



Schwab Bank Investor Checking™ Trust Account Application for Existing Schwab One® Trust Account Holders

www.schwab.com | 1-888-403-9000

- Use this application to establish a Schwab Bank Investor Checking ("Investor Checking") Trust account with Charles Schwab Bank, SSB ("Schwab Bank") and link it to your existing Schwab One Trust account ("Trust brokerage account") held at Charles Schwab & Co., Inc. ("Schwab"). **All Trustees must be U.S. citizens or resident aliens and must also reside in the U.S. or one of its territories and provide a U.S. mailing address.** In addition, Trustees and beneficiaries must be individuals and not organizations, corporations, or non-individual entities.
- Once your Investor Checking Trust account is opened and funded, you will receive Visa® Platinum Debit Card(s). Personalized checks will be sent once your Investor Checking account is funded with at least \$100.
- **Important Note about your Trading Authority or Power of Attorney (POA): If you have appointed a TA or POA on your existing Trust brokerage account, contact Schwab for the required forms to apply your TA or POA authorization to your linked Investor Checking Trust account. Your Investor Checking Trust account cannot be established until Schwab receives this paperwork.**
- **NOTE:** The Schwab Bank Investor Checking™ account is offered only as an account linked to a Schwab One® brokerage account. If the Investor Checking account is not approved by Schwab Bank, Schwab may close the linked Schwab One brokerage account regardless of when that brokerage account was opened.

Include copies of the following documents with your Application:

Living Trust Documentation

- The first page of the Living Trust document that lists the name and date of the Living Trust (i.e., the title page, where one exists); and
- All signature pages.

Please do **NOT** send any additional pages from the Living Trust document or any substitute pages, such as a Memorandum of Trust, Certification of Trust, Affidavit of Trust, or Abstract of Trust.

If the Living Trust is revocable, the client may submit either a complete Certification of Trust or the first page and signature page(s). If information provided on the application or supporting documents is unclear or raises questions, additional follow-up may be required.

1. Existing Trust Brokerage Account Information

Notarization of Trustee signature[s] is required in Section 8, page 9.

Exception: Notarizations are not required for Revocable Living Trusts where the Grantor(s) and Trustee(s) are the same individual(s).

The registration of your Investor Checking Trust account will be the same as the registration for your Trust brokerage account to which it is linked. Testamentary Trust accounts are not eligible for Investor Checking Trust accounts.

Indicate the Type of Trust:

- Revocable Living Trust where the Grantor(s), Trustee(s), and current beneficiary(ies) are all the same individual(s)
- Other Revocable Living Trust
- Irrevocable Living Trust

Schwab One Trust Account Number Trust Tax ID Number* (If Revocable Living Trust, you may use Grantor's Social Security number.)

Trust Name

Original Date of Trust (mm/dd/yyyy) Trust Is Governed by the Laws of the State of (Enter state.)

Trust/Legal Street Address (no P.O. boxes)

City State Zip Code

Charles Schwab & Co., Inc. and Charles Schwab Bank, SSB are separate but affiliated companies and subsidiaries of The Charles Schwab Corporation. Brokerage products are offered by Charles Schwab & Co., Inc., Member SIPC. Deposit and lending products and services are offered by Charles Schwab Bank, SSB, Member FDIC and an Equal Housing Lender.

Trust Mailing Address (if different from above; P.O. boxes may be used)

City **State** **Zip Code**

*Trust Tax ID Number must be the same as the Trust Tax ID Number on your existing Trust brokerage account.

2. Existing Trustee Information (Required)

The information provided in this section will be used by Schwab to update your account information for your linked Trust brokerage account. Your email subscriptions to brokerage services will not be changed.

We respect your privacy. Schwab Bank will use the personal identification and account information provided in this application and previously provided to Schwab to open and service your accounts, communicate with you, and offer information about products and services. For more information on privacy policies, read about our privacy policy in Schwab Bank's *A Commitment to Your Privacy* booklet. As required by federal law, we will use the information you provided to Schwab and Schwab Bank to verify your identity.

All Trustees who are to conduct business in the account must provide the following information. If there are more than two Trustees who are to conduct business in the account, photocopy the Account Application, complete Sections 2, 7, and 8 for each additional Trustee, and attach the photocopies to the original Account Application. As required by federal law, Schwab will use the information provided to verify your identity.

Primary Trustee

Name *First* *Middle* *Last*

Social Security/Tax ID Number **Date of Birth** (mm/dd/yyyy) **Mother's Maiden Name**

Are you known by another name? (Please specify.)

Home/Legal Street Address (no P.O. boxes)

City **State** **Zip Code**

Mailing Address (if different from above; P.O. boxes may be used)

City **State** **Zip Code**

Home Telephone Number **Business Telephone Number** **Mobile Telephone Number**

Email Address*

*By providing your email address, you consent to receiving email from Schwab Bank. Information about opting out of certain email communications is provided at www.schwab.com/privacy.

Country(ies) of Citizenship (Must list each separated by a comma.)

USA Other: _____

Country of Legal Residence (Select only one.)

USA Other: _____

ID Number and Type (Please select only one box and provide the relevant information below.)

