



Southwest Securities, Inc. and/or Broker/Dealers for which it clears
 Southwest Securities, Inc. Member NYSE/FINRA/SIPC

New Account
 Update

New Account Application Addendum

For those not listed as a primary or secondary accountholder on the primary application the following must be filled out in full by each beneficial owner with an interest of 10% or more and each person with trading authorization. Please use a separate Addendum for each listed below noting their interest or capacity (i.e. John Smith - President):

1)	2)	3)
4)	5)	6)

1. Account Registration.

Entity Name: _____

Individual's Capacity with Entity (Trustee, Partner, Officer, Director, Shareholder, etc.) _____

2. Account Title.

Full Name of Applicant/Custodian (First, Middle, Last) _____		Social Security #/Tax ID # _____	Date of Birth _____
Home Address (P.O. Box unacceptable) _____	City _____	State/Province _____	Country _____ Zip _____
Mailing Address (P.O. Box acceptable if physical address provided above) _____	City _____	State/Province _____	Country _____ Zip _____
Home Phone Number _____	Business Phone Number _____	Fax Number _____	Email Address _____

3. Verification Information.

IMPORTANT INFORMATION ABOUT OPENING A NEW ACCOUNT

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 account, we will ask 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.

Driver's License Passport/Visa Other _____ Issuer: _____

ID Number: _____ Issue Date: _____ Expiration Date: _____

4. Client Profile.

Marital Status: Single Married Divorced Widowed Number of Dependents: _____ Country of Citizenship: _____

Citizenship Status: U.S. Citizen Resident Alien Non-Resident Alien (If a Non-Resident Alien, you must provide a valid government-issued picture ID, presented prior to the opening of the account.)

Employer (If self-employed, please specify name of business.) _____	Occupation _____	Business Telephone _____
Employer's Street Address _____	City _____	State/Province _____ Country _____ Zip _____
Estimated Net Worth: _____	Annual Income: _____	

5. Affiliations.

Yes No Are you employee of or affiliated with a securities firm, exchange or any of its affiliated companies? (If yes, please specify the company name and address to which duplicate statements and confirmations should be sent.) _____

Yes No Are you a director, officer, or 10% shareholder of any publicly traded company? (If yes, please specify company name and symbol.) _____

Yes No Are you or any member of your immediate family, personal or business associate a senior political figure (SPF). (If yes, please specify the name of the SPF, political title, relationship to account owner and country of office.) _____

X _____
 Applicant's Signature Date