



# 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*® Certificate, RiverSource Life Annuity or Columbia mutual fund product, use Form 200808. For transfers to non-qualified *Ameriprise*® 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 3.
- 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 or a Roth IRA 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.
  - Transactions from a 529 to a Roth IRA must meet certain qualification requirements and will be applied as a contribution subject to the Roth IRA contribution limits.
  - The beneficiary of the 529 account must match the owner of the Roth IRA.

Account Number	<input type="text" value="133"/>
Client ID	<input type="text" value="001"/>
Reference Number	<input type="text"/>
ATI	<input type="text"/>

Clearing # 0756

## Ameriprise Account Information

Account Number	Account Registration	SSN/TIN
<input type="text" value="133"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Ameriprise Ownership Type**

**Non-Qualified**

Single       Joint       Other

**Qualified**

Traditional IRA       Rollover IRA       Roth IRA

SEP IRA       Simple IRA       Other

**529 Plan**

529 Plan

Receiving account must be an Ameriprise Brokerage 529 account.

Sign on Page 6



### 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.*

**i** **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 Name		SSN/TIN
<input type="text"/>		<input type="text"/>
Additional Account Owner Name		SSN/TIN
<input type="text"/>		<input type="text"/>
Delivering Firm Name		
<input type="text"/>		
Delivering Firm Account Number	Delivering Firm Account Registration	
<input type="text"/>	<input type="text"/>	
Delivering Firm Address		Delivering Firm Phone Number
<input type="text"/>		<input type="text"/>
Delivering Firm City	Delivering Firm State	Delivering Firm ZIP code
<input type="text"/>	<input type="text"/>	<input type="text"/>

#### Delivering Firm Account Type

##### Ownership Type

###### Non-Qualified

- Single       Joint       Other

Non-Qualified - Other

###### Qualified

- Traditional IRA       Rollover IRA       Roth IRA  
 SEP IRA       Simple IRA       Other

Qualified - Other

###### 529 Plan

- 529 Plan

*Receiving account must be an Ameriprise Brokerage 529 or Roth IRA account.*

Current 529 assets are held in:

- Advisor sold plan - typically share classes that charge a sales load  
 Direct sold plan - typically no load share classes



### Transfer Information

- i** **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 owner or plan participant does not take constructive receipt of the proceeds. Instead, they are paid directly to the new Qualified Plan or IRA as a company to company transaction. There is no withholding requirement since the client does not touch the proceeds.
  - A triggering event must be met before a distribution can be made from a Qualified Plan.
  - Liquidation requests not accepted when transferring from a Brokerage Account. (ACATS Transfers, if eligible)
  - Liquidation requests accepted when transferring from a Non-Brokerage Account. (Non ACATS Transfers)
  - If the Client's request is to surrender the entire Annuity and it is 100% penalty free, this would be considered a Full Account Liquidation.

#### From a Brokerage Account

- i**
- **Examples of brokerage account:** Retail Brokerage, Wrap Products, Separately Managed Accounts, etc.
  - Liquidation requests not accepted. (ACATS Transfers, if eligible)

- Full Account In Kind       Partial Account In Kind - Complete Table for Ticker/Cusip

*Note: Each individual asset in Table A must be marked "In Kind."*

#### From a Non-Brokerage Account

- i**
- **Examples of non-brokerage account:** Fund Families, Banks, Life Insurance/Annuity Companies, Trust Companies, Transfer Agents, etc.
  - Liquidation requests accepted. (Non ACATS Transfers)

- Full Account In Kind       Full Account Liquidation       Other - Complete Table for Ticker/Cusip, if applicable

*Note: If an Annuity, penalties may apply.*

*Note: Each individual asset in Table A must be marked "In Kind" or "Sell."*

- The Penalty Free Amount available or complete Table for Ticker/Cusip, for a specific dollar amount (This option is a partial transfer, for Annuities only).

If the Client's request is to surrender the entire Annuity and it is 100% penalty free, this would be considered a Full Account Liquidation.

#### If this Non-Brokerage Account is a CD (indicate when the liquidation is to take place):

*You must indicate if this is a full or partial transfer by choosing either "Full Account Liquidation" or "Other" above.*

- Prior to maturity (penalties may apply)  
 At maturity date: \_\_\_\_\_

*(Maturity date must be within 60 calendar days of signing this form)*

#### From a 529 Plan to Brokerage 529 Account

- i**
- If transferring between different 529 plans, select Full Account Liquidation and complete the 529 Plan Rollover Investment Allocation table.
  - If transferring between the same 529 plan and the plan is offered in Ameriprise Brokerage, select 'Full Account in Kind'.

- Full Account In Kind       Full Account Liquidation (Complete the 529 Plan Rollover Investment Allocation Table)       Other - Complete Table for Ticker/Cusip, if applicable Complete Table for Ticker/Cusip, if applicable (Each individual asset in Table for Ticker/Cusip must be marked "In Kind" or "Sell.")

