

**GENERAL INSTRUCTIONS**

If your investment firm and delivering firm are ACATS eligible, you must submit the transfer on an ACATS form. This form should only be completed in situations where the account or an asset(s) is not eligible to be transferred via ACATS. Please check with your investment firm's operations department for procedures on transferring the account via ACATS. A copy of the most recent account statement must be attached from your current trustee/custodian. Your request cannot be processed without this information.

**1 ACCOUNT INFORMATION**
**Applicant Information**

ACCOUNT HOLDER NAME		SOCIAL SECURITY NUMBER	
MAILING ADDRESS	CITY	STATE	ZIP CODE
EMAIL ADDRESS	DAYTIME PHONE NUMBER	EVENING PHONE NUMBER	

**Receiving Investment Firm Information (To be completed by Investment Representative)**

FIRM NAME		FIRM ACCOUNT NUMBER	
REPRESENTATIVE NAME	REPRESENTATIVE PHONE NUMBER	REPRESENTATIVE EMAIL	

**Plan Type**

- IRA   
  Roth IRA   
  SEP IRA   
  Inherited IRA   
  HSA   
  Coverdell ESA  
 Individual 401(k)   
  Profit Sharing   
  Money Purchase Pension   
  SIMPLE IRA

**Type of Transfer**

- Total   
  Partial

**2 RESIGNING TRUSTEE/CUSTODIAN and ACCOUNT INFORMATION**

TRUSTEE/CUSTODIAN NAME	ACCOUNT NUMBER	TAX ID NUMBER	
MAILING ADDRESS	CITY	STATE	ZIP CODE
CONTACT NAME	CONTACT PHONE NUMBER	CONTACT FAX NUMBER	

**Plan Type**

- IRA   
  Roth IRA   
  SEP IRA   
  Inherited IRA   
  Inherited Employer Plans   
  HSA   
  Coverdell ESA  
 MSA   
  Money Purchase Pension   
  Individual 401(k)   
  Profit Sharing   
  SIMPLE IRA  
 Defined Benefit   
  401(k)   
  403(b)(7)   
  457

**3 NOTICE TO PARTICIPANT**

All assets to be transferred must be listed below along with the account number(s) with dollar and/or share values. The investment statement(s) must also be attached to this form. If any of this information is not provided this transfer request will be returned to you. You must indicate whether the asset is to be liquidated or reregistered. It is your responsibility to verify the assets are transferred or can be liquidated.

The IRS rules require that when you reach age 70 ½, you must begin taking a payment from your retirement account(s) each year. If you do not receive your minimum payment before the deadline, the IRS may penalize you up to 50 percent of the amount of your required distribution. The amount of your minimum payment is recalculated each year based on your estimated life expectancy and account balance. If you have not taken your minimum distribution prior to this transfer you can visit our website at [www.EquityInstitutional.com](http://www.EquityInstitutional.com) and use our RMD Calculator to determine your required payment, or we can assist you in calculating your required payment.

<b>4 ASSETS</b>				
Cash/Money Market		Account Number		Amount or %
Mutual Funds				
Investment Name	Account Number	Liquidate	Reregister	Shares or %
		<input type="checkbox"/> Liquidate	<input type="checkbox"/> Reregister	
		<input type="checkbox"/> Liquidate	<input type="checkbox"/> Reregister	
		<input type="checkbox"/> Liquidate	<input type="checkbox"/> Reregister	
Limited Partnerships				
Investment Name	Account Number	Liquidate	Reregister	Shares or %
		<input type="checkbox"/> Liquidate	<input type="checkbox"/> Reregister	
		<input type="checkbox"/> Liquidate	<input type="checkbox"/> Reregister	
		<input type="checkbox"/> Liquidate	<input type="checkbox"/> Reregister	
Stocks/Bonds				
Investment Name	Account Number	Liquidate	Reregister	Shares or %
		<input type="checkbox"/> Liquidate	<input type="checkbox"/> Reregister	
		<input type="checkbox"/> Liquidate	<input type="checkbox"/> Reregister	
		<input type="checkbox"/> Liquidate	<input type="checkbox"/> Reregister	
Other Investments - (Check our website for compatible investments)				
Investment Name	Account Number	Liquidate	Reregister	Shares or %
		<input type="checkbox"/> Liquidate	<input type="checkbox"/> Reregister	
		<input type="checkbox"/> Liquidate	<input type="checkbox"/> Reregister	
		<input type="checkbox"/> Liquidate	<input type="checkbox"/> Reregister	

<b>5 SIGNATURES</b>	
<p>Please transfer the assets in my account, as identified above pursuant to the time frames established by NYSE rule 412 or similar rule of the FINRA. I authorize you to liquidate any nontransferable proprietary money market investment and transfer the proceeds to my new trustee/custodian. I authorize you to deduct any fees due to effect this transfer. If my account does not have enough cash to cover any and all fees, I authorize you to liquidate the assets in my account to the extent necessary to satisfy all fees.</p>	
ACCOUNT OWNER SIGNATURE	DATE
<p>If this account is transferring into a Qualified Plan (Money Purchase Pension, Profit Sharing Plan, or Individual 401 (k) the plan sponsor must certify the transfer/rollover is acceptable according to the plan and trust documents. By signing below, the plan sponsor is certifying that this is true and accurate.</p>	
PLAN SPONSOR SIGNATURE	DATE

Send completed form to:  
 Equity Trust Company  
 Attn: DTS  
 P. O. Box 45274  
 Westlake, OH 44145

<b>This Section To Be Completed By Equity Trust Company</b>			
Equity Trust Company hereby accepts the appointment as successor trustee on the above mentioned account and assets outlined on this form. Send checks to the address provided above; for overnight courier send to: Equity Trust Company, Attn: DTS, 1 Equity Way, Westlake, OH 44145			
AUTHORIZED SIGNATURE - EQUITY TRUST COMPANY	TAX ID	DATE OF TRUST	DATE SIGNED
	05-0552743		