE ARBITRATORS, OR A MAJORITY OF THEM, SHALL BE FINAL, AND JUDGEMENT UPON THE AWARD RENDERED MAY BE ENTERED IN ANY COURT, STATE OR FEDERAL, HAVING JURISDICTION.

I/WE ACKNOWLEDGE AND UNDERSTAND THAT MY/OUR SIGNATURE CONSTITUTES ACCEPTANCE OF THE ABOVE PREDISPUTE ARBITRATION CLAUSE AND THAT AFS, LLC WILL RELY ON THE INFORMATION PROVIDED WITHIN THE NEW ACCOUNT FORM IN DETERMINING SUITABILITY OF INVESTMENTS PURCHASED BY ME/US.



# ALLSTATE FINANCIAL SERVICES, LLC ▪ New Account Document

## DIRECT MUTUAL FUNDS/NFS BROKERAGE

### 11. REQUIRED SIGNATURES (CONTINUED)

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to a backup withholding, and
3. I am a U.S. person (including U.S. resident alien).

The IRS does not require your consent to any provision of this document other than the certification required to avoid backup withholding.

Print Primary Account Owner's or Custodian's Name      Signature      Date

Print Joint Account Owner's Name      Signature      Date

**I have reviewed this document for completeness, accuracy, suitability, and proper disclosures.**

Print Personal Financial Representative's Name      Signature      Date

PFR's Phone Number      PFR Number (3 Digit Mutual Fund Number)

Partnering PFR's Name      Partnering PFR Number (3 Digit Mutual Fund Number)

**Please mail all paperwork to Allstate Financial Services, LLC 2920 South 84<sup>th</sup> St. Lincoln, NE 68506-4142**

Acceptable forms of payment: a personal check from the customer, institutional checks, cashiers checks and official checks.  
Unacceptable forms of payment: cash, cash equivalents (such as money orders and traveler's checks), checks that do not have the customers' pre-printed name and address (starter checks or temporary checks unless the bank provides notification showing the customer's name and bank account number) and credit card payments.

**This area is for OSJ Use Only**

Principal Approval: \_\_\_\_\_ Date: \_\_\_\_\_



**Allstate**  
You're in good hands.®

Auto  
Home  
Life  
Retirement

Allstate Financial Services, LLC  
Registered Broker-Dealer/Member FINRA, SIPC  
2920 South 84<sup>th</sup> St.  
Lincoln, NE 68506-4142 Phone (877) 232-2142

## ALLSTATE FINANCIAL SERVICES, LLC • CUSTOMER AGREEMENT

Thank you for allowing us to assist you with your financial needs.

Did you know your Allstate team makes it convenient to get a wide variety of protection and financial services from just one place?

### **Put the power of Allstate to work for you.**

We're in the business of helping protect what's important to you. Today that includes offering financial products and services that can help protect your dreams for the future-whether that's enjoying your retirement, sending your child to college or saving for a new home.

Our network of agents and financial professionals can help you make the best decisions for you and your family-not just for today but down the road as well.

To learn more, call your Allstate agent or Allstate Personal Financial Representative today.

In consideration of Allstate Financial Services (AFS, LLC) opening one or more accounts on my/our behalf, I/we represent and agree to the terms set forth below. Throughout this Agreement (with the exception of section 32 and 33), "I/we," "me/us," and "my/ours" refers to each applicant of this Agreement and if more than one applicant, they are joint and severally bound. "You" and "your" shall refer to AFS, LLC.

1. I/We are of legal age and I/we are authorized to enter into this Agreement, and except as otherwise disclosed to you, I/we are not an employee of any exchange, a member firm of an exchange, the Financial Industry Regulatory Authority; a municipal securities dealer; a bank; a trust company; or any insurance company; but I/we will promptly notify you if I/we become so employed.
2. To the extent applicable, all transactions will be subject to the constitution, by-laws, rules, regulations, interpretations and customs, as appropriate of the Securities and Exchange Commission; the Board of Governors of the Federal Reserve System; the Financial Industry Regulatory Authority; and the exchange or market (and clearinghouse, if any) where executed and all other applicable federal and state laws and regulations.
3. I/We appoint you as my/our agent for the purpose of carrying out my/our directions to you in accordance with the terms and conditions of my/our agreement with you for my/our account and risk with respect to the purchase or sale of securities. To carry out your duties, you are authorized to open or close brokerage accounts, including accounts with your clearing broker, place and withdraw orders and take such other steps as are reasonable to carry out my/our directions. I/We understand and acknowledge that when securities can be traded in more than one marketplace, in the absence of my specific instructions, you may, subject to applicable regulatory requirements, use your discretion in soliciting the market in which to enter my/our orders.
4. I/We understand that you, or your clearing broker, may execute and/or clear transactions under this Agreement and have the right to reject or refuse any order I/we place with you.

