

# Entity Authorized Agent Form



### Return Options:

#### Electronically via Message Center:

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

#### Regular Mail:

PO Box 2209, Omaha, NE 68103-2209

#### Overnight Mail:

200 South 108th Avenue  
Omaha, NE 68154-2631

Fax: 866-468-6268

This form is used to add/update/verify the authorized agents on an entity account. If you have any questions, please call us at 800-669-3900.

New Account

Deposit of Securities

Update to an existing account\*

- For the following requests complete Sections 1-9:
  - Adding an officer/authorized agent
- For the following requests complete Sections 1-10:
  - Removing an officer/authorized agent. *(Rescinding Officer/Authorized Agent also must sign in Section 10.)*
  - Adding and removing an officer/authorized agent. *(Rescinding Officer/Authorized Agent also must sign in Section 10.)*
  - Removing all officers/authorized agents. *All Officers/Authorized Agents must sign and complete all sections. A copy of the corporate bylaws, operating agreement, meeting minutes etc. showing the change in officers is also required.*

\*All current authorized agent's must sign Section 8, 9, or 10.

### Select Entity Type:

S Corporation

C Corporation

Foreign Corporation

Non-Incorporated Organization

Limited Liability Company

Investment Club

Partnership

Limited Partnership

Trust



## Entity Information

Account Number:

Tax ID Number:

Title of Entity:

\_\_\_\_\_

\*Business Address: *(no PO box or mail drop)*

\_\_\_\_\_

City:

State:

Zip Code:

Country:

\*Mailing Address: *(if different from above)*

\_\_\_\_\_

City:

State:

Zip Code:

Country:







Section 2, Authorized Agent/Partner/Trustee/Officer Information Continued

Country of Dual/Secondary Citizenship (if applicable):

Country of Birth:

Non-U.S. citizens\*: Do you hold a current U.S. immigration visa?  Yes  No

Specify visa type:

Visa Number:

Expiration:

\*Nonresident aliens must submit a copy of a current passport and a copy of a bank or brokerage statement.

## Authorized Agent/Partner/Trustee/Officer Information

Check here if this is a domestic entity and this person owns 25% or more.

Check here if this is a foreign entity and this person owns 10% or more.

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

First Name:

Middle Name:

Last Name:

Date of Birth:

Number of Dependents:

U.S. Social Security Number:

Home Address: (no PO box or mail drop)

City:

State:

Zip Code:

Country:

Please specify if you are:

Employed

Unemployed

Retired

Homemaker

Student

Self-Employed

Please choose from the list provided on page 11 the occupation code and industry of occupation code that most accurately describes your situation.

Occupation Code:

Industry of Occupation Code:

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

Employer Address:

City:

State:

Zip Code:

Country:

Check here if you are **NOT** a U.S. citizen.

Country of Citizenship:

Country of Dual/Secondary Citizenship (if applicable):

Country of Birth:

Non-U.S. citizens\*: Do you hold a current U.S. immigration visa?  Yes  No

Specify visa type:

Visa Number:

Expiration:

\*Nonresident aliens must submit a copy of a current passport and a copy of a bank or brokerage statement.

# 3

## Control Person (Required)

Control Person means a single individual with significant responsibility to control, manage, or direct a legal entity customer, including an executive officer or senior manager (for example, a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, or Treasurer); or any other individual who regularly performs similar functions.

- Check here if this is a domestic entity and this person owns 25% or more.
- Check here if this is a foreign entity and this person owns 10% or more.

\*The Control Person will not be an authorized agent on this account unless they fill out Section 2 and sign in Section 8.

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

First Name: | Middle Name: | Last Name:

Check here if you have already provided your contact information above in section 2.

Home Address: (no PO box or mail drop)

City: | State: | Zip Code: | Country:

Date of Birth: | U.S. Social Security Number:

Check here if you are **NOT** a U.S. citizen. | Country of Citizenship:

Country of Dual/Secondary Citizenship (if applicable): | Country of Birth:

Non-U.S. citizens\*: Do you hold a current U.S. immigration visa?  Yes  No

Specify visa type: | Visa Number: | Expiration:

\*Nonresident aliens must submit a copy of a current passport and a copy of a bank or brokerage statement.

# 4

## Beneficial Owners

This section should be completed by only beneficial owners that are not already listed in section 2.

