Print

TRADITIONAL & SIMPLE IRA

IRA TRANSFER REQUEST

This form is not designed to be used to transfer, convert or recharacterize assets from a Traditional IRA or SIMPLE IRA to a Roth IRA.

IRA HOLDER'S NAME AND ADDRESS (Transferring IRA)	CURRENT IRA TRUSTEE'S OR CUSTODIAN'S NAME AND ADDRESS

Social Security Number	Date of Birth	Home Phone

IRA Account Identification (Transferring IRA)	Type of IRA (Transferring IRA)	Trustee's or Custodian's Phone Number
	☐ Traditional IRA ☐ SIMPLE IRA	

BENEFICIARY (or Former Spouse) INFORMATION

This section should be completed by a beneficiary upon the IRA holder's death or a former spouse as a result of a property settlement. DO NOT use this section to name or change your beneficiary(ies).

Beneficiary's (or Former Spouse's) Name and Address

Social Security Number	Date of Birth
Phone	**Relationship**

TRANSFER INSTRUCTIONS

Directly transfer ☐ all or ☐ part of the IRA identified above in the following manner.

Frequency:
- ☐ One-time
- ☐ Monthly
- ☐ Quarterly
- ☐ Annually
- ☐ Other _____

Please make a check payable as follows:

GoldStar Trust Company as ☐ Trustee ☐ Custodian
(Name of Accepting Organization)

of the _____ IRA.
(Name of IRA Holder)

This transfer should be placed in ☐ Traditional IRA ☐ SIMPLE IRA.

This transfer ☐ will ☐ will not close the IRA.

This transfer deposit ☐ should ☐ should not be placed in a conduit IRA.

ASSET HANDLING INSTRUCTIONS

Asset Description	Quantity Or Amount In IRA	Quantity Or Amount To Be Transferred	Liquidate Immediately	Liquidate at Maturity	Transfer In Kind
1.			☐	☐	☐
2.			☐	☐	☐
3.			☐	☐	☐
4.			☐	☐	☐

TRANSFER INSTRUCTIONS FOR REQUIRED MINIMUM DISTRIBUTION (RMD)

Complete if applicable.

I authorize the Trustee or Custodian named above to
- ☐ distribute my RMD to me prior to transferring my IRA assets,
- ☐ segregate and retain my RMD amount, or
- ☐ include the amount that represents my RMD in the transfer.

SIGNATURE OF IRA HOLDER, BENEFICIARY OR FORMER SPOUSE

I authorize the transfer of the IRA assets in the manner described above and certify that all of the information provided by me is correct and may be relied upon by the Trustee or Custodian.

I understand that I am responsible for determining my eligibility to transfer within the limits set forth by tax laws, related regulations and plan agreements. Further, I understand that a transfer from a SIMPLE IRA to a SIMPLE IRA on a more frequent basis than monthly from a Designated Financial Institution, or a change in my transfer request outside my election period, may result in costs or penalties. I understand that special rules apply to SIMPLE IRA to Traditional IRA transfers. I assume responsibility for any tax consequences or penalties that may apply to the transfer of these assets and I agree that the Trustee or Custodian shall in no way be held responsible.

_____ _____
(IRA Holder, Beneficiary or Former Spouse) (Date)

_____ _____
(Notary Public/Signature Guarantee) (Date)

ACCEPTING IRA TRUSTEE OR CUSTODIAN

Our organization agrees to serve as the new Trustee or Custodian for the account of the above-named individual, and as Trustee or Custodian, we agree to accept the assets being transferred.

Account Identification of Accepting IRA _____

GoldStar Trust Company
PO Box 719
Canyon TX 79015

_____ _____
(Authorized Signature of New Trustee or Custodian) (Date)

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