

INDIVIDUAL RETIREMENT CUSTODIAL ACCOUNT ADOPTION AGREEMENT

Please complete this application to establish a new Traditional IRA or Roth IRA. This application must be preceded or accompanied by a current IRA Disclosure Statement and Custodial Agreement.

For Additional Copies or Assistance

If you need additional copies of this application, or would like assistance completing it, please call the Hanlon Funds at **1-844-828-3212** or go to www.hanlonfunds.com

Instructions

- 1. If you are requesting a transfer or direct rollover of current plan assets (held by another custodian) you must complete the IRA Transfer of Assets Form in addition to this form.
- 2. Mail this application to:

Hanlon Funds PO Box 541150 Omaha, NE 68154

3. Retain a copy for your records.

4 IDA ACCOUNT DEGISTRATION

Custody Fee

The Custody Fee is \$15 annually per account. The Custody Fee may be increased in the future. You will be notified in writing 90 days prior to any fee increases.

Anti-Money Laundering

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/ Tax ID number and other information that will allow us to identify you. We may also ask to see other identifying documents. Until you provide the information or documents we need, we may 2 not be able to open an account or effect any additional transactions for you.

When opening an account for a foreign business, enterprise or a non-U.S. person that does not have an identification number, we require alternative government-issued documentation certifying the existence of the person, business or enterprise.

For questions about these policies, or for additional copies of the Fund Privacy Policy Statement, please contact the Fund at **1-844-828-3212**or www.hanlonfunds.com or contact the Hanlon Funds at PO Box 541150, Omaha, NE 68154.

I, the person signing this Adoption Agreement (hereinafter called the "Owner"), establish an Individual Retirement Account (IRA), which is either a Traditional IRA or a Roth IRA, as indicated below, (the "Account") with Constellation Trust Company as Custodian ("Custodian"). A Traditional IRA operates under Internal Revenue Code Section 408(a). A Roth IRA operates under Internal Revenue Code Section 408A. I agree to the terms of my Account, which are contained in the applicable provisions of the document entitled Constellation Trust Company Traditional/Roth Individual Retirement Account Custodial Agreement and this Adoption Agreement. I certify the accuracy of the information in this Adoption Agreement. My Account will be effective upon acceptance by Custodian.

I. IKA ACCOUNT REGISTRATION	
Owner's Name (First, Middle, Last)	Social Security Number
Street Address	Date of Birth
City, State, Zip	Daytime Telephone
Email Address	Evening Telephone
$\ \square$ Please send mail to the address below. Please provide y	your primary legal address above, in addition to any mailing address (if different).
Street Address	
City State 7in	

2. TRADITIONAL IRA ELECTION

If you wish to open a Traditional IRA, provide all applicable information below. The requirements for a valid rollover are complex. See the Traditional IRA Disclosure Statement for additional information and consult your tax advisor for help if needed. Direct Rollovers are described in the Traditional IRA Disclosure Statement.

Α.		aditional IRA (The minimum investment in Class A, C, and R shares is \$2,500. Class I minimum is \$100,000. Make checks rable to the Hanlon Funds).			
	1.	Annual Contributions			
		Check enclosed in the amount of \$ representing current contribution for tax year 20 This contribution does not exceed the maximum permitted amount for the year of contribution as described in the Traditiona IRA Disclosure Statement. If no tax year is indicated, contribution will automatically apply to current year.			
	2.	Transfer			
		Transfer of existing Traditional IRA directly from current Custodian or Trustee. Complete the IRA Transfer of Assets Form. [In this transfer includes any nondeductible contributions to the transferring account, indicate the amount of nondeductible contributions included in this transfer: \$]			
	3.	Rollover			
		Rollover of a withdrawal from another Traditional IRA or of an eligible rollover distribution from an employer qualified plan, 403(b) arrangement or eligible 457 plan. Check enclosed in the amount of \$			
	4.	Direct Rollover			
		Direct rollover of an eligible rollover distribution from an employer qualified plan, 403(b) arrangement or eligible 457 plan. this is a direct rollover contribution from an employer qualified plan or 403(b) arrangement, and if it includes any after-tax (nondeductible) contributions to such employer qualified plan or 403(b) arrangement, indicate the amount of after-tax contribution included in this direct rollover: \$			
	5.	Recharacterization of an existing IRA			
		If Constellation Trust Company is the current Custodian, please provide current Roth IRA Account Number: Indicate amount recharacterized, if less than entire account balance: \$ (If no amount is inserted here, we will recharacterize the entire account balance.) If current Roth IRA is with another custodian or trustee, please complete the IRA Transfer of Assets Form.			
	6.	SEP Provision			
		Owner intends to use this Account in connection with a SEP Plan or grandfathered SARSEP Plan established by the Owner's employer.			
В.	In	herited Traditional IRA			
	1.				
		Decedant's name			
	2.				
	3.				

