



Client Services
866.928.9394
512.637.5739
www.StrataTrust.com

SOURCE _____

IRA Transfer Request

Send to: (Please submit using one method)
Email: IncomingTransfers@StrataTrust.com
Fax: 512.495.9554
US Mail: P.O. Box 23149 Waco, TX 76702
Overnight: 7901 Woodway Drive, Waco, TX 76712

Section 1		Account Information		
Account from which you wish to transfer:		Account to receive your transfer:		
Account Number with Current Custodian		Your Name		
Name as it appears on the Account		Social Security Number		
Type of IRA : <input type="checkbox"/> Traditional IRA <input type="checkbox"/> SEP IRA <input type="checkbox"/> Roth IRA <input type="checkbox"/> SIMPLE IRA		Type of IRA: <input type="checkbox"/> Traditional IRA <input type="checkbox"/> SEP IRA <input type="checkbox"/> Roth IRA <input type="checkbox"/> SIMPLE IRA		
***To initiate a direct rollover from an employer-sponsored retirement plan, contact your plan administrator.		STRATA IRA Number		
Name of Current Custodian		Your Daytime Phone Number		
Current Custodian's Physical Address		Check if this Transfer is: <input type="checkbox"/> Transfer of an IRA for which you are the Spouse Beneficiary <input type="checkbox"/> Transfer of an Inherited IRA <input type="checkbox"/> Transfer Due to Divorce		
Address Line 2 (No PO Boxes)				
City	State			Zip
Custodian's Phone Number				
Custodian's Fax Number				

Section 2		Cash/Assets to Transfer	
<input type="checkbox"/> Transfer All Available Cash <input type="checkbox"/> Transfer Exactly: \$ _____ <input type="checkbox"/> Transfer in-kind/reregister all assets shown below: <input type="checkbox"/> Transfer in-kind/reregister only the following assets:		Select One: This is a <input type="checkbox"/> Full Transfer (This will close my account) <input type="checkbox"/> Partial Transfer (This account will remain open)	
Asset Description		# of Shares	Approximate Value
			\$
			\$
			\$
			\$
			\$

***Attach a copy of your most recent account statement with your Current Custodian to this form.

Remit Cash to STRATA Trust Company as shown below:

- ☐ Send Check by U.S. Mail
- ☐ Send Check for Overnight Delivery

Make check payable and mail as shown below:

STRATA Trust Company, Custodian

FBO _____ IRA # _____

U.S. Mail Address:PO Box 849
Austin, TX 78767Overnight Delivery Address:901 S. Mopac Expressway
Barton Oaks Plaza II, Suite 100
Austin, TX 78746

- ☐ Wire Funds

If no selection is made, STRATA
will request your Current
Custodian mail a check by USPS
first class mail.

Wiring Instructions:

Horizon Bank
600 Congress Avenue
Austin, TX 78701
ABA: 111907940
Account Name: STRATA Custodial Account
Account Number: 4515532
FCT: Account Name _____ IRA # _____**Reregister Assets to STRATA Trust Company as shown below:**

- ☐ Send by U.S. Mail
- ☐ Send by Overnight Delivery

STRATA Trust Company, Custodian

FBO _____ IRA # _____

7901 Woodway Drive
Waco, TX 76712

Tax ID: 26-2637994

If required to make Mandatory Distributions, I instruct my Current Custodian to process my Required Minimum Distribution payment as shown below:

- _____ Distribute my RMD or life expectancy payment to me prior to transferring my assets.
- _____ Segregate and retain my RMD or life expectancy payment amount.
- _____ Include the amount that represents my RMD or life expectancy payment in the transfer.

Section 3**Instruction to STRATA for Delivery of this Transfer Request to Current Custodian**

- ☐ Ground

If no selection is made, this request will
be sent by Ground Delivery to the
Current Custodian.

- ☐ Overnight

_____ Deduct the overnight fee from my Account.

_____ Charge my FedEx or UPS account # _____

- ☐ Fax # _____

Attn _____

You must first verify the Current Custodian will
accept a faxed copy

Section 4**Accountholder Authorization**

I authorize the IRA transfer or direct rollover in the manner described above and certify that all of the information provided by me is correct and may be relied upon by the Custodian. I understand that I am responsible for determining my eligibility for transfer or direct rollover within the limits set forth by tax laws, related regulations and plan agreements. I represent that I have established an IRA account with STRATA Trust Company ("STRATA") as Custodian. I agree to indemnify and hold harmless both my present Custodian and STRATA from any and all costs, obligations, losses, claims, damages and expenses (including reasonable attorney fees) related or associated with this request. If special handling is requested (wire or overnight delivery), I authorize the deduction of applicable fees from my account. I assume responsibility for any tax consequences or penalties that may apply and I agree that the Custodian shall in no way be held responsible.

- Before signing, check with your present Custodian to determine whether it will require a Medallion Signature Guarantee to process this request.
- If a signature guarantee is not required, please sign below and send this form to STRATA.
- If required, a signature guarantee can be obtained from your bank or a brokerage firm. A signature guarantee may not be obtained from a notary public.
- STRATA permits an Accountholder to e-sign this Transfer Request. However, you should first check with your current Custodian to confirm whether they will honor it. Otherwise, they may reject this request which would delay your transfer.

MEDALLION SIGNATURE GUARANTEE

Accountholder Signature

Date

A Medallion Signature Guarantee Program is approved by the Securities Transfer Association. Participating financial institutions guarantee that the individual signing this form is in fact the owner of the account for which the transfer is being requested.

Section 5**Letter of Acceptance**

The account for the above-named individual is a valid IRA and STRATA Trust Company hereby accepts appointment as Custodian for the IRA account and agrees to accept the assets for transfer or direct rollover as indicated herein.

Authorized Signature of STRATA Trust Company, IRA Custodian

Date

In-Kind Asset Transfer Certification

**Required before STRATA will accept the in-kind transfer of a private, non-traditional asset.
This page should only be completed if an in-kind transfer is being requested.**

- Please contact STRATA if you are transferring an asset in-kind. Additional documentation may be required prior to initiating this Transfer Request.
- You must complete sections 6 and 7 for the in-kind transfer of any alternative or private assets.

Section 6 Accountholder Representations

Accountholder Name _____ STRATA Account Number _____

1. Are you or any family members an officer, director, or employee of any of the investment entities or any affiliate of the investment entities? (If the investment is debt, are you related to the borrower or an officer, director, or employee of the borrowing entity?) ☐ Yes ☐ No

If "Yes", please explain: _____

2. Do you or any family members currently own any percentage of the investment entities or any affiliate of the investment entities? ☐ Yes ☐ No

If "Yes", what is the combined percentage? _____ %

3. Will you, family members or entities under your control own a majority or controlling interest in the investment entities? ☐ Yes ☐ No

If "Yes", please explain: _____

4. Will you or any family member receive a personal gain or benefit (other than the potential investment gain to the IRA) as a result of your IRA's investment with the investment entities? ☐ Yes ☐ No

If "Yes", please explain: _____

I understand that STRATA Trust Company may fully rely on my representations above and may require that I obtain a legal opinion if the potential for a prohibited transaction exists. Please refer to Internal Revenue Code Section 4975 for more information regarding Prohibited Transactions and discuss any potential issues with your legal or tax advisor.

Section 7 Accountholder Signature

By directing STRATA to transfer or rollover assets in-kind, I reaffirm my understanding that the terms of the IRA Custodial Account Agreement, including, but not limited to Article IX – Investments, apply to assets transferred or rolled over in-kind from a prior trustee or custodian.



Accountholder Signature

Date