Primerica Shareholder Services

IRA TO NON-RETIREMENT ACCOUNT TRANSFER FORM

INSTRUCTIONS:

		Please send to:	Peqular Mail	Overnight Mail	
1.	Complete the attached IRA TO NON-RETIREMENT	Flease send to.	Regular Mail	Overnight Mail	
	ACCOUNT TRANSFER Form		Primerica Shareholder Services P.O. Box 534485	Primerica Shareholder Services Attention: 534485	
2.	Sign the form		Pittsburgh, PA 15253 – 4485	500 Ross Street, 154-0520	
3.	Mail the completed, signed form to:	Client Services:	(800) 544-5445	Pittsburgh, PA 15262	
		Fax services: If your request does not require a asignature guarantee,			

Fax services: If your request does not require a asignature guarantee, additional documentation or other fund requirements, you may fax this request to (833) 748-3938

You may use this form to transfer assets from your IRA account with Primerica Shareholder Services (PSS) to establish and fund a non-retirement account. The transfer must be within the same share class and fund company.

If you do not have an existing non-Retirement Account with the registration you desire, you must complete the appropriate New Account Application for the type account you wish to establish. You must contact a Primerica Financial Services Representative for assistance in completing the New Account Application and the Customer Identification Form.

You may not use this form or instructions from this form to remove an excess contribution (use Form POL-42), or take an RMD distribution, (use Form POL-14), request a Death Distribution, or in case of Divorce. Please use the appropriate distribution kit for Death, or in case of Divorce

SECTION 1-Transfer Request Options

Please check the appropriate box to indicate how we are to process your transfer request. Do you want to transfer all the shares in all fund positions in your retirement account to a new or existing account? Do you want a specific number of shares transferred from your retirement account or do you want a specific dollar amount transferred? Please indicate from which fund position we are to transfer a specific share or dollar amount. Please provide the redemption reason for this transfer. Account Options (i.e. Pre-Authorized drafts will not be copied to the new/existing account unless you notify PSS to establish the option on the new/existing account).

NOTE: Investments will be moved "in kind" to your existing account, that is the same fund(s) currently held in the 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 -Types of Accounts

Please indicate the type of account you wish to establish by checking the appropriate box. If your account is already established, please provide your existing account number. If you are establishing a new account with Primerica Shareholder Services (PSS), please check the box, complete and attach the appropriate New Account Application to this form and mail to PSS. You must contact a Primerica Financial Services Representative for assistance in completing the application and Customer Identification Form.

SECTION 3 - Tax Withholding Options

FEDERAL WITHHOLDING - Please indicate your Federal Tax Withholding

• Check the box if you wish 10 % Federal Income Taxes withheld from your proceeds. If the box is not checked, no taxes will be withheld.

MANDATORY STATE WITHHOLDING – If you elect to have federal income tax withheld and you reside in a state that requires mandatory state withholding, we are also required to withhold state income tax.

<u>VOLUNTARY STATE WITHHOLDING</u> – If you reside in a state that allows voluntary State Income Tax withholding, you may choose to have the state income tax withhold whether you have federal withholding or not. Check the box if you wish to have state income tax withheld from your distribution proceeds.

SECTION 4 -Signature and Signature Guarantee

To transfer the assets from your retirement plan account to fund your non-retirement plan account, you must sign the Transfer Form-For IRA to Non Retirement Account. You will be required to provide a signature guarantee if:

You will not be the registered owner of the shares upon transfer to the new or existing account. Please provide a phone number where you can be reached if additional information is needed.

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. <u>Please note that a notary public cannot provide a signature guarantee</u>. 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.

IRA TO NON-RETIREMENT ACCOUNT TRANSFER FORM

REQUIRED INFORMATION

Please complete all information to avoid any delay in processing your request.

Account Owner's Name:		Account Number:		
S	Social Security #:	Date of Birth:		
acc	ase read the instructions before completing this form. You may use this form to transfer assets from your Primerica Shareholder Services (PSS) Traditional, Roth, SEP, or SIMPLE IRA count to establish and fund another non-retirement account with PSS. You must provide the PSS account number from which the assets will be transferred. The account number is uired to process your request.			
	NOTE: Investments will be moved "in kind" to your existing account, that is the same fund(s) currently held in the 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.			
	your name is complete.			

Please indicate the fund position(s), number of shares, or the dollar amount you wish to transfer. Transfer from the fund number(s) provided, the # of shares indicated Transfer all shares in all fund posistions . .

Iransfer from the fund number(s) provided, the dollar amount indicated						
FROM Account:	Fund/ NASDAQ SYMBOL	-	# of Shares		\$ Dollar Amount	
Fund 1		#		_ \$		
Fund 2		#		\$		
Fund 3		#		\$		_
Choose One Redempt	ion Reason: (Please see instru	ctions for further	volumetion)			

Disability- - I certify that I meet the qualification of disability as defined in IRS Code 72(m)(7). Premature (Age < 591/2) Normal

Type of Accounts

Type of Account Desired: UGMA/UTMA Voluntary Trust Copy existing account options (i.e. Systematic Purchases, Systematic Withdrawals etc.)

Existing Account:

New Account (New Account Application and Customer Indentification Form Required)

Tax Withholding Options

Distributions from a Traditional, Roth, SIMPLE or SEP IRA account is a taxable event. Please check the box if you want us to withhold Federal Income Tax. If the box is not checked, no Federal Income Tax will be withheld. Roth IRAs are not subject to withholding.

Yes, Withhold 10% Federal Income Tax

Yes, Withhold Federal Income Tax of Note: If you elect Federal Withholding and reside in a state that requires mandatory state withholding, state withholding will also apply to this transfer. The state withholding rate is based on your resident state requirements. Please read Section 3 on the instructions page of this form.

Voluntary State Withholding: This is a voluntary selection to withhold state income tax. Please check the box if you wish for state withholding withheld Yes, Withhold State Income Tax of % from the transfer proceeds.

Signature & Signature Guarantee

Owner Signature Date Daytime phone number where you can be reached if additional information is needed.

Guarantor Name.

Guarantor Phone No._

Signature Guarantee Stamp

%

SIGNATURE GUARANTEE STAMP: I/We 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.

	Please send to:	Regular Mail	Overnight Mail
Once completed, mail the form and re-	Client Services:	Primerica Shareholder Services	Primerica Shareholder Services
quired documents to		P.O. Box 534485	Attention: 534485
appropriate address or services listed for		Pittsburgh, PA 15253 – 4485	500 Ross Street, 154-0520
processing.		(800) 544-5445	Pittsburgh, PA 15262