



# STANDARD ACCOUNT APPLICATION

Account # \_\_\_\_\_Advisor Code \_\_\_\_\_\_Case # \_\_\_\_\_

Investment Advisor Firm (Agent) and Primary Contact:				
Firm Name:	Primary Conta	act:		
ACCOUNT TYPE: PLEASE CHECK THE APPROP	PRIATE BOX			
☐ Individual				
☐ Custodial Account (UGMA/UTMA)¹ Under the Laws of (state of UGMA/UTMA establishment must be provided).		Age of Termination <sup>2</sup>		
$\hfill \square$ Joint Tenants with Rights of Survivorship $\it lf$ one \it \it Joint	owner dies, his/her interest pas	ses to the surviving owner(s). (Not ava	nilable for Louisiana residents)	
☐ Tenants in Common% Owner% Co-	owner If one Joint owner dies	s, his/her interest passes to his/her esta	ate (50/50, unless otherwise n	
$\ \ \Box$ Community Property For AZ, CA, ID, LA, NM, NV, PR, TX, W	/A, and WI only. Laws vary by st	ate.		
$\hfill\Box$ Tenants by the Entirety If one Joint owner dies, his/her interest	rest passes to the surviving own	er (Spouses only). Not available in all s	states. Laws vary by state.	
☐ <b>Estate</b> Decedent's account number at TD Ameritrade: executor's information in Section 3. Include a copy of the decedent			tax ID in Section 2, and the	
☐ Guardianship⁴ Please include a copy of the court certified lette	er of guardianship.			
☐ Conservatorship <sup>4</sup> Please include a copy of the court certified	letter of conservatorship.			
¹ Provide minor's information in the Primary Account Owner information Complete the Custodian's Designation of Successor Custodian to UTM a court certified Appointment of Successor Custodian may be require	MA/UGMA Account form. If the		•	
<sup>2</sup> The age of termination varies by state, although most states set the age of termination at 21. If you do not indicate the governing state law or age of termination, the accould be set up under the laws of the custodian's state of residence and that state's default age of termination. Certain states permit the age of termination to be extended beyond the default statutory age of termination (usually up to 21 or 25 years of age). This election may be exercised only in those states that specifically provide for it, and				
only insofar as the extension complies with any applicable requiremen	nts.			
only insofar as the extension complies with any applicable requiremer I understand that electing to extend the age of termination to age an attorney or tax advisor before making this election.  3 For residents of Louisiana, if married the account type will default to a	e 25 may cause me to lose my	-		
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Check here if you are a: ☐ U.S. Citizen ☐ Permanent Resident ☐ Not a U.S. Citizen			Country of Citizenship (For non-U.S. Citizens and Permanent Residents):				
If a Permanent Resident, please atta Country of Dual or Secondary Citize		rmanent Resident card.	Country of Die	h (For non-U.S. Citize	one and Parmanar	nt Posidonts	1).
Country of Dual or Secondary Citize	ensnip ( <i>ii appiicabie)</i> :		Country of Birt	n (FOI HOH-U.S. CILIZE	ens and Permaner	n Residents	i):
Non-U.S. citizens: Do you hold a cur (Nonresident aliens must submit Form Number Attachment to Form W-8" [For	W-8BEN and a copy of a curre			Visa N en attach a signed "Lett			oiration: g Address/U.S.
☐ Check here if you or your spouse 10% shareholder, or policy-making	e, any member of your imme ng officer of a publicly traded	diate family, including p company. Specify the	parents, in-laws, company name	siblings, and depende , address, city, and sta	ents, is a member ate:	of the boar	d of directors,
Check here if you or your spouse broker-dealer firm, a financial ser required authorization letter (with	rvices regulator, securities ex	diate family, including p cchange, or member of	parents, in-laws, a securities exc	siblings, and depende change. If checked, ple	ents is licensed, e ease specify entity	employed by y below, and	, or associate I provide a co
This section does not nee	ed to be completed for	or Minors in Mino	or Accounts	;			
Annual income:	□ \$0 - 24,999	□ \$25,000 - 49,999	□ \$50	,000 - 99,999	□ \$100,000 - 24	49,999	□ \$250,00
Approximate net worth: (not including primary residence)	□ \$0 - 14,999 □ \$250,000 - 499,999	□ \$15,000 - 49,999 □ \$500,000 - 999,99		,000 - 99,999 000,000 - 1,999,999	□ \$100,000 - 24 □ \$2,000,000+	49,999	
What best describes the initial source of funds for this account?	<ul><li>☐ Employment/Wages</li><li>☐ Inheritance/Trust</li><li>☐ Lottery/Gambling</li></ul>	<ul><li>☐ Retirement Funds</li><li>☐ Investments</li><li>☐ Spousal/Parental</li></ul>	□ Une	employment/Disability er (describe source of f	☐ Savings ☐ Legal Settlem junds):	nent	
What best describes the ongoing source of funds for this account?	☐ Employment/Wages ☐ Inheritance/Trust ☐ Lottery/Gambling	☐ Retirement Funds	G Gift □ Une	•	☐ Savings ☐ Legal Settlem	nent	
JOINT ACCOUNT OWNE		•		R THE JOINT A	,	VNER O	R CUSTO
					-	I =	
Estate Name:			Social Security	/ Number/Estate Tax	ID:	Date of Bi	rtn:
Home Street Address (no PO boxes City:	,		State:			ZIP Code:	
Mailing Address (if different from ab	pove):						
City:			State:			ZIP Code:	
Please specify if you are:  □ Employed □ Self-emp	oloyed 🗌 Unemployed 🔲 l	Retired ☐ Homemake	er 🗌 Student	Source of income (i	f Unemployed, Re	etired, Home	emaker, or Stu
Employer Name (if self-employed, µ	please provide the name of y	our business):					
Please choose the occupation and Occupation:	industry of occupation code t	that most accurately de	escribes your sit Industry of Occ		ovided on page 6.		
Employer Street Address:							
City:			State:			ZIP Code:	
Check here if you are a:  ☐ U.S. Citizen ☐ Perman  If a Permanent Resident, please atta	ent Resident ☐ Not a U.S.		Country of Citi	zenship <i>(For non-U.S</i>	. Citizens and Per	rmanent Re	sidents):
Country of Dual or Secondary Citize			Country of Birt	h (For non-U.S. Citize	ens and Permaner	nt Residents	;):
Non-U.S. citizens: Do you hold a cur (Nonresident aliens must submit Form Number Attachment to Form W-8" [Fo.	W-8BEN and a copy of a curre			Visa N en attach a signed "Lette			oiration: g Address/U.S.
				-9-P			1 . 6 . 12
☐ Check here if you or your spouse 10% shareholder, or policy-making						of the boar	a of directors,

