

Account Number \_\_\_\_\_

Rep ID \_\_\_\_\_ Alternate Branch \_\_\_\_\_

**CUSTODIAL INDIVIDUAL RETIREMENT ACCOUNT ADOPTION AGREEMENT****SECTION ONE: CLIENT INFORMATION**

|                  |               |
|------------------|---------------|
| Name and Address | Date of Birth |
|                  | SSN           |

**SECTION TWO: TYPE OF CONTRIBUTION**

Select One:

|   |  |
|---|--|
| IR <input type="checkbox"/> IRA   | DI <input type="checkbox"/> Decedent IRA   |
| IR <input type="checkbox"/> IRA Rollover from Qualified Plan, TSA/403(b), or Governmental 457(b) - Commingled (Complete Rollover Certification) | IP <input type="checkbox"/> SEP/IRA Business Name: _____<br>(Attach copy of employer's SEP document.)<br>Employer's SEP or SAR/SEP Account Number: _____ |
| RR <input type="checkbox"/> IRA Rollover from Qualified Plan, TSA/403(b), or Governmental 457(b) - Segregated (Complete Rollover Certification) | IS <input type="checkbox"/> SAR/SEP Business Name: _____<br>(Attach copy of SEP form.)<br>Employer's SEP or SAR/SEP Account Number: _____                |
|   | MI <input type="checkbox"/> Minor IRA  |

**SECTION THREE: BENEFICIARY DESIGNATION**

Relationship Definitions: S=Spouse N=Nonspouse E=Entity T=Trust (Mark one in the box provided.)

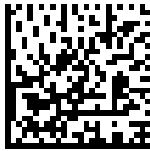
At each Beneficiary designation, indicate if such Beneficiary dies before you, how their portion should be paid:

**Pro Rata** – To the remaining primary Beneficiaries named on this form proportionate to their relative percentages (or if there are no remaining primary Beneficiaries, to the contingent Beneficiaries listed).

**Per Stirpes** – Equally to such Beneficiary's descendants, who survive you, by right of representation.

Please note, if no selection is made the Pro Rata designator will apply.

|                              |   |  |         |
|------------------------------|---|--|---------|
| Beneficiary Name and Address | <input type="checkbox"/> Primary<br><input type="checkbox"/> Contingent | Relationship   | SSN/EIN |
|                              |   | Date of Birth  | %       |
|                              |   | <input type="checkbox"/> Pro Rata <input type="checkbox"/> Per Stirpes |         |
| Beneficiary Name and Address | <input type="checkbox"/> Primary<br><input type="checkbox"/> Contingent | Relationship   | SSN/EIN |
|                              |   | Date of Birth  | %       |
|                              |   | <input type="checkbox"/> Pro Rata <input type="checkbox"/> Per Stirpes |         |
| Beneficiary Name and Address | <input type="checkbox"/> Primary<br><input type="checkbox"/> Contingent | Relationship   | SSN/EIN |
|                              |   | Date of Birth  | %       |
|                              |   | <input type="checkbox"/> Pro Rata <input type="checkbox"/> Per Stirpes |         |
| Beneficiary Name and Address | <input type="checkbox"/> Primary<br><input type="checkbox"/> Contingent | Relationship   | SSN/EIN |
|                              |   | Date of Birth  | %       |
|                              |   | <input type="checkbox"/> Pro Rata <input type="checkbox"/> Per Stirpes |         |



Account Number \_\_\_\_\_

Rep ID \_\_\_\_\_ Alternate Branch \_\_\_\_\_

**CUSTODIAL INDIVIDUAL RETIREMENT ACCOUNT ADOPTION AGREEMENT****SECTION THREE: BENEFICIARY DESIGNATION CONTINUED**

|                              |  |               |         |
|------------------------------|--|---------------|---------|
| Beneficiary Name and Address | <input type="checkbox"/> Primary                                       | Relationship  | SSN/EIN |
|                              | <input type="checkbox"/> Contingent                                    | Date of Birth | %       |
|                              | <input type="checkbox"/> Pro Rata <input type="checkbox"/> Per Stirpes |               |         |

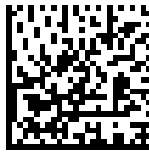
 For additional beneficiaries, see attached form.**SECTION FOUR: CONSENT OF SPOUSE**

Please consult your state laws, with your attorney and/or tax professional, as you deem necessary, to determine whether or not you wish to capture your spouse's consent to an IRA, Roth, SEP, and SIMPLE retirement account beneficiary designation in which your spouse is not named 100% primary beneficiary and the account contains community property (i.e. subject to the state laws of AZ, CA, ID, LA, NM, TX, WA or WI. Subject to change). If so, you may do so here.

