

## TAX QUALIFIED TRANSFER REQUEST

Tel: (866) 363-3290 FAX: (866) 368-0095

Α.	. ISSUER, TRUSTEE, CUSTODIAN, OR PLAN ADMINISTRATOR	R OF TRANSFEROR ARRANGEM	ENT		
Nam	ne:	Current contract/a	Current contract/account #		
Add	dress line 1:	SSN/Tax ID:			
Add	dress line 2:				
City:		State:	Zip code:		
B.	IDENTITY OF INDIVIDUAL REQUESTING THE TRANSFER				
Nam	me:	New contract # _	New contract #		
Add	dress line 1:	SSN/Tax ID:	SSN/Tax ID:		
Add	dress line 2:	Date of birth:	Date of birth:		
City	r:	State:	Zip code:		
The	requesting individual is (check one):				
	e owner, employee, or former employee for whose benefit the transferor arrangement was established and maintained. e surviving spouse of the deceased owner, employee, or former employee. If so, please provide the following:  The date of birth of the owner, employee, or former employee:				
	(2) The date of death of the owner, employee, or former employee:				
	A non-spouse beneficiary of the deceased owner, employee, or former employee. If so, please provide the following:				
	(1) The date of birth of the owner, employee, or former employee:				
	(2) The date of death of the owner, employee, or former employee:				
C.	. TYPE OF TRANSFER (check which is applicable)				
	Into a TRADITIONAL IRA annuity contract (check one):  From a TRADITIONAL IRA or SEP IRA in a trustee-to-trustee From a SIMPLE IRA in a rollover made after the 2-year period individual's employer From a SECTION 401(a) QUALIFIED TRUST, SECTION 403(403(b)(7) CUSTODIAL ACCOUNT, or GOVERNMENTAL SE	beginning on the day contributions a	3(b) ANNUITY CONTRACT, SECTION		
	Into a ROTH IRA annuity contract (check one):  ☐ From a ROTH IRA in a trustee-to-trustee transfer  ☐ From a DESIGNATED ROTH ACCOUNT in a qualified rollover  ☐ From a TRADITIONAL IRA or SEP IRA in a qualified rollover  ☐ From a SIMPLE IRA in a qualified rollover made after the 2-year period beginning on the day contributions are first deposited in the SIMPLE IRA by the individual's employer  ☐ From a SECTION 401(a) QUALIFIED TRUST, SECTION 403(a) ANNUITY PLAN, SECTION 403(b) ANNUITY CONTRACT, SECTION 403(b)(7) CUSTODIAL ACCOUNT, or GOVERNMENTAL SECTION 457(b) PLAN in a qualified rollover made after 2007				
	From a SECTION 403(b) ANNUITY CONTRACT (check one):  From a SECTION 403(b) ANNUITY CONTRACT or a SECTION 403(b)(7) CUSTODIAL ACCOUNT in a rollover, transfer, or exchange From a TRADITIONAL IRA or SEP IRA in a rollover From a SIMPLE IRA in a rollover made after the 2-year period beginning on the day contributions are first deposited in the SIMPLE IRA by the individual's employer From a SECTION 401(a) QUALIFIED TRUST, SECTION 403(a) ANNUITY PLAN, or GOVERNMENTAL SECTION 457(b) PLAN in an eligible rollover distribution  NON-ERISA FUNDS ONLY. The section 403(b) annuity contract will not be subject to the requirements of the Employee Retirement Income security Act of 1974, as amended ("ERISA"). Hence, we will not accept amounts transferred into a section 403(b) annuity contract if the amounts				

transferred include funds which are subject to ERISA.

