Derivatives Account Application

Welcome to the FCM Division of INTL FCStone Financial Inc. and INTL FCStone Markets, LLC. Please review and fill out the following Questionnaire to facilitate completion of the account(s) you wish to open.

Please select the derivatives you wish to trade:
A. Futures & Exchange-Traded Options □
   Fill out Sections I & II
B. Swaps & Over-the-Counter (OTC) Derivatives □
   Fill out Sections I & III
C. Both A & B, □ Fill out Sections I, II & III

Please indicate Applicant’s status:
• Corporation □
• Limited Liability Company □
• Partnership □
• Trust □
• Individual-Joint Account Holders-Sole Proprietorship □

I. Account Application - All Applicants, please fill out the following:
• Account Application
• □ Corporations, Limited Liability Companies, Partnerships & Trusts, Complete Section I.A.
• □ Individuals, Joint Accounts & Sole Proprietorships, Complete Section I.B.
• Select the appropriate Tax Form located at the end of this Account Application.
• Alternatively, check here □ to elect to click on one of the following links to print out, complete and sign the appropriate tax form and include it with your signed Account Application.
  o If Applicant is an entity not formed in the US, please provide the appropriate Form W-8. W-8 Forms and instructions are available at: http://www.irs.gov/uac/Form-W-8,-Certificate-of-Foreign-Status
  o If Applicant is an individual (including individuals opening joint accounts) and a US Citizen or US Resident Alien, please provide Form W-9, available at: http://www.irs.gov/pub/irs-pdf/fw9.pdf
  o If Applicant is an individual (including individuals opening joint accounts) who is not a US Citizen or US Resident Alien, please provide Form W-8BEN, available at: http://www.irs.gov/pub/irs-pdf/fw8ben.pdf
• In addition, depending upon whether you are an individual (or Joint Account Holder or Sole Proprietorship) or a corporate entity, please fill out the following specific pages within the Account Application:
  o Corporations, Limited Liability Companies, Partnerships (General Partnerships, Limited Partnerships and Limited Liability Partnerships) please fill out page 2;
Corporations, Limited Liability Companies, Partnerships please provide your current Board Resolutions or refer to the Sample Board Resolution on pages 11-12 if you determine updated Board Resolutions are required; 

Trusts please fill out page 9;

Individuals, Joint Account Holders or Sole Proprietorship (including multiple individuals that wish to open a joint account) please fill out page 14 and review the Privacy Policy and Opt-out notice.

Check each box that applies to you:

II. Futures & Exchange-Traded Options Documentation

• If you are authorized to trade futures and exchange-traded options:
  o Review all Futures Risk Disclosure Documents and sign the Acknowledgement of Futures Disclosures;
  o Review and sign the Futures & Exchange-Traded Options Customer Agreement;
  o Check here □ if you wish to receive statements and other documents via electronic transmission and review and sign the Request for Electronic Transmission of Customer Statements;
  o Check here □ if you are planning to trade futures or options for hedging purposes, and review and sign the Hedge Confirmation Letter;
  o Check here □ if you wish to sign the Voluntary Arbitration Agreement. It is not a condition to opening an account with the FCM Division of INTL FCStone Financial Inc. that an applicant sign this agreement;
  o Check here □ if your account was introduced to us by an Introducing Broker, and please review and sign the Introducing Broker Authorization.

• Check here □ if you currently have an account with another futures commission merchant that you wish to transfer (positions and related margin) to the FCM Division of INTL FCStone Financial Inc. and complete and sign the Futures Account Transfer Letter & Futures Account Transfer Notice.

• Check here □ if you are domiciled outside the United States and review and sign the Notice to Non-U.S. Customers and the Representation of Ownership and Investment (Non-U.S. Customers).

• Check here □ if you wish to have your trade data for futures, exchange-traded options and exchange-traded FX products distributed to a third party, such as a service provider or commodity trading adviser, and review and sign the Optional Authorization Regarding Trade Data Distribution to a Third Party.

• Check here □ if your account will be managed by a third party and please do the following:
  o Review and sign the Managed Account Agreement – Power of Attorney, and have your account manager do the same.
  o Check here □ if the account manager is a registered commodity trading adviser (CTA) that uses third party service providers for performance calculations, accounting or other services, and review and sign the CTA Data Distribution Agreement for Third Party Service Providers, and have the account manager do the same.
  o Both Applicant and its Account Manager, please review and sign the Third Party Controller Statement.

• Check here □ if you plan to trade swaps and over-the-counter derivatives with INTL FCStone Markets, LLC in addition to futures and exchange-traded options with the FCM Division of INTL FCStone Financial Inc. Please review and sign the Interaffiliate Funds Transfer Letter.
III. Swaps & Over-the-Counter (OTC) Derivatives Documentation

If you are authorized to trade swaps and over-the-counter (OTC) derivatives:

- Review, check the applicable boxes and sign the Eligible Contract Participant Status Form;
- Review all ISDA Swap Disclosure Documents and INTL FCStone Markets, LLC Disclosures;
- Review and choose your election and sign the Election to Receive Pre-Trade Information in Writing and Election Regarding Segregation of Initial Margin;
- Review and sign the Acknowledgement of Swaps Disclosures;
- Review, complete and sign the Additional Agreements consisting of the ISDA 2012 Dodd-Frank Supplement and ISDA 2013 Dodd-Frank Supplement;
- Check here [ ] if you are eligible for the end-user exception to clearing and sign the End User Exception to the Clearing Requirement;
- Review and sign the Additional Agreements and Representations;
- Check here [ ] if you have not already obtained a Legal Entity Identifier (LEI), and review and follow instructions to obtain a Legal Entity Identifier by contacting customerservice@gmeiutility.org;
- You will be supplied with a swap agreement consisting of either (i) the INTL FCStone Markets, LLC Terms of Business or (ii) the ISDA Master Agreement, ISDA Schedules; Acknowledgment of Execution of ISDA Protocols and applicable Credit Support Annex.

