



Account Application

PO Box 2760 ■ Omaha, NE 68103-2760

Fax: 866-468-6268

Questions? Call a New Accounts representative at 800-276-8746. Please visit us at www.tdameritrade.com for more information about opening an account.

1. TYPE OF ACCOUNT (Please select only one.)

If you are establishing a Joint account and do not check a box, the account will be registered as Joint Tenants with Rights of Survivorship.

- Individual in your name only (*non-IRA*).
- Joint Tenants with Rights of Survivorship (JTWROS). If a Joint owner dies, his/her interest passes to the other Account Owner.
- Community Property. AZ, CA, ID, LA, NM, NV, TX, WA, WI residents only (*wives only*).
- Tenants in Common - ____% Owner ____% Co-Owner (*50/50, unless otherwise noted*). If a Joint owner dies, his/her interest passes to his/her estate.
- Tenants by the Entireties. If a Joint owner dies, his/her interest passes to the other Account Owner (*wives only*).
- Custodial Accounts (UGMA/UTMA) under the state of _____. (*If state is left blank, minor's state of residence will default.*)
- Guardianship or Conservatorship (*legal or court-order documents required*).

2. ACCOUNT OWNER INFORMATION (Minor's information if UTMA/UGMA.)

Full Legal Name:

Mr. Mrs. Ms. Dr. Rev.

U.S. Social Security Number:
(SSN) _____

Marital Status:

Single Married Divorced Widowed

Date of Birth:
(MM-DD-YYYY) _____

Mother's Maiden Name:

Home Address:
(no PO Box or mail drop)

City: _____

State: _____

ZIP Code: _____

Mailing Address:
(if different from above)

City: _____

State: _____

ZIP Code: _____

Primary Phone: _____

Secondary Phone: _____

Fax Number: _____

Email Address (*required for electronic delivery of your account statement and trade confirmations*):

Please specify if you are:

Unemployed Retired Homemaker Student Self-Employed

Source of income (*if retired or unemployed*):

Employer Name: _____

Occupation: _____

Type of Business: _____

Employer Street Address: _____

City: _____

State: _____

ZIP Code: _____

Check here if you are **NOT** a U.S. citizen.

Country of citizenship: _____

Non-U.S. citizens*: Do you hold a current U.S. immigration visa?

Yes No

Specify visa type: _____

Expiration: _____

*Nonresident aliens must submit an original Form W-8BEN, a copy of a current passport, and a copy of a bank or brokerage statement. If a U.S. address is listed, then attach a signed letter of instruction explaining why you have a U.S. address.



3. ACCOUNT CO-OWNER INFORMATION (Custodian's information if UTMA/UGMA.)

Full Legal Name:

 Mr. Mrs. Ms. Dr. Rev.U.S. Social Security Number:
(SSN) _____

Marital Status:

 Single Married Divorced WidowedDate of Birth:
(MM-DD-YYYY) _____Are you the Account Owner's
spouse? Yes No

Mother's Maiden Name:

Home Address (if different from
Account Owner; no PO Box or mail drop):

City: _____ State: _____ ZIP Code: _____

Mailing Address:
(if different from above)

City: _____ State: _____ ZIP Code: _____

Primary Phone: _____ Secondary Phone: _____

Fax Number: _____

Email Address (required for electronic delivery of
your account statement and trade confirmations):

Please specify if you are:

 Unemployed Retired Homemaker Student Self-Employed

Source of income (if retired or unemployed):

Employer Name: _____ Occupation: _____

Type of Business:

Employer Street Address:

City: _____ State: _____ ZIP Code: _____

 Check here if you are **NOT** a U.S. citizen.

Country of citizenship:

Non-U.S. citizens*: Do you hold a current U.S. immigration visa?
 Yes No

Specify visa type:

Expiration:

*Nonresident aliens must submit an original Form W-8BEN, a copy of a current passport, and a copy of a bank or brokerage statement. If a U.S. address is listed, then attach a signed letter of instruction explaining why you have a U.S. address.

4. AFFILIATIONSCheck here if the Account Owner, Account Co-Owner, any member of their immediate families, personal or business associates is a senior political figure (SPF). Specify the name of the SPF, political title, relationship to Account Owner/Co-Owner and country of office:Check here if the Account Owner or Co-Owner is a director, 10% shareholder or policy-making officer of a publicly traded company. Specify the company ticker symbol, name, address, city, and state:Check here if the Account Owner or Co-Owner is licensed or employed by a registered broker/dealer, securities exchange or member of a securities exchange. We must receive a compliance letter along with this application.**5. FINANCIAL INFORMATION**Joint accounts should indicate combined amounts. Tenants in Common accounts must provide financial information for each owner separately. **All qualified accounts are opened as margin accounts.** A margin account allows you to borrow from TD Ameritrade against certain securities as your collateral. A decline in the value of your securities may require you to provide additional funds, or force the sale of securities in your account. Selling short can expose you to potentially unlimited risk. To learn more about the potential benefits of margin borrowing and the associated risks involved, read the Margin Account Handbook. Check this box to decline margin privileges.**Account Owner**