C.	TYPE OF TRANSF	ER (continued)			
	Into a GOVERNMEN	ito a GOVERNMENTAL SECTION 457(b) ANNUITY CONTRACT (check one):			
		From a SECTION 401(a) QUALIFIED TRUST, SECTION 403(a) ANNUITY PLAN, SECTION 403(b) ANNUITY CONTRACT, SECTION			
			RADITIONAL IRA, or SEP IRA in an eligible rollo		
	individual's emp	loyer	A NO SE NO PARENT SERVICE	butions are first deposited in the SIMPLE IRA by the	
	PRE-TAX FUNDS O include any after-tax		amounts transferred into a governmental section 4	457(b) annuity contract if the amounts transferred	
	Other:				
D.	DISCLOSURE FOR	R TAX-FREE 403(b) TR	RANSFERS		
As of September 25, 2007 the IRS changes to 403(b) regulations regarding tax-free transfers carretain its tax-free status the following conditions must be met:  1. your employer creates a 403(b) plan document by January 1, 2009 that allows such transfers your employer enters into a written information sharing agreement with the custodian of you the accumulated benefit immediately after the transfer is at least equal to the accumulated by				ors, our 403(b) contract by January 1, 2009, and	
	t is important to note that if the requirement for a written plan document or the requirement for an information sharing agreement are not met by anuary 1, 2009, contracts funded with transferred funds after September 24, 2007 may lose their tax-qualified status and be deemed taxable by				
	the IRS. If this happens there are several steps you can take prior to January 1, 2009 to remedy the tax status of your contract. Please note these remedies may not be available to you if you have loans against your contract.  a) you can transfer funds to a contract that will meet the conditions above, or				
	b) you can roll your contract to an IRA if you are at least 59½, are 55 and retired, or if you have terminated employment with the employer sponsoring the 403(b) plan.				
	You should consult your insurance agent and tax advisor about making a rollover, transfer or exchange into a section 403(b) contract, and about the tax consequences of failing to meet the written plan and information sharing requirements.				
	Also, by signing below, you are hereby authorizing Industrial Alliance Pacific Insurance and Financial Services Inc. to provide the employer maintaining the section 403(b) plan (or an agent of the employer) with information necessary for the section 403(b) annuity contract, or any other contract to which contributions have been made by the employer, to satisfy section 403(b) and other tax requirements.				
			pove tax consequences and I wish to proceed with 1		
Insurance and Financial Services Inc. to share information with the placcording to IRS rules.					
	Signature of reque	esting individual:		Date Signed:	
E.	AMOUNTS TO BE	TRANSFERRED (che	ck one)		
	Entire interest	Partial interest of		All funds not subject to a surrender charge	
NO	LOAN AMOUNTS.	We will not accept transf	ers of any amount of a loan outstanding from anot	her arrangement.	
F.	REQUIRED MININ	MUM DISTRIBUTIONS	(check one)		
	No portion of the amount to be transferred will be a required minimum distribution under section 401(a)(9) of the Internal Revenue Code (RMD). A portion of the amount to be transferred in a <b>trustee-to-trustee transfer</b> will be an RMD, and I will instruct Industrial Alliance Pacific Insurance and Financial Services Inc. in the time and manner required by the company as to the timing and the amount of the RMD that is to be distributed from the transferee annuity contract.				
G.	AUTHORIZATION				
The Ind	issuer, trustee, custod ustrial Alliance Pac	lian, or plan administrato ific Insurance and Fin	or identified in Section A is requested to make a direction ancial Services Inc.	ect payment on my behalf by a check payable to	
	Signature of	requesting individual	l:	Date Signed:	
		Signature of witness		Date Signed:	
Sign	nature of plan admi	inistrator (if required)	):	Date Signed:	
H.	ACCEPTANCE BY	INDUSTRIAL ALLIAN	CE PACIFIC INSURANCE AND FINANCIAL SE	RVICES INC.	
			ervices Inc. accepts the transfer indicated above and nee with the applicable requirements of the Internal F		
Sig	nature of authorize	d Company official:			
		Title:	Executive Vice President, US Development		
1.	PAYMENT INSTRI	UCTIONS			
	e check payable to:	PARTITION OF THE PARTY.	acific Insurance and Financial Serives Inc.		
		FBO		Please indicate the new contract number noted in Section B on the check.	

P.O. Box 19009, Greenville, SC 29602-9009