#### \*5. INVESTMENT OBJECTIVE TERMS

The typical investments listed with each objective are only some examples of the kinds of investments that have historically been consistent with the listed objectives. However, I/we acknowledge that you cannot assure that any investment will achieve my/our intended objective. I/We must make my/our own investment decisions and determine for myself/ourselves if the investments I/we select are appropriate and consistent with my/our investment objectives.

**Preservation of Capital:** An investment strategy that looks for investments with lower degrees of risk that seek to maintain the principal value of an investment. Examples include money market funds, CDs, government bonds, some real estate blue-chip stocks, and bank grade corporate bonds.

**Income:** An objective that seeks to generate income from investments that have historically demonstrated low degrees of risk of loss of principal value. Examples include high quality, short and medium-term fixed income products and short-term bond funds.

**Capital Appreciation (Growth):** An objective that seeks to grow the principal value of an investment through increases of the investment's value, reinvestment of distributions or both. Investment strategies include investing in companies that reinvest most of their earnings for expansion, and/or research and development. Typical investments include equity mutual funds; index funds; common stocks; and lower quality, medium-term income products.

**Speculation:** An aggressive investment strategy that looks for maximum returns by assuming a higher degree of risk of loss of principal value. Common investments include highly volatile common stocks; initial public offerings; lower quality, long-term fixed income products; and options strategies.

**Tax Advantage:** An objective that seeks to reduce taxes or taxable income. Investment examples include certain municipal bonds, which earn income-tax free interest income.

**Other:** Defined by broker-dealer or account holder.

#### 6. REPORTS

Reports of execution of orders sent by you to me/us shall be conclusive and binding on me/us unless, in the case of a verbal report, I/we object at the time the report is received by me/us or my/our agent; and in the case of a written report, I/we object in writing prior to the opening or trading on the business day following the day I/we received the report. In addition, if after I/we have placed an order with you and I/we have not received a written or verbal confirmation thereof in accordance with your practice, I/we shall immediately notify you thereof. If I/we fail to notify you as set forth in this section, I/we agree that I/we shall be deemed estopped to object and have waived any objection to your execution or failure to execute any transaction. Nothing contained in this section, however, shall bind me/us with respect to any transaction

\*This section may not apply to Allstate Financial Advisors, LLC accounts.

or price reported (whether verbal or in writing) in error, or prevent me/us, upon discovery of any error or omission, from correcting the error or omission, and putting the account in the same position it would have been in, had the error or omission not occurred.

## **7. ORDERS AND CANCELLATIONS**

When I/we place a request to cancel an order, the cancellation of that order is not guaranteed. My/Our order may only be canceled if my/our request is received in the marketplace and matched up with my/our order before my/our order executes. Market orders are subject to immediate execution. During market hours, it is rarely possible to cancel my/our market order. For the best chance of ensuring that a market order is canceled, a cancellation request should be placed at least fifteen minutes prior to the opening of the market. When making changes to an existing unexecuted order, or attempting to make a trade that is subject to a prior unexecuted order, it is my/our responsibility to advise you (one of your securities sales representatives) at that time, that a prior unexecuted open order is being changed or canceled. My/Our failure to notify you of such may result in the prior order remaining outstanding and subject to execution for my/our account and at my/our risk. I/We understand that you will not be held responsible for losses resulting from my/our failure to notify you that a prior unexecuted order is being changed or canceled. Although orders are usually routed to the marketplace within seconds, certain orders, at your discretion and without prior notice, may be subject to manual review and entry, which may cause delays in the processing of my/our orders and I/we agree not to hold you liable therefore. I/We also understand that I/we will receive the price at which my/our order executes in the marketplace, which may be different from the price at which the security or option is trading when my/our order is entered into your system. All open orders to purchase or sell securities are subject to cancellation without notice 30 days after they are received or at any time thereafter. I/We are solely responsible for my/our open orders, including the timely review of any open order to purchase or sell securities. You will not be responsible for dual execution of orders resulting from my/our failure to make such a timely review of my/our open orders. Similarly, you may cancel any open order at your discretion and without prior notice, and you will in no way be responsible or liable for the potential losses or gains resulting from your cancellation of any open order to purchase or sell securities in my/our account.

## **8. ONLINE SERVICES**

If you provide me/us with access to online brokerage services facilities, I/we agree to the posted terms of use, privacy statement and service agreement, as if the same were set forth in this Agreement. You do not guarantee access to my/our account at all times, nor do you guarantee the receipt, acceptance and entry of any order transmitted to you electronically. I/We further agree that any market data or information provided to me/us will not be broadcast, retransmitted or commercially exploited by me/us, and I/we acknowledge that exchanges and markets have a proprietary interest in this data and information. If I/we have agreed to the electronic transmission of information, I/we understand that you do not guarantee delivery. I/We further agree to pay all fees and charges associated with my/our use of the electronic services, including without limitation, those of any third party information providers offered through you.

