

NEW ACCOUNT APPLICATION

Account #: _____ Rep Code: ____

ACCOUNT REGISTRATION

| 1. ACCOUNT REGISTRATION / OWNERSHIP Selectione | | | | | | | | | |
|--|--|--|---|---|--|--|--|--|--|
| Individual / Joint | | | | | | Retirement | | | |
| ☐ Individual | | | | | Traditiona | IIRA | Education | | |
| Joint tenants with rights of survivorship (JTWROS) | | | | | Rollover | | Ext. Custodian IRA | | |
| | | th of any of the undersigned, the entire in | | | SEP | | Profit Sharing Plan | | |
| | | e terms and conditions as previously held ed for in this Agreement. | a, without releasing the under | ersigned or their estates | = | l I | | | |
| l | | • | | | Simple | l | Pension Plan | | |
| | Joint tenants in com | ımon (JTIC) th of any of the undersigned, the interest | to in the tenancy chall be divis | idad aqually uplace | Beneficiar | У | | | |
| | otherwise specified bel | | .s in the tendricy shall be divid | ded equally utiless | Regular R | oth | | | |
| | , | | | | Rollover R | oth | | | |
| | | | | | Roth Conv | version | | | |
| | Name | | % share | | Roth Bene | ficiary | | | |
| | | | | | | | | | |
| | Name | | % share | | | | | | |
| | | | | | Decedent Name | if applicable) | Date of Death | | |
| | Name | | % share | | Other | | Business | | |
| | Nume | | 70 Share | | - Cilici | | | | |
| | | | | | Trust | | C-Corp | | |
| | Name | | % share | | Estate | | S-Corp | | |
| | Community Propert | ty | | | Municipali | ty | LLC | | |
| | Opened in the name of | f two legally married people, age 18 or c | | | (Investing | g bond proceeds) | Partnership | | |
| | | ada, New Mexico, Philippine Islands, Pue | rto Rico, Texas, Wisconsin, or | r Washington. | Municipali | | Sole Proprietorship | | |
| | Guardian / Custodia | an | | | (No bond | proceeds) | Non-Profit | | |
| | Non-US Individual | | | | Other: | | | | |
| | Non-US Joint | | | | | | Non-US Institution | | |
| Ш | Non-05 Joint | | | | | | | | |
| 2 / | ACCOUNT TITL | E AND TVPE | | | | | | | |
| 2. / | ACCOUNT TITE | | | | | | | | |
| Sele | ct all applicable | Cash Margin | | Opti | ions | | ransfer on Death | | |
| | ons for this | | | | | | | | |
| acco | ount. | Account Title | | | | | | | |
| | | | | | | | | | |
| 2.1 | IOUCEUOLDIN | ıc | | | | | | | |
| | HOUSEHOLDIN | | | · | | | | | |
| Acc | ount statements and | d trade confirmations can be comb | | | onvenience. | Yes | ☐ No | | |
| Acc Hou | ount statements and seholded accounts | d trade confirmations can be comb will also appear in the online acco | unt summary of the primo | ary account holder. | | Yes | ☐ No | | |
| Acc Hou Plea | ount statements and seholded accounts assessee the Househo | d trade confirmations can be comb | unt summary of the primo | ary account holder. | | Yes | ☐ No | | |
| Acc Hou Plea | ount statements and seholded accounts | d trade confirmations can be comb will also appear in the online acco | unt summary of the primo | ary account holder. | | Yes Primary Account N | | | |
| Acc Hou Plea | ount statements and seholded accounts assessee the Househo | d trade confirmations can be comb will also appear in the online acco olding disclosure in the Introduced | unt summary of the primo | ary account holder. s, & Disclosures docum | ent for more | | | | |
| Acc Hou Plea | ount statements and seholded accounts assessee the Househo | d trade confirmations can be comb will also appear in the online acco olding disclosure in the Introduced | unt summary of the primo | ary account holder. s, & Disclosures docum | ent for more | | | | |
| Acc Hou Pled info | ount statements and seholded accounts ase see the Househo rmation. | d trade confirmations can be comb will also appear in the online acco olding disclosure in the Introduced | unt summary of the primo Customer Account Terms COUNT OWN | ary account holder. s, & Disclosures docum | ent for more | | | | |
| Acci Hou Plec info | ount statements and seholded accounts are see the Househormation. | d trade confirmations can be comb will also appear in the online accord olding disclosure in the Introduced ACC ARY ACCOUNT OWNER I | unt summary of the primo Customer Account Terms COUNT OWN | ary account holder. s, & Disclosures docum ER INFORM | ATION | Primary Account N | lumber | | |
| Acci Hou Plec info | ount statements and seholded accounts ase see the Househo rmation. | d trade confirmations can be comb will also appear in the online accord olding disclosure in the Introduced ACC ARY ACCOUNT OWNER I | unt summary of the primo Customer Account Terms COUNT OWN | ary account holder. s, & Disclosures docum | ent for more | Primary Account N | | | |
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| According Please Information A. S. Own | ount statements and seholded accounts are see the Househormation. | d trade confirmations can be comb will also appear in the online accord olding disclosure in the Introduced ACC ARY ACCOUNT OWNER I | unt summary of the primo Customer Account Terms COUNT OWN | ary account holder. s, & Disclosures docum ER INFORM | ATION | Primary Account N | lumber | | |
