

**Trustee for Third Party  
Administered Plan  
Redemption Form**

To Whom It May Concern:

Thank you for your inquiry regarding information related to redemption of assets from an account registered as a Self Directed Retirement Plan or Third Party Administered (TPA) account.

In response to your request, we have included information regarding distribution of the account. Please refer to the chart below to determine the documents that will be required to process your requested transaction. The documents required to be submitted with your request is based on the type of signature guarantee you are able to obtain.

An original signature guarantee may be obtained from an officer of most financial institutions. A medallion signature guarantee is preferable. By obtaining a Medallion Signature Guarantee, you will not be required to furnish certain documents. If the signature guarantee is NOT medallion, you will be required to furnish additional documentation and provide the name and phone number of the person providing the signature guarantee for verification purposes. Please note that a notary public cannot provide a signature guarantee. A signature guarantee is a warranty by the grantor that the signature is genuine, and that the person(s) signing is competent and authorized to sign.

Documents Required	To Redeem with Medallion Signature Guarantee	To Redeem with Non-Medallion Signature Guarantee
Completed Distribution/Transfer Form signed by the authorized trustee(s) and signature guaranteed	✓	✓
Share Certificates (if applicable)	✓	✓
Certified Copy of Retirement Plan Document certified within past 90 days		✓

Please note that, if required, the certified copy of the Retirement Plan Document must list the officers by name who are authorized to act on behalf of the Retirement Plan. The Retirement Plan Document must have been certified within the past ninety (90) days. Original certification is required. A copy of the certification is not acceptable. The certification of this document may be obtained from a notary public or by raised seal from the company administering the retirement plan. The Redemption Form may not be signed by the same officer certifying the corporate resolution.

If you have questions, need additional information, or need assistance locating a Representative, please contact our Customer Service Department at 1-800-544-5445. Customer Service Representatives are available to assist you, Monday through Friday between 8 a.m. and 8 p.m. ET.

## Trustee for Third Party Administered Plan Redemption Form

### INSTRUCTIONS:

1. Complete the attached [TITLE] Form
2. Sign the form
3. Mail the completed, signed form to:

Please send to: Regular Mail

Primerica Shareholder Services  
P.O. Box 534485  
Pittsburgh, PA 15253 – 4485

Client Services: (800) 544-5445

Overnight Mail

Primerica Shareholder Services  
Attention: 534485  
500 Ross Street, 154-0520  
Pittsburgh, PA 15262

Please mail completed form and required documents to Primerica Shareholder Services, PO Box 534485, Pittsburgh, PA 15253 - 4485, or for express mail Primerica Shareholder Services, Attention: 534485 500 Ross Street, 154-0520, Pittsburgh, PA 15262.

Please provide the owner's name and the account number so that we may process your request.

REDEMPTION AMOUNT - Please indicate the amount you wish to redeem from your account. You have three choices:

- All Shares/All Fund Positions - To redeem all shares in a specified fund position with this account number, or you may choose all fund positions be redeemed. Unless otherwise specified, the account(s) will be closed and all options (i.e. Bank Draft, Systematic Withdrawal Plan) will be discontinued.
- Dollars - To redeem dollar amount from a specified fund position with this account number, or you may choose all fund positions be redeemed. You must leave a minimum balance as outlined in your fund prospectus or have an active Bank Draft Option on your account should you wish the account(s) to remain open.
- Shares - To redeem a specific number of shares from a specified fund position with this account number, or you may choose all fund positions be redeemed. You must leave a minimum balance as outlined in your fund prospectus or have an active Bank Draft Option on your account(s) should you wish the account(s) to remain open.

MAIL CHECK – Please provide mailing instructions for your redemption check. We will process and mail your redemption check usually within two to three business days.

- To me (us for joint accounts) as identified on my / our account registration – To have the check sent to the address and registration of record.
- To the following Payee and / or address – To have the check sent to alternate payee and / or address. (Original Signature Guarantee Required)

EXPRESS MAIL – Please indicate if you wish to receive the check via express mail service. A daytime telephone number is required for all express mail packages. A signature will be required upon receipt of all express mail packages.

- By one day air express and deduct the fee charge from this account – The check will be sent via next-day air express in accordance with the mailing instructions.

Note: The overnight express fee is generally \$20 for most deliveries in the United States, however, if you reside in a rural area in the U.S. the charge could be higher. If you reside in Alaska, Hawaii, Puerto Rico or request overnight express to a PO Box, the overnight fee will be higher and you could be charged as much as \$30.00. If you request overnight express to Guam, the fee charge could be as much as \$70 or more. Your account will be charged accordingly.

WIRE TRANSFER – A Wire Transfer should take place within 48 to 72 hours of processing your request for a redemption.

ACH TRANSFER - An Automated and Clearing House (ACH) transfer should place within 72 to 96 hours of processing your request for distribution of shares.

