IRA Services Trust Company

ACCOUNT APPLICATION

Use this application to establish a new Account
Do not use this form for subsequent investments

Mail Completed Form to: IRA.Services
PO Box 7080
San Carlos, CA 94070-7080

Telephone: 650-593-2221

PRINT OR TYPE, SEND THE ORIGINAL TO IRA SERVICES, MAKE A COPY FOR YOURSELF

[CUSTODIAL USE ONLY]

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A. PARTICIPANT INFORMATION

NAME/LAST	FIRST	MIDDLE	BIRTH DATE
STREET ADDRESS			SOCIAL SECURITY NUMBER
CITY	STATE	ZIP	HOME TELEPHONE
EMAIL			DAYTIME TELEPHONE

B. PHOTO ID *BE SURE TO ATTACH A LEGIBLE COPY OF YOUR CURRENT GOVERNMENT ISSUED PHOTO ID*

TYPE OF ID (i.e. Driver's License, Passport, etc)	ID NUMBER	ISSUING JURISDICTION (Fed, State, etc)	ORIGINAL ISSUE DATE (optional)	EXPIRATION DATE

C. ESTABLISHING YOUR ACCOUNT

DESIGNATING ACCOUNT TYPE

(Check Only One Box)

- ☐ Traditional IRA*
- ☐ Roth IRA*
- ☐ SEP IRA (see instructions)
- ☐ SIMPLE IRA (see instructions)

REQUIRED OPENING FEES

- Please refer to the Fee Schedule for amounts.
- You must include a check for fees payable to IRA Services for the Establishment Fee AND the first year Annual Account Fee.

*If this is a beneficial account where you are the beneficiary, please complete a Supplemental Account Information form and attach it to this application.

FUNDING YOUR ACCOUNT (Check All Boxes that Apply)

☐ **I will rollover cash from an existing IRA or Qualifed plan.**

This will be a Rollover of a distribution from a prior IRA or a lump sum distribution or plan termination distribution paid to me within one taxable year from a qualified employee benefit plan or annuity, either of which is contributed to this IRA within 60 days of receipt of such funds.

Prior Custodian/Plan Name:____

Expected Rollover Amount: $ ______________________________

☐ **I will transfer assets from another IRA and have attached a completed Transfer Authorization form.**

I have attached a contribution check as follows:

☐ IRA Cash Contribution for the Year: _________ in the Amount of $ ______________________

☐ IRA Cash Contribution for the Year: _________ in the Amount of $ ______________________

☐ Employer SEP Contribution for the Year: ________ in the Amount of $ ______________________

D DESIGNATION OF YOUR BENEFICIARY

Complete and attach an IRA Services' Beneficiary Designation Form. Use as many pages as necessary. Each page must be complete, signed by you and dated. You must show the percentage share each beneficiary is to receive and the percentages must add to 100% for each type of beneficiary, primary or secondary. In community or marital property states, if anyone other than the spouse is named as primary beneficiary, The spouse must sign all beneficiary designation forms.

E. MAKING YOUR INVESTMENT

When you are ready to make your investment complete and send an Investment Authorization Form and any documents required by the investment provider.

F. ACKNOWLEDGEMENT and SIGNATURE

Custodial TIN: 26-2627205

I hereby acknowledge the following:

- That the retirement plan I am establishing is self-directed and that I am solely responsible for the success or failure of my investments.
- That IRA Services Trust Company is the designated IRA Custodian and IRA Services (IER) is the Administrator.
- That I have read and understand the IRA Custodial Agreement and Fee Schedule.
- That with the exception of deposits in amounts under $250,000 held at a depository institution or other similar banking institutions, my investments are: (a) not insured by the FDIC or any other federal or state deposit guaranteed fund; (b) not guaranteed by IRA Services Trust Company, its parent, subsidiaries, and/or agents; and (c) are subject to investment risk, including the possible loss of the principal invested.
- That certain investments or classes of investments may pose administrative burdens and, therefore, the Custodian and/or Administrator reserve the right not to process or accept such investments. The decision not to act upon investment directions which the Custodian and/or Administrator determines to be unacceptable for administrative reasons should in no way be construed as a determination concerning the prudence or advisability of investing in the asset.
- My account is subject to an Arbitration provision that appears in the IRA Agreement.
- I hereby give my consent to the Custodian and/or Administrator to the following: (a) have my telephone conversations recorded, (b) accept e-mail as a form of written communication and (c) accept faxed investment authorizations.
- I hold harmless, protect and indemnify the Custodian and Administrator from and against any and all liabilities, losses, damages, expenses and charges, including but not limited to attorney's fees and expenses of litigation, which the Custodian and Administrator may sustain or might sustain resulting directly or indirectly from my investment direction or those received from my authorized financial representative and/or agent.
- By signing this Application I hereby (a) adopt and establish my IRA with IRA Services Trust Company, or its successors, as Custodian, (b) understand that the IRA Custodial Agreement and this Application comprise my entire contractual agreement with IRA Services Trust Company, (c) confirm that I have received, read and agree to the terms and conditions contained in the Individual Retirement Custodial Account Agreement for the type of account I selected in Part C of this Application, (d) confirm that I have received, read and agree to the terms and conditions of the appropriate financial disclosure statement and Publication 590, (e) acknowledge receipt of the fee schedule referenced in Part C of this Application, (f) confirm that I have received a copy of IRA Services' privacy notice, (g) acknowledge receipt of a current prospectus of the asset(s) named in the Investment Authorization Form which is a part of this Application and (h) understand that IRA Services will handle the daily administration of the account.
- If this Application is to transfer to IRA Services Trust Company the assets of an existing IRA or other retirement account, I understand that the appointment of IRA Services Trust Company as successor Custodian will be effective upon receipt of all the Plan assets. Further, I understand that IRA Services Trust Company, Custodian expressly does not assume or incur any liability by reason of or have a duty or responsibility to inquire into or take action with respect to any acts performed or omitted to be performed by the current Custodian/Trustee. I understand that this transfer may take six weeks or longer.

