Account Number



# **Account Update**

# **Return Instructions:**

New Accounts:

Email: newaccounts@siebert.com

Phone: 800.872.0444 Fax: 212.486.2784 **Employee Stock Plan Clients:** 

Email: shareplansupport@siebert.com

Phone: 800.993.2015 Fax: 402.342.2486

Account Type

Individual	Employee Stock Option	Traditional IRA	SEP IRA
Joint Account	Corporate Partnership	Rollover IRA	Money Purchase Pension
Custodial (UGMA/UTMA)	Investment Club	Roth IRA	Profit Sharing
Trust Account	Estate/Fiduciary Account	Inherited IRA	Defined Benefit Plan
TOD (Transfer on Death)	Coverdell Education	SIMPLE IRA	Individual 401k

### **Account Owner Information**

An account cannot be established without a per	An account cannot be established without a permanent home address, P.O. Boxes are not acceptable. However, you may designate a P.O. Box for mailing purposes.							
Name/Account Title								
Social Security Number/Tax ID	DOB		Email Address					
Home Address	,		City	S	State	Zip	Country	
Home Phone		Work Phone	·	C	Cell Phone			
Mailing Address (Check if same as above)			City	S	State	Zip	Country	
Check here if you WANT paperless confirms & statements  * You will be charged a \$2.00 statement fee per month if you opt to receive paper statements through the mail.								

# Are you a US Citizen?

Yes (enter Driver's License #):	_	
No (complete below)		
Passport# or National I.D # (non-US citizens AND US citizens with	out a US address):	
Country of Citizenship	Resident Alien	Non-Resident Alien (Attach a W-8 Form)

Employment: Student Unemployed

Employed (specify field of occupation)			Retired (specify field of former occupation)			
Employer		ID (if applica	able)			
2piojoi		is (ii applied	22.07			
Employer Address	City	State	Zip	Country		

# **Principal Approval**

Approved:	Date:

Secondary Account Owner Information									
An account cannot be established without a pe	An account cannot be established without a permanent home address, P.O. Boxes are not acceptable. However, you may designate a P.O. Box for mailing purposes.								
Name/Account Title									
Social Security Number/Tax ID	DOB		Email Address						
Home Address		City		State	Zip		Country		
Home Phone	Wor	k Phone				Cell Phor	ne		
Mailing Address (Check if same as above)		City		State	Zip		Country		
Check here if you WANT paperless confirms & statements  * You will be charged a \$2.00 statement fee per month if you opt to receive paper statements through the mail.									

	Are	you	а	US	Citizen?
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Yes (enter Driver's License #):	<u></u>			
No (complete below)				
Passport# or National I.D # (non-US citizens AND US citizens with	itizens without a US address):			
Country of Citizenship	Resident Alien	Non-Resident Alien (Attach a W-8 Form)		

Employment:		Student	Ur	nemployed		
Employed (specify field of occupation)			Retired (specify field of former occupation)			
Employer		ID (if applicable)				
Employer Address	City	State	Zip	Country		

# **Investor Background Questions**

Are you employed by a registered brok	er-dealer, securit	ies exchange and/	or FINRA?				
Account Holder:	No	Yes	Joint Tenant:	No	Yes		
Have you ever filed for protection from	creditors under	bankruptcy law?					
Account Holder:	No	Yes (spe	ecify)				
Joint Tenant/Custodian:	No	Yes (spe	ecify)				
Are you an officer, director, or 10% shar	Are you an officer, director, or 10% shareholder of a publicly traded company?						
Account Holder:	No	Yes	Joint Tenant:	No	Yes		
Company							
Are you a "large trader" as defines by S	SEC Rule 13h-1?						
Account Holder:	No	Yes (List	Yes (List your large trader ID)				
Joint Tenant/Custodian:	No	Yes (List	your large trader ID)				

#### Beneficiary Information This section is only for Retirement Accounts or Transfer on Death Accounts

PLEASE NOTE: If you are located in a community or and intend to select an individual other than your spouse someone other than your spouse as your primary beneficiary, please complete the spousal consent form on www.siebert.com. There are nine community property states: Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington and Wisconsin. Alaska is an opt-in property state that gives both parties the option to make their property community property.