## **\*9. FEES AND CHARGES**

I/We understand that you will charge commissions and other fees for clearing, execution, custody, account maintenance or any other service furnished to me/us and I/we agree to pay such commissions, fees and interest on monies owed to you at your then-prevailing rates. I/We understand further that such commissions, fees and interest rates may be changed from time to time. I/We will also be charged a fee for positions transferred to another broker. You may receive remuneration for directing orders to a particular broker or dealer or market center for execution. Such remuneration is considered compensation to you. The source and amount of any compensation received by you in connection with my/our transactions will be disclosed upon my/our request. You may pay a portion of fees and commissions charged to my/our account to third parties that have introduced my/our account to you or serviced my/our account.

10. I/We understand that many stocks and bonds are not traded on a securities exchange but in what is known as the over-the-counter market (OTC). When I/we buy or sell a security in this market, I/we understand that you may act as an agent or as a principal. When AFS, LLC acts as a principal, AFS, LLC is selling securities to me/us that it either owns or expects to buy shortly, or is buying securities from me/us for its own account. When AFS, LLC acts in an agency capacity for me/us in purchasing or selling securities in the OTC market, AFS, LLC is dealing on my/our behalf with your clearing broker-dealer or another broker-dealer. In such case, the commission will be reflected on my/our confirmation.

11. I/We agree to advise you as to the status of any securities that fall under Rule 144 or 145 of the Securities Act of 1933 and I/we agree to deliver the appropriate paperwork to ensure clear legal transfer and good delivery of such securities. I/We agree and understand that neither AFS, LLC nor your clearing broker-dealer will allow the sale of such securities until they clear legal transfer. I/We agree and hold harmless AFS, LLC and your clearing broker-dealer from any losses incurred by such delays regarding the legal transfer process.

12. I/We understand and agree that I/we, or my/our legal representative, shall direct the investment of all funds held in my/our account. In the absence of such direction, you, your clearing broker, or your agents shall have no investment responsibility.

13. I/We understand and agree that any telephone conversation with you may be recorded for accuracy.

14. I/We agree to have available or agree to deliver sufficient funds to cover the amount due on purchases by noon Eastern Time on settlement date and I/we agree to deliver any securities or other instruments I/we have in my/our possession in sufficient time to be received

\*This section may not apply to Allstate Financial Advisors, LLC accounts.

by you one day prior to settlement date. If you are unable to settle the transaction by any reason of my/our failure to make payment or deliver securities or other instruments in good form, I/we authorize you to take steps necessary to complete the transaction, in which I/we agree to reimburse you for all costs, losses or liabilities incurred by you, and to pay you the applicable rate of interest on any debit balance from the settlement date to the date of your receipt of my/our payment.

15. In the event that I/we become indebted to you in the course of operation of any account(s) subject to this Agreement, I/we agree that I/we will repay such indebtedness upon demand, regardless of any right of equity, set-off, or counterclaim which I/we may have against you or any of your affiliates. "Affiliates" shall mean AFS, LLC and other entities under common-ownership. I/We agree that if, after demand, I/we fail to pay the indebtedness, you may close my/our account(s) and liquidate the assets in my/our account(s), in whole or in part, in an amount sufficient to pay any indebtedness. Further, a security interest in favor of you for all of my/our obligations to you will attach to all monies, securities, instruments, or other property, and their proceeds, held or carried by you or your affiliates for my/our account as collateral security for the payment of obligations and/or liabilities to you. For purposes of this Agreement, monies, securities, instruments or other property in possession or control of any other clearing or carrying broker or other organization shall be deemed to be in your possession or control. The reasonable costs of a debit balance and any unpaid deficiency in my/our accounts, including attorney's fees, incurred by you shall be reimbursed to you by me/us.

#### **16. INDEMNIFICATION: COSTS OF COLLECTION**

I/We agree to indemnify and hold harmless each of you, your affiliates and your respective shareholders, directors, officers, employees and agents from and against any liability, damage, cost or expense (including, without limitation, legal fees and expenses, amounts paid in settlement of any claims, interest and any fines or penalties imposed by any exchange, self-regulatory organization or governmental agency) any of them may incur or be subjected to with respect to me/us or my/our account or any transaction or position therein, or as a result of my/our violation of any of my/our representations, agreements or obligations under this Agreement. I/We agree to pay and authorize you to charge me/us for any direct or indirect costs of collection, defense and enforcing any of your rights under this Agreement including, but not limited to, interest, legal fees, court costs and other expenses.

