

Use this TRADITIONAL/SEP IRA Application to open a TRADITIONAL/SEP IRA.

**IMPORTANT:** In compliance with the USA PATRIOT Act, Federal law requires all financial institutions (including mutual funds) 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, Social Security Number (SSN) or Tax Identification Number (TIN), a physical address (a Post Office box is not acceptable), date of birth, and other information that will allow us to identify you. We may also ask for additional identifying documents. The information is required for all owners, co-owners, or anyone who will be signing or transacting on behalf of a legal entity that will own the account. If any of this information is missing we will not be able to process your investment request. If we are unable to verify this information, your account may be closed and you will be subject to all applicable costs. If you have any questions regarding this application or how to invest, please call Shareholder Services at 1-888-912-4562.

Please note that a \$15.00 annual maintenance/custodian fee will be charged.

**PART I-A: TRADITIONAL/SEP IRA OWNER INFORMATION (\*DENOTES REQUIRED INFORMATION)**

(Note: If this IRA is established as an Inherited IRA, the IRA Owner is the deceased IRA Owner or plan participant)

|   |                |                |                         |           |
|---|----------------|----------------|-------------------------|-----------|
| Owner's Name* (First, M.I., Last)               |                | Date of Birth* | Social Security Number* |           |
| Street Address (Physical Address)* Apt #        |                | City*          | State*                  | Zip Code* |
| Mailing Address (if different than above) Apt # |                | City           | State                   | Zip Code  |
| Date of Death (if applicable)                   | Daytime Phone* | Evening Phone  |                         |           |

Check to indicate the IRA is established after the death of the individual named above, with either a direct rollover or transfer. If checked, complete Part I-B of the *Traditional/SEP IRA Application*.

**PART I-B: INHERITED IRA OWNER INFORMATION (COMPLETE THIS SECTION FOR INHERITED IRAS ONLY)**

Note: Inherited IRAs may only be established with assets acquired by a non-spouse beneficiary due to the death of the individual named above.

|   |               |                |                         |           |
|---|---------------|----------------|-------------------------|-----------|
| Owner's Name* (First, M.I., Last)               |               | Date of Birth* | Social Security Number* |           |
| Street Address (Physical Address)* Apt #        |               | City*          | State*                  | Zip Code* |
| Mailing Address (if different than above) Apt # |               | City           | State                   | Zip Code  |
| Daytime Phone*                                  | Evening Phone |                |                         |           |

**PART II: CONTRIBUTION INFORMATION**

Source of Funds (Select One):

Regular/Spousal Contribution                      Amount: \_\_\_\_\_                      Tax Year: \_\_\_\_\_

Recharacterization                                      Amount: \_\_\_\_\_                      Tax Year: \_\_\_\_\_

Employer SEP Contribution                              Amount: \_\_\_\_\_                      Tax Year: \_\_\_\_\_

Direct Transfer                      Source:                       Traditional IRA                       SEP IRA                       SIMPLE IRA\*

Rollover                                      Source:                       Traditional IRA                       SEP IRA                       SIMPLE IRA\*  
 Employer-Sponsored Plan (e.g., 401(a), 401(k), 403(b), 457(b))

\*You may not transfer or rollover SIMPLE IRA assets to a Traditional/SEP IRA until at least two years have elapsed from the time of your initial participation in your employer’s SIMPLE IRA plan.

The minimum initial investment in the Fund is \$1,000 for Class A, Class C, and Investor Shares, \$100,000 for Institutional, and \$1,000,000 for R6 Shares. **Important: Contributions made to your IRA will be for the current tax year unless you specify prior year.**

