



ACCOUNT OPENING GUIDE

COMPLETE THE APPLICATION → FUND YOUR ACCOUNT → DIRECT YOUR INVESTMENT

STEP 1



STEP 2



STEP 3



STEP 1. COMPLETE THE APPLICATION

- ACCOUNT APPLICATION** - All new accounts must provide us with either the driver's license information; a photocopy of unexpired, photo-bearing government-issued identification; or a notarized document.
- ACCOUNT FEES** - Account opening fees are due when the account is established. Any outstanding fees will be deducted from the available cash balance prior to initial asset purchase. Please see the enclosed Fee Schedule.
- ACCOUNT DISCLOSURES** - Keep and store for future reference.

STEP 2. FUND YOUR ACCOUNT

- DIRECT TRANSFER** - Please complete the IRA Transfer Request form, and submit a recent statement.
- ROLLOVER**
 - Previous employers qualified retirement plan (*401k, 401a, 403b, government 457b*) - Contact the plan administrator to obtain necessary forms.
 - Rollover from another IRA account - Complete Rollover Certification form.
- ANNUAL CONTRIBUTION** - Contribution must be within the IRS annual limits. Include tax year on the memo line of check.

STEP 3. DIRECT YOUR INVESTMENT

- SIGNED INVESTMENT DIRECTION FORM** - Located in the forms section of website.
- ADDITIONAL PURCHASE DOCUMENTATION** (*if required*) - Subscription Agreement, Promissory Note, etc. The additional purchase documentation is obtained from your asset sponsor.

SUBMIT YOUR FORMS

Verify all information and submit using one of the following methods:

Email:
forms@goldstartrust.com

Mail:
GoldStar Trust Company
P.O. Box 719
Canyon, TX 79015

Overnight:
GoldStar Trust Company
1401 4th Avenue
Canyon, TX 79015

Fax:
(806) 655-2490

NOTE: Make all checks payable to GoldStar Trust FBO "client's name".



PART 1. IRA OWNER

Name _____ / _____ / _____
Physical Address _____
City _____ State _____ Zip _____
Mailing Address _____
City _____ State _____ Zip _____
Social Security No. _____ Date of Birth _____
Email Address _____
Phone _____

PART 2. IRA CUSTODIAN

Name _____ GoldStar Trust Company
Address 1 _____ P.O. Box 719 (Mailing)
Address 2 _____ 1401 4th Ave. (Street)
City/State/Zip _____ Canyon, TX 79015
Phone _____ 800-486-6888

GoldStar Account Number (To be completed below by GTC)

PART 3. IRA TYPE

What type of IRA are you opening? (Must select one)

Traditional Roth SEP (IRS Form 5305-SEP is required)

An inherited IRA Owner is a beneficiary who is entitled to receive distributions from the original owner's account.

Check if applicable and complete the original owner's information below.

Inherited IRA Inherited Roth IRA

Deceased Owner's Name _____ Deceased Owner's Date of Birth _____
Deceased Owner's Social Security No. _____ Deceased Owner's Date of Death _____

PART 4. CUSTOMER IDENTIFICATION PROGRAM INFORMATION (CIP)

USA PATRIOT Act Notice: In order to comply with the USA PATRIOT Act, we must be able to identify our customer. All new accounts must provide us with either the driver's license information; a photocopy of an unexpired, photo-bearing, government-issued identification, such as a passport, military, veteran or similar ID; or a notarized document.

Driver's License No. _____ State Issued _____
Issuance Date _____ Expiration Date _____

If you do not have a valid state-issued driver's license, you must provide a legible photocopy of a valid government-issued photo ID or a notarized document.

If a non-person (i.e. estate, trust, etc.) is the account owner of the Inherited IRA the above information is required from the person who is legally authorized to act upon the account (i.e. Executor, Trustee, etc.)

PART 5. REFERRAL INFORMATION

I was referred to GoldStar Trust Company by the organization/individual referenced here: _____



Name of IRA Owner _____ Account Number _____

PART 6. ACCOUNT FUNDING

Initial funding of this IRA will come from:

- Direct Transfer from another IRA
 - Complete the **IRA Transfer Request** form and attach copy of recent statement.

- Rollover from a previous employer's qualified retirement plan (*i.e.*, 401(k), 401(a), 403(b), governmental 457(b))
 - Contact the plan administrator to obtain the necessary forms.
 - By selecting this transaction, I irrevocably designate this contribution as a rollover.

