



Ameriprise Financial Services, Inc. 70100 Ameriprise Financial Center Minneapolis, MN 55474

Ameriprise® Brokerage

Minor Education/Retirement Account

Application



For Internal use only

Account Number 133

Part 1 Account Owner Details

Account Owner/Minor	Parent/Guardian of Beneficiary
Complete Legal Name <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.	Complete Legal Name <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.
<input type="text"/>	<input type="text"/>
Social Security or Tax ID Number	Social Security or Tax ID Number
<input type="text"/>	<input type="text"/>
Citizenship Status Citizenship:	Citizenship Status: Citizenship:
<input type="text"/>	<input type="text"/>
Resident Address (cannot use P.O. Box)	Resident Address (cannot use P.O. Box)
<input type="text"/>	<input type="text"/>
City State ZIP code	City State ZIP code
<input type="text"/>	<input type="text"/>
Alternate Address (if applicable) <input type="checkbox"/> Business <input type="checkbox"/> P.O. Box	Alternate Address (if applicable) <input type="checkbox"/> Business <input type="checkbox"/> P.O. Box
<input type="text"/>	<input type="text"/>
City State ZIP code	City State ZIP code
<input type="text"/>	<input type="text"/>
Note: Mail will be sent to the resident address unless specified above.	Note: Mail will be sent to the resident address unless specified above.
Home Phone Business Phone	Home Phone Business Phone
<input type="text"/>	<input type="text"/>
Occupation	Occupation
<input type="text"/>	<input type="text"/>
Bank	Bank
<input type="text"/>	<input type="text"/>
Employer Years Employed	Employer <input type="checkbox"/> Retired Years Employed
<input type="text"/>	<input type="text"/>
Business Address	Business Address
<input type="text"/>	<input type="text"/>
Date of Birth Marital Status E-Mail Address	Date of Birth Marital Status E-Mail Address
<input type="text"/>	<input type="text"/>
Mother's Maiden Name	Mother's Maiden Name
<input type="text"/>	<input type="text"/>
Annual Income Tax Bracket	Annual Income
<input type="text"/>	<input type="text"/>
Total Net Worth (exclude family residence)	Liquid Net Worth
<input type="text"/>	<input type="text"/>
	Number of dependents
	<input type="text"/>

Part 2 Account Type

Coverdell Education Savings Account Traditional IRA for a Minor Roth IRA for a Minor

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Part 3 Cash Balance Program

Ameriprise® Insured Money Market Account (AIMMA)²

¹ Uninvested cash balances will sweep daily into the designated money settlement option.

² AIMMA is a FDIC-insured, interest-bearing bank deposit product offered by Ameriprise Financial Services, Inc. and is not covered by SIPC.

Part 4 Investment Experience

Years of trading experience:

Stocks	Mutual Funds	Bonds	Options
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Average size of trade:

Stocks	Mutual Funds	Bonds	Options
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Average number of trades per year:

Stocks	Mutual Funds	Bonds	Options
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Current portfolio:

List other brokerage firms you have or had accounts with

List financial publications or information services you subscribe to

Part 5 Risk Tolerance and Objectives

What is your risk tolerance? (select all that apply - see definitions below for clarity)

Conservative Moderate Aggressive

What is your investment objective? (select all that apply - see definitions below for clarity)

Income Growth Speculation

What is your investment timeframe? (select only one)

Less than 1 year 1-3 years 4-7 years 8-10 years 11+ years

Risk Tolerance Definitions

Conservative: A low tolerance for risk and willingness to accept modest degree of risk of loss of principal in the Portfolio. Modest down years in investment performance are acceptable.

Moderate: A medium tolerance for risk and willingness to accept moderate risk of loss of principal in the Portfolio. Moderate down years in investment performance are acceptable.

Aggressive: A high tolerance for risk and willingness to accept substantial risk of loss of principal in the Portfolio.

Investment Objectives

Income: A preference for investments that produce income rather than capital appreciation.

