



APEX CLEARING CORPORATION CUSTOMER ACCOUNT TRANSFER FORM

Receiving Firm – Apex Clearing Corporation (“Apex Clearing”) – Clearing #0158

1. Information about your account:

Title of Your Account:	
Apex Clearing Account Number:	SSN / Tax ID:

**** Please attach a copy of your most recent statement for the account you are transferring to Apex.**

2. Information about the account you are transferring:

Title of Your Account:	
Account Number:	Name of Firm:
Address of Firm:	
City, State, ZIP	Broker Clearing No:

**** If your ApexClearing account is not the same type of account as the one you are transferring, you must complete the Letter of Authorization (Section 7) on the 2nd page of this form.**

3. Type of Transfer:

- | | |
|--|---|
| <input type="checkbox"/> Brokerage Firm Transfer (Transfer all assets in kind) | <input type="checkbox"/> Non-ACAT Transfer (Transfer all assets in kind) |
| <input type="checkbox"/> Liquidate all assets and Transfer as cash | <input type="checkbox"/> Liquidate annuity and transfer as cash |
| <input type="checkbox"/> Partial Transfer (Skip to Section 4) | <input type="checkbox"/> Liquidate Certificates of Deposit IMMEDIATELY.
(I am aware of and acknowledge the penalty for early withdrawal) |
| <input type="checkbox"/> Mutual Fund Company Transfer (Skip to Section 5) | <input type="checkbox"/> Transfer proceeds of Certificates of Deposit AT MATURITY (Submit transfer request 30 days prior to maturity). |

4. Partial Transfer: (Please specify the assets you wish to transfer, Attach additional pages if needed)

Quantity	Assets Description / Symbol	Transfer (Select One)
		<input type="checkbox"/> Transfer In Kind <input type="checkbox"/> Liquidate
		<input type="checkbox"/> Transfer In Kind <input type="checkbox"/> Liquidate
		<input type="checkbox"/> Transfer In Kind <input type="checkbox"/> Liquidate
		<input type="checkbox"/> Transfer In Kind <input type="checkbox"/> Liquidate
		<input type="checkbox"/> Transfer In Kind <input type="checkbox"/> Liquidate

5. Mutual Fund Company Transfer: (Use a separate form for each mutual fund company)

Name of Fund Company:				
Name of Fund/Symbol/Cusip	Fund Account #	Transfer (Select One)	Future Dividend (Select One)	Future Capital Gains (Select One)
	<input type="checkbox"/> Transfer In Kind <input type="checkbox"/> Liquidate	<input type="checkbox"/> ALL <input type="checkbox"/> # of Shares ____	<input type="checkbox"/> Reinvest <input type="checkbox"/> Pay in Cash	<input type="checkbox"/> Reinvest <input type="checkbox"/> Pay in Cash
	<input type="checkbox"/> Transfer In Kind <input type="checkbox"/> Liquidate	<input type="checkbox"/> ALL <input type="checkbox"/> # of Shares ____	<input type="checkbox"/> Reinvest <input type="checkbox"/> Pay in Cash	<input type="checkbox"/> Reinvest <input type="checkbox"/> Pay in Cash
	<input type="checkbox"/> Transfer In Kind <input type="checkbox"/> Liquidate	<input type="checkbox"/> ALL <input type="checkbox"/> # of Shares ____	<input type="checkbox"/> Reinvest <input type="checkbox"/> Pay in Cash	<input type="checkbox"/> Reinvest <input type="checkbox"/> Pay in Cash

6. Signature(s): (Please read and sign below)

If this account is a qualified retirement account, I have amended the applicable plan so that it names Apex Clearing Corporation ("Apex Clearing") as successor custodian. Unless otherwise indicated in the instructions above, please transfer all assets in my account to Apex Clearing. 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 time frames required by NYSE Rule 412 or similar rule of FINRA or other designated examining authority.