- Rollover from another IRA account
 - Complete the **IRA Rollover Certification** form to certify the rollover.

- Annual Contribution
 - Traditional or Roth IRA Contribution for tax year 20____ : \$ _____
(*Prior year contribution allowed before tax filing deadline, typically April 15th.*)
 - SEP Contribution of \$ _____ (*Reported for the tax year in which received*)

- Recharacterization or Roth Conversion
 - Complete the **Recharacterization Request** form or **Roth IRA Direct Conversion Request** form.

PART 7. INVESTMENT OPTION

- Alternative Investments (*LLC, LP, C-Corp*)
- Church Bonds
- Precious Metals
- Other _____

PART 8. SPOUSAL CONSENT

Spousal consent should be considered if either the trust or the residence of the IRA owner is located in a community or marital property state.

CURRENT MARITAL STATUS

- I AM NOT MARRIED - I understand that if I become married in the future, I should review the requirements for spousal consent.
- I AM MARRIED - I understand that if I choose to designate a primary beneficiary other than or in addition to my spouse, my spouse should sign below.

CONSENT OF SPOUSE: I am the spouse of the above-named IRA owner. I acknowledge that I have received a fair and reasonable disclosure of my spouse's property and financial obligations. Because of the important tax consequences of giving up my interest in this IRA, I have been advised to see a tax professional.

I hereby relinquish any interest that I may have in this IRA and consent to the beneficiary designation indicated below. I assume full responsibility for any adverse consequences that may result. No tax or legal advice was given to me by the Custodian.

X _____

Signature of Spouse

Date (mm/dd/yyyy)



Name of IRA Owner _____ Account Number _____

PART 9. BENEFICIARY DESIGNATION

I designate that upon my death, the assets in this account be paid to the beneficiaries named below. The interest of any beneficiary that predeceases me terminates completely, and the percentage share of any remaining beneficiaries will be increased on a pro rata basis. If no beneficiaries are named, my estate will be my beneficiary.

I elect not to designate beneficiaries at this time and understand that I may designate beneficiaries at a later date.

PRIMARY BENEFICIARIES: *(The total percentage designated must equal 100%. If more than one beneficiary is designated and no percentages are indicated, the beneficiaries will be deemed to own equal share percentages in the IRA.)*

Name _____	Name _____
Address _____	Address _____
City/State/Zip _____	City/State/Zip _____
Date of Birth _____ Relationship _____	Date of Birth _____ Relationship _____
Tax ID (SSN/TIN) _____ Percent Designated _____	Tax ID (SSN/TIN) _____ Percent Designated _____
Phone/Email _____	Phone/Email _____

CONTINGENT BENEFICIARIES: *(The total percentage designated must equal 100%. If more than one beneficiary is designated and no percentages are indicated, the beneficiaries will be deemed to own equal share percentages in the IRA. The balance in the account will be payable to these beneficiaries if all primary beneficiaries have predeceased the IRA owner.)*

Name _____	Name _____
Address _____	Address _____
City/State/Zip _____	City/State/Zip _____
Date of Birth _____ Relationship _____	Date of Birth _____ Relationship _____
Tax ID (SSN/TIN) _____ Percent Designated _____	Tax ID (SSN/TIN) _____ Percent Designated _____
Phone/Email _____	Phone/Email _____

Check here if additional beneficiaries are listed on an attached addendum. Total number of addendums attached to this IRA _____

PART 10. SIGNATURES - PLEASE READ BEFORE SIGNING

IMPORTANT: I understand the eligibility requirements for the type of IRA contribution I am making, and I state that I do qualify to make the contribution. I have received a copy of the IRA Application, the 5305-A (Traditional and SEP) or the 5305-RA (Roth) Custodial Account Agreement, the Financial Disclosure, and the Disclosure Statement. I understand that the terms and conditions that apply to this IRA are contained in this Application and the Custodial Account Agreement. I agree to be bound by those terms and conditions. Within seven days from the date I open this IRA I may revoke it without penalty by mailing or delivering a written notice to the custodian. **I assume complete responsibility for:**

- determining that I am eligible for an IRA each year I make a contribution,
- ensuring that all contributions I make are within the limits set forth by the tax laws, and

I expressly certify that I take complete responsibility for the type of investment instrument(s) I choose to fund my IRA, and that the Custodian is released of any liability regarding the performance of any investment choice I make.