Duine out	Danafiai	am/iaal
Primary	benenci	ary(ies)

Relationship:	Spouse	Tr	ust Estate	Charity of	or other Entity	Person or I	Non-Spouse Entity	
First Name		MI.I.	Last Name		Social Security Numbe	er/ lax ID	DOB	Percentage %
Relationship:	Spouse	Tr M.I.	Last Name	Charity	or other Entity		Non-Spouse Entity	Parantaga %
First Name		M.I.	Last Name		Social Security Numbe	er/Tax ID	DOB	Percentage %
Relationship:	Spouse	Tr	ust Estate	Charity	or other Entity	Person or I	⊥ Non-Spouse Entity	
Tilstivanie		IVI.I.	Last Name		Social Security Number	II/ IdX ID	DOB	l'elcentage x
First Name	•	M.I.	Last Name		Social Security Numbe	or/Tay ID	DOB	Percentage %
Relationship:	Spouse	Tr	ust Estate	Charity	or other Entity	Person or I	Non-Spouse Entity	<u> </u>
First Name		M.I.	Last Name		Social Security Numbe	er/Tax ID	DOB	Percentage %
If more than one Primary	Beneficiary is liste	ed, make sure	percentage is noted.					

## Contingent Beneficiary(ies)

				, , , , , ,			
First Name	M	I.I. Last N	ame	Social Security Numb	er/Tax ID	DOB	Percentage %
Relationship:	Spouse	Trust	Estate	Charity or other Entity	Person or	Non-Spouse E	ntity
First Name	M	I.I. Last N	ame	Social Security Numb	er/Tax ID	DOB	Percentage %
Relationship:	Spouse	Trust	Estate	Charity or other Entity	Person or	Non-Spouse E	ntity
First Name	M	I.I. Last N	ame	Social Security Numb	er/Tax ID	DOB	Percentage %
Relationship:	Spouse	Trust	Estate	Charity or other Entity	Person or	Non-Spouse E	ntity
First Name	M	I.I. Last N	ame	Social Security Numb	er/Tax ID	DOB	Percentage %
Replaces Primary Benefic	ciary if Primary Benefi	ciaries predecease	the Contingent B	eneficiaries			

## **Siebert Account Agreements**

CUSTOMER AGREEMENT - I hereby request that Muriel Siebert & Co., Inc., open an account under the registration listed on this application. I understand that securities prices may fluctuate and that all securities investments carry risk to varying degrees. I also understand the risks of the transactions that I intend to execute in this account, and I have determined that I am able to bear these risks. I have received and read the Siebert Customer Agreement and I agree to be bound by its terms.

And conditions as they apply to my account, and as they may be amended from time to time. I understand that you will supply my name to issuers of any securities held in my account(s) so I may receive any important information regarding them, unless I notify you in writing not to do so If I have not yet received a copy of the Agreement, I will notify Siebert, and will not place any order in my account until I have received and read the Agreement. The following is a request for certification of the Taxpayer Identification Number or Social Security Number that I wrote above. The Internal Revenue Services requires this certification to avoid Backup withholding on dividends, interest, and liquidations. The IRS requirements apply to this certification only, and not to the rest of this application. Under penalty of perjury, I certify that: 1) the number listed on this application is the correct Taxpayer Identification Number or Social Security Number and 2) I am not subject to backup withholding, either because I have not been notified of backup withholding as a result of failure to report all interest or dividends, or the Internal Revenue Service has notified me that I am no longer subject to backup withholding (NOTE: If you have been notified by the Internal Revenue Service that you are subject to backup withholding as a result of failure to report all interest or dividends, cross out this section #2.)

RETIREMENT AND COVERDELL ACCOUNTS - I agree to abide by the terms of the plan documents of Muriel Siebert & Co., Inc. and/or Equity Trust Company. I acknowledge that I have received the Retirement Application Booklet and have completed all of the necessary paperwork to establish the plan. I agree to and acknowledge that I have read and understand the application and documents contained within the Muriel Siebert & Co., Inc. and/or Equity Trust Company booklet I understand that Siebert may access my Credit Report through a credit report service company I have read and understand the Pre-Dispute Arbitration Clause that is set forth in Section 33 of the Customer Agreement. I have read and understand the Customer Agreement and agree to the terms. All owners please Sign and Date.

I have received and read the investment services and advice Form CRS prior to account opening and understand the information that has been provided. I authorize you to contact me for discussion and/or review of my investment decisions and positions and funds held in my account.

Signature	Date
Signature Signature	
Signature	Date
Signature	



# Suitability Information FINRA RULE 2111 REQUIREMENT

## **Return Instructions:**

#### New Accounts:

Email: newaccounts@siebert.com Phone: 800.872.0444 Fax: 212.486.2784

#### **Employee Stock Plan Clients:**

Email: shareplansupport@siebert.com Phone: 800.993.2015 Fax: 402.342.2486

#### Please Note:

This information is required to open/update an account and is confidential. (Please see the Customer Agreement and the Definitions section below for explanations)

Financial Profile (For Joint Accounts, use combined total when applicable below.)

