

Margin Account Privileges Supplemental Application for NFS

Account Number

To be retained by Broker/Dealer

1. Account Owner(s)

Provide all of the Account Owner Names that appear on the brokerage account.

First Name	Middle Name	Last Name
First Name	Middle Name	Last Name
First Name	Middle Name	Last Name
Entity Name		

2. Financial Information *Required by industry regulations to obtain this information.*

For joint account, check your combined income.

Annual Income <i>From all sources</i>	Estimated Net Worth <i>Excluding primary residence</i>	Investable Assets <i>Including cash and securities</i>	Federal Tax Bracket
<input type="checkbox"/> Under \$25,000	<input type="checkbox"/> Under \$50,000	<input type="checkbox"/> Under \$50,000	<input type="checkbox"/> 0%–15%
<input type="checkbox"/> \$25,000–\$50,000	<input type="checkbox"/> \$50,000–\$100,000	<input type="checkbox"/> \$50,000–\$100,000	<input type="checkbox"/> 21% to 27½%
<input type="checkbox"/> \$50,000–\$100,000	<input type="checkbox"/> \$100,000–\$500,000	<input type="checkbox"/> \$100,000–\$500,000	<input type="checkbox"/> Over 27½%
<input type="checkbox"/> Over \$100,000	<input type="checkbox"/> Over \$500,000	<input type="checkbox"/> Over \$500,000	
\$ _____	\$ _____	\$ _____	

3. Affiliations

Check the appropriate box if any of these scenarios apply to you.

You are registered with or employed by a Financial Industry Regulatory Authority ("FINRA") member firm ("associated person"), you are the spouse of an associated person, you are a child who resides in the same household or is financially dependent on the associated person, you are related to an associated person who has control over your account or an associated person materially contributes financial support to you and has control over your account, or you are affiliated with or employed by FINRA, any other self-regulatory organization ("SRO") or a municipal securities dealer.

Account Owner 1

Affiliated Entity Name			
Address			
City	State/Province	Zip/Postal Code	Country

Account Owner 2

Affiliated Entity Name			
Address			
City	State/Province	Zip/Postal Code	Country

Account Owner 3

Affiliated Entity Name			
Address			
City	State/Province	Zip/Postal Code	Country

Account Owner 4

Affiliated Entity Name			
Address			
City	State/Province	Zip/Postal Code	Country