

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

Fee Schedule



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

One-time Account establishment fee: \$50 (paid upon initial application)	
Annual Fees	
Option One: \$285	Option Two: \$450
 \$95 transaction fee (Purchase/Sale of an Asset) Minimum Cash Balance \$750 	Unlimited purchase/sale of an assetMinimum Cash Balance \$750
No Annual Fee until first movement of money! (Investment, Distribution, Termination)	
Accounts under \$7500 pay an Annual Fee of only \$165 or \$330 for unlimited tranactions! Processing Fees	
	Certified Mailing: \$10
	Overnight Mailing: \$20 plus shipping costs Notary: \$5
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Miscellaneous Fees	
 Exchange, Re-registration, Re-characterization of an Asset/Liability or Leveraged Asset: \$95 Expedited Review: \$95 (2 business days) Special services, such as but not limited to, research of closed accounts, processing foreclosures, and tax issues \$75 per 1/2 hour. (Minimum charge in increments of half hour.) Partial or Full Account Termination - Includes transfer of 	Deposit Research (if deposit coupon is not included with deposit) \$25 Copy/Cleared/Canceled checks; Reproducing tax documents 5498/1099); Duplicate Statements \$15 Returned Items, Stop Payment Request, Credit Card Decline \$30 Regularly Scheduled Recurring Distribution Fee \$25 per Distribution 90-T Processing, Reversal of Fees for Alternate Payment Method \$50 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. Federal or State Tax Withholding \$10
Annual record keeping fees are not prorated when an account closes. A credit card convenience fee of 4% will be charged for all credit card transactions	
A create card convenience fee of 4/0 will be charged for an eredit card transactions	
Pay Fees By: □ Credit Card □ Deduct fees from my undired Credit Card Type: □ Visa □ MC □ AMEX □ Discover Card Number: _ Exp. Date	A credit card is required with
-	each account
Name on Card: Billing Zip Code:	
Annual account fees are not prorated and are withdrawn from undirected funds (defined as any cash in the Custodial Account not invested pursuant to a specific investment direction by you, as the depositor,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 un-directed cash be placed into a state and/or Federal banking institution, unless Custodian is otherwise directed by Depositor. Depositor 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 agrees that accounts with past due fees, unfunded accounts with zero value will continue to incur administrative fees until such time as Depositor 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.	
Printed Name:	American IRA Account number:
Signature:	Date:

Corporate Headquarters: New Vision Trust Company, 401 E. 8th Street, Suite 200R, Sioux Falls, South Dakota 57103

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