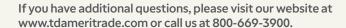
# UTMA/UGMA Account Conversion Application





#### **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

Use this form to convert a TD Ameritrade brokerage account with Custodial (UTMA/UGMA) registration to a TD Ameritrade brokerage account once you have reached the age at which your custodial relationship ends according to your state law. (Age of Termination)

Do not sign or date until you have reached the appropriate UTMA/UGMA Age of Termination.

For accounts using the TD Ameritrade Investment Management, LLC Portfolios advisory service: The account modification privileges in the margin, options, and check writing sections are not applicable to TD Ameritrade Investing Accounts using the advisory service of TD Ameritrade Investment Management, LLC and any responses in these sections will not be applied to your account. In addition to this form, you must also fill out the Personal and Financial Information Form to update your account with any changes in your financial situation or investment objectives.



### **Request Type**

Account Number:	Account Title:
Please choose one of the options below:	
If wanting to maintain this account numb	er at TD Ameritrade:
•	n Individual Account. (Complete Sections 1, 2, 4, 5, 6, 7, 8, and 11) nor's government issued photo ID and Social Security card.
Note: Former minor must be primary acc	Joint Account. (Complete Sections 1, 2, 3, 4, 5, 6, 7, 8, and 11) count owner listed in Section 2 a tax or legal adviser to determine if the account ownership you wish to select is available in
	ou are establishing a joint account and do not check a box, the account will be registered as to. If the account owners do not qualify for the joint account type selected, then the joint as with Rights of Survivorship.
O Joint Tenants with Rights of Survivors (not available to residents of Louisian	ship (JTWROS). If a Joint owner dies, his/her interest passes to the other Account Owner (a).
O Community Property. AZ, CA, ID, LA,	NM, NV, PR, TX, WA, WI residents only (spouses only).
O Tenants in Common% Owner _ to his/her estate.	% Co-Owner (50/50, unless otherwise noted). If a Joint owner dies, his/her interest passes
Please submit a copy of the former mi	inor's government issued photo ID and Social Security card.
If wanting to transfer assets into a differe	nt TD Ameritrade Account:
O <b>Total Transfer to existing TD Ame</b> Note: Former minor must be listed a is complete.	ritrade non IRA Account . (Complete Sections 1 and 11) as account owner or co-owner of receiving account. Account will be closed after the transfer



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# **Account Owner** (Former Minor & Beneficiary of UTMA/UGMA Account)

Name Prefix (optional): O Mr. O Mrs.	OMs. ODr. O	Rev.		
First Name:	Middle Nan	me:   Last Name:		
Date of Birth:	Number of D	Dependents:	U.S. Social Security N	Number:
Marital Status:			Mother's Maiden Na	me:
O Single O Married O Divorced	O Widowed			
Home Address (no PO box or mail drop)	:			
City:	State:	Zip Code:	-	Country:
Mailing Address (if different from above	):			
City:	State:	Zip Code:		Country:
Primary Phone number: O Check here if this is not a U.S. phone number	er	Secondary Phor O Check here if t	ne number: his is not a U.S. phone numb	er
Fax number:		Email (required and trade confi		of your account statement
Please specify if you are:				
O Employed O Unemployed	O Retired	O Homemaker	O Student O Self	F-Employed
Employer Name (If Self-Employed, provi	ide the name of you	r business):		
Please choose from the list provided on page 2	L1 the occupation code	e and industry of occupation	on code that most accurate	ly describes your situation.
Occupation Code:		Industry of Occup	pation Code:	
Employer Address:				
City:	State:	Zip Code:	-	Country:
Annual Income: O \$0-\$24,999 O \$25,000-\$49,999	O \$50,000-\$	99,999 O \$100,0	00-\$249,999 🔘 \$2	50,000+
Approximate Net Worth: (not including )	orimary residence)			
O \$0-\$14,999 O \$15,000	)-\$49,999	O \$50,000-\$99,99	9 0 \$1	00,000-\$249,999
O \$250,000-\$499,999 O \$500,00	00-\$999,999	O \$1,000,000-\$1,99	99,999 O\$2	,000,000+

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### Section 2, Account Owner continued

City:

O\$0-\$14,999	orth: (cash, stocks, etc.)	
- + · + · · · · /	O \$15,000-\$49,999	O \$50,000-\$99,999 O \$100,000-\$249,999
O \$250,000-\$499,999	O \$500,000-\$999,999	O \$1,000,000-\$1,999,999 O \$2,000,000+
What best describes the ir	nitial source of funds for this accour	nt?
O Employment/Wages	O Retirement Funds	O Gift O Savings
O Inheritance/Trust	O Investments	O Unemployment/Disability O Legal Settlement
O Lottery/Gaming	O Spousal/Parental Support	O Other (describe source of funds):
What best describes the o	ngoing source of funds for this acc	count?
O Employment/Wages	O Retirement Funds	O Gift O Savings
O Inheritance/Trust	O Investments	O Unemployment/Disability O Legal Settlement
O Lottery/Gaming	O Spousal/Parental Support	O Other (describe source of funds):
O Check here if you are <b>NC</b>	<b>)T</b> a U.S. citizen.	Country of Citizenship:
Country of Dual/Secondar	y Citizenship ( <i>if applicable</i> ):	Country of Birth:
Non-U.S. citizens*: Do you	hold a current U.S. immigration vis	sa? O Yes O No
Specify visa type:	Visa Number:	Expiration:
If a U.S. address is listed,	then attach a Letter of Explanation und on the TD Ameritrade Forms L <b>VNE</b>	a current passport, and a copy of a bank or brokerage statement. n for U.S. Mailing Address/Phone Number Attachment for Form .ibrary: https://www.tdameritrade.com/form-library.
Account Co-Ow (Only Complete	this Section if Conve	erting the Account into a Joint Account)
(Only Complete	OMr. OMrs. OMs. ODr. O	
(Only Complete		Rev.

State:

Zip Code:

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Country:

### Section 3, Account Co-Owner continued

Mailing Address (if different from above):

City:	State:	Zip Code:	Country:
Primary Phone number: O Check here if this is not a U.S. phone	number	Secondary Phone number: O Check here if this is not a U.S. phone	e number
Fax number:		Email (required for electronic deli	ivery of your account statement
		and trade confirmations):	
Please specify if you are:			
O Employed O Unemploye	ed O Retired	O Homemaker O Student	O Self-Employed
Employer Name (If Self-Employed	, provide the name of your	business):	
Please choose from the list provided or	page 11 the occupation code	and industry of occupation code that most a	ccurately describes your situation.
Occupation Code:		Industry of Occupation Code:	
Employer Address:			
City:	State:	Zip Code:	Country:
Annual Income: O \$0-\$24,999 O \$25,000-\$4	49,999 O \$50,000-\$9	9,999 O \$100,000-\$249,999	O \$250,000+
Approximate Net Worth: (not incl	uding primary residence)		
O \$0-\$14,999 O \$	15,000-\$49,999	O \$50,000-\$99,999	O \$100,000-\$249,999
O \$250,000-\$499,999 O \$	500,000-\$999,999	O\$1,000,000-\$1,999,999	O \$2,000,000+
Approximate Liquid Net Worth: (c	ash, stocks, etc.)		
O \$0-\$14,999 O \$	15,000-\$49,999	O \$50,000-\$99,999	O \$100,000-\$249,999
O\$250,000-\$499,999 O\$	500,000-\$999,999	O\$1,000,000-\$1,999,999	O \$2,000,000+
What best describes the initial sou	rce of funds for this accour	nt?	
O Employment/Wages O R	etirement Funds	O Gift	O Savings
O Inheritance/Trust O Ir	nvestments	O Unemployment/Disability	O Legal Settlement
O Lottery/Gaming O S	pousal/Parental Support	O Other (describe source of funds):	
What best describes the ongoing	source of funds for this acco	ount?	
O Employment/Wages O R	etirement Funds	O Gift	O Savings
O Inheritance/Trust O Ir	nvestments	O Unemployment/Disability	O Legal Settlement
O Lottery/Gaming O S	pousal/Parental Support	O Other (describe source of funds):	

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coont do owner continued							
O Check here if you are <b>NOT</b> a U.S. citizen.		Country of Citizenship:					
Country of Dual/Secondary Citizenship (if app	olicable):	Country of Birth:					
Non-U.S. citizens*: Do you hold a current U.S.	immigration visa? O	Yes O No					
Specify visa type:	Visa Number:		Expiration:				
* Nonresident aliens must submit a W-8BEN form, a copy of a current passport, and a copy of a bank or brokerage statement. If a U.S. address is listed, then attach a Letter of Explanation for U.S. Mailing Address/Phone Number Attachment for Form W-8. This form can be found on the TD Ameritrade Forms Library: https://www.tdameritrade.com/form-library.							
Affiliations							

household, including parents, in-laws, siblings, and dependents is a member of the board of directors, 10% shareholder, or policy-making officer of a publicly traded company. Specify the company name, ticker symbol, address, city, and state:

