

Ameriprise Financial Services, LLC 70100 Ameriprise Financial Center Minneapolis, MN 55474

# **Account Transfer and Direct Rollover**





- Return to the eForms Account Transfer workflow and complete all steps to generate a Reference Number.
- Send either this signed form with the Reference Number written in the Reference Number field, or, sign and send via the workflow.
- If submitting this form, the Reference Number must be included.



- This form should be used to transfer into Brokerage products. If the intent is to transfer in to an *Ameriprise*<sup>®</sup> Certificate, RiverSource Life Annuity or Columbia mutual fund product, use Form 200808. For transfers to non-qualified *Ameriprise*<sup>®</sup> Certificates, use Form 3057.
- Direct Rollovers: Always consult your employer or plan administrator for requirements pertaining to direct rollovers. Do not submit this form, if you are working directly with the plan administrator.
- If more than one destination account is to be requested, we will require (1) form per account, the transfers should be marked as "Partial Transfers" in Part
- If the transfer contains any Over the Counter (OTC) security positions
  consisting of 10,000 or more shares, the Security Deposit Form 402432, is
  required to determine the security's eligibility at Ameriprise. For additional
  details, please refer to Compliance Manual 9.2.11 Depositing or Transferring
  Securities.
- 529 Plans: Receiving account must be an Ameriprise Brokerage 529 account. This form is not to be used for transfers or rollovers into 529 accounts held directly at a 529 firm. To transfer or rollover into a 529 account held directly at a 529 firm, contact the firm directly for appropriate paperwork.

Account Number	
	133
Client ID	001
Reference Number ATI	

Clearing # 0756

## **Ameriprise Account Information**

Sign on Page 6

count Number	Acc	ount Registration	SSN/TIN
	133		
meriprise Ownershi	р Туре		
Non-Qualified Single	∫ Joint	Other	
Qualified			Non-Qualified - Oti
Traditional IRA	Rollover IRA	Roth IRA	
○ SEP IRA	○ Simple IRA	Other	
<b>529 Plan</b>			Qualified - Otl
Possiving sees	uint must ha an Amar	prise Brokerage 529 account.	

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# **Delivering Firm Information**



### Attach a copy of your most recent statement dated within the last 90 days.

Current account statements provide critical information for the Account Transfer department, and failure to submit a current statement may delay your transfer request.

For 529 Plans a statement or documentation issued by the distributing college savings program that shows the current principal and earnings. In the case of any direct transfer between college savings programs, the distributing program must provide the receiving program with a statement setting forth this information.



Note to Advisor: Please refer to the list of ACATS eligible firms on the *AdvisorCompass®* portal. These can be found by searching for the keywords "ACATS Eligible Firms" in the search box at the top of AdvisorCompass® portal. ACATS pertains only to brokerage accounts. Brokerage accounts are able to hold cash, equities, mutual funds, etc. If you look at the statement and the account is held with a mutual fund family (BlackRock, Oppenheimer, MFS, etc) the account will not be ACATS eligible. The appropriate box to check would be Non-Brokerage Account. If the client wishes to liquidate a CD or annuity held at a Non ACATS eligible firm, the form will need to be marked to either liquidate at maturity or prior to maturity.

Name of Delivering Firm: Provide the name of the delivering institution and include the address and contact information for the delivering firm.

Account Number: Provide the delivering account number to be transferred. A separate form should be submitted for each delivering account to be transferred unless the delivering firm is a mutual fund family. If all the accounts(s) being transferred have the same owner and registration and are currently held directly with a mutual fund family, you can submit up to four accounts on this form and additional copies of page one can be used, if necessary.

Account Registration: Provide the full name(s) of account owner(s) of the account to be transferred.

OwnershipType: Select one option only that corresponds to the account type of the account to be transferred.

**Social Security Number or TIN:** Provide the primary Social Security Number or Tax Identification Number (TIN) listed on the account to be transferred and for accounts with a Co Account holder, TTEE, Guardian, or Custodian the secondary Social Security Number or Tax Identification Number that may be associated with the account to be transferred.

