



Account Application

Account Number: _____

- New Account** (check one)
- Update**

Years Known: _____

1. Account Registration: (Check One):

- | | | | |
|-------------------------------------------|-----------------------------------------------------------------------------------------------|-----------------------------------------------|--------------------------------------|
| <input type="checkbox"/> Individual | <input type="checkbox"/> Joint Tenants with Rights of Survivorship | <input type="checkbox"/> Corporate* | <input type="checkbox"/> Non-Profit* |
| <input type="checkbox"/> Custodial | <input type="checkbox"/> Community Property | <input type="checkbox"/> Partnership* | <input type="checkbox"/> Trust* |
| <input type="checkbox"/> Investment Club* | <input type="checkbox"/> Pension/Profit Sharing Plan* | <input type="checkbox"/> Sole Proprietorship* | <input type="checkbox"/> Estate* |
| <input type="checkbox"/> IRA* | <input type="checkbox"/> Joint Tenants in Common (50%/50% unless otherwise noted ____% ____%) | <input type="checkbox"/> TOD | |

* Additional Paperwork May Be Required

2. Account Registration:

Full Legal Name: Individual/Corporation/Trust/IRA Trustee		Social Security Number	Date of Birth	
Full Legal Name: Co-Applicant/Minor/Trustees		Social Security Number	Date of Birth	
Home Address: (P.O. Box Unacceptable)	City	State	Zip	Length at Residence
Mailing Address (P.O. Box Acceptable)	City	State	Zip	
Daytime Phone	Evening Phone	E-mail Address	Bank Reference	

3. Customer Identification Program (CIP)

USA PATRIOT ACT – Important Information About Opening Or Updating An 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. When you open an account, we will require your name, address, date of birth, driver's license or other government issued identification number, and other information that will allow us to identify you.

For Individual Primary Applicant:

- Driver's License Passport/Visa Other _____

Issuer: _____ ID Number: _____

Date of Issuance: _____ Date of Expiration: _____

For Individual Co-Applicant:

- Driver's License Passport/Visa Other _____

Issuer: _____ ID Number: _____

Date of Issuance: _____ Date of Expiration: _____

For Entity Applicant: Must include copy of organizational documents listing appropriate trading authorization.

- Trust Agreement Articles of Incorporation Partnership Agreement Other _____

4. Investor Information

Marital Status: Single Married Divorced Widowed **Number of Dependents:** _____ **U.S. Citizen?** Yes No*

Employment Information: (Please specify if unemployed, retired, homemaker or student. If unemployed or retired please indicate your former occupation)

Employer (If self-employed, please specify name of business.) _____ Occupation or former Occupation _____

Length of current Employment _____ Employer Address _____ Phone Number _____

Co-Applicant's Employment Information: (Please specify if unemployed, retired, homemaker or student. If unemployed or retired please indicate your former occupation)

Employer (If self-employed, please specify name of business.) _____ Occupation or former Occupation _____

Length of Current Employment _____ Employer Address _____ Phone Number _____

*Additional identification and/or legal documents will be required.

No Self Family Member

Are you or a member of your immediate family an officer, director or 10% or shareholder in a publicly-owned company?

Are you or a member of your immediate family employed by or associated with the securities industry or a financial regulatory agency? If yes, please specify the entity name and address to which duplicate account mailings should be sent, and include a letter from your employer approving this account.

Name of Firm _____ Department/Contact _____ Address where duplicate statements are to be sent _____

Office Use Only: ACCT #: _____ CONS. ACCT #: _____ LAST NAME: _____ FIRST NAME: _____ REP NO: _____ REP LAST NAME: _____



4. Investor Information (Continued):

Investment Objectives (Check all that apply):

- Capital Preservation:** Investing in low-risk investments, such as government-issued bonds and certificates of deposit, resulting in relatively low current income and often little or no opportunity for capital appreciation.
- Income:** Focus is on generating current income, but with moderate risk of principal and little or no opportunity of capital appreciation.
- Growth:** Investing in securities designed to generate significant capital appreciation, which are subject to greater fluctuations in value (volatility), and offer little or no current income.
- Speculation:** Investing in securities with the hope of achieving exceptional capital appreciation, but whose value may fluctuate widely, and thus have a higher than average potential for loss of principal.