Annual Income:	<input type="checkbox"/> \$0-\$24,999	<input type="checkbox"/> \$25,000-\$49,999	<input type="checkbox"/> \$50,000-\$99,999	<input type="checkbox"/> \$100,000-\$249,999	<input type="checkbox"/> \$250,000+
Approximate Net Worth: (not including residence)	<input type="checkbox"/> \$0-\$14,999	<input type="checkbox"/> \$15,000-\$49,999	<input type="checkbox"/> \$50,000-\$99,999	<input type="checkbox"/> \$100,000-\$249,999	<input type="checkbox"/> \$250,000-\$499,999
	<input type="checkbox"/> \$250,000-\$499,999	<input type="checkbox"/> \$500,000-\$999,999	<input type="checkbox"/> \$1,000,000-\$1,999,999	<input type="checkbox"/> \$2,000,000+	
Approximate Liquid Net Worth: (cash, stocks, etc.)	<input type="checkbox"/> \$0-\$14,999	<input type="checkbox"/> \$15,000-\$49,999	<input type="checkbox"/> \$50,000-\$99,999	<input type="checkbox"/> \$100,000-\$249,999	<input type="checkbox"/> \$250,000-\$499,999
	<input type="checkbox"/> \$250,000-\$499,999	<input type="checkbox"/> \$500,000-\$999,999	<input type="checkbox"/> \$1,000,000-\$1,999,999	<input type="checkbox"/> \$2,000,000+	

Account Co-Owner

Annual Income:	<input type="checkbox"/> \$0-\$24,999	<input type="checkbox"/> \$25,000-\$49,999	<input type="checkbox"/> \$50,000-\$99,999	<input type="checkbox"/> \$100,000-\$249,000	<input type="checkbox"/> \$250,000+
Approximate Net Worth: (not including residence)	<input type="checkbox"/> \$0-\$14,999	<input type="checkbox"/> \$15,000-\$49,999	<input type="checkbox"/> \$50,000-\$99,999	<input type="checkbox"/> \$100,000-\$249,999	<input type="checkbox"/> \$250,000-\$499,999
	<input type="checkbox"/> \$250,000-\$499,999	<input type="checkbox"/> \$500,000-\$999,999	<input type="checkbox"/> \$1,000,000-\$1,999,999	<input type="checkbox"/> \$2,000,000+	
Approximate Liquid Net Worth: (cash, stocks, etc.)	<input type="checkbox"/> \$0-\$14,999	<input type="checkbox"/> \$15,000-\$49,999	<input type="checkbox"/> \$50,000-\$99,999	<input type="checkbox"/> \$100,000-\$249,999	<input type="checkbox"/> \$250,000-\$499,999
	<input type="checkbox"/> \$250,000-\$499,999	<input type="checkbox"/> \$500,000-\$999,999	<input type="checkbox"/> \$1,000,000-\$1,999,999	<input type="checkbox"/> \$2,000,000+	

6. FUNDING YOUR ACCOUNT

I will be funding with:

- A check. **Please make check payable to TD Ameritrade.**
- A wire transfer to be initiated after account opening. Please contact TD Ameritrade prior to initiating wire transfer.
- A transfer of assets from an existing account. Please complete and include an Account Transfer Form and a copy of your most recent statement.
- A transfer from an existing TD Ameritrade account. Please complete and include an Internal Transfer Form.
- Stock certificates. Please contact TD Ameritrade prior to submitting certificates.

7. CASH SWEEP VEHICLE CHOICES (Please select only one.)

We offer you choices in managing all aspects of your portfolio. This includes offering different programs to earn interest on the cash in your account through our Cash Balance programs. See the Client Agreement for a complete description of the Cash Sweep program. **If you do not make a selection, your cash balances will be swept to the TD Ameritrade FDIC Insured Deposit Account. Other sweep choices are available for clients with household values greater than \$500,000 and cash balances of more than \$100,000.**

- TD Ameritrade FDIC Insured Deposit Account (IDA)
- TD Ameritrade Cash (Protected by the Securities Investor Protection Corporation (SIPC))

8. TRADE CONFIRMATIONS

You will receive monthly account statements and trade confirmations electronically, unless you make a selection below. If a valid email address is not provided, you will receive a quarterly paper statement or a monthly paper statement. Certain types of accounts or activity (such as options trading) require a monthly statement, either electronically or via U.S. mail. You will be responsible for any fees that apply. Accounts with a total liquidation value of \$100,000 or an average of five trades per month over a three-month period are eligible to receive free paper statement and confirmation delivery.