17. In the event of my/our death or should you for any reason deem it necessary for your protection, you are hereby authorized, without notice to me/us, to cancel any outstanding orders, to set-off any obligations to me/us against any of my/our obligations to you, to realize upon property securing any obligation to you, to close out my/our account(s), in whole or in part, or to close out any commitment made on behalf of me/us, and I/we shall be responsible for any resulting loss, cost, or expense in any such case.

18. You shall not be liable for loss caused directly or indirectly by war, natural disaster, government restrictions, exchange or market rulings or other events or conditions beyond your control, including but not limited to extreme market volatility or trading volumes.

19. In consideration of your carrying joint account(s) for me/us and the other applicant(s) who signed this Agreement, I/we agree that the other joint tenant(s) shall have authority to deal with you on behalf of the joint account(s) as fully and completely as if such joint tenant(s) alone were interested in said account(s), all without notice to me/us. In addition, my/our liability to you with respect to said accounts shall be joint and several. Further, all property you may at any time be holding or carrying for me/us shall be subject to a lien in your favor for the discharge of any obligation of the joint account(s) to you, such lien to be in addition to and not in substitution of the rights and remedies you otherwise may have. The joint account(s) shall create an estate or account as joint tenants with right of survivorship and not as tenants-in-common, unless I/we notify you to the contrary, in which case the percentage ownership interest in the joint accounts will be equal for each such tenant absent written direction to you specifying a different ownership.

20. THIS AGREEMENT SHALL BE GOVERNED BY THE LAWS OF THE STATE OF ILLINOIS.

#### **21. EMPLOYEE BENEFIT PLANS**

If you are acting on behalf of an Employee Benefit Plan as defined by Section 3(3) of the Employee Retirement Income Security Act (ERISA) of 1974 (Collectively an "ERISA Plan"), you as the undersigned trustee ("Trustee") or Plan Administrator acknowledges that the establishment of the account and all transactions executed through the account are subject to certain ERISA restrictions including ERISA Section 404(a) and ERISA Section 406. As a Trustee or Plan Administrator, you understand and agree that an individual account plan permits participant-directed investments pursuant to Section 404(c) or ERISA. The Broker-Dealer or Personal Financial Representative (PFR) has no responsibility or authority to make, or to advise the Plan, the trustee or Plan Administrator, or the Plan's participants as to participant directed investments. As Trustee or Plan Administrator you understand and agree that the Broker-Dealer and PFR are not fiduciaries and do not act as an Investment Manager with respect to the ERISA Plan as defined in ERISA Sections 3(21) and Section 3(38).

You as Trustee or Plan Administrator agree to indemnify the Broker-Dealer and Personal Financial Representative (PFR) for any liability, which may be imposed on the Broker-Dealer or PFR, but not limited to, ERISA Section 409 or any tax which may be assessed against the Broker-Dealer or PFR under Code Section 4975, or any other damage or expense which may be suffered by the Broker-Dealer or PFR by reason of your being subject to the provisions of ERISA, including all costs and expenses (including attorney's fees) incurred by the Broker-Dealer or PFR in defending against the foregoing. The foregoing provision shall also apply to any federal or state fiduciary law governing the investments of employee benefit plans which is supplementary to, or in lieu of, the specific provisions of ERISA referred to herein. If you wish to establish an ERISA Plan, the Broker-Dealer and Personal Financial Representatives (PFRs) may direct you to one or more mutual fund companies providing

plan documents and third party plan administrative services. You as Trustee, Employer, or Plan Administrator understand that the Broker-Dealer and PFRs do not provide plan administrative services, discrimination testing, plan documents, or tax advice relating to the Code or ERISA. Broker-Dealer and PFRs take no responsibility for any referrals to third parties providing plan documents and/or plan administrative services. Broker-Dealer and PFRs sole function in relation to a Plan, Plan Administrator, Employer, or a Trustee is as a facilitator between the Plan and certain third-party service providers. Broker-Dealer and PFRs do not endorse or guarantee the performance of any third party service provider.

## 22. CREDIT INFORMATION

I/We understand that to verify my/our identity, federal law requires that you obtain my name, date of birth, residential and mailing addresses (if different), and an identification number (the "Required Information") before opening my/our account, and that you verify that information in accordance with applicable laws and regulations. Federal law also requires that you obtain the Required Information with respect to any owner(s) or other person(s) authorized to effect transactions on or added to an existing account. Modifications to the required information on an existing account may also be verified. I/We understand that my/our account may be restricted or closed if you cannot verify this information. Neither AFS, LLC, nor its clearing firm, nor any affiliate will be responsible for any losses or damages (including but not limited to lost opportunity) resulting from any failure to provide this information, or from any restriction placed upon, or closing of, my/our account. Any information I/we provide to you and/or your clearing firm may be shared with third parties for the purpose of validating my/our identity, may be subject to verification, and may be shared for other purposes in accordance with the AFS, LLC Privacy Policy. You may exchange credit information about me/us with others. I/We authorize you and your clearing firm to obtain a credit report about me/us at any time. Upon written request, I/we will be provided the name and address of the credit reporting agency used.

