

BEFORE YOU START

This form enables you to apply for a legal entity (corporation, limited liability company (**"LLC"**), or partnership) client account with us. To complete this application you will need some important pieces of information at hand, and the appropriate individuals will need to provide their details and sign the form. IG US LLC (**"IG US**") will use the information you provide to open and service your account, communicate with you, and provide information about products and services. Please read IG US's Privacy Notice and Access Policy at https://www.ig.com/us/privacy IG US will use the information provided to verify the identity of the entity and its directors/partners/members/officers, authorized individuals, control persons, and beneficial owners. IG US may also use this information to inquire as to the creditworthiness of the entity or any person associated with this account.

WHO SHOULD SIGN THIS FORM?

- In the case of a corporation, two of the directors or officers
- In the case of a partnership, two of the partners
- In the case of an LLC, two of the members (or the sole member in the case of a single member LLC)

WHAT YOU NEED TO KNOW

Before you apply, it is important to read our Risk Disclosure Notice, Customer Agreement, Summary Order Execution Policy, Conflicts Policy and Privacy Notice and Access Policy. You can find them all at https://www.ig.com/us/terms-and-agreements

There is a minimum deposit required to open a legal entity account of \$10,000.

CONSENT RESOLUTION

Your entity's board or management team, as applicable to your specific entity type, must hold a meeting and pass certain resolutions to enable your entity to open an account with us. We will ask you to certify that this has happened in the certified consent resolution section. The applicable board or management team must also authorize people to trade on your entity's account (**"Authorized Individuals"**). The Authorized Individuals must sign the authorized individuals list in Appendix B and will be required to provide identification verification.

SUPPORTING DOCUMENTS NEEDED

You must enclose the following supporting documentation with the entity's completed account application form:

- copy of the Certificate of Incorporation/Organization (as applicable);
- copy of the Articles of Incorporation/Organization filed with Secretary of State (as applicable);
- copy of the LLC Operating Agreement/Partnership Agreement (as applicable);
- copy of the entity's Bylaws (as applicable);
- copy of the entity's government issued business license (as applicable);
- proof of entity's registered address;
- proof of entity's principal place of business, local office, or other physical location;
- proof of entity's government issued tax identification number;
- list of shareholder(s)/beneficial owner(s) directly or indirectly holding at least a 25% equity interest in the entity, as well as the identification information for each shareholder/beneficial owner requested in Appendix A attached hereto. Identification information provided in Appendix A will be submitted to our third-party identification service in order to verify the accuracy of the information. We may request additional documentation, such as a passport, government issued identification card, proof of social security or identification number, or residential utility bill, in the event we are unable to verify any identification information provided. If a shareholder or beneficial owner with a direct or indirect equity interest of 25% or more is an entity please provide all the information in this list for each entity;
- list of authorized individuals, as well as the identification information for each authorized individual requested in Appendix B attached hereto. Identification information provided in Appendix B will be submitted to our third-party identification service in order to verify the accuracy of the information. We may request additional documentation, such as a passport, government issued identification card, proof of social security or identification number, or residential utility bill, in the event we are unable to verify any identification information provided;
- recent bank statement confirming the bank details that will be used to fund the account.

We may contact you for further information/documentation.

WE ARE NOT ABLE TO OPEN YOUR ACCOUNT WITHOUT THESE SUPPORTING DOCUMENTS

- Please complete all sections IN FULL
- If you have any questions, please call us at 844 448 7239 or email newaccounts.us@ig.com

ENTITY INFORMATION		
01 ENTITY DETAILS		
Full name of entity:		(the "Entity")
Desired IG US account username:		
Registered address:	Business (postal) address:	Same as registered address
Nature of the business/how does this Entity generate income:		
Please provide the source of funds that will be deposited in the ac	count (e.g. investment, earnings):	
Government/Tax identification number:		
State of incorporation/organization:	Date of incorporation/organizat	ion:
02 REGULATION		
Is the Entity subject to regulation by any federal, state, or local reg	ulatory authority?	🗌 Yes 🗌 No
If 'Yes' please state the name of the regulator and registration num	nber:	
Is this a pooled asset Entity?		🗌 Yes 🗌 No
Does this Entity qualify for any registration exemptions?		🗌 Yes 🗌 No
If 'Yes' please state the relevant exemption and explain why the Er	ntity qualifies:	
Is this Entity an eligible contract participant ("ECP")?		🗌 Yes 🗌 No
If this Entity a publicly traded company, please specify the stock symb	bol:	

