

# PRIMERICA SHAREHOLDER SERVICES – JOINT TENANTS IN COMMON, JOINT OWNER DECEASED, SURVIVING OWNER(S) REQUEST REDEMPTION/TRANSFER FORM

To Whom It May Concern:

Thank you for your inquiry regarding information related to a Joint Tenants In Common account Redemption/Transfer. Please accept our sincere condolences for your loss.

In response to your request, we have included information regarding the redemption or transfer of the account. Please refer to the chart below for the documents that will be required to process your requested transaction.

Please note if there are multiple joint owners registered on the account and the surviving joint owners wish to re-register the account in another JTIC registration or another type registration, you must follow the instructions – To Transfer to New Account with New Registration.

Documents Required	To Redeem	To Transfer to Individual Account in Surviving Owner's Name Only	To Transfer to New Account with New Registration
Letter of Instructions or Completed Distribution/Transfer Form(s) Signature Guaranteed by surviving owner's and the Executor/Administrator for deceased owner's estate	✓	✓	✓
Original certified copy of the Letter of Appointment of Legal Representative for deceased owner(s), certified within the past 6 months	✓	✓	✓
Copy of deceased shareholder's death certificate	✓	✓	✓
New Account Application - (must be obtained and completed by a Primerica Registered Representative) indicating new registration, or existing account number with the desired registration		✓	✓
Customer Identification Form (Completed by Primerica Registered Representative) for each survivor or new owner(s)		✓	✓
Affidavit of Domicile	✓	✓	✓
Inheritance Tax Waiver (if applicable – see instructions attached)	✓	✓	✓
Tax ID Certification	✓		

The husband or wife of the deceased shareholder cannot request the account be redeemed or transferred even if he/she is the surviving owner. The assets in the account will be subject to the delivery of all the documents described above.

Unless otherwise noted on the account with Primerica Shareholder Services, 50% of the assets in the account may be redeemed by the surviving co-owner. The other 50% shall be subject to the delivery of all the documents described in the chart above.

If all owners are deceased, a letter of instructions or the attached Redemption/Transfer Form must be signed by the legal representative for each deceased owner and their signatures must be signature guaranteed in the space provided on the form, or on the letter of instructions.

Please note that, if required, the Registry Certified copy of the deceased shareholder's death certificate must be an original (copy is not acceptable). This document may be obtained from the Bureau of Vital Statistics in the state where the shareholder deceased. Also, if a certified copy of appointment of Legal Representative is required, it must be An Original court certified copy of this document (court seal or clerk of the court stamp will certify this document) and certification must be dated within 6 months of your request to distribute the assets in the deceased shareholder's account with Primerica Financial Services, to the Legal Representative (the legal document can be returned to you upon request). \*If no legal representative has been appointed, Primerica Shareholder Services may accept a Small Estate Affidavit in lieu of the Letter of Appointment from the court. Please contact your state for state-specific requirements for obtaining a Small Estate Affidavit. Please note: a certified copy of the Small Estate Affidavit is required even if a Medallion Signature Guarantee is provided.

If you have questions or need additional information, 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.

(THIS PAGE RETAINED BY SURVIVING OWNER(S))

# PRIMERICA SHAREHOLDER SERVICES – JOINT TENANTS IN COMMON, JOINT OWNER DECEASED, SURVIVING OWNER(S) REQUEST REDEMPTION/TRANSFER FORM

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.

You must provide the account number so that we may process your request.

The surviving joint owner(s) may use the attached form to request a redemption/transfer of the deceased shareholder's account assets (if there is more than one surviving joint owner listed on the account, each surviving joint owner must complete a form. You may make copies of the Redemption/Transfer Form as needed. You must provide all the documentation described in the attached cover letter requested in order for Primerica Shareholder Services to honor your request for a distribution/transfer of the assets.

**SECTION 1** – Please indicate by checking the appropriate box whether you wish to redeem the assets in the account or if you wish to transfer the assets to a New Account Number (New Account Application and Customer Identification Form required). Please read instructions on page one if you wish to transfer shares to a new account with new registration.

- **Transfer Assets to a New Account** – The executor/administrator may choose to transfer the assets to a new account with Primerica Shareholder Services. If you choose this option, you must contact a Primerica Registered Representative to complete a New Account Application and Customer Identification Form.
- **Transfer Assets to an Existing Account** – The executor/administrator may choose to transfer the assets to an existing account with Primerica Shareholder Services. You must provide the existing account number and provide the fund positions to invest the proceeds.

