

## ABOUT THIS APPLICATION

This is a Retail Brokerage Account Application.

Please read it carefully, as you will select products and services, tell us how you want to communicate with us, and agree to certain provisions that will govern our relationship. When we accept it, this Application and all accompanying or supplemental documents form the entire Agreement between us for this account.

Unless otherwise indicated in this Application, the words “you,” “your,” “yourself,” and “yours” mean the applicant(s). The words “we,” “us,” and “our” mean PetersonBrown Group, our branches, subsidiaries, and affiliates.

## GETTING STARTED

Please complete and sign this Application, along with any required supplemental forms identified through this application process.

In order to complete this Application, you will need some or all of the following information:

- Identification information, such as a driver’s license, passport, or another type of government-issued identification
- Information about your annual income, debt, expenses, and net worth
- Back-up contact information
- **The Items in RED are required fields. Please make sure you provide the information for those items.**

The above information helps us comply with various securities regulations and rules and the USA PATRIOT Act, a Federal law that requires all securities firms to obtain, verify, and record information that identifies each applicant. The information also helps us more fully understand your investment profile and identify what types of investments or strategies may be suitable for you. Please note: if we cannot verify the information you provide, we may be required to restrict or deny your account.

Please remember to notify us if you experience a significant life change, such as the birth of a child, marriage, divorce, death of a spouse, loss of a job, change in financial situation, etc.

## YOUR ACCOUNT

### ACCOUNT TYPE

Do you have other accounts with us?  Yes  No

Initial Transaction Type:  Buy  Sell  ACAT

Details:

Amount:

## ABOUT YOURSELF

### TITLE AND NAME

Title:     Mr.    Ms.    Mrs.    Dr.    Other: \_\_\_\_\_      Suffix:    Sr.    Jr.    Other: \_\_\_\_\_

First Name

Middle Name

Last Name

### ADDRESS AND CONTACT INFORMATION

Apt/Suite No.

Bldg

Street

City

State

Zip Code

Country

Home Phone

Mobile Phone

Work Phone

Email

Please check if you have been at your current address for less than one year.

### MAILING ADDRESS IF DIFFERENT FROM ABOVE

Apt/Suite No.

Bldg

Street

City

State

Zip Code

Country

### CIVIL STATUS AND DEPENDENTS

Single    Married    Domestic Partner    Divorced    Widowed

No. of Dependents

### EMPLOYMENT STATUS

Employed     Self-Employed     Not Employed     Retired     Student    Other: \_\_\_\_\_

Job Title

Occupation

Employer

Years with this Employer

### BUSINESS ADDRESS

Apt/Suite No.

Bldg

Street

City

State

Zip Code

Country

## INDUSTRY AND OTHER AFFILIATIONS

Are you, your spouse, or any other immediate family members, including parents, in-laws, siblings and dependents:

<input type="checkbox"/> Yes <input type="checkbox"/> No	<p>Employed by or associated with the securities industry (for example, a sole proprietor, partner, officer, director, branch manager, registered representative or other associated person of a broker-dealer firm) or a financial services regulator?</p> <p>If yes, 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).</p> <p> <input type="checkbox"/> Broker-Dealer or Municipal Securities Dealer     <input type="checkbox"/> Investment Advisor  <input type="checkbox"/> FINRA or other Self Regulatory Organization*     <input type="checkbox"/> State or Federal Securities Regulator         </p> <p>(*Including a national securities exchange, registered securities association, registered clearing agency or the Municipal Securities Rulemaking Board.)</p> <p>Name of entity(ies): _____</p>
<input type="checkbox"/> Yes <input type="checkbox"/> No	<p>An officer, director or 10% (or more) shareholder in a publicly-owned company?</p> <p>Name of company and symbol: _____</p>
<input type="checkbox"/> Yes <input type="checkbox"/> No	<p>A senior military, governmental or political official in a non-US country?</p> <p>Name of country: _____</p>