I authorize you to liquidate any non-transferable proprietary money market fund assets that are part of my account and transfer the resulting credit balance to Apex Clearing. 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. If certificates or other instruments in my account are in your physical possession, I instruct you to transfer them in good deliverable form, including affixing any necessary tax waivers, to enable the successor custodian to transfer them into its name for the purpose of sale, when and as directed by me. I understand that upon receiving a copy of this transfer instruction, you will cancel all open orders for my account on your books.

I affirm that I have destroyed or returned to you credit/debit cards and/or unused checks issued to me in connection with my securities account. I understand that you will contact me with respect to the disposition of any assets in my securities account that are non-transferable.

Primary Signature:	Date:	
Secondary Signature:	Date:	
		Medallion Signature Guarantee Program

Letter of Acceptance – To the prior custodian/Trustee: Please be advised that Apex Clearing Corporation ("Apex Clearing ") hereby accepts an appointment as successor custodian.

Successor Custodian/Trustee Authorized Signature:	Date:
Tax ID Number Successor Custodian:	Date of Trust:

7. Letter of Authorization: (Please complete if the type of account in Section 1 is different than Section 2.)

To: Apex Clearing Corporation: I hereby authorize the following transfer of assets:

Transfer From:

Delivering Firm: _____

Account Number: _____

Account Title: _____

Transfer To:

Apex Clearing Account Number: _____

Account Title: _____

Investment Representative's Name _____ Office # _____ Rep # _____

I understand this transfer constitutes a change in ownership of the assets and that the new registered account holders will have exclusive rights to the assets.

Sincerely,

X _____ **X** _____
 Primary Applicant Signature Secondary Application Signature

***Completion of this form does not guarantee acceptance by delivering Firm.

For Broker Use Only – Transfer Instructions:

REGULAR MAILING INSTRUCTIONS:

Apex Clearing Corporation c/o Broadridge
 Attn: Imaging & Workflow Solutions
 P.O. Box 1348
 Brentwood, NY 11717-4627

OVERNIGHT MAILING INSTRUCTIONS:

Apex Clearing Corporation c/o Broadridge
 Attn: Imaging & Workflow Solutions
 1155 Long Island Ave
 Edgewood, NY 11717

DTC INSTRUCTIONS:

#0158 Apex Clearing
 FAO: Customer Acct #
 (Apex accepts PTD's and PTR's)

PHYSICAL INSTRUCTIONS:

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 GYWf]hYg DfcWgg]b[
 ') \$ B" GhDUi " Gfz GHY % \$\$
 8U UqzHL " +) & \$ %

FOREIGN SECURITIES INSTRUCTIONS:

Euroclear: #10403
 Reference: Apex Clearing

GNMA INSTRUCTIONS:

ABA: 021000018/QUICK

TAX ID#:

13-2967453

NSSC INSTRUCTIONS:

NSSC# 0158 Apex Clearing

FNMA/FREDDIES/USTREAS INSTRUCTIONS:

ABA 021000018
 Bank of New York/QUICK

AGENT ID/INSTITUTIONAL:

89331

CREST SECURITIES:

Apex Clearing Corporation
 Crest ID 82XHX

ALTERNATIVE INVESTMENTS RE-REGISTRATION:

Apex Clearing Corp. c/o Broadridge
 Attn: Alternative Investments Dept.
 1%) @b[-gUbX 5j Y
 9X[Yk ccXz NY 11+%

INCOMING WIRE INSTRUCTIONS:

BMO Harris Bank
 111 W Monroe St
 Chicago, IL 60603
 ABA:071000288
 SWIFT: HATRUS44
 Apex Clearing
 Acct 3713286
 FFC: Customer Name and BPS A/C #

MUTUAL FUND RE-REGISTRATION:

Apex Clearing Corp.
 c/o Broadridge Outsourcing Solutions
 FBO: _____
 Attn: Account Transfer Dept.
 2 Journal Square, 3rd Floor
 Jersey City, NJ 07306

CHECKS: (mail overnight or delivery)

Apex Clearing Corp.
 c/o Broadridge Outsourcing Solutions
 Attn: Cash Management Dept.
 2 Journal Square, 3rd Floor
 Jersey City, NJ 07306