Risk Tolerance (Check only one)

- Low (Conservative):** I want to preserve my invested principal in this account, with minimal risk, even if that means this account does not generate significant income or capital appreciation and may not keep up with inflation.
- Moderate:** I am willing to accept some risk to my invested principal and tolerate some volatility to seek higher returns, and understand I could lose a portion or all of the money invested.
- High (Aggressive):** I am willing to accept high risk to my invested principal, including volatility, to seek higher than average returns over time, and understand I could lose all or a substantial amount of the money invested.

Financial Information – Primary Applicant:

Check Here If Co-Applicants Are Combining Financial Information

Investment Experience – Total Years	Estimated Annual Income	Estimated Net Worth ¹	Estimated Liquid Net Worth ²	Tax Bracket
Currently Own?	<input type="checkbox"/> Under \$25,000	<input type="checkbox"/> Under \$50,000	<input type="checkbox"/> Under \$50,000	<input type="checkbox"/> 10%
Stocks _____ <input type="checkbox"/>	<input type="checkbox"/> \$25,000 - \$49,000	<input type="checkbox"/> \$50,000 - \$99,000	<input type="checkbox"/> \$50,000 - \$99,000	<input type="checkbox"/> 15%
Bonds _____ <input type="checkbox"/>	<input type="checkbox"/> \$50,000 - \$74,000	<input type="checkbox"/> \$100,000 - \$149,000	<input type="checkbox"/> \$100,000 - \$149,000	<input type="checkbox"/> 25%
Mutual Funds _____ <input type="checkbox"/>	<input type="checkbox"/> \$75,000 - \$99,000	<input type="checkbox"/> \$150,000 - \$249,000	<input type="checkbox"/> \$150,000 - \$249,000	<input type="checkbox"/> 28%
Municipal Bonds _____ <input type="checkbox"/>	<input type="checkbox"/> \$100,000 - \$174,000	<input type="checkbox"/> \$250,000 - \$499,000	<input type="checkbox"/> \$250,000 - \$499,000	<input type="checkbox"/> 33%
Treasuries _____ <input type="checkbox"/>	<input type="checkbox"/> \$175,000 - \$249,000	<input type="checkbox"/> \$500,000 - \$749,000	<input type="checkbox"/> \$500,000 - \$749,000	<input type="checkbox"/> 35%
REITs _____ <input type="checkbox"/>	<input type="checkbox"/> \$250,000 - \$500,000	<input type="checkbox"/> \$750,000 - \$999,000	<input type="checkbox"/> \$750,000 - \$999,000	<input type="checkbox"/> 39.6%
Variable Annuities _____ <input type="checkbox"/>	<input type="checkbox"/> Over \$500,000	<input type="checkbox"/> \$1 million to \$2 million	<input type="checkbox"/> \$1 million to \$2 million	
Limited Partnerships _____ <input type="checkbox"/>		<input type="checkbox"/> Over \$2 million	<input type="checkbox"/> Over \$2 million	

Financial Information – Co-Applicant (If Applicable):