Check here if the O **Account Owner** or O **Co-Owner**, their spouse, any member of their immediate families living in the same household, including parents, in-laws, siblings, and dependents is licensed, employed by, or associated with, a broker-dealer firm, a financial services regulator, securities exchange, or member of a securities exchange. If checked, please specify entity below. If this entity requires its approval for you to open this account, please provide a copy of the required authorization letter (with this application):

Check here if the O Account Owner or O Co-Owner, their spouse, any member of their immediate families living in the same



# **Trade Confirmations and Account Statements**

I understand that I will receive monthly account statements and trade confirmations electronically, unless I make a selection below. If I do not provide a valid email address, I will receive a quarterly paper statement or a monthly paper statement. Certain types of accounts or activity (such as options trading) require a monthly statement, either electronically or via U.S. mail. I will be responsible for any fees that apply. Accounts with a total liquidation value of \$10,000 or an average of five trades per month over a three-month period are eligible to receive free paper statement and confirmation delivery.

If I elect to receive either electronic statements or electronic confirmations, I will receive shareholder information electronically when available.

O Electronic	O Paper	
Trade Confirmation:		
O Electronic Monthly	O Paper Monthly (\$2 fee may apply each month)	O Paper Quarterly (\$2 fee may apply each quarter)
Account Statement:		
Wileli avallable.		

O Unless I have checked this box, TD Ameritrade is required to share my name and address with the companies I invest in through your services so they may contact me directly about my investment. If I direct you not to share, you will receive the information on my behalf and will forward it to me. Shareholder information includes proxy material, prospectuses, annual reports, and other corporate communications. In some cases, regulations may require sharing information with the companies in which I have invested despite this election.

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# **Investment Objectives**

For definitions regarding investment objectives, please see page 10 of the application.

Select the degree of risk you are willing to take with the assets in this account: O Conservative O Moderate Aggressive O Speculative Select the primary investment objective for the account: O Moderate O Conservation O Moderate Growth O Growth O Aggressive Growth Select the secondary investment objectives for the account: (Check at least one or all that apply) O Moderate O Moderate Growth O Growth O Conservation O Aggressive Growth O None Select your liquidity needs for this account: (Check only one that applies) O Within 3 months O4-6 months O7 - 9 months 010 - 12 months O More than 1 year

**O**7 - 9 years

010 - 12 years

O 13 years or more



# **Margin Privileges**

O Less than 1 year

Select the investment time horizon for this account:

O1-3 years

All qualified accounts are opened as margin accounts unless you decline margin privileges in this section. A margin account allows you to borrow from TD Ameritrade against certain securities as your collateral. A decline in the value of your securities may require you to provide additional funds, or force the sale of securities in your account. Selling short can expose you to potentially unlimited risk. To learn more about the potential benefits of margin borrowing and the associated risks involved, read the Margin Account Handbook and the Margin Disclosure Document located within the forms library: https://www.tdameritrade.com/form-library

04 - 6 years

O Check this box if you want to decline margin privileges. If you do not check the box, your account will be opened as a margin account if it qualifies. By submitting this Account Application without checking the box to decline margin privileges, you represent that you understand and agree that margin features are subject to the terms and conditions of the Client Agreement, which you have agreed to by submitting this Account Application. You understand and acknowledge that securities securing loans from TD Ameritrade may be lent to TD Ameritrade and lent by TD Ameritrade to others. You also acknowledge that if you trade "on margin" you are borrowing money from TD Ameritrade and that you understand the requirements and risks associated with margin as summarized in the Margin Account Handbook and Margin Disclosure Document.



# **Cash Sweep Vehicle Choices**

You offer me choices in managing all aspects of my portfolio. This includes offering different programs to earn interest on the cash in my account through your Cash Balance programs. See the Client Agreement for a complete description of the Cash Sweep program. If I do not make a selection, my cash balances will be swept to the TD Ameritrade FDIC Insured Deposit Account. Other sweep choices are available for clients with a household value greater than \$500,000 and cash balances of more than \$100,000. I understand my account statement will include sweep transactions involving money market funds in lieu of immediate trade confirmations.