*NOTE: Investments will be moved "in kind" to your existing account, that is the same fund(s) currently held in the deceased owner's account will be moved to your existing account. You should speak with your PFSI Agent for assistance in determining what if any changes should be made after the transfer to your name is complete.*

**SECTION 2 – Redemption Proceeds** – Please provide instructions on how you wish to receive the distribution proceeds. If you wish the assets in a check, please provide the name(s) and mailing address.

**MAIL CHECK** – PSS usually will process and mail redemption checks within two to three business days.

**EXPRESS MAIL** – Please indicate if you wish to receive a check via express mail service. Please understand that we are unable to send a check via express mail to a Post Office Box, or Rural Route address. A daytime telephone number is required for all express mail packages. A signature is required upon receipt of all express mail packages.

- By **one-day air express** and deduct \$20 from this account – The check will be sent via next-day air express in accordance with the mailing instructions.

**WIRE TRANSFER** – A wire Transfer should take place within 48 to 72 hours of processing your request for a redemption of shares. Please complete the Wire Transfer Information and attach a voided check. **If you would like for the assets to be wired or sent ACH to your bank, you must check the appropriate box, attach a voided check with the Distribution Request Form and obtain a signature guarantee on the form.**

- **Wire Transfer to a bank** – To have the redemption proceeds sent to your bank account. When processing a Wire Transfer to your 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.

**SECTION 3 - SIGNATURE** – Each surviving joint owner and the legal representative for the deceased shareholder may be required to sign, please read the cover letter carefully and follow those instructions for signatures.

Please provide a daytime phone number where you can be reached should we need additional information to process your request.

**SECTION 4 - SIGNATURE GUARANTEE** – An original signature guarantee may be obtained from an officer of most financial institutions. **A medallion signature guarantee is preferable.** If the signature guarantee is NOT medallion, please 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. An original signature guarantee is needed if any one or more of the following conditions exist:

**SECTION 5: SUBSTITUTE FORM W-9/REQUEST FOR TAXPAYER IDENTIFICATION NUMBER** – You must complete this section if you have requested to have the assets paid to you in the form of cash by redeeming the assets. Please provide your tax payer identification number/social security number and sign in the space provided.

**Note: ADDITIONAL FEES -CDSC FEE** – *If the 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.*

**PRIMERICA SHAREHOLDER SERVICES – JOINT TENANTS IN COMMON, JOINT OWNER DECEASED,  
SURVIVING OWNER(S) REQUEST REDEMPTION/TRANSFER FORM**

Account Number:  (Required to complete transaction)

**Section 1:**

Fund Number/NASDAQ Symbol (Please provide for fund positions held by deceased)

<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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- ☐ Redeem all assets in all fund position listed above (please complete section 5)
- ☐ Transfer all assets to a new registration (application required)
- ☐ Transfer all assets to individual account in surviving owner's name only

**Section 2: Please tell us how to send the redemption proceeds: (please complete section 5)**

Please mail the check to: (choose one)

- ☐ The address of registration ☐ To an alternate payee/address:  
(Note: A signature guarantee is required to mail a check to an alternate payee or address)

Name(s):

Address:

City:  State:  Zip:

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

- ☐ 1<sup>st</sup> Class Mail ☐ Next Day Air (\$12 fee)

Daytime phone number required for Express Mail Service

I/We would like to wire transfer: (choose one) ☐ To the bank listed on the attached voided check

I/We would like to ACH transfer: ☐ To the bank listed on the attached voided check

**Section 3: Signature**

Each surviving owner(s)/Legal Representative must complete and sign a separate Redemption / Transfer Form

Surviving Joint Owner Signature \_\_\_\_\_

Date \_\_\_\_\_

Executor/Administrator \_\_\_\_\_

Date \_\_\_\_\_

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

**Section 4: Signature Guarantee (Please read instructions)**

Signature Guarantee

Signature Guarantee

Guarantor Name \_\_\_\_\_ Guarantor Phone No. \_\_\_\_\_

**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.

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**Section 5: Substitute Form W-9/Request for Taxpayer Identification Number**

**Account Number:**

If you request to have the assets distributed in the form of a cash payment, you must provide your Social Security Number or the Estate Tax Identification Number (SSN/TIN) below and complete by signing this section.