Passport Driver's License Gov't-Issued ID

Identification Number **Country or State of Issuance** **Issue Date** (mm/dd/yyyy) **Expiration Date** (mm/dd/yyyy)

Brokerage Products: Not FDIC-Insured ▪ No Bank Guarantee ▪ May Lose Value

Employment Status (Please select only one box.)

Employed Self-Employed Retired Homemaker Student Not Employed

Employer Name/Business Name

Occupation (If you selected "Employed" or "Self-Employed," please select one option that best describes your occupation.)

Business Owner/Self-Employed Financial Services/Banking Professional Military Consultant
 Executive/Senior Management Information Technology Professional Educator Other (specify):
 Medical Professional Other Professional Sales/Marketing
 Legal Professional Clerical/Administrative Services U.S. Government Employee (Federal/State/Local)
 Accounting Professional Foreign Government Employee (Non-U.S.) Trade/Service (Labor/Manufacturing/Production)

Business Street Address (no P.O. boxes) **City** **State or Province** **Zip or Postal Code**

Trusted Contact Designation

A Trusted Contact Person ("Trusted Contact")* is a resource Schwab, and your advisor (if you have one), may contact on your behalf, if necessary, to attempt to address concerns regarding potential financial exploitation, or in communicating with you regarding issues related to your account(s). A Trusted Contact will not be able to view your account information, execute transactions in your account(s), or inquire about account activity, unless that person has that authority through another role on the account(s), such as a trustee or power of attorney. Providing Schwab with Trusted Contact information is voluntary. We encourage you to provide two Trusted Contacts in the event that one is not reachable in the future.

- Schwab suggests that your Trusted Contact(s) be someone other than your Financial Consultant or Investment Advisor.
- You may name up to two Trusted Contacts.
- The person(s) you name as Trusted Contact(s) will be the Trusted Contact(s) on all of your Schwab accounts, as provided for in your account agreement.
- For multiple-party accounts, each party can name separate Trusted Contacts.
- The Trusted Contact(s) must be at least 18 years old.

Trusted Contact Information

Trusted Contact information provided on this form will replace all Trusted Contact information currently on file.

Trusted Contact 1

If you have no changes to your existing Trusted Contact, please skip this section.

Name *First* *Middle* *Last* *Suffix*

Relationship (Please select only one.)

Spouse Partner Child Parent Sibling Friend Other

Please provide at least one method of contact for each Trusted Contact listed.

Mailing Address (no P.O. boxes) **City**

State or Province **Zip or Postal Code** **Country**

Telephone Number **Mobile Number** **Email Address**

Trusted Contact 2

If you have no changes to your existing Trusted Contact, please skip this section.

Name *First* *Middle* *Last* *Suffix*

Relationship (Please select only one.)

Spouse Partner Child Parent Sibling Friend Other

Please provide at least one method of contact for each Trusted Contact listed.

Mailing Address (no P.O. boxes) _____ **City** _____

State or Province _____ **Zip or Postal Code** _____ **Country** _____

Telephone Number _____ **Mobile Number** _____ **Email Address** _____

*If you provide a Trusted Contact Person(s) to Schwab, you understand that you have authorized Schwab and your advisor (if you have one) to contact the Trusted Contact Person(s) at their discretion and to disclose information about your account to address possible activities that might indicate financial exploitation of you; to confirm the specifics of your current contact information, health status (including physical or mental capacity), or the identity of any legal guardian, executor, trustee, or holder of a power of attorney on your account(s); or as otherwise permitted by FINRA rules or state law. For more information, please see your Schwab Account Agreement, which is available at schwab.com/accountagreement.

Co-Trustee

Name *First* _____ *Middle* _____ *Last* _____

Social Security/Tax ID Number _____ **Date of Birth** (mm/dd/yyyy) _____ **Mother's Maiden Name** _____

Are you known by another name? (Please specify.) _____

Home/Legal Street Address (no P.O. boxes) _____

City _____ **State** _____ **Zip Code** _____

Mailing Address (if different from above; P.O. boxes may be used) _____

City _____ **State** _____ **Zip Code** _____

Home Telephone Number _____ **Business Telephone Number** _____ **Mobile Telephone Number** _____

Email Address* _____

*By providing your email address, you consent to receiving email from Schwab Bank. Information about opting out of certain email communications is provided at www.schwab.com/privacy.

Country(ies) of Citizenship (Must list each separated by a comma.) _____ | **Country of Legal Residence** (Select only one.)
 USA Other: _____ | USA Other: _____

ID Number and Type (Please select only one box and provide the relevant information below.)
 Passport Driver's License Gov't-Issued ID

Identification Number _____ **Country or State of Issuance** _____ **Issue Date** (mm/dd/yyyy) _____ **Expiration Date** (mm/dd/yyyy) _____

Brokerage Products: Not FDIC-Insured ▪ No Bank Guarantee ▪ May Lose Value

Employment Status (Please select only one box.)

Employed Self-Employed Retired Homemaker Student Not Employed

Employer Name/Business Name

Occupation (If you selected "Employed" or "Self-Employed," please select one option that best describes your occupation.)

