

ACCOUNT TRANSFER FORM

TO TRANSFER YOUR EXISTING ACCOUNT TO TD AMERITRADE

Account #	
Advisor Code	
Case #	

PLEASE ATTACH A COPY OF YOUR LATEST STATEMENT.

	Social Security Number/Tax ID:			Clearing Number: 0400		
				0188		
☐ Individual (Non-Qualified)	☐ Personal Trust	☐ Limited Liability Company	☐ Roth IRA	☐ Qualified Retirement P Employer Plan Type: _		
☐ Joint	☐ Estate	☐ Partnership/Investment Club	☐ SEP IRA	☐ Simple IRA		
☐ UTMA/UGMA	☐ Corporate	☐ Traditional IRA/Rollover IRA	☐ Coverdell ESA	☐ Beneficiary IRA		
☐ Other:						
INFORMATION	ON THE ACCOU	UNT YOU ARE TRANSFER	RING FROM	<u> </u>	<u> </u>	
Account Title/Registr	ration as shown on your s	statement:	Account Number:			
Name of Delivering F	-irm:					
Physical Address of	Firm (no PO BOX):		Telephone Number	(required):		
☐ Individual (Non-Qualified)	☐ Personal Trust	☐ Limited Liability Company	☐ Roth IRA	☐ Qualified Retirement P Employer Plan Type: _		
□ Joint	☐ Estate	☐ Partnership/Investment Club	☐ SEP IRA	☐ Simple IRA Has SIMPLE IRA been ☐ Yes ☐ No	n funded for at least two years	
☐ UTMA/UGMA	☐ Corporate	☐ Traditional IRA/Rollover IRA	☐ Coverdell ESA	☐ Beneficiary IRA		
☐ Other:						
LIST THE ASS	ETS YOU WANT	TO TRANSEER				
or partial transfer Please note – Th submitting the tra If transferring in Agreement from □ Full Transfer –	r. For partial transfer ne ACAT system doe ansfer request. Most n Alternative Invest n your Advisor, the - To transfer entire a	Brokerage Firm, Bank, Insurars, list descriptions of assets and es not allow for liquidation request banks, insurancel annuity, and the terms of which will apply to obaccount, check box and ten to the Signature Section.	d shares. Unless oth ests. To place trades trust companies requ of the Transfer In O our custody of you ☐ Partial Transfer	nerwise indicated, TD Ame s, please contact your cur uire original wet-ink signa Only Alternative Investme	eritrade will transfer in ful rrent custodian prior to ture mailed to TD Ameriti ent Client Custody ts. No signature is requi	
	ription of Asset al transfers only)	Quantity (Indicate # of shares or "ALL"		cription of Asset rtial transfers only)	Quantity (Indicate # of shares or "A	
			1			
			\dashv \mid ——		+	

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Annuity/Life Insurance Policy: I have an annuity or life insurance policy I wish to liquidate and have the proceeds sent to TD Ameritrade. Please choose one option:				
\square Please redeem and terminate entire contract or policy on my behalf. I understand that penalties may apply.				
☐ Please redeem and terminate entire contract or policy on my behalf. The entire contract or policy is penalty-free.				
☐ Please redeem only the penalty-free amount of \$				
☐ Please withdraw a partial amount of \$ The entire contract or policy is penalty-free.				
Certificates of Deposit (CDs):				
☐ Redeem my CD immediately. I understand that penalties may apply for any withdrawals prior to maturity.				
☐ Redeem my CD at maturity. Maturity date: Submit request at least 21 days prior to maturity. Please advise your bank not to roll over the CD to a new term.				
Dividend Reinvestment Plan:				
☐ I am transferring positions in Book Entry form and liquidating accumulated fractional shares.				
B. Transfer from a Mutual Fund company – Unless otherwise indicated, TD Ameritrade will transfer all shares in kind and reinvest your dividends and capital gains. I acknowledge that ineligible proprietary mutual funds and all no-load money market funds cannot be transferred in kind and must be liquidated by the mutual fund company.				
Fund Name or Symbol	Fund Account Number	Quantity (Indicate # of shares or "All")	Handling (Check one)	Credit Gains and Dividends as (Check one if transferring shares)
			☐ Transfer my shares ☐ Sell my shares, transfer cash	☐ Reinvested shares ☐ Cash
			☐ Transfer my shares ☐ Sell my shares, transfer cash	☐ Reinvested shares ☐ Cash
			☐ Transfer my shares ☐ Sell my shares, transfer cash	☐ Reinvested shares ☐ Cash
			☐ Transfer my shares ☐ Sell my shares, transfer cash	☐ Reinvested shares ☐ Cash
			☐ Transfer my shares ☐ Sell my shares, transfer cash	☐ Reinvested shares ☐ Cash
For additional mutual funds, see attached list.				
To transfer Money Markets, please indicate the Money Market name or symbol if available:		Liquidate Money Market:	☐ Only: \$	