Investment Experience – Total Years	Estimated Annual Income	Estimated Net Worth ¹	Estimated Liquid Net Worth ²	Tax Bracket
Currently Own?	<input type="checkbox"/> Under \$25,000	<input type="checkbox"/> Under \$50,000	<input type="checkbox"/> Under \$50,000	<input type="checkbox"/> 10%
Stocks _____ <input type="checkbox"/>	<input type="checkbox"/> \$25,000 - \$49,000	<input type="checkbox"/> \$50,000 - \$99,000	<input type="checkbox"/> \$50,000 - \$99,000	<input type="checkbox"/> 15%
Bonds _____ <input type="checkbox"/>	<input type="checkbox"/> \$50,000 - \$74,000	<input type="checkbox"/> \$100,000 - \$149,000	<input type="checkbox"/> \$100,000 - \$149,000	<input type="checkbox"/> 25%
Mutual Funds _____ <input type="checkbox"/>	<input type="checkbox"/> \$75,000 - \$99,000	<input type="checkbox"/> \$150,000 - \$249,000	<input type="checkbox"/> \$150,000 - \$249,000	<input type="checkbox"/> 28%
Municipal Bonds _____ <input type="checkbox"/>	<input type="checkbox"/> \$100,000 - \$149,000	<input type="checkbox"/> \$250,000 - \$499,000	<input type="checkbox"/> \$250,000 - \$499,000	<input type="checkbox"/> 33%
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REITs _____ <input type="checkbox"/>	<input type="checkbox"/> \$250,000 - \$500,000	<input type="checkbox"/> \$750,000 - \$999,000	<input type="checkbox"/> \$750,000 - \$999,000	<input type="checkbox"/> 39.6%
Variable Annuities _____ <input type="checkbox"/>	<input type="checkbox"/> Over \$500,000	<input type="checkbox"/> \$1 million to \$2 million	<input type="checkbox"/> \$1 million to \$2 million	
Limited Partnerships _____ <input type="checkbox"/>		<input type="checkbox"/> Over \$2 million	<input type="checkbox"/> Over \$2 million	

Liquidity Needs -- In what time periods may you expect to need funds from your holdings? Check all that apply.

What is the amount you expect to need at that time?

- Under 3 years \$ _____
- 3-5 years \$ _____
- 6-10 years \$ _____
- 11-20 years \$ _____
- Over 20 years \$ _____
- Unknown \$ _____

5. Account Agreement (Please read and sign)

Certification of Taxpayer ID Number (Substitute W-9): Under penalty of perjury, you certify that (1) the number shown on this form is your correct taxpayer identification number and (2) you are not subject to backup withholding because (i) you are exempt from backup withholding, or (ii) you have not been notified by the Internal Revenue Service (IRS) that you are subject to backup withholding as a result of a failure to report all interest and dividends, or (iii) the IRS has notified you that you are no longer subject to backup withholding and (3) you are a U.S. person (including a U.S. resident alien).

Arbitration Agreement: The customer agrees, and by carrying an account for the customer, American Investors Group, Inc. agrees that all controversies which may arise between us concerning any transaction or the construction, performance, or breach of this or any other agreement between us pertaining to securities, whether entered into prior, on or subsequent to the date hereof, shall be determined by arbitration. Any arbitration under this agreement shall be conducted pursuant to the Federal Arbitration Act before the Financial Industry Regulatory Association, or FINRA, in accordance with the rules then prevailing at the organization. Both parties agree that (i) arbitration is final and binding on the parties. (ii) The parties are waiving their right to seek remedies in court, including the right to jury trial. (iii) Pre-arbitration discovery is generally more limited than and different from court proceedings. (iv) The arbitrators' award is not required to include factual findings or legal reasoning and the party's right to appeal or seek modification of rulings by the arbitrators is strictly limited. (v) The panel of arbitrators will typically include a minority of arbitrators who were or are affiliated with the securities industry.

X _____
Applicant's Signature

(Date)

X _____
Co-Applicant's Signature

(Date)

FOR BROKER USE ONLY

Rep Name: _____

Rep #: _____

X _____
Registered Representative Signature

(Date)

X _____
Principal's Signature

(Date)

Office Use Only: ACCT #: _____

CONS. ACCT #: _____

LAST NAME: _____

FIRST NAME: _____

REP NO. _____

REP LAST NAME: _____