Business Owner/Self-Employed Financial Services/Banking Professional Military Consultant
 Executive/Senior Management Information Technology Professional Educator Other (specify):
 Medical Professional Other Professional Sales/Marketing
 Legal Professional Clerical/Administrative Services U.S. Government Employee (Federal/State/Local)
 Accounting Professional Foreign Government Employee (Non-U.S.) Trade/Service (Labor/Manufacturing/Production)

Business Street Address (no P.O. boxes) **City** **State or Province** **Zip or Postal Code**

Trusted Contact Designation

A Trusted Contact Person ("Trusted Contact")* is a resource Schwab, and your advisor (if you have one), may contact on your behalf, if necessary, to attempt to address concerns regarding potential financial exploitation, or in communicating with you regarding issues related to your account(s). A Trusted Contact will not be able to view your account information, execute transactions in your account(s), or inquire about account activity, unless that person has that authority through another role on the account(s), such as a trustee or power of attorney. Providing Schwab with Trusted Contact information is voluntary. We encourage you to provide two Trusted Contacts in the event that one is not reachable in the future.

- Schwab suggests that your Trusted Contact(s) be someone other than your Financial Consultant or Investment Advisor.
- You may name up to two Trusted Contacts.
- The person(s) you name as Trusted Contact(s) will be the Trusted Contact(s) on all of your Schwab accounts, as provided for in your account agreement.
- For multiple-party accounts, each party can name separate Trusted Contacts.
- The Trusted Contact(s) must be at least 18 years old.

Trusted Contact Information

Trusted Contact information provided on this form will replace all Trusted Contact information currently on file.

Trusted Contact 1

If you have no changes to your existing Trusted Contact, please skip this section.

Name *First* *Middle* *Last* *Suffix*

Relationship (Please select only one.)

Spouse Partner Child Parent Sibling Friend Other

Please provide at least one method of contact for each Trusted Contact listed.

Mailing Address (no P.O. boxes) **City**

State or Province **Zip or Postal Code** **Country**

Telephone Number **Mobile Number** **Email Address**

Trusted Contact 2

If you have no changes to your existing Trusted Contact, please skip this section.

Name *First* *Middle* *Last* *Suffix*

Relationship (Please select only one.)

Spouse Partner Child Parent Sibling Friend Other

Please provide at least one method of contact for each Trusted Contact listed.

Mailing Address (no P.O. boxes)		City
State or Province	Zip or Postal Code	Country
Telephone Number	Mobile Number	Email Address

*If you provide a Trusted Contact Person(s) to Schwab, you understand that you have authorized Schwab and your advisor (if you have one) to contact the Trusted Contact Person(s) at their discretion and to disclose information about your account to address possible activities that might indicate financial exploitation of you; to confirm the specifics of your current contact information, health status (including physical or mental capacity), or the identity of any legal guardian, executor, trustee, or holder of a power of attorney on your account(s); or as otherwise permitted by FINRA rules or state law. For more information, please see your Schwab Account Agreement, which is available at schwab.com/accountagreement.

3. Required Information About the Schwab Bank Investor Checking Trust Account

Source of Funds in Account (Check all that apply.)

In this section, we're collecting information about the categories ("sources") of assets that will be held in your account. Please select all of the sources of the assets that will be deposited or held in your account, including the original sources of any assets that will be transferred into the account from another firm.

- | | |
|---|--|
| <input type="checkbox"/> Salary/Wages/Savings | <input type="checkbox"/> Investment Capital Gains |
| <input type="checkbox"/> Social Security Benefits | <input type="checkbox"/> Gifts |
| <input type="checkbox"/> Sale of Property or Business | <input type="checkbox"/> Gambling/Lottery |
| <input type="checkbox"/> Family/Relatives/Inheritance | <input type="checkbox"/> Other (please specify): _____ |

Purpose of Account (Please select all that apply.)

- | | |
|--|---|
| <input type="checkbox"/> General/Personal Expenses | <input type="checkbox"/> Distribution of Trust Assets |
| <input type="checkbox"/> Payment of Trust Expenses | <input type="checkbox"/> Payment of Trustee Compensation |
| <input type="checkbox"/> Educational Expenses | <input type="checkbox"/> Large Asset Purchase (home, car, etc.) |
| <input type="checkbox"/> Other (please specify): _____ | |

4. Schwab One® Trust Brokerage Account Features

Schwab's Cash Features Program

The current cash feature on your Schwab One Trust brokerage account will remain the same.

Payment Features

If you have existing payment features (checks, debit cards, Schwab BillPay®) on your Trust brokerage account, they will become inactive after your Investor Checking Trust account is opened. Debit cards will be deactivated 30 days after account opening. Checks and Schwab BillPay will be deactivated 90 days after account opening.*

*Schwab One and Schwab One Trust accounts must have at least a \$100 balance in order to receive a debit card or checks, unless the account is linked to a Schwab Bank Investor Checking™ account.

5. Schwab Bank Investor Checking Trust Account Features

Schwab Bank Bill Pay™

This online electronic bill payment feature is provided unless you check the box below. The feature is provided at no additional charge and will be activated after you fund your account.

- Do NOT add electronic bill payment.

Overdraft Protection

This feature systematically transfers funds from your Trust account, up to your Authorization Limit, including Available Margin Loan Value, to your Schwab Bank Investor Checking™ Trust account in order to provide you with coverage against nonsufficient funds.*

*Overdraft protection using margin sources may create a margin loan in your Trust account that may be subject to daily interest charges, margin calls, or potential liquidation of securities. Refer to the Schwab Bank Deposit Account Agreement and your Schwab One® Account Agreement for details.

