

New Account Application

Account Number	RR Code	Branch Code (Acct Mnemonic\Code)
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Account Type: Individual Trust* IRA/SEP* Roth IRA* SIMPLE IRA* Custodian Account for Minor

529* Annuity* Transfer on Death* Estate* Guardianship SEI Quadrant*

Mutual Fund Only IRA (use a Mutual Fund Only Adoption Agreement)* Joint Tenants with Rights of Survivorship*

Tenants in Common. If interests are not to be equal, designate the percentage interest of each owner:

Name	%	Name	%	Name	%
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Investment Club* Corporation* Partnership/LLC* Not for Profit Organization* Sole Proprietorship*

Specify Nature of Business _____

*Additional forms required.

Full Account Title/Registration

Trust /Plan Date	Tax ID for Trust/Corporation
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Account Owner/Trustee/Minor	Date of Birth	Social Security Number
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Mailing Address (if a PO box, please provide full street address)	City	State	Zip
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Legal Address (if different from mailing address)	City	State	Zip
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Home Phone	Business Phone	Ext.	Cell Phone	Marital Status	Gender
					M F

Citizenship _____ Country of Citizenship _____

U.S. Resident Alien Non-resident Alien: attach W-8 and copy of the passport

For Online Access: fill in the e-mail address and mother's maiden name fields below

E-mail Address	Mother's Maiden Name
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If you are not employed (such as retired, a student, or a homemaker), please indicate last job and year.

Employment	Years Employed	Occupation	Employer's Phone
<input type="checkbox"/> Employed <input type="checkbox"/> Retired/Unemployed			

Employer	Employer's Address
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To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial organizations to obtain, verify, and record information that identifies each person who opens an account. 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 ask you to provide a copy of your driver's license or other identifying documents. The information you provide in this form may be used to perform a credit check and verify your identity by using internal sources and third party vendors. If additional space is needed, attach a separate sheet.

Government ID not presented in person (copy of unexpired ID required)

Government ID presented in person by applicant (copy of unexpired ID not required) _____ FA Initials (Information required below)

Type of Identification:	Number:	State/Country of Issue:	Issue Date	Expiration Date
<input type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> Other				

Patriot Act Information

What is the source of funds for this account?

Income from Earnings Investment Proceeds Gift Sale of Business Inheritance Legal Settlement

Pension/IRA/Retirement Savings Spouse/Parent Lottery/Gaming Insurance Proceeds Other _____

Private Bank account? Yes No Foreign Bank account? Yes No

If any of these questions are checked additional information may be required:

An employee of FINRA or a member firm. Officer, Director or 10% shareholder of a publicly owned company

Military, governmental or political official outside the U.S. A relative of any of the above N/A

Secondary Account Owner/Trustee/Custodian		Date of Birth		Social Security Number	
Mailing Address (if a PO box, please provide full street address)			City	State	Zip
Legal Address (if different from mailing address)			City	State	Zip
Home Phone	Business Phone	Ext.	Cell Phone	Marital Status	Gender M F

Citizenship Country of Citizenship
 U.S. Resident Alien Non-resident Alien: attach W-8 and copy of the passport

If you are not employed (such as retired, a student, or a homemaker), please indicate last job and year.

Employment	Years Employed	Occupation	Employer's Phone
<input type="checkbox"/> Employed <input type="checkbox"/> Retired/Unemployed			
Employer	Employer's Address		

Government ID not presented in person (copy of unexpired ID required)
 Government ID presented in person by applicant (copy of unexpired ID not required) FA Initials (Information required below)

Type of Identification:	Number:	State/Country of Issue:	Issue Date	Expiration Date
<input type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> Other				

Investment Experience, Goals and Financial Information

How was this account acquired? Initial Purchase will be:
 Known _____ years Walk-in Referred by _____ Solicited Unsolicited

<u>Investment Experience</u>	<u># of Years</u>	What is your time horizon for this account?	What is your current level of investment knowledge?
CD's/Bank CD's	_____	<input type="checkbox"/> Less than 1 year	<input type="checkbox"/> None
Bonds: Munis, Corp, Agency, Treasuries	_____	<input type="checkbox"/> 1 - 3 years	<input type="checkbox"/> Limited
Stocks/ETF's	_____	<input type="checkbox"/> 3 - 5 years	<input type="checkbox"/> Good
Annuities	_____	<input type="checkbox"/> 5 - 10 years	<input type="checkbox"/> High
Options	_____	<input type="checkbox"/> more than 10 years	
Mutual Funds	_____		

What is your main investment objective? Choose one category that describes your investment objective for the account you are opening.
 Capital Preservation Current Income Balanced Capital Growth Maximum Growth