Please select only one.

Please select OTD Ameritrade FDIC Insured Deposit Account (IDA)

OTD Ameritrade Cash (Protected by the Securities Investor Protection Corporation (SIPC))

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# **Trusted Contact** (Optional)

By completing this section, you authorize TD Ameritrade to contact the person(s) named below for the following reasons: if there are questions or concerns about my whereabouts or health status; if TD Ameritrade suspects that I may be a victim of fraud or financial exploitation; if TD Ameritrade suspects that I might no longer be able to handle my financial affairs; to confirm the identity of any legal guardian, executor, trustee, authorized trader, or holder of a power of attorney; or if TD Ameritrade has any other concerns or is unable to contact me about my account(s) held at TD Ameritrade. Please review the Client Agreement for the full terms and conditions regarding how TD Ameritrade uses this information.

NOTE: Your Trusted Contact must be someone other than an account owner. You may provide more than two Trusted Contact Persons by completing and signing additional Authorization Forms.

First Name:	Middle Initial:   Last Name:
Relationship:	
Phone number:	Email:
City:	State: Zip Code: Country:
First Name:	Middle Initial:   Last Name:
Relationship:	
Phone number:	Email:
City:	State:   Zip Code:   Country:

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# **Options Account**

Due to the risks involved in options, we are required to obtain the following information. The income information above must be completed to be considered for options.

 $\ensuremath{\mathsf{O}}$  Check this box to decline options privileges.

# **Options Objectives** (Only required if applying for options.)

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### **Account Agreement**

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

I agree to be bound by this Client Agreement, as amended from time to time, and request an account to be opened in the name(s) set forth below. 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 and 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 agencies 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 non-deposit investments purchased through TD Ameritrade are not insured by the 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.

### 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.

If this is a Joint account, all Account Owners must sign. If you wish to trade options in your account, complete the Options Account section.

If an options account has been requested, I agree to abide by the rules of the listed options exchanges and the Options Clearing Corporation, and will not violate current position and exercise limits. I have received and read the Client Agreement that will govern my account, and agree to be bound by it as currently in effect and as amended from time to time. I am aware of the risks involved in options trading and represent that I am financially able to bear such risks and withstand options-trading losses.

I hereby attest that I have attained the UTMA/UGMA Age of Termination for the state in which the UTMA/UGMA was established, the custodianship has therefore terminated, and I have present and absolute interest in and to all assets of the account.

#### 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.

Jigirricic	
Original	
signatures	

Sian Hara

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

Account Owner's Signature:	Account Co-Owner's Signature:			
Date:	Date:			

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

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# **Investment Objectives Definitions**

**Conservation:** Reflects your desire to seek very low risk and minimize potential loss of principal. You may seek income from your investments while understanding that returns may not keep pace with inflation. You may also intend to invest over a short period of time.

**Moderate:** Reflects your desire to seek lower risk and fluctuation in your portfolio, while striving to achieve more stable returns on your investments. It may also mean that you plan to invest over a short period of time.

**Moderate growth:** Reflects your desire to seek growth in your portfolio by typically using a balance of growth and conservative investment types. It may also mean that you are moderately tolerant of risk and plan to invest for a medium to long period of time.

**Growth:** Reflects your desire to seek the potential for investment growth, as well as your tolerance for more significant market fluctuations and risk of loss. It may also mean that you plan to invest over a long period of time.

**Aggressive Growth:** Reflects your desire for potentially substantial investment growth, as well as your tolerance for large market fluctuations and increased risk of loss. It may also mean that you plan to invest over a long period of time.

# **Options Objectives Definitions**

**Growth:** Investors are seeking the potential for investment growth and have a tolerance for more significant market fluctuations and risk of loss.

**Speculation:** Investors are seeking short-term market gains that generally have above average, maximum risk, but offer the potential for short-term, maximum gains. These strategies also have the potential for significant losses and investors understand they could lose most, or all, of the money they have invested.

**Income:** Investors are seeking income with a modest degree of risk. These investors are typically willing to accept lower potential returns in exchange for lower risk and volatility, and understand their returns may not keep pace with inflation.

Conservation of Capital: Investors are seeking to avoid risk and minimize potential loss of principal.