Growth: A preference for assuming risk consistent with the opportunity for appreciation in value.

Speculation: Investments or investment strategies that assume a higher than normal market risk with the opportunity for commensurate gain.

Part 6 Additional Information

Are you associated with a stock exchange or FINRA member firm? (if yes, attach letter of approval.)

Yes No

Are you related to an employee of Ameriprise Financial, Inc.?

Yes No

If yes, name him or her, and relationship:

Yes No

Are you an employee of Ameriprise Financial, Inc. or any of its affiliates?

Yes No

Are you a policy-making officer, director or 10% stockholder of any publicly traded company?

Yes No

If yes, name company:

(Form 144 is required for the sale of these securities)

American Enterprise Investment Services, Inc. reserves the right to release your name, address and securities positions to requesting companies in which you own securities, unless you check this box.

How did you hear about Ameriprise Financial, Inc.?

Existing Client Referral from family or friend Referral from H&R Block Tax Professional Direct mail

Internet Phone call Newspaper Others



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Part 7 Acknowledgements and Signatures

Read these acknowledgements carefully and then sign and date this section. "You" and "Your" refer to you the applicant. "I", "We" and "Us" refer to Ameriprise Financial Services, Inc. (AFSI), American Enterprise Investment Services, Inc. (AEIS) or Ameriprise Trust Company (ATC) who are subsidiaries of Ameriprise Financial, Inc. (AFI).

By signing this application, you acknowledge that: a) the information you provided is correct, b) you agree to all terms and conditions stated herein, c) you authorize all activity indicated within this application.

General Acknowledgements:

- You affirm that you are at least 18 years of age and of full legal age in your state of residence.
- **Identity Information:** You understand that AFSI is required by law to obtain certain personal information from you which will be used by us to verify your identity and include in any reports to tax or regulatory authorities as required. If you do not provide us with this information, we may not be able to open your account. If we are unable to verify your identity, we reserve the right to close your account and to take such other steps as we deem reasonable.
- **Information Sharing:** You understand that the clearing agent, AEIS, will release your name, address and security position to requesting companies in which AEIS holds securities for your account, unless you specify otherwise to AFSI.
- **Householding:** You understand that AFSI and its affiliates may use and combine information concerning certain accounts owned by you and other members of your primary household group to provide members of the group with paper and/or electronic statements of account(s), account information and, for certain products and services, advantageous pricing or fees (we call these uses of Client Information "householding"). The types of accounts that may be included are: investment, insurance, annuity, and brokerage accounts; this includes features linked to brokerage accounts. A primary household consists of an individual, his or her spouse or domestic partner, and their unmarried children under age 21 who reside at the same address. If you want to have a statement covering only accounts that you own and not participate in household pricing, you can call your Ameriprise financial advisor or the service number on your statement.
- **Householding for Shareholder Documents:** You understand that AFSI may use and combine information concerning accounts owned by members of a household to provide them with a single paper copy of shareholder documents. Prospectuses, supplements, annual reports, semiannual reports and proxies may be included. Under this, household is defined as two or more shareholders who share the same address and either share the same last name or have indicated that they are married or domestic partners. This remains in effect unless notified otherwise. You understand that if you wish to continue receiving multiple copies of prospectuses, supplements, annual reports, semiannual reports and proxies, you can call 1 (866) 273-7429 and reference the client number found on your statement. Multiple mailings will resume within 30 days of the request.
- **Electronic Funds Transfer:** You understand that in connection with your brokerage account, you may transfer funds electronically between your cash sweep option and any other eligible account you designate, including accounts held by third parties, pursuant to your instructions and the Electronic Funds Transfer terms and conditions in the *Ameriprise* Brokerage Client Agreement.
- **Termination of Account:** You understand that your account may be terminated by you or by us. Termination will result in the cancellation of your account and all of the underlying investments in your account. You understand you are responsible for charges relating to any termination of this account.
- **Business Continuity:** You acknowledge that you have received the Ameriprise Financial Business Continuity Plan Disclosure.
- **Financial Interest in Products:** You understand that AFSI has a financial interest in the sales of proprietary products that are manufactured by its affiliates. AFSI and its affiliates receive more revenue from the sale of some financial products and services, particularly those products and services sold under the Ameriprise and RiverSource brands, than for the sale of other products and services. AFSI generally also receives more revenue for securities or products sold in a fee-based account than for those sold with only a sales charge or commission. Higher revenue generally results in greater profitability for the firm. Employee compensation (including management and field leader compensation) and operating goals at all levels of the company are tied to the company's success. Management, sales leaders and other employees generally spend more of their time and resources promoting Ameriprise and RiverSource products and services.
- **You understand that investment products are not federally or FDIC insured, are not deposits or obligations of, or guaranteed by, any financial institution, and involves investment risks including possible loss of principal and fluctuation in value.**
- **You acknowledge that you have received and read the *Ameriprise* Brokerage Client Agreement for Tax-Qualified (IRA, Qualified Plans, TSCA) Brokerage Accounts ("Agreement") and agree to abide by its terms and conditions as currently in effect or as they may be amended from time to time. You hereby consent to all these terms and conditions with full knowledge and understanding of the information contained in the Agreement. This brokerage account is governed by a predispute arbitration clause which is found on Section 25, Page 3 of the Agreement. You acknowledge receipt of the predispute arbitration clause.**

