

Thank you for your interest in opening a new **Sole Proprietorship** TradeKing account.

Opening a Sole Proprietorship account is easy. Simply complete and scan and email (service@tradeking.com), or fax (561-988-0131), or mail to us this form. 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.

Cash account:

1. Investment Account Application - attached.
2. Sole Proprietorship Certification - attached.
3. Assumed Name Certificate.

Margin account additional documents required:

Margin Agreement and Disclosure (accessible from www.tradeking.com at Services – Apps + Forms, or at <http://content.tradeking.com/wiki/download/attachments/1819/Margin+Agreement.pdf>).

Option account additional documents required:

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.

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

- a. Go to www.tradeking.com; Click on “START TRADING” or “Open New Account”;
- b. 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.

The screenshot shows a web form titled "IT'S EASY TO OPEN A NEW TRADEKING ACCOUNT". The form contains the following fields:

- E-mail Address:
- First Name: ⓘ
- Middle Initial:
- Last Name: ⓘ
- Username: ⓘ
- Password: ⓘ
- Where did you hear about us?:

Below this section is a section titled "ACCOUNT SETTINGS SECURITY" with the following fields:

- Challenge Question: ⓘ
- Answer: ⓘ

A green "CONTINUE" button is located at the bottom right of the form, with a mouse cursor pointing to it.

SOLE PROPRIETORSHIP ACCOUNT Investment Account Application

Account Number	Open Date	Broker Rep Code
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Sole Proprietorship Information			
Name of Proprietorship		Tax ID Number / Social Security Number	
Permanent Street Address		City	State
Mailing Address (If different from permanent address)		City	State
Date of creation (mm/dd/yyyy)			
Day Phone	Evening Phone	Cell Phone	E-MAIL ADDRESS
Nationality of Trust: <input type="checkbox"/> U.S. <input type="checkbox"/> Foreign (please specify):			

Proprietor Information			
Name		Social Security Number	
Permanent Street Address (Cannot be a P.O. Box)		City	State
Mailing Address (If different from permanent address)		City	State
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
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)			

Proprietor Employment Information				
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				

Account Investment Profile			
Annual Income of Proprietor	Net Worth of Proprietor	Liquid Net Worth of Proprietor	Tax Bracket of Proprietor
<input type="checkbox"/> Under \$25,000 <input type="checkbox"/> \$25,001 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$200,000 <input type="checkbox"/> Over \$200,001 (please specify) _____	<input type="checkbox"/> Under \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,001 (please specify) _____	<input type="checkbox"/> Under \$25,000 <input type="checkbox"/> \$25,001 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$200,000 <input type="checkbox"/> Over \$200,001 (please specify) _____	<input type="checkbox"/> 0% <input type="checkbox"/> 10% <input type="checkbox"/> 25% <input type="checkbox"/> 28% <input type="checkbox"/> 33% <input type="checkbox"/> 35%

Investment Objective of Proprietor	Investment Experience of Proprietor
<input type="checkbox"/> Current Income Preservation of capital with a primary consideration on current income. <input type="checkbox"/> Balanced A balance between capital appreciation and current income with the primary consideration being current income. <input type="checkbox"/> Growth & Income A balance between capital appreciation and current income with the primary consideration being capital appreciation. <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	<input type="checkbox"/> Bonds (yrs _____) <input type="checkbox"/> Stocks (yrs _____) <input type="checkbox"/> Options (yrs _____)

Please Read and Sign Below			
<p>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 <input type="checkbox"/> if you are subject to backup withholding under the provisions of the Internal Revenue Service code.</p>			
<p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p>			
Signature of Proprietor	Date		
Signature of TradeKing Broker	Date	Signature of TradeKing General Principal	Date

©Kane Reid Securities Group, Inc. dba **TRADEKING**
 Member FINRA/SIPC
 5455 N. Federal Highway, Suite E
 Boca Raton, FL 33487
 1-877-495-5464

Account Number: _____

Certificate of Sole Proprietorship

I, _____, hereby certify that I am engaged in business under
the assumed name and address:
Proprietor – First, Middle Initial, Last

Entity Name

Tax Identification Number

Address 1

Address 2

City State ZIP

I am the sole proprietor of the business so conducted, and no other person, partnership or corporation has any ownership interest therein. I own all securities, assets and other property in the aforementioned entity name.

I hereby agree to hold harmless and indemnify Legent Clearing, its officers, employees, servants, agents and assigns from and against any and all claims, demands, costs, losses, damages, actions, suits, and legal proceedings however caused, against them arising out of the actions incurred by complying with my instructions.

Signed,

Sole Proprietor's Signature	Sole Proprietor's Name	Date
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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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