

IRA Transfer Request

Looking for an easier, faster way to submit paperwork? Try the SERVICENEW option at www.StrataTrust.com/Forms

◆E-sign and transmit directly to STRATA ◆ Safely upload supporting documentation ◆ Securely transfer data with SFTP file protocol

Continu 4	A a a a t l f a	-4: - ·				
Section 1 Account Information						
Receiving Account Information						
Your Name			STRATA IRA Number (if known)			
Social Security Number			Daytime Phone Number			
Type of IRA: Traditional IRA Roth IRA Inherited Traditional IRA Inherited Roth IRA SEP IRA SIMPLE IRA Check if this transfer is: IRA Transfer as Spouse Beneficary IRA Transfer Due to Divorce Not Applicable						
Section 2	Current Custodi	an Informa	tion			
Transferring Account Inf	formation					
To initiate a direct rollov	er from an employer-spoi	nsored retireme	nt plan, contact your pla	an administrator.		
Account Number with Current Custodian						
Name as It Appears on the Account						
Type of IRA : Traditional IRA Roth IRA Inherited Traditional IRA Inherited Roth IRA SEP IRA SIMPLE IRA						
Name of Current Custodian						
Current Custodian's Physical Address						
Address Line 2 (No PO Boxes)						
City		ate		Zip		
Current Custodian's Phone Number			Current Custodian's Fax Number			
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. □ Not applicable. 						

Client Services 866.928.9394 | IncomingTransfers@StrataTrust.com | Online: www.StrataTrust.com/Service-Request



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Section 3	Cash/Asset to Transfer						
Attach a copy of your most recent account statement with your current custodian to this form.							
Select One:	Select One:						
☐ Full transfer - account will close.			☐ Transfer all cash.				
☐ Partial transfer - account will remain open.			☐ Transfer exactly: \$				
☐ Transfer in-kind/reregister a					assets shown below:		
Asset Description				# of Shares	Approximate Value		
					\$		
					\$		
					\$		
					\$		
					\$		
Section 4	Cash/Ass	set Delivery Insti	ructions				
Remit cash to STRATA							
Send Check by U.S. Ma	ail	Make check payable and mail as shown below: STRATA Trust Company, Custodian					
					1DA #		
Send Check for Overnig	ght Delivery	FBO	O i ult 4 F	No Programs And drop and	IRA #		
		U.S. Mail Address: Overnight Delivery A PO Box 849 901 S. Mopac Expre					
		Austin, TX 78767					
			Austill, 1A	70740			
☐ Wire Funds		Wiring Instructions:					
If no selection is made, STRATA		Bank Name: Horizon Bank Bank Address 600 W. 5th Street Austin, TX 78701					
will request your current For Credit To: STR			A Trust Company Custodial Account				
custodian mail a check by USPS ABA: 111907940 first class mail. Account Number: 4515532							
		FCT: Account Name			IRA#		
Reregister assets to STF	RATA as showr	n below:					
Send by U.S. Mail							
Colid by U.S. Mail		FBO			IRA#		
Send by Overnight Deli	very	7901 Woodway Drive Waco, TX 76712					
		Tax ID: 26-2637994					

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Secti	on 5	Form Delivery Instructions to Current Custodian				
If no selection is made, this request will be sent by ground delivery to the current custodian						
□ Fax #		☐ Ground				
□ Email		OvernightDeduct the overnight fee from my account.				
				FedEx or UPS account #		
Section	on 6	Terms and Condition	ıs			
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 named current custodian listed in this form. 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's 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 agree that the named custodian's 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	on 7	Letter of Acceptance				
Internal Use Only						
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			
Form	Submission	Options (Please submit using	one method below)			

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Email: IncomingTransfers@StrataTrust.com

Fax: 512.495.9554

US Mail: PO Box 23149, Waco, TX 76702

Overnight: 7901 Woodway Drive, Waco TX 76712