Anticipated Activity

On average, how many times per month do you anticipate making deposits, withdrawals, and/or transfers? (Please select only one.)

- Less than 15 times per month
- 15 to 30 times per month
- 31 to 45 times per month
- More than 45 times per month

6. Fund Your Schwab Bank Investor Checking Trust Account (Select one.)

Schwab Bank checks will be sent after you fund your Investor Checking account with at least \$100; and Schwab Bank Bill Pay™ will be activated upon account opening unless expressly selected otherwise. A Visa® Platinum Debit Card will be sent upon account funding.

- Make a one-time electronic funds transfer ("ACH Transfer") of \$ _____ (maximum \$100,000) from your checking or savings account at another financial institution. Be sure to attach an original, preprinted, voided check or preprinted savings account deposit slip if you select this option.**
- Make a one-time transfer of \$ _____ from your linked Trust brokerage account.**
- Make a check payable to the name of the Trust, and mail it to one of the following locations:**

If you live in:	Send standard mail to:	Send overnight mail to:
AK, AZ, CA, CO, HI, IA, ID, KS, MT, ND, NE, NM, NV, OK, OR, SD, TX, UT, WA, WY, Armed Forces America or Armed Forces Pacific	Charles Schwab Bank P.O. Box 982605 El Paso, TX 79998-2605	Charles Schwab Bank 1945 Northwestern Drive El Paso, TX 79912
AL, AR, CT, DC, DE, FL, GA, IL, IN, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, NH, NJ, NY, OH, PA, RI, SC, TN, VA, VI, VT, WI, WV, Armed Forces Europe, American Samoa, Guam, Marshall Islands, Northern Mariana Islands or Puerto Rico	Charles Schwab Bank P.O. Box 628291 Orlando, FL 32862-8291	Charles Schwab Bank 1958 Summit Park Drive, Suite 200 Orlando, FL 32810

7. Schwab Bank Investor Checking Trust Account Application Agreement

The agreement is between Charles Schwab Bank, SSB ("Schwab Bank") and the account holder (the Trust listed on this application) for a Schwab Bank Investor Checking Trust account, as agreed to by the Trustee(s). The terms "I," "me," and "my" refer to each Trustee. By signing this agreement, I:

- (1) Certify that I am of the age of majority in the state in which I live, that I am legally authorized to enter into this agreement, and that the personal information provided in this application, and during the account application process, is true and correct;
- (2) Acknowledge that Schwab Bank will provide me with the following documents before account opening or before a service is provided: (a) the Schwab Bank Deposit Account Agreement, which contains an arbitration provision and the Terms and Conditions for the Schwab Bank Bill Pay™ service; (b) Schwab Bank's *A Commitment to Your Privacy*; (c) *Important Privacy Choice for Consumers*, for California residents only; and (d) the *Schwab Bank Deposit Account Pricing Guide*;
- (3) Acknowledge that if the application is approved, each Trustee will receive a Visa® Platinum Debit Card once the account is funded and the Visa Debit Card Agreement, which contains the terms and conditions that apply to this card;
- (4) Acknowledge that, unless I specifically stated otherwise, I will be enrolled in the Schwab Bank Bill Pay service;
- (5) Agree to be subject to the terms and conditions of all documents associated with this Investor Checking Trust account upon account opening, and acknowledge that Schwab Bank advises me to read all the disclosure documents prior to opening or using this account;
- (6) Acknowledge that this Investor Checking Trust account is linked with a Schwab One Trust account maintained at Charles Schwab & Co., Inc., a registered broker-dealer, and I authorize Charles Schwab & Co., Inc. to follow the instructions set forth in this application, if applicable;
- (7) Authorize Schwab Bank to initiate a one-time debit entry (or credit entry in case of error) to the institution and account specified by the attached voided check or savings account deposit slip, electronically or by other commercially accepted method, to initially fund the Investor Checking Trust account; I certify that the information provided on the voided check or savings account deposit slip is correct and that I am authorized to transfer funds from the specified account;