Name/Account Title		Account Number: (	if known)	Social Security Number/Tax ID
Annual Income (from all so	urces)			
Under \$25,000	\$25,000-\$50,000	\$50,001-\$100,000	Over \$100,0	000 specify: \$
Estimated Net Worth (E	xcluding primary residence)			
Under \$50,000	\$50,000-\$100,000	\$100,001-\$500,000	Over \$500,0	000 specify: \$
Liquid Net Worth (Includi	ng cash & marketable securities)			
Under \$50,000	\$50,000-\$100,000	\$100,001-\$500,000	Over \$500,0	000 specify: \$
Fed Tax Bracket				
10%-15%	16%-27%	28%-33%	Over 33%	
Marital Status				
Widowed	Divorced	Single	Married/Leg	gal Domestic Partnership
Account Funding Source	e (from all sources)			
Asset Appreciation	Business Revenue	Inheritance	Legal/Insura	nce Settlement
Sale of Assets	Savings from Earnings	Other:		
Annual Expenses (Recurrir	ng)			
Under \$50,000 \$50	0,000-\$100,000 \$100,001-\$2	250,000 \$250,001-\$500,000	Over \$500,0	000 specify: \$
Special Expenses (Future 8	& non-recurring)			
Under \$50,000	\$50,000-\$100,000	\$100,001-\$250,000	Over \$250,0	000 specify: \$
Time Frame (Req. for Specia	al Expenses)			
Within 2 years	3-5 years	6-10 years	Long Term	
Dependents				
0	1	2	3+	

Decision Making Experience (check all that apply)

- 0							
	I consult with my	/ broker	I make my own	decisions	I consult with n	ny family/friends	Additional Information:
	Yes	No	Yes	No	Yes	No	

Assets Held Away								
(Provide total value of assets held away and percentages for each type of asset Total percentages must equal 100%.)								
Total value of assets held away: \$								
Stocks	Bonds	Annuities	Mutual Funds	Alternative Investments				
Short-Term	Foreign Security	Options	Variable Contracts	Limited Partnerships				
Security Futures	Foreign Currency	Other	Total	_				

#### **Investment Profile**

Investment Objectives				
	tance 1-4 (See definitions belo			
Principal Protection	Income	Growth	Speculation	_
Investment Purpose				
Save for Education	Save for Retirement	Save for short term goal(s)	Generate Income	
Accumulate Wealth	Preserve Wealth	Market Speculation	Other:	
Risk Tolerance (see definiti	ons below)			
Moderate	Moderately Conservative	Conservative	Moderately Aggressive	Aggressive
Investment Time Horizon	see definitions below)			
Near Term	Very Short	Short	Intermediate	Long
General Investment Knowl	edge			
Limited	Good	Extensive		
Investment Experience				
0-5 yrs	5-10 yrs	10-20 yrs	20+ yrs	

#### **Definitions**

#### **Investment Objectives**

Your investment goal(s) based on your risk tolerance and time horizon.

- Protection of Principal: Relatively lower risk investments with the goal of preserving the money invested
- $\bullet \;\;$  Income: Investments with regular payments of interests, dividends or other income
- Growth: Investments with a history of future potential for capital gains, but with a higher risk of loss
- Speculation: Investments with the possibility of large profits, but also pose a higher than average possibility of loss

#### Risk Tolerance:

The degree of uncertainty that you can handle in regard to a negative change in the value of your portfolio.

- Conservative: willing to forego upside potential to avoid downside fluctuations
- Moderately Conservative: adverse to large short-term downside fluctuations, seek more return with a little less income

- Moderate: generally investing for the long term, with a mix of asset classes; willing to
  accept some risk for long term good return with investments that may go up less than
  the markets as a whole, but should also go down less when markets decline
- Moderately Aggressive: willing to take on more downside risk than the markets in order to achieve long term performance better than the markets. More emphasis on making money than on preventing loss
- Aggressive: looking to substantially outperform the market and willing to accept significant risk (losses of 40% or more in a quarter) to do so. No emphasis on preventing loss

#### Investment Time Horizon

The total length of time that you expect to hold a security or portfolio.

- Near term: immediate liquidity
- Very short: six months
- Intermediate: three to ten years
- Long: greater than ten years

## **Suitability Agreement**

I certify that the suitability selections above are true to the best of my knowledge and may be used to by Muriel Siebert & Co., Inc. to determine my income needs and desired risk exposure, which is used to aid in security selection. I understand that I must update my suitability information with Muriel Siebert & Co., Inc. if any changes occur.

Signature	Date
Signature	
Signature	Date
Signature	

## **Principal Approval**

Approved	Date