

Thank you for your interest in opening a new **IRA TradeKing account**. Opening an account is easy. Simply complete and scan and email (service@tradeking.com), or fax (561-988-0131), or mail to us these forms. Then, if you have not done so already, create a Username and a Password at www.tradeking.com to access your new account (see instructions below). Finally, call us and ask us to link your new account to your Username.

Alternatively and more easily, you can **open an account online** (no paperwork required) directly at www.tradeking.com. By opening an account online, the new account will be automatically linked to your Username. Here are some tips that will expedite the opening of your new account:

- A US Social Security Number is always required to open an account.
- To trade options please include a signed Option Agreement and Disclosure (accessible from www.tradeking.com at Services – Apps + Forms, or at <http://content.tradeking.com/wiki/download/attachments/1819/Option+Account+Application.pdf>).

IMPORTANT:

The TradeKing Customer Agreement contains the terms and conditions applicable to all TradeKing accounts. Please read it carefully, print a copy and retain it for your records. You can obtain a copy at <https://www.tradeking.com/PublicView/services/Services/AppsForms.tmpl>, by calling (877) 495-KING, or from TradeKing, 5455 N Federal Hwy, Suite E, Boca Raton, FL 33487.

You are establishing an IRA Plan under DCG&T's Prototype IRA and Custodial Agreement, available at:

<http://content.tradeking.com/wiki/download/attachments/1590/Disclosure+Statement+for+IRA.pdf?version=1>

The account is subject to rules and regulations of the Internal Revenue Service (IRS) and that the funding of the account may have significant tax and financial consequences.

How to create a Username to access the new account that you are opening with this form:

- Go to www.tradeking.com; Click on "START TRADING" or "Open New Account";
- Complete **only** the first page of the application to choose your Username, Password, and Account Settings Security and **click Continue**. Stop here. Call us at 877-495-KING (5464) so that we can link your new account(s) to the Username you have just created.

IT'S EASY TO OPEN A NEW TRADEKING ACCOUNT

E-mail Address

First Name

Middle Initial

Last Name

Username

Password

Where did you hear about us?

ACCOUNT SETTINGS SECURITY

Challenge Question

Answer

CONTINUE

RETIREMENT ACCOUNT APPLICATION

Account Number	Open Date	Broker Rep Code
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Retirement Account Type (please select one):

- Traditional IRA**
- ROTH IRA**
- Rollover IRA**

- Beneficiary / Inherited IRA**
(please specify):
 - Roth**
 - IRA**

Account Owner			
Name		Social Security Number	
Permanent Street Address (Cannot be a P.O. Box)		City	State Zip
Mailing Address (If different from permanent address)		City	State Zip
Birth Date (mm/dd/yyyy)	Number of Dependents	Married? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Day Phone	Evening Phone	Cell Phone	E-MAIL ADDRESS (please write clearly)
Citizenship: <input type="checkbox"/> U.S. <input type="checkbox"/> Foreign (please specify): _____ <input type="checkbox"/> Resident Alien <input type="checkbox"/> Non-resident Alien (Non-Resident Alien must submit a W-8 form with this application)			

