



# Qualified Transfer or Rollover Request

Issued by American National Insurance Company  
One Moody Plaza, Galveston, TX 77550-7999



*Complete this form for Qualified Accounts Only.*

## 1. FUNDS COMING FROM:

### CHECK ONE:

**NEW SALE, APPLICATION ATTACHED** \_\_\_\_\_

**ADDITIONAL DEPOSIT TO EXISTING POLICY NUMBER** \_\_\_\_\_

TRANSFER COMPANY NAME AND ADDRESS: \_\_\_\_\_

\_\_\_\_\_

TRANSFER COMPANY PHONE NUMBER: \_\_\_\_\_

NAME OF INSURED/ANNUITANT\*: \_\_\_\_\_ SSN: \_\_\_\_\_

NAME OF OWNER\*: \_\_\_\_\_ SSN: \_\_\_\_\_

POLICY/ACCOUNT NUMBER WITH TRANSFER COMPANY: \_\_\_\_\_

**\*ANNUITANTS AND OWNER MUST BE THE SAME\***

## 2. COMPLETE THIS SECTION FOR TRANSFER REQUESTS AND DIRECT ROLLOVER REQUESTS:

Total, Full Liquidation \$ \_\_\_\_\_

Partial, % \_\_\_\_\_ or \$ \_\_\_\_\_

Annuitization, Term: \_\_\_\_\_ Frequency of Payments: \_\_\_\_\_

Please send these funds to American National Insurance Company

Immediately

Upon Maturity \_\_\_\_/\_\_\_\_/\_\_\_\_

## 3. COMPLETE THIS SECTION FOR TRANSFER REQUESTS:

IRA/TSA Transfer into an annuity contract of the same qualification type (i.e. TSA, IRA, or both ROTH IRA)

As owner of the account or policy indicated in Section 1, I hereby request transfer of:

Tax-Sheltered Annuity (IRC Section 403(b))

ROTH I.R.A. or Annuity (IRC Section 408)

Individual Retirement Account or Annuity (IRC Section 408)

SEP IRA

Governmental 457 Deferred Compensation Plan

By signing below, I authorize the transfer of the IRA assets in the manner described above and certify that all of the information provided by me is correct and may be relied upon by the Trustee or Custodian. I understand that I am responsible for determining my eligibility to transfer within the limits set forth by tax laws, related regulations, and plan agreements. I assume responsibility for any tax consequences or penalties that may apply to the transfer of my assets.

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Agent's Signature

\_\_\_\_\_  
Date



#### 4. COMPLETE THIS SECTION FOR DIRECT ROLLOVER REQUESTS:

Direct Rollover into a Traditional IRA, 403(b) Plan, 457(b) Plan, or other qualified plan.

As owner of the account or policy indicated in Section 1, I hereby request a direct rollover of my:

- |  |   |
|--|---|
| <input type="checkbox"/> Individual Retirement Annuity (IRC Section 408) | <input type="checkbox"/> Tax-Sheltered Annuity (IRC Section 403(b)) |
| <input type="checkbox"/> Governmental 457 Deferred Compensation Plan     | <input type="checkbox"/> Qualified Employer Plan (IRC Section 401)  |
| <input type="checkbox"/> SEP IRA   | <input type="checkbox"/> ROTH IRA                                   |

into an

- |  |   |
|--|---|
| <input type="checkbox"/> Individual Retirement Annuity (IRC Section 408) | <input type="checkbox"/> Tax-Sheltered Annuity (IRC Section 403(b)) |
| <input type="checkbox"/> Governmental 457 Deferred Compensation Plan     | <input type="checkbox"/> SEP IRA <input type="checkbox"/> ROTH IRA  |

I understand the rules and conditions applicable to direct rollovers and certify that I qualify for a direct rollover of the funds or assets listed above. Due to the important tax consequences of rolling funds over to an IRA or other qualified plan, I have been advised to see a tax advisor.

I hereby request payment from the plan designated above in the form of a direct rollover. I assume full responsibility for this direct rollover transaction and will not hold the Plan Administrator, Trustee, or Custodian of either the distributing or receiving plans liable for any adverse consequences that may result.

I hereby irrevocably designate this contribution of funds and/or property indicated above as a direct rollover contribution.