X _____
Signature of IRA Owner _____ Date (mm/dd/yyyy) _____

X _____
Signature of Custodian _____ Date (mm/dd/yyyy) _____



PART 1. GOLDSTAR ACCOUNT INFORMATION

Name(s) _____ GoldStar Account No. _____

PART 2. REQUIRED DIRECTIONS FOR MUTUAL FUNDS

This agreement should be completed only if you wish your financial advisor, broker, financial planner, or other person of your choice to be authorized as your Account Representative.

- Appoint New:** I hereby instruct GoldStar Trust Company, to share my account information with the Representative/Dealer designated below.
- Revoke and Replace:** I hereby revoke any and all prior Representative/Dealer designations and instruct GoldStar Trust Company, to share my account information with the Representative/Dealer designated below.
- Revoke:** I hereby revoke any and all prior Representative/Dealer designations and elect not to have a Representative/Dealer designated on the above referenced account at this time.

Completion of this form will authorize GoldStar Trust Company ("GoldStar"), as custodian for your account, to do the following:

- Provide your Account Representative with unlimited internet access to your account information.
- Provide your Account Representative with an account statement, deposit confirmations and such other information as requested.

Name _____ Representative No. _____
 Firm Name _____ Branch ID _____
 Email Address _____ Phone No. _____

I further acknowledge that:

1. I understand that my Account Representative is my authorized agent and is not in any way an agent, employee, or representative of GoldStar.
2. I understand that my Account Representative may be a registered representative of a broker dealer organization, a financial advisor or other person that I deem acceptable.
3. I agree that it is my responsibility to authorize and initiate transactions for my account. GoldStar is instructed to make or receive payment for securities transactions, as indicated by Subscription Agreements, directions or instructions I have signed.
4. I understand that I may replace my Account Representative by giving written notice to GoldStar and that removing my Account Representative will not cancel any instructions given by the Account Representative before GoldStar received written notice that a new Account Representative has been designated.
5. I understand that if my Account Representative should leave the company or organization (also designated herein as my broker dealer), the broker dealer of record will remain on my account unless I change this designation by written notice to GoldStar.
6. I agree to indemnify and hold GoldStar harmless for any loss or breach of any kind because GoldStar acted in reliance on instructions from me, my Account Representative, his or her agent(s) or his or her broker dealer.
7. I understand that GoldStar has not made and will not make any recommendation or investigation with respect to my Representative. I understand that by appointing a financial advisor, broker, financial planner or other person as a Designated Representative to my individual retirement account, that this person is authorized to give investment directions on my behalf to GoldStar.

This agreement shall be interpreted and construed under the laws of the State of Texas, without regard to conflict of law principles.

PART 3. CUSTOMER(S) SIGNATURE

I attest by my signature below, that I understand and agree to the terms of this Account Representative Form and that I choose the person listed above as the Account Representative on my GoldStar account.

X _____ Date (mm/dd/yyyy)
Authorized Signature (Account Holder, Custodian, or Trustee)

X _____ Date (mm/dd/yyyy)
Secondary Authorized Signature (Joint Account Holder, if any)



IMPORTANT! CONTACT YOUR CURRENT PLAN ADMINISTRATOR TO SEE IF THEY REQUIRE THEIR OWN PAPERWORK

GOLDSTAR IRA ACCOUNT OWNER

Name: _____ SS #: _____ Date of Birth: _____
Address: _____ Daytime Phone #: _____
E-mail: _____

CURRENT IRA OR QUALIFIED PLAN INFORMATION

Please provide a copy of a recent statement from your current IRA custodian or employer retirement plan.

Custodian's Name: _____ Account #: _____
Custodian's Address (physical if overnight): _____
City, State, & Zip _____ Phone #: _____

Type of existing IRA or Qualified Plan to be transferred or rolled over: (please choose one)

Traditional SEP IRA 401K 403(b) Pension Gov. 457 Plan Simple Other _____

ASSET LIQUIDATION INSTRUCTIONS

Asset Description	Quantity in IRA	Quantity To Be Transferred	Liquidate Immediately	Liquidate at Maturity	Transfer In-Kind
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SELECT ONE: Close my current account after transfer **OR** Partial transfer

SELECT ONE: Wire my funds to GoldStar Trust Company. I acknowledge that a wire fee may be charged by my current custodian.
 Send a check payable to GoldStar Trust Company (for the benefit of my IRA).