Employment Information			
Employer	Nature of Business	Yrs. Employed	Occupation
Business Address	City	State	Zip Code
Joint Applicant Employer	Nature of Business	Yrs. Employed	Occupation
Business Address	City	State	Zip Code
Are you or a member of your household affiliated with or employed by 1) a securities Exchange 2) FINRA 3) an Exchange or FINRA member 4) a company which require notification of you opening this account? (if you select yes, please submit an Affiliated Account Authorization form) <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you or a member of your household a director, 10% shareholder or policy making officer of a publicly traded company? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If you answered "Yes" to any of the questions above please provide more information on the affiliation (e.g. affiliated company name, nature of affiliation, etc.)			
Are you or any member of your immediate family a senior political figure? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Spousal Consent	
<p>This section should be reviewed if either the trust or the residence of the IRA holder is located in a community or marital Property State and the IRA holder is married. Because of the important tax consequences of giving up one's community property interest, individuals signing this section should consult with a tax or legal advisor.</p>	
<p><input type="checkbox"/> I am not married. I understand that if I become married in the future, I must complete a new IRA Designation of Beneficiary form.</p>	
<p><input type="checkbox"/> I am married. I understand that if I choose to designate a primary beneficiary other than my spouse, my spouse must sign below.</p>	
<p><i>I am the spouse of the above-named IRA holder. I acknowledge that I have received a fair and reasonable disclosure of my spouse's property and financial obligations. Because of the important tax consequences of giving up my interest in this IRA, I have been advised to see a tax professional.</i></p>	
<p><i>I hereby give the IRA holder any interest I have in the funds or property deposited in this IRA and consent to the beneficiary designation(s) indicated on the previous page. I assume full responsibility for any adverse consequences that may result. No tax or legal advice was given to me by the Trustee.</i></p>	
Spouse Signature	Date
Witness Signature	Date

Beneficiary Information						
I understand that this Designation of Beneficiary will be effective on the date received by Delaware Charter Guarantee and Trust/Trustar (DCG&T), Legent or TradeKing. This Designation of Beneficiary will remain in full force and effect until such time as DCG&T, Legent or TradeKing is actually in receipt of a written revocation or change of beneficiary signed by me and in such form and substance as DCG&T or Legent deems necessary to effect the change. If I change the beneficiaries, all previous designated beneficiaries no longer have the right to receive benefit under this Agreement.						
Name & Address	Relationship	Gender	Birth Date	Social Security Number	<input type="checkbox"/> Primary <input type="checkbox"/> Contingent	Percent
Name & Address	Relationship	Gender	Birth Date	Social Security Number	<input type="checkbox"/> Primary <input type="checkbox"/> Contingent	Percent
Name & Address	Relationship	Gender	Birth Date	Social Security Number	<input type="checkbox"/> Primary <input type="checkbox"/> Contingent	Percent
Account Investment Profile						
Annual Income		Net Worth (excluding residence)		Liquid Net Worth		Tax Bracket
<input type="checkbox"/> Under \$25,000	<input type="checkbox"/> Under \$50,000	<input type="checkbox"/> Under \$25,000	<input type="checkbox"/> 0%			
<input type="checkbox"/> \$25,001 - \$50,000	<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$25,001 - \$50,000	<input type="checkbox"/> 10%			
<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> 25%			
<input type="checkbox"/> \$100,001 - \$200,000	<input type="checkbox"/> \$500,001 - \$1,000,000	<input type="checkbox"/> \$100,001 - \$200,000	<input type="checkbox"/> 28%			
<input type="checkbox"/> Over \$200,001 (please specify)	<input type="checkbox"/> Over \$1,000,001 (please specify)	<input type="checkbox"/> Over \$200,001 (please specify)	<input type="checkbox"/> 33%			
			<input type="checkbox"/> 35%			
Investment Objective			Investment Experience			
<input type="checkbox"/> Current Income Preservation of capital with a primary consideration on current income.			<input type="checkbox"/> Bonds (yrs____)			
<input type="checkbox"/> Balanced A balance between capital appreciation and current income with the primary consideration being current income.			<input type="checkbox"/> Stocks (yrs____)			
<input type="checkbox"/> Growth & Income A balance between capital appreciation and current income with the primary consideration being capital appreciation.			<input type="checkbox"/> Options (yrs____)			
<input type="checkbox"/> Growth Capital appreciation through quality equity investments and little or no income.						
<input type="checkbox"/> Maximum Growth Maximum capital appreciation with higher risk and little to no income.						
<input type="checkbox"/> Speculation Maximum total return involving a higher degree of risk through investment in a broad spectrum of securities						

Please Read and Sign Below

W-9 Certification. Under penalties of perjury, I (we) certify that the taxpayer identification number shown above on this form is my correct taxpayer identification number. Unless, otherwise indicated, I (we) certify that I (we) am not subject to backup withholding and I (we) am an U.S. Person (including an U.S. resident alien). **Check the box** if you are subject to backup withholding under the provisions of the Internal Revenue Service code.