**Participant must complete if not married:** I certify at the time of signing, I am not married.**Spouse must complete and sign (with Notary) if participant is married:** I certify that I am the spouse of the above-mentioned participant and that I have read the above beneficiary designation and supplements hereto, if any. In the event of the death of my spouse I do hereby consent to the payment of my spouse's interest in this account to the above-named beneficiary and waive any such rights that I now have and/or may have in such interest.

|                  |      |            |
|------------------|------|------------|
| Spouse Signature | Date | Print Name |
| Notary Signature | Date | Seal Here  |

**This document must accompany the Custodial Traditional IRA Agreement and Disclosure Statement.**



Account Number \_\_\_\_\_

Rep ID \_\_\_\_\_ Alternate Branch \_\_\_\_\_

### CUSTODIAL INDIVIDUAL RETIREMENT ACCOUNT ADOPTION AGREEMENT

#### SECTION FIVE: ADOPTION AGREEMENT

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person, and
4. The FATCA codes (if any) indicating that I am exempt from FATCA reporting is correct.

You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

By entering your name below, you signify that you have read, met, and agreed to all terms and conditions above.

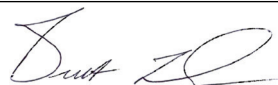
**The IRS does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.**

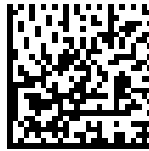
You may cross out this entire Substitute W-9 Certification section if you are not a U.S. citizen or other U.S. person. In such case, an appropriate Form W-8 must be submitted.

I certify that the above information is correct. I appoint RBC Capital Markets, LLC as Custodian in accordance with the terms and conditions of this Individual Retirement Custodial Agreement and consent to the Custodian's fees in its fee schedule. The fees are subject to change upon notice to the Account Owner. I acknowledge receipt of a copy of the plan document under which this Individual Retirement Account is established, a copy of this Adoption Agreement, a copy of the Disclosure Statement with respect to this Individual Retirement Account and that I may obtain a copy of the fee schedule from a representative of the introducing broker servicing this account. I direct the Custodian to invest available uninvested cash balances of my account on a daily basis in a money market fund. I direct all benefits upon my death be paid as indicated above. In the event that this is a rollover contribution, I irrevocably elect, pursuant to the requirements of 1.402(a)(5)-IT of the IRS regulations, to treat this contribution as a rollover contribution. **THIS AGREEMENT CONTAINS A PREDISPUTE ARBITRATION CLAUSE AT ARTICLE 8 OF THE INDIVIDUAL RETIREMENT CUSTODIAL AGREEMENT AND PAGE 4 OF THIS ADOPTION AGREEMENT.**

|                  |      |            |
|------------------|------|------------|
| Client Signature | Date | Print Name |
|------------------|------|------------|

**If you have questions about your account, please contact your financial professional.**

|  |                            |
|--|----------------------------|
| Accepted By<br> | Print Name<br>Brett Thorne |
|--|----------------------------|



Account Number \_\_\_\_\_

Rep ID \_\_\_\_\_ Alternate Branch \_\_\_\_\_

### CUSTODIAL INDIVIDUAL RETIREMENT ACCOUNT ADOPTION AGREEMENT

#### CLIENT FORM COMPLETION INSTRUCTIONS

1. Read carefully the accompanying Custodial Traditional IRA Agreement and Disclosure. (Capitalized terms in the IRA Adoption Agreement have the same meanings as in the IRA Agreement and Disclosure Statement.)
2. Complete or correct Sections 1, 2, 3, 4 and 5, if applicable.
3. Complete additional forms if indicated by the box in Section 2.
4. Keep the client copy and the IRA Agreement and Disclosure Statement for your records.
5. Return the original document in the envelope provided.

