# Mutual Fund Transfer



#### ✓ Use this form to:

 Transfer assets to T. Rowe Price Mutual Funds from another institution or to transfer a T. Rowe Price SEP-IRA or SIMPLE IRA to a T. Rowe Price Traditional IRA.

#### X Do not use this form to:

- Transfer brokerage assets in kind. Use the *Brokerage Transfer* form.
- Transfer T. Rowe Price mutual fund shares in kind from another institution. Use the <u>Mutual Fund Transfer In Kind</u> form.
- Transfer into a SEP-IRA or SIMPLE IRA with T. Rowe Price. Use the *Employer-Sponsored Retirement Plan Participant Transfer-In or 403(b) Exchange-In* form.

#### Mail to:

T. Rowe Price P.O. Box 17150 Baltimore, MD 21297-1150

#### Express delivery only:

T. Rowe Price Mail Code 17150 4515 Painters Mill Road Owings Mills, MD 21117-4903

This stamp indicates a signature guarantee is required.

This paper clip indicates you may need to attach documentation.

## **Helpful Facts**

Complete a separate <u>Mutual Fund Transfer</u> form for each account type, account number, or delivering institution. Additional forms can be obtained by copying this original, visiting troweprice.com, or by calling the number on the bottom of the page.

Provide a copy of the most recent statement for the account being transferred.

List ALL names exactly as they appear on the receiving T. Rowe Price account and the account being transferred, including any trustees.

For UGMA/UTMA accounts, list the minor (Owner) first, then the custodian (Joint Owner).

Check the appropriate box for the type of account held at the delivering firm. All account owners must sign this form.

Include your resigning institution's account number(s) in Section 2 of this form to ensure your account is transferred properly. Failure to include the account number(s) will result in a delay in completing your transfer request.

If there is ANY difference in the account type between your T. Rowe Price account and the account into which you are transferring, please contact T. Rowe Price BEFORE submitting this form.

## **Pre-liquidation**

Some clearing firms, such as National Financial Services (NFS), Pershing, TD Ameritrade, JP Morgan Securities, and or LPL Financial, will NOT process written liquidation/transfer instructions. If your account clears through one of the aforementioned clearing firms, please contact your broker to convert the assets being transferred into cash.

#### **Taxable Account Transfers**

Any gains on taxable assets liquidated, may be subject to capital gains tax.

#### Fees

T. Rowe Price will not charge a fee to transfer assets. Contact your current financial institution to find out if they will charge an outgoing transfer fee.

#### For New Accounts

If you are establishing a new account, visit **troweprice.com/newaccount** to open a new account, or enclose an *IRA New Account* form or a *Mutual Fund New Account* form.

#### **Allocation Instructions for Existing Accounts**

T. Rowe Price mutual fund investment allocation instructions should be included in Section 1 of this form.

#### **Partial Liquidation**

Indicate the dollar amount or the number of shares you would like transferred for each investment.