| According Accord | ount statements and seholded accounts are see the Househormation. SOLE OR PRIMA | ACC ARY ACCOUNT OWNER I Individual Legal Name | COUNT OWN INFORMATION Minor | ary account holder. s, & Disclosures docum ER INFORM Business | ATION | Primary Account N | lumber Estate | | |
| According Accord | ount statements and scholded accounts are see the Househormation. SOLE OR PRIMATE Type | ACC ARY ACCOUNT OWNER I Individual | COUNT OWN INFORMATION Minor | ary account holder. s, & Disclosures docum ER INFORM | ATION Trust | Primary Account N | lumber Estate | | |
| According Accord | ount statements and scholded accounts are see the Househormation. SOLE OR PRIMATE Type | ACC ARY ACCOUNT OWNER I Individual Legal Name | COUNT OWN INFORMATION Minor | ary account holder. s, & Disclosures docum ER INFORM Business | ATION | Primary Account N | lumber Estate | | |
| According Accord | ount statements and scholded accounts are see the Househormation. SOLE OR PRIMATE Type | d trade confirmations can be comb will also appear in the online according disclosure in the Introduced olding disclosure in the Introduced ARY ACCOUNT OWNER I Individual | COUNT OWN INFORMATION Minor | ary account holder. s, & Disclosures docum ER INFORM Business | ATION Trust | Primary Account N | lumber Estate | | |
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| Acce Hour Plece info | ount statements and scholded accounts are see the Househormation. SOLE OR PRIMATE Type American armation | d trade confirmations can be comb will also appear in the online according disclosure in the Introduced of the Introduced of the Individual Legal Name Legal Address (No P.O. Boxes) City | COUNT OWN INFORMATION Minor Gident Other (V | ER INFORM Business W-8 required) State/Province | ATION Trust Date of Birl Country of | Primary Account N | Lumber Estate Social Security Number / Tax ID | | |
| Acce Hour Plece info | ount statements and scholded accounts are see the Househormation. SOLE OR PRIMATE Type American armation | d trade confirmations can be comb will also appear in the online according disclosure in the Introduced of ACC ARY ACCOUNT OWNER I Individual Legal Name U.S. citizen or permanent resulted to the control of the co | COUNT OWN INFORMATION Minor | ER INFORM Business W-8 required) State/Province | ATION Trust Date of Birl Country of | Primary Account N | Lumber Estate Social Security Number / Tax ID | | |
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| Acce Hour Plece info | ount statements and scholded accounts are see the Househormation. SOLE OR PRIMATE Type American armation | ACC ARY ACCOUNT OWNER I Legal Name U.S. citizen or permanent res Legal Address (No P.O. Boxes) | COUNT OWN INFORMATION Minor Other (V | ER INFORM Business W-8 required) State/Province | ATION Trust Date of Birl Country of | Primary Account N | Lumber Estate Social Security Number / Tax ID | | |
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| A. S. Own | ount statements and scholded accounts are see the Househormation. SOLE OR PRIM. Type The primation are a communicated accounts and a communicated accounts are a communicated accounts are a communicated accounts are a communicated accounts and a communicated accounts are a communicated accounts are a communicated account and a communicated accounts are a communicated accounts are a communicated accounts and a communicated accounts a communicated accounts and a communicated accounts are a communicated accounts and a communicated accounts are a communicated accounts and a communicated accounts a communicated acc | d trade confirmations can be comb will also appear in the online according disclosure in the Introduced of the Introduced of the Introduced of the Individual | COUNT OWN INFORMATION Minor Other (V | ER INFORM Business W-8 required) State / Province | ATION Trust Date of Birl Country of ZIP / Postal | Primary Account N th (mm/dd/yyyy) Citizenship Code Coun Mobile Phone Business Phone | Estate Social Security Number / Tax ID try Ext. | | |
| A. S. Own | ount statements and scholded accounts are see the Househormation. SOLE OR PRIM. Type The primation are a communicated accounts and a communicated accounts are a communicated accounts are a communicated accounts are a communicated accounts and a communicated accounts are a communicated accounts are a communicated account and a communicated accounts are a communicated accounts are a communicated accounts and a communicated accounts a communicated accounts and a communicated accounts are a communicated accounts and a communicated accounts are a communicated accounts and a communicated accounts a communicated acc | d trade confirmations can be comb will also appear in the online according disclosure in the Introduced of ACC ARY ACCOUNT OWNER I Individual Legal Name U.S. citizen or permanent results. Legal Address (No P.O. Boxes) City Email Address Employed Not E | COUNT OWN INFORMATION Minor Other (V | ER INFORM Business W-8 required) State/Province | ATION Trust Date of Birl Country of ZIP / Postal | Primary Account N th (mm/dd/yyyy) Citizenship Code Coun Mobile Phone Business Phone | Estate Social Security Number / Tax ID try Ext. | | |