Beneficial Owner means each individual, if any, who, directly or indirectly, owns 25% or more of the equity interest of a legal entity customer (10% or more if the legal entity customer is foreign).

### Beneficial Owner #1

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

First Name: | Middle Name: | Last Name:

Home Address: (no PO box or mail drop)

City: | State: | Zip Code: | Country:



### Beneficial Owner #3

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

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Home Address: (no PO box or mail drop)

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ U.S. Social Security Number: \_\_\_\_\_

Check here if you are **NOT** a U.S. citizen. Country of Citizenship: \_\_\_\_\_

Country of Dual/Secondary Citizenship (if applicable): \_\_\_\_\_ Country of Birth: \_\_\_\_\_

Non-U.S. citizens\*: Do you hold a current U.S. immigration visa?  Yes  No

Specify visa type: \_\_\_\_\_ Visa Number: \_\_\_\_\_ Expiration: \_\_\_\_\_

\*Nonresident aliens must submit a copy of a current passport and a copy of a bank or brokerage statement.

### Beneficial Owner #4

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

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Home Address: (no PO box or mail drop)

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ U.S. Social Security Number: \_\_\_\_\_

Check here if you are **NOT** a U.S. citizen. Country of Citizenship: \_\_\_\_\_

Country of Dual/Secondary Citizenship (if applicable): \_\_\_\_\_ Country of Birth: \_\_\_\_\_

Non-U.S. citizens\*: Do you hold a current U.S. immigration visa?  Yes  No

Specify visa type: \_\_\_\_\_ Visa Number: \_\_\_\_\_ Expiration: \_\_\_\_\_

\*Nonresident aliens must submit a copy of a current passport and a copy of a bank or brokerage statement.

If additional beneficial owners need to be disclosed, please copy this page as needed.

## 5

### Affiliations

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

---
- Check here if any Partner/Authorized Agent, Trustee, or Officer 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 affiliated person/Authorized Agent:**  

---
- Check here if any Partner/Authorized Agent/Trustee is, or is employed by, a federal or state registered Investment Advisor. **Specify the name of the affiliated person/Authorized Agent and Investment Advisor company name:**  

---
- Check here if any Partner/Authorized Agent/Trustee is using a license in a professional sale or trading capacity. **Specify the name of the affiliated person/Authorized Agent:**  

---

## 6

### Authorized Agent Compensation

- Check here if any Authorized Agent (unaffiliated with the entity) is being compensated for providing investment advice, placing trades, or otherwise managing the account.

## 7

### Checkwriting/Debit Card

If you are adding a new Authorized Agent/Partner/Officer/Trustee to the account, the new Authorized Agent/Partner/Officer/Trustee will also be able to sign checks and use a debit card against funds in this account. (Authorized Agents are not eligible for a debit card) The new Authorized Agent/Partner/Officer/Trustee will also be bound by the terms and conditions of the TD Ameritrade Checking/Debit Card Agreement. If you would like new checks or a new card with the new Authorized Agent/Partner/Trustee/Officer name on them please check the boxes below.

Any Authorized Agent/Partner/Officer/Trustee that is removed will no longer be able to sign checks against this account. Any existing checks/debit cards will be invalid. Any automatic transactions established on the account are now canceled, and you will need to re-establish new automatic transactions.

Please check the check order box below to get a new set of checks with the new Authorized Agent/Partner/Officer/Trustee name.

- Send me a new order of checks.**

*Note that we will only mail checks to the original Authorized Agent/Partner/Trustee/Officer address, which will be printed on the checks.*

- Send me a debit card for my new Co-owner.**

*Note that we can only add checks for an Authorized agent and checks and cards for Partner/Officer/Trustee, if the account is already enabled with checks and debit cards. Authorized Agents are NOT permitted to have a debit card, and no card will be issued with their name on it.*

# 8

## Account Agreement

I have received and read the Client Agreement, which is incorporated by this reference, that will govern my account.