# **Mutual Fund Transfer**

| T. Rowe Pi                                                                                                                          | rice Accoun            | t                                        |                                                                                                             |              |                                      |                        | 1                           |  |
|-------------------------------------------------------------------------------------------------------------------------------------|------------------------|------------------------------------------|-------------------------------------------------------------------------------------------------------------|--------------|--------------------------------------|------------------------|-----------------------------|--|
| Owner Name                                                                                                                          |                        | Social Security Number (SSN)             | T. Ro                                                                                                       | we Price Mut | ual Fund Name                        |                        | Allocation %                |  |
|                                                                                                                                     |                        |                                          |                                                                                                             |              |                                      |                        | %                           |  |
| Joint Owner Name (if applicable)                                                                                                    |                        | Phone                                    |                                                                                                             |              |                                      |                        | %                           |  |
|                                                                                                                                     |                        |                                          |                                                                                                             |              |                                      |                        | %                           |  |
| Inherited IRA Asset Tran                                                                                                            |                        |                                          |                                                                                                             |              |                                      |                        | %                           |  |
| Complete this section if the assets are coming from an Inherited IRA. <b>Provide deceased IRA owner's information:</b>              |                        |                                          |                                                                                                             |              |                                      |                        | %                           |  |
| Name                                                                                                                                |                        | SSN                                      |                                                                                                             |              |                                      |                        | %                           |  |
| Trains                                                                                                                              |                        |                                          |                                                                                                             |              |                                      |                        | % Tatal 100%                |  |
|                                                                                                                                     |                        |                                          | ☐ For more investme                                                                                         | ents, check  | this box and                         | attach a               | Total = 100% separate page. |  |
| 2 Transfer In                                                                                                                       | aturations.            |                                          |                                                                                                             |              |                                      |                        |                             |  |
| 2 Transfer In                                                                                                                       | ISTRUCTIONS            |                                          |                                                                                                             |              |                                      |                        |                             |  |
| Delivering Institution Name*                                                                                                        |                        | Phone                                    | <b>Check Transferring Firm Account Type</b> (Only one Taxable Account type <b>OR</b> one IRA type applies.) |              |                                      |                        |                             |  |
| Mailing Address                                                                                                                     |                        |                                          | Taxable Account  ☐ Individual ☐ Joint ☐ UGMA/UTMA                                                           |              |                                      |                        |                             |  |
|                                                                                                                                     |                        |                                          |                                                                                                             |              | ☐ Corporate                          |                        | Entity                      |  |
| City                                                                                                                                | State                  | ZIP Code                                 | IRA                                                                                                         |              |                                      |                        |                             |  |
|                                                                                                                                     |                        |                                          | ☐ Traditional IRA                                                                                           | _            | raditional Inhe                      |                        | _                           |  |
| *Not applicable if transfer is from a                                                                                               | T. Rowe Price SEP-IRA  | or SIMPLE IRA (Option D)                 | ☐ Rollover IRA ☐ SIMPLE IRA (on                                                                             | _            | Roth Inherited years since the first |                        | Roth IRA was credited)      |  |
|                                                                                                                                     |                        | STOP Required - Compl                    | lete transfer option(s) belo                                                                                | )W           |                                      |                        |                             |  |
| A: Full Liquidation—Tran                                                                                                            | nsfer From Accoun      | t(s) Listed Below                        | B: Partial Liquidati<br>Shares Listed Bo                                                                    |              | er Dollar Am                         | ount or I              | Number of                   |  |
| 1. Investment Name                                                                                                                  | Account Nu             | mber/Plan ID                             | 1. Investment Name                                                                                          | Account N    | umber/Plan ID                        | Dollar<br>Amount       | Number of<br>Shares         |  |
| 2. Investment Name Account                                                                                                          |                        | mber/Plan ID                             | 2. Investment Name                                                                                          | Account N    | umber/Plan ID                        | Dollar                 | Number of                   |  |
|                                                                                                                                     |                        |                                          |                                                                                                             |              |                                      | Amount                 | Shares                      |  |
| 3. Investment Name                                                                                                                  | Account Number/Plan ID |                                          | 3. Investment Name                                                                                          | Account N    | umber/Plan ID                        | Dollar<br>Amount       | Number of<br>Shares         |  |
| ☐ For more investments, c                                                                                                           | heck this box and a    | attach a <u>separate page</u> . <i>P</i> | ☐ For more investme                                                                                         | nts, check   | this box and a                       | l<br>attach a <u>s</u> | eparate page. Ø             |  |
| C: Certificate of Deposit                                                                                                           | t (CD)                 |                                          | D: Internal Transfer                                                                                        | From a T. I  | Rowe Price SI                        | EP-IRA o               | r SIMPLE IRA                |  |
| Only complete this section                                                                                                          |                        | t is a CD.                               | Indicate in Amount                                                                                          |              |                                      | llar Amo               | unt. Complete               |  |
| Liquidation time frame:  ☐ Immediately. I agree t                                                                                   | o pay any early wit    | hdrawal fees.                            | the allocation instru                                                                                       | ctions in Se | 1                                    |                        |                             |  |
| ☐ Upon maturity (mm/dd/yyyy)                                                                                                        |                        |                                          | 1. Investment Name                                                                                          |              | Plan ID                              |                        | Amount                      |  |
| NOTE: Liquidating a CD prior to maturity may result in an early withdrawal penalty. In order to transfer at the maturity date, this |                        |                                          | 2. Investment Name                                                                                          |              | Plan ID                              |                        | Amount                      |  |
| form must be received 15–30 days prior to maturity.                                                                                 |                        |                                          | Z. IIIVESUIITIIL IVAIIIT                                                                                    |              | ו ומוו וט                            |                        | Ainount                     |  |

3. Investment Name

Plan ID

Amount

# 3 Signatures

# ☐ Please check box if you would like T. Rowe Price to request a wire transfer. Your current institution may charge an outgoing wire fee.