Account #: Rep Code: SOLE OR PRIMARY ACCOUNT OWNER IDENTITY INFORMATION Military ID Drivers License Passport Other Government-Issued ID Government Identification Country / State of Issuance Document Number Date of Issuance (mm/dd/yyyy) Expiration Date (mm/dd/vvvv) Are you or your spouse employed by, or associated with, a stock exchange, a member firm of a stock exchange, FINRA, or a municipal securities dealer? Yes Company Name Are you, or any relatives sharing your home, a policy-making officer, director, a 10 percent shareholder, or otherwise considered an affiliate of a publicly traded company for purposes of SEC Rule 144? | Yes Company Name Company Ticker Are you (or are you related to someone who is) an employee or agent of StoneX Group Inc., or a StoneX-affiliated company? Yes Employee / Agent Name Employee / Agent Position Relationship Are you or your spouse a politically exposed person, current or former senior official of a foreign government or political party, or senior executive of a foreign government owned commercial enterprise, or a family member or cose associate of such person Political Organization Politically Exposed Person Name Relationship to Account Holder 6. FINANCIAL PROFILE Use combined figures for joint accounts. Do you have accounts at any other brokerage firm? Firm(s): No (A bank, savings and loan association, insurance company, registered investment company, investment adviser, or any individual Check if you qualify as an Institutional Investor. or entity with \$50 million or more in assets.) Brokerage Account Income Sale of Business/Property Inheritance/Gift Insurance/Settlement Pension/Retirement Other Funding Source В C. D F Α < \$50.000 \$50.000-99.999 \$100,000-199,999 | \$200,000-499,999 | \$500,000-999,999 \$1 mil-2.49 mil \$2.5 mil + Income & Annual Income Net Worth Net Worth Liquid Net Worth < 10% 26 - 30% 35% Estimated Federal Tax Rate Α В С D Ε F G When do you expect to begin 1 - 3 years 7 - 9 years 10 - 12 years 13 - 15 years > 15 years < 1 year 4 - 6 years withdrawing significant funds from this account? В Moderately Moderate Moderately Speculative Capital Conservative Aggressive Investment Profile Preservation Conservative Aggressive 1 3 Low Medium High What is the likelihood you will need to access funds from this account to satisfy short-term requirements? Ν Α В C. None Limited Average Extensive Stocks / Bonds Investment Alt. Investments Experience Options Mutual Funds Annuities 7. SECOND ACCOUNT OWNER INFORMATION If applicable Owner Type Joint Owner Custodian/Guardian Partner Trustee Executor Authorized Person Legal Name Owner Date of Birth (mm/dd/yyyy) Social Security Number / Tax ID Information U.S. citizen or permanent resident Other (W-8 required) Country of Citizenship Legal Address (No P.O. Boxes)