If you have questions, please contact the Client Service Center at 1-816-410-7147 or csc@intlfcstone.com
Table of Contents

Derivatives Account Application

Part I.A: Applicants who are Corporations, Limited Liability Companies, Partnerships & Trusts

- General Information .................................................................................................................. 2
- Corporate Structure .................................................................................................................. 2
- Financial Information ............................................................................................................... 3
- Account Information ............................................................................................................... 3
- Managing Entities or General Partner Entities of the Applicant ............................................. 5
- Executives, Officers, Managers, Trusts and General Partners ............................................... 5
- Non-trading Authorized Individuals ....................................................................................... 5
- Authorized Traders .................................................................................................................. 6
- Board of Directors or General Assembly ............................................................................... 6
- Beneficial Owners (Shareholders, Members, General and Limited Partners, Beneficiaries) 7
- Entity Shareholder .................................................................................................................. 7
- Individual Owners ................................................................................................................... 7
- Required Supporting Documents ............................................................................................. 9
- Trustee Certification of Investment Powers ............................................................................ 10
- General Partnership Account Agreement .............................................................................. 11
- Sample Board Resolutions ....................................................................................................... 12

Part I.B: Applicants who are Individuals, Joint Accounts or Sole Proprietorships

- Account Owner Information .................................................................................................... 15
- Second Account Owner (For Joint Account) .......................................................................... 15
- Financial Information ............................................................................................................. 16
- Account Owner Information (For Joint Account) ................................................................. 16
- Second Account Owner Information (For Joint Account) ....................................................... 18
- Joint Account Designation ..................................................................................................... 20
- Sole Proprietorship Acknowledgement ................................................................................. 21
- Privacy Policy and Anti-Money Laundering Notice ................................................................. 22

All Applicants:

- Acknowledgment Form ........................................................................................................... 23
- Tax Forms ............................................................................................................................... 24
Part I.A: Corporations, Limited Liability Companies, Partnerships & Trusts

GENERAL INFORMATION

Full Legal Entity Name:
Taxpayer or Government ID Number:
Registered Address (P.O. Boxes Are Not Allowed):
City:
State/Province:
Zip/Mail Code:
Country:
Contact Name:
Title:
Email:
Business Telephone:
Cell Phone (if applicable):
Web Site Address:

CORPORATE STRUCTURE

1. Is the entity a subsidiary of a larger corporate or conglomerate structure?
   If yes, please provide a copy of your business ownership organizational chart.

2. If the entity is a publicly traded company, please provide the listing exchange and ticker symbol:

3. If any owner of 50% or more of the entity’s outstanding stock is a publicly traded company, please provide the listing exchange and ticker symbol:
FINANCIAL INFORMATION
(Please include financials statements or other supporting documents)

<table>
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<tr>
<th>Annual Revenue from All Sources in U.S. Dollars:</th>
<th>Total Net Worth in U.S. Dollars:</th>
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<tbody>
<tr>
<td>Below $25,000</td>
<td>$25,000 - $50,000</td>
</tr>
<tr>
<td>$25,000 - $50,000</td>
<td>$50,000 - $1,000,000</td>
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<tr>
<td>$50,000 - $100,000</td>
<td>$1,000,000 - $5,000,000</td>
</tr>
<tr>
<td>$100,000 - $250,000</td>
<td>Greater than $5,000,000</td>
</tr>
</tbody>
</table>

If below $25,000 insert amount: $  
If above $5,000,000 insert amount: $  

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<tr>
<th>Available Cash Balances Less Liabilities Payable within 12 months, expressed in U.S. Dollars:</th>
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<tbody>
<tr>
<td>Below $25,000</td>
</tr>
<tr>
<td>$25,000 - $100,000</td>
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<tr>
<td>$100,000-$250,000</td>
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<td>$250,000-$500,000</td>
</tr>
</tbody>
</table>

If below $25,000 insert amount: $  
If above $5,000,000 insert amount: $  

ACCOUNT INFORMATION

1. The Applicant is applying for which type(s) of account(s):  
   □ Futures/Exchange-Traded Options  □ Swaps/OTC Derivatives/FX (ECP Approval Required)

2. Is the Applicant subject to European Market Infrastructure Reporting (EMIR):  □ Yes  □ No

3. All Swap/OTC Derivatives/FX Applicants, supply your Legal Entity Identifier ("LEI"):  

4. Futures/Exchange-Traded Options Applicants who currently have a Legal Entity Identifier ("LEI"), an LEI, supply your LEI:

5. Applicant’s intended purpose and business function:  
   Trading Objective: □ Hedging  □ Speculative

6. Please state Applicant’s investment knowledge and experience:

   TRADING  YEARS  PRODUCTS

   Commodities/Futures
   Securities
   OTC
7. Please state the source of assets used to fund this account: (i.e. business activity, parent guarantee, other).

