

IRA Transfer RequestThe term IRA will be used below to mean inherited

The term IRA will be used below to mean inherited Traditional IRA, Traditional IRA, Roth IRA, inherited Roth IRA, SEP IRA, and SIMPLE IRA unless otherwise specified.

VIP Services: (888) 855-9856 | info@trustprovident.com 7450 Arroyo Crossing Parkway, Suite 230, Las Vegas, NV 89113

Section 1	Provident Trust Gro	oup Owner In	formation
First Name		MI	Last Name
Email			Last Four Digits of Social Security Number
Account Number		Accepting Account Type	☐ Traditional IRA ☐ Roth IRA ☐ SIMPLE IRA ☐ SEP IRA ☐ Inherited Traditional IRA ☐ Inherited Roth IRA
	ady opened the IRA with us, yo t Fee Schedule for any applica		te and submit an Application to us with this transfer form for processing.
Section 2	Relationship of Re	cipient to Curr	rent IRA Owner
	-	er, transferring assets	g assets to my own IRA (statement required). to an inherited IRA (statement required). Information
Account Number		Account Type	☐ Traditional IRA ☐ Roth IRA ☐ SIMPLE IRA ☐ SEP IRA ☐ Inherited Traditional IRA ☐ Inherited Roth IRA
If you are NOT th number below.	e current IRA owner, compl	□ ete the current IRA	Nowner's name and the last four digits of his or her social security
First Name		MI	Last Name
Last Four Digits of	Social Security Number		
Current Trustee/Cu	stodian Name		Current Trustee/Custodian Phone
Current Trustee/Cu	stodian Address	City	State Zip

Section 4	Transfer Amount	:					
Select Option A or	Option B below. Failure to se	elect an option will result in a	transfer rej	ection.			
1. Liquida	nsfer entire account balance ate all assets and transfer cas ximate cash amount: \$		\triangle	For all liquidation requests, contact your current trustee/custodian to initiate the process.			
_	ister all assets and transfer c	eash balance to receiving IRA	\triangle	Include a copy of your most recent account statement.			
Option B: Tran	nsfer a portion of the accour	nt balance	\wedge	All accounts are required to maintain a minimum			
Cash Transfer	Amount \$		$\angle!$	cash balance of \$500 at all times.			
Asset Type to F	Re-Register	Asset Value		Quantity/Number of Shares (If applicable.)			
Asset Type to F	Re-Register	Asset Value		Quantity/Number of Shares (If applicable.)			
Re-register Asset	s to:						
_	oup FBO (IRA Owner's Name) IRA (or Roth IRA)					
Forward copies of Provident Trust Gro	executed assignments, inves	stment contact information, ar to be provided for all asset tr		e of ownership (original asset documents) to l asset documentation should be sent to Provident			
Trust Group's phys	ical address under Section 9.						
Section 5	Delivery Options	for Current Trustee/	Custod	ian			
Send the requeste	d transfer as indicated belov	v. (Select one.)					
Make check pa Provident Trust	Group, LLC 70 A 90084-7470 ayable to: Group, LLC	Check via Overnight Ma Lockbox Services 847470 ATTN: Provident Trust Gr 3440 Flair Drive El Monte, CA 91731 Make check payable to:	oup, LLC	Wire Transfer Wells Fargo Bank, N.A. 420 Montgomery St. San Francisco, CA 94104 ABA Number 121000248 Account Number 4077370088			
FBO: Client Na	me and Acct Type	Provident Trust Group, LL FBO: Client Name and Ac		Please reference "Provident Trust Group" in the Bank Account Name and the Account Owner's Name and Account Number in the OBI section			
Section 6	Processing Optio	ns for Accepting Cus	todian				
expedited serv		elow. Processing fees will be p		ustodian within three business days unless you reques ne cash available in your account unless you indicate			
Fo	r "Next-Day" or "Same-Day	" Service, all documents must	be receive	ed, and in good order, by 10 a.m. PST.			
Normal Pr	ocessing within three business days.	Next-Day Service Processed by 4 p.m. PS	T next busi	Same-Day Service ness day. Processed within the same day.			
				ile (If you do NOT have a credit card on file, please paid from the cash in your account.)			
2. Indicate below	how this transfer request sh	transfer request should be submitted to your current IRA Trustee/Custodian.					
Option A:	Submit via Fax to	Verify that the current IRA trustee/custodian accepts faxed requests prior to selecting this option. If no fax number is provided, documents will be sent via regular mail.					
mail proce.	_	nt Fee Schedule for fees applic		_			
Regular 🗌	Mail Expedited Delive	ery					

Section 7

Authorization for Release of Information

I, the undersigned, do hereby authorize the accepting custodian and its agents to request information regarding my account and the status of this transfer from the current trustee or custodian listed above. This authorization shall commence and be in full force as of the date listed below and shall remain in full force and effect thereafter until the completion of the transfer of the assets listed above.

Section 8

IRA Owner Agreement and Authorization

- 1. I hereby agree to the terms and conditions set forth in this IRA Transfer Request and acknowledge having established an IRA with the accepting custodian.
- 2. I understand the rules and conditions applicable to an IRA transfer. I understand that it is my responsibility to contact my current financial institution to determine whether a medallion signature guarantee is required. If a medallion signature guarantee is required, it is my responsibility to take this form to my bank or credit union for a medallion signature guarantee. (Failure to obtain a medallion signature guarantee could result in delays and/or rejection of this request by your current financial institution.)
- 3. I qualify for the transfer of assets listed on this form and authorize such transactions.
- I understand that the accepting custodian does not have the authority to agree to anything different than my foregoing understandings of its policy.

I authorize the accepting custodian to Medallion Stamp this Form
(Signature and address must match your photo I.D. on file.) See
current Fee Schedule for applicable fees.

I have attached a statement dated within the last 60 days.

Medallion Signature Guarantee



Contact your current custodian to inquire if a Medallion is required.

A Medallion Signature Guarantee program is approved by the Securities Transfer Association that enables participating financial institutions to guarantee signatures. The Medallion programs ensure that the individual signing the certificate or stock power is in fact the registered owner as it appears on the stock certificate or stock power. A signature guarantee can be obtained from your bank. If your current custodian does not require a signature guarantee, please sign below and return this form to the receiving custodian.

Section 9

Signatures

I authorize the transfer of these IRA assets and certify that all information provided by me is true and accurate. I understand that I am responsible for determining that this IRA transfer qualifies under the rules that apply to such transfers and agree to comply with those rules. I assume responsibility for any consequences that may result from this transfer and I agree that the custodian is not responsible for any consequences that may arise from executing this transfer request.

The custodian signing below agrees to accept the assets being transferred.

X		
IRA Owner Signature		Date (mm/dd/yyyy)
X		
Officer Acceptance Signature	Custodian Name (Please type or print)	Date (mm/dd/vvvv)

Congratulations! You are now able to submit your completed request.

Before you submit this form please review all completed information prior to signing. When ready, mail, email or fax this completed form, along with a copy of your most recent statement, to:

If original transfer documents are required by your current custodian, mail completed forms to:

Provident Trust Group P.O. Box 123 Fort Washington, PA 19034

If your current custodian will accept faxed transfer documents, please email OR fax to: **Email to:** transfers@trustprovident.com

Fax to: (702) 253-7565