



AN
EQUITY TRUST
COMPANY

New Account

Thank you for choosing Midland and welcome!

Enclosed are the forms required to establish and fund your retirement account with Midland.

Once you've completed all required forms, send to:

By mail: Midland Trust - P.O. Box 07520, Fort Myers, FL 33919

Overnight: Midland Trust - 15671 San Carlos Blvd #101, Fort Myers, FL 33908-2788

By fax: (239) 466-5496

By email: newaccounts@midlandira.com

Secure Upload: <https://www.midlandtrust.com/secure-upload/>

To open your IRA with Midland, we will need:

1. **Account Application** (complete all three pages)
2. **Fee Schedule** (choose fee option, provide payment information, sign, and date)
3. **Driver's License** (submit a copy of your driver's license)

To transfer funds from an existing IRA:

Traditional, Roth, SEP, SIMPLE Accounts

- Complete transfer form
- Attach copy of recent statement
- Send the ORIGINAL transfer form to our office for processing

To rollover funds from an employer plan:

401(k), 403(b), PSP, Defined Benefit, or Other Plan

- Request employer/plan administrator to rollover funds to your Midland account
- Ensure check is made payable to: Midland Trust Company As Custodian FBO
Client Name, Client Account #
- Complete Rollover form and mail check to Midland for deposit



Thank you for choosing Midland Trust and Welcome!

For processing, return via:

Mail:

Midland Trust
PO Box 07520
Fort Myers, FL 33919

Fax:

(239) 466-5496

Online Upload:

www.midlandtrust.com/secure-upload

IMPORTANT NOTICE

Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. During the account opening process, we may ask for additional documentation or other identifying documents.

1 PERSONAL INFORMATION

Legal Name (Required) <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Dr. _____		Date of Birth (MM/DD/YYYY)	Social Security Number
Legal Address (Required)		City, State, Zip	
Mailing Address (Optional)		City, State, Zip	
Mobile Phone Would you like to receive <input type="checkbox"/> Yes* updates via text/SMS? <input type="checkbox"/> No	Secondary Phone	Email Address	
Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married (see Consent of Spouse) <input type="checkbox"/> Widowed or Divorced	Occupation	Referred By	
ID Type** <input type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> Other: _____	Issued By	ID Number	Expiration Date

*By selecting "Yes" you confirm you are opting in to receiving updates from Midland via text message/SMS, including by not limited to account and transaction updates. You may opt out at any time by notifying Midland. Messaging rates may apply - confirm with your mobile carrier for more details.

**Please include a copy of your photo ID (a cellular phone image is acceptable).

2 NOTIFICATIONS

How would you like to receive statements?
☐ Online (Free) ☐ Monthly (\$60/year) ☐ Quarterly (\$20/year) ☐ Annually (\$5/year)

Statement charges are \$5 per occurrence, billed at the time of the occurrence.

*For client online access, Midland Trust requires that you provide an email address in section 1 (above). Midland is required to provide account holder statements, so failure to input an email in section 1 or failure to select an option above will default the account to quarterly statements at an annual cost of \$20.

3 ACCOUNT TYPE

Please select one:

<input type="checkbox"/> Traditional IRA	<input type="checkbox"/> SEP IRA (please attach employer plan documents) Employer Name: _____	<input type="checkbox"/> SIMPLE IRA (please attach employer plan documents) Employer Name: _____
<input type="checkbox"/> Roth IRA		
<input type="checkbox"/> Inherited IRA Check one: <input type="checkbox"/> Trad <input type="checkbox"/> Roth IRA Inherited From: _____		<input type="checkbox"/> Health Savings Account Check one: <input type="checkbox"/> Self-only coverage <input type="checkbox"/> Family coverage

4 ACCOUNT FUNDING (Check all that apply)

<input type="checkbox"/> Annual Contribution Year contribution for: _____ Amount: _____	<input type="checkbox"/> Transfer Contribution Transfer from existing IRA or Employer Sponsored Plan.	<input type="checkbox"/> Rollover Contribution Take receipt of the assets for up to 60 days before reinvesting in a new retirement plan.	<input type="checkbox"/> Direct Rollover Contribution Rollover from Employer Sponsored Plan.
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Signature: _____ **Date:** _____



5 BENEFICIARIES

- Please designate at least one Primary beneficiary.
- If primary beneficiary is a Trust, please complete Midland's Trust Beneficiary Certification Form OR supply a copy of the Trust documents.