8. If any person or entity is guaranteeing Applicant’s obligations please provide the above information with respect to such guarantor on a separate sheet of paper.

9. Is any controlling person of the Applicant or any member of its immediate family a current or former political official in any branch of government or affiliated with a government owned enterprise, other than the U.S. government? □ Yes □ No

10. Are there any direct owners of the Applicant that are related to any employee of INTL FCStone Inc. or its subsidiaries? □ Yes □ No - If yes, please list owner and employee name(s):

11. Does the Applicant or any of its affiliates or owners have an account open with INTL FCStone Inc. or its subsidiaries? □ Yes □ No - If yes, please provide the account reference:

12. Is Applicant registered with the Commodities Futures Exchange Commission or any other regulatory body or a member of an exchange? □ Yes □ No - If yes, list regulator and/or exchange and registration number:

13. Is the Applicant soliciting funds for the purpose of investing? □ Yes □ No - If yes, is the Applicant registered as a pool or pool operator with the National Futures Association (“NFA”)? □ Yes □ No

14. Is the Applicant operating pursuant to a registration exemption under the Commodity Exchange Act? □ Yes □ No - If yes, which exemption:

15. Does any unaffiliated person or entity have a financial interest in this account? □ Yes □ No If yes, does the unaffiliated person control trading of this account? □ Yes □ No - If yes, please complete a “Third Party Controller Statement” included in this Application.

16. Has the Applicant or any of its controlling shareholders, officers, directors or any of its affiliates been censured, disciplined or been the subject of a Court Order at the instigation of any regulatory or self-regulatory authority or other business or professional association for breach of any rule of such organization? □ Yes □ No If yes, please explain: (use additional sheet(s) if necessary)

17. Has the Applicant been the subject of a bankruptcy proceeding, receivership or similar action? □ Yes □ No

18. Has the Applicant ever been in a legal dispute, arbitration, or reparations actions related to a commodity account? □ Yes □ No

19. Has the Applicant ever closed an account with an unsatisfied debit balance at a commodity firm? □ Yes □ No
MANAGING ENTITIES OR GENERAL PARTNER ENTITIES OF THE APPLICANT

Please note, you may be required to provide the most recent copy of such entity’s Articles of Incorporation and supporting Ownership documentation.

NAME OF ENTITY: 
TAX ID: 
DATE OF FORMATION: 
ADDRESS: 
CITY: 
STATE/PROVINCE: 
COUNTRY: 
ZIP/MAIL CODE: 

EXECUTIVES, OFFICERS, MANAGERS, TRUSTEES AND GENERAL PARTNERS

Please attach a copy of a valid passport or government issued ID for each individual listed below. Use the first box for the individual authorized to sign all documents and agreements in this Account Application. Use duplicate pages as necessary.

NAME:       NAME: 
TITLE:       TITLE: 
CITIZENSHIP: CITIZENSHIP: 
EMAIL:       EMAIL: 
SIGNATURE:   SIGNATURE: 

NAME: 
TITLE: 
CITIZENSHIP: 
EMAIL: 
SIGNATURE: 

NAME: 
TITLE: 
CITIZENSHIP: 
EMAIL: 
SIGNATURE: 

NAME: 
TITLE: 
CITIZENSHIP: 
EMAIL: 
SIGNATURE: 

NON-TRADING AUTHORIZED INDIVIDUALS

Please list all individuals authorized to wire funds, provide changes in account instructions and information, and for any Authorized Individuals as evidenced in the Board Resolutions of the Applicant. Please attach a valid passport or government issued ID for each individual listed below.
AUTHORIZED TRADERS
Please list all individuals employed by the entity that can provide trading instructions. Individuals not employed by the Customer must be appointed through completion of the Managed Account Agreement – Power of Attorney.

NAME:
DATE OF BIRTH:
CITIZENSHIP:

NAME:
DATE OF BIRTH:
CITIZENSHIP:

NAME:
DATE OF BIRTH:
CITIZENSHIP:

BOARD OF DIRECTORS OR GENERAL ASSEMBLY
Please list all members of the Board of Directors/Governors or General Assembly. No passport or government issued ID required. (Use a separate page if necessary).

NAME:
DATE OF BIRTH:
CITIZENSHIP:

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**BENEFICIAL OWNERS**

**SHAREHOLDERS, MEMBERS, GENERAL AND LIMITED PARTNERS, BENEFICIARIES**

If any individual holds in the aggregate a beneficial interest of ten percent (10%) or more, please list all such individuals below and attach a copy of a valid passport or government issued ID.

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<th>NAME</th>
<th>CITIZENSHIP</th>
<th>ADDRESS</th>
<th>PHONE NUMBER</th>
<th>EMAIL</th>
<th>EMPLOYER</th>
<th>TITLE/POSITION</th>
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**ENTITY SHAREHOLDER**

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<th>TAX ID</th>
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<th>ADDRESS</th>
<th>CITY</th>
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**INDIVIDUAL OWNERS OF THE ENTITY LISTED ABOVE**
If any individual holds in the aggregate a beneficial interest of ten percent (10%) or more, please list all such individuals below and attach a copy of a valid passport or government issued ID.