City

Email Address

Contact Information

Primary Phone

State / Province

ZIP / Postal Code

Country

Mobile Phone



| W Fenix SECURITIES | | | | Account #: | Rep Code: | | |
|---|--|---|-------------------------------|--------------------------------|--|---------------|--|
| 7. SECOND ACCO | UNT INFORMATION Continued | | | | | | |
| | ☐ Employed ☐ Not Employed | d Retired | Studen | | ss Phone | Ext. | |
| Employment Information | Employer Name Employer Address | | Occupation | | | | |
| | City | | State / Province | ZIP / Postal Code | Country | | |
| Marital Status | Single Married | Divorced | Widowed | Number of | Ages of | | |
| Government Identification | | sport y/State of Issuance | Military ID | Dependents: | Other Government-Issued II Expiration Date (mm/dd/yy) | | |
| Are you or your spouse | employed by, or associated with, a stock ex | • | | | | 77) | |
| Yes No | Company Name | | | | | | |
| company for purposes | s sharing your home, a policy-making office of SEC Rule 144? | er, director, a 10 percer | nt shareholder, or ot | herwise considered | an affiliate of a publicly trad | ed | |
| Yes No | Company Name | | | | Company Ticker | | |
| Are you (or are you rela | ted to someone who is) an employee or age | ent of StoneX Group In | c., or a StoneX-affili | iated company? | Company notes | | |
| Yes No | Employee / Agent Name | Employee / Agent | Position | Relation | nship | | |
| Are you or your spouse government owned cor | a politically exposed person, current or form mercial enterprise, or a family member or o | mer senior official of a cose associate of such | foreign government person? | or political party, o | r senior executive of a foreign | l | |
| Yes No | Political Organization | Politically Exposed | Person Name | Relation | nship to Account Holder | | |
| 8. THIRD ACCOUN | NT OWNER INFORMATION If app | olicable | | | | | |
| Owner Type | ☐ Joint Owner ☐ Custodian/Gu | uardian Pa | rtner Tr | ustee E | xecutor Authorize | ed Person | |
| Owner | Legal Name | | | Date of Birth (mm/d | d/yyyy) Social Security Num | nber / Tax ID | |
| Information | U.S. citizen or permanent resident | quired) | Country of Citizenship | | | | |
| | Legal Address (No P.O. Boxes) | | | | | | |
| Contact Information | City | | State / Province | ZIP / Postal Code | Country | | |
| | Email Address | | Mobile | Phone | | | |
| | Employed Not Employed | d Retired | Student | | ss Phone | Phone Ext. | |
| Employment Information | Employer Name Occupation | | | | | | |
| | Employer Address | | | | | | |
| | City | | State / Province | ZIP / Postal Code Number of | Country Ages of | | |
| Marital Status | Single Married | Divorced | ☐ Widowed | Dependents: | Dependents: | | |
| Government Identification | Drivers License Pas | sport | Military ID | | Other Government-Issued I | D | |
| | | y / State of Issuance | • | ince (mm/dd/yyyy) | Expiration Date (mm/dd/yy | yy) | |
| | | | | EILID A | inicipal cocurities dealer? | | |
| Are you or your spouse | employed by, or associated with, a stock ex | xchange, a member fir | m of a stock exchar | nge, FINKA, or a mu | inicipal securities dealer? | | |

Company Name

Yes No

Are you, or any relatives sharing your home, a policy-making officer, director, a 10 percent shareholder, or otherwise considered an affiliate of a publicly traded company for purposes of SEC Rule 144?