## FINANCIAL SITUATION AND NEEDS, LIQUIDITY CONSIDERATIONS, AND TAX STATUS (PLEASE TELL US YOUR ESTIMATES)

ANNUAL INCOME <sup>1</sup> (from all sources)	NET WORTH <sup>2</sup> (excluding your residence)	LIQUID NET WORTH	TAX RATE (highest marginal)
<input type="checkbox"/> \$25,000 and under <input type="checkbox"/> \$25,001-50,000 <input type="checkbox"/> \$50,001-100,000 <input type="checkbox"/> \$100,001-250,000 <input type="checkbox"/> \$250,001-500,000 <input type="checkbox"/> Over \$500,000	<input type="checkbox"/> \$25,000 and under <input type="checkbox"/> \$25,001-50,000 <input type="checkbox"/> \$50,001-200,000 <input type="checkbox"/> \$200,001-500,000 <input type="checkbox"/> \$500,001-1,000,000 <input type="checkbox"/> \$1,000,001-3,000,000 <input type="checkbox"/> Over \$3,000,000	<input type="checkbox"/> \$25,000 and under <input type="checkbox"/> \$25,001-50,000 <input type="checkbox"/> \$50,001-200,000 <input type="checkbox"/> \$200,001-500,000 <input type="checkbox"/> \$500,001-1,000,000 <input type="checkbox"/> \$1,000,001-3,000,000 <input type="checkbox"/> Over \$3,000,000	<input type="checkbox"/> 0-15% <input type="checkbox"/> 16-25% <input type="checkbox"/> 26-30% <input type="checkbox"/> 31-35% <input type="checkbox"/> Over 35%
ANNUAL EXPENSES <sup>4</sup> (recurring)	SPECIAL EXPENSES <sup>5</sup> (future, non-recurring)	LIQUIDITY NEEDS	
<input type="checkbox"/> \$50,000 and under <input type="checkbox"/> \$50,001-100,000 <input type="checkbox"/> \$100,001-250,000 <input type="checkbox"/> \$250,001-500,000 <input type="checkbox"/> Over \$500,000	<input type="checkbox"/> \$50,000 and under <input type="checkbox"/> \$50,001-100,000 <input type="checkbox"/> \$100,001-250,000 <input type="checkbox"/> \$250,001-500,000 <input type="checkbox"/> Over \$500,000  Timeframe for special expenses: <input type="checkbox"/> Within 2 years <input type="checkbox"/> 3-5 years <input type="checkbox"/> 6-10 years	<p>The ability to quickly and easily convert to cash all or a portion of the investments in this account without experiencing significant loss in value from, for example, the lack of a ready market, or incurring significant costs or penalties is (check one)</p> <p> <input type="checkbox"/> Very important  <input type="checkbox"/> Important  <input type="checkbox"/> Somewhat important  <input type="checkbox"/> Does not matter         </p>	

<sup>1</sup> **Annual income** includes income from sources such as employment, alimony, social security, investment income, etc.

<sup>2</sup> **Net worth** is the value of your assets minus your liabilities. For purposes of this application, assets include stocks, bonds, mutual funds, other securities, bank accounts, and other personal property. Do not include your primary residence among your assets. For liabilities, include any outstanding loans, credit card balances, taxes, etc. Do not include your mortgage.

<sup>3</sup> **Liquid net worth** is your net worth minus assets that cannot be converted quickly and easily into cash, such as real estate, business equity, personal property and automobiles, expected inheritances, assets earmarked for other purposes, and investments or accounts subject to substantial penalties if they were sold or if assets were withdrawn from them.

<sup>4</sup> **Annual expenses** might include mortgage payments, rent, long-term debts, utilities, alimony or child support payments, etc.

<sup>5</sup> **Special expenses** might include a home purchase, remodeling a home, a car purchase, education, medical expenses, etc.

## INVESTMENT RISK TOLERANCE

Investing involves risk. Different investment products and strategies involve different degrees of risk. The higher the expected returns of a product or strategy the greater the risk that you could lose most of your investment. Investments should be chosen based on your objectives, timeframe, and tolerance for market fluctuations.

Please select the degree of risk you are willing to take with the assets in this account.

- Conservative.** I want to preserve my initial principal in this account, with minimal risk, even if that means this account does not generate significant income or returns and may not keep pace with inflation.
- Moderately Conservative.** I am willing to accept low risk to my initial principal, including low volatility, to seek a modest level of portfolio returns.
- Moderate.** I am willing to accept some risk to my initial principal and tolerate some volatility to seek higher returns, and understand I could lose a portion of the money invested.
- Moderately Aggressive.** I am willing to accept high risk to my initial principal, including high volatility, to seek high returns over time, and understand I could lose a substantial amount of the money invested.
- Significant Risk.** I am willing to accept maximum risk to my initial principal to aggressively seek maximum returns, and understand I could lose most, or all, of the money invested.

## FINANCIAL INVESTMENT EXPERIENCE

We are collecting the information below to better understand your investment experience. We recognize your responses may change over time as you work with us. Please check the boxes that best describe your investment experience to date.