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**Required Supporting Documents**

1. **EXISTENCE** - Certificate of Incorporation/equivalent, Articles of Incorporation/equivalent (unless publicly traded on a recognized stock exchange), Certificate of Formation/equivalent (unless publicly traded on a recognized stock exchange). For Trusts, a Certificate of Trust and/ or the Trust Agreement.

2. **BENEFICIAL OWNERSHIP** - Stock Ledger or Ownership/Shareholder/Member listing (unless publicly traded on a recognized stock exchange). For Trusts the beneficiary portion of the Trust Agreement.

3. **FINANCIAL CONDITION** - Most recent audited financial statements or interim financial statements as requested.

4. **PHOTO ID OR PASSPORT** - Government-issued photo ID or passport for owners of 10% or more of the entity, directly and indirectly; the officers and executives; and individuals authorized to enter into trades or move funds.

5. **FOR TRUSTEES OF A TRUST** - List all Trustee names and provide the portion of the Trust Agreement that outlines Trustees.

---

*For FCM Division of INTL FCStone Financial Inc. - Internal Use Only*

 Introduced by:

Branch or Introducing Broker (“IB”):

Associated Person (“AP”) Name:  Phone:  Email:
TRUSTEE CERTIFICATION OF INVESTMENT POWERS

In consideration of establishing an account(s) for the Trust designated below, the undersigned Trustee(s) certify as follows:

(1) The full title to the Trust to which the Certificate applies is __________________________ (i.e., John Jones and Sam Smith Trustees for the benefit of Mary Jones)

(2) The date of the Trust is: ________________________

(3) The date of the latest Trust Amendment is: ________________________

(4) There are no Trustees of the Trust other than the undersigned.

(5) The names of the successor trustees, if any, are: ________________________

(6) The Grantors of the Trust are: ________________________

Authorized Individuals

(7) The FCM Division of INTL FCStone Financial Inc. and INTL FCStone Markets, LLC, respectively are authorized to accept orders and other instructions from the following individuals or entities including check-signing and withdrawal privileges, unless their authority is expressly limited on this certification.

<table>
<thead>
<tr>
<th>Name (Please Print)</th>
<th>Relationship to Trust (i.e. Trustee)</th>
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Investments Permitted

(8) We certify that we have the power under the Trust Agreement and applicable law to enter into transactions, both purchases and sales, of the types specified below: (Check types of trading which are permitted):

- Futures & Exchange-Traded Options [___]
- Swaps & OTC Derivatives [___]
- Both [___]

(9) We, the Trustees, jointly and severally, personally and as Trustees, indemnify and hold the FCM Division of INTL FCStone Financial Inc. harmless from any liability for effecting transactions of the types specified above pursuant to instructions given by any of the Authorized Individuals listed under Item Number 7 above.

(10) We agree to inform you in writing of any amendment to the Trust, any change in composition of the Trustees, or any other event which could materially alter the Certifications made above.

Trustees

(11) We hereby certify the undersigned are all of the Trustees:

<table>
<thead>
<tr>
<th>Trustees</th>
<th>Signatures</th>
<th>Address</th>
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ALL TRUSTEES MUST SIGN.

(IF THIS AGREEMENT IS SIGNED BY ONLY ONE INDIVIDUAL, THE INDIVIDUAL’S SIGNATURE SHALL SERVE AS A REPRESENTATION THAT THE SIGNATORY IS THE SOLE TRUSTEE)

ATTACH EXTRA PAGE IF NECESSARY
GENERAL PARTNERSHIP ACCOUNT AGREEMENT

The undersigned being all parties involved in operating a partnership account in the name of ________________, with offices at____________________ (the “Partnership”), and such parties being partners and not joint-tenants, in consideration of the FCM Division of INTL FCStone Financial Inc., its successors and assigns (“FCM”) carrying their Partnership account agree that all individuals below are authorized to act on behalf of the Partnership and all associated commodities transactions conducted through FCM agree to the terms of this General Partnership Account Agreement (“GP Agreement”):

(a) To buy, sell and trade in commodities for present or future delivery, on margin or otherwise, the power to sell, including the power to sell “short”;
(b) To deposit with and withdraw from FCM money, commodities, contracts for purchase or sale of commodities, checks and other negotiable instruments, securities and other property, including withdrawals to or for the individual use or account of the party directing the sale, or of any other party;
(c) To receive and acquiesce in the correctness of notices, confirmations, requests, demands and communications of every kind;
(d) To settle, compromise, adjust, and give releases with respect to any and all claims, demands, disputes and controversies;
(e) To make agreements and take other action relating to any of the foregoing matters.

This enumeration of specific authority shall not, in any way, limit or affect any other authority, which any partner in the Partnership might otherwise have. Each of the undersigned, if General Partners of the Partnership, will enter into a customer agreement, and other necessary forms with FCM no later than the first day of which a purchase or sale is made for the Partnership. The undersigned, if General Partners of the Partnership, are jointly and severally liable to FCM for any and all obligations arising out of transactions herein authorized, and agree to be bound by all terms and conditions of the separate customer agreement signed by each party.

Any and all past transactions of any kind herein authorized which may have been heretofore made by any one or more of the undersigned through or with FCM are hereby ratified. Upon the death of any of the undersigned, FCM is authorized to take such action in regard to the account as FCM may deem advisable to protect FCM against any liability, penalty or loss. The undersigned agree to notify FCM immediately upon the death of any of the undersigned. In the event of death of any of the undersigned, this account shall be closed and the balance remaining paid in the name of and to the Partnership executing this agreement.