Select Beneficiary Type: ☐ Primary ☐ Contingent

SELECT ONE: ☐ Individual ☐ Trust/Charity/Organization

Individual Name or Name of Trust/Charity/Organization	Social Security Number/Tax ID	Relationship (if individual)	Share %
Address		Phone	Birthdate/Date of Establishment

Select Beneficiary Type: ☐ Primary ☐ Contingent

SELECT ONE: ☐ Individual ☐ Trust/Charity/Organization

Individual Name or Name of Trust/Charity/Organization	Social Security Number/Tax ID	Relationship (if individual)	Share %
Address		Phone	Birthdate/Date of Establishment

Select Beneficiary Type: ☐ Primary ☐ Contingent

SELECT ONE: ☐ Individual ☐ Trust/Charity/Organization

Individual Name or Name of Trust/Charity/Organization	Social Security Number/Tax ID	Relationship (if individual)	Share %
Address		Phone	Birthdate/Date of Establishment

Select Beneficiary Type: ☐ Primary ☐ Contingent

SELECT ONE: ☐ Individual ☐ Trust/Charity/Organization

Individual Name or Name of Trust/Charity/Organization	Social Security Number/Tax ID	Relationship (if individual)	Share %
Address		Phone	Birthdate/Date of Establishment

SIGNATURE AND ACKNOWLEDGEMENT

Account Holder Signature

In the event of my death, or the last surviving joint tenant to transfer upon their death, the balance in the account shall be paid to the Primary Beneficiaries who survive me in equal shares (or in the specified shares, if indicated). If the Primary or Contingent Beneficiary box is not checked for a beneficiary, the beneficiary will be deemed to be a Primary Beneficiary. If none of the Primary Beneficiaries survive me, the balance in the account shall be paid to the Contingent Beneficiaries who survive me in equal shares (or in the specified shares, if indicated). If I named a beneficiary which is a Trust, I understand I must provide certain information concerning such Trust to the Custodian.

I understand that I may change or add beneficiaries at any time by completing and delivering the proper form to the Administrator.

Signature of Participant: _____ Date: _____

Spousal Consent

Complete this section only if Account Holder's legal residence is in a community property state [AZ, CA, LA, ID, NV, NM, TX, WA, WI] and Account Holder is choosing to name a beneficiary other than, or in addition to, Account Holder's spouse as the primary beneficiary.

By signing below, I acknowledge that I am the spouse of the Account Holder and agree with and consent to my spouse's designation of a primary beneficiary other than or in addition to me. I further acknowledge that I may be waiving part of or all my rights to receive benefits under this account when my spouse dies. I have had the opportunity to consult counsel or a financial advisor and I assume all responsibility regarding this consent. The custodian has not provided me any legal or tax advice.

I, _____ hereby consent to the above Beneficiary designation.

Spouse Signature: _____ Date: _____



6 SIGNATURE AND ACKNOWLEDGEMENT

Custodian and Administrator: The Custodian for my account will be **Midland Trust** and the Administrator for my account will be **Midland IRA**. I understand that the Custodian and the Administrator may resign by giving me written notice at least 30 days prior to the effective date of such resignation. I understand that if I fail to notify the Administrator of the appointment of a successor trustee or custodian within such 30-day period, then the assets held by the Custodian in my account (whether in cash or personal or real property, wherever located, and regardless of value) will be distributed to me, outright and free of trust, and I will be wholly responsible for the tax consequences of such distribution.

No Tax, Legal or Investment Advice: I acknowledge and agree that the Custodian and the Administrator do not provide or assume responsibility for any tax, legal or investment advice with respect to the investments and assets in my account, and will not be liable for any loss which results from my exercise of control over my account. I understand that my account is self-directed, and I take complete responsibility for any investments I choose for my account. I further understand and agree that neither the Custodian nor the Administrator sells or endorses any investment products. If the services of the Custodian and the Administrator were marketed, suggested or otherwise recommended by any person or entity, such as a financial representative or investment promoter, I understand that such persons are not in any way agents, employees, representatives, affiliates, partners, independent contractors, consultants, or subsidiaries of the Custodian or the Administrator, and that the Custodian and Administrator are not responsible for and are not bound by any statements, representations, warranties or agreements made by any such person or entity. The Custodian and Administrator shall have no duty or responsibility to conduct any review as to the acquisition, retention, or disposition of any investment. I agree to consult with my own CPA, attorney, financial planner, or other professional prior to directing the Administrator to make any investment in my account.