03 CONTACT DETAILS				
Primary contact individual name:				
Primary contact number:				
Primary contact email address (for account correspondence):				
Secondary contact individual name: (will be contacted in the event primary contact is unavailable)				
Secondary contact number:				
Secondary contact email address (for account correspondence):				
04 BANK DETAILS				
Name of bank:				
Account name:	ABA/Routing No:			
Account No./IBAN:	Approx. funds available to the Entity's trading with IG: \$			
05 IDENTIFICATION OF DIRECTORS/PARTNERS/MEMBE	ERS/OFFICERS			
We need to verify the identity of those signing this form before the account can be opened.				
SOLE DIRECTOR/DIRECTOR/PARTNER/MEMBER 1:	DIRECTOR/PARTNER/MEMBER 2:			
Full name:	Full name:			
Residential address:	Residential address:			

Date of Birth: ____/ ___ / ___ __ __

Social security/tax/national identification number:

Date of Birth: ____/ ___ / ___ __ __

Social security/tax/national identification number:

1. Are any directors/partners/members/officers currently or previously bankrupt, or have been the subject of any enforcement action by a financial regulator?

🗌 Yes 🗌 No

If the answer is **'Yes'**, please give details: _____

06 | STATEMENT INSTRUCTIONS

In the absence of other instructions from you, we will send statements by email. If you would prefer to receive these by post, please tick this box: \Box

Please note that postal statements will incur a charge of 2 per statement.

DECLARATIONS

OTC forex trading is complex and comes with a high risk of losing money rapidly due to leverage. You should consider whether you understand how OTC forex trading works, and whether you can afford to take the high risk of losing your money.

Clients can lose more than they deposit.

I confirm that the Entity understands the nature and risks of margin trading via OTC forex. I consent to the Entity receiving the Risk Disclosure Notice and Customer Agreement by way of the IG US website and I hereby confirm that I have read, understood and that the Entity agrees to be bound by the terms of these documents. I also agree to IG US's Privacy Notice and Access Policy.

I confirm that I will notify IG US immediately of any changes to the information provided, including, but not limited to, any change in beneficial ownership.

I confirm that the information provided in the application is true and correct as of the date of the application. I further represent that each individual who has been named herein has read and agreed to comply with, and be bound by the Customer Agreement, Risk Disclosure Notice, Summary Order Execution Policy, Conflicts Policy, Website Terms and Conditions, Privacy Notice and Access Policy and Cookies Policy.

Name of director/partner/member:

Signature:	Date:	
Name of director/partner/member:		
Signature:	Date:	

IN THE CASE OF A CORPORATION TWO DIRECTORS OR OFFICERS MUST SIGN IN THE CASE OF A PARTNERSHIP TWO OF THE PARTNERS MUST SIGN IN THE CASE OF AN LLC TWO OF THE MEMBERS MUST SIGN, UNLESS ONLY ONE MEMBER EXISTS

CERTIFIED CONSENT RESOLUTION

l (name):

am the Corporate Secretary/Director/Managing Partner or Member of the Entity, and certify that the following resolutions were duly passed by those individuals authorized to make such resolutions on behalf of the Entity at a meeting held on

Date:

IT WAS RESOLVED AS FOLLOWS:

- 1. That account(s) (the "Account(s)") be opened with IG US in the name of the Entity for the purpose of entering into OTC forex contracts and any transactions related or ancillary to any of the contracts.
- 2. That an agreement be entered into with IG US in connection with the opening of the Accounts in such form as IG US shall require (the **"Agreement"**) and that all transactions entered into by the Entity will be subject to the terms of the Agreement as amended from time to time.
- 3. That each of the persons whose names and specimen signatures appear in the attached authorized individuals list (the **"Authorized Individual(s)"**) is authorized to trade on behalf of the Entity, and the Entity accepts full responsibility for any and all trades entered by the Authorized Individual(s).
- 4. That each Authorized Individual whose names and specimen signatures appear as "Authorized Signatories" in the attached authorized individuals list shall be and are hereby jointly and severally authorized to sign any document in connection with the opening or operation of the Account(s), including (but without limitation) the Agreement and to give any oral or written instructions to IG US with respect to the Account(s) including (but without limitation) instructions to effect or otherwise enter into transactions with or on behalf of the Entity.
- 5. That any transactions of any description whatsoever previously entered into by the Entity with or through IG US be and are hereby ratified and approved.
- 6. That these Resolutions be communicated to IG US and shall remain in force and that IG US shall be entitled to rely on the same until an amending resolution shall be passed and a copy certified by an officer of the Entity shall have been received by IG US.

I further certify that there is no legal or other reason why the Entity should not conduct this business.

🗙 Signature of Corporate Secretary/Director/Managing Partner or Member: ______

Date: ___

WHAT TO DO NEXT

1. Please check:

- you have fully completed all sections of the application form;
- all the appropriate people have signed the form, and fully completed the requested information in Appendices A and B.

