

Investment Advisor ("IA") Information (This portion to be completed by IA.)

IA Firm Name (please print): _____
 IA Master Account Number: _____ Service Team: _____

Please note: This addendum is valid only when attached to a completed Schwab Institutional® account application or form.

Account Holder Name: _____
 (As listed on account application or form)

Additional Account Holder/Co-Trustee*/Custodian*/Co-Executor

First Name _____ Middle _____ Last _____ Are you known by another name? (Specify) _____

Home Street Address (no P.O. boxes, please) _____ City _____ State _____ Zip Code _____

Social Security/Tax ID Number _____ Date of Birth (mm/dd/yyyy) _____ Home Telephone Number _____ Business Telephone Number _____ Cellular Telephone Number _____

USA Other _____ Other _____ USA Other _____

Country(ies) of Citizenship (Must list all. If not a U.S. citizen, please complete identification information below.) _____ Country of Legal Residence _____

Passport U.S. Driver's License U.S. Gov't Issued ID _____

Identification Type (Complete only if not a U.S. citizen.) _____ Identification Number _____ Place of Issuance _____ Issue Date _____ Expiration Date _____

Employed Retired Self-Employed Non-Employed _____

Employer Name/Industry (If self-employed, indicate nature of business.) _____ Occupation/Position _____ Employment Status _____

Business Street Address (no P.O. boxes, please) _____ City _____ State _____ Zip Code _____

I am employed by, affiliated with, or am either a director or owner of one or more securities firms. Yes* No If yes, list _____
 (Company Symbol, e.g., SCHW, or Company Name)

I am a director, 10% shareholder or policy-making officer of one or more publicly traded companies. Yes No If yes, list _____
 (Company Symbol, e.g., SCHW)

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*If listed on account registration.

†Applies only if account is a Custodial IRA.

*Attach a written consent from your employer if employed by a securities firm.



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†Attach a written consent from your employer if employed by a securities firm.