

**Morgan Keegan & Company, Inc.**  
**IRA AGREEMENT AND NEW ACCOUNT APPROVAL**

<b>TYPE OF ACCOUNT</b> <input type="checkbox"/> TRADITIONAL IRA <input checked="" type="checkbox"/> ROLLOVER IRA <input type="checkbox"/> EDUCATION IRA <input type="checkbox"/> SIMPLE IRA <input type="checkbox"/> ROTH IRA <input type="checkbox"/> SEP/IRA (Simplified Employee Pension)		<b>FEE SCHEDULE</b> ANNUAL CUSTODIAL FEE \$35.00 TERMINATION FEE \$50.00  Each account will be charged a set-up fee and a custodial fee. The custodial fee will be debited annually from the account. Upon termination of the account for any reason other than death or disability, a termination fee will be charged.		
Legal Name (First, Middle Initial, Last) _____ Social Security No. / Tax ID No. _____ Account No. _____ Office / RR No. _____		(Additional Name) _____ Mailing Address (if Different) _____ Street Address - Home _____ Telephone _____ City/Country _____ State _____ Zip +4 _____ Date of Birth _____ Marital Status <input checked="" type="checkbox"/> M <input type="checkbox"/> S <input type="checkbox"/> D <input type="checkbox"/> W		
<b>DUPLICATES TO:</b> Name _____ <input type="checkbox"/> CONFIRMATION <input type="checkbox"/> STATEMENT <input type="checkbox"/> SPECIAL Street _____ City _____ State _____ Zip +4 _____ Telephone _____		<input type="checkbox"/> CREDIT INTEREST <input type="checkbox"/> BEDFORD GOVT. MM I designate the Bedford Money Market Fund for this Account unless the Bedford Government Fund or Credit Interest box is checked. I also acknowledge receipt of the appropriate Fund Prospectus.		
Employer (Name) _____ Type of Business _____ Occupation _____ Employer's Address _____ Telephone _____ Spouse's Name _____ Spouse's Employer _____ Type of Business _____ Occupation _____		<b>AGREEMENTS REQUIRED</b> <input type="checkbox"/> OPT <input type="checkbox"/> POA <input type="checkbox"/> ROL <input type="checkbox"/> WRAP <input type="checkbox"/> OTHER _____ USER CODES: _____		
No. of Dependents (Include self) <u>1</u> U.S. Citizen <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If not, Citizen of _____ IS CUSTOMER RELATED TO ANY EMPLOYEE OF MORGAN KEEGAN? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Name of Employee _____ Relationship _____		APPROXIMATE ANNUAL INCOME    APPROXIMATE LIQUID NET WORTH    APPROXIMATE NET WORTH    INVESTMENT EXPERIENCE NUMBER OF YEARS: <input type="checkbox"/> UNDER \$50,000 <input type="checkbox"/> UNDER \$100,000 <input type="checkbox"/> UNDER \$100,000    STOCKS <u>25</u> TAX-FREE BONDS <u>-</u> <input type="checkbox"/> \$50,000 - \$100,000 <input type="checkbox"/> \$100,000 - \$300,000 <input type="checkbox"/> \$100,000 - \$300,000    OPTIONS <u>12</u> MUTUAL FUNDS <u>25</u> <input type="checkbox"/> \$100,000 - \$150,000 <input type="checkbox"/> \$300,000 - \$500,000 <input type="checkbox"/> \$300,000 - \$500,000    TAXABLE BONDS <u>15</u> COMMODITIES <u>-</u> <input checked="" type="checkbox"/> OVER \$150,000 <input checked="" type="checkbox"/> \$500,000 - \$1,000,000 <input checked="" type="checkbox"/> \$500,000 - \$1,000,000    INS./ANNUITIES <u>40</u> OTHER <u>-</u>		
