SPECIALIZED TRUST COMPANY

Replacement Direction Form

IMPORTANT INFORMATION

Use this form to complete a replacement of one asset holding that is currently held within your retirement plan with another new associated investment.

- Example: Selling 123 Main Street but doing a seller carry-back promissory note with a mortgage/deed of trust.

PART 1: IRA ACCOUNT HOLDER INFORMATION

NAME *FIRST/MI/LAST*	**ACCOUNT NUMBER**

ADDRESS

CITY	**STATE**	**ZIP**

PHONE NUMBER	**EMAIL**

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

PART 2: PROCESSING OPTIONS

Express processing is available until 11:30 AM Mountain Time. Any requests received after this cutoff time will be processed the next business day. Standard processing can take up to five business days to complete. Express processing is not available if the distribution will fully close the account.

☐ Standard ☐ Platinum ☐ Specialized Black ☐ Express Processing *($225 Fee)* ☐ Next Day Processing ($125 Fee)

PART 3: FEE PAYMENT INFORMATION

Please select how you would like to pay fee(s) associated with this processing request: ☐ Charge the credit card on file ☐ Deduct from my account

☐ 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**	**EXPIRATION DATE**	**CSC**
BILLING ADDRESS	**CITY**	**STATE**	**ZIP**

Please choose a method to pay for any service-related fees associated with this transaction: ☐ Charge the credit card on file ☐ Deduct fees from my account

PART 4: CURRENT ASSET BEING REPLACED

ASSET DESCRIPTION	**ARN**

WHY ASSET IS BEING REPLACED

PART 5: REPLACEMENT INVESTMENT INFORMATION

NAME OF INVESTMENT*	**INVESTMENT SPONSOR** *IF APPLICABLE*

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

SPECIALIZED TRUST COMPANY

REPLACEMENT DIRECTION FORM

PART 6: 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.

INVESTMENT TYPE	SUPPORTING DOCUMENTS
☐ **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 Private**	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 7: 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 8: DOCUMENT RECIPIENT

Are original documents required? ☐ **Yes** ☐ **No**

NAME *FIRST/MI/LAST*	**TITLE**	**COMPANY**	
MAILING ADDRESS	**CITY**	**STATE**	**ZIP**
ATTENTION TO	**EMAIL**	**FAX NUMBER**	

PART 9: NEW ASSET VALUE REPLACEMENT INVESTMENT

NEW ASSET VALUE

$

PART 10: 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 funds that are received by check.

AMOUNT OF FUNDING REQUESTED

$

☐ **Send these funds by check** *PLEASE SELECT A CHECK TYPE AND MAILING METHOD BELOW*

CHECK INSTRUCTIONS

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

RECEIVING BANK NAME	ABA# (BANK ROUTING NUMBER)

BENEFICIARY NAME ON ACCOUNT	BENEFICIARY ACCOUNT NUMBER	CONTACT PHONE NUMBER

BENEFICIARY ADDRESS

CITY **REQUIRED*	STATE	ZIP	COUNTRY **REQUIRED*

IMPORTANT: The address listed under "Beneficiary Address" must be the beneficiary's personal or business address, not the receiving bank's address.

PART 11: SIGNATURE AUTHORIZATION

IMPORTANT

PLEASE READ BEFORE SIGNING.

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