RMD - REQUIRED MINIMUM DISTRIBUTION RESTRICTION (AGE 70 ½ OR OLDER ONLY)

I authorize the trustee or custodian named above to: distribute my RMD to me prior to transferring my Traditional or SEP IRA assets,
 segregate and retain my RMD amount or include the amount that represents my RMD in the transfer. *Effective 1-1-2010*

THIS BOX FOR INTERNAL USE ONLY

GoldStar Trust Company agrees to serve as the new Custodian for the account of the above-named individual, and as Custodian, we agree to accept the assets being transferred.

GoldStar Account Identification # _____

GoldStar Trust Company
Tax ID# 74-2557688

Authorized Signature for GoldStar *Date*

SIGNATURE GUARANTEE: Check with your current custodian to determine if a Medallion Stamp Guarantee is required. This is NOT a requirement of GoldStar Trust Company.

CUSTOMER SIGNATURE

Transfers Only:

I authorize the transfer of the IRA assets in the manner described above and certify that all of the information provided by me is correct and may be relied upon by GoldStar Trust Company.

Direct Rollovers Only:

I understand the rules and conditions applicable to direct rollovers and certify that I qualify for a direct rollover of the funds or assets listed above. Due to the important tax consequences of rolling funds over to an IRA or other qualified plan, I have been advised to see a tax advisor. I hereby request payment from the plan designated above in the form of a direct rollover. I assume full responsibility for this direct rollover transaction and will not hold GoldStar Trust Company or the Plan Administrator of either the distributing or receiving plans liable for any adverse consequences that may result. I hereby irrevocably designate this contribution of the funds and/or property indicated above as a direct rollover contribution.

X _____
Account Holder's Signature *Date*



PART 1. GOLDSTAR ACCOUNT INFORMATION

Name(s) _____ GoldStar Account No. _____

PART 2. INTERESTED PARTY DESIGNATION

Please complete the information below to authorize any individual to receive information about your account. Please note that this individual will have unlimited access to your account information, but they will not be able to make changes to your account.

I, the undersigned Account Holder, hereby give the individual herein view only access of my account with GoldStar Trust Company ("GoldStar") by way of email, fax, phone and online access.

Interested Party Information

Name _____ Firm Name (if applicable) _____

Email Address (required for online access) _____

I understand that I have the option to designate or remove an Interested Party on my account at any time. The Interested Party may be any person or firm I choose and will have access to:

1. Receive requested copies of correspondence related to my account with GoldStar Trust Company, including, but not limited to, my account statement
2. View my account online
3. Discuss my account with GoldStar Trust Company
4. Have unlimited access to information regarding my account with GoldStar Trust Company

I understand that it is my responsibility to provide written instructions to GoldStar, by submitting a letter of instruction, to revoke my prior Interested Party designation. I understand that my Interested Party designation will cease upon my death. I, and not GoldStar, shall be liable for the acts and omissions of my designated interested party. I agree to be bound by the actions of my designated interested party.

PART 3. CUSTOMER(S) SIGNATURE

X _____
Authorized Signature (Account Holder, Custodian, or Trustee) _____ Date (mm/dd/yyyy) _____

X _____
Secondary Authorized Signature (Joint Account Holder, if any) _____ Date (mm/dd/yyyy) _____



PART 1. ACCOUNT FEES BY ASSET TYPE

Annual Maintenance, Asset Holding and Depository Storage Fees are due when the account is established and billed annually thereafter on the account opening anniversary date. Annual Fees are not prorated. Accounts holding multiple asset types: only one Maintenance Fee will be charged based on the asset type with the greater fee.

ASSETS*

Establishment Fee	\$50	
Annual Maintenance Fee	\$75	
Additional Fees charged when applicable:		
Transaction Fees for Security Trades	\$25 ea + brokerage fees	Applies to stock trades through GoldStar's omnibus account.

REAL ESTATE**

Establishment Fee	\$50	
Annual Maintenance Fee	\$150	
Purchase or Sale Fee	\$100	Per transaction
Legal/Professional Fees	\$150 minimum per hour	Professional service fees incurred by GoldStar for outside professional service.
Same Day Rush Service	\$75	Must be received by 12pm CST (This service is not a guarantee that funding will be submitted if the paperwork is incomplete or changes are required.)