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Agent's Signature

\_\_\_\_\_  
Date

#### 5. CONTRACT STATEMENT:

- CONTRACT INCLUDED *If contract is not lost, please submit with this form.*
- CERTIFICATE OF LOST CONTRACT

I certify that the above numbered contract has been lost or destroyed and to the best of my knowledge and belief, is not in anyone's possession.

#### 6. REQUIRED MINIMUM DISTRIBUTION (RMD) INFORMATION:

If you have attained age 70½, the IRS requires annual minimum distribution from your qualified account(s). If this rollover is being made during or after the first year for which you must take a required minimum distribution, you may not roll over any distribution, which would constitute a required minimum distribution from the distributing plan.

#### 7. SPECIAL INSTRUCTIONS:

#### 8. ACCEPTANCE OF FUNDS: TO BE COMPLETED BY AMERICAN NATIONAL

This is to certify that American National Insurance Company will accept the funds to establish a qualified annuity. Please do not withhold any taxes from the amount being transferred.

##### ANNUITY SERVICES DEPARTMENT

American National Insurance Company  
P O Box 696763  
San Antonio Tx 78269  
1-800-252-9546

*If shipping via overnight service:*

American National Insurance Company  
Annuity Service Dept  
4500 Lockhill-Selma Road  
San Antonio Tx 78249

##### VARIABLE CONTRACTS DEPARTMENT

American National Insurance Company  
P O Box 696893  
San Antonio Tx 78269  
1-800-306-2959

*If shipping via overnight service:*

American National Insurance Company  
Variable Contracts Dept  
4500 Lockhill-Selma Road  
San Antonio Tx 78249

##### LIFE NEW BUSINESS

American National Insurance Company  
P.O. Box 696700  
San Antonio Tx 78269  
1-800-672-9960

*If shipping via overnight service:*

American National Insurance Company  
Life New Business  
4500 Lockhill-Selma Road  
San Antonio Tx 78249

#### PLEASE MAKE CHECK PAYABLE TO: AMERICAN NATIONAL

By \_\_\_\_\_  
(Signature/Title)

Date \_\_\_\_\_



## DEFINITIONS

**QUALIFIED RETIREMENT PLANS** – Tax-qualified retirement plans may include pension, profit-sharing plan, 401(k), 403(b) Tax Sheltered Annuity (TSA), Simplified Employee Pension (SEP) Plan, Keogh, Traditional or Roth Individual Retirement Account (IRA).

**TRUSTEE-TO-TRUSTEE/DIRECT ROLLOVER TRANSFERS** – The TRUSTEE-TO-TRUSTEE transfer is the **transfer** of funds from one Qualified Retirement Plan to another Qualified Retirement Plan. A DIRECT ROLLOVER is the movement of funds from an Employer's Qualified Retirement Plan directly to an IRA with a new trustee. In both instances, the plan participant does not take actual or constructive receipt of the funds, and the check is made payable and sent to the new trustee.

Trustee-to-trustee transfers are non-reportable events. Direct rollovers are reported to the IRS by the employee plan trustee and coded as a direct rollover. Both the trustee-to-trustee transfers and the direct rollovers are different than 60-day rollovers in that the IRS allows more than one transfer/direct rollover within a year. Direct rollovers are not subject to mandatory tax withholding.

NOTE – If a lump-sum distribution of funds is taken from a tax-qualified employee retirement benefit plan and the plan participant does not choose to use a direct rollover, the employer could be required to withhold 20 percent (20%) for taxes. For this reason, direct rollovers are the preferred method of moving tax-qualified employee retirement benefit plan funds.

**60-DAY ROLLOVERS** – A tax-qualified 60-day rollover is the tax-free transfer of funds from one Qualified Retirement Plan to another Qualified Retirement Plan with the participant taking actual or constructive receipt of the funds. The check is made payable to the plan participant. The plan participant has 60 days to deposit these funds into another Qualified Retirement Plan or the distribution will be taxable. Plan participants can make one 60-day rollover of funds within a 12-month period. A tax-qualified 60-day rollover from a tax-qualified plan could be subject to mandatory tax withholding by the plan.

*Policy may be referred to as "contract" or "certificate" in some states.*