- (8) Authorize Schwab Bank to inquire from any source, including a consumer reporting agency, as to the identity (as required by federal law), creditworthiness and ongoing eligibility for the account and other information at account opening, at any time throughout the life of the account, and thereafter, for debt collection or investigative purposes of all Trustees and of the Trust itself;
- (9) Certify that the information provided in this application is true and complete and that Schwab Bank is authorized to open and maintain the Investor Checking Trust account on behalf of the Trust identified in this application (the "Trust") in accordance with the account agreements applicable to the Investor Checking Trust account, including, without limitation, the authority to accept, hold, and deliver assets belonging to the Trust, as well as to accept orders and other instructions relating to the Trust from the Trustees;
- (10) Represent, warrant, and certify that the Trust expressly grants me the power to perform various functions in association with the Investor Checking Trust account, including, but not limited to, (a) open bank accounts, (b) write checks and otherwise withdraw or transfer funds out of the account, (c) view bank account information and (d) perform any other activity authorized by the Trust and Schwab Bank account agreements;
- (11) Represent, warrant, and certify that either (a) the Trust expressly authorizes that each Trustee, if more than one, is authorized to act individually, independently, and without the consent of the other Trustees; or (b) the Trustees have consented to each Trustee acting individually, independently, and without the consent of the other Trustees with respect to the Investor Checking Trust account, and that such delegation of authority is expressly authorized by the Trust and applicable law; and agree that any notice sent to one Trustee will constitute notice to all Trustees;
- (12) Acknowledge that Schwab Bank, in its sole discretion, and for its sole protection, may require the written consent of any or all Trustees prior to acting upon the instructions of any Trustee;
- (13) Represent, warrant, and certify that neither I nor the Trust imposes any obligation upon Schwab Bank for determining the purpose or suitability of (a) any instructions received from any Trustee or (b) payments or deliveries to or among Trustees;
- (14) Represent, warrant, and certify that there are no other currently acting Trustee(s) of the Trust other than those signing this Account Application Agreement. Should only one person execute this Account Application Agreement, it is a representation that the signer is the sole current acting Trustee. I further represent, warrant, and certify that the Trust has not been revoked, modified, or amended in any manner which would cause the representations contained in this Account Application Agreement to be incorrect;
- (15) Agree to notify Schwab Bank immediately in writing of any change that would cause any representation contained in this Account Application Agreement to become incorrect or incomplete;
- (16) Agree, jointly and severally, in both personal and representative capacities, to indemnify Schwab Bank, its affiliates, officers, directors, employees, and agents from, and hold such persons harmless against, any claims, judgments, surcharges, settlements, or other liabilities or costs of defense or settlement (including investigative and attorneys' fees) arising out of or related to the Investor Checking Trust account;
- (17) Acknowledge that the representations and obligations stated in this application and Account Application Agreement will survive the termination of the Investor Checking Trust account;
- (18) Represent, warrant, and certify that I and any and all beneficiaries of the Trust are individuals and not organizations, corporations or non-individual entities; and
- (19) Understand if no activity occurs in the account within the time period specified by applicable state law, the account may be transferred to the appropriate state.

All Trustees must sign below in blue or black ink only.

By signing below, I agree to the terms listed on this agreement. I also authorize the linkage of my Schwab One® Trust account to my Investor Checking Trust account in accordance with the attached Linking Authorization.

I certify, under penalty of perjury, that (1) the number shown on this application is the correct Taxpayer Identification Number for this Trust account; (2) the Trust is not subject to backup withholding because (a) the Trust is exempt from backup withholding, or (b) the Trust is not subject to backup withholding due to a failure to report interest and dividend income; (3) the Trust is a U.S. person (a domestic trust as defined in federal regulations section 301.7701-7); and (4) the Trust is exempt from Foreign Account Tax Compliance Act (FATCA) reporting. I understand that if I have been notified by the IRS that the Trust is subject to backup withholding as a result of dividend or interest underreporting and I have not received a notice from the IRS advising me that backup withholding is terminated, I must cross out item 2 above.

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

Signature(s) and Date(s) Required

<p>X</p> <hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> <p>Signature: Trustee</p>	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> <p>Print Name</p>	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> <p>Today's Date (mm/dd/yyyy)</p>
<p>X</p> <hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> <p>Signature: Co-Trustee</p>	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> <p>Print Name</p>	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> <p>Today's Date (mm/dd/yyyy)</p>

8. Notarization of Trustee Signature(s) (Required)

Exception: Notarizations are not required for Revocable Living Trusts where the Grantor(s) and Trustee(s) are the same individual(s).

Notice to CA Residents: A notary public or other officer completing this certificate verifies only the identity of the individual(s) who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

Certificate of Acknowledgment of Notary Public*

State of _____, in the County of _____, On (mm/dd/yyyy) _____,

the above-named individual(s) personally appeared before me and proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument, the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY that the foregoing paragraph is true and correct.

X

Signature: Notary

Today's Date (mm/dd/yyyy)

(NOTARY SEAL)

Print Notary Name

My Commission Expires (mm/dd/yyyy)

*If your state law permits, notaries may attach the appropriate notarizing declaration in lieu of this notarization.

Notice to CA Residents: A notary public or other officer completing this certificate verifies only the identity of the individual(s) who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

Certificate of Acknowledgment of Notary Public*

State of _____, in the County of _____, On (mm/dd/yyyy) _____,

the above-named individual(s) personally appeared before me and proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument, the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY that the foregoing paragraph is true and correct.

X

Signature: Notary

Today's Date (mm/dd/yyyy)

(NOTARY SEAL)

Print Notary Name

My Commission Expires (mm/dd/yyyy)

*If your state law permits, notaries may attach the appropriate notarizing declaration in lieu of this notarization.

Schwab Bank Investor Checking™ Trust Account Application Agreement

These terms relate to your account and are part of the Schwab Bank Deposit Account Agreement between the account holder (the Trust listed on this application) and Charles Schwab Bank, SSB ("Schwab Bank"), as agreed to by the Trustee(s). Please read and retain for your files.