23. In the event any one or more provisions contained in this Agreement shall for any reason be held to be invalid, illegal, or unenforceable in any respect, such invalidity, illegality or unenforceability shall not affect any other provision thereof, and this Agreement shall be construed as if such invalid, illegal, or unenforceable provision had never been contained herein.

24. My/Our failure to insist at any time upon strict compliance with this Agreement or with any of its terms or any continued course of such conduct on my/our part shall not constitute or be considered a waiver by me/us or any of my/our rights.

25. This Agreement shall inure to the benefit of AFS, LLC, its affiliates and its and their successors and assigns.

26. Under Rule 14b-1c, unless I/we object in writing, AFS, LLC through its clearing broker will be required to provide my/our name, address, and securities position to each requesting company in which I/we hold securities. For my/our protection, the Rule prohibits the requesting company in which I/we hold securities from using the information provided for any purposes other than communicating directly with me/us.

## 27. CUSTOMER'S REPRESENTATIONS AND WARRANTIES

I/We represent to you that all information supplied by me/us in connection with the opening of my/our account, including the New Account Document, is accurate and complete, and that you are legally entitled to rely on such information, and I/we agree to report promptly to you any material change in such information. I/We represent to you that I/we have read and understand all risk disclosure statements that you have provided to me/us, and understand that all transactions effected for my/our account are at my/our risk, and that I/we are solely liable therefore under all circumstances. I/We acknowledge that trading is only suitable for persons who are financially able to withstand losses. I/We agree to inform you immediately if I/we cease to be willing or financially able to sustain such losses.

28. I/We authorize AFS, LLC or its clearing broker to contact any individual, firm, or other normal sources of debit or credit information, authorize anyone so contacted to furnish such debit or credit information to AFS, LLC or its clearing broker as they may request, and agree that this account form is the property of AFS, LLC or its clearing broker and each may retain this account form in its records at its sole discretion.

29. The Financial Industry Regulatory Authority (FINRA) provides investors information regarding Broker-Dealer firms and their representatives through its Public Disclosure Program. I/We may obtain a brochure and access the Public Disclosure Program by contacting FINRA at (800) 289-9999 or [www.finra.org](http://www.finra.org).

30. I/We may obtain information about SIPC, including the SIPC brochure, by contacting SIPC at (202) 371-8300 or [www.sipc.org](http://www.sipc.org).

## 31. PRIVACY NOTICE

Thank you for choosing AFS, LLC (LSA Securities in LA and PA) ("AFS, LLC"). We value you, respect your privacy and work hard to protect your personal information. We would like to explain how we collect, use and share the information we obtain about you in the course of doing business.

### Our Privacy Assurance

- We do not sell your personal or medical information to anyone.
- We do not share your information with non-affiliate companies that would use it to contact you about their own products and services, unless permitted pursuant to a joint marketing agreement.

- We require persons or organizations that represent or assist us in servicing your policy and claims to keep your information confidential.
- We require employees to protect your personal information and keep it confidential.

As you can see, protecting your personal information is important to us. In addition to the practices described above, we use a variety of physical, technical and administrative security measures that help to safeguard your information. For Social Security Numbers (SSN), this includes restricting access to employees, agents and others who use your SSN only as permitted by law: to comply with the law, to provide you with products and services, and to handle your claims. Also, employees' and agents' access to and use of your SSN are limited by the law, our policies and standards, and our written agreements. Our privacy practices continue to apply to your information even if you cease to be an AFS, LLC customer.

### **What Personal Information Do We Have and Where Do We Get It**

We gather personal information from you and from outside sources for business purposes. Some examples of the information we collect from you may include your name, phone number, home and email addresses, driver's license number, social security number, marital status, family member information and healthcare information. Also, we maintain records that include, but are not limited to, policy coverages, premiums, and payment history. We also collect information from outside sources that may include, but is not limited to, your driving record, claims history, medical information and credit information.

In addition, AFS, LLC and its business partners gather information through Internet activity, which may include, for example, your operating system, links you used to visit *allstate.com*, web pages you viewed while visiting our site or applications, Internet Protocol (IP) addresses, and cookies. We use cookies, analytics and other technologies to help:

- Evaluate our marketing campaigns
- Analyze how customers use our website and applications
- Develop new services
- Know how many visitors have seen or clicked on our ads

Also, our business partners assist us with monitoring information including, but not limited to, IP addresses, domain names and browser data, which can help us to better understand how visitors use *allstate.com*.