Please complete the Wire / ACH Transfer Information and attach a voided check.

- Wire / ACH Transfer to the bank of record – To have the distribution proceeds Wired / ACH to the same account the bank draft option is being deducted from.
- Wire / ACH Transfer to a non-record bank – To have the distribution proceeds sent to a bank account not on file with Primerica Shareholder Services. When processing a Wire / ACH Transfer to a non-record bank, you must complete the bank name, bank contact person, bank telephone number, bank routing / transit number, bank account name and number, and attach a voided check.

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SIGNATURE – All authorized trustees must sign the request as their names appear in the Retirement Plan Document. Please provide a daytime phone number where you can be reached should we need additional information to process your request.

SIGNATURE GUARANTEE – An original signature guarantee may be obtained from an officer of most financial institutions. We are unable to accept a signature guarantee by a Notary Public. A signature guarantee is a warranty by the grantor that the signature is genuine, and that the person(s) signing is competent and authorized to sign.

ADDITIONAL FEES

- CDSC FEE – If your account is invested in Class B Shares, your redemption may be subject to a CDSC Fee (Contingent Deferred Sales Charge). Please refer to your prospectus to determine the applicable CDSC percentage applicable to your Fund.

Account Owner's Name: \_\_\_\_\_

SELF DIRECTED (TPA) RETIREMENT PLAN REDEMPTION FORM  
**Required Information**

Account Owner's Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

**1 | REDEMPTION OPTION AND AMOUNT**

I / We would like to receive: (choose one)

<input checked="" type="checkbox"/> All Shares in:				
FUND NUMBER / NASDAQ SYMBOL	NUMBER OF SHARES	OR	DOLLAR AMOUNT	CONTINUE BANK DRAFT
	#		\$	<input checked="" type="checkbox"/>
	#		\$	<input checked="" type="checkbox"/>
	#		\$	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> All Shares in All Fund Positions ←————→				<input checked="" type="checkbox"/>

**2 | REDEMPTION PROCEEDS**

Please tell us how to send the redemption proceeds.

Please mail the check to: (choose one)

The address of registration

To an alternate payee / address: (complete name(s) and address below)

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**3 DELIVERY OPTIONS**

I / We would like to receive a check: (choose one)

1<sup>st</sup> Class Mail

Next Day Air (read note regarding fee on instruction page)

Daytime phone number: \_\_\_\_\_ (Required for Express Mail Service)

OR (choose one)

I / We would like to wire transfer: (choose one)

To the active bank of record at PSS; OR

To an alternate bank account.

I / We would like to ACH transfer: (choose one)

To the active bank of record OR

To an alternate bank account.

**4 SIGNATURE AND SIGNATURE GUARANTEE**

**X**  
\_\_\_\_\_  
Authorized Officer of the Organization's Signature

\_\_\_\_\_  
Date

**X**  
\_\_\_\_\_  
Authorized Officer of the Organization's Signature

\_\_\_\_\_  
Date

Daytime phone number where you can be reached should we need additional information: \_\_\_\_\_

**SIGNATURE GUARANTEE STAMP:** I guarantee the signature(s) of the applicant(s) and to the best of my knowledge and belief the applicant is of full age and legally competent. A separate signature guarantee stamp must be affixed to this form for each signor. *If this is a Medallion signature guarantee, I further affirm that I have checked and verified a certified copy of the Board Resolution signed and dated within the past 90 days naming the applicant as an authorized officer of the organization.*

(Signature Guarantee Seal for Signor #1)

(Signature Guarantee Seal for Signor #2)

Guarantor Name: \_\_\_\_\_

Guarantor Name: \_\_\_\_\_

Guarantor Phone Number: \_\_\_\_\_

Guarantor Phone Number: \_\_\_\_\_

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**Wire / ACH Transfer - Bank Account Information**

Bank Name: \_\_\_\_\_ Account Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Please check with your financial institution for any special wiring instructions required to process a wire transfer to your bank account. Some financial institutions clear transactions through other institutions. This will cause a problem in processing the wire if your bank does not accept direct wires, but uses a pay through institution.

**IMPORTANT INFORMATION - Financial Institutions providing medallion signature guarantees have surety bond coverage that protects the transfer agents from “bad” guarantees. Primerica Shareholder Services will not accept a request to process a transaction that exceeds the financial institution’s bond coverage. Please verify with your financial institution their amount of bond coverage to determine if the institutions bond will cover your requested redemption / distribution amount.**

**Once completed, mail the form and required documents to appropriate address or services listed for processing.**

Please send to:	Regular Mail	Overnight Mail
	Primerica Shareholder Services P.O. Box 534485 Pittsburgh, PA 15253 – 4485	Primerica Shareholder Services Attention: 534485 500 Ross Street, 154-0520 Pittsburgh, PA 15262
Client Services:	(800) 544-5445	