IRA Acknowledgements:

- **Appointment:** You appoint AEIS as custodian of your IRA from October 5, 2009 to December 31, 2009. Effective January 1, 2010, you understand that ATC will become the custodian of your IRA. You understand that the Individual Retirement Custodial Account Agreement in "Your Guide to IRAs" and this application comprise your custodial agreement with AEIS and ATC.
- **Responsibility for Tax Consequences:** You assume all responsibility for any tax consequences and penalties that may result from making contributions to, transactions with, and distributions from your IRA.
- **Cash Sweep Services:** You authorize AEIS and/or ATCI to invest, directly or indirectly, in deposits of itself or its affiliates that bear a reasonable rate of interest to facilitate cash sweep services.
- **Termination:** You understand that your IRA may be terminated by you or by us. Termination will result in the cancellation of your IRA and all of the underlying investments in your IRA. You understand you are responsible for charges relating to any termination of this IRA.
- **You acknowledge that you have received and read the "Your Guide to IRAs" and the Custodial Agreement included therein, and agree to abide by the terms and conditions of each. You acknowledge and agree to the fees that will be charged against your IRA. You understand that your IRA is governed by a predispute arbitration clause, found in Article VIII, Number 14, Page 33 of your custodial agreement. You acknowledge receipt of the predispute arbitration clause.**

Coverdell ESA Acknowledgements:

- **Controller Verification:** You affirm that you are a parent or legal guardian of the Child for whom this account is being established (account may not be controlled by anyone other than a parent or legal guardian).

Acknowledgements and Signatures continued on next page..



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Acknowledgements and Signatures continued

- **Appointment:** You appoint AEIS as custodian of your Coverdell ESA from October 5, 2009 to December 31, 2009. Effective January 1, 2010, you understand that ATC will become the custodian of your Coverdell ESA. You understand that the Custodial Account Agreement in "Your Guide to Coverdell Education Savings Accounts" and this application comprise your custodial agreement with AEIS and ATC.
- **Responsibility for Tax Consequences:** You understand that the child for whom this Coverdell ESA is established assumes all responsibility for any tax consequences and penalties that may result from making contributions to, transactions with, and distributions from the Coverdell ESA. We will report to the IRS certain tax information regarding this Coverdell ESA in the child's name and taxpayer identification number. Copies will be delivered to the child at the child's last known address.
- **Cash Sweep Services:** You authorize AEIS and/or ATC to invest, directly or indirectly, in deposits of itself or its affiliates that bear a reasonable rate of interest to facilitate cash sweep services.
- **Termination:** You understand that this Coverdell ESA may be terminated by you or by us. Termination will result in the cancellation of the Coverdell ESA and all of the underlying investments in the Coverdell ESA. You understand you are responsible for charges relating to any termination of this Coverdell ESA.
- **You acknowledge that you have received and read the "Your Guide to Coverdell Education Savings Accounts" and the Custodial Agreement included therein, and agree to abide by the terms and conditions of each. You acknowledge and agree to the fees that will be charged against your Coverdell ESA. You understand that your Coverdell ESA is governed by a predispute arbitration clause, found in Article X, Number 14, Page 30 of your custodial agreement. You acknowledge receipt of the predispute arbitration clause.**

