



DIRECTION TO INVEST

P.O. Box 3587 Albuquerque, NM 87190 • TollFree:1-800-529-3951 • Local:505-514-0539 • Fax:505-792-6096 •
help@IRASTC.com Submit This Form Along With All Supporting Documents Specific To Your Investment

IMPORTANT INFORMATION:

This form is to be completed when looking to make an investment using funds from your retirement account.

- Complete each section of this form in it's entirety; failure to complete all required fields, may cause a delay in the processing of your investment
- Verify that the issuer, investment sponsor, and/or title company has provided Specialized Trust Company with all required supporting documentation pertaining to this investment
- As the account/plan owner, it is your sole responsibility to ensure all necessary documents are recorded with the associated county for this investment; Specialized Trust Company is not responsible and will not take any action to ensure your investment documentation is properly recorded
- Correct vesting for any investment held within your account/plan should be titled as follows: Specialized Trust Company Custodian FBO Your Name/401K Plan Name, Type Account
- If investing in an entity, an Accredited Investor Questionnaire may need to be completed for the investment sponsor; You will need to complete, sign and date this document with the appropriate information to determine if you are an accredited investor or not
- Each document that needs signed by one of our authorized signers, will need to be listed in part 5 of this form
- ** See Current Fee Schedule For Price

PART 1: ACCOUNT HOLDER INFORMATION

Name: _____ Account #: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Are we authorized to speak with your investment sponsor if corrections or additional items are needed? Yes No

PART 2: INVESTMENT INFORMATION

Investment Sponsor (if applicable): _____

Name of Investment: _____

This is how your asset will appear in your account Example: 123 Main Street

PART 3: PROCESSING OPTIONS

Standard Processing

Express Processing \$225.00 Fee

Next Day Service: \$125.00 Fee

Platinum

Specialized Black Processing

PART 4: INVESTMENT TYPE All documents must be titled to Specialized Trust Company Custodian FBO Your Name & Account Example: Specialized Trust Company Custodian FBO John Smith IRA

The following list are examples of the most common supporting documentation for purchasing one of the specific investments below. This is just a guideline to use, as each investment is unique. Therefore, you may have different supporting documentation for your investment. We should receive all pages of the supporting documents associated with your investment, including any Exhibits. Specialized Trust Company will process your investment request with unsigned documents. Investments may be processed without all that are listed or without any of the listed supporting documents outlined below. This list is not meant as a precondition of Specialized Trust Company to process or not to process an investment. Specialized Trust Company will process an investment that it deemed at the sole discretion of Specialized Trust Company to be administratively feasible with a signed direction to invest form.

<u>Investment Type</u>	<u>Supporting Documents</u>
Real Estate _____	Copies of all documents associated with the purchase of the real estate such as: Purchase Agreement, Settlement Statement/HUD, and/or Escrow Instructions
Unsecured Promissory Note _____	Copy of the Promissory Note
Secured Promissory Note _____	Copy of the Promissory Note, and a copy of the Mortgage/Deed of Trust, Security Agreement, and UCC Filing
Existing Unsecured Promissory Note _____	Copy of the existing Promissory Note and Assignment of Promissory Note
Existing Secured Promissory Note _____	Copy of the existing Promissory Note, Mortgage/Deed of Trust and Assignment of Mortgage/Deed of Trust
Limited Liability Company _____	Copy of Tax ID, Articles of Organization or Formation, Operating Agreement, and Subscription Agreement
Limited Partnerships _____	Copy of the Tax ID, Certificate of Limited Partnership, Limited Partnership Agreement
C-Corporation _____	Copy of the Tax ID, Articles of Incorporation, By-Laws, and Stock Purchase Agreement
Private Placement Memoranda ("PPM") _____	Copy of the complete Private Placement Memorandum (include copies of all the entity documents & subscription agreement)
Joint Venture _____	Copy of the Joint Venture Agreement
Other: _____	

PART 5: DOCUMENTS REQUIRING SIGNATURE

Please list each document that you need signed by Specialized Trust Company

- | | |
|----------|-----------|
| 1. _____ | 6. _____ |
| 2. _____ | 7. _____ |
| 3. _____ | 8. _____ |
| 4. _____ | 9. _____ |
| 5. _____ | 10. _____ |

PART 6: WHO ARE WE SENDING THESE DOCUMENTS TO?

Are original documents required? Yes No

Name: _____ Title: _____ Company: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Fax Number: _____ Attention to: _____ Email: _____

PART 7: HOW WOULD YOU LIKE TO PAY YOUR FEES?

Please select how you would like to pay fee(s) associated with this processing request? Deduct From My Account Charge My Credit Card

I have read and understand the Self-Directed Account Agreement regarding the credit card charge(s) and I authorize Specialized Trust Company (STC) to charge my credit card for all associated fees pertaining to this direction to invest request.

Card Type: Master Card Visa Discover American Express

Name on Card _____ Card Number _____

Billing Address For Card _____ Expiration Date _____

City/State/Zip _____ Card Security Code (CSC) _____

PART 8: FUNDING INFORMATION

PLEASE VERIFY THAT YOU HAVE SUFFICIENT SETTLED FUNDS IN YOUR ACCOUNT TO MAKE THIS INVESTMENT. INSUFFICIENT FUNDS WILL DELAY YOUR INVESTMENT
There is a 5 business day hold on all funds that are not received by STC by method of wire

Amount of Funding Requested: \$ _____

Send these funds by check *(Please Select a Check Type and Mailing Method Below)*

Make Check Payable To: _____

Mailing Address : _____ City : _____ State : _____ Zip : _____

Send this check by:

Regular Mail

Overnight Mail ** Fees Apply

Cashiers Check **Fees Apply

Send these funds by Wire *(DOMESTIC ONLY - Please Attach a Wire Instruction Sheet if Available)*

Wire Instructions

Bank Name: _____ Name on Account: _____

Account Number: _____ ABA #(ank routing number): _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Phone #: _____

PART 9: HOW WOULD YOU LIKE TO PAY YOUR FEES?

Please choose a method to pay for any service-related fees associated with this transaction

Deduct Fees from my Account

Charge the Credit Card on File *(By electing this option, you authorize Specialized Trust Company to charge your credit card for all fees associated with this transaction)*

PART 10: SIGNATURE AUTHORIZATION

My IRA account is self-directed and I alone am solely responsible for the selection, due diligence, management, review and retention of all investments in my account. I agree that Specialized Trust Company is not a "fiduciary" for my account, as the term is defined by in the Internal Revenue Code, ERISA or any other applicable federal, state or local laws. I hereby direct STC, in a passive capacity, to enact this transaction for my account, in accordance with my agreement and hereby release, indemnify, and agree to hold harmless and defend Specialized Trust Company in the event that this transaction violates any federal or state law or regulation that may results in a litigation, or otherwise results in disqualification, penalty, fine(s) or tax ramifications to me, my account, or Specialized Trust Company. I have read and received all pertinent information relating to the investment named herein.

Account Holder Signature: _____

Date: _____