The terms "I," "me," and "my" refer to each Trustee. I:

- (1) Certify that I am of the age of majority in the state in which I live, that I am legally authorized to enter into this agreement, and that the personal information provided in this application, and during the account application process, is true and correct;
- (2) Acknowledge that Schwab Bank will provide me with the following documents before account opening or before a service is provided: (a) the Schwab Bank Deposit Account Agreement, which contains an arbitration provision and the Terms and Conditions for the Schwab Bank Bill Pay™ service; (b) Schwab Bank's *A Commitment to Your Privacy*; (c) *Important Privacy Choice for Consumers*, for California residents only; and (d) the *Schwab Bank Deposit Account Pricing Guide*;
- (3) Acknowledge that if the application is approved, each Trustee will receive a Visa® Platinum Debit Card once the account is funded and the Visa Debit Card Agreement, which contains the terms and conditions that apply to this card;
- (4) Acknowledge that, unless I specifically stated otherwise, I will be enrolled in the Schwab Bank Bill Pay service;
- (5) Agree to be subject to the terms and conditions of all documents associated with this Investor Checking Trust account upon account opening, and acknowledge that Schwab Bank advises me to read all the disclosure documents prior to opening or using this account;
- (6) Acknowledge that this Investor Checking Trust account is linked with a Schwab One® Trust account maintained at Charles Schwab & Co., Inc., a registered broker-dealer, and I authorize Charles Schwab & Co., Inc. to follow the instructions set forth in this application, if applicable;
- (7) Authorize Schwab Bank to initiate a one-time debit entry (or credit entry in case of error) to the institution and account specified by the attached voided check or savings account deposit slip, electronically or by other commercially accepted method, to initially fund the Investor Checking Trust account; I certify that the information provided on the voided check or savings account deposit slip is correct and that I am authorized to transfer funds from the specified account;
- (8) Authorize Schwab Bank to inquire from any source, including a consumer reporting agency, as to the identity (as required by federal law), creditworthiness and ongoing eligibility for the account and other information at account opening, at any time throughout the life of the account, and thereafter, for debt collection or investigative purposes of all Trustees and of the Trust itself;
- (9) Certify that the information provided in this application is true and complete and that Schwab Bank is authorized to open and maintain the Investor Checking Trust account on behalf of the Trust identified in this application (the "Trust") in accordance with the account agreements applicable to the Investor Checking Trust account, including, without limitation, the authority to accept, hold, and deliver assets belonging to the Trust, as well as to accept orders and other instructions relating to the Trust from the Trustees;
- (10) Represent, warrant, and certify that the Trust expressly grants me the power to perform various functions in association with the Investor Checking Trust account, including, but not limited to, (a) open bank accounts, (b) write checks and otherwise withdraw or transfer funds out of the account, (c) view bank account information and (d) perform any other activity authorized by the Trust and Schwab Bank account agreements;
- (11) Represent, warrant, and certify that either (a) the Trust expressly authorizes that each Trustee, if more than one, is authorized to act individually, independently, and without the consent of the other Trustees; or (b) the Trustees have consented to each Trustee acting individually, independently, and without the consent of the other Trustees with respect to the Investor Checking Trust account, and that such delegation of authority is expressly authorized by the Trust and applicable law; and agree that any notice sent to one Trustee will constitute notice to all Trustees;
- (12) Acknowledge that Schwab Bank, in its sole discretion, and for its sole protection, may require the written consent of any or all Trustees prior to acting upon the instructions of any Trustee;
- (13) Represent, warrant, and certify that neither I nor the Trust imposes any obligation upon Schwab Bank for determining the purpose or suitability of (a) any instructions received from any Trustee or (b) payments or deliveries to or among Trustees;
- (14) Represent, warrant, and certify that there are no other currently acting Trustee(s) of the Trust other than those signing this Account Application Agreement. Should only one person execute this Account Application Agreement, it is a representation that the signer is the sole current acting Trustee. I further represent, warrant, and certify that the Trust has not been revoked, modified, or amended in any manner which would cause the representations contained in this Account Application Agreement to be incorrect;
- (15) Agree to notify Schwab Bank immediately in writing of any change that would cause any representation contained in this Account Application Agreement to become incorrect or incomplete;
- (16) Agree, jointly and severally, in both personal and representative capacities, to indemnify Schwab Bank, its affiliates, officers, directors, employees, and agents from, and hold such persons harmless against, any claims, judgments, surcharges, settlements, or other liabilities or costs of defense or settlement (including investigative and attorneys' fees) arising out of or related to the Investor Checking Trust account;
- (17) Acknowledge that the representations and obligations stated in this application and Account Application Agreement will survive the termination of the Investor Checking Trust account;
- (18) Represent, warrant, and certify that I and any and all beneficiaries of the Trust are individuals and not organizations, corporations or non-individual entities; and
- (19) Understand if no activity occurs in the account within the time period specified by applicable state law, the account may be transferred to the appropriate state.



Linking Authorization

These terms relate to your account and are part of the Account Agreement between the account holder (the Trust listed on this application), Charles Schwab Bank, SSB ("Schwab Bank") and Charles Schwab & Co., Inc. ("Schwab"). Please read and retain for your files.