#### Table for Ticker/Cusip

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)
			<input type="radio"/> <input type="radio"/>	
			<input type="radio"/> <input type="radio"/>	
			<input type="radio"/> <input type="radio"/>	
			<input type="radio"/> <input type="radio"/>	
			<input type="radio"/> <input type="radio"/>	
			<input type="radio"/> <input type="radio"/>	
			<input type="radio"/> <input type="radio"/>	
			<input type="radio"/> <input type="radio"/>	
			<input type="radio"/> <input type="radio"/>	
			<input type="radio"/> <input type="radio"/>	
			<input type="radio"/> <input type="radio"/>	



**Table for Cash**

Description	Amount (\$)	Handling (Choose One) In Kind, Sell	Fund Account Number (Optional - Unless Transfer Type is Transfer from Fund Family)
		<input type="radio"/> <input type="radio"/>	
		<input type="radio"/> <input type="radio"/>	
		<input type="radio"/> <input type="radio"/>	
		<input type="radio"/> <input type="radio"/>	
		<input type="radio"/> <input type="radio"/>	

**From a 529 plan to Roth IRA**

These dollars will be applied as a contribution subject to Roth IRA annual contribution limits for the selected tax year designation.

**Table for Ticker/Cusip from a 529 to Roth IRA**

Ticker/CUSIP	Asset Description	Quantity ("All" or Dollar Amount)	Handling	Contribution Designation (Prior or Current Year)
			Sell	<input type="radio"/> Prior Year <input type="radio"/> Current Year
			Sell	<input type="radio"/> Prior Year <input type="radio"/> Current Year
			Sell	<input type="radio"/> Prior Year <input type="radio"/> Current Year
			Sell	<input type="radio"/> Prior Year <input type="radio"/> Current Year

**529 Plan Rollover Investment Allocation**

Only required if receiving account is a Brokerage 529.

**i** 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	Asset Solicited
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No
			<input type="radio"/> Yes <input type="radio"/> No

No purchase of shares will occur until 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.

### W-9 TIN Certification

#### W-9 TIN Certification

Select appropriate federal tax classification (required - see IRS Form W-9 for additional instructions):

- |   |   |
|---|---|
| <input type="radio"/> Individual/Sole proprietor or Single Member LLC | <input type="radio"/> Partnership   |
| <b>Corporation</b>  | <input type="radio"/> Trust   |
| <input type="radio"/> C-Corporation                                   | <input type="radio"/> Revocable (Optional Additional Trust Details)           |
| <input type="radio"/> S-Corporation                                   | <input type="radio"/> Irrevocable (Optional Additional Trust Details)         |
| <b>Limited Liability Company (LLC)</b>                                | <input type="radio"/> Irrevocable Grantor (Optional Additional Trust Details) |
| <input type="radio"/> C-Corporation                                   | <input type="radio"/> Estate  |
| <input type="radio"/> S-Corporation                                   | <input type="radio"/> Other <input type="text"/>                              |
| <input type="radio"/> Partnership                                     |   |

Check here if owner is an Exempt Payee and supply the appropriate exemption code. (Exemption codes apply to entities, not to individuals). Refer to the list of exempt payee codes on Form W-9 at IRS.gov. Exempt Payee code:

#### Foreign Account Tax Compliance Act (FATCA) Reporting

A FATCA exemption code is required for persons submitting this form for accounts maintained outside of the United States at foreign financial institutions. If you are only submitting this form for an account you hold in the United States, no code is required and item #4 below does not apply. Otherwise, submit IRS Form W-9 separately.

As used below, the word "I" refers to the applicant who is the taxpayer on the account.

#### Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number, and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below), and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Check this box if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

#### Certification Instructions:

As used below, the word "You" refers to the applicant who is the taxpayer on the account.

For cancellation of debt, contributions to an individual retirement arrangement (IRA) and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct 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.
- For 529 to Roth IRA contributions: I acknowledge that this transaction meets all requirements: including the 529 account has been maintained for at least 15 years for the beneficiary and is being contributed to a Roth IRA owned by the 529 account beneficiary. This contribution is within the Roth IRA annual contribution limits and within the lifetime limit of \$35,000. It also does not exceed the contributions (and earnings thereof) made to the 529 account prior to the five-year period ending with this transaction. Please consult your tax advisor to confirm your eligibility.

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.

**The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.**

By 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)

403(b) or Qualified Administrator Name		
403(b) or Qualified Administrator Signature (if applicable)		Date (MMDDYYYY)

Advisor Name	Advisor ID

**Letter of Acceptance (Corporate Use Only)**

To the prior trustee or custodian: Ameriprise Trust Company is qualified under applicable regulations to act as custodian of IRA, 529 Plan or qualified plan assets and will deposit the assets we receive in either an IRA account, 529 Plan account or a qualified plan account, based on the instructions in Part 1, for the benefit of the individual.

- Direct Rollover       Custodial Transfer

Reference Number

Successor Custodian Signature

Date (MMDDYYYY)