Prohibited Transactions: I understand that my account is subject to the provisions of Internal Revenue Code (IRC) Section 4975, which defines certain prohibited transactions. I acknowledge and agree that neither the Custodian nor the Administrator will make any determination as to whether any transaction or investment in my account is prohibited under sections 4975, 408(e) or 408A, or under any other state or federal law. I accept full responsibility to ensure that none of the investments in my account will constitute a prohibited transaction and that the investments in my account comply with all applicable federal and state laws, regulations and requirements.

Unrelated Business Income Tax: I understand that my account is subject to the provisions of IRC Sections 511-514 relating to Unrelated Business Taxable Income (UBTI) of tax-exempt organizations. I agree that if I direct the Administrator to make an investment in my account which generates UBTI, I will be responsible for preparing or having prepared the required IRS Form 990-T tax return, an application for an Employer Identification Number (EIN) for my account, and any other documents that may be required, and to submit them to the Administrator for filing with the Internal Revenue Service at least ten (10) days prior to the date on which the return is due, along with an appropriate directive authorizing the Administrator to execute the forms on behalf of my account and to pay the applicable tax from the assets in my account. I understand that the Custodian and the Administrator do not make any determination of whether or not investments in my account generate UBTI; have no duty to and do not monitor whether or not my account has incurred UBTI; and do not prepare Form 990-T on behalf of my account.

Valuations: I understand that the assets in my account are required to be valued annually at the end of each calendar year in accordance with IRC Section 408(i) or 223(h) and other guidance provided by the IRS, and that the total value of my account will be reported to the IRS on Form 5498 each year. I agree to provide the year end value of any illiquid and/or non-publicly traded investments, which may include without limitation limited partnerships, limited liability companies, privately held stock, real estate investment trusts, hedge funds, real estate, secured and unsecured promissory notes, and any other investments as the Custodian shall designate, by no later than January 10th of each year, with substantiation attached to support the value provided. The Custodian and Administrator does not conduct appraisals and does not verify any values provided to it by the IRA Holder or any investment representative. A value listed in an account statement is deemed accepted by the IRA Holder if not disputed by the IRA Holder in writing within 60 days of the statement being issued.

I agree to indemnify and hold harmless the Custodian and the Administrator from any and all losses, expenses, settlements, or claims with regard to investment decisions, distribution values, tax reporting or any other financial impact or consequence relating to or arising from the valuation of assets in my account.

Indemnification: I agree that the Custodian and the Administrator have no duty other than to follow my written instructions, and will be under no duty to question my instructions and will not be liable for any investment losses sustained by me or my account under any circumstances. I understand that the Custodian and the Administrator are acting only as my agent, and nothing will be construed as conferring fiduciary status on the Custodian or the Administrator.

I agree to indemnify and hold harmless the Custodian and the Administrator from any and all claims, damages, liability, actions, costs, expenses (including reasonable attorneys' fees) and any loss to my account as a result of any action taken (or omitted to be taken) pursuant to and/or in connection with any investment transaction directed by me or my investment advisor or resulting from serving as the Custodian or the Administrator, including, without limitation, claims, damages, liability, actions and losses asserted by me.

Electronic Communications, Signatures, and Records: I acknowledge and agree that my account will be subject to the provisions of the Uniform Electronic Transactions Act, as passed in the state where the Custodian is organized (South Dakota Codified Law Sections 53-12 et. seq.), and the federal Electronic Signature in Global and National Commerce Act (ESIGN Act, as contained in 15 U.S.C. 7001), as those laws pertain to electronic communication, electronic signatures, and electronic storage of Custodial Account records. I understand that, in lieu of the retention of the original records, the Administrator and Custodian may cause any, or all, of their records, and records at any time in their custody, to be photographed or otherwise reproduced to permanent form, and any such photograph or reproduction shall have the same force and effect as the original thereof and may be admitted in evidence equally with the original if permitted by law.