If you link your Trust account to an Investor Checking Trust account held at Schwab Bank, you authorize Schwab to accept and follow instructions received from Schwab Bank to transfer funds from your Schwab One Trust account to your Investor Checking Trust account as set forth in your Schwab Bank Investor Checking Trust Account Application and Schwab Bank Deposit Account Agreement. The provisions of the Agreement and Disclosures relating to checks and debit cards will not apply to the services received from Schwab Bank.

You authorize Schwab to act as your agent in processing those instructions from Schwab Bank. You understand and agree that Schwab has sole discretion to accept or deny, in whole or in part, any such instruction. You also agree that Schwab is not responsible for any errors in calculation or damages resulting from errors in calculations or delays in transfers. In no event will Schwab be liable for any special, indirect, or consequential damages, even if we have been informed of the possibility of such damages.

You authorize Schwab to act upon your requests for Real-Time Funds Transfers (as defined in the Schwab Bank Deposit Account Agreement) from

Schwab Bank. The maximum amount you may transfer will be calculated the same way Schwab calculates the Authorization Limit for brokerage checkwriting privileges as set forth in the Schwab One® Account Agreement. By requesting a Real-Time Funds Transfer, you understand that you may create a margin loan in your brokerage account that may be subject to daily interest charges.

In order for transfers to occur, both your Investor Checking Trust account and your Schwab One Trust account must be open and active and linked with each other. Target Balance Transfers will be limited to your Authorization Limit (as described in the Schwab One Account Agreement), excluding your Available Margin Loan Value (as defined in the Schwab One Account Agreement). Overdraft Transfers will be limited to your Authorization Limit.

If you have a debit balance in your Schwab One Trust account, Target Balance Transfers will not be made to your Investor Checking Trust account. Pending securities trades (including the Automatic Investment Plan [AIP]), pending debits to your account, and pending transfers of funds from your Schwab One Trust account may not

be considered in determining whether funds are available for transfer from your Schwab One Trust account to your Investor Checking Trust account at Schwab Bank.

Further, transfers of funds from your Schwab One account are subject to Schwab's minimum deposit requirements. You and your Schwab One Trust account may not have any restrictions preventing Schwab from using funds in your Schwab One Trust account to satisfy a transfer instruction from Schwab Bank. If your account becomes subject to a restriction, your eligibility for this feature may be revoked and you understand that Schwab Bank may close your Investor Checking Trust account. Transfers to Schwab Bank may result in debits in your account. You acknowledge that you are responsible for all debits (and interest on debits) in your account, as described in further detail in the Agreement and Disclosures. Your Schwab One Trust account remains an obligation solely of Schwab. Likewise, your Investor Checking Trust account remains an obligation solely of Schwab Bank.

Certification of Trust

This Certification of Trust sets forth the Trustees' representations and warranties regarding their authority under the Trust. Please retain for your files.

By signing the application, each Trustee represents and warrants that Charles Schwab Bank, SSB ("Schwab Bank") is authorized to open and maintain the account on behalf of the Trust identified in this application (the "Trust") in accordance with the account agreements applicable to this account, including without limitation the authority to accept, hold, and deliver assets belonging to the Trust, and to accept orders and other instructions relating to the Trust from the Trustees.

The Trustees represent, warrant, and certify that either (1) the Trust expressly authorizes that each Trustee, if more than one, is authorized to act individually, independently, and without the consent of the other Trustees; or (2) the Trustees have consented to each Trustee acting individually, independently, and without the consent of the other Trustees with respect to the account and that such delegation of authority is expressly authorized by the Trust and applicable

law. The Trustees agree that any notice sent to one Trustee will constitute notice to all Trustees. Schwab Bank, in its sole discretion and for its sole protection, may require the written consent of any or all Trustees prior to acting upon the instructions of any Trustee.

The Trustees represent, warrant, and certify that neither they nor the Trust imposes any obligation upon Schwab Bank for determining the purpose, suitability, or propriety (i) of any instructions received from any Trustee or (ii) of payments or deliveries to or among Trustees.

By signing this application, each Trustee further represents, warrants, and certifies that there are no currently acting Trustee(s) of the Trust other than those signing below. Should only one person execute this application, it is a representation that the signer is the sole current acting Trustee. Finally, the Trustees represent, warrant, and certify that the Trust

has not been revoked, modified, or amended in any manner which would cause the representations contained in this Certification to be incorrect. Each Trustee agrees to notify Schwab Bank immediately in writing of any change that would cause this Certification to become incorrect or incomplete.

Each Trustee hereby, jointly and severally, in both personal and representative capacities, agrees to indemnify Schwab Bank, its affiliates, officers, directors, employees, and agents from, and to hold such persons harmless against, any claims, judgments, surcharges, settlements, or other liabilities or costs of defense or settlement (including investigative and attorneys' fees) arising out of or related to any act or omission to act by any Trustee with respect to the account.

The representations and obligations stated in this Certification will survive the termination of the account.



Regulation E—Electronic Funds Transfer Disclosure

This disclosure applies to your account if you elected to fund your Schwab One® account using Schwab MoneyLink® electronic funds transfer, or if you elected to fund your Schwab Bank Investor Checking™ account using either a one-time electronic funds transfer from your checking or savings account at another financial institution or a one-time transfer from your Schwab One brokerage account. A complete Electronic Funds Transfer Disclosure statement applicable to each account will be provided to you with your account agreements after account opening.