**PART III: INVESTMENT SELECTION**

| Name of Investment                                    | Share Class   | Total Investment Amount |
|---|---------------|-------------------------|
| Fuller & Thaler Behavioral Small-Cap Equity Fund      | A             | \$                      |
| Fuller & Thaler Behavioral Small-Cap Equity Fund      | C             | \$                      |
| Fuller & Thaler Behavioral Small-Cap Equity Fund      | Investor      | \$                      |
| Fuller & Thaler Behavioral Small-Cap Equity Fund      | Institutional | \$                      |
| Fuller & Thaler Behavioral Small-Cap Equity Fund      | R6            | \$                      |
| Fuller & Thaler Behavioral Small-Cap Growth Fund      | A             | \$                      |
| Fuller & Thaler Behavioral Small-Cap Growth Fund      | C             | \$                      |
| Fuller & Thaler Behavioral Small-Cap Growth Fund      | Investor      | \$                      |
| Fuller & Thaler Behavioral Small-Cap Growth Fund      | Institutional | \$                      |
| Fuller & Thaler Behavioral Small-Cap Growth Fund      | R6            | \$                      |
| Fuller & Thaler Behavioral Mid-Cap Value Fund         | A             | \$                      |
| Fuller & Thaler Behavioral Mid-Cap Value Fund         | C             | \$                      |
| Fuller & Thaler Behavioral Mid-Cap Value Fund         | Investor      | \$                      |
| Fuller & Thaler Behavioral Mid-Cap Value Fund         | Institutional | \$                      |
| Fuller & Thaler Behavioral Mid-Cap Value Fund         | R6            | \$                      |
| Fuller & Thaler Behavioral Unconstrained Equity Fund  | A             | \$                      |
| Fuller & Thaler Behavioral Unconstrained Equity Fund  | C             | \$                      |
| Fuller & Thaler Behavioral Unconstrained Equity Fund  | Institutional | \$                      |
| Fuller & Thaler Behavioral Unconstrained Equity Fund  | R6            | \$                      |
| Fuller & Thaler Behavioral Small-Mid Core Equity Fund | A             | \$                      |
| Fuller & Thaler Behavioral Small-Mid Core Equity Fund | Institutional | \$                      |
| Fuller & Thaler Behavioral Micro-Cap Equity Fund      | Institutional | \$                      |
|   |               | TOTAL: \$ _____         |

**PART IV: ACCOUNT SERVICE OPTIONS FOR YOUR IRA (DO NOT COMPLETE THIS SECTION FOR INHERITED IRAS)**

The completion of this section is *OPTIONAL*.

**Automatic Investment Program (AIP)** – This option provides an automatic investment into your mutual fund(s) by transferring money directly from your bank account via ACH (Automated Clearing House) on a scheduled basis. Automatic investment plan must be established with a \$100 minimum. Please refer to the fund prospectus for other account restrictions. Please provide all of your bank account information AND attach a voided check or deposit slip. **Important: Contributions made to your IRA using AIP will be for the current tax year.** Keep this in mind for investments made from January 1 through April 15.

I authorize Fuller & Thaler Funds to initiate investments into my mutual fund account according to the following frequency:

- Annually    Semi-Annually    Quarterly    Twice Each Month    Monthly
- January    February    March    April    May    June
- July    August    September    October    November    December

Fund \_\_\_\_\_ Amount \$ \_\_\_\_\_ Day of Month (1<sup>st</sup>, 15<sup>th</sup>, etc.) \_\_\_\_\_

Fund \_\_\_\_\_ Amount \$ \_\_\_\_\_ Day of Month (1<sup>st</sup>, 15<sup>th</sup>, etc.) \_\_\_\_\_

Fund \_\_\_\_\_ Amount \$ \_\_\_\_\_ Day of Month (1<sup>st</sup>, 15<sup>th</sup>, etc.) \_\_\_\_\_

**Bank Account Information**

Provide information about your checking or savings account to establish a Automatic Investment Plan by ACH. Please select one of the following:

- Attach a voided check or deposit slip for your bank account. ***Please use tape; do not staple.***
- Provide information about your bank account below.

**Enter your checking or savings account information:**

Bank Name \_\_\_\_\_

Bank Phone Number \_\_\_\_\_

Bank Address \_\_\_\_\_

ABA Routing Number \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Name(s) on Bank Account \_\_\_\_\_

Bank Account Number \_\_\_\_\_

Account Type:    Checking    Savings

|   |  |          |
|---|--|----------|
| John and Jane Doe<br>123 Any Street<br>Anytown, USA 12345 | Date _____   | 1003     |
| PAY TO THE<br>ORDER OF _____                              | Tape your voided check or preprinted<br>deposit slip here. | \$ _____ |
|   | Please do <u>not</u> use staples.                          | DOLLARS  |
| BANK NAME<br>BANK ADDRESS                                 |  |          |

