



Account Number \_\_\_\_\_

Rep ID \_\_\_\_\_ Alternate Branch \_\_\_\_\_

**ACCOUNT TRANSFER FORM**

**BROKER CHANGE ONLY (OUTSIDE TRUSTEES)**

Receiving Firm Clearing Number 0235	Carrying Firm Clearing Number
SSN/EIN	Carrying Firm Account Number
Account Title	Carrying Firm Name

Account Type (check one) \*Note: A Direct Rollover is a distribution which is reportable to the IRS.

**Retail Accounts:**

- Individual     Corporate     Custodial     Other
- Joint     Estate     Trust

**Retirement Accounts:**

- IRA     Simple IRA     Roth IRA     Other (specify in title)
- Direct Rollover\*     Qualified     401(k)

**GENERAL TERMS/AGREEMENT OF YOUR ACCOUNT TRANSFER**

Unless otherwise indicated in the instructions below, please transfer all assets in my account to RBC Correspondent Services, a division of RBC Capital Markets, LLC ("RBC CM"), Member NYSE/FINRA/SIPC, without penalties. I understand that to the extent any assets in my account are not readily transferable, such assets may not be transferred within the time frames required by rules of the Financial Industry Regulatory Authority or other designated examining authority.

Unless otherwise indicated in the instructions below, I authorize you to liquidate any non-transferable proprietary money market fund assets that are part of my account and transfer the resulting credit balance to RBC CM. I authorize you to deduct any outstanding fees due you from the credit balance in my account. If my account does not contain a credit balance, or if the credit balance in the account is insufficient to satisfy any outstanding fees due you, I authorize you to liquidate the assets in my account to the extent necessary to satisfy the obligation. If certificates or other instruments in my account are in physical possession, I instruct you to transfer them in good deliverable form, including affixing any necessary tax waivers, to enable RBC CM to transfer them in its name for the purpose of sale, when and as directed by me. I understand that upon receiving a copy of this transfer instruction, you will cancel all open orders for my account on your books. I understand that you will contact me with respect to the disposition of any assets in my account that are non-transferable.

**NOTE: All Mutual Funds eligible for networking will be networked. Mutual Fund dividend and capital gains options will automatically reinvest.**

**COMPLETE ONLY FOR NON-ACAT OR PARTIAL TRANSFERS**

In accordance with applicable regulatory requirements, all eligible transfers will be completed through the automated transfer system. If this transfer is deemed eligible, the assets in this account will transfer in kind. If this transfer is deemed ineligible, the account will be manually transferred to the appropriate financial institution or broker-dealer. Please indicate the appropriate transfer options to be utilized if this account needs to be manually transferred:

Carrying Firm Address: \_\_\_\_\_

- Transfer all assets in-kind
- DRS transfer – see page 2.
- Partial in-kind transfer – indicate assets below.
- Forward CD upon Maturity, date: \_\_\_\_\_
- Liquidate CD/Annuity IMMEDIATELY and send proceeds. I am aware of and acknowledge the penalty that I will incur from early withdrawal.
- Liquidate **all** assets and send proceeds.
- Liquidate partial assets and send proceeds – indicate assets below.
- Partial liquidation prior to full transfer – indicate assets below.

**Indicate Assets**

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_

A list of additional assets may be attached to transfer form.

Please see attached delivery instructions or call RBC CM ACATS Department at (866) 506-8587, option 5 with questions.

**CUSTOMER(S) SIGNATURE(S) – JOINT ACCOUNTS REQUIRE ALL PARTIES TO SIGN**

Client Signature _____ Date _____	<b>Medallion Signature Guarantee is required for Non-ACAT or Partial Transfers.</b>
Print Name from Signature Above	
Joint Client Signature _____ Date _____	
Print Name from Signature Above	



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**SPECIAL NOTICE FOR ALL CUSTODIAL RETIREMENT ACCOUNT TRANSFERS**

**Required Minimum Distribution Notice:** I understand that if this transfer is occurring during or after the calendar year during which I attain the age of 70½, or if I am a beneficiary who is subject to a required minimum distribution ("RMD"), the required minimum amount determined under this Custodial Retirement Account is still required to be distributed. I further understand that the current Trustee/Custodian is not responsible for making this distribution prior to the transfer. I accept full responsibility for satisfying the RMD applicable to this Custodial Retirement Account by withdrawing sufficient amounts prior to the deadline for receiving minimum distributions for the calendar year of the transfer.

If this transfer leaves the transferor account in one year but does not reach my RBC CM Custodial retirement account until the following year, I understand that this will be an "outstanding transfer" as of December 31st. RBC CM, as Custodian, must "deem" that the transfer was received as of the prior December 31st for determining any RMD from the RBC CM Custodial Retirement Account for the year that the transfer was received. I will inform RBC CM of any such outstanding transfer.

**To the prior Trustee/Custodian:** RBC CM agrees to serve as the successor Custodian for the account of the above-named client, and as Custodian, we agree to accept the transfer of assets to this account. Please be advised that the new account name will read **RBC Capital Markets, LLC as Custodian for the above-named client. Custodian Tax ID #41-1416330.**

Successor Custodian Authorized Signature:

**DIRECT REGISTRATION SYSTEM (DRS) TRANSFER INSTRUCTIONS – MOVING SHARES FROM A TRANSFER AGENT**

Please check one. If no selection is made, the default will be A.

- Move all shares and sell fractions (A).
- Move all shares, sell fractions, and close account (T).
- Move all shares--keep fractions at the Agent (P).
- Move partial shares; number of shares to be transferred (required): \_\_\_\_\_.

**A copy of your most recent statement is necessary for this form to be processed.**



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**RBC CAPITAL MARKETS, LLC DELIVERY INSTRUCTIONS**

**RECEIVING FIRM INFORMATION**

**NAME AND ADDRESS:** RBC Capital Markets, LLC  
510 Marquette Ave. South  
Minneapolis, MN 55402-1106

Tax ID: 41-1416330  
Phone: (612) 607-8229  
Fax: (612) 607-8224

*Delivery instructions must include client's name and RBC CM account number*

<b>DTC ELIGIBLE SECURITIES</b>	<b>#0235</b>
<b>Physical Checks:</b>	RBC Capital Markets, LLC Treasury Lock Box For the account of: _____ SD 12-1190 P.O. Box 86 Minneapolis, MN 55486-1190
<b>Physical Delivery:</b>	RBC Capital Markets, LLC For the account of: _____ 510 Marquette Avenue South, Attn: M09 – Security Receipts Minneapolis, MN 55402  Through the House Federal Funds Envelope Y - # 235/NSCC's New York Facility NSCC/New York Window Attn: Carl 55 Water Street 3rd Floor - Plaza Level RBC Capital Markets, LLC
<b>Euroclear Securities:</b>	Bank of New York Euroclear 25827 For RBC Capital Markets, LLC account: _____
<b>Foreign Securities:</b>	Merrill Lynch Account: 64U-80235 For RBC Capital Markets, LLC account: _____
<b>Commercial Paper, Bankers Acceptance:</b>	Bank of New York Acct: DSP 1 Wall Street, 3rd Floor Window B - Securities Processing New York, NY 10015
<b>GNMA Book Entry(PTC):</b>	BNDRG, Further credit the account of: _____
<b>Government Wireable:</b>	Bk of NYC/DSP, ABA Number: 021000018 Further credit the account of: _____
<b>Wired Funds:</b>	U.S. Bank, ABA 091000022 Account Number 160230097208/RBC Capital Markets, LLC Further credit the account of: _____