PRECIOUS METALS***

Establishment Fee	\$50	
Annual Maintenance Fee	\$75 min./\$275 max.	\$1 per \$1000 of market value greater than \$100,000 (10 basis points)
Annual Commingled Depository Storage Fee	\$100 min./NO max.	\$1 per \$1000 of precious metals value greater than \$100,000 (10 basis points)
Annual Segregated Depository Storage Fee	Varies	Fees vary by depository.
Buy, Sell or Exchange	NO FEE	Shipping fees may apply on liquidations and in-kind distributions.

PERTH MINT CERTIFICATES

Establishment Fees	\$50
Annual Maintenance Fee	\$75
Annual Asset Holding Fee	\$150
Partial Liquidation/Re-registration Fee	\$50

CHURCH BONDS/CHURCH LOAN AND EXTENSION FUNDS

Annual Maintenance Fee	\$55	
Partial Transfer or Distribution In-Kind Fee	\$50	Church Bonds/Loan and Extension Fund investments only
Bond Re-registration Fee: GoldStar Bond	\$10 each	
Bond Re-registration Fee: Other Bonds	Varies	Subject to other Trustee's Re-registration Fees

PART 2. SERVICE FEES

One Time ACH or Check Distribution Fee	\$15	Roth Conversion/Re-Characterization Fee (<i>Establishment fee may apply</i>)	\$75
Recurring ACH Distribution Fee	No Fee	Excess Contribution Removal Fee	\$50
Recurring Check Distribution Fee	\$5	Late Fee (<i>Applies to any fees not paid within 30 days of due date</i>)	\$50 per occurrence
Wire Fee	\$50	Annual Paper Statement Fee	\$25
Overnight Fee	\$50	Statement Reprint Fee	\$10
Cashier's Check Fee	\$50	Research Assistance Fee	\$50/hour
Partial transfer of Assets/Distribution In-Kind Fee	\$50	Insufficient Funds/Returned Check Fee	\$50
Full Termination Fee	\$150		

* Includes any number or combination of Fixed-Rate Investments, Bank Certificates of Deposit, Cash, Money Market Funds, Mutual Funds, Publicly Traded Securities in U.S. Exchanges, Privately Offered Stock, Brokerage Accounts, REITs, Limited Liability Companies, Limited Partnerships, Secondary Market Annuities, Crowdfunding Investments, Structured Cash Flows, Hedge Funds, and Promissory Notes.

** Does not include LLC or LP investments; please see www.goldstartrust.com/self-directed-IRAs/real-estate-IRAs/ for a legal definition of real estate.

*** The minimum \$75 Maintenance Fee applies up to \$100,000 of market value; thereafter, 10 basis points applies.



PART 3. ACKNOWLEDGMENTS

Cash Management: Pursuant to Section 8.06 of your Traditional IRA or SIMPLE IRA account agreement, Section 9.06 of your Roth IRA account agreement, or Section 10.05 of your Coverdell ESA account agreement (as the case may be), you authorize and direct GoldStar Trust Company ("GoldStar") to deposit any uninvested cash held in your IRA/ESA into an omnibus demand deposit account maintained by Happy State Bank, an affiliate of GoldStar (the "Deposit Account"). On a daily basis, any cash in your IRA/ESA, for which GoldStar has not received an investment or other direction as to its disposition, will be deposited into the Deposit Account. Such uninvested cash will remain in the Deposit Account until you direct GoldStar as to the investment or other disposition of such uninvested cash, and such direction is implemented. The Deposit Account is insured by the Federal Deposit Insurance Corporation ("FDIC"), up to the maximum amount per depositor, which is currently \$250,000. Information on FDIC insurance coverage is available at www.fdic.gov. Your IRA/ESA will earn a reasonable rate of interest on uninvested cash deposited in the Deposit Account. GoldStar will credit to your IRA/ESA, on a monthly basis, interest on your IRA/ESA's deposit in the Deposit Account based on the rate paid on similar accounts by one or more financial institutions selected by GoldStar and are subject to change in accordance with market conditions at the sole discretion of GoldStar. No interest will be credited to your IRA/ESA in the month you close your IRA/ESA. GoldStar will perform all sub-accounting, record keeping, and interest posting functions with respect to your IRA/ESA's deposit of uninvested cash in the Deposit Account. The difference, if any, between the amount Happy State Bank pays on the Deposit Account and the amount credited to your IRA/ESA will be considered GoldStar's compensation for performing such services.