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Annual income:	□ ¢0 24 000	□ ¢25 000 40 000	□ ¢50 000 00 000	□ \$100.000 - 249.999	□ \$250.000+
A	□ \$0 - 24,999	□ \$25,000 - 49,999 □ \$15,000 - 49,999	□ \$50,000 - 99,999		<u> </u>
Approximate net worth: (not including primary residence)	□ \$0 - 14,999 □ \$250,000 - 499,999	□ \$500,000 - 999,999	□ \$50,000 - 99,999 □ \$1,000,000 - 1,999,999	□ \$100,000 - 249,999 □ \$2,000,000+	
What best describes the initial source of funds for this account?	<ul><li>☐ Employment/Wages</li><li>☐ Inheritance/Trust</li><li>☐ Lottery/Gambling</li></ul>	<ul><li>☐ Retirement Funds</li><li>☐ Investments</li><li>☐ Spousal/Parental Support</li></ul>	☐ Gift ☐ Unemployment/Disability ort ☐ Other (describe source of	_ 0	
What best describes the ongoing source of funds for this account?	<ul><li>☐ Employment/Wages</li><li>☐ Inheritance/Trust</li><li>☐ Lottery/Gambling</li></ul>	☐ Retirement Funds ☐ Investments ☐ Spousal/Parental Suppo	☐ Gift ☐ Unemployment/Disability ort ☐ Other (describe source of	•	
CASH SWEEP VEHICLE	CHOICES (PLEASE	SELECT ONLY ON	E)		
☐ TD Ameritrade FDIC Insure Pays interest on credit balances		Co	Ameritrade Cash (Protect rporation [SIPC]) ys interest on credit balance	,	Investor Protection
NOTE: If not specified, all credi Agreement for a complete desc			e TD Ameritrade FDIC Insu	red Deposit Account. S	ee the Client
DIVIDEND & INTEREST F	PREFERENCES (PL	EASE SELECT ONL	Y ONE OPTION FOR	DIVIDEND & INTE	REST DELIVERY)
Please select one of the below ☐ Hold all dividends and inte ☐ Mail check for all dividends	rest at TD Ameritrade		· ·	all dividends and intere	est at TD Ameritrade.
CONFIRMATION AND ST	ATEMENT PREFER	RENCES			
I understand that I will receive provide a valid email address monthly statement, either ele In the event that no email add TD Ameritrade will send pape If I elect to receive either elec-	, I will receive a month ctronically or via U.S. n ress is provided in sec er statements and trade	y paper statement. Cer nail. tion 2 of this application e confirmations to the a	tain types of accounts of or an email sent to the a ddress of record.	r activity (such as option	ons trading) require a
Account Statement:   Monthly		☐ Monthly Paper Statem			
	ic Trade Confirmations	☐ Paper Trade Confirmati			
☐ Unless I have checked this of additional corporate con		ill provide my name to c	orporations whose secu	rities I hold in my acco	unt for the purpose
DUPLICATE STATEMENT	S & CONFIRMS FO	OR AN INTERESTED	PARTY		
If you would like to provide du information below:	uplicate paper stateme	nts and/or duplicate pa	per trade confirmations to	o an interested party, p	lease complete the
Please check all that apply	☐ Statements ☐ Tr	ade Confirmations			
Name:		Company	Name (if any):		
Street Address:		City:		State:	ZIP Code:
PROXY AUTHORIZATION	ı				
Please select one of the belo proxies if they have discretion  I would like to receive and  Agent receives and votes issuer materials, normally  Agent receives and votes properties are properties.	w choices. If no select n over my account. vote on proxies. proxies. I hereby autho sent to me, to my advi proxies but I would like t	rize TD Ameritrade to fo sor (Agent) and to allow o receive informational	orward proxy soliciting m v Agent to vote Proxies o copies. I hereby authorize	aterials, annual reports n my behalf.* e TD Ameritrade to forw	s, and other related
* I confirm that the Agent holds dis rescinded at any time for any rea successors and assigns.		-	-		·