Other persons who are over twenty-one (21) years of age and are residents of____________________ may from time to time become General Partners to the Partnership, and upon notification in writing to FCM, their signing a letter evidencing their acknowledgement to be bound by this GP Agreement, and their completion of relevant customer account documents whereby they shall have rights, title and interest in this account as partners, along with the other members of the Partnership.

The undersigned represents and warrants that each one of them is at least twenty-one (21) years of age. Breach of this representation and warranty shall subject all of the undersigned to joint and several liability in the event of any harm or loss to FCM caused by such breach. The authority herein granted is in addition to any other authority given to FCM by any or all of the undersigned, and is continuing, and shall remain in full force and effect until FCM receives written notice of its revocation at its main office.

Executed this _________________ day of ________________ , 20____ by:

Name: _____________________  Address:  _________________________________________
Name: _____________________  Address:  _________________________________________
Name: _____________________  Address:  _________________________________________

The signatures above must include all General Partners of the Partnership. E-mail addresses for all partners should be included on the Authorization for Delivery of Statement by Electronic Media, if applicable.
Instructions: Applicants who have existing Board Resolutions that grant you and your firm authority to invest and transact in Futures, Exchange-Traded Options or Swaps and OTC products, or both are not required to execute this sample resolution. The following sample is provided as a courtesy to supplement existing resolutions, if required. Contact your Account Representative with any questions.

SAMPLE BOARD RESOLUTION

I, _____________________________, Secretary/Manager/General Partner/Trustee/Other (hereafter, “Officer”) of ____________________________________ (“Customer”), a Corporation or Partnership or other entity organized under the laws of the State/Country of __________________________ hereby certify that at a meeting of the Board of Directors/Managing Members/Partners/Managers (the “Board”) held on _________ [date], the following resolutions were duly adopted, have not been amended, rescinded or revoked, and in no way conflict with any provisions of the Articles of Incorporation, Charter, By-Laws, Certificate of Formation, Operating Agreement, Partnership Agreement or other documents of the Customer (“Governing Documents”) or the laws applicable to the Customer.

RESOLVED, Customer has determined that investments and transactions in Swaps and Over-the-Counter (OTC) Products and Futures and Exchange-Traded Options are suitable and appropriate for the Customer;

RESOLVED, Customer has full power and authority under applicable law and its Governing Documents to undertake investments and transactions in either or both, as marked below, and to establish accounts, and execute agreements and related documentation in furtherance of undertaking such transactions, as indicated by checking the following applicable box or boxes, at Customer’s sole election:

(a) Swaps and Over-the-Counter (OTC) Products:

☐ Swap and over-the-counter (OTC) or cleared derivatives in all product classes, including caps, floors, collars, and options and any other products defined by US or non-US regulations as a “swap,” including “foreign exchange swaps” and “foreign exchange forwards” (collectively, “Swap Transactions”).

(b) Futures and Exchange-Traded Options:

☐ Futures and Exchange-traded Options on such Futures for the purchase, sale and delivery of commodities, options to purchase or sell commodities or contracts for the future delivery of commodities, forward contracts and instruments regulated as Futures (collectively, “Futures and Options Contracts”).

(c) To deposit with and withdraw money, commodities, contracts for the purchase or sale of commodity futures and options on such futures, checks and other negotiable instruments, securities and other property;

(d) To settle, compromise, adjust, and give releases with respect to any and all claims, demands, disputes and controversies and make agreements and take any other action relating to any of the foregoing matters.
RESOLVED: The Officers of the Customer together with the following individuals [________________________],
[________________________________] [________________________] (including, if applicable, additional individuals
listed on a separate form executed by a duly authorized Officer of the Customer) are authorized to carry out all of the
powers set forth herein, and bind the Customer to transactions and agreements (collectively, the “Authorized
Individuals”), until Customer issues written revocation instructing that a previously Authorized Individual(s) is no longer
authorized by Customer to act and confirms such revocation is received by you.

RESOLVED: The Officers of the Customer and its Authorized Individuals are authorized to give oral or written instructions
on behalf of Customer in furtherance of purchases, sales, delivery of property, or all other transactions required to
consummate transactions and agreements contemplated herein to the fullest extent and to take all actions necessary or
desirable in connection with any Customer account, to receive requests and demands for additional margin, notices of
intention to sell or purchase any instrument and other notices and demands of whatever nature and to receive and
acquiesce in the correctness of notices, statements of account and other records and documents relating to transactions
in the account(s). This enumeration of specific authority shall not limit any other authority of the Authorized Individuals.

RESOLVED: Each of the Authorized Individuals are empowered to borrow money, securities, or commodities and to
secure repayment thereof with property of the Customer; and to bind and obligate the Customer to carry out any
contract, agreement, or transaction involving such sums as may such Authorized Individual determines are necessary in
connection with any of the said accounts; to deliver securities and contracts for future delivery; to order the transfer or
delivery thereof to any other person or entity whatsoever.

