

135 Broad Street, Asheville, NC 28801 Phone: (828) 257-4949, Fax (828)257-4948 Email: AllForms@AmericanIRA.com

## 401k Fee Schedule



Custodian, A South Dakota Trust Company 401 E. 8<sup>th</sup> Street, Suite 200 R Sioux Falls, SD 57103

One-time Account establishment fee: \$150 (paid upon initial application)					
Annual Fee					
401K Plan + Record Keeping: \$585 401K Plan +			ord Keeping: \$750	401k Plan Only	
an Asset) an Asset)			actions (Purchase/Sale of Balance \$1500	<ul> <li>One-time fee</li> <li>You will be in charge of your record keeping</li> <li>Contact us for more details</li> </ul>	
No Annual Fee until your first movement of money! (Investment, Distribution, Termination)					
Accounts under \$7,500 pay a lower Annual Fee! (please contact us for details)					
Processing Fees					
<ul> <li>Wire Transfer (outgoing): \$30</li> <li>Cashier's Check (includes overnight shipping): \$50</li> <li>Outgoing ACH, Checks (Trust/Voided): \$10</li> </ul>			<ul> <li>Certified Mailing: \$10</li> <li>Overnight Mailing: \$20 plus shipping costs</li> <li>Notary: \$5</li> </ul>		
Miscellaneous Fees					
(plus applicable processing/misc fees): min\$150 - max \$250. *Annual record keeping fees a			<ul> <li>Deposit Research (if deposit coupon is not included with deposit) \$25</li> <li>Copy/Cleared/Canceled checks; Reproducing tax documents (1099R); Duplicate Statements \$15</li> <li>Returned Items, Stop Payment Request, Credit Card Decline \$30</li> <li>Regularly Scheduled Recurring Distribution Fee \$25 per Distribution</li> <li>990-T Processing, Reversal of Fees for Alternate Payment Method \$50</li> <li>If fees are deducted from your account causing your cash balance to fall below the required minimum account balance \$25 per month until account is brought back to the minimum balance.</li> <li>Loan Default Fee (401k) \$150</li> <li>om your account and lump-sum distributions: .005 of the termination value</li> </ul>		
A credit card convenience fee of 4% will be charged for all credit card transactions					
A credit card is  Pay Fees By: Credit Card  required with  Card Number:			Deduct fees from my und	lirected cash in account Security Code:	
each account  Name on Card:  Billing Zip Code:				4	
Annual account fees are not prorated and are withdrawn from undirected funds (defined as any cash in the Custodial Account not invested pursuant to a specific investment direction by you, as the depositor, hereinafter referred to as "Depositor"), unless Depositor elects to pay by credit card or debit card as specified above. Transaction fees are due prior to funding the transaction. Fees paid from Depositor's account will be reflected on Depositor's statements, which are available online. If there are insufficient undirected funds in Depositor's account, or where any credit card payments are declined, Custodian may liquidate other assets in Depositor's account to pay for such fees after a 30-day notification, in accordance with the Custodial Agreement and Disclosure Statement. Late Payment Fees: Depositor will be charged \$25 per month, or any portion of any month, an invoice remains past due, or the maximum allowable under applicable state law. Depositor agrees and directs Custodian that Depositor's understand that if fees are not paid within thirty (30) days after Custodian has provided a written past due notice, Custodian may begin the process of closing Depositor's account. Depositor understands that any asset distributed directly to Depositor as part of closing Depositor's account will be reported to the IRS on Form 1099 and may subject Depositor to possible taxes and penalties. Depositor agrees that accounts with past due fees, unfunded accounts, and accounts with zero value will continue to incur administrative fees until such time as Depositor of notifies Custodian, of intent Depositor's to close the account or until Custodian resigns. In accordance with Depositor's Account Application, this Fee Disclosure is part of Depositor's Agreement with the Custodian and must accompany Depositor's Application. Custodian reserve the right to change its Fee Schedule at any time with a 30-day notice to Depositor.  By my signature below, I acknowledge and declare that I have examined this New Account Application, and					
Account Holder Signature:					
Account Holder Printed Name: Date:					

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