Responsibility for determining eligibility and tax consequences: I assume complete responsibility for 1) determining that I am eligible to make a contribution to my account; 2) ensuring that all contributions I make are within the limits set forth by the relevant sections of the Internal Revenue Code; and 3) the tax consequences of any contribution (including a rollover contribution) and distributions.

No FDIC Insurance for Investments: I recognize that investments purchased and/or held within my account: 1) are not insured by the Federal Deposit Insurance Corporation (FDIC); 2) are not a deposit or other obligation of, or guaranteed by, either the Custodian or the Administrator; and 3) are subject to investment risks, including possible loss of the principal amount invested.

Our Privacy Policy: You have chosen to do business with the Custodian and the Administrator. As our client, the privacy of your personal non-public information is very important. We value our customer relationships and we want you to understand the protections we provide in regard to your accounts with us.

Information We May Collect: We collect non-public personal information about you from the following sources to conduct business with you:

- Information we receive from you on applications or other forms;
- Information about your transactions with us, or others;

Non-public personal information is non-public information about you that we may obtain in connection with providing financial products or services to you. This could include information you give us from account applications, account balances, and account history.

Information We May Share: We do not sell or disclose any non-public information about you to anyone, except as permitted by law, or as necessary to facilitate your investment transactions, or as specifically authorized by you. We do not share non-public personal information with our affiliates or other providers without prior approval by you. Federal law allows us to share information with providers that process and service your accounts. All providers of services in connection with the Custodian and Administrator have agreed to the Custodian's and the Administrator's confidentiality and security policies.

CONTINUED ON NEXT PAGE



7 SIGNATURE AND ACKNOWLEDGEMENT (CONTINUED)

If you decide to close your account or become an inactive customer, we will adhere to the privacy policies and practices as described in this notice.

Confidentiality and Security: We restrict access to non-public personal information to those employees who need to know that information to provide products and services to you. We maintain physical, electronic, and procedural guidelines that comply with federal standards to guard your non-public personal information. The Custodian and the Administrator reserve the right to revise this notice and will notify you of any changes in advance.

If you have any questions regarding this policy, please contact us at the address and or telephone number listed on this Adoption Agreement.

Attorney's Fees: In the event of a dispute between the parties to this Agreement, the prevailing party shall be entitled to attorney's fees and costs by any court or arbitrator adjudicating the dispute.

Governing Law: Except to the extent governed by or subject to the requirements of the Code or other applicable federal law, or preempted by federal law, the Agreement shall be governed by and construed under the laws of the State of South Dakota, without giving effect to any state's choice of law provisions.

Integration: This IRA Application and the 5305 Custodial Agreement and Disclosure Statement encompass the entire agreement of the parties with respect to the subject matter of this Agreement, and supersedes all prior negotiations, agreements and understandings between the parties, whether written or oral, with respect thereto. The parties hereby acknowledge and agree that they have not relied on any representation, assertion, guarantee, warranty, other contract or other assurance, except as set forth herein, made by or on behalf of any other party or any other person or entity whatsoever, prior to the execution of this Agreement.

_____(Initial) By initialing or typing my initials, I acknowledge that I have received and read the 5305 Custodial Agreement, and per the 5305 Custodial Agreement, the Depositor acknowledges and agrees that the Custodian and the Administrator do not provide or assume responsibility for any tax, legal or investment advice with respect to the investments and assets in the Custodial Account and shall not be liable for any loss which results from the Depositor's exercise of control over the Custodial Account. The Depositor and the Depositor's beneficiary(ies) release, indemnify and agree to hold the Custodian and the Administrator harmless in the event that any investment or sale of the assets in the Custodial Account pursuant to a direction by the Depositor or the Depositor's Investment Advisor violates any federal or state law or regulation or otherwise results in a disqualification, penalty, tax or fine imposed upon the Custodian, Administrator, Depositor or the Custodial Account.