### **How We Use and Share Your Personal Information**

In the course of normal business activities, we use and share your personal information. We may provide your information to persons or organizations within and outside of AFS, LLC. This would be done as required or permitted by law. For example, we may do this to:

- Fulfill a transaction you requested or service your policy
- Market our products
- Handle your claim
- Prevent fraud
- Comply with requests from regulatory and law enforcement authorities
- Participate in insurance support organizations

The persons or organizations with whom we may share your personal information may include, among others:

- Your Personal Financial Representative or AFS, LLC-affiliated companies
- Companies that perform services, such as marketing, credit card processing, and performing communication services on our behalf
- Business partners that assist us with tracking how visitors use *allstate.com*.
- Other financial institutions with whom we have a joint marketing agreement
- Other insurance companies that play a role in an insurance transaction with you
- A business or businesses that conduct actuarial or research studies
- Those who request information pursuant to a subpoena or court order

### **The Internet and Your Information Security**

We use cookies, analytics and other technologies to help us provide users with better service and a more customized web experience. Additionally, our business partners use tracking services, analytics and other technologies to monitor visits to *allstate.com*. The website may also use Web beacons (also called "clear GIFs" or "pixel tags") in conjunction with cookies. If you prefer, you can choose to not accept cookies by changing the settings on your web browser. Also, if you would like to learn about how we gather and protect your information over the Internet, please see our online privacy statement located at the bottom of the *allstate.com* homepage.

### **How You Can Review and Correct Your Personal Information**

You can request to review your personal information contained in our records at any time. To do this, please send a letter to the address below requesting to see your information for the previous two years. If you believe that our information is incomplete or inaccurate, you can request that we correct it. Please note we may not be able to provide information relating to investigations, claims, litigation, and other matters. We will be happy to make corrections whenever possible. Please send requests to:

### **Your Preference for Sharing Personal Information**

We would like to share your personal information with one or more AFS, LLC affiliates in order to make you aware of different products, services and offers they can provide. However, you can request that AFS, LLC and its affiliate companies not share your personal information with our affiliates for marketing products and services.

To request that we not allow other AFS, LLC affiliates to use your personal information to market their products and services, you can contact us by calling 1-800-856-2518 twenty-four hours a day, seven days a week.

Please keep in mind that it may take up to four weeks to process your request. If you previously contacted us and asked us not to allow other Allstate affiliates to use your personal information, your previous choice still applies and you do not need to contact us again. If you would like to change your previous choice, please call the number above at any time.

### **We Appreciate Your Business**

Thank you for choosing AFS, LLC. We understand your concerns about privacy and confidentiality, and we hope this notice has been helpful to you. We value our relationship with you.

If you have questions or would like more information, please don't hesitate to contact your AFS, LLC Personal Financial Representative, or call the AFS, LLC Customer Information Center at 1-800-525-9287.

We reserve the right to change our Privacy practices, procedures, and terms.

Allstate entities on which behalf this notice is provided and amongst which information may be shared:

The Allstate family of companies,  
LSA Securities,  
Charter National Life Insurance Company,  
Intramerica Life Insurance Company

*Securities offered by Allstate Financial Services, LLC.  
Registered Broker-Dealer. Member FINRA, SIPC.  
Main Office: 2920 South 84<sup>th</sup> Street Lincoln, NE 68506*

For purchasers of SEC-registered products: you may obtain information about the Securities Investor Protection Corporation, including the SIPC brochure, by contacting SIPC at 1-202-371-8300 or [www.sipc.org](http://www.sipc.org).

### **State Specific Information**

#### **For California residents:**

Pursuant to California law, we need to disclose to you that we would obtain your consent before sharing medical information for marketing purposes.

#### **For Montana residents:**

Pursuant to Montana law, you may also request a record of any disclosure of your medical information during the preceding three years. Please send requests to: Allstate Financial Services, LLC, 2920 S. 84<sup>th</sup> Street, Lincoln, NE 68506

#### **For Nevada Residents:**

Allstate is committed to serving you when and where you prefer as we help you protect what you have today and prepare you for the future. To that end, and as Nevada law requires, if you do not want to receive sales calls from AFS, LLC, you have the option to be placed on our internal "do not call" list. Please disregard this notice if you have already been added to AFS, LLC's internal "do not call" list. You may make this request in the following convenient ways:

- Contact your Personal Financial Representative
- Call 1-800-525-9287 and speak with a customer representative
- Visit [allstate.com](http://allstate.com), click on Contact Us and send us an email
- Write to us at Allstate Financial Services LLC, 2920 84<sup>th</sup> Street, Lincoln, NE 68506

In your discussion or correspondence with us, please be sure to provide us with your name, address and all telephone numbers you wish to include on our list. If you have questions about this notice, you may contact us at the address listed above or you may also contact the Nevada Attorney General's office at:



Please note that AFS, LLC's "do not call" list is limited only to telephone solicitation calls. We may still contact you about your Allstate policy, billing issues, claims and other service matters.