Estimated Annual Household Income	Estimated Annual Income 2 nd Owner <small>(if not married to the primary owner)</small>	Estimated Total Assets <small>(include this purchase and cash equivalents. Exclude home and personal property.)</small>	Estimated Federal Tax Bracket
<input type="checkbox"/> \$0 - \$24,999	<input type="checkbox"/> \$0 - \$24,999	<input type="checkbox"/> \$0 - \$49,999	<input type="checkbox"/> 0% - 15%
<input type="checkbox"/> \$25,000 - \$49,999	<input type="checkbox"/> \$25,000 - \$49,999	<input type="checkbox"/> \$50,000 - \$149,999	<input type="checkbox"/> 15.1% - 32%
<input type="checkbox"/> \$50,000 - \$124,999	<input type="checkbox"/> \$50,000 - \$124,999	<input type="checkbox"/> \$150,000 - \$249,999	<input type="checkbox"/> 32.1% - 50%
<input type="checkbox"/> \$125,000 - \$249,999	<input type="checkbox"/> \$125,000 - \$249,999	<input type="checkbox"/> \$250,000 - \$449,999	<input type="checkbox"/> Over 50.1%
<input type="checkbox"/> \$250,000 +	<input type="checkbox"/> \$250,000 +	<input type="checkbox"/> \$450,000 +	

Living Expenses (Fixed Recurring Expenses) \$ _____ annual or \$ _____ monthly

Special Mailing Instructions: please send (if checked, please use Notes section below to list name and address)
 Duplicate statements Duplicate trade confirmations

Notes:

Account Features: All securities, cash and dividends will be held in your account as the default at no additional charge. Holding securities and cash in your account provides greater safety, convenience and keeps your cash earning interest without interruption.

Settlement Options for Cash Accounts: Automatic Market Rate Interest is paid on all cash balances pending reinvestment. Call for current rate.

- Send Securities Send sale proceeds Send interest/dividends

Margin Trading: For more information on your obligations and risks, read Pershing's Margin Agreement and Margin Disclosure Statement and information guide, along with the Harris Investor Services, Inc. Customer Account Agreement. If you would like margin trading privileges check the box below, complete and sign a separate margin application and attach with this application.

- I would like Margin trading privileges on my account Margin Application attached

Money Market (MM) Options: If nothing is checked the account will receive the Automatic Market Rate Interest. Retirement accounts will automatically use the Pershing Government Money Market (PGR).

- General MM Government MM Tax Free MM The Reserves Insured Deposit (RFI) Other

Please read and sign below

To Harris Investor Services, Inc. and Pershing LLC.

I am at age of majority and am full legal age in the state in which I reside. In consideration of your accepting my account, I hereby acknowledge that I have read, understood and agreed to the terms set forth in the Harris Investor Services, Inc. Client Agreement and/or Brokerage Account Customer Agreement, as applicable.

I REPRESENT THAT I HAVE READ THE TERMS AND CONDITIONS GOVERNING THIS ACCOUNT AND AGREE TO BE BOUND BY SUCH TERMS AND CONDITIONS AS CURRENTLY IN EFFECT AND AS MAY BE AMENDED FROM TIME TO TIME. I ACKNOWLEDGE RECEIPT OF THE HARRIS INVESTOR SERVICES, INC. CLIENT AGREEMENT AND/OR THE HARRIS INVESTOR SERVICES, INC. BROKERAGE ACCOUNT CUSTOMER AGREEMENT AS APPLICABLE.

By signing below, account holder(s) is/are also authorizing Harris Investor Services, Inc. and its agents to use the account holder's information to run a credit check and other background check for verification purposes, including verifying your identity, for the purposes of determining whether we want to open an account for you, and if so, under what financial terms and conditions, and to comply with certain government and regulatory requirements such as regulations about money laundering, international boycott and transactions with specially designated nationals.

Securities offered through Harris Investor Services, Inc., a registered broker/dealer, member FINRA/SIPC and registered SEC Registered Investment Advisor. Insurance and annuities are offered through Bancorp Services, Inc. and Bancorp Insurance Services, Inc. are affiliates. Products offered are: **NOT A DEPOSIT – NOT INSURED BY THE FDIC OR ANY FEDERAL GOVERNMENT AGENCY – NOT GUARANTEED BY ANY BANK – MAY LOSE VALUE.**

I certify under penalties of perjury (1) that the Social security or Taxpayer Identification Number provided above is correct; (2) that the IRS has never notified me that I am subject to backup withholding (if (2) is not true, please strike out before signing); and (3) I am a U.S. person (including a U.S. resident alien).

Please note only account owner(s) and/or authorized person(s) should sign and date account application and agreement. Information completed on the New Account Application may be used to establish an account; however, it will be used only for the/those individual(s) that is/are an owner(s) and/or an authorized person(s) listed in the Full Account title/registration and have signed and dated this application and agreement.



Privacy Policy – Upon signing the Application, receiving this Agreement, and initialing this box, you acknowledge receiving a copy of the most recent Privacy Policy.

I also acknowledge that Section III, Paragraphs 9-11 of the customer agreement, contains a pre-dispute arbitration agreement. The Internal Revenue Service does not require your consent to any provisions on this document other than the certification required to avoid backup withholding.

Account Owner's Signature			Date
Joint Account Owner's Signature			Date
Financial Advisor's Signature	Financial Advisor's Printed Name	Rep Number	Date
HIS Principal's Signature	HIS Principal's Printed Name		Date

Please return to: Harris Investor Services, Inc. Attention: HIS Operations – 111 E. Madison Street, Chicago, IL 60603-4006 harrishand.com/investments 1-877-225-3863
[Redacted] is a trade name used by [Redacted] and its affiliates.