_____(Initial) By initialing or typing my initials, I acknowledge that I have received and read the 5305 Custodial Agreement, and per the 5305 Custodial Agreement, the assets in the Custodial Account shall be valued annually at the end of each calendar year in accordance with section 408(i) and other guidance provided by the IRS, but Custodian retains the right to value the assets in the Custodial Account more frequently. In valuing the assets of the Custodial Account for record keeping and government reporting purposes, Custodian will ascertain the fair market value of each investment through utilizing various third-party pricing sources and designated valuation agents. However, Custodian does not guarantee the accuracy of prices obtained from these sources. Where assets are illiquid or their value is not readily ascertainable on either an established exchange or generally recognized market, the valuation is by necessity not a true market value and is merely an estimate of value, and Depositor agrees not to rely on any such valuation for any other purposes. Depositor agrees to provide the year end value of any illiquid and/or non-publicly traded investments, which may include without limitation limited partnerships, limited liability companies, privately held stock, real estate investment trusts, hedge funds, real estate, secured and unsecured promissory notes, and any other investments as Custodian shall designate, by no later than the following January 10th. If Custodian does not receive a current year end fair market value by the following January 10th for any such investment, the Custodian shall take appropriate actions to receive the fair market value from an independent third party that specializes in valuations, paying the cost of such valuation from the liquid assets held in the Custodial Account, or in the alternative after having first received the cost of the valuation from Depositor or Depositor's beneficiary(ies) if liquid investments in the Custodial Account are otherwise insufficient. Unless Custodian has received a written fair market valuation to the contrary, promissory notes and privately offered corporate debt will have valuations reflected at the face value shown on the original note or debt instrument, or if the note is subject to an amortization schedule and the amortization schedule has been provided to Custodian by Depositor, valuation may be shown at the principal amount shown on the amortization schedule as of the end of the previous year. Depositor, and upon Depositor's death Depositor's beneficiary(ies), agree to indemnify and hold harmless Custodian from any and all losses, expenses, settlements, or claims with regard to investment decisions, distribution values, tax reporting or any other financial impact or consequence relating to or arising from the valuation of assets in the Custodial Account.

_____(Initial) By initialing or typing my initials, I acknowledge that the Custodian and/or Administrator does not endorse, affiliate, promote and/or sell services of any third party vendor or investment sponsor, regardless of whether my account's administrative fees are paid by such third party vendor or investment sponsor.

_____(Initial) By initialing or typing my initials, I acknowledge that I have read the Integration clause included in this application. I acknowledge that the Custodian and/or Administrator may require a verbal confirmation with me prior to disbursing funds for an investment.

_____(Initial) By initialing or typing my initials, I acknowledge as the account holder, or on behalf of the account holder, that the account holder has earned income for any contribution made.

_____(Initial) BY INITIALING OR TYPING MY INITIALS, I ACKNOWLEDGE THAT I HAVE READ AND RECEIVED THE 5305 CUSTODIAL AGREEMENT, AND THAT ALL CLAIMS AND DISPUTES ARISING UNDER OR RELATING TO THIS AGREEMENT ARE TO BE SETTLED BY BINDING ARBITRATION. SOUTH DAKOTA LAW WILL APPLY WITHOUT REGARD TO CONFLICT OF LAW PRINCIPLES WITH VENUE EXCLUSIVELY IN SIOUX FALLS, SOUTH DAKOTA. AN AWARD OF ARBITRATION MAY BE CONFIRMED IN A COURT OF COMPETENT JURISDICTION.

PLEASE REFER TO THE 5305 CUSTODIAL AGREEMENT FOR THE COMPLETE DISCLOSURE REGARDING ARBITRATION.

THIS IS A CONTRACTUAL AGREEMENT. DO NOT SIGN UNTIL YOU HAVE READ THIS APPLICATION AND THE CUSTODIAL AGREEMENT CAREFULLY.

ACCOUNT HOLDER

IRA Holder Signature: _____

Print Name: _____ Date: _____

ANNUAL FEES: Choose ONE of the following options

☐ **OPTION 1: FEE BASED ON NUMBER OF ASSETS**

\$325	Per Asset for Real Estate, LLCs, Private Placements, Private Stock, Notes/Mortgages, Futures/Forex (per FCM), Crypto, Precious Metals (depository holding fees charged separately)
\$150	Mortgage Payable
\$50	Traditional Brokerage/Bank Account (excluding Crypto)