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of to the account at TD to the account at TD	
(=g	(TD Ameritrade Account Titlel Registration)
Account Owner's Signature:	Date:
Account Co-Owner's Signature:	Date:
When transferring from a joint account at a contra firm to an individual acc must sign section 4. If the party losing ownership does not have an accou signed by the party losing ownership of the assets. If the discrepancy is a of the legal document such as a marriage certificate, divorce decree, etc.	unt at TD Ameritrade, please attach a notarized letter of authoriza a result of a name change for an account owner, please provide a Further documentation may be required, depending on the situat
SIGNATURE(S): PLEASE READ AND SIGN THIS SECTION (A (If this account is a qualified retirement account, I have amended the applications of the successor custodian.	•
Unless otherwise indicated in the instructions above, please transfer that to the extent any assets in my account are not readily transferable, wi time frames required by applicable regulations.	
Unless otherwise indicated in the instructions above, I authorize you to liqui- are part of my account and transfer the resulting credit balance to TD Amer you from the credit balance in my account. If my account does not contain a to satisfy any outstanding fees due you, I authorize you to liquidate the asse- certificates or other instruments in my account are in your physical possess affixing any necessary tax waivers, to enable the successor custodian to tra by me. I understand that upon receiving a copy of this transfer instruction, y	ritrade Clearing, Inc. I authorize you to deduct any outstanding fees a credit balance, or if the credit balance in the account is insufficien ets in my account to the extent necessary to satisfy that obligation. sion, I instruct you to transfer them in good deliverable form, including ansfer them in its name for the purpose of sale, when and as directed
Account Owner's Printed Name:	
Account Owner's Signature:	Date:
Account Owner's Signature:Account Co-Owner's Printed Name (if necessary):	Date:
Account Owner's Signature: Account Co-Owner's Printed Name (if necessary): Account Co-Owner's Signature (if necessary):	Date: Date:
Account Owner's Signature: Account Co-Owner's Printed Name (if necessary): Account Co-Owner's Signature (if necessary): Account Co-Owner's Printed Name (if necessary):	Date: Date:
Account Owner's Printed Name: Account Owner's Signature: Account Co-Owner's Printed Name (if necessary): Account Co-Owner's Signature (if necessary): Account Co-Owner's Printed Name (if necessary): Account Co-Owner's Signature (if necessary): Plan Administrator Signature (optional):	Date:

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FOR TD AMERITRADE USE ONLY:

Receiving Firm Information

Clearing Firm: TD Ameritrade Clearing, Inc.

Tax ID Number: 47-0533629

Name and Address: TD Ameritrade, Inc.

Attn: Transfer of Accounts Department

200 S 108th Ave Omaha, NE 68154

All deliveries MUST include client name and TD Ameritrade, Inc. ("TD Ameritrade") account number.

All deliveries MUST include client name	and TD Ameritrade, Inc. ("TD Ameritrade") acc	count number.	
Depository Trust Company	DTC # 0188		
Physical Delivery of Securities	TD Ameritrade Clearing, Inc. FBO Client Name and Account Number PO Box 2226 Omaha, NE 68103-2226 200 S 108th Ave Omaha, NE 68154-2631		
Book-Entry GNMA Securities	PTC Instructions are: BKNYCATP		
Federal Book Entry (for example, Treasury Notes)	BK of NYC/Ameritrade ABA #021000018		
Fed Wired Monies	If your financial institution is located in the United States, wire to: Wells Fargo Bank, NA 420 Montgomery Street San Francisco, CA 94104 ABA transit routing # 121000248 For credit to: TD Ameritrade Clearing, Inc. Account # 4123214561 *For benefit of: Your nine-digit TD Ameritrade account number Your name Your address * Required for timely and accurate processing of your wire request.	If your financial institution is located outside the United States, wire to: First National Bank of Omaha 16th & Dodge Streets Omaha, NE 68102 ABA # 104000016 Swift Code / BIC: FNBOUS44XXX (If your bank requires it) For credit to: TD Ameritrade Clearing, Inc. Account # 16424641 *For benefit of: Your nine-digit TD Ameritrade account number Your name Your address *Required for timely and accurate processing of your wire request.	
	Contact TD Ameritrade, and not the ba	anks, with questions about wire transfers.	
Forward Checks	TD Ameritrade Clearing, Inc. FBO Client Name and Account Number PO BOX 650572 Dallas, TX 75265-0572 7801 Mesquite Bend Drive, Suite 112 Irving, TX 75063-6043		
Mutual Fund Registration	TD Ameritrade, Inc. Tax ID Number: 47-0533629 FBO Client's Name and Account Number PO Box 2226 Omaha, NE 68103-2226 Broker/Dealer: TD Ameritrade, Inc. 200 S 108th Ave Omaha, NE 68154-2631		
Options	Options Clearing Corporation: OCC #0777		
Cost Basis Information (**Required**) TD Ameritrade is a CBRS Participant	Mailing Address (for Transfer Statements at TD Ameritrade PO Box 2209 Omaha, NE 68103-2209 Or Fax Number: 1-866-468-6268 Please include the client's name and TD Am	nd general questions) neritrade account number in all correspondence.	



