



TRUSTEE-TO-TRUSTEE TRANSFER

DIRECT ROLLOVER TO QUALIFIED ANNUITY REQUEST FORM

Instructions:

Please complete this form in its entirety and return to the Home Office. This form should be given to the Trustee, Custodian, or Insurer of the IRA or other eligible qualified plan that will be making a Trustee-to-Trustee transfer / Direct Rollover to the Polish Roman Catholic Union of America.

If you have any questions, or for additional information, please contact us at ☎ 1-800-772-8632 or visit our website at www.prcua.org.

Attention Present Trustee/Custodian/Insurer:

I have established an annuity with the Polish Roman Catholic Union of America. At the time indicated below, kindly liquidate the amount of my IRA or other qualified plan funds indicated below which you are holding for my account and arrange a direct Trustee-to-Trustee Transfer / Direct Rollover of these funds to the Polish Roman Catholic Union of America.

PRESENT TRUSTEE/CUSTODIAN ACCOUNT INFORMATION

TRUSTEE/CUSTODIAN FIRST (MI) LAST NAME

ACCOUNT/POLICY NUMBER

TRUSTEE/CUSTODIAN'S STREET ADDRESS / CITY / STATE / ZIP

ACCOUNT HOLDER FIRST (MI) LAST NAME Type: IRA ROTH IRA SEP/IRA SIMPLE TSA
 KEOGH 401K OTHER _____

ACCOUNT HOLDER'S STREET ADDRESS / CITY / STATE / ZIP

SOCIAL SECURITY NUMBER

TELEPHONE NUMBER

Entire Account Balance - OR - Partial Transfer \$ _____
 Immediately - OR - On Maturity Date _____

ACCOUNT ESTABLISHED WITH THE POLISH ROMAN CATHOLIC UNION OF AMERICA

Type: IRA ROTH IRA SEP/IRA SIMPLE TSA OTHER _____

Please make check payable as follows, and mail to:

POLISH ROMAN CATHOLIC UNION OF AMERICA
FOR: _____ PRCUA ANNUITY # / TYPE: _____
UNDERWRITING DEPARTMENT
984 N MILWAUKEE AVE
CHICAGO, IL 60642-4101

COMPLETE ONLY IF YOU ARE OF RMD ELIGIBILITY AGE OR OLDER, THIS CALENDAR YEAR

- I have satisfied my minimum distribution for this calendar year
- I request my present trustee distributes to me my required minimum distribution for this calendar year prior to transferring the above funds.
 - My minimum distribution is calculated by using the Uniform Life Expectancy Table
 - My minimum distribution is calculated by using the Joint Life and Last Survivor Expectancy Table

SIGNATURES

 _____ DATE _____
 POLICY OWNER (ASSIGNEE) SIGNATURE

 _____ DATE _____
 WITNESS / DEPUTY (AGENT) SIGNATURE