

[CLEAR FORM >>](#)

Use this **IRA TRANSFER REQUEST FORM** to facilitate the transfer of assets between two IRAs.

This form may be used to transfer Traditional, Roth, SEP, or SIMPLE IRA assets from one IRA Trustee/Custodian/Issuer to another. This form should not be used to facilitate a rollover of assets from an employer-sponsored qualified plan or to convert Traditional, SEP, or SIMPLE IRA assets to a Roth IRA. If you have any questions regarding this form, please call Shareholder Services at 1.888.345.1898.

NOTE: Please complete a **New Account Agreement** if you do not already have an account established.

PART I: IRA OWNER INFORMATION (RECEIVING IRA)

*Required Information

Owner's Name* (First, M.I., Last)

Date of Birth*

Social Security Number*

Street Address (Physical Address)*

Apt #

City*

State*

Zip Code*

Mailing Address (if different than above)

Apt #

City

State

Zip Code

Daytime Phone*

Evening Phone

PART II: CURRENT IRA TRUSTEE, CUSTODIAN OR ISSUER

Name of Current Trustee/Custodian/Issuer*

Current Account/Plan Number/Fund Name*

P.O. Box*

Suite #

City*

State*

Zip Code*

Mailing Address (if different than above)

Suite #

City

State

Zip Code

Name of Contact*

Contact's Phone Number*

► **NOTE:** If you wish to have paperwork sent overnight, please provide street address.

PART III: TRANSFER DESCRIPTION

► Please attach a recent statement.

Type of Transfer (Select One)

Traditional IRA-to-Traditional IRA

SIMPLE IRA-to-SIMPLE IRA

Roth IRA-to-Roth IRA

SEP IRA-to-SEP IRA

SIMPLE IRA-to-Traditional IRA**

SIMPLE IRA-to-SEP IRA**

** You may not transfer SIMPLE IRA assets to a Traditional IRA until at least two years have elapsed from the time of your initial participation in your employer-sponsored SIMPLE IRA plan.

PART VI: INSTRUCTIONS REGARDING REQUIRED MINIMUM DISTRIBUTION (RMD)

► **NOTE:** Complete this section only if the current (i.e., distributing) IRA is subject to Required Minimum Distributions (RMDs).

- Keep my RMD in the existing IRA and transfer the balance as instructed. I have already satisfied my RMD for this year.
 Send me my RMD and transfer the remaining IRA balance as instructed above. Transfer my RMD to the new IRA Trustee/Custodian.

Special Instructions: _____

PART VII: ACKNOWLEDGMENT

By signing this IRA Transfer Request Form, I certify that the information I have provided is true and correct. I authorize the current IRA Trustee/Custodian to transfer the IRA assets as instructed above. I understand that I am responsible for ensuring I am eligible to authorize this transfer and I assume all responsibilities for any consequences as a result of my actions. I agree to indemnify and hold the IRA Trustee/Custodian harmless from any consequences related to executing my directions. I have been advised to seek competent legal and tax advice, and have not been provided any such advice from the IRA Trustee/Custodian. I also understand that if this transfer involves a SIMPLE IRA, or if I am subject to the required minimum distribution requirements, special rules apply; and I assume responsibility for my actions regarding those issues.

Signature of IRA Owner (or other Authorized Person):

X _____ Date: _____

PART VIII: NEW TECHNOLOGY MEDALLION SIGNATURE GUARANTEE STAMP

A New Technology Medallion Signature Guarantee Stamp is designed to protect the account from fraud.

The following instructions are acceptable signature guarantors:

- Participants in good standing of the Securities Transfer Agents Medallion Program ("STAMP")
- Commercial banks which are members of the Federal Deposit Insurance Corporation ("FDIC")
- Trust companies
- Firms which are members of a domestic stock exchange
- Eligible guarantor institutions qualifying under Rule 17 Ad-15 of the Securities Exchange Act of 1934, as amended, that are authorized by charger to provide new technology medallion signature guarantee stamps (e.g., credit unions, securities dealers and brokers, clearing agencies and nation securities exchanges)
- Foreign branches of any of the above

► **NOTE:** The Transfer Agent cannot honor guarantees from notaries public, savings and loan associates, or saving banks.

NEW TECHNOLOGY MEDALLION
SIGNATURE GUARANTEE STAMP

PART IX: LETTER OF ACCEPTANCE (To be completed by new custodian)

By signing below, the Trustee/Custodian of the receiving IRA agrees to accept this transfer as instructed above.

Signature of Receiving IRA Trustee/Custodian Representative:

X _____ Date: _____

PART X: MAILING INSTRUCTIONS

Please send completed form to:

REGULAR MAIL DELIVERY

Commonwealth International Series Trust
P.O. Box 46707
Cincinnati, OH 45246-0707

OVERNIGHT DELIVERY

Commonwealth International Series Trust
225 Pictoria Drive, Suite 450
Cincinnati, OH 45246

Commonwealth International Series Trust

NOTICE OF PRIVACY POLICY & PRACTICES

Commonwealth International Series Trust (the "Trust") recognizes and respects the privacy expectations of our customers.¹ We provide this notice to you so that you will know what kinds of information we collect about our customers and the circumstances in which that information may be disclosed to third parties who are not affiliated with the Trust.

COLLECTION OF CUSTOMER INFORMATION

We collect nonpublic personal information about our customers from the following sources:

- **ACCOUNT APPLICATIONS** and other forms, which may include a customer's name, address, social security number, and information about a customer's investment goals and risk tolerance;
- **ACCOUNT HISTORY**, including information about the transactions and balances in a customer's accounts; and
- **CORRESPONDENCE**, written, telephonic or electronic between a customer and the Trust or service providers to the Trust.

COLLECTION OF CUSTOMER INFORMATION

We may disclose all of the consumer information outlined above to third parties who are not affiliated with the Trust:

- **as permitted by law** — for example with service providers who maintain or service shareholder accounts for the Trust or to a shareholder's broker or agent;
- **to perform marketing services** on our behalf or pursuant to a joint marketing agreement with another financial institution.

SECURITY OF CUSTOMER INFORMATION

We require service providers to the Trust:

- to maintain policies and procedures designed to assure only appropriate access to, and use of information about customers of the Trust; and
- to maintain physical, electronic and procedural safeguards that comply with federal standards to guard nonpublic personal information of customers of the Trust.

- ▶ We will adhere to the policies and practices described in this notice regardless of whether you are a current or former customer of the Trust.

¹For purposes of this notice, the terms "customer" or "customers" includes both individual shareholders of the Trust and individuals who provide nonpublic personal information to the Trust, but do not invest in Trust shares.