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### **Occupation Codes**

Occi	ipation codes				
	Accountant/Auditor/Bookkeeper		Compliance/Regulatory Professional		Nurse
	Adjuster		Consultant		Office Associate
	Advertiser/Marketer/PR Professional		Counselor/Therapist	021	Other; If Other, include a description
A33	Air Traffic Controller	C53	Customer Service Representative		in the Occupation box.
A43	Ambassador/Consulate Professional	D11	Dealer	P81	Pharmacist
A53	Analyst	D61	Dentist	P91	Physical Therapist
A63	Appraiser	D31	Distributor	P22	Pilot
A73	Architect/Designer	D41	Doctor/Surgeon/Physician	P32	Police Officer/Firefighter/
A83	Artist/Performer/Actor/Dancer	D51	Driver		Law Enforcement Professional
A93	Assistant/Executive Assistant	E51	Engineer	P42	Politician
A44	Athlete	E71	Exterminator	P52	Project Manager
A64	Attorney/Judge/Legal Professional	F71	Factory/Warehouse Worker	R81	Real Estate Professional
A74	Auctioneer	F81	Farmer/Rancher	R71	Researcher
L51	Banker/Lending Professional	F91	Financial Planner/Advisor	S41	Salesperson
B21	Barber/Beautician/Hairstylist	F22	Flight Attendant	S51	Scientist
B31	Broker/Registered Rep	F32	Human Resources Professional	S61	Seamstress/Tailor
B41	Business Executive (VP, Director, etc.)	141	Importer/Exporter	S71	Security Guard
B51	Business Owner	151	Inspector/Investigator	S81	Social Worker
C81	Caregiver	181	Investor	T41	Teacher/Professor
C91	Carpenter/Construction Worker/	191	IT Professional/IT Associate	T51	Technician
	Contractor	J31	Janitor	T61	Teller
C22	Cashier	J41	Jeweler	T71	Tradesperson/Craftsperson
C32	Chef/Cook	L31	Laborer	T81	Trainer/Instructor
C42	Chiropractor	L41	Landscaper	U21	Underwriter
C52	Civil Servant	M91	Mechanic	V11	Veterinarian
C62	Clergy	M22	Military, Officer or Associated	W21	Writer/Journalist/Editor
C72	Clerk		Mortician/Funeral Director		

### **Industry of Occupation Codes**

IIIuu	istry of Occupation Codes				
	Accounting	F11	Fashion/Clothing Financial Services	031	Other; If Other, include a description
A21	3.	F21		D4.4	in the Industry of Occupation box
A31		F51	Firearms and Explosives	P11	Parking and Car Washes
A41	<i>.</i> ,	G11	3	P21	Pawn Shops/Brokers
A51	Amusement and Recreation	G21	Government/Public Administration	P31	Personal Care/Hygiene (Beauty,
A61	Animal Services and Veterinary	G31	Grocery/Supermarket		Salon, Cosmetics, Massage, etc.)
A71	Architecture/Design	H11	Healthcare/Medical Services	P41	Pharmaceuticals
A81	Arts/Antiques	H21	Hotel/Hospitality	P51	Printing/Publishing
A91	Athletics/Fitness	111	Import/Export	P71	Professional/Civic Organizations
A32	Automotive	121	Information Technology (IT)		(Non-Retail)
B11	Aviation	131	Insurance	R11	Real Estate
C11	Bar/Nightclub/Adult Entertainment Club	J11	Jewelry, Gems, and Precious Metals	R21	Religious Organization
C21	Childcare	L11	Legal Services/Public Safety	R31	Repair Services - Home, Auto,
C31	Cleaning/Janitorial/Housekeeping	L21	Logistics/Supply Chain		and Other
C41	Communications/Telecommunications	M11	Manufacturing	R41	Restaurant/Food Service
C51	Construction/Carpentry/Landscaping	M21	Maritime	R51	Retail Sales/Retail Trade
C61	Convenience Store/Liquor Store/	M31	Media/Entertainment	S11	Science and Biotechnology
	Gas Station	M41	Mining, Oil, and Gas	S21	Security
C71	Customer Service and Support		Money Services Businesses (Check	T11	Transportation
E11	Education		Cashing, Money Transmitting, Payday	T31	Travel
E21	Embassy/Consulate		Loans, Currency Exchange)	U11	Utilities (Public)
E31	Energy	N11	Non-Profit/NGO (Non-Government		Wholesale Sales/Trade
E41	Engineering		Agency)/Charity	.,	
	Linginicating		Agency // Chartey		

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