

Trading Authorization Agreement



If you want to add an Authorized Agent/Officer/Partner to the account and not a Full Trading/Limited Trading Authorization, please submit the Entity Authorized Agent Form TDA 1187, located in the forms library: <https://www.tdameritrade.com/form-library>.

Return Options:

Electronically via Message Center:

Log in and go to Client Services > Message Center to attach the file

Regular Mail:

PO Box 2760, Omaha, NE 68103-2760

Overnight Mail:

200 South 108th Avenue
Omaha, NE 68154-2631

Fax: 866-468-6268



Account Information

Account Number:

Account Name/Title:

The Account Owner(s) listed below hereby authorizes and appoints the Authorized Agent(s) below as the Account Owner's or Owners' agent(s) and attorney(s)-in-fact for the purchase and sale of securities and other financial instruments in cash and/or on margin in the Account Owner's or Owners' name or number on the TD Ameritrade Clearing, Inc. (the "Clearing Firm") books (the "Account"). The Authorized Agent(s) may act on behalf of and without notice to the Account Owner(s) to buy, sell, sell short, and to otherwise trade stocks, bonds, mutual funds, options, and/or any other securities, financial contracts, or financial instruments. Trading Authorization does not allow your Authorized Agent to instruct the Brokerage Firm to make any changes to the Account Owner(s) Account, such as address of record, suitability information, or to upgrade the Account to trade on margin or to trade options. The actions of the Authorized Agent(s) have the same force and effect as those of the Account Owner(s) with respect to such transactions, and TD Ameritrade, Inc. (the "Brokerage Firm") is authorized to follow such actions as if directly instructed by the Account Owner(s). The Authorized Agent(s) represents they are familiar with the Account Owner(s)' investment objectives, financial situation, and needs, and will invest in a manner consistent with these objectives. The Client Agreement set forth in the Account Agreement and all other agreements applicable to this Account, shall apply equally to the Authorized Agent(s).

If Full Trading Authorization is chosen, this authority includes the right to request delivery of securities or monies from the account in the Account Owner's or Owners' name(s).

If this is a fiduciary account, the Account Owner(s) affirms that this grant of trading authority has been conferred consistent with his/her fiduciary duties and powers.

The Account Owner(s) understands all such transactions conducted by the Authorized Agent(s) are at the Account Owner's or Owners' own risk. The Account Owner(s) hereby ratifies and confirms any and all transactions made at any time by the Authorized Agent(s) for the Account. Accordingly, the Account Owner(s) agrees to indemnify and hold harmless the Brokerage Firm and Clearing Firm from any and all losses arising from and to promptly pay on demand any debit balance due on the Account. The Brokerage Firm and Clearing Firm assume no responsibility for trade monitoring or reviewing any investment activity or decision of the Authorized Agent in the Account Owner(s)' account. Further, the Brokerage Firm or Clearing Firm does not offer legal or tax advice.

This authorization and indemnity is in addition to, and in no way limits or restricts, any rights which the Brokerage Firm or Clearing Firm may have under any other agreement with the Account Owner(s) or Authorized Agent(s). This authorization and indemnification shall benefit the Brokerage Firm and Clearing Firm, and any successor firms, irrespective of any changes at any time in the personnel thereof, and their assigns.

This Agreement shall remain in full force and effect until revoked by the Account Owner(s)' written notice addressed to the Brokerage Firm and delivered to its offices. The Account Owner(s) shall be liable for transactions initiated prior to the Brokerage Firm's receipt of such written revocation.

The Authorized Agent(s) agrees to immediately notify the Brokerage Firm in writing if any Authorized Agent(s), or members of his/her household, are either a) currently employed or licensed by a member of a stock exchange or the Financial Industry Regulatory Authority (FINRA), or registered as an investment advisor and using the license in a professional sales, trading, or customer service capacity, or b) a member of the board of directors, 10% shareholder, or policy-making officer of a company which trades publicly on a stock exchange.

To help the government fight the funding of terrorism and money laundering activities, financial institutions obtain and record information in order to ensure the identity of each person authorized to trade on an account.

What this means for you: When you are authorized to trade on 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.