**Note:** When transferring between unlike ownerships, even if all owners of delivering and receiving accounts have signed the form and checked the box authorizing a transfer between unlike ownerships, the delivering firm may still reject the transfer and require that the ownership of one of the accounts be changed before the transfer can be completed.

Primary Account Holder N		nged before the transfer can be complete	SSN/TIN
.,			
Additional Account Owne	r Name		SSN/TIN
Delivering Firm Name			
Delivering Firm Account N	Number	Delivering Firm Account Registration	
Delivering Firm Address			Delivering Firm Phone Number
Delivering Firm City			Delivering Firm State Delivering Firm ZIP code
Delivering Firm Accoun	t Type		
Non-Qualified			
Single	∫ Joint	Other	
Qualified			Non-Qualified - Other
<ul><li>Traditional IRA</li></ul>	Rollover IRA	C Roth IRA	
SEP IRA	Simple IRA	Other	
529 Plan			Qualified - Other
529 Plan			
Receiving accour	nt must be an Ameri	prise Brokerage 529 account.	
Current 529 assets a			
		asses that charge a sales load	
<ul><li>Direct sold plan -</li></ul>	<ul> <li>typically no load sh</li> </ul>	are classes	

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# **Transfer Information**



**Direct Rollovers:** Consult the former employer or plan administrator for requirements prior to submitting this to the corporate office. Many plans require their own distribution paperwork.

• A Direct Rollover is generally defined as the direct movement of assets from one eligible retirement plan (including an IRA) to another eligible retirement plan. (If both eligible retirement plans are the same type, such as 2 IRAs, then the movement may be defined as a Transfer rather than as a Direct Rollover.).

The IRA ow				they are paid directly to the new Qualified
<ul><li>A triggering</li><li>Liquidation</li><li>Liquidation</li></ul>	event must be met before a distrik requests not accepted when trans' requests accepted when transferri	oution can be made from a Qua ferring from a Brokerage Accou ng from a Non-Brokerage Acco	lified Plan. nt. (ACATS Trans unt. (Non ACATS	,
From a Brokerage	•	and the record penalty		
	s of brokerage account: Retail Bon requests not accepted. (ACATS		arately Managed	Accounts, etc.
C Full Acc		Account In Kind - Complete Ta ach individual asset in Table A must be m		ip
From a Non-Brok	erage Account			
Agents, e			nce/Annuity Comp	panies, Trust Companies, Transfer
Full Accou	unt In Kind Full Accour	nt Liquidation Oth	er - Complete Tal	ble for Ticker/Cusip, if applicable
	$\sim$		•	t in Table A must be marked "In Kind" or "Sell."
( )	,	elete Table for Ticker/Cusip, for	a specific dollar a	mount (This option is a partial transfer, for
Annuities	- 77	20	distance and distance and	aldered a Foll Assessed Headdedea
ii trie Cilent's requ	dest is to surremaer the entire Armit	and it is 100% penalty free,	triis would be con	sidered a Full Account Liquidation.
You must indicate if this	rage Account is a CD (indicate w is a full or partial transfer by choosing either rity (penalties may apply)	"Full Account Liquidation" or "Other" abov	Э.	
At maturity d	ate:	(Maturity date must be within 60 cale	ndar days of signing this	s form)
om a 529 Plan				
table.  • If transfer	ring between the same 529 plans	and the plan is offered in Ameri	rise Brokerage, s	529 Plan Rollover Investment Allocation select either 'Full Account in Kind', 'Full
	_			29 Plan Rollover Investment Allocation table.
C Full	~	ount Liquidation O the the 529 Plan Rollover	omplete Table for	able for Ticker/Cusip, if applicable Ticker/Cusip, if applicable (Each individual
	` .	nt Allocation Table) as		icker/Cusip must be marked "In Kind" or
ble for Ticker/Cu	ısip			
			Handling	Fund Account Number
Ticker/CUSIP	Asset Description	Number of Share	es (Choose One) In Kind, Sell	(Optional - Unless Transfer Type is Transf from Fund Family)
			00	
			$\circ$	
			0 0	

