

# Brokerage Trading Authorization



Use this form to specify trading authorization for an agent.

- Please complete this form and return it to American Century Investments®.
- If you are a New York resident, please contact an Investment Specialist for the correct trading authorization form.
- Please keep a copy of this form for your records.

## 1 Provide Your Account Number

If a new account, please leave blank.

4MV-

## 2 Select Your Trading Authorization

Please choose one.

- I authorize an agent to trade limited to purchases and sales of securities.
- I authorize an agent to fully trade with privileges to withdraw money and/or securities. (This option is not available for UGMA/UTMAs.) For your agent to sign CheckWriting checks on your behalf, please complete a *Brokerage CheckWriting Service Authorization* form.

## 3 Designate Your Agent and Read Authorization

The undersigned hereby authorizes and appoints

Authorized agent's name

as his or her agent and attorney-in-fact ("the agent") to buy, sell and trade in stocks, bonds, options contracts, precious metals and any other securities and/or contracts relating to the same on margin or otherwise in accordance with American Century Brokerage terms and conditions for the undersigned's account and risk and in the undersigned's name or number on your books. The undersigned hereby agrees to indemnify and hold American Century Brokerage harmless from, and to pay American Century Brokerage promptly, on demand for any and all losses arising therefrom or debit balance due thereon.

**For agents authorized to trade limited to purchases and sales of securities, the following applies:**

In all such purchases, sales or trades, American Century Brokerage is authorized to follow the instructions of the agent in every respect concerning the undersigned's account; and the agent is authorized to act for the undersigned and in the undersigned's behalf in the same manner and with the same force and effect as the undersigned might or could do with respect to such purchases, sales, or trades, as well as with respect to all other things necessary or incidental to the furtherance or conduct of such purchases, sales or trades.

**For agents authorized to fully trade with privileges to withdraw money and/or securities, the following applies:**

American Century Brokerage is hereby authorized to follow the instructions of the agent in every respect concerning the undersigned's account and make deliveries of securities and payment of monies to any one or more persons (specifically the agent himself or herself) as he or she may order and direct. In all matters and things aforementioned, as well as in all other things necessary or incidental to the furtherance or conduct of the account of the undersigned, the agent and attorney-in-fact is authorized to act for the undersigned and in the undersigned's behalf in the same manner and with the same force and effect as the undersigned might or could do.

**Step 3 continued on page 2**

## Designate Your Agent and Read Authorization (continued)

---

**For agents authorized to trade limited to purchases and sales of securities or agents authorized to fully trade with privileges to withdraw money and/or securities, the following applies:**

The undersigned hereby ratifies and confirms any and all transactions with you heretofore or hereafter made by the aforesaid agent for the undersigned's account.

This authorization and indemnity is in addition to (and in no way limits or restricts) any rights which American Century Brokerage may have under any other agreement or agreements between the undersigned.

This authorization and indemnity also is a continuing one and shall remain in full force and effect until actual receipt of written notice of its revocation by American Century Brokerage. This authorization and indemnity shall inure to the benefit of American Century Brokerage and any successors or assigns, irrespective of any change or changes at anytime in the personnel thereof for any cause whatsoever.

### 4 Sign Your Name

---

 Printed name of owner

Signature of owner

Date

 Printed name of joint owner, if applicable

Signature of joint owner

Date

**Acknowledgement — This section must be completed by a notary public.**

State of \_\_\_\_\_ County of \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, appeared before me in person, the person whose signature appears above, to me personally known to be the person who executed the above foregoing consent and acknowledged to me that (s)he executed the same as his or her own free act and deed and for the purpose therein stated.

Notary public's signature (Seal)

Commission expires (month-day-year)

### 5 Provide Affiliation/Institutional Account Information

---

**We are required to have all questions below answered before we can add the agent to this account.**

Is the agent employed by or affiliated with another Broker Dealer, an exchange or FINRA, including American Century Investments?

Yes  No If yes, list company name, position, affiliation and address below. A letter and duplicate statements will be sent to the employer in accordance with current regulations.

Company name

Position

Address

Affiliation firm, exchange or FINRA

Is the agent a registered investment advisor?

Yes  No If yes, list company name, position, affiliation and address.

Company name

Position

Address

Affiliation firm, exchange or FINRA

**Step 5 continued on page 3**

## Provide Affiliation/Institutional Account Information (continued)

---

Is the agent a natural person, corporation, partnership, trust or otherwise, with total assets of at least \$50 million?

Yes  No If yes, list name of person/company name, position, affiliation and address.

---

Name of person/company name	Position	Address
-----------------------------	----------	---------

---

Affiliation firm, exchange or FINRA

Is the agent a director, a 10% shareholder or policy-making executive of a publicly traded company?

Yes  No If yes, list company name, position, affiliation and address below. American Century Investments will not monitor or restrict account trading. It is the responsibility of the account owner and agent to monitor trading to ensure adherence to all applicable trading regulations.

---

Company name	Position	Address
--------------	----------	---------

---

Affiliation firm, exchange or FINRA

Is the agent a large trader?

Yes  No If yes, provide the agent's large trader identification (LTID) number: \_\_\_\_\_  
LTID No.

## **6** Provide Authorized Agent's Signature

---



---

Printed name of authorized agent	Agent's U.S. Social Security number
----------------------------------	-------------------------------------

---



---

Signature of authorized agent	Date
-------------------------------	------

---

