Trust Account Application (cont.)

I/We agree that the terms of this Trust Account Application and the accompanying Agreement and Disclosures booklet and Fee Schedule constitute a contract between Alliant and me/us, subject to state and federal laws and the Uniform Commercial Code, as adopted in the state of Illinois.

I/We agree to accept information via email at the address provided herein.

I/We further acknowledge that by signing this agreement, Trustee will have access to his/her authorized Alliant accounts through all electronic means offered by Alliant.

Revocable Proxy:
I/We do hereby appoint the Board of Directors of Alliant, who are the qualified and acting directors at the time this proxy is used, as proxies to vote for the election of directors, proposals for mergers or voluntary dissolutions, the share(s) of Alliant now or hereafter owned or held by me/us, as the said directors or a majority of them see fit, at all annual or special meetings of the members of Alliant hereafter held and any adjournment thereof, from time to time and year to year, until and unless this proxy is cancelled by me/us.

I/We understand that the proxy appointment is voluntary and not a condition of membership. By checking this box I/We deny the proxy provision and opt to vote my/our shares by attending the Annual Meeting of Shareholders held in Chicago, Illinois, during the first quarter of each year.

Consumer Report and Credit Report Agreement: I/We give my/our consent to have Alliant and/or its assigned credit bureau obtain any and all credit report information, including but not limited to my/our employment, checking and/or savings accounts, credit obligations and all other credit matters which Alliant may require in connection with my/our application for membership. In the event my/our application is approved, I/We also give my/our consent to have Alliant and/or its assigned credit bureau obtain additional credit reports and other information after approval of my/our application for membership, for purposes of reviewing my employment, checking and/or savings accounts and credit obligations; obtain credit reports and other information for purposes of taking collection action; obtain credit reports in order to determine my/our eligibility for products and/or services offered by or through Alliant, regardless of whether I/We have applied for the product or service; and obtain credit reports and other information for other legitimate purposes associated with my Alliant membership.

Substitute W-9 Form: Under penalties of perjury, I certify that (1) the number shown on this form is my correct taxpayer identification number, and (2) I am not subject to backup withholding either because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) The IRS has notified me that I am no longer subject to backup withholding, and (3) I am a U.S. Person (including a U.S. Resident Alien). [Note: You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding].

Checking Overdraft Protection: If I/We select overdraft protection, funds (if available) will be drafted from my/our Trust Savings account in the event of an accidental overdraft. Refer to the Fee Schedule at alliantcreditunion.com for a list of these types of any related fees. I/We understand that certain transactions from my/our Trust Savings account may be limited by federal regulations. As a result, if I/We reach these limitations in a given month, overdraft transfers may not be authorized.

1 Trustee(s) must meet eligibility requirements for Alliant membership. Please visit www.alliantcreditunion.com for details regarding Alliant membership eligibility.

2 The complimentary $5 savings deposit will be deposited directly into your new Alliant Trust Savings Account. One complimentary $5 savings deposit per Trust account. Trust account will forfeit the complimentary $5 savings deposit if account is closed within 90 days of establishing.

3 APY=Annual Percentage Yield. Alliant High Rate Checking Dividends are paid on the last day of each month to checking account holders who have opted out of receiving paper statements (receive eStatements only) and have a recurring monthly electronic deposit to their Alliant checking account each month (e.g., a direct deposit, payroll deposit, ATM deposit, mobile check deposit or transfer from another financial institution). Otherwise, Alliant checking accounts do not earn a dividend. Checking dividend may change after account is opened and is subject to change. There is no minimum balance requirement to open an Alliant checking account or to earn a dividend. Account is subject to approval. We may not open checking for you if you do not meet Alliant criteria. Alliant may charge fees for monthly maintenance or service fees; however, if incurred, fees such as a stop payment fee or NSF fee will apply. Please refer to the Fee Schedule at www.alliantcreditunion.com for a list of these types of fees. Account is subject to approval. We may not open checking for you if you do not meet Alliant criteria.

4 A fee will apply if you choose to receive an account statement in paper form; refer to the Fee Schedule at www.alliantcreditunion.com. To avoid the paper statement fee, log in to Alliant Online Banking at www.alliantcreditunion.com to change your statement preference to eStatements.

Trust Account Application

To open your Trust Account

Complete the Application and return it to Alliant along with copies of the pages of your Trust Agreement or Certification of Trust that indicate:

☐ Type of Trust
☐ Name of the Trust
☐ Date the Trust was established
☐ Names of the Trustees
☐ Death certificate for deceased Trustee(s) (if applicable)
☐ Names of the Successor Trustees
☐ If Trustees may act independently or must act together (if there is more than one Trustee)
☐ Names of the Beneficiary(ies)
☐ Signature and notary seal

Please supply a death certificate if one of the Trustees is deceased. If all the Trustees of a Trust are deceased, then the Successor Trustee must obtain a Tax ID Number and provide a copy of the death certificate(s).

*Please note: This does not change the name of an existing account. A new account will be opened in the name of your Trust.

1. Account Eligibility for Trustee

Select the option that best applies to you.