**PART V: BENEFICIARY DESIGNATION**

Traditional/SEP IRA Owner (or Inherited IRA Owner) designate beneficiaries below. If the primary or contingent status is not indicated, the individual or entity will be considered a primary beneficiary. After your death, the Traditional/SEP IRA assets will be distributed in equal shares (unless indicated otherwise) to the primary beneficiaries who survive you. If no primary beneficiaries are living when you die, the Traditional/SEP IRA assets will be distributed in equal shares (unless otherwise indicated) to the contingent beneficiaries who survive you. You may revoke or change the beneficiary designation at any time by completing a new *IRA Change of Beneficiary Form* and providing it to the Custodian.

Type:  Primary  Contingent Share Percentage: \_\_\_\_\_ % Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to Designated Beneficiary:  Family Member  Non-Family Member

Residence Address: \_\_\_\_\_

Type:  Primary  Contingent Share Percentage: \_\_\_\_\_ % Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to Designated Beneficiary:  Family Member  Non-Family Member

Residence Address: \_\_\_\_\_

Type:  Primary  Contingent Share Percentage: \_\_\_\_\_ % Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to Designated Beneficiary:  Family Member  Non-Family Member

Residence Address: \_\_\_\_\_

Type:  Primary  Contingent Share Percentage: \_\_\_\_\_ % Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to Designated Beneficiary:  Family Member  Non-Family Member

Residence Address: \_\_\_\_\_

Addendum attached for additional beneficiaries. If you need additional space to name beneficiaries, attach a separate sheet that includes all of the information requested above. Sign and date the sheet.

To name a trust as your beneficiary, attach to this form either a copy of the trust agreement or a certification, in writing, acceptable to the IRA Custodian.

**PART VI: DUPLICATE ACCOUNT STATEMENT**

Yes, please send a duplicate statement to:

Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**PART VII: PAYMENT METHOD**

You can open your account by either of these methods. Please check your choice:

**By Check** Enclose a check payable to Fuller & Thaler Funds for the total amount.

**By Wire** For wire instructions call Shareholder Services at 1-888-912-4562.

**Other** \_\_\_\_\_

*(Third party checks, counter checks, starter checks, money orders, traveler’s checks, checks drawn on non-U.S. financial institutions, credit card checks, and cash are not acceptable.) Note: Cashier’s checks and bank official checks may be accepted in amounts greater than \$10,000.*

**PART VIII: SPOUSAL CONSENT**

Complete this section only if you, the Traditional/SEP IRA Owner, have your legal residence in a community or marital property state and you wish to name a beneficiary other than or in addition to your spouse as primary beneficiary. This section may have important tax consequences to you and your spouse so please consult with a competent advisor prior to completing. If you are not currently married and you marry in the future, you must complete a new beneficiary designation that includes the spousal consent provisions. If this is an Inherited IRA, seek competent legal/tax advice to see if spousal consent is required.

**CONSENT OF SPOUSE**

By signing below, I acknowledge that I am the spouse of the Traditional/SEP IRA Owner and agree with and consent to my spouse's designation of a primary beneficiary other than, or in addition to, me. I have been advised to consult a competent advisor and I assume all responsibility regarding this consent. The Custodian has not provided me any legal or tax advice.

Signature of Spouse:

X \_\_\_\_\_ Date: \_\_\_\_\_

Witness:

X \_\_\_\_\_ Date: \_\_\_\_\_

**PART IX: ACKNOWLEDGEMENT** (Note: This application will not be processed unless signed below by the Traditional/SEP IRA Owner or Inherited IRA Owner.)

By signing this *Traditional/SEP IRA Application*, I certify that the information I have provided is true, correct, and complete, and First National Bank of Omaha, N.A. (the "Custodian") may rely on what I have provided. In addition, I have read and received copies of the *Traditional/SEP IRA Application, IRS Form 5305-A, Disclosure Statement and Financial Disclosure*, including the applicable fee schedule. I agree to be bound to their terms and conditions. I understand that I am responsible for the Traditional IRA transactions I conduct, and I will indemnify and hold the Custodian harmless from any consequences related to executing my directions. If I have indicated any amounts as "carryback" contributions, I understand the contributions will be credited for the prior tax year. I understand that if the deposit establishing the Traditional/SEP IRA contains rollover dollars, I elect to irrevocably designate this deposit as a rollover contribution. If I am an Inherited IRA Owner, I understand the distribution requirements and the contribution limitations applicable to Inherited IRA Owners. I have been advised to seek competent legal and tax advice and have not been provided any such advice from the Custodian.