RESOLVED: Each of the Authorized Individuals are empowered to endorse any securities or contracts in order to pass
title thereto; to sign for the Customer all agreements, supplemental forms, acknowledge risk disclosures and receive
other disclosures, releases, powers of attorney or other documents in connection with Customer’s account(s), and to
agree to any terms or conditions to control such account(s); to direct any swap dealer or futures commission merchant
or counterparty to surrender any securities to the proper agent or party for the purpose of effecting any exchange or
conversion, or for the purpose of deposit or otherwise; to accept delivery of any securities or commodities against a
contract for future delivery, option or otherwise; and to appoint any other person or persons to do any and all things
which any of the said Authorized Individuals are hereby authorized to do.

RESOLVED: That any and all past transactions of any kind herein authorized, which may have been heretofore had on
behalf of Customer through or with the recipient swap dealer or futures commission merchant of this resolution be, and
hereby are, ratified.

RESOLVED: These resolutions shall remain in full force until revoked in writing, in whole or in part, by an Authorized
Individual of the Customer.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed the seal of said company,

Customer Name: ________________________
Signature: ______________________________  Date: __________________
FCM Division of INTL FCStone Financial Inc. & INTL FCStone Markets, LLC

Derivatives Account Application

Part I.B: Individuals, Joint Accounts or Sole Proprietorships
# Part I.B: Individual & Joint Accounts or Sole Proprietorships

## ACCOUNT OWNER INFORMATION

<table>
<thead>
<tr>
<th>Individual</th>
<th>Joint*</th>
<th>Sole Proprietorship**</th>
</tr>
</thead>
</table>

*If a Joint Account, please fill out the Joint Account Designation Form. **If a Sole Proprietorship, fill out the Sole Proprietorship Acknowledgement.

Check one: U.S. Citizen      U.S. Resident Alien        Non-Resident Alien (resident outside the U.S.)

Customer Name:
Registered Address (P.O. Boxes Are Not Allowed):
City: __________________ State/Province: __________________ Zip/Mail Code: ___________________
Country:
Employer Name:
Title:
Years There:
Business Telephone:
Cell Phone (if applicable):
Email Address:
Social Security Number:
Date of Birth:
If Foreign Individual, please provide your country of citizenship Driver’s License Passport # alien identification card #

## SECOND ACCOUNT OWNER (FOR JOINT ACCOUNT)

Check one: U.S. Citizen      U.S. Resident Alien        Non-Resident Alien (resident outside the U.S.)

Customer Name:
Registered Address (P.O. Boxes Are Not Allowed):
City: __________________ State/Province: __________________ Zip/Mail Code: ___________________
Country:
Employer Name:
Title:
Years There:
Business Telephone:
Cell Phone (if applicable):
Email Address:
Social Security Number:
Date of Birth:
If Foreign Individual, please provide your country of citizenship Driver’s License Passport # alien identification card #
**FINANCIAL INFORMATION**

<table>
<thead>
<tr>
<th>Annual Revenue from All Sources in U.S. Dollars:</th>
<th>Total Net Worth in U.S. Dollars:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Below $25,000</td>
<td>$250,000 - $500,000</td>
</tr>
<tr>
<td>$25,000 - $50,000</td>
<td>$500,000 - $1,000,000</td>
</tr>
<tr>
<td>$50,000 - $100,000</td>
<td>$1,000,000 - $5,000,000</td>
</tr>
<tr>
<td>$100,000 - $250,000</td>
<td>GREATER THAN $5,000,000</td>
</tr>
<tr>
<td>If below $25,000 insert amount: $</td>
<td>If below $100,000 insert amount: $</td>
</tr>
<tr>
<td>If above $5,000,000 insert amount: $</td>
<td>If above $5,000,000 insert amount: $</td>
</tr>
</tbody>
</table>

**Available Cash Balances Less Liabilities Payable within 12 months, expressed in U.S. Dollars:**

| Below $25,000 | $500,000 - $1,000,000 |
| $25,000 - $100,000 | $1,000,000 - $5,000,000 |
| $100,000 - $250,000 | GREATER THAN $5,000,000 |
| $250,000 - $500,000 |
| If below $25,000 insert amount: $ | If above $5,000,000 insert amount: $ |

**ACCOUNT OWNER INFORMATION**

1. The Applicant is applying for which type(s) of account(s):
   - Futures/Exchange-Traded Options
   - Swaps/OTC Derivatives/FX (ECP Approval Necessary – (Personal Financials Required)

2. What is the Applicant’s intended purpose and business function:
   - Trading Objective: □ Hedging  □ Speculative

3. Please state Applicant’s investment knowledge and experience:
   - TRADING YEARS PRODUCTS
   - Futures/Commodities
   - Securities
   - OTC

4. Please state the source of assets used to fund this account (i.e. business activity, parent guarantee, other):
5. If any person or entity is guaranteeing Applicant’s obligations, please provide the above information with respect to such guarantor on a separate sheet of paper.