In this agreement, "Account Owner," "I," and "my" refer to the entity for which this account is established and/or the natural person(s) authorized to represent and act on behalf of the entity. I release and agree to indemnify and hold harmless TD Ameritrade, Inc., its divisions and affiliates thereof ("TD Ameritrade") from any and all liability and claims for damages resulting from any action taken pursuant to this Agreement. By my signature below, I attest that I am of legal age to contract and that the information contained in this application is true and correct. If this is for a Trust Account, I hereby certify that this request is consistent with the terms and conditions of the Trust Agreement and that there are no other trustees other than the undersigned. I acknowledge that I have received and read the "Client Agreement," available at www.tdameritrade.com or by calling 800-669-3900, that will govern my account. I agree to be bound by the "Client Agreement" which may be amended from time to time and which is incorporated by this reference. All securities, dividends, and proceeds will be held at TD Ameritrade Clearing, Inc. unless otherwise instructed. I understand that TD Ameritrade may obtain a current consumer or credit report to determine my eligibility, or continuing eligibility, for credit or for other legitimate business purposes. Any decision by TD Ameritrade to extend credit may be based on information contained in a consumer or credit report, as well as the policies of TD Ameritrade Clearing, Inc. I understand that TD Ameritrade may relate information regarding this account, including account delinquency and voluntary closures, to consumer or credit reporting agencies. Upon my request, TD Ameritrade shall inform me of each consumer or credit reporting agency from which they have obtained and/or reported my consumer or credit report. TD Ameritrade agrees to notify the consumer or credit reporting agencies if I dispute the completeness or accuracy of the information furnished by TD Ameritrade. By my signature below, I authorize TD Ameritrade to obtain consumer or credit reports for the name(s) set forth below. I understand that nondeposit investments purchased through TD Ameritrade are not insured by the Federal Deposit Insurance Corporation (FDIC), are not obligations of or guaranteed by any financial institution and are subject to investment risk and loss that may exceed the principal invested. Unless I have declined the margin feature, I acknowledge that securities securing loans from TD Ameritrade may be lent to TD Ameritrade and lent by TD Ameritrade to others. I also acknowledge that if I trade "on margin," I am borrowing money from TD Ameritrade and that I understand the requirements and risks associated with margin as summarized in the Margin Handbook and Margin Disclosure Document. I understand that TD Ameritrade will not review the entity documents and I represent and warrant that the agreement allows for margin borrowing, and the trading of options in this Account at the level requested by me.

### Important information about procedures for opening a new account:

To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

What this means for you: 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 utilize a third-party information provider for verification purposes and/or ask for a copy of your driver's license or other identifying documents. By my signature below, I attest that I am of legal age to contract, and I certify, to the best of my knowledge that the information provided on this application is complete and correct.

All Authorized Agents and Officers must provide their signatures below.

If I am a U.S. person for tax purposes:

Under penalties of perjury, I certify that: (1) the number shown on this form is my correct taxpayer identification number; (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Services (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; (3) I am a U.S. citizen or other U.S. person; and (4) the FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

If I have been notified by the IRS that I am subject to backup withholding because I have failed to report all interest and dividends on my tax return, I must cross out (2) in this certification.

If I am not a U.S. Person for tax purposes:

I am submitting the applicable Form W-8 with this form to certify my foreign status.

The IRS does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

The Client Agreement applicable to this brokerage account contains a predispute arbitration clause. By signing this agreement, the parties agree to be bound by the terms of the Client Agreement, including the arbitration agreement located in Section 12 of the Client Agreement on page 8.

I am the sole officer.

Single Member LLC

Sign Here

Authorized Agent's Signature:

X

Title

Date:

\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|

Authorized Agent's Signature:

X

Title

Date:

\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|

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

Section 8, Account Agreement Continued

Authorized Agent's Signature:

X

Title

Date:

\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

Authorized Agent's Signature:

X

Title

Date:

\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

Authorized Agent's Signature:

X

Title

Date:

\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

9

Secretary (Only for Corporate Accounts)

IN WITNESS WHEREOF, I have hereunto set my hand and the seal of said corporation this (today's date)

\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

Sign Here

Secretary's Signature:

X

Printed Name of Secretary:

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

10

Rescinding Officer

If this form is being used to update an authorized agent on an existing TD Ameritrade account, then the rescinding officers needs to sign below.

Sign Here

Authorized Agent's Signature:

X

Title

Date:

\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

Authorized Agent's Signature:

X

Title

Date:

\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

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

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.

