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

Opening a TRUST 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 on the next page). Finally, call us and ask us to link your new account to your Username.

Here is a document checklist to open a Trust account:

Cash account:

1. Copy of the following pages of the Trust: title page, signatory page, pages indicating powers of the trustee and what investments can be done on behalf of Trust, page indicating any successor trustee. Any amendments to the preceding information.

2. Investment Account Application signed by ALL Trustees (enclosed).

3. Trust Certification/Amendment (enclosed).

Margin account additional documents required:

1. Trust or Trust Certification/Amendment must include explicit authorization to open a margin account.

2. Margin Agreement and Disclosure, signed by ALL Trustees (accessible at www.tradeking.com under Services – Apps+Forms or at http://content.tradeking.com/wiki/download/attachments/1819/Margin+Agreement.pdf)

Option account additional documents required:

1. Trust or Trust Certification/Amendment must include explicit authorization to open an option account.

2. Option Agreement and Disclosure signed by ALL Trustees (accessible at www.tradeking.com under 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.

TRADEKING®

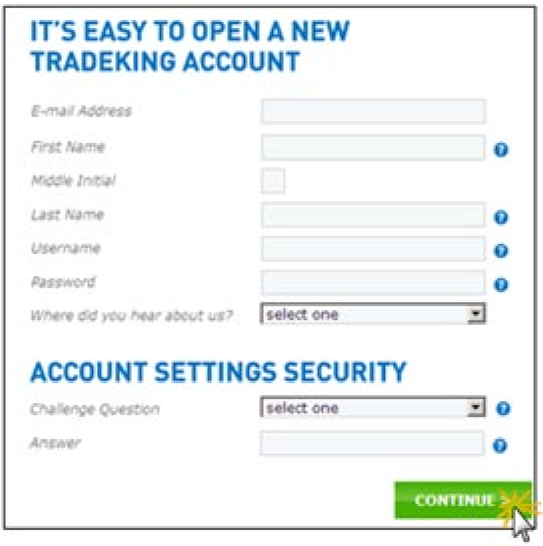
» An Online Options and Stock Broker

TEL 877.495.5464 (KING) FAX 561.988.0131 5455 N Federal Highway • Suite E • Boca Raton • FL 33487 MEMBER FINRA/SIPC TradeKing.com

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.



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TRUST ACCOUNT
Investment Account Application

Account Number	Open Date	Broker Rep Code

Trust Information			
Title of Trust	Trust Tax ID Number		
Permanent Street Address (no PO Boxes or Mail Drops)	City	State	Zip
Mailing Address (If different from permanent address)	City	State	Zip
Date of Formation *(mm/dd/yyyy)*	Date of Last Amendment to the Trust (mm/dd/yyyy)		
Day Phone	Evening Phone	Cell Phone	**E-MAIL ADDRESS** (required)
Nationality of Trust: ☐ U.S. **Foreign trust accounts are not allowed.**	Grantor of the Trust:	Beneficiaries of the Trust:	

Trustee Information (use additional forms for more Trustees)			
Name	Social Security Number		
Permanent Street Address (No PO Boxes or Mail Drops)	City	State	Zip
Mailing Address (If different from permanent address)	City	State	Zip
Birth Date *(mm/dd/yyyy)*	Number of Dependents	Married? ☐ Yes ☐ No	
Day Phone	Evening Phone	Cell Phone	E-MAIL ADDRESS

Citizenship: ☐ **U.S.** ☐ **Foreign (please specify):** ____________ ☐ **Resident Alien** ☐ **Non-resident Alien** (Non-Resident Alien must submit a W-8 form with this application)

Trustee 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) ☐ **Yes** ☐ **No**

Are you or a member of your household a director, 10% shareholder or policy making officer of a publicly traded company? ☐ **Yes** ☐ **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? ☐ **Yes** ☐ **No**

Account Investment Profile

Annual Income of Trust	Net Worth of Trust	Liquid Net Worth of Trust	Tax Bracket of Trust
❑ Under $25,000 ❑ $25,001 - $50,000 ❑ $50,001 - $100,000 ❑ $100,001 - $200,000 ❑ Over $200,001 (please specify) ___________	❑ Under $50,000 ❑ $50,001 - $100,000 ❑ $100,001 - $500,000 ❑ $500,001 - $1,000,000 ❑ Over $1,000,001 (please specify) ___________	❑ Under $25,000 ❑ $25,001 - $50,000 ❑ $50,001 - $100,000 ❑ $100,001 - $200,000 ❑ Over $200,001 (please specify) ___________	❑ 0% ❑ 10% ❑ 25% ❑ 28% ❑ 33% ❑ 35%

Investment Objective of Trust	Investment Experience of Trustee	
❑ **Current Income** Preservation of capital with a primary consideration on current income. ❑ **Balanced** A balance between capital appreciation and current income with the primary consideration being current income. ❑ **Growth & Income** A balance between capital appreciation and current income with the primary consideration being capital appreciation. ❑ **Growth** Capital appreciation through quality equity investments and little or no income. ❑ **Maximum Growth** Maximum capital appreciation with higher risk and little to no income. ❑ **Speculation** Maximum total return involving a higher degree of risk through investment in a broad spectrum of securities	❑ Bonds (yrs____) ❑ Stocks (yrs____) ❑ Options (yrs____)	

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 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 Trustee	Date		
Signature of TradeKing Broker	Date	Signature of TradeKing General Principal	Date

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Certificate of Trust

____
Account Number

REGISTRATION

Please enter the exact title of the Trust, for example: *John Jones (and Sam Smith) Trustee(s) for the benefit of the Mary Jones Trust.*

____
Trustee(s)

____
Name of Trust

____
Tax Identification Number

TRUSTEE CERTIFICATION

• The title of the Trust is as indicated in the Registration above.

• The date of the Trust is _______________________.

• There are no other Trustees of the Trust other than the undersigned.
Trustee(s) Initials: ___ ___ ___

• The names of the **Successor Trustee(s)** are: ____

• The undersigned have the power under the Trust's charter documents and applicable law to enter into an agreement that provides for the investment of the assets comprising a part of the Trust. The following limitations restrict investment of Trust assets:
Restrictions:

____
(Specify any investment restriction, type of security or property, margin, short sales, etc.)

☐ **Check box if Trust authorizes options trading.** If the trust does not specifically mention options trading you must have your trust amended to allow options trading**. Indicate the page number of the trust where the options trading authorization can be found: Page No. ____**

☐ **Check box if Trust authorizes trading on Margin.** If the trust does not specifically mention Margin trading you must have your trust amended**. Please indicate the page number of the trust where the Margin trading authorization can be found: Page No. _______**

• Under the Trust's charter documents, any of the undersigned persons is authorized to instruct

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the introducing broker, and introducing broker is hereby authorized to accept such instructions, with regard to any action to be taken under the Agreement for the account of client.

□ Check box if Trust does not require all trustees to take action. If not all are required, indicate the number required: ____

Trustee's Signature	(Date)	Trustee's Name
Social Security Number		Date of Birth
Address		Email Address (write clearly)

Trustee's Signature	(Date)	Trustee's Name
Social Security Number		Date of Birth
Address		Email Address (write clearly)

Trustee's Signature	(Date)	Trustee's Name
Social Security Number		Date of Birth
Address		Email Address (write clearly)

NOTE: All Trustees must sign. Should only one person execute the Trustee Certification, it shall be a representation that the signer is the sole Trustee. Where applicable, plural references in this Trustee Certification shall be deemed singular.

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Deposit Ticket - Request to deposit funds

Mail all checks to:

Regular Mail	Overnight Deliveries
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.tmpl

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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