3. ROTH IRA ELECTION

If you wish to open a Roth IRA, provide all applicable information below.

Tax Withholding Election for Conversion. Under IRS rules, a conversion of a Traditional IRA to a Roth IRA is treated for income tax purposes as a distribution of taxable amounts in the Traditional IRA. IRS rules also require the custodian to withhold 10% of the conversion amount for federal income taxes unless no withholding has been elected. See IRS Publication 505, Tax Withholding and Estimated Tax for more information. State tax withholding may also apply if federal income tax is withheld.

C.		ROTH IRA (The minimum investment in Class A, C, and R shares is \$2,500. Class I minimum is \$100,000 to the Hanlon Funds).	. Make checks payable				
	1.	1. Annual Contributions					
		Check enclosed in the amount of \$ representing current contribution for tax year 20 does not exceed the maximum permitted amount for the year of contribution as described in the Statement. If no tax year is indicated, contribution will automatically apply to current year.					
	2.	2. Conversion	n				
		 Conversion of existing Traditional IRA with Constellation Trust Company Account No: Constellation Trust Company. 	to a Roth IRA with				
		Amount to Convert: All Part (please specify): Withholding income taxes from the amount converted (instead of paying applicable income taxes from adversely impact the expected financial benefits of converting from a Traditional to a Roth IRA (consult you have a question). Because of this impact, by electing to convert a Traditional IRA to a Roth IRA, you withholding unless you specify otherwise herein.	om another source) may t your financial adviser if				
		\square No income tax withholding \square Withhold 10% for income tax \square Withhold% for	income tax				
	3.	3. Conversion of Existing Traditional IRA					
	4.	4. Rollover or Transfer of Existing Roth IRA					
		□ Rollover or Transfer from existing Roth IRA with another custodian or trustee to a Roth IRA with Const Date existing Roth IRA was originally opened:					
D.	In). Inherited Roth IRA					
	1.	1					
		Decedant's name					
	2.	2. /					
		Decedant's Date of Birth					
	3.	3					
		Decedant's Date of Death					
4.	IN	. INVESTMENT SELECTION (The minimum investment in Class A, C, and R shares is \$2,500. Class	I minimum is \$100,000)				
		lake checks payable to the Hanlon Funds. Invest the transferred amount according to the following instruction					
		Share Class	3				
На	nlon	lanlon Tactical Dividend and Momentum Fund \$ □ Class A □ Class C □ Class	R □ Class I				
		Total \$					

I acknowledge that I have sole responsibility for my investment choices and that I have received a current prospectus for each Fund and class I select. Please read the prospectus of the Funds selected before investing.

Third Party checks are not accepted

investing a	duce the sales certain amo	unt over a	u pay on Class A shares b 13-month period. Pleas to invest over the next 13	e eligible for a reduce provide the account	Class A shares of the Fund, you may already be ded sales charge on Class A share purchases. Please number(s) below to qualify (if eligible).
□\$25,000	□\$50,000	□ \$100,0	00		
□ \$250,000	□\$500,000	□\$1,000,0	000	ACCOUNT NO.	
repre	esentatives ma	y complete	read the prospectus and q the Dealer Information sec	tion as proof of eligibility.	he sales charge on Class A shares. Registered
6. AUTO	DMATIC II	NVESTN	IENT PLAN (AIP)		
					ey directly from your checking or savings (ACH). Attach a voided check .
Please	e transfer \$_		(\$100 minimum) fr	om my bank account:	
□ Мо	onthly 🗆 Qua	arterly	on the	day of the month	Beginning:/
	: Note: If the business day		falls on a holiday or wee	ekend the deduction from yo	our checking or savings account will occur
Name on Bar	nk Account			Account Number	r
Bank Name				Bank Routing/Al	BA Number
Cianatura a	f Bank Accou	ınt Holder		Signature of J	oint Owner
Signature o				3	
	EFICIARY((IES)			
7. BENE As Owner, I	EFICIARY(the following	ng designation of beneficia Individual Retirement Custo	ry in accordance with the Cons	stellation Trust Company Traditional Individual
As Owner, I Retirement C In the event Make paymer predeceases surviving Prin Alternate Ber proportions a	hereby make ustodial Accou of my death, in the prop me, his share mary Benefician neficiary or Benare specified).	the following on Roth 1 pay any interpretations specific to be diverse. If none of the fiction o	ndividual Retirement Custo erest I may have under my iffied below (or in equal pr vided among the Primary B of the Primary Beneficiaries who survive me. Make paymate Beneficiary predecease	ry in accordance with the Considial Account: Account to the following Prima opportions if no different proportions if no survive me in a survives me, pay any interestment in the proportions specified in the proportions in the proportion in the p	
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Date of Birth (month/day/year)