Ticker/CUSIP	Asset Description	Number of Shares	Handling (Choose One) In Kind, Sell	Fund Account Number (Optional - Unless Transfer Type is Transfer from Fund Family)
			$\circ$	
			0 0	
			0 0	
			0 0	
			0 0	
			0 0	
			0 0	
			0 0	
			0 0	
			0 0	
			0 0	

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Table for Cash			
Description	Amount (\$)	<b>Handling</b> (Choose One) In Kind, Sell	Fund Account Number (Optional - Unless Transfer Type is Transfer from Fund Family)
		0 0	
		0 0	
		0.0	
		0.0	
		0 0	

#### 529 Plan Rollover Investment Allocation



Certain 529 plans may offer to waive applicable sales charges in the instance of a qualifying rollover. If the funds associated with this rollover are eligible for such a program Ameriprise Financial Services, LLC will affect your investment elections in class A shares at Net Asset Value (NAV), upon receipt of funds per the instructions below.

Ticker/CUSIP	Asset Description	Percentage	As	sset Solicited
			Yes	
			○Yes	○No
			Yes	○No
			Yes	○No

No purchase of shares will occur unitl we receive the proceeds of any liquidation or transfer of existing assets. Any rounding balances will be applied to the final CUSIP listed.

# **Acknowledgements and Authorization to the Delivering Firm**



"I" refers to the primary account holder and if applicable, the co-account holder. "You" refers to the delivering firm.

- I authorize and request either: a full, partial, or other transfer, as directed in the instructions, of the assets in my Non-Qualified accounts or 529 Plan to American Enterprise Investment Services, Inc. or if a Qualified account, a full, partial, or other transfer, as directed in the instructions, of the assets in my qualified accounts to Ameriprise Trust Company and/or American Enterprise Investment Services, Inc. in its capacity as agent for Ameriprise Trust Company.
- If physical certificates or other instruments in my account are in your possession, I instruct you to transfer them in good deliverable form, including affixing any necessary tax waivers, to enable Ameriprise Trust Company or American Enterprise Investment Services, Inc. to transfer them in its name for the purpose of the sale, when and as directed by me. I understand that to the extent any assets in my account are not readily transferable, with or without penalties, such assets may not be transferred within the timeframes required by FINRA or similar rule of FINRA or other designated examining authorities.
- I understand that fractional shares will be liquidated prior to transfer. If my shares are held in a dividend reinvestment plan, the plan will cease to exist and fractional shares will be liquidated.
- I authorize you to liquidate any nontransferable proprietary money market fund assets that are part of my account and transfer the resulting credit balance, unless otherwise indicated in the instructions attached.
- I understand that upon receiving a copy of a full transfer instruction, you will cancel open orders and may restrict new orders until the transfer is
  complete. I affirm that I have destroyed or returned to you any credit/debit cards and/or unused checks issued to me in connection with the
  account I have designated for transfer. I understand that a full transfer will discontinue all banking features on my delivering account and that any
  outstanding activity may not clear. I understand that dividend options may need to be re-established upon receipt of my assets at Ameriprise
  Financial.
- 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 that obligation. I understand that you may charge an exit fee and that if my account does not contain sufficient cash to cover that fee, my account will transfer to American Enterprise Investment Services, Inc. with a debit balance.

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## W-9 TIN Certification

W-9 TIN Certification		
Select appropriate federal tax classification (required - see	IRS F	Form W-9 for additional instructions):
○ Individual/Sole proprietor or Single Member LLC	$\bigcirc$	Partnership
Corporation C-Corporation S-Corporation Limited Liability Company (LLC) C-Corporation S-Corporation Partnership Check here if owner is an Exempt Payee and supple exemption code. (Exemption codes apply to entities, not to the list of exempt payee codes on Form W-9 at IRS	not to i	Trust  Revocable (Optional Additional Trust Details) Irrevocable (Optional Additional Trust Details) Irrevocable Grantor (Optional Additional Trust Details)  Estate Other  appropriate ndividuals). Refer Exempt Payee code:
, , ,	ou hold	for accounts maintained outside of the United States at foreign financial d in the United States, no code is required and item #4 below does not apply.
Under penalties of perjury, I certify that:  1. The number shown on this form is my correct taxpayer identif  2. I am not subject to backup withholding because: (a) I am exer	ficatior mpt frong as a , and	n number, and om backup withholding, or (b) I have not been notified by the Internal a result of a failure to report all interest or dividends, or (c) the IRS has
( ) ( ) (	ou are	e currently subject to backup withholding because you have failed to
For cancellation of debt, contributions to an individual retirement are not required to sign the certification, but you must provide yo		gement (IRA) and generally, payments other than interest and dividends, you rect TIN. See the instructions on Form W-9 on IRS.gov.

