

# TRANSFER REQUEST

Institutional Advisor Services



Axos Advisor Services Account Number

**Section 1: Receiving Firm: Axos Advisor Services Account – Clearing Number 5981**

Account Registration at Axos Advisor Services

TIN/EIN/SSN	JOINT SSN
-------------	-----------

Account Type at Axos Advisor Services *(Select One)*

Single or Individual    
  Joint/Community Property    
  Trust    
  Corporate or Company    
  UTMA    
  UGMA  
 Traditional, Rollover or SEP IRA    
  Roth IRA    
  Beneficiary IRA    
  Beneficiary Roth IRA    
  SIMPLE IRA  
 403(b)    
 403(b) Roth    
 401(k)    
 401(k) Roth    
 457    
 Qualified Plan    
 Other, list type \_\_\_\_\_

To make a contribution to an Axos Advisor Services retirement account from an Axos Advisor Services non-retirement account (internal transfer), please indicate the effective year. If nothing is selected, we will default to a current year contribution.    
 Current Year    
 Prior Year

**Section 2: Delivering Firm: Account to be Transferred From**

Delivering Firm Name	Delivering Firm Account Number
----------------------	--------------------------------

Delivering Firm Street/PO Box Address	Account Registration at Delivering Firm
---------------------------------------	---

Delivering Firm City, State and Zip Code

Account Type at Delivering Firm *(Select One)*

Single or Individual    
  Joint/Community Property    
  Trust    
  Corporate or Company    
  UTMA    
  UGMA  
 Traditional, Rollover or SEP IRA    
  Roth IRA    
  Beneficiary IRA    
  Beneficiary Roth IRA    
  SIMPLE IRA  
 403(b)    
 403(b) Roth    
 401(k)    
 401(k) Roth    
 457    
 Qualified Plan    
 Other, list type \_\_\_\_\_

Registration Changes, *if applicable check box:*    
 All authorized parties on the existing and new account have authorized the transfer and registration change.

**Section 3: Select Transfer Type     If the delivering firm is ACATS eligible with Axos Advisor Services, the transfer will be sent ACATS (In-Kind)**

Full In-Kind    
 Full – Liquidate All (\*If firm is non-ACATS)    
 Full – Liquidate below assets, remaining assets In-Kind (\* If firm is non-ACATS)  
 Partial Cash \$ \_\_\_\_\_    
 Partial In-Kind (tickers/CUSIPS & share amounts below)    
 Partial liquidation (tickers/CUSIPS & share amounts below)

Indicate Assets, share amounts and/or maturity dates below:    
 A list of additional assets has been attached to this transfer form.  
 1. \_\_\_\_\_     2. \_\_\_\_\_     3. \_\_\_\_\_

**LIQUIDATION INSTRUCTIONS:** *(please mark all that apply)*  
 Send funds to Axos via:    
 Check    
 Wire - *If nothing is selected then a wire will be requested and fees may apply.*  
 If CDs/Annuities are to be liquidated, please do so    
 Immediately or    
 Upon Maturity date of \_\_\_\_\_  
 (If Upon Maturity is selected please provide maturity dates. I am aware of and acknowledge the penalty that I will incur from early withdrawal.)

**Section 4: Signature(s) – Clients and Authorized Parties Are Required To Sign**

By signing below I hereby certify that I have read and taken any required actions as provided in Section 6, for my IRA, if applicable.

Print Name for Signature Below	Date:	Print Name for Signature Below	Date:
--------------------------------	-------	--------------------------------	-------

Client Signature/Authorized Party	Joint Client Signature/Authorized Party
-----------------------------------	---

Medallion Signature Guarantee	Medallion Signature Guarantee
-------------------------------	-------------------------------

**Section 5: Successor Custodian Acceptance (for Axos Only)**

**To the prior Trustee/Custodian:** Axos Advisor Services 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. Be advised that the new account name will read: **Axos FBO the above-named client. Custodian Tax ID # 84-6179736.**

Axos/Successor Custodian Authorized Signature:	Date:
--	-------



# TRANSFER REQUEST

Institutional Advisor Services



**Required Minimum Distribution Notice:** I understand that if this transfer from an Individual Retirement Account 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 Individual Retirement Account 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 Individual Retirement Account by withdrawing sufficient amounts prior to the deadline for RMDs for the calendar year of the transfer.

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

**IMPORTANT:** This section is for the delivering firm use only. Axos is a member of the ACATS system. Delivering firm is authorized to wire proceeds to Axos wire or check is not selected in Section 3.

**Make Checks Payable to:**

AXOS ADVISOR SERVICES FBO (Client's Full Name)  
(Axos Advisor Services Account Number)  
P.O. Box 5158  
Englewood, CO 80155-5158

**Overnight Delivery Address:**

Axos ADVISOR SERVICES FBO (Client's Full Name)  
(Axos Advisor Services Account Number)  
7103 South Revere Parkway  
Centennial, CO 80112

**Book Entry Government Securities via Federal**

**Wire:** JPMORGAN Chase NYC/CUST

Account #: **P23000**

ABA #: 021000021

For Further Credit to: FBO (Client's Full Name)  
(Axos Advisor Services  
Account Number)

**Questions:** (303) 705-6000

**Wiring Instructions:**

UMB Bank,  
1010 Grand Blvd.  
Kansas City, MO 64106  
ABA#: 101000695  
Account #: 9872291522

For Further Credit to: FBO (Client's Full Name)  
(Axos Advisor  
Services Account  
Number)

**DTC Eligible Securities:**

DTC Participant #: **5981**

For Further Credit to: FBO (Client's Full Name)  
(Axos Advisor Services Account  
Number)

**ACH Instructions:**

JPMorgan Chase Bank  
Account #: 193526363  
ABA #: 102001017

\* Put the 6 Digit Axos Advisor Services account number in  
ACH PPD transaction field #7, a space, then the first ten  
characters of the account holder's last name.

Example: 123456 SMITH

- End Form -