

TAXABLE ACCOUNT APPLICATION

Forward To: 214 West 9th Street
 PO Box 420
 Onaga, KS 66521-0420
 P) 800-521-9897
 F) 913.901.4190
 CustomerService@mainstartrust.com

Please Print or Type

ACCOUNT OWNERSHIP	
<input type="checkbox"/> Individual <input type="checkbox"/> Tenants With Right of Survivorship (JTWROS) <small>Your share of the account will pass to a surviving owner in the event of your death.</small> <input type="checkbox"/> Trust (first, last, and signature pages required)	<input type="checkbox"/> Custody Account for Minors Under Laws of (state)* _____ Age of Termination* _____ <small>* Required for accounts established pursuant to the Uniform Transfers to Minors Act (UTMA) or by the Uniform Gifts to Minors Act (UGMA)</small>

ACCOUNTHOLDER / TRUST INFORMATION		
ACCOUNT HOLDER NAME AND ADDRESS	SSN / TIN	DATE OF BIRTH
	BUSINESS PHONE	FAX NUMBER
EMAIL ADDRESS	HOME PHONE	TAXABLE ACCOUNT NBR <small>Internal use only</small>

JOINT ACCOUNTHOLDER INFORMATION		
ACCOUNT HOLDER NAME AND ADDRESS	SSN	DATE OF BIRTH
	BUSINESS PHONE	FAX NUMBER
EMAIL ADDRESS	HOME PHONE	

TRUST VERIFICATION <small>complete for Trust only</small>		
NAME OF TRUST	DATE OF TRUST	TAX ID NUMBER
TRUSTOR(s)		

For Trusts with multiple trustees, select the number of trustees required for a valid direction on the account pursuant to the trust documents and/or applicable law. If no selection is made, all trustees must authorize the action. All One Majority

STATEMENT OPTION	
<input type="checkbox"/> Quarterly Electronic Statement Only (must provide email address above) <input type="checkbox"/> Quarterly Paper Statement	<input type="checkbox"/> Annual Paper Statement <input type="checkbox"/> Monthly Paper Statement
If no box is marked, your statement will be electronic until you give further direction to the Custodian. Additional fees will be assessed for paper statements. Please refer to the Fee Disclosure for a list of all applicable fees. Accountholders selecting electronic statements will not receive paper transaction advices.	

INVOICE OPTION	
<input type="checkbox"/> Charge Account (default) <small>If no option is marked, your account will be charged</small>	<input type="checkbox"/> Bill Me <input type="checkbox"/> ACH – Debit, Checking or Savings Account <small>Please attach voided check or savings withdrawal slip</small>
REQUIRED One time setup fee and annual account fee to be included with Application Make check payable to Mainstar Trust	

TRANSFER ON DEATH

You may designate one or more person(s) or entity(ies) as transfer on death beneficiary (s) of your Account. Transfer on death is a form of account registration which allows the individual owner or the last surviving joint tenant to transfer upon their death their ownership of the account to the designated beneficiary(ies) without going through probate or being subject to the deceased will . If you designate more than one beneficiary, the assets in the account will be divided equally unless otherwise designated below among the beneficiaries. Should any beneficiary be not then living, the assets in the account shall pass to remaining beneficiaries pro rata.

The following individual(s) or entity(ies) are named as beneficiary(ies)

NAME AND ADDRESS	DT OF BIRTH	SSN	RELATIONSHIP	SHARE %

DESIGNATION OF REPRESENTATIVE (optional)

YOUR REPRESENTATIVE NAME AND ADDRESS	BROKER DEALER or RIA AFFILIATION (if any)				
	Name _____ If my Representative is affiliated with a BD or RIA firm, and to assist the BD or RIA firm with its supervisory responsibilities, the Custodian may make available my account information to my Representative's respective BD or RIA. If my Representative changes firms, BD, or RIA affiliations, my Representative will continue to have the same authority on my account. It is my Representative's responsibility to notify both the Custodian and me of any change in my Representative's firms, BD, or RIA affiliations. My Representative also must notify the asset companies and the Custodian of and complete the necessary BD or RIA documents to change his/her firm or BD or RIA affiliation.				
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The Representative will only be allowed access to online account statements and other information. If you wish to grant additional authority you must check the box below.

Buy, sell, deliver and/or settle trades of any assets in accordance with the Custodian's terms and conditions upon the written direction of my Representative. The Custodian has the right to rely on any representations and/or warranties made by my Representative in connection with a sale or purchase on behalf of my account, including but not limited to, representation with regard prohibited transactions and suitability requirements.

I agree to accept the designation of "Representative" for this account and all the duties and responsibilities with that designation. The accountholder and I have received a copy of the Taxable Custodial Account Application, Taxable Custodial Account Agreement, Summary of Accountholder Responsibilities, and Fee Disclosure. I agree to be bound by the terms of these documents.

Representative Signature

Date

SIGNATURES

I certify that the information provided in the Application is accurate. I acknowledge I have received a copy of and understand the terms of this custodial account, Taxable Account Plan Agreement, Summary of Accountholder Responsibilities, and Fee Disclosure ("Documents"). I understand that the terms and conditions which apply to this Taxable Account are contained in the "Documents". I agree to be bound by those terms and conditions.

I recognize that the products purchased and/or held within my Taxable Account are not insured by the FDIC, not a deposit or other obligation of, or guaranteed by, Mainstar Trust and are subject to investment risks, including possible loss of the principal amount invested.

This Agreement and the exhibits and disclosures referenced herein contains the entire agreement of the parties with respect to the subject matter of this Agreement, and supersedes all prior negotiations, agreements and understanding between the parties, whether written or oral, with respect thereto. I hereby acknowledge and agree that I 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, This Agreement may only be amended by a written document duly executed by all parties.

Accountholder / Trustee Signature

Date

Joint Accountholder / Trustee Signature
(If Applicable)

Date

Mainstar Trust Authorized Signature

Date