Taxpayer ID Number

Relationship

Alternate Beneficiaries

Alternate Beneficiary Name (First, Middle, Last)		Share %
Delationship	/ / Date of Birth (month/day/year)	Toyngyar ID Number
Relationship	Date of Birth (month/day/year)	Taxpayer ID Number
Alternate Beneficiary Name (First, Middle, Last)		Share %
, , , ,	1	
Relationship	Date of Birth (month/day/year)	Taxpayer ID Number
Alternate Beneficiary Name (First, Middle, Last)		Share %
	/ /	
Relationship	Date of Birth (month/day/year)	Taxpayer ID Number
This Designation of Beneficiary may have important to using this Section to designate your beneficiary(ies) predeceases you should take that beneficiary's shadesignation to the Custodian. Any amount remaining in the Account that is not the count that the count that is not the count that the count that is not the count that the count	(for example, if you wish to provide that the re by right of representation), you may su	e surviving children of a beneficiary who bmit another form of written beneficiary
estate (unless otherwise required by the laws of at anytime by filing a new Designation of Benefi will revoke all prior Designations, even if the sul	of your state of residence). You may char ciary with the Custodian. Any subsequen	nge the beneficiary(ies) named above t Designation filed with the Custodian
Spousal Consent*		
I am the spouse of the above-named Owner. I acknown financial obligations. Due to any possible consequence to see a tax professional or legal advisor. I hereby conadverse consequence that may result. No tax or legal according to the consequence of the conseque	s of giving up my community or marital proper isent to the beneficiary designation(s) indicated	ty interest in this IRA, I have been advised I above. I assume full responsibility for any
Signature of Spouse		Date (month/day/year)
Signature of Witness		Date (month/day/year)
*This section should be reviewed if the Owner is marr determine if this section applies. The Owner may need liable for any consequences resulting from a failure of	d to consult with legal counsel. Neither the Cu	
8. DEALER/REGISTERED INVESTM	ENT ADVISOR INFORMATION	
If opening your account through a Broker/Dealer	r or Registered Investment Advisor, please	e have them complete this section.
Dealer Name	Representative's Last Nar	me, First Name
DEALER HEAD OFFICE	REPRESENTATIVE'S B	RANCH OFFICE
Address	Address	
City, State, ZIP	City, State, ZIP	
Telephone Number	Rep Telephone Number	Rep ID Number
Email Address	Rep Email Address	
	Branch ID Number	
	Branch Telephone Numbe	er (if different than Rep Phone Number)

9. STATE ESCHEATMENT LAW

Escheatment laws adopted by various states require that personal property that is deemed to be abandoned or ownerless, including mutual fund shares and bank deposits, be transferred to the state. Under such laws, ownership of your Fund shares may be transferred to the appropriate state if no activity occurs in your account within the time period specified by applicable state law. The Fund retains a search service to track down missing shareholders and will escheat an account only after several attempts to locate the shareholder have failed. To avoid this from happening to your account, please keep track of your account and promptly inform the Fund of any change in your address.

10. SIGNATURES AND CERTIFICATIONS

By signing below, 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 back up withholding 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 failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, 3) I am a U.S. person (including a U.S. resident alien), and 4) I am exempt from FATCA reporting. I further acknowledge that I have the sole responsibility for my investment choices and that I have received and read a current prospectus for the Hanlon Funds. I release the Fund and their agents and representatives from all liability and agree to indemnify them from any and all losses, damages or costs for acting in good faith in accordance with instructions, including telephone instructions, believed to be genuine. I certify that I have the authority to establish this account and the information provided herein is accurate and complete. I agree to notify the Hanlon Funds promptly in writing if any information contained in this application changes.

If I have indicated a Traditional IRA Rollover or Direct Rollover above, I certify that, if the distribution is from another Traditional IRA, that I have not made another rollover within the one-year period immediately preceding this rollover; that such distribution was received within 60 days of making the rollover to this Account; and that no portion of the amount rolled over is a required minimum distribution under the required distribution rules or a hardship distribution from an employer qualified plan or 403(b) arrangement or eligible 457 plan.