**For Vermont residents:**

We won't share your personal information with Allstate companies for marketing purposes except as permitted by law.

**32. BUSINESS CONTINGENCY PLANNING STATEMENT**

AFS, LLC recognizes how heavily our customers rely on our systems and services. AFS, LLC's policy is to respond to a Significant Business Disruption (SBD) by safeguarding employees' lives and firm property, making a financial and operational assessment, quickly recovering and resuming operations, protecting all of the firm's books and records, and allowing our customers to transact business. We will assure customers prompt access to their funds and securities.

While AFS, LLC encourages our customers to work closely with their Personal Financial Representative (PFR); circumstances may arise that prohibit contact with a PFR. In these instances, AFS, LLC will be available to assist in servicing the customer's needs.

AFS, LLC's plan anticipates two kinds of SBDs, internal and external. Internal SBDs affect only the firm's ability to communicate and do business, such as a fire in the building. External SBDs prevent the operation of the securities markets or a number of firms, such as terrorist attack, a city flood, or a wide-scale, regional disruption. The firm's response to an external SBD relies more heavily on other organizations and systems, especially on the capabilities of our clearing firm.

Consistent with its business continuity plan, AFS, LLC maintains back-up facilities in geographic locations separate from its primary facilities. Using these back-up facilities, the firm intends to continue its business in the event of a SBD. Nevertheless, there are some disruptions that may render the firm unable to continue business. Under such circumstances, AFS, LLC will ensure that customers will be able to access their funds and securities within a reasonable time.

**Significant Business Disruption Events**

The following describes specific disruption events and AFS, LLC's intended corresponding business continuation responses to those events. Customers, however, should note that these responses are subject to modification and, depending on the severity of a specific event, AFS, LLC cannot guarantee that it will follow the stated course of action. Customers may request that the firm send them, by mail, a copy of the current disclosure statement.

**A Disruption to a Single Building**

This type of disruption may be caused by physical damage, technology problems, or an inability to have personnel arrive at the building. Because some buildings are more critical to operations, AFS, LLC's ability to resume business following a disruption to a specific building depends on the building affected. If the location is unusable, AFS, LLC has duplicate systems that will be run from a separate building. AFS, LLC expects only minimal delays from the transfer of operations. If there is a building disruption to the Broker-Dealer, AFS, LLC expects that operations could be disrupted for up to two (2) hours.

**A Firm-Only Business Disruption**

In the event that there is a significant business disruption to the firm's internal primary systems, AFS, LLC will transfer operations to its backup facilities. In this process, Customers may experience a minor delay in reaching AFS, LLC due to increased telephone calls, technology delays, or other minor difficulties arising from the transfer of operations. AFS, LLC expects that any delay will be less than one (1) hour. Nevertheless, the unlikely failure of the telephone system could result in a delay of up to four (4) hours.

**A Business-District, Citywide, or Regional Disruption**

In the event that there is a significant business disruption that affects the business district, city, or region where any of the firm's primary systems are located, AFS, LLC will transfer its operations to back-up facilities. In this process, Customers may experience a minor delay in reaching the firm due to increased telephone calls, technology delays, or other minor difficulties arising from the transfer of operations. AFS, LLC expects that any delay will be less than two (2) hours.

**FREQUENTLY ASKED QUESTIONS**

**Q: How do I contact Allstate Financial Services, LLC if there is an outage?**

A: To receive up-to-date information during a Significant Business Disruption, Customers should contact their Personal Financial

Representative, or in the event that their Personal Financial Representative cannot be reached, they may call the firm's emergency telephone number at 1-877-232-2142.

**Q: Will our customers have access to their funds?**

A: A site outage to AFS, LLC would not impair the ability to have access to available funds. Customer ability to trade to raise available funds could be impacted by market events outside of AFS, LLC's control, such as when the markets were closed the week of the 9/11 disaster.

We hope this Contingency Planning Statement helps to address any questions you may have about AFS, LLC's preparedness in the event of an outage or other disaster. We are committed to safeguarding our customers' assets and business. While some disasters may be unavoidable, a rigorous contingency plan can often reduce the financial risk. To that end, we recognize that contingency planning demands not only consistency, but also a continued willingness to listen and improve. If you are already an Allstate Financial Services, LLC customer and have questions, please contact your Personal Financial Representative. If you are not a customer, please contact our Broker-Dealer Support-Trades department at 1-877-232-2142.

