



# SOUND SHORE FUND

Please complete this form to establish a Traditional or Roth IRA.

You must complete a separate application for each IRA you wish to establish.

## INDIVIDUAL RETIREMENT ACCOUNT APPLICATION

ACCOUNT NUMBER \_\_\_\_\_

### IMPORTANT INFORMATION FOR OPENING YOUR ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

What this means for you: When you open an account, we will ask for your name, address, date of birth, social security number and other information or documents that will allow us to identify you. This information is subject to verification.

By signing and submitting this application, you give the Fund and its agents permission to collect information about you from third parties, including information available in public and private databases such as consumer reports from credit reporting agencies, which will be used to help verify your identity.

If you do not provide the information, we may not be able to open your account. If we open your account but are unable to verify your identity, we reserve the right to take such other steps as we deem reasonable, including closing your account and redeeming your investment at the net asset value next calculated after the Fund decides to close your account. Please see the Fund's Statement of Additional Information for further information.

### 1. IRA REGISTRATION (Please print)

Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Social Security Number \_\_\_\_\_

Address: Number and Street (Required) \_\_\_\_\_ Mailing Address (If different) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone (Day) \_\_\_\_\_

E-mail \_\_\_\_\_ Telephone (Evening) \_\_\_\_\_

Check enclosed for \$ \_\_\_\_\_

I have telephoned the Transfer Agent to make wire arrangements

My initial investment wire is \$ \_\_\_\_\_

*The Fund does not accept cash, cash equivalents (such as traveler's checks, cashier's checks, money orders, bank drafts), starter checks, credit card convenience checks, or certain third party checks.*

Please check this box if you are a state or municipal political official or government entity.

### 2. IRA TYPE AND DESCRIPTION

To establish a traditional IRA, complete section I. To establish a Roth IRA, complete section II. No application can be processed if it attempts to establish more than one IRA. **Please read the Sound Shore Fund ("Fund") Universal IRA Disclosure Statement for information to help determine the appropriate type of IRA for your account.**

#### I. TRADITIONAL IRA

**Type of IRA** (Check one box only; Regular IRAs, Qualified Plan Rollovers and SEP-IRAs must be established as separate accounts)

- Regular IRA       Qualified Plan Rollover       SEP-IRA

#### II. ROTH IRA

You may establish either a regular Roth IRA or a Roth Conversion IRA. If you wish to transfer assets from a traditional IRA to a Roth Conversion IRA (which is a conversion of a traditional IRA to a Roth IRA), you must establish a separate Conversion IRA, to which only conversion contributions may be made.

**Type of Roth IRA** (Check one box only)

- Regular Roth IRA       Roth Conversion IRA

**3. SOURCE OF CONTRIBUTIONS (Check one box that applies)**

**Annual Contribution**

You are making a contribution for the current or prior tax year. **Please complete Section 5.**

**Transfer**

You are transferring assets directly from your Traditional or Roth IRA at another institution. **Do not complete Section 6; you must complete an IRA Asset Transfer Authorization Form.** If you are transferring an IRA to an existing Sound Shore Fund IRA, you need not complete a new IRA Account Application.

**Rollover**

You are contributing assets distributed to you from a qualified retirement plan or from another IRA or you are contributing assets directly from a qualified retirement plan. **Please complete Section 5.**

**4. CUSTODIAL FEE**

I have enclosed the Annual Custodial Fee of \$10.

Please deduct the Annual Custodial Fee from my account.

**5. INVESTMENT SELECTION (Do not use for IRA transfers)**

Minimum initial contribution is \$2,000. If the tax year is not specified, the investment will be made for the year in which this application is received.

Tax Year \_\_\_\_\_ Contribution: \$ \_\_\_\_\_ Annual Custodial Fee: \$ \_\_\_\_\_  
Tax Year \_\_\_\_\_ Contribution: \$ \_\_\_\_\_ Total of Your Check: \_\_\_\_\_  
Rollover or Qualified Plan Rollover: \$ \_\_\_\_\_ (Payable to Sound Shore Fund) or Wire: \$ \_\_\_\_\_

**6. BANK ACCOUNT INFORMATION (Complete only if you have elected certain shareholder privileges in Section 9)**

Name of Bank \_\_\_\_\_ ABA Number \_\_\_\_\_  
Registration on Account \_\_\_\_\_  
Account Number \_\_\_\_\_ Account Type (if Checking Account, please attach a voided check) \_\_\_\_\_  
Bank Address: Number and Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**7. DUPLICATE STATEMENT ADDRESS (Optional)**

Name \_\_\_\_\_  
Address: Number and Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**8. BENEFICIARY DESIGNATION (Attach additional sheets if necessary)**

**Primary Beneficiary(ies) (Percentages must total 100%)**

Name _____	Address _____
Percentage _____	Birth Date _____
	Social Security Number _____
	Relationship _____
Name _____	Address _____
Percentage _____	Birth Date _____
	Social Security Number _____
	Relationship _____

**Secondary Beneficiary(ies) (Percentages must total 100%)**

Name _____	Address _____
Percentage _____	Birth Date _____
	Social Security Number _____
	Relationship _____
Name _____	Address _____
Percentage _____	Birth Date _____
	Social Security Number _____
	Relationship _____

Investors are advised to check the requirements of state law concerning spouse's beneficiary rights.