Company Ticker

| Fenix SECURITIES | | | | | Account # | <i>‡</i> : | Rep Cod | le: | |
|--|--|---|---------------------------|-----------------------|---|----------------------------|----------------------------|---------------------------------|--|
| 9 THIRD ACCOUNT | NT INFORMATION | Continued | | | | | | | |
| | ated to someone who is) of | | of StanoY Group In | or a StopoV aff | iliated compa | 201/2 | | | |
| — — — | died to someone who is) t | an employee or agent | or storiex group in | ic., or a Storiex-arr | matea compa | arry: | | | |
| Yes No | Employee / Agent Name | | Employee / Agent I | Position | | Relationship | | | |
| Are you or your spouse government owned co | e a politically exposed per mmercial enterprise, or a | son, current or former family member or cose | senior official of a t | foreian aovernmer | nt or political _l | | | gn | |
| ☐ Yes ☐ No | | | | | | | | | |
| | Political Organization | | Politically Exposed | Person Name | | Relationship | to Account Holder | | |
| 9. FOURTH ACCO | UNT OWNER INFO | DRMATION If appl | licable | | | | | | |
| Owner Type | ☐ Joint Owner | Custodian/Guard | lian Pa | rtner T | rustee | Execu | itor Author | ized Person | |
| • | LecalNess | | | | D . (D: | |) 2 112 5 | | |
| Owner Information | Legal Name | | | | Date of Birt | Date of Birth (mm/dd/yyyy) | | Social Security Number / Tax ID | |
| | U.S. citizen or perm | nanent resident | Other (W-8 re | quired) | Country of | Citizenshin | | | |
| | | | | | country or | CHIZCHSHIP | | | |
| | Legal Address (No P.O. Box | es) | | | | | | | |
| Contact | | | | | | | | | |
| Information | City | | | State / Province | ZIP / Postal | Code | Country | | |
| | | | | | | | | | |
| | Email Address | _ | Primary Phone | | | Mobile Phor | ne | | |
| | Employed | Not Employed | Retired | Studer | nt | Business Ph | none | Ext. | |
| | | | | | | - Buoineso i ii | 10116 | LAG | |
| Employment | Employer Name | | | Occupation | | | | | |
| Information | | | | | | | | | |
| | Employer Address | | | | | | I | | |
| | | | | | | | | | |
| N. 1. 1. C | City | | 7 Diversed | State / Province | ZIP / Postal Numl | Code ber of | Country Ages of | | |
| Marital Status | Single | Married | _ Divorced | Widowed | Depen | | Dependent | 5: | |
| Government | Drivers License | Passpo | rt | Military ID | | Oth | her Government-Issue | dl ľ | |
| Identification | | | | | | | | | |
| | Document Number | | tate of Issuance | • | ance (mm/dd/y | | Expiration Date (mm/dd/ | уууу) | |
| Are you or your spouse | e employed by, or associa | ted with, a stock excho | ange, a member fir | m of a stock excho | ınge, FINRA, | or a municip | oal securities dealer? | | |
| Yes No | | | | | | | | | |
| | Company Name | | | | | | | | |
| Are you, or any relative company for purposes | es sharing your home, a p of SEC Rule 144? | olicy-making officer, di | rector, a 10 percer | nt shareholder, or c | therwise cor | nsidered an | affiliate of a publicly tr | aded | |
| Yes No | | | | | | | | | |
| | Company Name | | | | | | Company Ticker | | |
| Are you (or are you rel | ated to someone who is) a | an employee or agent | of StoneX Group In | ic., or a StoneX-aff | iliated compo | any? | | | |
| Yes No | | | | | | | | | |
| | Employee / Agent Name | | Employee / Agent Position | | | Relationship | | | |
| Are you or your spouse government owned co | e a politically exposed per mmercial enterprise, or a | enior official of a foreign government or political associate of such person? | | | party, or senior executive of a foreign | | | | |
| Yes No | | | | | | | | | |
| | Political Organization | | Politically Exposed | | | Relationship | to Account Holder | | |
| | | ACCO | UNT INFO | RMATION | 1 | | | | |
| 10. MAILING ADD | RESS | | | | | | | | |
| | | | | | | | | | |
| This is where all mail communication | Street Address | | | | | | | | |
| about the account | CALCAT AGRICUS | | | | | | | | |
| will be sent. | City State / Province ZIP / Postal Co | | | | IP / Postal Code | Code Country | | | |
| 11. RETIREMENT | ACCOUNTS SUBJE | CT TO ERISA | | | | | | | |
| | | | | | | | | | |