## **Signatures**



- All owners/individuals with an interest in any account identified in Part 1 and/or Part 2, must sign and date below to authorize a direct rollover or transfer transaction.
- Please allow at least 30 days for receipt of assets with Non-ACATS account transfers.
- Ameriprise generally will not accept transfers of large holdings of low priced securities. You may be requested to fill out a Security Deposit
  Form for review prior to acceptance of any security subject to this policy. Ameriprise will determine in its sole and exclusive discretion
  whether or if it will accept any specific low-priced security.
- I understand that account(s) to be opened for me at Ameriprise Financial Services, LLC may be restricted until an executed application is received. I further understand that if an executed application is not received within 45 days of account opening, those restrictions will include a prohibition on new purchase transactions and the deposit or transfer in of cash or securities.
- I acknowledge receipt of and consent to all terms and conditions contained in the Ameriprise Brokerage Client Agreement and the Other Important Disclosures documents. I also acknowledge receipt of information relating to the third-party cash sweep program offered by Ameriprise Financial.
- I understand that requests to sell are dependent on the delivering firm accepting and processing this request. **Specific sale time and price cannot be guaranteed**. I understand that if I wish to sell at a specific time or price, I should consider selling directly with the delivering firm prior to transfer.
- I understand that not all delivering firms will honor written instructions to sell via transfer forms, and may require additional steps or documentation.
- I understand that any special arrangements (Dividend Reinvestment Options (DRIP), Systematic Payments, Bank Authorizations, Beneficiary
  Designations, etc.) established at the delivering firm for my account(s) may not transfer with this request, and it is my obligation to review my
  account(s) to make certain that such arrangements have been established.
- I acknowledge that this transfer request may be between unlike ownerships and I/we understand that this transfer may change the registration on the account, beneficiary designations and may affect tax reporting liabilities.
- If this transfer involves 529 Plan Rollover Investment Allocation elections, I understand that no purchase of shares in a 529 Plan will occur until the liquidation proceeds are received by American Enterprise Investment Services, Inc., and credited to the 529 Plan.
- I understand that until I or the previous firm provides to American Enterprise Investment Services, Inc. (AEIS) documents identifying the principal
  and earnings of the 529 Plan transfer or rollover, AEIS will treat the entire amount received as earnings in the account that receives the
  contribution. AEIS will request principal and earnings information from the delivering firm for any 529 Plan transfer or rollover.

Please receive my securities account from the delivering firm identified in Part 2 and remit to it the debit balance or accept the credit balance in my securities account.

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	· <del></del> -
The Internal Revenue Service does not require your consent to any provision of this docume required to avoid backup withholding.	ent other than the certifications
y signing, I authorize the parties to act on the instructions provided within this form.	
Primary Account Holder Name	
Primary Account Holder Signature	Date (MMDDYYYY)
Additional Account Owner Name	
Additional Account Owner Signature (if applicable)	Date (MMDDYYYY)
103(b) or Qualified Administrator Name	
403(b) or Qualified Administrator Signature (if applicable)	Date (MMDDYYYY)
Advisor Name	Advisor ID
er of Acceptance (Corporate Use Only)	
the prior trustee or custodian: Ameriprise Trust Company is qualified under applicable regulations alified plan assets and will deposit the assets we receive in either an IRA account, 529 Plan account tructions in Part 1, for the benefit of the individual.	nt or a qualified plan account, based on the
Direct Rollover Custodial Transfer	Reference Number
Successor Custodian Signature	Date (MMDDYYYY)

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