



# Ownership Structure Form for Entities

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**Questions? Call a Client Services representative at 800-669-3900.**

☐ Update to an existing account      ☐ New Account

This form is used to provide ownership structure for an entity that is a beneficial owner for another entity.

## 1. ACCOUNT INFORMATION

Account Number:	Tax ID Number:
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Title of Entity:

Select Current Account Type:

<input type="checkbox"/> S Corporation	<input type="checkbox"/> C Corporation	<input type="checkbox"/> Foreign Corporation
<input type="checkbox"/> Non-Incorporated Organization	<input type="checkbox"/> Limited Liability Company	
<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Partnership	

## 2. BENEFICIAL OWNER ENTITY INFORMATION

Title of Entity/Trust:

Select Beneficial Owner Entity Type:

<input type="checkbox"/> S Corporation	<input type="checkbox"/> C Corporation	<input type="checkbox"/> Foreign Corporation
<input type="checkbox"/> Non-Incorporated Organization	<input type="checkbox"/> Limited Liability Company	
<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Partnership	

## 3. BENEFICIAL OWNERS *(This section should be completed by beneficial owners of the entity listed in Section 2)*

Beneficial Owner means each individual, if any, who, directly or indirectly, owns 25% or more of the equity interest of a legal entity customer (10% or more if the legal entity customer is foreign).

### BENEFICIAL OWNER #1

Name Prefix *(optional)*: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Dr. ☐ Rev.

Full Legal Name:

Home Street Address:  
*(no PO Box or mail drop)*

City:	State:	ZIP Code:	Country:
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Date of Birth: <i>(MM-DD-YYYY)</i>	U.S. Social Security Number: <i>(SSN)*</i>
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☐ Check here if you are **NOT** a U.S. citizen.

Country of Citizenship:

Country of Dual or Secondary Citizenship:

Country of Birth:

Non-U.S. citizens\*\*: Do you hold a current U.S. immigration visa?  
☐ Yes ☐ No

Specify visa type:

Visa Number:

Expiration:

\*If none, I will submit a photocopy of my passport.

\*\*Nonresident aliens must submit a copy of a current passport, and a copy of a bank or brokerage statement.

### BENEFICIAL OWNER #2

Name Prefix *(optional)*: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Dr. ☐ Rev.

Full Legal Name:

Home Street Address:  
*(no PO Box or mail drop)*

City:	State:	ZIP Code:	Country:
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Date of Birth: <i>(MM-DD-YYYY)</i>	U.S. Social Security Number: <i>(SSN)*</i>
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☐ Check here if you are **NOT** a U.S. citizen.

Country of Citizenship:



Country of Dual or Secondary Citizenship:		Country of Birth:	
Non-U.S. citizens**: Do you hold a current U.S. immigration visa? <input type="checkbox"/> Yes <input type="checkbox"/> No		Specify visa type:	Visa Number: Expiration:

\*If none, I will submit a photocopy of my passport.

\*\*Nonresident aliens must submit a copy of a current passport, and a copy of a bank or brokerage statement.

### BENEFICIAL OWNER #3

Name Prefix (optional): <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Rev.			
Full Legal Name:			
Home Street Address: (no PO Box or mail drop)			
City:	State:	ZIP Code:	Country:
Date of Birth: (MM-DD-YYYY)		U.S. Social Security Number: (SSN)*	
<input type="checkbox"/> Check here if you are <b>NOT</b> a U.S. citizen.		Country of Citizenship:	
Country of Dual or Secondary Citizenship:		Country of Birth:	
Non-U.S. citizens**: Do you hold a current U.S. immigration visa? <input type="checkbox"/> Yes <input type="checkbox"/> No		Specify visa type:	Visa Number: Expiration:

\*If none, I will submit a photocopy of my passport.

\*\*Nonresident aliens must submit a copy of a current passport, and a copy of a bank or brokerage statement.



### BENEFICIAL OWNER #4

Name Prefix (optional): <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Rev.			
Full Legal Name:			
Home Street Address: (no PO Box or mail drop)			
City:	State:	ZIP Code:	Country:
Date of Birth: (MM-DD-YYYY)		U.S. Social Security Number: (SSN)*	
<input type="checkbox"/> Check here if you are <b>NOT</b> a U.S. citizen.		Country of Citizenship:	
Country of Dual or Secondary Citizenship:		Country of Birth:	
Non-U.S. citizens**: Do you hold a current U.S. immigration visa? <input type="checkbox"/> Yes <input type="checkbox"/> No		Specify visa type:	Visa Number: Expiration:

\*If none, I will submit a photocopy of my passport.

\*\*Nonresident aliens must submit a copy of a current passport, and a copy of a bank or brokerage statement.

**If additional beneficial owners need to be disclosed, please copy this page as needed.**

4. SIGNATURE (Authorized Agent of the Entity Listed in Section 1)	
 Authorized Agent's Signature:	Date:
 Authorized Agent's Printed Name:	Title:

**Original Signature required; electronic signatures and/or signature fonts are not authorized.**

Investment Products: Not FDIC Insured \* No Bank Guarantee \* May Lose Value

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