| 10. MAILING ADDRESS | | | | | | | | | |
|---|--|------------------|-------------------|---------|--|--|--|--|--|
| This is where all mail communication | Street Address | | | | | | | | |
| about the account will be sent. | | | | | | | | | |
| | City | State / Province | ZIP / Postal Code | Country | | | | | |
| 11. RETIREMENT ACCOUNTS SUBJECT TO ERISA | | | | | | | | | |
| | | | | | | | | | |
| Skip this section if account is not subject | Employer or Other Responsible Plan Fiduciary | | | | | | | | |
| to FRISA. | | | | | | | | | |

Contact Name

Contact Phone Number

Contact Email Address



| Fenix securities | | | | | Account # | t: | | Rep Code: |
|--|---|--|-------------------------------------|---|---|--|---------------------------------|---------------------------------------|
| 12. INTERESTED F | PARTIES If requested, third parties can re | eceive copies o | f acco | unt docume | ents. | | | |
| | | | | | | | | |
| | Name | | | Professional C | apacity (Acc | countant, atto | rney, etc.) | |
| Interested | | | | | | | | |
| Party 1 | Address | | Τ | | | | | |
| | City | | State | / Province | ZIP / Postal | l Code | Country | |
| I authorize | | | 1 | | , | | ,, | |
| communication with the Interested Party | Email Address | Primary Phone | | | | | | |
| about my account. | To the interested party, please duplicate: | Statem | ents | | Trade Conf | irmations | | Tax Documents |
| | | | | | | | | |
| | Name | | | Professional C | apacity (Acc | countant, atto | rney, etc.) | |
| Interested | Addiss | | | | | | | |
| Party 2 | Address | | Τ | | | | | |
| | City | | State | / Province | ZIP / Postal | l Code | Country | |
| I authorize | | | | | | | , | |
| communication with the Interested Party | Email Address | Primary Phone | | | | | | |
| about my account. | To the interested party, please duplicate: | Statem | ents | | Trade Conf | irmations | | Tax Documents |
| 13. TRUSTED CON | ITACTS If requested | | | | | | | |
| someone may be exploit guardian, executor, trust funds from your account | individual (age 18 or older) whom you authorize cing you financially or (2) we desire to confirm the cee or holder of a power of attorney. Designating We are not obligated to contact your Trusted C designate any Trusted Contact. Should you desir | e specifics of your g a Trusted Contac Contacts, but you | current ct perso give us | contact infor on does not a permission to | rmation, he uthorize the o do so if w | alth status, at person to e have any | or the identit effect transc | y of any legal actions or withdraw |
| | | | | | | | | |
| | Name Relationship to Account C | | | | o Account Ov | wner | | |
| | | | | | | | | |
| Trusted Contact Person #1 | Address | | | | | | | |
| reison#1 | City | | State / | Province | ZIP / Postal | Code | Country | |
| | | | | | | | | |
| | Email Address | Primary Phone | | | | Mobile Phor | ne | |
| | | | | | | | | |
| | Name Relationship to Account Owner | | | | | | | |
| | Address | | | | | | | |
| Trusted Contact Person #2 | | | | | | | | |
| | City | | State | Province | ZIP / Postal | Code | Country | |
| | | | | | | | | |
| | Email Address | Primary Phone | | | | Mobile Phor | ne | |
| 14. SIGNATURES | | | | | | | | |
| | rm that I have both read and agree with all page bout this form or the content herein, will be subm | | | | | | e and correct | . I agree that any |
| Primary Account Holder Signature | | | Additional Account Holder Signature | | | | | |
| Primary Account Holder Name Date | | | Additional Account Holder Name | | | | Date | |
| | | | | | | | | |
| Additional Account Hold | er Signature | | Additio | nal Account I | Holder Sigr | nature | | |
| Additional Account Holder Name Date | | | Additio | nal Account I | Holder Nan | ne | | Date |
| | For Introduc | ing Broker- | Deal | er Use Ω | nlv | | | |
| | | G = - 2 · · 2 · | | | • | | | |
| Signature of Registered Representative | | | Signature of Supervisory Principal | | | | | |

Registered Representative Name

Date

Supervisory Principal Name