Social Security Number (SSN):

Tax Identification Number (TIN):

**I certify under penalties of perjury (1) that the Social Security Number provided on this form is the correct Taxpayer Identification Number, (2) that I am not subject to backup withholding either because I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of failure to report all interest or dividends, or the IRS has notified me that I am no longer subject to backup withholding, (3) that I am a U.S. Person (including a U.S. resident alien) and \*(4)The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.**

\_\_\_\_\_  
**Estate Beneficiary Signature**

\_\_\_\_\_  
**Date**

**\*Not applicable as Primerica Shareholder Services is not a foreign financial institution.**

Typically Primerica expects an Estate Tax ID to be provided when assets are paid to an estate. Occasionally the value of an estate will be small enough that state law permits an informal procedure for administering the estate. This less structured proceeding involves a document typically referred to as a "small estate affidavit". If this less formal process is applicable the SSN of the person entitled to the assets may be provided above. Consult a qualified tax or legal advisor or your state to confirm the appropriate estate guidelines.

**WIRE / ACH TRANSFER – BANK ACCOUNT INFORMATION**

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

Contact Person \_\_\_\_\_ Phone # \_\_\_\_\_

Routing # \_\_\_\_\_ Account # \_\_\_\_\_

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 institution's bond will cover your requested redemption/distribution amount.**

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**Affidavit of Domicile**

**Note: This Affidavit must be completed and executed before a Notary Public**

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**Instructions:**

This document is required when the shareholder is deceased and the proceeds are being distributed to the legal representative(s) or certain beneficiary(ies).

An Affidavit of Domicile is a sworn statement by an administrator/executor that designates the place of domicile of a decedent.

An Affidavit of Domicile is needed if a decedent's state of domicile and Tax Waiver requirement is in question. If the decedent's address of record, or the state of residency on the death certificate, or the probate state are Tax Waiver states, the Affidavit of Domicile will settle which state applies.

Residence is not equal to domicile. A person can have many residences but only one legal domicile. Realty is probated in the state it is located in. Non-realty is probated in the state of domicile. Domicile is that place one always returns to.

The affidavit must:

- Be original (copies not acceptable)
- Indicate deceased person's state of domicile
- Indicate capacity of the affiant (person making the affidavit)
- Refer to decedent as the name is registered
- Indicate the name of the Mutual Fund
- Be notarized, by a notary public

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**Affidavit of Domicile**

**Note: This Affidavit must be completed and executed before a Notary Public**

State of \_\_\_\_\_)

County of \_\_\_\_\_)

I, \_\_\_\_\_, of full legal age, being duly sworn, depose and  
(Joint Owner)

say that: I reside at \_\_\_\_\_, City, \_\_\_\_\_  
(Joint Owner's current address)

State of \_\_\_\_\_, and acting as the Surviving Beneficiary ☐,  
Executor ☐, or Administrator ☐, for the Estate of \_\_\_\_\_,  
(Name of Decedent)

Deceased, who died in the State of \_\_\_\_\_, on the \_\_\_\_\_ day  
in (State of death) (Day of death)

the month of \_\_\_\_\_, in the year 20\_\_\_\_; that at the time of death,  
(Month of Death)

his/her domicile (legal residence) was at, \_\_\_\_\_,  
(Decedent's last known address)

City, \_\_\_\_\_, State of, \_\_\_\_\_;

(If the decedent resided in another State within 3 years prior to his or her death, name the State where he or  
she previously resided, State \_\_\_\_\_).

This affidavit is made for the purpose of having mutual fund shares of \_\_\_\_\_  
(Name of Mutual Fund)

\_\_\_\_\_ transferred as requested and if the transfer constitutes an  
apparently uneven distribution, the matter has been equalized by the distribution of other securities  
or in some other manner.

\_\_\_\_\_  
(Signature of Joint Owner) Date

Sworn to and subscribed before me: This \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Notary Public

My commission expires:

Seal:

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**Inheritance Tax Waiver**

What is it? A document that releases the Transfer Agent (Primerica Shareholder Services) from liability regarding the state's inheritance tax on the deceased shareowner's shares.

An Inheritance Tax Waiver may be required (based on specific State Requirements, you must contact the deceased state Department of Revenue for guidance) whenever the shareholder is deceased and the assets of the account are being distributed or transferred to another person or persons.

Each state has their own specific rules regarding the Inheritance Tax Waiver requirements. A waiver is granted upon application of the personal or legal representative who will, in effect, make a partial "estate tax return." This obligates the personal representative to make appropriate provision for payment of the tax when it becomes due prior to final distribution of the estate.

**A Tax Waiver must:**

- Be on official state letterhead (From Department of Revenue, State Tax Department, State Dept. of Revenue, etc)
- Name the fund the shareowner(s) owned
- Contain the account balance on the date of death
- Be expressed as a 'blanket waiver'
- Bear an authorized signature of the issuing authority, normally a facsimile stamp