

SECTION I - GENERAL ADMINISTRATIVE INFORMATION

1. Legal Name of Entity	
1.1. D/B/A (if applicable)	
2. Legal form (LLC, CORP, etc.)	
3. To be answered if the account holder is a Broker or Dealer (which includes a Foreign Broker or Dealer, or a Foreign Bank acting as a Broker or Dealer)	
Is this account a PAB account; a proprietary account of a Broker or Dealer as defined by SEC 15c3-3 (a)(16)? Selection required.	
	<input type="radio"/> Yes <input type="radio"/> No
4. Is the entity a fund or a financial institution?	
	<input type="radio"/> Yes <input type="radio"/> No
If no, you may skip sections II & III	
5. Registered Address (attach proof)	
5.1. Physical presence at this address?	<input type="radio"/> Yes <input type="radio"/> No
6. Head Office Address	
6.1. Physical presence at this address?	<input type="radio"/> Yes <input type="radio"/> No
7. Banking license no. and date issued	<input type="checkbox"/> Not applicable
8. How long has the firm operated?	
9. Is the firm licensed or regulated?	<input type="radio"/> Yes <input type="radio"/> No
If yes, by what regulators?	
10. Principal local regulator	<input type="checkbox"/> Not applicable
11. Commercial registration no.	<input type="checkbox"/> Not applicable
12. Swift Address	<input type="checkbox"/> Not applicable
13. Name of parent company (if applicable)	<input type="checkbox"/> Not applicable
14. Country of incorporation of parent company	
15. Does the parent company control substantively and effectively your institution?	<input type="radio"/> Yes <input type="radio"/> No

16. Is your institution (or parent company) publicly traded?	o Yes o No
16.1. If yes, on what exchange(s) is your institution traded? Please include trade name or ticker symbol.	
17. Has the ownership of your institution changed during the last five years?	o Yes o No
17.1. If yes, please provide Certificate of Change.	<input type="checkbox"/> Attached
18. Will the account be used to trade proprietary funds or client funds?	o Proprietary Funds o Client Funds
19. Will the account be used to collect fees?	o Yes o No
20. What are the products and services offered by the firm?	
21. What types of customers are serviced by the firm?	o Individuals o Entities
22. What will be the anticipated monthly account activity with regards to:	
22.1. Trades:	
Type:	
<input type="checkbox"/> Futures	<input type="checkbox"/> Options <input type="checkbox"/> Equities
Volume:	
<input type="radio"/> 0 - 5	<input type="radio"/> 6 - 10 <input type="radio"/> 11 - 20 <input type="radio"/> 21+
Trading value by % of account balance:	
<input type="radio"/> 1% - 25%	<input type="radio"/> 26% - 50% <input type="radio"/> 51% - 75% <input type="radio"/> 76% - 100%
22.2. Money Movements:	
Deposits per month:	Withdrawals per month:
Number of Transactions:	Number of Transactions:
<input type="radio"/> 0 - 5 <input type="radio"/> 6 - 10	<input type="radio"/> 0 - 5 <input type="radio"/> 6 - 10
<input type="radio"/> 11 - 20 <input type="radio"/> 21+	<input type="radio"/> 11 - 20 <input type="radio"/> 21+
Value:	Value:
<input type="radio"/> \$0 - \$10,000	<input type="radio"/> \$0 - \$10,000
<input type="radio"/> \$10,001 - \$50,000	<input type="radio"/> \$10,001 - \$50,000
<input type="radio"/> \$50,001 - \$100,000	<input type="radio"/> \$50,001 - \$100,000
<input type="radio"/> \$100,001+	<input type="radio"/> \$100,001+
23. In which countries of residence does the firm do business?	
24. Is the firm subject to any regulatory or self-regulatory examinations of the firm's anti-money laundering program? o Yes o No	
If yes, please describe the results of the most recent exam (include how frequently the firm is examined).	
25. Please describe the results of or attach a copy of the most recent annual independent audit of the firm's anti-money laundering program (include how frequently the firm is audited).	
Please identify the name of the auditor and date of most recent audit. <input type="checkbox"/> Not applicable	

SECTION II - QUESTIONS RELATED TO REGULATORY ENVIRONMENT

26. Please confirm the areas of your organization covered by this questionnaire:
- | | | |
|---|---------------------------|--------------------------|
| 26.1. Head office & domestic branches | <input type="radio"/> Yes | <input type="radio"/> No |
| 26.2. Domestic subsidiaries | <input type="radio"/> Yes | <input type="radio"/> No |
| 26.3. Overseas branches | <input type="radio"/> Yes | <input type="radio"/> No |
| 26.4. Overseas subsidiaries | <input type="radio"/> Yes | <input type="radio"/> No |
| 26.5. AML questionnaire applies to this branch/subsidiary only | <input type="radio"/> Yes | <input type="radio"/> No |
| 26.6. Does your institution have any units operating under an Offshore Banking license? | <input type="radio"/> Yes | <input type="radio"/> No |
| 26.7. List the countries in which business is conducted or solicited | | |