Please note: If you elected to receive either electronic statements or electronic confirmations, you will receive shareholder information electronically when available.

Account Statement: Electronic Monthly Paper Monthly (\$2 fee may apply each month) Paper Quarterly (\$2 fee may apply each quarter)

Trade Confirmation: Electronic Paper (\$2 fee for each confirmation may apply)

- Unless I have checked this box, TD Ameritrade will provide my name to corporations whose securities I hold in my account for the purpose of additional corporate communications.

9. ACCOUNT AGREEMENT

Under penalties of perjury, I certify (1) that the Social Security Number shown on this form is my correct taxpayer identification number, (2) that I am not subject to backup withholding and (3) that I am a U.S. person (including a resident alien); provided, however, if I am a nonresident alien as disclosed in this application, I do not certify that I am a U.S. person, and I understand that I must submit a Form W-8BEN. If I have been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of dividend or interest underreporting, I must cross out (2) in this certification. I have received and read the Client Agreement, which is incorporated by this reference, that will govern my account. I agree to be bound by this Client Agreement, as amended from time to time, and request an account to be opened in the name(s) set forth below. **The Client Agreement applicable to this brokerage account agreement contains predispute arbitration clauses. By signing this agreement, the parties agree to be bound by the terms of the agreement, including the arbitration agreement located in Section 12 of the Client Agreement.** All securities, dividends and proceeds will be held at TD Ameritrade Clearing, Inc., 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 TD Ameritrade Clearing, Inc. 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. I understand that non-deposit investments purchased through TD Ameritrade are not insured by the 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.**

The IRS does not require your consent to any provision of this document other than the certification required to avoid backup withholding. If this is a Joint account, all Account Owners must sign. If you wish to trade options in your account, complete the Options Account Agreement section on the next page.

 Account Owner's Signature:	Date: ____-____-____
 Account Co-Owner's Signature:	Date: ____-____-____

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

OPTIONS ACCOUNT

Due to the risks involved in options, we are required to obtain the following information. The Financial Information section must be completed to be considered for options.

Check this box to decline options privileges.

10. ACCOUNT OWNER

Number of Dependents:

Years of Investment Experience: Less than 1 1-2 3-5 6-9 10+

Investment Knowledge & Education: Limited Good Extensive Professional trader

Types of Transactions: Stocks Bonds Options
(Check all that apply.)

What Are Your Options Investment Objectives? Growth Speculation Income Conservation of Capital
(Check all that apply.)

What Type of Activity Do You Plan to Conduct in Your Options Account?	<input type="checkbox"/> Tier 1 - Covered	<input type="checkbox"/> Tier 2 - Standard Cash	<input type="checkbox"/> Tier 2 - Standard Margin	<input type="checkbox"/> Tier 3 - Advanced
	Write covered calls Write cash-secured puts	Purchase options Write covered calls Write cash-secured puts	Create spreads Purchase options Write covered puts Write covered calls Write cash-secured puts Requires Margin Account	Write uncovered options Create spreads Purchase options Write covered puts Write covered calls Requires Margin Account

Are you an Investools Client? Yes No

11. ACCOUNT CO-OWNER

Number of Dependents:

Years of Investment Experience: Less than 1 1-2 3-5 6-9 10+

Investment Knowledge & Education: Limited Good Extensive Professional trader

Types of Transactions: Stocks Bonds Options
(Check all that apply.)

What Are Your Options Investment Objectives? Growth Speculation Income Conservation of Capital
(Check all that apply.)

What Type of Activity Do You Plan to Conduct in Your Options Account?	<input type="checkbox"/> Tier 1 - Covered	<input type="checkbox"/> Tier 2 - Standard Cash	<input type="checkbox"/> Tier 2 - Standard Margin	<input type="checkbox"/> Tier 3 - Advanced
	Write covered calls Write cash-secured puts	Purchase options Write covered calls Write cash-secured puts	Create spreads Purchase options Write covered puts Write covered calls Write cash-secured puts Requires Margin Account	Write uncovered options Create spreads Purchase options Write covered puts Write covered calls Requires Margin Account

Are you an Investools Client? Yes No

12. OPTIONS ACCOUNT AGREEMENT

I hereby apply for an options account and 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 have received and read the Client Agreement that will govern my account, and agree to be bound by it as currently in effect and as amended from time to time. 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.

 Account Owner's Signature:	Date: ____-____-____
 Account Co-Owner's Signature:	Date: ____-____-____

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

Investools Inc. and TD Ameritrade, Inc. are separate but affiliated companies that are not responsible for each other's services or policies.

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