☐ **OPTION 2: FEE BASED ON TOTAL ACCOUNT VALUE**

*OPTION 2 IS NOT AVAILABLE FOR FUTURES/FOREX/CRYPTO ACCOUNTS

*IF NO SELECTION IS MADE, THE OPTION WILL DEFAULT TO OPTION 1

Total Account Value Is Between:		Annual Fee
\$0	\$14,999.99	\$225
\$15,000	\$29,999.99	\$300
\$30,000	\$44,999.99	\$350
\$45,000	\$59,999.99	\$425
\$60,000	\$89,999.99	\$500
\$90,000	\$124,999.99	\$700
\$125,000	\$249,999.99	\$950
\$250,000	\$499,999.99	\$1,250
\$500,000	\$749,999.99	\$1,650
\$750,000 and up		\$1,850

MISCELLANEOUS SERVICES

Account Setup:	\$50 for online applications. \$100 if not submitted online (non-refundable)
Transaction Fee:	\$125 applies to each Purchase/Sale/Re-Registration of an asset. Exceptions: \$200 Real Estate, \$50 Precious Metals/Trading/Bank Accounts. \$25 Online Capital Calls/Additional Fundings/Trading Acct Withdrawals (\$50 if not submitted online)
Wire Transfers:	\$15 incoming wires (free for incoming IRA transfers or rollovers); \$30 outgoing domestic (free for Futures/Forex); \$50 outgoing international
ACH Transfers:	\$5 per request (\$10 if not submitted online). Exceptions: Free ACH distributions of cash
Trust Checks:	Free for initial asset purchases. \$5 for all other requests (\$10 if not submitted online).
Check Deposits:	\$5 for incoming checks related to rental and note income deposits (no charge for online payments made through pay.midlandtrust.com)
Cash Distributions:	Free if submitted online or if recurring. (\$25 if not submitted online). No delivery fee for ACH. Check/wire fee applies where applicable
Partial Transfer Out:	\$50 per outgoing account transfer, plus asset re-registration fees for in-kind transfers (if applicable)
Full Termination:	\$150 if account held for 2+ years. \$250 if under 2 years. Plus, asset re-registration fees for in-kind transfers or in-kind distributions (if applicable)
Overnight Mail, Official Check, Returned Deposit, Stop Payment, Credit Card/ACH Return: \$30 per occurrence	
Rush Transaction: For funding requests where investment documents or funds are not in good order before one business day of funding request: \$150	
Special Notification/Research Fees: Matured Notes, Late Fair Market Valuation Valuation Research: \$50 each (no charge for 1st notice. Fee begins with 2nd notice)	
Cash Only Accounts: \$100 annually (only applicable for asset based fee accounts with no assets and no buy/sell activity for previous 12 months)	

PAYMENT INFORMATION: Select how you would like to pay your Midland administrative fees

☐ **OPTION 1: DEDUCT MY ACCOUNT** (Default option if no payment selection is made)

☐ **OPTION 2: CHARGE MY CREDIT CARD** (If a card was provided upon initial online application set up, future charges will default to that card. Otherwise, a Midland client service representative will reach out for your credit card details and discuss the next steps.

MINIMUM BALANCES: Accounts must keep a minimum of \$250 undirected cash at all times. Midland reserves the right to not process transactions that will result in a cash balance below \$250.

BILLING CYCLE: Administration fees will be assessed and due upon initial account opening, initial asset acquisition and annually on the 1st day of your billing cycle. Your billing cycle is defined as a 12-month period from day 1 of the month of your initial account opening. For example, if your account was initially opened on February 14th, your billing cycle would be February 1 through January 31. Fees for asset purchases made after the third quarter of your billing cycle may be pro-rated on a quarterly basis. For example, if you purchase an asset in December, the account is in quarter four of your normal billing cycle (Feb-Jan), so your pro-rated asset holding fee of \$325 would be $\$325 \times 1/4 = \81.25 . Fees for assets sold, transferred or otherwise removed prior to the end of your billing cycle will not be pro-rated and/or refunded. Fees paid from your account will be reflected on your account statement.