Investment	Years experience			Transactions per year (excluding automatic investments)		
<input type="checkbox"/> Mutual Funds/Exchange Traded Funds	<input type="checkbox"/> 0	<input type="checkbox"/> 1-5 yrs.	<input type="checkbox"/> Over 5 yrs.	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-15	<input type="checkbox"/> Over 15
<input type="checkbox"/> Individual Stocks	<input type="checkbox"/> 0	<input type="checkbox"/> 1-5 yrs.	<input type="checkbox"/> Over 5 yrs.	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-15	<input type="checkbox"/> Over 15
<input type="checkbox"/> Bonds	<input type="checkbox"/> 0	<input type="checkbox"/> 1-5 yrs.	<input type="checkbox"/> Over 5 yrs.	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-15	<input type="checkbox"/> Over 15
<input type="checkbox"/> Options	<input type="checkbox"/> 0	<input type="checkbox"/> 1-5 yrs.	<input type="checkbox"/> Over 5 yrs.	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-15	<input type="checkbox"/> Over 15
<input type="checkbox"/> Securities Futures	<input type="checkbox"/> 0	<input type="checkbox"/> 1-5 yrs.	<input type="checkbox"/> Over 5 yrs.	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-15	<input type="checkbox"/> Over 15
<input type="checkbox"/> Annuities	<input type="checkbox"/> 0	<input type="checkbox"/> 1-5 yrs.	<input type="checkbox"/> Over 5 yrs.	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-15	<input type="checkbox"/> Over 15
<input type="checkbox"/> Alternative <sup>6</sup>	<input type="checkbox"/> 0	<input type="checkbox"/> 1-5 yrs.	<input type="checkbox"/> Over 5 yrs.	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-15	<input type="checkbox"/> Over 15
<input type="checkbox"/> Margin	<input type="checkbox"/> 0	<input type="checkbox"/> 1-5 yrs.	<input type="checkbox"/> Over 5 yrs.	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-15	<input type="checkbox"/> Over 15

<sup>6</sup> May include structured products, hedge funds, etc.

## DECISION-MAKING (CHECK ALL THAT APPLY)

- I consult with my broker, investment advisor, CPA, or other financial professional.
- I generally make my own decisions.
- I discuss investment decisions with family and/or friends.

**OTHER INVESTMENTS**

Please provide us with additional information about your other investments to help us more fully understand your investment profile and identify what types of investments or strategies may be suitable for you.

Investment Type / Description	Firm Holding Investment	Amount (US\$)
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$

(use additional space as needed)

## HOW YOU INTEND TO USE THIS ACCOUNT

The more we know about you and your goals for this account, the better we can serve you. Please answer the following questions about your investment objectives and investment time horizon to help us determine which investment products and strategies are suitable for you.

### INVESTMENT OBJECTIVES AND INVESTMENT TIME HORIZON

The investments in this account will be (check one):

- Less than 1/3 of my financial portfolio
- Roughly 1/3 to 2/3 of my financial portfolio
- More than 2/3 of my financial portfolio

I plan to use this account for the following (check all that apply):

- Generate income for current or future expenses
- Partially fund my retirement
- Wholly fund my retirement
- Steadily accumulate wealth over the long term
- Preserve wealth and pass it on to my heirs
- Pay for education
- Pay for a house
- Market speculation
- Other: \_\_\_\_\_

The expected period of time you plan to invest to achieve your financial goal(s):

- Under 1 year
- 1-2 years
- 3-5 years
- 6-10 years
- 11-20 years
- Over 20 years

### OTHER INFORMATION

Please provide us with any additional information not requested above that you believe will help us more fully understand your investment profile and identify what types of investments or strategies may be suitable for you.

## TELL US HOW YOU WILL FUND THIS ACCOUNT (CHECK ALL THAT APPLY)

- Income
- Pension or retirement savings
- Funds from another account
- Gift
- Sale of business or property
- Insurance payout
- Inheritance
- Social Security benefits
- Home Equity Line of Credit/Reverse Mortgage
- Other: \_\_\_\_\_

## TELL US HOW YOU WANT TO WORK WITH US

### ACCOUNT FEATURES

**Please note:** You may change your account features and options at any time, with advance written notice to us.

### BORROWING MONEY TO BUY SECURITIES (BUYING "ON MARGIN") PLEASE READ CAREFULLY

You will have a "cash account," unless you choose to have a "margin loan account" (customarily known as a "margin account"). To help you decide whether a margin loan account is right for you, please read this information, the Margin Loan Agreement and the Margin Disclosure Statement.

