

Associated Person/Owner Account Worksheet

Internal Use Only

Sub Firm #	BR Code	FA Code	Account Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

(Office Use Only)

Associated Person/Owner Information – 1				Launch Page	
Salutation		Name		Customer Identity Verification	
Additional Name				Does FA have an existing or previous relationship with this person?	
				<input type="checkbox"/> Yes <input type="checkbox"/> No (If "No," please complete section A-E below)	
Legal Address (Legal address cannot be P.O. Box)				A-Government ID Type	B-Government ID Number
City		State	Zip+4	C-Date of Issue	D-Date of Expiration
Home Phone		Business Phone		E-Place of Issue	SSN
Fax Number		Other Phone		Enroll in Online Brokerage? <input type="checkbox"/> Yes <input type="checkbox"/> No	
DOB				If "Yes," client email address:	
Country of Citizenship/ Registration		State of Registration	Permanent Resident?		
			<input type="checkbox"/> Yes <input type="checkbox"/> No		

FINRA Insider Identification	Employment Information			
<input type="checkbox"/> Customer not associated with FINRA firm <input type="checkbox"/> U - Associate of introducing firm and/or dependents, family members <input type="checkbox"/> V - Non-dependent family members of an associate of introducing firm <input type="checkbox"/> W - Employees or brokers of other registered broker-dealer firms, their dependent accounts and accounts in which they have a financial or beneficial control or interest Indicate Name of other registered broker-dealer firm _____ <input type="checkbox"/> Y - Associates of Wells Fargo & Company, their spouse, dependent children, or any other person who is supported directly or indirectly to a material extent by the associate <input type="checkbox"/> Z - Non-dependent immediate family members of an associate of Wells Fargo & Company	Occupation Description		Employer	
	Business Nature		Position	
	Employer Address			
	City		State	Zip +4
	Country		Employer Phone	Years at Current Employer

Person of Interest/High Risk Indicators			
U.S. Non-Individual (Select up to 5 indicators that apply to this account owner.)	<input type="checkbox"/> CASINO (5B) <input type="checkbox"/> GEM/PREC MTL DLRS (5C) <input type="checkbox"/> GUN DLR/FIREARMS (5E)	<input type="checkbox"/> MONEY SERVICE BUS (5D) <input type="checkbox"/> FOREIGN NGO (5F) <input type="checkbox"/> PEP-FOREIGN (5G)	<input type="checkbox"/> TRAVEL AGENT (5A) <input type="checkbox"/> NOT APPLICABLE (00)
U.S. Individual (Select all that apply.)	<input type="checkbox"/> PEP (3A)	<input type="checkbox"/> NOT APPLICABLE (00)	
Foreign Non-Individual (Select up to 5 indicators that apply to this account owner.)	<input type="checkbox"/> CASINO (6B) <input type="checkbox"/> FFI (6L) <input type="checkbox"/> FOR FIN INTERMEDIARY (6M) <input type="checkbox"/> FOR OPERATING CO (6G)	<input type="checkbox"/> FOR PERS INV/HOLDING CO (6H) <input type="checkbox"/> FOREIGN TRUST (6I) <input type="checkbox"/> GEM/PREC MTL DLRS (6C) <input type="checkbox"/> GUN DLR/FIREARMS (6F)	<input type="checkbox"/> MONEY SERVICE BUS (6D) <input type="checkbox"/> FOREIGN NGO (6K) <input type="checkbox"/> PEP-FOREIGN (6N) <input type="checkbox"/> TRAVEL AGENT (6A) <input type="checkbox"/> NOT APPLICABLE (00)
Foreign Individual (Select all that apply.)	<input type="checkbox"/> FOR FIN INTERMEDIARY (3B)	<input type="checkbox"/> PEP-FOR (3A)	<input type="checkbox"/> NON-RESIDENT ALIEN (3C) <input type="checkbox"/> NOT APPLICABLE (00)

Rule 144: Is authorized person, or member of their immediate family a director, policymaking officer, or 10% stockholder in any publicly traded company?
 Y N If "Yes," Indicate Ticker Symbol, CUSIP, or Name: _____

Associated Person/Owner Information – 2				Launch Page	
Salutation		Name		Customer Identity Verification	
Additional Name				Does FA have an existing or previous relationship with this person?	
				<input type="checkbox"/> Yes <input type="checkbox"/> No (If "No," please complete section A-E below)	
Legal Address (Legal address cannot be P.O. Box)				A – Government ID Type	B – Government ID Number
City		State	Zip+4	C – Date of Issue	D – Date of Expiration
Home Phone		Business Phone		E – Place of Issue	SSN
Fax Number		Other Phone		Enroll in Online Brokerage? <input type="checkbox"/> Yes <input type="checkbox"/> No	
DOB				If "Yes," client email address:	
Country of Citizenship/Registration		State of Registration	Permanent Resident?		
			<input type="checkbox"/> Yes <input type="checkbox"/> No		