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## **ADVISOR AUTHORIZATIONS**

### **Limited Disbursement and Journal Authorization**

By my signature below on this application, I hereby authorize TD Ameritrade to: disburse assets to me at my address of record at the direction of my Advisor and; journal assets between my TD Ameritrade accounts of identical registration at the direction of my Advisor as provided in the TD Ameritrade Institutional Client Agreement.

Please initial further authorizations below as applicable.

#### **Directed Trading Authorization**

I authorize TD Ameritrade to execute trades in my Account at the direction of my Advisor as provided in the TD Ameritrade Institutional Client Agreement.

Account Owner Initials: \_\_\_\_\_ Account Co-Owner Initials: \_\_\_\_

#### Fee Deduction and Payment Authorization

I authorize TD Ameritrade to pay investment advisory fees and related fees (collectively, "Advisory Fees") to my Advisor from my Account(s) in the amounts instructed by my Advisor as provided in the TD Ameritrade Institutional Client Agreement.

Account Owner Initials: \_\_\_\_\_ Account Co-Owner Initials: \_\_\_\_

These choices can be modified or revoked at any time by notice to TD Ameritrade Institutional at PO BOX 650567, Dallas, TX 75265-0567 or 800-431-3500.

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## TRUSTED CONTACT (OPTIONAL)

By completing this section, you authorize TD Ameritrade to contact the person(s) named below for the following reasons: if there are questions or concerns about my whereabouts or health status; if TD Ameritrade suspects that I may be a victim of fraud or financial exploitation; if TD Ameritrade suspects that I might no longer be able to handle my financial affairs; to confirm the identity of any legal guardian, executor, trustee, authorized trader, or holder of a power of attorney; or if TD Ameritrade has any other concerns or is unable to contact me about my account(s) held at TD Ameritrade. Please review the Client Agreement for the full terms and conditions regarding how TD Ameritrade uses this information.

NOTE: Your Trusted Contact must be someone other than an account owner and cannot be the Investment Advisor. You may provide more than two Trusted Contact Persons by completing and signing additional Trusted Contact Authorization Forms.