- I hereby authorize this liquidation from my current financial institution to invest in my T. Rowe Price account(s) designated on this form. If I am transferring an IRA, I certify that the IRA I am transferring assets from (unless transferring a SEP-IRA or SIMPLE IRA to a Traditional IRA) is the same type of IRA account that I have designated to receive these assets. I understand that T. Rowe Price cannot serve as custodian for IRA assets held at other institutions.
- I agree to be bound by the terms of the prospectus for each
  T. Rowe Price mutual fund in which I am investing. I have the authority
  and legal capacity to purchase mutual funds and am of legal age in my
  state.
- I understand that, if I elected to have my assets wired to T. Rowe Price in accordance with the wiring instructions on this form or sent via overnight delivery, an outgoing wire fee or express delivery fee may be assessed by my current custodian.

# Account Owners Sign Below

A signature guarantee is required if the delivering institution requires it. Enclose a complete copy of your most recent statement dated within

Verify with the transferring institution that assets will be liquidated per instructions above and transferred in cash.

| Signatures and Date Required |                              |  |  |  |
|------------------------------|------------------------------|--|--|--|
| Owner/Authorized Person      | Today's Date<br>(mm/dd/yyyy) |  |  |  |
| <b>∠</b> X                   |                              |  |  |  |
| Joint Owner                  | Today's Date                 |  |  |  |
| <b>₺</b> X                   | (mm/dd/yyyy)                 |  |  |  |

## Signature Guarantee 🕹

You can obtain the Medallion signature guarantee from most banks, savings institutions, or broker-dealers. We cannot accept guarantees from notaries public or non-Medallion guarantors. The level of coverage provided by the guarantor's stamp must cover the dollar amount of the transaction or it may be rejected.

| Medallion Signature Guarantee—Place Medallion Stamp Below |  |
|-----------------------------------------------------------|--|
|                                                           |  |
|                                                           |  |
|                                                           |  |
|                                                           |  |
|                                                           |  |
|                                                           |  |
|                                                           |  |
|                                                           |  |

### Official Institutional Use Only—Letter of Acceptance/Payment Instructions

Dear Delivering Institution: Please accept this form as your authorization to immediately liquidate the assets listed in Section 2. Send the proceeds from the sale of the assets to T. Rowe Price. If this is an IRA transfer, T. Rowe Price maintains an IRA (under Internal Revenue Code Section 408 or 408A) for this individual and will deposit the transferred assets into the type of IRA checked below. If the money being transferred is from a SEP-IRA or SIMPLE IRA, T. Rowe Price will deposit the assets into a Traditional IRA. If the money being transferred is from Inherited IRA assets, T. Rowe Price will deposit the assets into an Inherited IRA or Roth Inherited IRA as instructed.

| Official T. Rowe Price Authorized Signature  Date (mm/dd/yyyy)  Title                                                                 | □ Wire proceeds to:  Receiving Bank: Bank of New York, N.A. (New York)  Receiving Bank ABA#: 021000018  Beneficiary: T. Rowe Price  Beneficiary Account: 8900624809  Originator to Beneficiary Information: |
|---------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ☐ <b>Mail proceeds to:</b> T. Rowe Price   P.O. Box 17150   Baltimore, MD 21297-1150                                                  | Owner's Name                                                                                                                                                                                                |
| Make check payable to: T. Rowe Price Trust Company TOA                                                                                | Case Number                                                                                                                                                                                                 |
| Owner's Name                                                                                                                          | ]                                                                                                                                                                                                           |
| Reference the Following Case Number on the Check                                                                                      | □ Overnight redemption proceeds to:  T. Rowe Price Mail Code 17150   4515 Painters Mill Road   Owings Mills, MD 21117-4903                                                                                  |
| Receiving account type:                                                                                                               |                                                                                                                                                                                                             |
| Taxable account         □ Individual       □ Joint       □ UGMA/UTMA         □ Trust       □ Estate       □ Corporate or Other Entity | IRA □ Traditional IRA □ Roth IRA □ Traditional Inherited IRA □ Rollover IRA □ Roth Rollover IRA □ Roth Inherited IRA                                                                                        |