A. ☐ I am an: ☐ Employee ☐ Retiree ☐ Member

Employer or Organization Name

B. ☐ I am a relative or domestic partner of a current member:

Relative Name Account Number

C. ☐ I live or work in a qualifying community:

City State

D. ☐ I want to become a member of Foster Care to Success (FC2S), therefore making me eligible to apply for membership with Alliant. I understand that Alliant will share my name and contact information with FC2S and pay a $5 membership fee to FC2S on my behalf.

2. Account Selection

Receive a complimentary $5 initial savings deposit when you open an Alliant Trust Savings Account.

☐ Trust Savings - in the name of the Trust and Trustee(s).

☐ Trust Checking - in the name of the Trust and Trustee(s).

Earn a high rate checking dividend when you:

• Opt out of paper statements and receive free eStatements through Alliant’s secure online banking. To opt out of paper statements, visit Alliant Online Banking at alliantcreditunion.com.

☐ AND

• Have a recurring monthly electronic deposit to your Alliant checking account (e.g., a direct deposit, payroll deposit, mobile check deposit or transfer from another financial institution; see section #6).

Visa® debit card and Savings ATM card are not available with a Trust Account.

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A530-R01/21
3. Account and Statement Options

Receive a complimentary $5 initial savings deposit when you open an Alliant Trust Savings Account.2

- Free Checks – Your first box of standard checks is free.
  - Check Style: □ Duplicate or □ Single
  - Check Starting Number (use 101 or higher): ____________

Information printed on checks will include the name of the Trust, names of all Trustees and the address of Trustee #1. Printed checks will be mailed to the address on record for the Trust.

- Checking Account Overdraft Protection – Transfer money from my Trust Savings Account only.
- Free eStatements – You will automatically receive paper statements for a nominal fee as per the Fee Schedule. Go to Alliant Online Banking to switch to free eStatements and avoid the paper statement fee.4

4. Trust Information

Trustee #1 Information (Continued)

Trustee #1 (cont)

- Check this box to opt out of receiving text message alerts about suspected credit and debit card fraud. You must provide Alliant with a mobile phone number and leave the checkbox unchecked to receive alerts. Data rates may apply.

Personal Email Address

Work Email Address

ID# (e.g., U.S. Driver’s License, State or Military ID, or a Passport)

Issuing State/Country

Mother’s Maiden Name (used for security authentication)

I want to provide an alternate mailing address (if selected, all account correspondence will be mailed to this address.)

Alternate Mailing Address (include unit # - PO Box accepted)

City

State/Province

Zip/Postal Code

Country

Trustee #2 Information

Trustee #2 (cont)

U.S. Citizen or U.S. Person (including a U.S. Resident Alien) □ Yes □ No

First Name

Middle Name

Last Name

Social Security Number/ITIN (Required)

Issuing State/Country

Date of Birth (MM/DD/YYYY)

Street Address (include unit # - PO Box not accepted)

City

State/Province

Zip/Postal Code

Country

Employment Status:

□ Employed □ Student □ Unemployed

□ Self-employed □ Retired

Employer Name/School Name and City, State and Country (Or former employer name if retired or unemployed)

Occupation (Or former occupation if retired or unemployed)

Home Phone

Work Phone

Mobile Phone

ID# (e.g., U.S. Driver’s License, State or Military ID, or a Passport)

Issuing State/Country

Mother’s Maiden Name (used for security authentication)

5. Additional Deposit/Funding

Receive a complimentary $5 initial savings deposit when you open an Alliant Trust Savings Account.2 To make an additional deposit to your new account(s), please indicate below, if you do not qualify for a checking account, your total initial deposit, if applicable, will be deposited into your Trust Savings Account.

- Transfer from an existing Alliant account for deposit to:

  One of the Trustees must be an owner on the account from which the funds are being transferred.

  Trust Savings $ ___________ and/or Trust Checking $ ___________

Member Account # ____________________________

Transfer from: □ Savings □ Supplemental Savings □ Checking

6. Direct Deposit Authorization

You can arrange Direct Deposit to your Alliant account(s) by providing the payor institution with the Alliant Routing & Transit/ABA# (271081528) and your Alliant 14-digit checking account number or 10-digit savings account number and account type.

7. Signatures and Agreements (Required)

By signing this application, I/we certify that I/we am/are eligible for membership in Alliant Credit Union (Alliant) as noted herein, all information is complete and correct, I/we agree to all account terms as published following the signature bars below and on the reverse side, and I/we agree to subscribe for and maintain at least one share ($5.00).

- If you are not a U.S. Citizen, or other U.S. Person including a U.S. Resident Alien, check the following box □ to designate your denial of Form W-9 Certification and to request IRS Form W-BEN which must be completed with unexpired ITIN and returned to Alliant Credit Union.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

X

Trustee #1 Signature (required) ____________________________

Date ____________________________ X

Trustee #2 Signature (required, if applicable) ____________________________

Date ____________________________

Important: To avoid processing delays, Non-U.S. Citizens or Non-U.S. Persons (including a Non-Resident Alien) should complete and return a W-BEN form (available at alliantcreditunion.com) with your completed Trust Account Application.