First Name:	Middle Initial:	Last Name:		
Relationship:				
Relationship.				
Primary Telephone Number:	Email Address			
Mailing Address:				
amig / talicoo.				
City:	State:		ZIP Code:	
City.	State.		Zii Code.	
First Name:	Middle Initial:	Last Name:		
riist Name.	ivildale miliai.	Last Name.		
Deletionshin				
Relationship:				
Primary Telephone Number:	Email Address	:		
Mailing Address:				
Maining / Address.				
C. H	04-4		ZID Code	
City:	State:		ZIP Code:	

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### AGREEMENT — BY SIGNING THIS AGREEMENT, I ACKNOWLEDGE THAT:

I acknowledge that I have received and read the Client Agreement, available at advisorclient.com or by calling 800-431-3500, that will govern my account. I agree to be bound by the Client Agreement, which may be amended from time to time and which is incorporated by this reference. I release and agree to indemnify and hold harmless TD Ameritrade from any and all liability and claims for damages resulting from any action taken pursuant to this Agreement. By my signature below, I attest that I am of legal age to contract, and I certify, to the best of my knowledge that the information provided on this application is complete and correct. I hereby request, subject to acceptance by TD Ameritrade, an account as indicated in Section 1 be opened in the name(s) set forth below.

If I have requested an options account, I agree to be bound by the Client Agreement and any supplemental options agreements that will govern my account applicable to the trading of options contracts. I agree to abide by the rules of the listed options exchanges and the Options Clearing Corporation and will not violate current position and exercise limits. I am aware of the risks involved in options trading and represent that I am financially able to bear such risks and withstand options-trading losses.

All securities, dividends, and proceeds will be held at TD Ameritrade Clearing, Inc. (the "Clearing Firm"), unless otherwise instructed.

I understand that TD Ameritrade may obtain a current consumer or credit report to determine my eligibility, or continuing eligibility, for credit or for other legitimate business purposes. Any decision by TD Ameritrade to extend credit may be based on information contained in a consumer or credit report, as well as the policies of TD Ameritrade and the Clearing Firm.

I understand that TD Ameritrade may relate information regarding this account, including account delinquency and voluntary closures, to consumer or credit reporting agencies. Upon my request, TD Ameritrade shall inform me of each consumer or credit reporting agency from which they have obtained and/or reported my consumer or credit report. TD Ameritrade agrees to notify the consumer or credit reporting agencies if I dispute the completeness or accuracy of the information furnished by TD Ameritrade. By my signature below, I authorize TD Ameritrade to obtain consumer or credit reports for the name(s) set forth below.

Unless specified otherwise, I understand that non-deposit investments purchased through TD Ameritrade are not insured by the Federal Deposit Insurance Corporation (FDIC), are not obligations of or guaranteed by any financial institution, and are subject to investment risk and loss that may exceed the principal invested.

Important information about procedures for opening a new account: To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also utilize a third-party information provider for verification purposes and/or ask for a copy of your driver's license or other identifying documents.

Successors and Heirs. This Authorization supplements and in no way limits or restricts rights that TD Ameritrade and the Clearing Firm may have under any other agreement with me. This Authorization will bind my heirs, executors, administrators, successors, and assigns and will benefit TD Ameritrade and the Clearing Firm's successors and assigns.

#### If I am a U.S. person for tax purposes:

Under penalties of perjury, I certify that: (1) the number shown on this form is my correct taxpayer identification number; (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 Services (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 backup withholding; (3) I am a U.S. citizen or other U.S. person; and (4) the FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

If I have been notified by the IRS that I am subject to backup withholding because I have failed to report all interest and dividends on my tax return, I must cross out (2) in this certification.

## If I am not a U.S. Person for tax purposes:

I am submitting the applicable Form W-8 with this form to certify my foreign status.

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

Joint Account Owner's Signature:

The Client Agreement applicable to this brokerage account contains a predispute arbitration clause. By signing this agreement, the parties agree to be bound by the terms of the Client Agreement, including the arbitration agreement located in Section 14 of the Client Agreement on pages 11 and 12.