<b>SOURCE OF INFORMATION:</b> <input checked="" type="checkbox"/> CLIENT <input type="checkbox"/> BROKER'S ESTIMATE <input type="checkbox"/> OTHER (list) _____ <b>TAX STATUS</b> _____ % <b>INITIAL TRANSACTION</b> (Specify Purchase or Sale, Quantity, Etc.) _____		<b>DOES BROKER HAVE A BENEFICIAL OR PERSONAL INTEREST IN THIS ACCOUNT?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
<b>INVESTMENT OBJECTIVES</b> (List all that apply) NUMBER IN ORDER OF PRIORITY <u>1</u> GROWTH <u>2</u> INCOME <u>3</u> SPECULATION		<b>IS CLIENT OR ANY MEMBER OF THE IMMEDIATE FAMILY AN EMPLOYEE OF A FINANCIAL INSTITUTION OR NASD MEMBER FIRM?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
<b>ACCOUNT OBTAINED BY:</b> <input type="checkbox"/> CALL IN <input type="checkbox"/> REFERRAL - NAME OF REFERRING PERSON _____ <input type="checkbox"/> ADVERTISING LEAD <input type="checkbox"/> WALK IN <input checked="" type="checkbox"/> PERSONAL ACQUAINTANCE - HOW LONG HAVE YOU KNOWN CLIENT? _____ <input type="checkbox"/> OTHER _____		<b>IS THE BROKER REGISTERED IN THE STATE WHERE THE CUSTOMER RESIDES?</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
<b>IS ACCOUNT OPERATED BY PERSON OR INVESTMENT ADVISOR WITH TRADING AUTHORIZATION?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO    Name of Authorized Agent/Investment Advisor _____		<b>IS CLIENT AN OFFICER, DIRECTOR, OR 10% SHAREHOLDER OF A PUBLIC CORPORATION OR ANY RESTRICTED SECURITIES OF A PUBLIC CORPORATION?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
<b>OTHER CURRENT ACCOUNTS:</b> <input type="checkbox"/> NONE    A. WITH MORGAN KEEGAN - LIST ACCOUNT NUMBERS _____ B. WITH OTHER FIRMS - LIST _____		<b>IF YES, PLEASE LIST THE CORPORATIONS:</b> _____		
<b>BENEFICIARY(IES) of your IRA:</b> In the event of my death before this account is distributed, I hereby designate the following person(s) as my beneficiaries:				
BENEFICIARY	SSN	DATE OF BIRTH	RELATIONSHIP	MUST CIRCLE ONE
1. _____	_____	_____	_____	<input checked="" type="radio"/> PRIMARY <input type="radio"/> CONTINGENT
2. _____	_____	_____	_____	<input type="radio"/> PRIMARY <input checked="" type="radio"/> CONTINGENT
3. _____	_____	_____	_____	<input type="radio"/> PRIMARY <input checked="" type="radio"/> CONTINGENT
4. _____	_____	_____	_____	<input type="radio"/> PRIMARY <input checked="" type="radio"/> CONTINGENT
In order to change beneficiary(ies), you must deliver a written designation to Morgan Keegan & Co. Inc. as custodian.				
<b>NOT FDIC INSURED</b> <b>May lose value</b> <b>No bank guarantee</b> <b>See Account Agreement Risk of Loss Disclosures</b>		I ACKNOWLEDGE THIS INFORMATION TO BE ACCURATE. I ALSO ACKNOWLEDGE THAT I HAVE RECEIVED AND FULLY UNDERSTAND THE TERMS AND CONDITIONS OF THE MORGAN KEEGAN & COMPANY, INC. IRA DISCLOSURE STATEMENT AND THE MORGAN KEEGAN & COMPANY, INC. CUSTODIAL ACCOUNT AGREEMENT ("CUSTODIAL ACCOUNT AGREEMENT"). I APPOINT MORGAN KEEGAN & CO. AS CUSTODIAN OF MY IRA/SEP/SIMPLE ACCOUNT AND ADOPT THE MORGAN KEEGAN & COMPANY, INC. IRA CUSTODIAL ACCOUNT AGREEMENT. I HEREBY AGREE TO SUBSEQUENT AMENDMENTS THERETO UNDERSTANDING THAT THE CUSTODIAL ACCOUNT AGREEMENT HEREBY ADOPTED CONTAINS THE ENTIRE AGREEMENT.		
CUSTOMER'S SIGNATURE _____ BROKER _____ FM # 16 (Rev. 2/01)		DATE _____ MAIN OFFICE COPY		