

Customer Account Transfer Form

Use this form to authorize the transfer of securities and/or funds from another financial institution (brokerage firm, bank, insurance/annuity, credit union, transfer agent, or mutual fund company) into a J.P. Morgan Clearing Corp. (JPMCC) brokerage account.

- **ACATs** : FAX COMPLETED FORM AND STATEMENT TO: 917-464-6793 (Originals are NOT required to be mailed to J.P. Morgan)
- **NON-ACATs & Direct Registration System [DRS] Transfers**: MAIL ORIGINAL COMPLETED FORM WITH STATEMENT TO: J.P. Morgan (IB Operations), 3 Metrotech Center, 3rd Floor, ACATs Department (NY1- H030), Brooklyn, NY 11245-0001

1	Receiving Firm Information – JPMCC Brokerage Account
0352	
JPMCC Account Number	JPMCC Clearing No.
Account Holder Name/Account Title	
Primary Account Holder Social Security or Tax ID Number	
Secondary Account Holder Social Security Number (if applicable)	
Registration Type (select one below): <input type="radio"/> Individual <input type="radio"/> Joint <input type="radio"/> Trust <input type="radio"/> Traditional IRA <input type="radio"/> Roth IRA <input type="radio"/> Profit Sharing Plan <input type="radio"/> Money Purchase Plan <input type="radio"/> Other: _____	

2	Delivering Firm Information
Delivering Firm Account Number	
Delivering Firm Clearing No.	
Account Holder Name/Account Title (as it appears on the statement)	
Delivering Firm Name	
Delivering Firm Address	
Registration Type (select one below): <input type="radio"/> Individual <input type="radio"/> Joint <input type="radio"/> Trust <input type="radio"/> Traditional IRA <input type="radio"/> Roth IRA <input type="radio"/> Profit Sharing Plan <input type="radio"/> Money Purchase Plan <input type="radio"/> Other: _____	

3	Transfer Type – COMPLETE ONLY ONE TYPE (A, B, C or D) A = Brokerage B = Transfer Agent C = Mutual Fund Co. D= Bank, Annuity		
A. TRANSFER FROM A BROKERAGE ACCOUNT, TRUST COMPANY OR TRANSFER AGENT	B. TRANSFER FROM A TRANSFER AGENT (DRS Transfers)	C. TRANSFER FROM A MUTUAL FUND COMPANY	
<input type="radio"/> Full: Transfer my entire account IN-KIND (including cash) - available only for eligible positions <input type="radio"/> Partial: Transfer only the securities listed below IN-KIND. Unless otherwise indicated, some nontransferable money market funds may be liquidated by delivering firm.	<input type="radio"/> Full shares only: Transfer all shares and leave fractional shares at contra firm. <input type="radio"/> Partial: Transfer only the securities listed below in-kind. Unless otherwise indicated, some nontransferable money market funds may be liquidated by delivering firm.	<input type="radio"/> Full: Transfer my entire account IN-KIND (including cash) - available only for eligible positions <input type="radio"/> Partial: Transfer only the mutual funds listed below.	
NO. OF SHARES OR "ALL"	NAME OF SECURITY	SYMBOL/ CUSIP	

Select if more than 2 assets. Attach additional signed Customer Account Transfer Forms, if necessary.

D. TRANSFER FROM A BANK, INSURANCE COMPANY/ANNUITY OR CREDIT UNION - SUBMIT ONE TRANSFER FORM PER ACCOUNT OR CD BEING TRANSFERRED
<input type="radio"/> Transfer all cash in my account. <input type="radio"/> Transfer as cash only: \$ _____ <input type="radio"/> Liquidate annuity and transfer immediately: \$ _____
<input type="radio"/> Transfer CD proceeds at maturity date. (Do not submit this form if maturity date is more than 60 days in the future): ____/____/____
<input type="radio"/> Liquidate CD and transfer proceeds immediately. I acknowledge that I may incur tax and other penalties for early withdrawal.

4 Account Holder Signature(s): MANDATORY FOR ALL TRANSFERS

By signing below, I/we agree to read and be bound by the terms and conditions printed on this document. If the account is a retirement account, I hereby certify that the retirement account is eligible to be transferred to the account I have established with the Successor Custodian named herein. If this is a Profit Sharing or Money Purchase Pension Plan transfer, I certify that none of the amount to be transferred will include the required minimum distribution for the current year.

Further, I/we agree that J.P. Morgan Clearing Corp. ("JPMCC") does not accept and will not act as Custodian/Trustee of and for any assets and/or positions which are not actually transferred to JPMCC and specifically does not approve any notation on the books and records of any entity, including but not limited to any mutual fund company, that indicates, implies and/or states that JPMCC is the Custodian/Trustee of any assets held away from JPMCC.

I/We understand that to the extent any assets in my/our account are not readily transferable, with or without penalties, such assets may not be transferred within the time frames required by FINRA Rule 11870 or other designated examining authority. Unless otherwise indicated in Section 3 of this form, I/we authorize you to liquidate any nontransferable proprietary or nonproprietary money market fund assets that are part of my/our account and transfer the resulting credit balance to the successor Custodian. I/We understand that if I/we choose a method of disposition of such assets other than liquidation and transfer, I/we may become liable for payment of taxes and penalties with respect to such assets. I/We also understand that I/we will be notified in writing by the delivering firm, and/or by the receiving firm with respect to the disposition of any other assets in my/our account that are nontransferable. I/We authorize you to deduct any outstanding fees due you from the credit balance in my/our account. If my/our 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/we authorize you to liquidate the assets in my/our account to the extent necessary to satisfy any outstanding fees due you. If certificates or other instruments in my/our account are in your physical possession, I/we instruct you to transfer them in good deliverable form, including affixing any necessary tax waivers, to enable JPMCC to transfer them in its name for the purpose of sale, when and as directed by me/us. Upon receiving a copy of this transfer instruction, the delivering organization will cancel all open orders for my/our account on its books. I/We affirm that I/we have destroyed or returned to you credit/debit cards and/or unused checks issued to me/us, if any, in connection with the account I/we have designated for transfer.

Age 70-1/2 Restrictions - The following restrictions apply to certain retirement account transfers.

If I am over 70-1/2 and am using this form to effect a direct rollover, I attest that none of the amount to be transferred will include the required minimum distribution for the current year pursuant to Section 401(a)(9) of the Internal Revenue Code.

X

 Account Holder Signature Date

X

 Account Holder Signature (if applicable) Date

IRA, Employer Sponsored Retirement Plan or Coverdell ESA Account Transfer Custodial Acceptance

TO THE PRIOR CUSTODIAN/TRUSTEE: J.P. Morgan Clearing Corp, hereby accepts its appointment as successor Custodian for the IRA, Employer Sponsored Retirement Plan or Coverdell ESA account as indicated on this transfer form. The receiving amount is maintained under Internal Revenue Code Section 408, 401 or 530, as applicable.

X

 Successor Custodian Signature Date

Profit Sharing/Money Purchase Pension Plan Administrator Release and Authorization

Authorization for Transfer of Profit Sharing Plan or Money Purchase Pension Plan. As Plan Administrator, I am authorizing the transfer of the aforementioned Profit Sharing Plan or Money Purchase Pension Plan account to the corresponding participant account under my plan at J.P. Morgan Clearing Corp. as Custodian.

X

 Plan Administrator Signature Date

Name of Registered Representative: _____ Branch: _____ RR Number: _____ Telephone Number: _____