12	ACCOUNT OWNER(S) SIGNATURE:	
	Primary Account Owner's Printed Name:	
	X Primary Account Owner's Signature:	_ Date:
	Joint Account Owner's Printed Name:	

Mailing Address: TD Ameritrade Institutional PO BOX 650567 Dallas. TX 75265-0567

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Date:

Investment Products: Not FDIC Insured \* No Bank Guarantee \* May Lose Value

Occi	ipation Codes				
	Accountant/Auditor/Bookkeeper	C82	Compliance/Regulatory Professional	N21	Nurse
	Adjuster		Consultant	011	Office Associate
	Advertiser/Marketer/PR Professional	C43	Counselor/Therapist	021	Other; If Other, include a description
A33	Air Traffic Controller		Customer Service Representative		in the Occupation box.
A43	Ambassador/Consulate Professional	D11	Dealer	P81	Pharmacist
A53	Analyst	D61	Dentist	P91	Physical Therapist
A63	Appraiser	D31	Distributor	P22	Pilot
A73	Architect/Designer	D41	Doctor/Surgeon/Physician	P32	Police Officer/Firefighter/
A83	Artist/Performer/Actor/Dancer	D51	Driver		Law Enforcement Professional
A93	Assistant/Executive Assistant	E51	Engineer	P42	Politician
A44	Athlete	E71	Exterminator	P52	Project Manager
A64	Attorney/Judge/Legal Professional	F71	Factory/Warehouse Worker	R81	Real Estate Professional
	Auctioneer	F81	Farmer/Rancher		Researcher
	Banker/Lending Professional	F91	Financial Planner/Advisor	S41	Salesperson
	Barber/Beautician/Hairstylist		Flight Attendant	S51	Scientist
B31	Broker/Registered Rep	F32	Human Resources Professional	S61	Seamstress/Tailor
	Business Executive (VP, Director, etc.)	141	Importer/Exporter		Security Guard
	Business Owner	151	Inspector/Investigator	S81	Social Worker
	Caregiver	181	Investor		Teacher/Professor
C91	Carpenter/Construction Worker/		IT Professional/IT Associate		Technician
	Contractor		Janitor		Teller
	Cashier		Jeweler		Tradesperson/Craftsperson
	Chef/Cook		Laborer		Trainer/Instructor
	Chiropractor		Landscaper		Underwriter
	Civil Servant		Mechanic		Veterinarian
	Clergy		Military, Officer or Associated	W21	Writer/Journalist/Editor
C/2	Clerk	IVI32	Mortician/Funeral Director		
Indu	stry of Occupation Codes				
A11	Accounting	F11	Fashion/Clothing	031	Other; If Other, include a description
A21	Advertising/Marketing	F21	Financial Services		in the Industry of Occupation box
A31	Aerospace/Defense	F51	Firearms and Explosives	P11	Parking and Car Washes
A41	Agriculture/Forestry		Gaming/Casino/Card Club	P21	Pawn Shops/Brokers
A51	Amusement and Recreation	G21	Government/Public Administration	P31	Personal Care/Hygiene (Beauty,
A61	Animal Services and Veterinary	G31	Grocery/Supermarket		Salon, Cosmetics, Massage, etc.)
	Architecture/Design		Healthcare/Medical Services		Pharmaceuticals
	Arts/Antiques	H21	Hotel/Hospitality		Printing/Publishing
	Athletics/Fitness	l11	Import/Export	P71	Professional/Civic Organizations
	Automotive	121	Information Technology (IT)		(Non-Retail)
	Aviation	131	Insurance		Real Estate
	Bar/Nightclub/Adult Entertainment Club	J11	Jewelry, Gems, and Precious Metals		Religious Organization
	Childcare		Legal Services/Public Safety	R31	Repair Services - Home, Auto,
	Cleaning/Janitorial/Housekeeping		Logistics/Supply Chain		and Other
	Communications/Telecommunications		Manufacturing		Restaurant/Food Service
	Construction/Carpentry/Landscaping		Maritime		Retail Sales/Retail Trade
C61	Convenience Store/Liquor Store/		Media/Entertainment		Science and Biotechnology
o= :	Gas Station		Mining, Oil, and Gas		Security
	Customer Service and Support	M51	Money Services Businesses (Check		Transportation
	Education		Cashing, Money Transmitting, Payday		Travel
	Embassy/Consulate		Loans, Currency Exchange)		Utilities (Public)
	Energy	N11	Non-Profit/NGO (Non-Government	vv11	Wholesale Sales/Trade
<b>⊏</b> 41	Engineering		Agency)/Charity		

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