I am establishing an Individual Retirement Account (IRA) Plan under DCG&T's Prototype IRA and Custodial Agreement, which has been given to me. I understand that the account is subject to rules and regulations of the Internal Revenue Service (IRS) and that the funding of the account may have significant tax and financial consequences. I accept the responsibility for the information contained in this application and affirm such information is true and correct.

This application provides for the deposit of funds or securities into the account. I understand that the funding of this account is subject to the rules and regulations of the IRS and that my failure to abide by such rules and regulations may have important and possible irrevocable tax and financial consequences. I attest that the funding information provided is true and correct, and authorize DCG&T, Legent or the TradeKing to deposit funds or security transfers according to rules that govern qualified accounts. I assume responsibility for funding and distribution transactions. Should I purchase any off-the books- held position, the original purchase price will be used as value at the time of distribution if no price can be obtained. I agree to indemnify and hold harmless DCG&T, Legent and the TradeKing from any and all liability for damages resulting from any action taken pursuant to this Agreement.

I hereby request that TradeKing and Legent Clearing LLC ("Legent") open an account in the name(s) listed as account owner(s) on this application.

By signing below, I acknowledge that I have received, read, understand and agree to be bound by the terms & conditions as set forth in the Customer Agreement ("Customer Agreement") as currently in effect and as amended from time to time. I represent that I am of required legal age to enter into this Agreement. I understand and acknowledge that Legent does not provide investment, tax, legal, accounting, financial or other advice.

Please Note: Legent Clearing and/or TradeKing will verify information provided on this form through a third-party provider in accordance with the USA Patriot Act.

BY MY SIGNATURE ON THE ACCOUNT APPLICATION, I ACKNOWLEDGE THAT I HAVE RECEIVED, READ, UNDERSTAND AND AGREE TO THE TERMS SET FORTH IN THE FOREGOING AGREEMENT, AND THAT THIS AGREEMENT CONTAINS A PREDISPUTE ARBITRATION CLAUSE AT SECTION 30.

Signature of Account Owner	Date	Custodial Acceptance	Date
Signature of TradeKing Broker	Date		



5455 N Federal Highway • Suite E • Boca Raton • FL 33487
TradeKing.com MEMBER FINRA/SIPC

Deposit Ticket - Request to deposit funds

Mail all checks to:

<u>Regular Mail</u>	<u>Overnight Deliveries</u>
TRADEKING P.O. Box 811690 Boca Raton, FL 33481-1690	TRADEKING 5455 N. Federal Highway, Suite E Boca Raton, FL 33487

Please deposit the enclosed check for \$ _____.

to my TradeKing account: _____ - _____

Make all checks payable to TRADEKING and include your account number on the memo line of your check. TRADEKING does NOT accept third-party checks, starter checks, money orders or credit card checks. Funds deposited via check are subject to a 5 business day hold to clear for trading, 10 business days to withdraw by check or ACH, 30 business days to withdraw by wire. Read more about depositing funds at <https://www.tradeking.com/FAQ/Accounts/depositsTransfers.tmp>

IRA Accounts – When mailing a check deposit for your IRA please specify the tax year for the contribution on the memo line of the check (if no year is specified, it will be applied to the current year). Indicate on the check if this is a rollover contribution to an IRA. For rollover funds coming from your personal bank account you must submit a rollover certification form which can be found on our website under Services / Apps and Forms.

CASHIER'S and BANK checks – Please instruct your bank to make the check payable to TRADEKING and name you as the REMITTER on the check. Your name must also appear on the TRADEKING account.

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