Associated Person/Owner Information – 2 (Continued)				
FINRA Insider Identification		Employment Information		
<input type="checkbox"/> Customer not associated with FINRA firm <input type="checkbox"/> U - Associate of introducing firm and/or dependents, family members <input type="checkbox"/> V - Non-dependent family members of an associate of introducing firm <input type="checkbox"/> W - Employees or brokers of other security firms, their dependent accounts and accounts in which they have a financial or beneficial control or interest <input type="checkbox"/> Y - Associates of Wells Fargo & Company, their spouse, dependent children, or any other person who is supported directly or indirectly to a material extent by the associate <input type="checkbox"/> Z - Non-dependent immediate family members of an associate of Wells Fargo & Company		Occupation Description	Employer	
		Business Nature	Position	
		Employer Address		
		City	State	Zip+4
		Country	Employer Phone	
			Years at Current Employer	
Person of Interest/High Risk Indicators				
U.S. Non-Individual (Select up to 5 indicators that apply to this account owner.)	<input type="checkbox"/> CASINO (5B) <input type="checkbox"/> GEM/PREC MTL DLRS (5C) <input type="checkbox"/> GUN DLR/FIREARMS (5E)	<input type="checkbox"/> MONEY SERVICE BUS (5D) <input type="checkbox"/> FOREIGN NGO (5F) <input type="checkbox"/> PEP-FOREIGN (5G)	<input type="checkbox"/> TRAVEL AGENT (5A) <input type="checkbox"/> NOT APPLICABLE (00)	
U.S. Individual (Select all that apply.)	<input type="checkbox"/> PEP (3A)	<input type="checkbox"/> NOT APPLICABLE (00)		
Foreign Non-Individual (Select up to 5 indicators that apply to this account owner.)	<input type="checkbox"/> CASINO (6B) <input type="checkbox"/> FFI (6L) <input type="checkbox"/> FOR FIN INTERMEDIARY (6M) <input type="checkbox"/> FOR OPERATING CO (6G)	<input type="checkbox"/> FOR PERS INV/HOLDING CO (6H) <input type="checkbox"/> FOREIGN TRUST (6I) <input type="checkbox"/> GEM/PREC MTL DLRS (6C) <input type="checkbox"/> GUN DLR/FIREARMS (6F)	<input type="checkbox"/> MONEY SERVICE BUS (6D) <input type="checkbox"/> FOREIGN NGO (6K) <input type="checkbox"/> PEP-FOREIGN (6N) <input type="checkbox"/> TRAVEL AGENT (6A)	
Foreign Individual (Select all that apply.)	<input type="checkbox"/> FOR FIN INTERMEDIARY (3B)	<input type="checkbox"/> PEP-FOR (3A)	<input type="checkbox"/> NON-RESIDENT ALIEN (3C) <input type="checkbox"/> NOT APPLICABLE (00)	
Non-Individual Account Owner				
Exchange Name	Country of Exchange	Exchange Description		
Sales Market	Sales Market State(s)	Sales Market Country(ies)		
Business Type:				
<input type="checkbox"/> Corporation <input type="checkbox"/> Govt. Unit or Agency <input type="checkbox"/> Indian Tribal Govt. <input type="checkbox"/> Limited Liability Co. <input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Limited Partnership <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Trust Co. <input type="checkbox"/> Unicorp Assn./Social/Rec/Civic Group/Non-Profit			
Business Subtype:				
<input type="checkbox"/> Business Trust <input type="checkbox"/> Multinational Corp. <input type="checkbox"/> Corporation <input type="checkbox"/> Domestic <input type="checkbox"/> Federal <input type="checkbox"/> Foreign <input type="checkbox"/> General Partnership	<input type="checkbox"/> Joint Venture Partnership <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Local <input type="checkbox"/> Professional Corp. <input type="checkbox"/> Professional Limited Liability Partnership <input type="checkbox"/> State			
NAIC Industry (Select up to 3):				
<input type="checkbox"/> Agriculture, Forestry, Fishing, and Hunting <input type="checkbox"/> Mining <input type="checkbox"/> Utilities <input type="checkbox"/> Construction <input type="checkbox"/> Food/Textile Manufacturing <input type="checkbox"/> Wood/Plastic/Glass/Chemical Manufacturing <input type="checkbox"/> Metal/Machinery Manufacturing <input type="checkbox"/> Wholesale Trade <input type="checkbox"/> Durable Goods/Housewares/Clothing/Food <input type="checkbox"/> Department Stores/General Merchandise Stores <input type="checkbox"/> Transportation <input type="checkbox"/> Warehousing and Storage	<input type="checkbox"/> Information <input type="checkbox"/> Finance and Insurance <input type="checkbox"/> Real Estate Rental and Leasing <input type="checkbox"/> Professional, Scientific, and Technical Services <input type="checkbox"/> Management of Companies and Enterprises <input type="checkbox"/> Administrative and Support and Waste Management and Remediation Services <input type="checkbox"/> Educational Services <input type="checkbox"/> Health Care and Social Assistance <input type="checkbox"/> Arts, Entertainment, and Recreation <input type="checkbox"/> Accommodation and Food Services <input type="checkbox"/> Other Services (except Public Administration) <input type="checkbox"/> Public Administration			
NAIC Sub-Industry (1)*				
NAIC Sub-Industry (2)*				
NAIC Sub-Industry (3)*				