If I have indicated a Conversion, Transfer or a Rollover of an existing Traditional IRA to a Roth IRA, I acknowledge that the amount converted will be treated as taxable income (except for any prior nondeductible contributions) for federal income tax purposes, and certify that no portion of the amount converted, transferred or rolled over is a required minimum distribution under applicable rules. If I have elected to convert an existing Traditional IRA with Constellation Trust Company as custodian to a Roth IRA and have elected no withholding, I understand that I may be required to pay estimated tax and that insufficient payments of estimated tax may result in penalties.

If I have indicated a rollover from another Roth IRA, I certify that the information given herein is correct and acknowledge that adverse tax consequences or penalties could result from giving incorrect information. I certify that any rollover contribution to the Roth IRA was completed within 60 days after the amount was withdrawn from the other IRA.

I have received and read the applicable sections of the IRA Disclosure Statements relating to this Account, the Custodial Agreement, and this Adoption Agreement. I understand that my Account will be charged an annual Custody Fee as set forth on the first page of this Adoption Agreement. I understand that I have the right to revoke this Individual Retirement Account within seven (7) days of receiving the IRA Disclosure Statements by notifying the Hanlon Funds in writing.

I acknowledge that it is my sole responsibility to report all contributions to or withdrawals from the Account correctly on my tax returns, and to keep necessary records of all my IRAs (including any that may be held by another custodian or trustee) for tax purposes. All forms must be acceptable to the Custodian and dated and signed by me.

If Fund shares are being purchased on behalf of an Investment Company (as that term is defined under the Investment Company Act of 1940, as amended ("the 1940 Act"), including investment companies that are not required to register under the 1940 Act pursuant to section 3(c)(1) or 3(c)(7) exemptions), I hereby certify that said Investment Company will limit its ownership to 3% or less of the Fund's outstanding shares.

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

	/ /
Signature	Date (month/day/year)

11. CUSTODIAN ACCEPTANCE

Constellation Trust Company will accept appointment as Custodian of the Owner's Account. However, this Agreement is not binding upon the Custodian until the Owner has received a statement confirming the initial transaction for the Account. Receipt by the Owner of a confirmation of the purchase of the Fund shares indicated above will serve as notification of Constellation Trust Company's acceptance of appointment as Custodian of the Owner's Account.

TO CONTACT US:

<u>By Telephone</u> Toll-free **1-844-828-3212** In Writing
Hanlon Funds
PO Box 541150
Omaha, NE 68154
Or
Via Overnight Delivery
4221 N. 203rd Street, Suite 100
Elkhorn, NE 68022

<u>Internet</u> <u>www.hanlonfunds.com</u>

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PRIVACY NOTICE

FACTS WHAT DOES TWO ROADS SHARED TRUST 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 DEPENDS ON THE PRODUCT OR SERVICE THAT YOU HAVE WITH US. THIS INFORMATION CAN INCLUDE:

- Social Security number and income
- Account transactions and transaction history
- Investment experience and purchase history

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 reason Two Roads Shared Trust chooses to share and whether you can limit this sharing.

Reasons we can share your personal information	Does Two Roads Shared Trust share?	Can you limit this sharing?
For our everyday business purposes – such as to process your transactions, maintain your account(s), respond to court orders and legal investigation or report to credit bureaus	YES tions,	NO
For our marketing purposes – to offer our products and services to you	NO	We do not share
For joint marketing with other financial companies	s NO	We do not share
For our affiliates' everyday business purposes – information about your transactions and experiences	NO	We do not share
For our affiliates' everyday business purposes – information about your creditworthiness	NO	We do not share
For our affiliates to market to you	NO	We do not share
For nonaffiliates to market to you	NO	We do not share
Questions?	Call 1-402-895-1	600

What we do

How does Two Roads Shared 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 personal information.	
How does Two Roads Shared	We collect your personal information, for example, when you	
Trust collect my personal	open an account or give us contact information	
information?	 provide account information or give us your income information make deposits or withdrawals from your account We also collect your personal information from other companies. 	
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

Definitions		
Affiliates	Companies related by common ownership or control. They can be	
	financial and nonfinancial companies.	
	Two Roads Shared Trust has no affiliates.	
Nonaffiliates	Companies not related by common ownership or control. They	
	can be financial and nonfinancial companies.	
	• Two Roads Shared Trust does not share with nonaffiliates	
	so they can market to you.	
Joint marketing	A formal agreement between nonaffiliates financial companies that	
	together market financial products or services to you.	
	• Two Roads Shared Trust does not jointly market.	