SECTION III - QUESTIONS RELATED TO YOUR INSTITUTION'S AML POLICIES AND PRACTICES

27. Please provide us with a copy of your AML policies. ☐ Attached
28. Does the regulatory body / competent authority in your country conduct AML/CFT reviews of your institution? ☐ Yes ☐ No
- 28.1. If yes, with what frequency?
29. Does your institution's AML policy require you to:
- | | | |
|--|---------------------------|--------------------------|
| 29.1. Verify the true identity of all customers prior to entering into a business relationship/ undertaking any transactions? | <input type="radio"/> Yes | <input type="radio"/> No |
| 29.2. Verify the true identity of underlying beneficial owners, if any? | <input type="radio"/> Yes | <input type="radio"/> No |
| 29.3. Verify the source of wealth / funds and the level of economic activity of your customers? | <input type="radio"/> Yes | <input type="radio"/> No |
| 29.4. "Risk rate" your customers and transactions? | <input type="radio"/> Yes | <input type="radio"/> No |
| 29.5. Monitor suspicious or unusual activity that covers funds transfers and monetary instruments (travelers' checks, money orders, etc.)? | <input type="radio"/> Yes | <input type="radio"/> No |
| If yes, is it <input type="radio"/> automatic <input type="radio"/> manual | | |
| 29.6. Screen customers, or transactions of significantly high risk that might require special attention prior to transactions (for example, persons, entities or countries that are on sanctions lists issued by government/international bodies such as OFAC and SDN list)? | <input type="radio"/> Yes | <input type="radio"/> No |
| If yes, is it <input type="radio"/> automatic <input type="radio"/> manual | | |
| 29.7. Apply higher level of enhanced due diligence for high risk clients, presenting risk of illicit activities (including but not limited to, money laundering, fraud or terrorist financing)? | <input type="radio"/> Yes | <input type="radio"/> No |
| 29.8. Periodically update due diligence information obtained? | <input type="radio"/> Yes | <input type="radio"/> No |
30. Do your policies and procedures permit your entity to open or maintain anonymous accounts or accounts for bearer share corporations? ☐ Yes ☐ No
31. Do your policies and procedures permit your entity to conduct business with "shell banks"? ☐ Yes ☐ No

32. Does your entity offer services to the following types of institutions or offer or deal in the following products?

- | | | |
|---|---------------------------|--------------------------|
| 32.1. Offshore Banks | <input type="radio"/> Yes | <input type="radio"/> No |
| 32.2. Internet Banks | <input type="radio"/> Yes | <input type="radio"/> No |
| 32.3. Money Service Business including money transmitters | <input type="radio"/> Yes | <input type="radio"/> No |
| 32.4. Internet gambling companies | <input type="radio"/> Yes | <input type="radio"/> No |
| 32.5. Nested accounts | <input type="radio"/> Yes | <input type="radio"/> No |
| 32.6. Cryptocurrency | <input type="radio"/> Yes | <input type="radio"/> No |
| 32.7. Financial institution located outside of your country | <input type="radio"/> Yes | <input type="radio"/> No |

32.7.A. If yes, provide a list of financial institutions and locations. Please provide an attachment if necessary.

Name	Location

☐ Check if attachment

33. If you answered yes to any of the items in question 32, do your institution's policies, procedures and monitoring specifically outline how to mitigate the potential risks associated with these higher risk customer types and products?

☐ Yes ☐ No

33.1. How does your institution mitigate the risk associated with these customers?

34. Does your institution provide AML/CFT training to relevant employees, that includes identification and reporting of suspicious transactions?

☐ Yes ☐ No

SECTION IV

35. Has your institution had any regulatory or criminal enforcement actions resulting from violations of AML law or regulations in the past five years?

☐ Yes ☐ No

35.1. If yes, please provide explanation.

36. Has your institution, to your knowledge, been the subject of any investigation, indictment, conviction or civil enforcement action related to financing terrorist activity in the past five years?

☐ Yes ☐ No

36.1. If yes, please provide explanation.

37. Please Identify the following. Please provide an attachment if necessary.

Position	Name	Address
CEO:		
COO:		
CFO:		
President (if applicable):		
Chairman (if applicable):		

☐ Check if attachment

SECTION V - ACKNOWLEDGEMENT OF RESPONSIBILITIES


We confirm that:

(a) We will ensure that full due diligence is performed on all of our customers.

(b) We will not allow a third party direct access to the account without proper authorization obtained from TradeStation Securities, Inc.

(c) We do not offer our products or services to a Shell Bank.

I certify that I am authorized to complete this questionnaire and that to the best of my knowledge the information given is complete and correct.

Signature			Date
Name		Phone	
Address		Fax	
Title		E-mail	

SECTION VI – DEFINITIONS OF TERMS USED IN THIS QUESTIONNAIRE

Offshore banking unit: A bank with a license to conduct banking activities that, as a condition of the license, prohibits the licensed entity from conducting banking activities with the citizens, or in the local currency of, the jurisdiction that issued the license.

Internet bank: Bank operating solely on the Internet, without any physical offices.

Nested Account: Nested, or downstream, correspondent banking refers to the use of a bank's correspondent relationship by one or more financial institutions through their relationship with the bank's direct customer (i.e., the bank's direct respondent bank) to conduct transactions and obtain access to other financial services.

Shell banks: Banks which maintain no physical presence in the country of their incorporation (except if a subsidiary of a regulated financial group).

Money service business: Any entity providing one or several of the following services:

- Money orders
- Traveler's checks
- Money transmission
- Check cashing
- Currency exchange
- Currency dealing
- Stored value
- Cryptocurrency

Financial Institution: A financial institution (FI) or institution, is a company engaged in the business of dealing with financial and monetary transactions such as deposits, loans, investments, and currency exchange. Financial institutions include banks, trust companies, insurance companies, brokerage firms, hedge funds, and investment dealers.

Entity: An association, corporation, partnership, proprietorship, trust, or individual that has legal standing in the eyes of law. A legal entity has legal capacity to enter into agreements or contracts, assume obligations, incur and pay debts, sue and be sued in its own right, and to be held responsible for its actions.

Proprietary Funds: Funds held exclusively for the FI, its own capital, and does not contain client funds.

Client Funds: Funds held in a fully disclosed account segregated in the person named or an omnibus account which contains the assets of more than one client of the FFI but can contain no prop funds.

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Received by:	Date:
Reviewed by:	Date:
Approved by:	Date:
Notes:	