

Transfer on Death ("TOD") Registration Form

The following rules apply to TOD registrations:

- A TOD may only be held by the following:
 - Individual
 - Joint Tenant (JT TEN)
 - Joint Tenant with Right of Survivorship (JTWROS)
 - Tenants by the Entirety (TEN ENT)
- The TOD beneficiary must be named on this form; "spouse" or "children" is not an acceptable designation.
- If you wish to have more than one beneficiary, the total investment amount will be divided into separate investments for each beneficiary designated. You must indicate the number of whole percentages for each beneficiary (attach separate page if necessary). Shares will be divided equally if percentages are not specified.

Upon completion, please return this form to:

DST Systems, Inc.
Attn: Cottonwood
430 W. 7th Street, STE. #219065
Kansas City, MO 64105
Phone: 844.422.2584
Fax: 855.338.1452
Email: cottonwood@dstsystems.com

A. CURRENT REGISTRATION INFORMATION

Name of Fund/Investment this form applies to (REQUIRED): _____

Investor Name(s): _____ Email: _____
(last/first/middle)

Account Number: _____ SSN: _____

B. TRANSFER ON DEATH - BENEFICIARY DESIGNATION

By signing below, I/we request that my/our investment be registered in "transfer on death" form, and designate the following beneficiary(y/ies) as the one to whom the investment shall pass after I am/we are deceased:

PRIMARY BENEFICIARY #1 I wish to designate this Beneficiary as "Lineal descendants per stirpes"

Name: _____ Relationship: _____ Percentage of Shares: _____

Address: _____ Phone: _____ Date of Birth: _____

SSN: _____ Custodian (required if beneficiary is under 18): _____

PRIMARY BENEFICIARY #2 I wish to designate this Beneficiary as "Lineal descendants per stirpes"

Name: _____ Relationship: _____ Percentage of Shares: _____

Address: _____ Phone: _____ Date of Birth: _____

SSN: _____ Custodian (required if beneficiary is under 18): _____



B. TRANSFER ON DEATH - BENEFICIARY DESIGNATION - CONT'D

PRIMARY BENEFICIARY #3 I wish to designate this Beneficiary as "Lineal descendants per stirpes"

Name: _____ Relationship: _____ Percentage of Shares: _____

Address: _____ Phone: _____ Date of Birth: _____

SSN: _____ Custodian (required if beneficiary is under 18): _____

PRIMARY BENEFICIARY #4 I wish to designate this Beneficiary as "Lineal descendants per stirpes"

Name: _____ Relationship: _____ Percentage of Shares: _____

Address: _____ Phone: _____ Date of Birth: _____

SSN: _____ Custodian (required if beneficiary is under 18): _____

Contingent Beneficiaries (if applicable)

CONTINGENT BENEFICIARY #1 I wish to designate this Beneficiary as "Lineal descendants per stirpes"

Name: _____ Relationship: _____ Percentage of Shares: _____

Address: _____ Phone: _____ Date of Birth: _____

SSN: _____ Custodian (required if beneficiary is under 18): _____

CONTINGENT BENEFICIARY #2 I wish to designate this Beneficiary as "Lineal descendants per stirpes"

Name: _____ Relationship: _____ Percentage of Shares: _____

Address: _____ Phone: _____ Date of Birth: _____

SSN: _____ Custodian (required if beneficiary is under 18): _____

C. AUTHORIZED SIGNATURES

By signing below, I/we make the following warranties, representation and agreements to Cottonwood and its affiliates (collectively the "Company"):

1. You are not required to re-register the investment in the name of the beneficiary unless you have received such documents as you may require to establish that I/we are both deceased.
2. You are not responsible for determining the tax consequences of the decision to register this investment to those requested above.
3. I/we agree to hold harmless, indemnify and defend you and your agents for any claim, loss or liability resulting from (a) breach of any warranty or representation in this agreement, and (b) any action you take in connection with the registration, any re-registration in the name of the beneficiary, and from any distribution thereafter to the beneficiary, made as requested or authorized under this agreement.