# Enrolling in myStreetscape® Online Brokerage Account services

After you have opened your brokerage account with Allstate Financial Services, LLC, we encourage you to enroll in myStreetscape® for quick and easy online access to your brokerage account that is readily accessible 24/7. You can manage your account anywhere at any time with myStreetscape®. To enroll, **customers must have an active brokerage account**. Simply follow these instructions to enroll in your account.

## How to enroll:

1. Visit the [myStreetscape®](http://www.allstate.com/mystreetscape) (<http://www.allstate.com/mystreetscape>) login page.
2. Click the **Enroll Now** link.
3. Click the **Register Now** link.
4. Type in the last four digits of your Social Security number along with your first name, last name and date of birth.
5. Enter your valid brokerage account number, which can be found on a recent brokerage account statement or confirm.
6. Once your identity has been verified you'll be prompted to establish and confirm your personal identification number (PIN), and create a specific security question.
7. Finally, your User ID will be displayed on the confirmation page.
8. Once completed you can add more security questions and answers.

## Take advantage of our mobile app

Get the free mobile app that enables you to access your brokerage account information on your Apple iPad or iPhone, Android, Blackberry or other smartphone. Apple versions can be found through the iTunes store by searching for "myStreetscape". You can find the app by searching for "myStreetscape" in your app store on other smartphone devices. This allows you to view your brokerage account from virtually anywhere.

## Go paperless with eDelivery

After you have enrolled in Online Brokerage, you can simplify your recordkeeping by signing up for eDelivery. You'll get electronic storage of statements, trade confirmations, prospectuses, shareholder reports, and other eligible correspondence. The eDelivery feature allows you to **reduce the amount of paper** you will receive by mail, and **protect your identity** with less personal information on paper. We make it easy to **Go Green** with eDelivery.

**Go Green**  
with  
**eDelivery**

## To Sign Up for eDelivery

1. Log on to your Online Brokerage Account through myStreetscape®.
2. Under the **Go Paperless** section, click on the **Enroll Now** link.
3. Update your Document Delivery Instructions for all accounts listed and Save the changes.

## Benefits of eDelivery

With an online brokerage account, you can manage your account virtually anywhere, any time. And with the added benefit of eDelivery, you'll receive an email as soon as your documents are available online. View statements, trade confirmations, prospectuses, shareholder reports, letters, tax forms and other eligible correspondence – all with zero clutter and paper waste. You can also choose how you manage your documents: either print or store them electronically – it's up to you.

eDelivery can help you:

- Save time with instant, 24/7 online access.
- Simplify your recordkeeping with electronic storage.
- Reduce the amount of paper you receive by mail.
- Protect your identity with less personal information on paper.

## Contact Us

If you have questions concerning how you can enroll, sign up for eDelivery or questions about your brokerage account, please contact your Personal Financial Representative for assistance or contact Allstate Financial Services, LLC at (877) 232-2142 or [AFSBDsupport@allstate.com](mailto:AFSBDsupport@allstate.com). We would be happy to help!





**Allstate**  
You're in good hands.

Auto  
Home  
Life  
Retirement

**DO NOT MAIL, FAX OR SUBMIT  
THE CUSTOMER FUNDS AND SECURITIES LOG  
TO THE LINCOLN OSJ.**

## Allstate Financial Services, LLC Customer Funds and Securities Log

Form BD-21

Revised 4/2014

PFR Name: \_\_\_\_\_ PFR Number: \_\_\_\_\_

Date: \_\_\_\_\_

### CUSTOMER FUNDS

Date PFR Received	FROM: Check One		Date PFR Forwarded	TO: Check One		Check Amount	Check Number	Customer Name	Comments
	Customer	OSJ/ Product Provider		Customer	OSJ/ Product Provider				

### CUSTOMER SECURITIES

Date PFR Received	FROM: Check One		Date PFR Forwarded	TO: Check One		Customer Name	Certificate Number	Security Name	CUSIP	Number of Shares/ Units
	Customer	OSJ		Customer	OSJ					

An AFS, LLC Customer Funds and Securities Log file must be maintained. All receipts and deliveries of checks and certificates must be recorded on the log. Entries must also be made when checks are returned to customers and received back by the PFR.

**Reminder:** Cash or cash equivalents such as money orders, starter checks (unless accompanied by notification from the bank on bank letterhead signed by the bank officer and including the customer's name and bank account number), etc. will not be accepted by the processing OSJ.

For questions on acceptable forms of payment, contact Broker-Dealer Support-Trades at (877) 232-2142. Also remember to make a copy of all checks and store in the customer's file.

**DO NOT MAIL, FAX OR SUBMIT THE CUSTOMER FUNDS AND SECURITIES LOG TO THE LINCOLN OSJ.**

