



QUEST TRUST
C O M P A N Y

Disposition of Asset (Full or Partial)

Quest Trust Company
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Houston, TX 77084
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A. ACCOUNT HOLDER INFORMATION

Name:	Account Number:
Account Type:	
<input type="checkbox"/> Traditional IRA <input type="checkbox"/> Roth IRA <input type="checkbox"/> SEP IRA <input type="checkbox"/> SIMPLE IRA <input type="checkbox"/> HSA <input type="checkbox"/> ESA	

B. INVESTMENT DETAILS

Asset Name/Description:	
Will there be a replacement asset (e.g. foreclosure or exchange): <input type="checkbox"/> Yes* <input type="checkbox"/> No	
*Please submit Asset Conversion/Exchange form instead.	

C. PAYOFF INFORMATION

<input type="checkbox"/> Full Disposition of Asset I acknowledge that Quest Trust Company will remove this asset from my account when funds are received.	
Approximate Payoff Amount:	Expected Payoff Date:
<input type="checkbox"/> Partial Disposition of Asset I acknowledge that Quest Trust company will not remove this asset, but adjust the value once funds are received.	
Approximate Payoff Amount:	Expected Payoff Date:
New Asset Value (if left blank, Quest will reduce value based on payoff amount):	Has your percentage of Ownership changed: <input type="checkbox"/> No <input type="checkbox"/> Yes, new ownership percentage is: _____ %

D. WHO IS PURCHASING THE ASSET (If applicable)

Name of Buyer:

F. AUTHORIZATION

I confirm that I am directing Quest Trust Company, the Custodian, to complete the transaction above. I understand that my account is self-directed, and I take complete responsibility for any action taken in reliance of this Disposition form to eliminate or reduce partially the value of the asset as specified above. I acknowledge that the Custodian has not provided or assumed responsibility for any tax, legal or investment advice with respect to this payoff or disposition of asset transaction, and I agree that they will not be liable for any loss sustained by me or my account which results from my instruction to eliminate or reduce the value of the asset as contemplated by this Disposition of Asset.

I understand that in processing this transaction the Custodian is only acting as my agent, and nothing will be construed as conferring fiduciary status on the Custodian. I agree to indemnify and hold harmless the Custodian from any and all claims, damages, liability, actions, costs, expenses (including reasonable attorneys' fees) and any loss to me or my account as a result of any action taken in connection with this transaction, including, without limitation, claims, damages, liability, actions and losses asserted by me.

I understand that all communication regarding this transaction must be in writing and must be signed by me or by my authorized agent on my behalf, and that no oral modification of my instructions will be valid. I understand that if this Disposition of Asset and any accompanying documents are not received as required, or, if received, are unclear in the opinion of the Custodian, the Custodian may not process this transaction until proper documentation and/or clarification is received, and the Custodian will have no liability for loss of income or value.

I understand that my account is subject to the provisions of Internal Revenue Code (IRC) §4975, which defines certain prohibited transactions. I acknowledge that the Custodian has made or will not make any determination as to whether this transaction is prohibited under §4975 or under any other federal, state or local law. I certify that this transaction will not constitute a prohibited transaction and that it complies with all applicable federal, state, and local laws, regulations and requirements.

I understand that no person at the office of the Custodian has the authority to modify any of the foregoing provisions. I certify that I have examined this Disposition of Asset form and any accompanying documents or information, and to the best of my knowledge and belief, it is all true, correct and complete.

I understand that no person at the office of the Custodian has the authority to modify any of the foregoing provisions. I certify that I have examined this Disposition of Assets and any accompanying documents or information, and to the best of my knowledge and belief, it is all true, correct and complete.

Prepared By:		
Account Holder	_____	_____
Limited Power of Attorney	Signature	Date