Instructions to transfer securities, mutual funds, or other assets to your TD Ameritrade Institutional account:

- Complete Sections 1-5 of the attached Transfer Form. For new accounts, a new account application must also be completed.
- Section 1 TD Ameritrade Institutional Account Information complete your TD Ameritrade account registration information.
- Section 2 Delivering Firm Information complete Delivering Firm's account registration information.
- Section 3 Transfer details; see below for requirements. Depending on where the assets are coming in from, please complete section 3A or 3B.

• Section 3A - Brokerage Firm Transfer

- For full account transfers, complete **Section 3A**, then the Discrepancies of Account Name and Type **Section 4** (if applicable) and sign in **Section 5**.
- For partial account transfers, complete **Section 3A**, list description of asset, number of shares or "all," then the Discrepancies of Account Name and Type **Section 4** (if applicable) and sign in **Section 5**.
- If you're transferring part of your account, list only the assets you want transferred to TD Ameritrade in section.

Brokerage Firm, Bank, Insurance/Annuity Co., Trust Co., or Transfer Agent

- To transfer a Money Market Account, please complete this section.
- To transfer the proceeds of a maturing CD, initiate your transfer at least two to three weeks before the maturity date.
- To transfer an Annuity or Life Insurance Policy, please check the appropriate box.
- To transfer shares in book entry form, usually associated with a Dividend Reinvestment Plan, check the appropriate box.

Please note: fractional shares will be liquidated and transferred as cash.

Section 3B – Mutual Fund Company Transfer

- For full transfers indicate all and mark transfer shares "in-kind" or liquidate and send proceeds.
- For partial transfers list individual fund name, number of shares, transfer in-kind, or liquidate and send proceeds.
- Call TD Ameritrade Institutional at 800-431-3500 to make sure the mutual fund is transferable to TD Ameritrade. Over 13,000 funds are available.
- Send a separate Transfer Form for each mutual fund company (for example, Vanguard, Fidelity, Berger, etc.) from which you're transferring. Photocopy our form if necessary or call for additional forms.
- Section 4 Discrepancies of Account type and name, if applicable. Please note that not all carrying firms will accept this section to allow a transfer between unlike titles. The ultimate discretion to allow a transfer between unlike titles lies with the carrying custodian.
- Section 5 Signatures all parties listed on the account registration information must sign. Please verify that the Social Security Number and the title of the account at TD Ameritrade are exactly the same as the account at the other institution.
- Section 6 Letter of Acceptance to be completed by TD Ameritrade if needed.

IMPORTANT

- Please attach a COPY of the most recent statement from the institution you are transferring from. The statement should be from within the past six months to best display the most accurate holdings. Please note the statement is used to process your request so an accurate statement allows for best results.
- · Do not use this form to transfer between TD Ameritrade accounts.
- Roth IRA In order to convert your Traditional IRA at another firm to a Roth IRA at TD Ameritrade, please convert to the Roth IRA with your existing custodian and then complete a transfer to a Roth IRA at TD Ameritrade.

IF YOU HAVE ANY QUESTIONS, PLEASE Contact your advisor.

Need more forms? Photocopy this form, call us, or visit our website at advisorclient.com for additional forms.

Mailing Address: **TD Ameritrade Institutional** PO BOX 650567 Dallas, TX 75265-0567

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Investment Products: Not FDIC Insured * No Bank Guarantee * May Lose Value