2

Affiliations

TD Ameritrade Acct #:

Check here if any Authorized Agent is a member of the board of directors, 10% shareholder, or policy-making officer of a publicly traded company. Specify the name of the Authorized Agent, the company name, ticker symbol, address, city, and state:

Check here if any Authorized Agent 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. Specify the name of the Authorized Agent:

Check here if any Authorized Agent(s) is, or is employed by, a federal or state registered Investment Advisor.

3

Authorized Agent Compensation

Check here if any Authorized Agent is being compensated for providing investment advice, placing trades, or otherwise managing your account.

4

Authorized Agent*

Level of Authorization: (check only one). If neither Full nor Limited is marked, the authorization level will default to Limited.

Full Trading Authorization with Privileges to Withdraw Money and/or Securities (Not applicable on IRA, UTMA, UGMA, Estate, or Trust Accounts; authorization level will default to Limited.)

Limited Trading Authorization for Purchase and Sale of Securities Only

Name Prefix (optional): Mr. Mrs. Ms. Dr. Rev.

First Name: Middle Name: Last Name:

Relationship to Account Owner: Date of Birth: U.S. Social Security Number:**

Home Address: (no PO box or mail drop) Primary Phone number:

City: State: Zip Code:

Please specify if you are:

Employed Unemployed Retired Homemaker Student Self-Employed

Employer Name (If Self-Employed, provide the name of your business): Occupation/Type of Business:

Employer Address:

City: State: Zip Code:

*Signature required below in Section 5.

**If you do not have a Social Security Number, please submit a photocopy of your passport and a copy of a bank or brokerage statement.

Authorized Agent*

Level of Authorization: (check only one). If neither Full nor Limited is marked, the authorization level will default to Limited.

- Full Trading Authorization** with Privileges to Withdraw Money and/or Securities (Not applicable on IRA, UTMA, UGMA, Estate, or Trust Accounts; authorization level will default to Limited.)
- Limited Trading Authorization** for Purchase and Sale of Securities Only

Name Prefix (optional): Mr. Mrs. Ms. Dr. Rev.

First Name: | Middle Name: | Last Name:

Relationship to Account Owner: | Date of Birth: | U.S. Social Security Number:**

| | | | - | | | | - | | | | | | | |

Home Address: (no PO box or mail drop) | Primary Phone number:

| | | | | | | | | | | | | | | | | | | |

City: | State: | Zip Code:

| | | | | | | | - | | | | | | | |

Please specify if you are:

- Employed Unemployed Retired Homemaker Student Self-Employed

Employer Name (If Self-Employed, provide the name of your business): | Occupation/Type of Business:

Employer Address:

City: | State: | Zip Code:

| | | | | | | | - | | | | | | | |

*Signature required below in Section 5.

**If you do not have a Social Security Number, please submit a photocopy of your passport and a copy of a bank or brokerage statement.

5

Trading Authorization

TD Ameritrade Acct #:

By our signatures below, the Account Owner(s) and Authorized Agent(s) agree to the provisions within this document in its entirety, and attest, unless the box below is checked, that this authorization supersedes any prior trading authorization the Account Owner(s) may have executed with regard to the Account. Furthermore, Account Owner(s) and Authorized Agent(s) acknowledge that the Brokerage Firm or Clearing Firm may refuse to approve, or remove, the Authorized Agent(s) from acting as the Account Owner(s)' agent on this, or any other account.

Unless I have checked this box, this form will supersede any prior Trading Authorization Agreements that the Account Owner(s) may have executed with regard to the account.

All Account Owners and Authorized Agents must sign.

Sign Here

Account Owner's Signature:

X

Date:

- -

Original signatures are required; electronic signatures and/or signature fonts are not authorized

Account Co-Owner's Signature:

X

Date:

- -

Authorized Agent(s)

Account Agent's Signature:

X

Date:

- -

Sign Here

Original signatures are required; electronic signatures and/or signature fonts are not authorized

Account Agent's Signature:

X

Date:

- -

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

TD Ameritrade, Inc. and TD Ameritrade Clearing, Inc., members FINRA/SIPC, are subsidiaries of The Charles Schwab Corporation. TD Ameritrade is a trademark jointly owned by TD Ameritrade IP Company, Inc. and The Toronto-Dominion Bank. ©2021 Charles Schwab & Co. Inc. All rights reserved.