#### BENEFICIARY DESIGNATION RULES OF INTERPRETATION

1. **Primary Beneficiaries.** Unless the Account Owner (“Owner”) otherwise specifies, the Account will be paid in equal shares to the primary Beneficiary or Beneficiaries who survive the Owner. If the Owner specifies percentage (or fractional) shares for the primary Beneficiaries and if some but not all such Beneficiaries fail to survive the Owner, the Account will be divided among the surviving primary Beneficiaries in proportion to the relative percentage (or fractional) shares of each, unless the owner has stipulated a Per Stirpes designation.
2. **Contingent Beneficiaries.** If no primary Beneficiary survives the Owner, the Account will be paid in equal shares (unless otherwise specified in the Beneficiary designation) to the contingent Beneficiary or Beneficiaries who survive the Owner, following the rule in paragraph (1) above.
3. **Death Before Full Distribution.** Unless the Owner has otherwise specified in the Beneficiary designation, the Beneficiary will become fixed as of the Owner’s death so that, if a Beneficiary survives the Owner but dies before the receipt of all amounts due such Beneficiary, the remaining amounts will be payable to the representative of the Beneficiary’s estate or to one or more Beneficiaries designated by such Beneficiary.
4. **Designation by Relationship Only.** Any designation of a Beneficiary only by statement of relationship to the Owner (or Beneficiary) will be effective only to designate the person or persons standing in such relationship at the Owner’s (or Beneficiary’s) death.

If no Beneficiary designation is in force at the time of the Owner’s death, the Beneficiary shall be the spouse of the Owner. If there is no living spouse, the Beneficiary shall be the Owner’s estate.

#### AGREEMENT TO ARBITRATE CONTROVERSIES

This agreement contains a predispute arbitration clause. By signing an arbitration agreement the parties agree as follows:

- All parties to this agreement are giving up the right to sue each other in court, including the right to a trial by jury, except as provided by the rules of the arbitration forum in which a claim is filed.
- Arbitration awards are generally final and binding; a party’s ability to have a court reverse or modify an arbitration award is very limited.
- The ability of the parties to obtain documents, witness statements and other discovery is generally more limited in arbitration than in court proceedings.
- The arbitrators do not have to explain the reason(s) for their award unless, in an eligible case, a joint request for an explained decision has been submitted by all parties to the panel at least 20 days prior to the first scheduled hearing date.
- The panel of arbitrators will typically include a minority of arbitrators who were or are affiliated with the securities industry.
- The rules of some arbitration forums may impose time limits for bringing a claim in arbitration in some cases, a claim that is ineligible for arbitration may be brought in court.
- The rules of the arbitration forum in which the claim is filed, and any amendments thereto, shall be incorporated into this agreement.

The Client agrees that any controversy arising out of or relating directly or indirectly to this Agreement, or any investment by the Client hereunder, or with respect to transactions of any kind executed by or with RBC Capital Markets, LLC (“RBC CM”), Member NYSE/ FINRA/SIPC, any introducing broker for the Account (if applicable), or each of their respective officers, directors, agents, employees, or affiliate, or with respect to this Agreement or any other agreements entered in to with RBC CM or the introducing broker (if applicable) relating to the Accounts with RBC CM or the breach thereof, shall be settled by arbitration pursuant to the Federal Arbitration Act and in accordance with the rules, then in effect, of the Financial Industry Regulatory Authority. Notice preliminary to, in conjunction with or incident to arbitration, may be sent to the Client by mail and personal service is hereby waived. Judgment upon any award rendered by the arbitrators may be entered in any court having jurisdiction thereof.

No person shall bring a putative or certified class action to arbitration, nor seek to enforce any predispute arbitration against any person who has initiated in court a putative class action; or who is a member of a putative class who has not opted out of the class with respect to any claims encompassed by the putative class action until: (i) the request for class certification is denied; (ii) the class is decertified; or (iii) the customer is excluded from the class by the court. Such forbearance to enforce an agreement to arbitrate shall not constitute a waiver of any rights under this Agreement except to the extent stated herein.