*For information regarding NAICS Industry Codes, please visit the following website <http://www.census.gov/eos/www/naics/> and use the 2012 NAICS Search feature to locate potential industry code descriptions.

NAIC (North American Industry Classification System) - Required for non-individual clients. NAICS codes are a standard used by federal statistical agencies in classifying business establishments for the purpose of collecting, analyzing, and publishing statistical data related to the U.S. business economy.

Government Description Codes

AI Articles of Incorporation	ED Estate/Court Documents	PP Passport
AO Articles of Organization - LLC	FD Foreign Issued ID - Non-Driver	RA Resident Alien ID Card - Green
AR Adoption Record	FL Foreign Driver's License*	SC School ID Card
BC Birth Certificate	HC Health Insurance Card (No Medicare Card)	ST State ID Card
BD Border Crossing Card*	LP Life Insurance Policy	TI Tribal ID
BL Business License	MD Marriage or Divorce Record	TP Trustee Certification of Investment Powers
BV B1B2 Visa	MR Armed Forces	TR Trust Document
CD Court Document	ND Non-Documentary	
CE Cedula	NI National ID Card	
CI Consular ID Card	OA Operating Agreement	
DL Driver's License	PA Partnership Agreement	
EA Employment Authorization Card	PC Permanent Resident Card	
EC Employer ID Card		

*If Border Crossing Card or Foreign Driver's License is selected, both Border Crossing Card and Foreign Driver's License forms of ID are required.

Occupation Description

1 Management	G Healthcare and Technical	P Construction and Extraction
2 Business and Financial Operations	H Healthcare Support	Q Installation, Maintenance and Repair
3 Computer and Mathematical	I Protective Services	R Production
4 Other*	J Food Preparation and Servicing	S Transportation and Material Moving
A Architecture and Engineering	K Building and Grounds Maintenance	T Military Specific
B Life, Physical, and Social Services	L Personal Care	U Retired
C Community and Social Services	M Supervisors, Sales Workers	V Unemployed
D Legal	N Office and Administrative Support	W Disabled
E Education, Training, and Library	O Farming, Fishing, and Forestry	X Student
F Arts, Design, Entertainment, Sport, and Media		

*(Description is required)

Business Type/Subtype

Business and Business Subtype are required for non-individual clients to classify the entity appropriately. The business formation will determine the business and business subtype category.

Business Type Codes

C Corporation
G Govt. Unit or Agency
I Indian Tribal Govt.
L Limited Liability Co.
N Limited Partnership
O Limited Liability Partnership
P Partnership
S Sole Proprietor
T Trust Co.
U Unicorp Assn./Social/Rec/Civic Group/Non-Profit

Business Subtype Codes

BT Business Trust
CM Multinational Corp.
CO Corporation
DM Domestic
FD Federal
FN Foreign
GP General Partnership
JV Joint Venture Partnership
LL Limited Liability Partnership
LO Local
PC Professional Corp.
PL Professional Limited Liability Partnership
ST State

Exchange

For entities that are publicly traded, the exchange where the entity trades must be indicated.

Sales Markets State/Country

All non-individual clients, both foreign and domestic, are required to record the specific market(s) in which they conduct business. For entities conducting business across the U.S., users are required to provide one U.S. state and may provide up to three U.S. states. For entities conducting international business, users are required to provide one country and may provide up to three countries. Certain entities may conduct business in both U.S. and international markets. In this instance, entities will be able to provide up to three U.S. states and three international countries.

- Local
- Regional
- U.S.
- International
- U.S./International

NAIC (North American Industry Classification System)

This is required for non-individual clients. NAICS codes are a standard used by Federal statistical agencies in classifying business establishments for the purpose of collecting, analyzing, and publishing statistical data related to the U.S. business economy.