RIGHT TO MAKE ADJUSTMENTS TO THIS FEE SCHEDULE: GoldStar Trust Company reserves the right to make any adjustments in its fees for custodial or agency services when such adjustments are warranted by changes in governing laws, regulations, operating technology or economic conditions. This schedule may be modified only upon revision by GoldStar of its published schedule of IRA fees. Such fees shall become effective on the 30th day after mailing the notice of such revision to the participant at the address shown on the records of GoldStar.

Examples of Investments NOT permitted in the Self Directed IRA or ESA: Collectibles, Life Settlements, Viaticals, Single Member LLC and Foreign Real Estate.

PART 4. IRA CUSTOMER IDENTIFICATION REQUIREMENTS

Section 326 of the Uniting and Strengthening America by Providing Appropriate Tools Required to Intercept and Obstruct Terrorism Act (USA PATRIOT Act) authorizes and requires the Department of the Treasury to add to its rules for banks to establish Customer Identification Programs. Previously, trust companies were not treated as banks and trust relationships were not treated as "accounts." However, GoldStar and GoldStar IRA account establishment process are now subject to these requirements.

NOTICE

Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

When you open an account, we will ask for your name, residence address, social security number, date of birth, and other information that will allow us to identify you. We may also ask for copies of your passport, drivers license, or other identifying documents.

We are required to compare your identity to lists or persons and organizations maintained by any federal agency designated by the Department of the Treasury. If your name appears on any of these lists, we must refuse to open your account, close your account if it is already open, notify federal authorities, and follow all federal directives. If you attempt to falsify or conceal your identity, we may be required to file a Suspicious Activity Report.

We may also use independent sources to verify identifying information. Federal law requires us to retain the identification information for a certain period of time (currently five years after closing your account), and may require that we provide this information to federal authorities without notice to you.

This notice is in addition to our Privacy Disclosure and may describe potential disclosures of non-public personal information that were not known to us at the time that the Privacy Disclosure was prepared.

IDENTIFYING DOCUMENTS REQUESTED

The easiest means for GoldStar to comply is to receive documents with your application, such as:

- Completion of the Customer Identification Requirements section of the IRA Application
- Any document with your notarized signature
- A notarized copy of your passport or drivers license or other state-issued photo ID that is not expired
- An ordinary copy of your unexpired photo ID, if GoldStar is able to complete other procedures.

IDENTIFYING DOCUMENTS REQUIRED

If you intend to direct investment outside the U.S., GoldStar will require a notarized copy of your passport (or drivers license if you do not have a passport). This may be the same document that is to be forwarded to a non-U.S. bank.



PART 1. WELCOME LETTER

You will receive a signed copy of the application that confirms your account number within the Welcome Packet. Once the Welcome Letter is received you may enroll for online access at www.goldstartrust.com.

PART 2. NEW ACCOUNT FEE INFORMATION

Account opening fees are due when the account is established. Any outstanding fees will be deducted from the available cash balance prior to initial asset purchase. You can pay the following ways:

- **Credit Card:** Call our Investor Services Department at **1-800-486-6888** or once the account is opened and you receive your copy of the account agreement, go to www.goldstartrust.com to self-enroll for online account access to pay fees.
- **Deduct from account:** No action is needed.
- **Check:** Include with initial paperwork. Make check payable to **GoldStar Trust Company**.

NOTE: If fees are not paid at time of account opening you will receive an invoice from GoldStar Trust Company.

PART 3. ONLINE ACCOUNT ACCESS

Online access is available for all accounts with a valid email address on file. Once your account is open with us and you receive the copy of the account agreement, you may self-enroll for online account access at www.goldstartrust.com.

STATEMENT INFORMATION

- **Electronic Delivery:** You must self-enroll for online account access at www.goldstartrust.com and accept the electronic disclosure. Communication will include semi-annual statements, tax forms, correspondence, etc. If you do not self-enroll for online account access within 30 days of account opening, your account communication will be set to Paper Delivery and an annual paper statement fee will apply. Please see Fee Schedule at www.goldstartrust.com.
- **Paper Delivery:** No action is needed. Your account will be enrolled in paper communications via mailing address on file. Communication will include semi-annual statements, tax forms, correspondence, etc. An annual paper statement fee will apply. Please see Fee Schedule at www.goldstartrust.com.

PART 4. FORMS

The forms are located on the GoldStar website at www.goldstartrust.com. The forms can be completed and submitted through our electronic service at your convenience.

WE ARE HERE TO HELP! _____

Contact us at:

GoldStar Trust Company Investor Services • info@goldstartrust.com • (800) 486-6888 • www.goldstartrust.com