6. Is any controlling person of the Applicant or any member of its immediate family a current or former political official in any branch of government or affiliated with a government owned enterprise, other than the U.S. Government?  
☐ Yes  ☐ No

7. Is the Applicant or any member of its immediate family an employee of, or related to an employee of the FCM Division of INTL FCStone Financial Inc., FCStone Inc. or its subsidiaries?  
☐ Yes  ☐ No - If yes, please list owner and employee name(s):

8. Does the Applicant or any of its affiliates or owners have an account open with INTL FCStone, Inc. or its subsidiaries?  
☐ Yes  ☐ No - If yes, please provide the account number:

9. Is the Applicant registered with the Commodities Futures Exchange Commission (“CFTC”) or any other regulatory body or a member of an exchange?  
☐ Yes  ☐ No - If yes, please list regulator and/or exchange and registration number:

10. Is the Applicant soliciting funds for the purpose of investing?  
☐ Yes  ☐ No  
If yes, is the Applicant registered as a pool or pool operator with the National Futures Association (“NFA”)?  
☐ Yes  ☐ No

11. Is the Applicant operating pursuant to a registration exemption under the Commodity Exchange Act?  
☐ Yes  ☐ No - If yes, which exemption:

12. Does any unaffiliated person or entity have a financial interest in this account?  
☐ Yes  ☐ No  
If yes, does any unaffiliated person control trading of this account?  
☐ Yes  ☐ No  
If yes, please complete a “Third Party Controller Statement” included in this Application.

13. Has the Applicant ever been the subject of a bankruptcy proceeding, receivership, or similar action?  
☐ Yes  ☐ No

14. Has the applicant been in a legal dispute, arbitration, or reparations action related to a commodity account?  
☐ Yes  ☐ No

15. Has the applicant ever closed an account with an unsatisfied debit balance at a commodity firm?  
☐ Yes  ☐ No
SECOND ACCOUNT OWNER INFORMATION (FOR JOINT ACCOUNT)

1. The Applicant is applying for which type(s) of account(s):
   - [ ] Futures/Exchange-Traded Options
   - [ ] Swaps/OTC Derivatives/FX (ECP Approval Necessary – (Personal Financials Required)

2. What is the Applicant’s intended purpose and business function: Trading Objective: [ ] Hedging [ ] Speculative

3. Please state Applicant’s investment knowledge and experience:
   - TRADING YEARS PRODUCTS
     - Commodities
     - Securities
     - OTC

4. Please state the source of assets used to fund this account (i.e. business activity, parent guarantee, other):

5. If any person or entity is guaranteeing Applicant’s obligations, please provide the above information with respect to such guarantor on a separate sheet of paper.

6. Is any controlling person of the Applicant or any member of its immediate family a current or former political official in any branch of government or affiliated with a government owned enterprise, other than the U.S. Government? [ ] Yes [ ] No

7. Is the Applicant or any member of its immediate family an employee of, or related to an employee of the FCM Division of INTL FCStone Financial Inc., FCStone Inc. or its subsidiaries? [ ] Yes [ ] No - If yes, please list owner and employee name(s):

8. Does the Applicant or any of its affiliates or owners have an account open with INTL FCStone, Inc. or its subsidiaries? [ ] Yes [ ] No - If yes, please provide the account number:

9. Is the Applicant registered with the Commodities Futures Exchange Commission (“CFTC”) or any other regulatory body or a member of an exchange? [ ] Yes [ ] No - If yes, please list regulator and/or exchange and registration number:

10. Is the Applicant soliciting funds for the purpose of investing? [ ] Yes [ ] No - If yes, is the Applicant registered as a pool or pool operator with the National Futures Association (“NFA”)? [ ] Yes [ ] No

11. Is the Applicant operating pursuant to a registration exemption under the Commodity Exchange Act? [ ] Yes [ ] No - If yes, which exemption:

12. Does any unaffiliated person or entity have a financial interest in this account? [ ] Yes [ ] No
    If yes, does any unaffiliated person control trading of this account? [ ] Yes [ ] No
    If yes, please complete a “Third Party Controller Statement” included in this Application.
13. Has the Applicant been the subject of a bankruptcy proceeding, receivership, or similar action? □ Yes □ No

14. Has the applicant been in a legal dispute, arbitration, or reparations action related to a commodity account? □ Yes □ No

15. Has the applicant ever closed an account with an unsatisfied debit balance at a commodity firm? □ Yes □ No
Joint Account Designation

As a joint account, each individual is authorized to transmit and receive communications from the FCM Division of INTL FCStone Financial Inc. when acting in its capacity as a futures commission merchant (“FCM”) in all respects; and all liabilities shall in all respects, be Joint and Several. FCM may, upon the request of either individual remit, disburse or transfer any property to either respective individual, without obligation to inquire and without liability relating to, or arising out of, any such transfer, disbursement or remittance. The survivor shall immediately give FCM notice in the event of death of either respective individual, but such event shall not extinguish the liability of the deceased's estate to FCM.

In addition, the undersigned individuals represent that they have consulted with their own legal counsel concerning the manner in which this account should be held.

Please mark the appropriate choice below:

<table>
<thead>
<tr>
<th>Joint Tenants with Rights of Survivorship</th>
<th>Tenants-In-Common</th>
</tr>
</thead>
<tbody>
<tr>
<td>It is our intention to create an account as joint tenants with rights of survivorship. In the event of the death of either individual listed below, ownership interest in the joint account shall automatically be vested in the name of the survivor:</td>
<td>It is our intention to create an account as tenants-in-common; not as joint tenants and without rights of survivorship. In the event of the death of either individual listed below, ownership interest in the account shall be allocated in the following percentages, as of the close of business on the date of death:</td>
</tr>
<tr>
<td>__________________________________________________________________________</td>
<td>__________________________________________________________________________</td>
</tr>
<tr>
<td>____________________________</td>
<td>____________________________</td>
</tr>
<tr>
<td>Ownership %</td>
<td>Ownership %</td>
</tr>
<tr>
<td>Signature: Account Owner</td>
<td>Signature: Account Owner</td>
</tr>
<tr>
<td>____________________________</td>
<td>____________________________</td>
</tr>
<tr>
<td>Ownership %</td>
<td>Ownership %</td>
</tr>
<tr>
<td>Signature: Second Account Owner</td>
<td>Signature: Second Account Owner</td>
</tr>
</tbody>
</table>

(Only the names and percentages of the present owners of the account should be listed. DO NOT designate heirs or beneficiaries)
Sole Proprietorship Acknowledgment

To: FCM Division of INTL FCStone Financial Inc.