Signature of TRADITIONAL/SEP IRA Owner (or Inherited IRA Owner):

X \_\_\_\_\_ Date: \_\_\_\_\_

**PART X: FOR DEALER USE ONLY**

\_\_\_\_\_  
Financial Institution Name

\_\_\_\_\_  
Representative's Full Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Representative's Branch Office Telephone Number

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Dealer Number

\_\_\_\_\_  
Branch Number

\_\_\_\_\_  
Representative Number

**X** \_\_\_\_\_  
Representative's Signature

**X** \_\_\_\_\_  
Supervisor's Signature

**PART XI: MAILING INSTRUCTIONS**

Please send completed form to:

**Regular Mail Delivery**  
Fuller & Thaler Funds  
P.O. Box 46707  
Cincinnati, OH 45246-0707

**Overnight Delivery**  
Fuller & Thaler Funds  
225 Pictoria Drive, Suite 450  
Cincinnati, OH 45246

**FACTS****WHAT DO THE FULLER & THALER FUNDS DO WITH YOUR PERSONAL INFORMATION?****Why?**

Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.

**What?**

The types of personal information we collect and share depend on the product or service you have with us. This information can include:

- Social Security number
- account balances and account transactions
- account transactions, transaction or loss history and purchase history
- checking account information and wire transfer instructions

When you are *no longer* our customer, we continue to share your information as described in this notice.

**How?**

All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons the Fuller & Thaler Funds choose to share; and whether you can limit this sharing.

| Reasons we can share your personal information  | Do the Funds share? |
|---|---------------------|
| <b>For our everyday business purposes—</b><br>such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus | <b>Yes</b>          |
| <b>For our marketing purposes—</b><br>to offer our products and services to you   | <b>No</b>           |
| <b>For joint marketing with other financial companies</b>   | <b>No</b>           |
| <b>For our affiliates' everyday business purposes—</b><br>information about your transactions and experiences   | <b>No</b>           |
| <b>For our affiliates' everyday business purposes—</b><br>information about your creditworthiness   | <b>No</b>           |
| <b>For nonaffiliates to market to you</b>   | <b>No</b>           |

**Questions?**

Call (888) 912-4562

## Who we are

### Who is providing this notice?

Fuller & Thaler Funds  
 Ultimus Fund Distributors, LLC (Distributor)  
 Ultimus Fund Solutions, LLC (Administrator)

## What we do

### How does Capitol Series Trust protect my personal information?

To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings. Our service providers are held accountable for adhering to strict policies and procedures to prevent any misuse of your nonpublic information.

### How does Capitol Series Trust collect my personal information?

We collect your personal information, for example, when you

- open an account or deposit money
- buy securities from us or sell securities to us
- make deposits or withdrawals from your account
- give us your account information
- make a wire transfer
- tell us who receives the money
- tell us where to send the money
- show your government-issued ID
- show your driver's license

### Why can't I limit all sharing?

Federal law gives you the right to limit only

- sharing for affiliates' everyday business purposes—information about your creditworthiness
- affiliates from using your information to market to you
- sharing for nonaffiliates to market to you

State laws and individual companies may give you additional rights to limit sharing.

## Definitions

### Affiliates

Companies related by common ownership or control. They can be financial and nonfinancial companies.

- **Fuller & Thaler Asset Management, Inc., the investment adviser to the Funds, could be deemed to be an affiliate.**

### Nonaffiliates

Companies not related by common ownership or control. They can be financial and nonfinancial companies.

- **The Fuller & Thaler Funds do not share your personal information with nonaffiliates so they can market to you.**

### Joint marketing

A formal agreement between nonaffiliated financial companies that together market financial products or services to you.

- **The Fuller & Thaler Funds do not jointly market financial products or services to you.**