I declare under penalty of perjury that the foregoing is true and correct, including my social security number.

PARTICIPANT SIGNATURE	DATE
SPOUSE SIGNATURE*	DATE

*Only required in community or marital property states, if anyone other than the spouse is named as primary beneficiary. I acknowledge that I am the spouse of the above-named accountholder and do hereby give them any interest that I have in the funds or property in this account and consent to the beneficiary designation(s) indicated above. I assume full responsibility for any adverse consequences that may result. No tax or legal advise was given to me by the Custodian, or its agents or representatives.

IRA Services Trust Company

Instructions for Completing Your Account Application

Part A. **PARTICIPANT INFORMATION:** Enter your name, address, birth date, social security number and telephone number(s). Your application cannot be processed without all of this information.

Part B. **PHOTO ID:** Complete this section with the information contained on your CURRENT government issued photo ID (Driver's License, Passport, etc). In addition, you MUST ATTACH A <u>LEGIBLE</u> COPY OF THE PHOTO ID to this application. This requirement is part of the government's fight against terrorism and money laundering activities required under the US Patriot Act and other Federal regulations. These laws and regulations, require that financial institutions obtain, verify, and record certain identifying information from an individual seeking to open a new account. We are required to obtain and verify name, address, date of birth, social security number and other information that will allow us to identify you. ***After your application has been received, an IRA Services' representative will contact you to confirm the information provided.***

Part C. **ESTABLISHING YOUR ACCOUNT:**

DESIGNATING ACCOUNT TYPE: Check the appropriate box next to the type of account you wish to open.

⇒ If you are opening a Traditional or Roth IRA and it is a beneficial account where you are the beneficiary, you must complete the "Supplemental Account Information" form and attach it to your application.
⇒ If you are opening a SEP, please attach a copy of the plan document (or IRS Form 5305-SEP).
⇒ If you are opening a SIMPLE IRA, please attach a copy of the plan document (or IRS Form 5304-SIMPLE).

Be sure to include a check for the establishment and annual account fees with your application. See the fee schedule for the exact amounts of these fees. If there is no fee check, fees will be deducted from your investment check and may prevent your investment from being completed. Please note that a minimum cash balance is required.

FUNDING YOUR ACCOUNT:

⇒ If you are rolling over a distribution from an IRA or another retirement plan, mark the appropriate check box and enter the expected amount of the rollover check and the name of the prior custodian or plan.

⇒ If you are transferring funds from another custodian, complete the "Transfer Authorization" form and attach it to this application.

⇒ If you are making a contribution, mark the check box and indicate the year for which the deposit is being made and the amount of the contribution (between January 1 and April 15 of each year, you may make a prior year contribution if you have not already done so). You are responsible to ensure that contributions do not exceed the limits for the tax year.

⇒ If your employer is making an employer contribution on your behalf, mark the check box and enter the amount of the employer contribution. The check must be made out to IRA Services and drawn on the employer's account.

Part D. **DESIGNATION OF YOUR BENEFICIARY:** Attach one or more of our "Beneficiary Designation" forms to this application for your primary and secondary beneficiaries. Be sure to date and sign each form. If you do not name your spouse as primary beneficiary and you reside in a community or marital property state, then your spouse must also sign and date these beneficiary forms. We must have original signatures.

Part E. **MAKING YOUR INVESTMENT:** If you wish to make an investment immediately, complete and attach an "Investment Authorization" form detailing separately each investment you want to make. Be sure to also attach all documents required by the investment provider.

Part F. **ACKNOWLEDGEMENT AND SIGNATURE:** Read the acknowledgement section carefully to understand important rights, responsibilities, obligations and information about your account. Finally, complete the application by signing and dating the document. If you do not name your spouse as primary beneficiary and you reside in a community or marital property state, then your spouse must also sign and date the application.

Your application may not be processed until the Account Application, photo id and fees are received.

MAILING ADDRESS: IRA Services
PO Box 7080
San Carlos, CA 94070-7080

Telephone: (650) 593-2221
Facsimile: (650) 591-2168

The retirement plan you are establishing is self-directed and you are solely responsible for the success or failure of the investments.

Not FDIC Insured
Non-deposit investments are not insured by the FDIC (Stocks, bonds, mutual funds, notes, real estate, partnerships, LLCs, etc.)
Non-deposit investments are not deposits or other obligations of IRA Services Trust Company and are not guaranteed by IRA Services.
Non-deposit investments are subject to investment risk, including possible loss of principal invested.