I, ____________________________, am currently doing business as

(Print individual’s name)

______________________________, a sole proprietorship.

(Print sole proprietorship’s name)

My business is not operated as a Corporation, Partnership, Limited Liability Company, Trust or other form of entity. Furthermore, I hereby verify that if I choose to convert this business into a formal entity, I shall notify the FCM Division of INTL FCStone Financial Inc. prior to any such conversion.

______________________________  __________________________
Signature  Date

______________________________
Printed Name
PRIVACY POLICY AND ANTI-MONEY LAUNDERING NOTICE

The FCM Division of INTL FCStone Financial Inc. and INTL FCStone Markets, LLC and its affiliates value its customer relationships. To provide consumers with financial products and services, we collect nonpublic personal information about you, including your name, address, age, date of birth, email address, occupation, employment information, telephone number, education, the kind of services provided to you, bank account and other financial information, and information about our transactions with you. We pledge to protect that information and ensure that it remains private. Pursuant to 17 C.F.R. Part 160, we provide the following notice to customers who establish an account primarily for personal, family, or household purposes. We collect nonpublic personal information about consumers from the following sources:

- Information we receive on applications or other forms including, but not limited to, a consumer’s social security number;
- Information from communication and interactions that we have with you;
- Information about transactions with us, our affiliates, or others;
- Information from third parties who provide consumer information or verify customer relationships; and
- Information we receive from consumer reporting agencies.

We may disclose the information we collect to companies that perform services on our behalf, our affiliated entities and other financial institutions with whom we have execution or clearing agreements, in order to provide you with the products and services you request from us. We may also disclose information to reporting agencies, self-regulatory organizations and governmental entities, to the extent we are required to do so by law. We restrict access to nonpublic personal information about you to those of our employees who need to know that information to provide products or services to you. We maintain electronic copies of this information on secure servers, and paper copies in our secured offices. 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 and maintains an account. When you establish an account, we will ask for your name, address, date of birth and other information to allow us to identify you. We may also ask for a copy of your driver’s license or other identification. Affiliated entities with whom we share information may use this information to make solicitations for marketing purposes. If you have any questions about this Notice, please call +1 800-422-3087 or write us at INTL FCStone Inc., Attention: Corporate Counsel, 2829 Westown Parkway, Suite 100, West Des Moines, IA 50266.

Information Sharing Opt Out
If you do not wish to have your information shared for marketing purposes, please email compliance@intlfcstone.com listing your name, account number(s) with phone number where you can be reached or call +1 866-233-6806 or complete this form and mail it back to: INTL FCStone Financial Inc., FCM Division, Attn: Compliance Department, 230 S. LaSalle Street Suite 10-500- Chicago, IL 60604.

Account Name: ______________________ Account Number(s): __________
Signature ___________________________ Print name of Account Holder: __________
**Acknowledgment Form** - To be completed by All Applicants

The undersigned Applicant or agent acting on behalf of the Applicant (the “Customer”), acknowledges that the FCM Division of INTL FCStone Financial Inc. and INTL FCStone Markets, LLC respectively, are relying on the information herein as the basis of establishing one or more Customer accounts. The undersigned certifies, represents and warrants that all information, including audited or unaudited financials, or Applicants who fill out the income and net worth information in this Account Application and all other information provided is true and accurate.

If the Applicant becomes aware of any false statement or failure to state a material fact in this Account Application or the Agreements to which this Account Application relates and incorporates by reference, or if information contained in this Account Application and such Agreements subsequently changes, Applicant shall immediately notify the FCM Division of INTL FCStone Financial Inc. and INTL FCStone Markets, LLC respectively.

Check here ☐ if you are an Individual or Joint Account Applicant. Individual or Joint Account Applicants agree to provide combined information, and represent and warrant that documents comprising their financial information and statements have been prepared in accordance with accounting principles generally accepted in their country of organization, are complete and not misleading.

Check here ☐ if you are a Sole Proprietorship. Sole Proprietorships not registered as a Corporation, Partnership, Limited Liability Company, Trust or other entity as of the execution of this Account Application agree to notify the FCM Division of INTL FCStone Financial Inc. and INTL FCStone Markets, LLC respectively, 30 days in advance should they decide to convert their current business to an entity.

Print Applicant Name
X _____________________________________________________
X_____________________________________________________/___________/___________
Authorized Signature       Date

Joint Account Holders, sign here:
Print Applicant Name
X _____________________________________________________
X_____________________________________________________/___________/___________
Authorized Signature       Date
**Tax Forms** - To be completed by All Applicants

Please refer to the PDF Tax Forms that have been supplied to you, unless you prefer to launch the relevant Tax Form from one of the IRS links located on page (i) of this Account Application.