



PROHIBITED TRANSACTION QUESTIONNAIRE

This form is to be completed and submitted with the INVESTMENT AUTHORIZATION form.

Return by regular or overnight mail: 221 South Phillips Avenue, Suite 206, Sioux Falls, SD, 57104
Fax: 605-415-4296 | Email: investment@IRAFinancialTrust.com | For inquiries, call: 800-472-1043 or visit IRAFINANCIALTRUST.COM

A. IRA OWNER IDENTIFICATION

FULL NAME _____ PHONE NO. _____ ACCOUNT NUMBER _____

B. INVESTMENT/DESCRIPTION

Provide name or type of investment in which you wish to invest (real estate, LLC, limited partnership, business entity, etc.)

C. QUESTIONNAIRE

1. Will you be lending funds to a family member, or investing jointly with a family member who will use their personal funds in the investment?

Yes No

If yes: How are you related to the family member? (Write "self" if yourself): _____

If investing jointly, what is the percentage of ownership: _____%

2. If investing in a company, do you or any family member own any personal units/shares in the company?

Yes No

If yes: How are you related to the family member? (Write "self" if yourself): _____

What is the percentage of ownership? _____ %

3. If investing in a company, are you or any family member employed by the company?

Yes No

If yes: How are you related to the family member? (Write "self" if yourself): _____

What position is held? _____

4. Are you or any family member the main decision-maker or majority owner of the company your self-directed IRA or IRA LLC is investing in?

Yes No

If yes: How are you related to the family member? (Write "self" if yourself): _____

5. Will you or any family member be receiving any personal gain directly or indirectly as a result of your IRA investment in the company?

Yes No

If yes: How are you related to the family member? (Write "self" if yourself): _____

Please explain: _____

6. Additional comments and/or explanations:

D. SIGNATURE

IRA Owner Signature

Date (mm/dd/yy)