## Occupation Codes

A42 Accountant/Auditor/Bookkeeper	C82 Compliance/Regulatory Professional	N21 Nurse
A62 Adjuster	C92 Consultant	O11 Office Associate
A82 Advertiser/Marketer/PR Professional	C43 Counselor/Therapist	O21 Other; If Other, include a description in the Occupation box.
A33 Air Traffic Controller	C53 Customer Service Representative	P81 Pharmacist
A43 Ambassador/Consulate Professional	D11 Dealer	P91 Physical Therapist
A53 Analyst	D61 Dentist	P22 Pilot
A63 Appraiser	D31 Distributor	P32 Police Officer/Firefighter/Law Enforcement Professional
A73 Architect/Designer	D41 Doctor/Surgeon/Physician	P42 Politician
A83 Artist/Performer/Actor/Dancer	D51 Driver	P52 Project Manager
A93 Assistant/Executive Assistant	E51 Engineer	R81 Real Estate Professional
A44 Athlete	E71 Exterminator	R71 Researcher
A64 Attorney/Judge/Legal Professional	F71 Factory/Warehouse Worker	S41 Salesperson
A74 Auctioneer	F81 Farmer/Rancher	S51 Scientist
L51 Banker/Lending Professional	F91 Financial Planner/Advisor	S61 Seamstress/Tailor
B21 Barber/Beautician/Hairstylist	F22 Flight Attendant	S71 Security Guard
B31 Broker/Registered Rep	F32 Human Resources Professional	S81 Social Worker
B41 Business Executive (VP, Director, etc.)	I41 Importer/Exporter	T41 Teacher/Professor
B51 Business Owner	I51 Inspector/Investigator	T51 Technician
C81 Caregiver	I81 Investor	T61 Teller
C91 Carpenter/Construction Worker/Contractor	I91 IT Professional/IT Associate	T71 Tradesperson/Craftsperson
C22 Cashier	J31 Janitor	T81 Trainer/Instructor
C32 Chef/Cook	J41 Jeweler	U21 Underwriter
C42 Chiropractor	L31 Laborer	V11 Veterinarian
C52 Civil Servant	L41 Landscaper	W21 Writer/Journalist/Editor
C62 Clergy	M91 Mechanic	
C72 Clerk	M22 Military, Officer or Associated	
	M32 Mortician/Funeral Director	

## Industry of Occupation Codes

A11 Accounting	F11 Fashion/Clothing	O31 Other; If Other, include a description in the Industry of Occupation box
A21 Advertising/Marketing	F21 Financial Services	P11 Parking and Car Washes
A31 Aerospace/Defense	F51 Firearms and Explosives	P21 Pawn Shops/Brokers
A41 Agriculture/Forestry	G11 Gaming/Casino/Card Club	P31 Personal Care/Hygiene (Beauty, Salon, Cosmetics, Massage, etc.)
A51 Amusement and Recreation	G21 Government/Public Administration	P41 Pharmaceuticals
A61 Animal Services and Veterinary	G31 Grocery/Supermarket	P51 Printing/Publishing
A71 Architecture/Design	H11 Healthcare/Medical Services	P71 Professional/Civic Organizations (Non-Retail)
A81 Arts/Antiques	H21 Hotel/Hospitality	R11 Real Estate
A91 Athletics/Fitness	I11 Import/Export	R21 Religious Organization
A32 Automotive	I21 Information Technology (IT)	R31 Repair Services - Home, Auto, and Other
B11 Aviation	I31 Insurance	R41 Restaurant/Food Service
C11 Bar/Nightclub/Adult Entertainment Club	J11 Jewelry, Gems, and Precious Metals	R51 Retail Sales/Retail Trade
C21 Childcare	L11 Legal Services/Public Safety	S11 Science and Biotechnology
C31 Cleaning/Janitorial/Housekeeping	L21 Logistics/Supply Chain	S21 Security
C41 Communications/Telecommunications	M11 Manufacturing	T11 Transportation
C51 Construction/Carpentry/Landscaping	M21 Maritime	T31 Travel
C61 Convenience Store/Liquor Store/Gas Station	M31 Media/Entertainment	U11 Utilities (Public)
C71 Customer Service and Support	M41 Mining, Oil, and Gas	W11 Wholesale Sales/Trade
E11 Education	M51 Money Services Businesses (Check Cashing, Money Transmitting, Payday Loans, Currency Exchange)	
E21 Embassy/Consulate	N11 Non-Profit/NGO (Non-Government Agency)/Charity	
E31 Energy		
E41 Engineering		