



# GOLDSTAR TRUST COMPANY

## INTERNAL IRA TRANSFER REQUEST

701 S. Taylor, LB 110  
Amarillo, TX 79101  
(800) 486-6888  
NewBusiness@goldstartrust.com

### GOLDSTAR IRA ACCOUNT OWNER

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Current Account #: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Address: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_

#### Type of existing IRA to be transferred: (please choose one)

☐ Traditional ☐ SEP IRA ☐ Simple

#### Type of IRA being transferred to : (please choose one)

☐ Traditional ☐ SEP IRA

New Account #: \_\_\_\_\_

### ASSET LIQUIDATION INSTRUCTIONS

Asset Description	Quantity in IRA	Quantity To Be Transferred	Liquidate Immediately	Liquidate at Maturity	Transfer In-Kind
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Select One: ☐ Full Transfer ☐ Partial Transfer

### SIGNATURES

#### THIS BOX FOR INTERNAL USE ONLY

GoldStar Trust Company agrees to serve as the new Custodian for the account of the above-named individual, and as Custodian, we agree to accept the assets being transferred.

GoldStar Account Identification # \_\_\_\_\_

GoldStar Trust Company  
Tax ID# 88-1312583

\_\_\_\_\_  
Authorized Signature for GoldStar

\_\_\_\_\_  
Date

#### CUSTOMER SIGNATURE

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 GoldStar Trust Company.

X

\_\_\_\_\_  
Account Holder's Signature

\_\_\_\_\_  
Date