PAST DUE FEES: Fees that remain unpaid for more than 30 calendar days are considered past due. A late charge of \$20 per month will apply. Past due fees will be deducted from your Undirected Cash. In accordance with your Plan Agreement and Disclosures, if there is insufficient undirected cash in your account, we may liquidate other assets in your account to pay for such fees after 30 day notification. Accounts with past due fees will be closed. Any remaining assets in the account will be a taxable event to the account holder and will be reported on IRS Form 1099-R. Account reinstatement eligibility will be determined at Midland's sole discretion. All past due fees, late charges, and a \$150 account reinstatement fee must be paid prior to account reinstatement.

CUSTODIAN'S FEES: Midland Trust Company may use and earn income on your uninvested cash, as permitted by law. As the Custodian, Midland Trust Company reserves the right to change all or part of the Custodial Fee Schedule at its discretion with 30 days advance notice. Please refer to the Custodial Agreement for the complete disclosure of the uninvested cash policy. A copy of your plan agreement can be found online at www.midlandtrust.com/5305 or by calling our office. The current Midland fee schedule can be found at www.midlandtrust.com/fee-schedule/

DEPOSITORY COLLECTION SURCHARGE: For Clients with Precious Metals, Midland Trust Company pays all depository bills automatically. If clients do not leave enough cash in their account or a credit card on file to cover depository fees, Midland will charge a \$5 surcharge per depository billing for our additional collection efforts.

PRINT, SIGN, AND RETURN FORM TO MIDLAND TRUST

Account Holder/Trustee Signature _____

Date _____

Joint Account Holder/Co-Trustee Signature (if applicable) _____

Date _____



Use this form to transfer funds directly from your existing IRA to your Midland Trust Company IRA.
Please include a copy of a recent statement from your current custodian.

1 PERSONAL INFORMATION

Name (Your name as it appears in your plan)	Social Security Number
Legal Address	
Phone	Midland IRA Account Number

2 CURRENT IRA CUSTODIAN

Name of Custodian/Trustee	Account Number
Contact Name (optional)	Phone Number
Type of Account <input type="checkbox"/> Traditional <input type="checkbox"/> Roth <input type="checkbox"/> SEP <input type="checkbox"/> SIMPLE <input type="checkbox"/> Inherited - Traditional <input type="checkbox"/> Inherited - Roth <input type="checkbox"/> HSA <input type="checkbox"/> ESA	

3 TRANSFER DETAILS (Market fluctuations and/or administrative fees may impact the transfer amount received)

<input type="checkbox"/> Option One: Cash Transfer (Funds must be liquidated for request to be processed) <input type="checkbox"/> Full - Transfer All Available Cash <input type="checkbox"/> Partial - Send Only \$ _____ (Please include \$250 minimum balance requirement plus suggested 3 years fees)	<input type="checkbox"/> Option Two: In-Kind Transfer (For Non-Cash Transfers Only) <input type="checkbox"/> Full - Transfer All Cash and Assets In-Kind <input type="checkbox"/> Partial - Send Only the Assets Listed Below (Please include \$250 minimum balance requirement plus suggested 3 years fees)		
All Funds Wired To Capital One NA ABA: 065000090 Credit Name: Midland Trust Company Credit Account: 4670298760 Further Credit: Client Name, Midland Acct #	Asset Description (in-kind transfers only)	Asset Contact (name)	Contact Email

If your custodian does not accept electronic copies, how would you like this sent? ☐ Mail (No Charge - Default) ☐ Overnight (\$30 Fee)

4 SIGNATURE AND ACKNOWLEDGEMENT

1. I hereby agree to the terms and conditions set forth in this Account Asset Transfer Authorization and acknowledge having established a self directed account through execution of the account application.

2. I understand the rules and conditions applicable to an Account Transfer.

3. I qualify for the account transfer of assets listed in the Asset Liquidation above and authorize such transactions.

Your Signature: _____

Date: _____

ACCEPTANCE OF RECEIVING CUSTODIAN

Midland Trust Company accepts appointment as successor custodian/trustee for the assets identified on this form. Midland Trust ASSUMES NO FIDUCIARY OBLIGATIONS TO YOU AS IT HAS NO INVESTMENT CONTROL OVER THE FUNDS AND ACTS ONLY AS A CUSTODIAN OF THE ACCOUNT.

Type of Account

☐ Traditional ☐ Roth ☐ SEP ☐ SIMPLE ☐ HSA ☐ ESA ☐ Inherited - Traditional ☐ Inherited - Roth

By: _____ Date: _____ Account #: _____