Unless otherwise noted, throughout this disclosure "we," "us," and "our" mean both Charles Schwab & Co., Inc. ("Schwab") and Charles Schwab Bank, SSB ("Schwab Bank").

Business Days. Schwab's business days, applicable to your Schwab One brokerage account, are Monday through Friday, excluding U.S. stock exchange holidays and U.S. banking holidays.

Schwab Bank's business days, applicable to your Investor Checking account, are Monday through Friday, excluding Federal Reserve Bank holidays.

If a funds transfer is scheduled for a day other than a business day, we will make it on the following business day.

Consumer's Liability for Unauthorized Transfers. Tell us at once if you believe an unauthorized person has transferred or may transfer money from your account without your permission. You can notify us by calling or writing Customer Service:

For your Schwab One brokerage account:

Call: 1-800-421-4488

Write: Charles Schwab & Co., Inc.
Attn: IS Document Control
P.O. Box 982600
El Paso, TX 79998

For your Schwab Bank Investor Checking account:

Call: 1-888-403-9000

Write: Charles Schwab Bank, SSB
P.O. Box 982605
El Paso, TX 79998

Telephoning immediately is the best way of minimizing your possible losses. Losses could include the money in your account plus, in the case of your Schwab Bank Investor Checking account, any advances or transfers from an overdraft source linked to your account. If unauthorized activity occurs, you agree to cooperate during the investigation and to complete any report or affidavit we may request.

Also, if your statement shows transfers that you didn't make or authorize, tell us at once. If you do not tell us within 60 days after the statement was mailed to you, you may not get back any money you lost after the 60 days if we can prove that we could have stopped someone from taking the money if you had told us in time. If a good reason kept you from telling us (such as a long trip or hospital stay), we will extend the time periods.

Disclosure of Account Information. We may disclose your name and/or information about your account or your transactions to our agents and affiliates in order to facilitate your transfer requests. We may also disclose such information to third parties in certain circumstances, which may include: (a) to banks and other entities that are involved with the products or services we offer or arrange on behalf of customers; (b) when it's requested by a third party to complete a transaction; (c) to verify the existence or condition of your account for a credit bureau or merchant; (d) to comply with a subpoena, court order or request from a government agency or law enforcement authority; (e) to evaluate your creditworthiness or our ability to collect any debt you owe us; or (f) if you give us your permission.

In addition, for your Schwab One brokerage account, Schwab may disclose such information (a) to mutual funds that are involved with the products or services we offer or arrange on behalf of customers and (b) pursuant to Rule 14b-1 under the Securities and Exchange Act of 1934, to companies in which you hold securities, unless we receive your written objection.

Periodic Statements. Schwab will send you a monthly account statement for your Schwab One brokerage account unless there are no transfers in a particular month. In any case, you will get the statement at least quarterly.

Schwab Bank will send you a monthly statement for your Schwab Bank Investor Checking account unless there is no account activity other than the posting of interest. We will send you a statement at least quarterly, even if there is no activity in your account.

All electronic funds transfers posted to your account during the month are listed on your statement.

Our Liability for Failure to Make Transfers. If we do not complete a transfer to or from your account on time or in the correct amount according to our agreement with you, we will be liable for your losses or damages. However, there are some exceptions. We are not liable, for instance, if:

- Through no fault of ours, you do not have enough money in your account to make the transfer.
- In the case of your Schwab Bank Investor Checking account, the transfer would exceed the funds available under your overdraft protection option, if any.
- Your account is restricted (because of a court order or similar reason), and we are not permitted to make the transaction.
- Circumstances beyond our control (such as fire or flood) prevent the transfer, despite reasonable precautions that we have taken.
- Any Automated Clearing House network or other third-party communication system from which we require information to complete transactions was not working properly.

There may be other exceptions permitted by law.

In Case of Errors or Questions About Your Electronic Funds Transfers. If you think your statement is wrong or if you need more information about a transfer listed on the statement, call or write us as soon as you can:

For your Schwab One brokerage account:

Call: 1-800-421-4488

Write: Charles Schwab & Co., Inc.
Attn: IS Document Control
P.O. Box 982600
El Paso, TX 79998

For your Schwab Bank Investor Checking account:

Call: 1-888-403-9000

Write: Charles Schwab Bank, SSB
P.O. Box 982605
El Paso, TX 79998

Fax: 1-877-524-3067



We must hear from you no later than 60 days after we sent the FIRST statement on which the problem or error appeared.

We need the following information:

- Your name and account number
- A description of the error or the transfer you are unsure about
- A clear explanation of why you believe it is an error or why you need more information
- The dollar amount of the suspected error.

If you tell us orally, we may require that you send us your complaint or question in writing within 10 business days.

We will determine whether an error occurred within 10 business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 days to investigate your complaint or question. If we decide to do this, we will credit your account within 10 business days for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your account.

For errors involving new accounts, point-of-sale or foreign-initiated transactions, we may take up to 90 days to investigate your complaint or question. For new accounts, we may take up to 20 business days to credit your account for the amount you think is in error.

We will tell you the results within three business days after completing our investigation. If we decide that there was no error, we will send you a written explanation.

You may ask for copies of the documents that we used in our investigation.

CLIENT COPY