Beneficiary Designation Acknowledgements:

- **IRA Application:** The beneficiary designation is the minor's estate until all of the following occur:
 1. the IRA plan owner (minor) has reached the age of majority for the governing state,
 2. the IRA plan is reregistered into the name of the former minor and
 3. after reregistration, the IRA plan owner names a beneficiary for the plan, other than the estate.
 Note: In the event the IRA owner is married and does not name a beneficiary, the IRA plan provides that the owner's spouse is the beneficiary.
- **Coverdell ESA Application:** You understand and acknowledge that this beneficiary designation revokes any previous beneficiary designation you have made for this Coverdell ESA and that this beneficiary designation applies to all investments and accounts within this Coverdell ESA.
- **Indemnification:** You agree to indemnify us against and hold us harmless from any and all claims arising from this beneficiary designation.
- **Binding:** You agree that this acknowledgement and beneficiary designation shall be binding upon your heirs, legatees, executors, administrators, personal representatives, assigns and beneficiaries.

Brokerage, investment and financial advisory services are made available through Ameriprise Financial Services, Inc. Member FINRA and SIPC. Clearing, custody and settlement services are made available by American Enterprise Investment Services, Inc., Member FINRA, SIPC and NYSE. Certain deposit, lending and personal trust products and services are provided to Ameriprise Financial Services, Inc. by Ameriprise Bank, FSB, Member FDIC.

Under penalties of perjury, you certify that:

1. The number shown on this form is your correct taxpayer identification number, and
2. You are not subject to backup withholding because: (a) you are exempt from backup withholding, or (b) you have not been notified by the Internal Revenue Service (IRS) that you are subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified you that you are no longer subject to backup withholding, and
3. You are a U.S. citizen or other U.S. person (defined below).

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Certification Instructions: You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. Form W-9 instructions are available upon request or on irs.gov.

The Internal Revenue Service does not require your consent to any provision of the document other than the certifications required to avoid backup withholding.

Account Owner/Guardian Signature

State

Date (MMDDYYYY)

X

Patriot Act Customer Identification

To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask you for your name, address, date of birth and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents

Account Owner:

Government Issue ID: Driver's License/State ID Passport Alien Registration Other

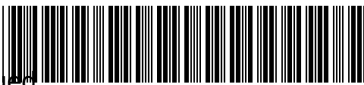
ID Number _____ Issuing state or Country _____ Expiration Date (MMDDYYYY) _____

Joint Account Owner (if applicable):

Government Issue ID: Driver's License/State ID Passport Alien Registration Other

ID Number _____ Issuing state or Country _____ Expiration Date (MMDDYYYY) _____

Acknowledgements and Signatures continued on next page..



Acknowledgements and Signatures continued

Recommending Advisor Information

Is this transaction based on a recommendation by an Ameriprise financial advisor? Yes No

i If yes, provide the Recommending Advisor ID# and Name below if different than Servicing Advisor.

Recommending Advisor Name Advisor ID



It is assumed the Recommending Advisor and Servicing Advisor are the same if the Recommending Advisor is not identified.

Servicing Advisor Information

Servicing Advisor Name Advisor ID

Servicing Advisor Signature Date (MMDDYYYY)

X

Team ID (if applicable) Comp% (if applicable)