In a cash account, you pay for your securities in full by the settlement date of the purchase (generally three business days from the purchase). In a margin loan account, we may lend you a portion of the purchase price. This is called buying securities "on margin." For example, when you buy equity securities (such as common stock) on margin, you typically must deposit at least 50% of the purchase price, and we would loan you the balance. **You are liable for repaying the borrowed funds and the interest incurred.**

If you borrow funds in your margin loan account and the value of your holdings declines below the firm's and/or regulatory maintenance margin requirement, you may be subject to a "margin call." This means that we can either (1) require you to deposit additional cash or margin-eligible securities to your account immediately, or (2) sell **any** of the securities in your account to cover any shortfall, **without informing you in advance.** We will decide which of your securities to sell. **Even if we notify you that you have a certain number of days to cover the shortfall, we may still sell your securities before that timeframe expires.** Further, we may increase at any time the level of equity that you must maintain in your margin account without triggering a margin call.

We have the right to lend shares held in your margin loan account to others. This should not impede your ability to sell these shares, but may cause you to lose voting rights and the right to preferred tax treatment on certain dividend payments.

### MANAGING YOUR CASH

Sometimes there is cash in your account that hasn't been invested. For example, you may have just deposited money into your account without giving instructions on how to invest it, or you may have received cash dividends or interest. We will automatically place—or "sweep"—that cash into one of the cash management programs listed below—also called "cash sweep programs." Cash management programs offer different benefits and risks, including different interest rates, customer protections and insurance coverage (namely, FDIC or SIPC coverage). Some may have certain eligibility criteria, such as minimum cash balances and specific account types.

Please choose one of the cash management programs listed below. You may instruct us to change your selected cash management program at any time to another, if you meet the eligibility criteria of the new cash management program. If you do not choose one, we will automatically place your un-invested cash into the default cash management program, which will be Money Market Deposit Account. We will give you advance notice of any change in your choice or of the options generally available to you.

#### Sales proceeds (check one):

- Mail check to the address of record
- Send directly to your bank account. Please provide bank name and account number: \_\_\_\_\_
- Sweep into Money-Market Fund
- Sweep into Money-Market Deposit Account

#### Dividends/interest (check one):

- Mail check to the address of record
- Send directly to your bank account. Please provide bank name and account number: \_\_\_\_\_
- Sweep into same investment as indicated at left
- Reinvest in the same security

## COMMUNICATIONS CHOICES

### COMMUNICATIONS OPTIONS

Unless you choose otherwise, we will use postal mail to send you any communications. As an alternative, you may choose to be notified by email when certain communications are available for you to access online. If you wish to be notified by email instead of receiving communications by postal mail, please select one of the options below:

- All communications** - I wish to be notified by email about the online availability of any communications, including trade confirmations, prospectuses, account statements, proxy materials, tax-related documents, and marketing and sales documents.
- All communications except trade confirmations, account statements, and tax-related documents** - I wish to be notified by email about the online availability of all communications except trade confirmations, account statements, and tax-related documents, which I still wish to receive by postal mail.
- All communications except tax-related documents** - I wish to be notified by email about the online availability of all communications except tax-related documents, which I still wish to receive by postal mail.

If you choose email for any communications, please tell us the email address we should use: \_\_\_\_\_

A copy of PetersonBrown Group privacy policy will be provided to you along with this Application.

### POSTAL MAIL OPTIONS (IF YOU REQUESTED POSTAL MAIL DELIVERY IN THE PREVIOUS SECTION)

By checking the boxes below, you request that all communications for the applicants listed on this Application be delivered to the following single postal mailing address:

- Primary Applicant's Mailing Address
- Other. Please specify: \_\_\_\_\_

### BACK-UP CONTACT INFORMATION (OPTIONAL)

Please send duplicate copies of the following documents to the person listed below:  
All Communications Trade Confirmations, Account Statements, and Tax-Related Documents Only

Title: <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Dr. <input type="checkbox"/> Other: _____				Suffix: <input type="checkbox"/> Sr. <input type="checkbox"/> Jr. <input type="checkbox"/> Other: _____	
First Name		Middle Name		Last Name	
Apt/Suite No.	Bldg			Street	
City		State	Zip Code		Country
Relationship to Primary Applicant: _____					



## REVIEW AND SUBMIT THIS APPLICATION

### CONFIRMATIONS AND SIGNATURES (PLEASE READ CAREFULLY)

By signing this Application, you affirm that you have received and read this Application and any supplemental documents governing this relationship. You affirm that the information you have provided is accurate and you agree to notify us of any changes in the information provided.

#### Applicant Confirmation (Please Check box)

**Non-Resident Alien:** I certify that I am not a U.S. citizen, U.S. resident alien, or other U.S. person for U.S. tax purposes, and I am submitting the applicable Form W-8 with this form to certify my foreign status and, if applicable, claim tax treaty benefits.

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

### SIGNATURES

Name of Primary Applicant (please print)

Signature of Primary Applicant

Date

Please email your completed application form to [accounts@petersonbrown.com](mailto:accounts@petersonbrown.com)