If you have any questions please call us on 844 448 7239 or email newaccounts.us@ig.com

2. Return your application to:

IG US LLC New Accounts 200 West Jackson Blvd., Suite 1450 Chicago, IL 60606 or email newaccounts.us@ig.com

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Once you have completed your details, please:
Print this form
Sign it
Return it to us

IG US LLC 200 West Jackson Blvd., Suite 1450, Chicago, IL 60606 T 312 981 0499 E helpdesk.us@ig.com W IG.com

IG US LLC is a registered RFED with the CFTC and member of the National Futures Association (NFA #0509630)

CERTIFICATION OF BENEFICIAL OWNER(s) AND CONTROL PERSON(s):

Persons opening an account on behalf of a legal entity must provide the following information:

A. NAME AND TITLE OF NATURAL PERSON OPENING ACCOUNT

Name: ____

Title:

B. NAME AND ADDRESS OF LEGAL ENTITY FOR WHICH THE ACCOUNT IS BEING OPENED

Name:

Address: ____

C. THE FOLLOWING INFORMATION FOR EACH INDIVIDUAL, IF ANY, WHO, DIRECTLY OR INDIRECTLY, THROUGH ANY CONTRACT, ARRANGEMENT, UNDERSTANDING, RELATIONSHIP OR OTHERWISE, OWNS 25% OR MORE OF THE EQUITY INTERESTS OF THE LEGAL ENTITY LISTED ABOVE:

NAME	TITLE	DATE OF BIRTH	RESIDENTIAL ADDRESS	FOR U.S. PERSONS: SOCIAL SECURITY NUMBER	FOR FOREIGN PERSONS: PASSPORT NUMBER AND COUNTRY OF ISSUANCE, OR OTHER SIMILAR IDENTIFICATION NUMBER ⁽¹⁾

(If no individual meets this definition, please write "Not Applicable")

(1) In lieu of a passport number, foreign persons may also provide an alien identification card number, or number and country of issuance of any other government-issued document evidencing nationality or residence and bearing a photograph or similar safeguard.

THE FOLLOWING INFORMATION FOR AT LEAST ONE INDIVIDUAL WITH SIGNIFICANT RESPONSIBILITY MANAGING THE LEGAL ENTITY LISTED ABOVE, SUCH AS:

- 🗌 An executive officer or senior manager (e.g., Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, Treasurer); or
- Any other individual who regularly performs similar functions. (If appropriate, an individual listed under section (c) above may also be listed in this section (d)).

NAME	TITLE	DATE OF BIRTH	RESIDENTIAL ADDRESS	FOR U.S. PERSONS: SOCIAL SECURITY NUMBER	FOR FOREIGN PERSONS: PASSPORT NUMBER AND COUNTRY OF ISSUANCE, OR OTHER SIMILAR IDENTIFICATION NUMBER ⁽²⁾

l:	(name of natural person opening account),
le suele se suif, se ste e le ses effensiones de la stere informantine provide el plana in proventes en el comm	
hereby certify, to the best of my knowledge that the information provided above is complete and correct.	

Signature:	
Name of Director/Partner/Member/Officer signing:	

Date:

APPENDIX B

AUTHORIZED PERSONS LIST:

Authorized persons for:	(name of Entity)
as of:	(date)

as of:

The individuals listed below ("Authorized Signatory") are authorized by the Entity to:

- execute any and all types of transactions on behalf of the Entity through the account;
- deposit, withdraw, and transfer funds on behalf of the Entity;
- sign contracts, waivers, and releases; and
- otherwise conduct business with IG US on behalf of the Entity.

The individuals listed below ("Authorized Dealer") are authorized by the Entity to:

- execute any and all types of transactions on behalf of the Entity through the account; and
- deposit, withdraw, and transfer funds on behalf of the Entity.

Please tick the designated boxes (below) to indicate whether the individual is an Authorized Dealer or an Authorized Signatory.

IG US will have no obligation of inquiry with respect to the validity of, or authority with respect to, any transaction or instruction provided by an Authorized Signatory or an Authorized Dealer.

(2) In lieu of a passport number, foreign persons may also provide an alien identification card number, or number and country of issuance of any other government-issued document evidencing nationality or residence and bearing a photograph or similar safeguard.

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PPENDIX B ((CONTINUED)

NAME	RESIDENTIAL ADDRESS	PHONE	EMAIL	DATE OF BIRTH	SOCIAL SECURITY/ TAX/NATIONAL IDENTIFICATION NUMBER	SIGNATURE	AUTHORIZED SIGNATORIES	AUTHORIZED DEALERS

X Signed:

Name of Director/Partner/Member/Officer signing: