

Interested Party Authorization

INSTRUCTIONS

Use this form to designate, change, or remove an Interested Party on your account. If you wish to authorize a Financial Representative (FR) to act as an agent for your account, please complete the separate Financial Representative Authorization form. Account Owner signature is required on page 2.

1. ACCOUNT OWNER INFORMATION

ACCOUNT OWNER NAME (FIRST, MI, LAST)*		COLUMBIA PRIVATE TRUST ACCOUNT NO.**	
SSN**	DATE OF BIRTH*	PRIMARY PHONE*	
MAILING ADDRESS*			
CITY*	STATE/PROVINCE*	COUNTY	POSTAL CODE*

* Required ** Complete either SSN or Account No.

Apply the following elections to **all my accounts** held by Columbia Private Trust.

2. ELECTIONS

Please select the type of Affiliated Party designation you would like added to your account:

Add Affiliated Party

Remove Affiliated Party Name of Affiliated Party to be removed: _____

Update Affiliated Party Name of Affiliated Party to be updated: _____

3. AFFILIATED PARTY INFORMATION

Complete this section for the Affiliated Party that will be designated on your account.

* Required for all Affiliated Parties

NAME* (FIRST, MI, LAST)	SSN*	DATE OF BIRTH*
LEGAL ADDRESS*		
CITY*	STATE/PROVINCE*	POSTAL CODE*
PRIMARY PHONE NO.*	MOBILE PHONE NO.	FAX NO.
EMAIL ADDRESS*		



4. AUTHORIZATION

Please refer to the disclosure agreement below that pertains to your Affiliated Party designation.

PLEASE SIGN AND DATE BELOW.

	ACCOUNT OWNER SIGNATURE	DATE (REQUIRED)
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5. DISCLOSURES: OTHER INTERESTED PARTY (OIP)

BY SIGNING ABOVE, ACCOUNT OWNER ACKNOWLEDGES THE FOLLOWING:

Authorization of an Other Interested Party other than yourself or your FR (including, but not limited to, a broker, financial planner, accountant, or attorney) will receive information about your account. Please note that this individual will have limited access to your account information. Columbia Private Trust will not accept purchase and sale instructions from this individual.

Those who are designated as an Other Interested Party by the Account Owner may not be a sponsor of or otherwise affiliated with an investment in the account. It is the responsibility of the Account Owner and the Other Interested Party to review the account assets to ensure compliance with this provision and to take steps to remove an Other Interested Party from the account in the event of non-compliance.

This form authorizes Columbia Private Trust to provide account information and electronic statements to the individual referenced below. If the Other Interested Party is associated with a broker-dealer, financial market exchange, or a regulated investment advisory firm, Columbia Private Trust may make information about account activity available to the broker-dealer, financial market exchange, or compliance officer for the advisory firm as they deem necessary to receive such information.

By signing this Authorization, if any controversy, claim, or dispute arises relating to the release of or providing account information, I agree to release, indemnify, defend, and hold Columbia Private Trust and its related entities harmless. I also verify that I agree to be bound by the terms of the Custodial Account Agreement, which I agreed to together with Columbia Bank through its division, Columbia Private Trust, as the Custodian of record. I acknowledge that the terms of the Custodial Agreement are incorporated herein by reference.

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NON-DEPOSIT INVESTMENT PRODUCTS ARE NOT INSURED BY THE FDIC; ARE NOT DEPOSITS OR OTHER OBLIGATIONS OF, OR GUARANTEED BY, THE BANK OR ANY OF ITS DIVISIONS; AND ARE SUBJECT TO INVESTMENT RISKS, INCLUDING POSSIBLE LOSS OF THE PRINCIPAL AMOUNT INVESTED.

Upload forms to:
ColumbiaPrivateTrust.com/Upload

Fax to: 303.614.7038

Send mail to:
Columbia Private Trust
Processing Center
P.O. Box 981012
Boston, MA 02298

Questions?
Call 800.962.4238

