Use this form to transfer some or all assets from another firm to iPlanGroup.



Questions? Our representatives are available to assist you at 855-604-7526.

1. ACCOUNT OWNER	RINFORMATION											
Account Owner Name				iPlanGroup Account Number								
Preferred Daytime Phone	Preferred Daytime Email Address		Social	Securi	ity Num	ber						
Legal Address	City		City			Sta	ite		Zip C	ode		
*All email sent to or from the	iPlanGroup corporate em	nail system may be retained, r	nonitored	d and/or reviewed b	y iPlanG	roup pe	ersonnel.					
iPLANGROUP ACCOUNT	Т ТҮРЕ											
Traditional IRA Roth IRA Rollover IRA			Inherited IRA Health Savings Account									
SIMPLE IRA	SEP IRA	Individual 401(k)	In	herited Roth IRA		Cov	erdell E	ducation	al Sav	vings i	Acco	unt
2. INFORMATION AB	OUT WHERE YOU	R ACCOUNT IS CURRI	ENTLY	HELD								
Firm Name					Accou	nt Nur	mber					
Contact Person Name (if	applicable)	Phone Number			Email	Addre	SS					
ACCOUNT TYPE AT CUR	RENT CUSTODIAN	•										
Traditional IRA	Roth IRA	Rollover IRA	In	herited IRA		Hea	lth Savir	ngs Acco	unt			
SIMPLE IRA	SEP IRA	Individual 401(k)	In	herited Roth IRA		Cov	erdell Ed	ducation	al Sav	ings /	Acco	unt
3. TRANSFER FORM D	DELIVERY INSTRUC	TIONS										
Will your current custodian	n accept a copy of you	r Account Transfer Reques	st Form,	or will they requir	e the o	riginal	form be	mailed?	?			
Requires the original	Requires the original form via mail Will accept a copy											
Please indicate how iPlant	Group should deliver t	the transfer form to your	current	custodian by choo	osing fro	om the	follow	ing deliv	ery o	ption	s:	
Send by Mail:	Regular Mail		O 0	utside UPS Accour	nt #							
	Overnight Mail (\$20 Pr	rocessing Fee + Cost)	□ Oι	utside FedEx Acco	unt#							
Mail to		Attention			Informa	ation to	o be Ref	erenced				
Address				City			Sta	te	Z	Zip Co	de	
Send by Fax	Sen	d by Email							1			
Fax Number		Name/Attention			Inform	ation t	o be Ref	ferenced				
Email Address		Name/Attention			Inform	ation t	o be Ref	ferenced				



4. TRANSFER INSTRUCTIONS

This section is intended for you to indicate the details of your transfer request.

Please select one of the two main op ons below (either Complete Account Transfer or Par al Account Transfer) and complete the sub-categories beneath your selection in order to instruct your current custodian/administrator as to what you would like transferred to iPlanGroup.

PLEASE REMEMBER TO SEND IPLANGROUP A COPY OF YOUR MOST RECENT STATEMENT ALONG WITH THIS FORM. ADDITIONALLY, IPLANGROUP REQUIRES COPIES OF SUPPORTING DOCUMENTATION FOR ALL ASSET TRANSFERS.

COMPLETE ACCOUNT TRANSFER (Account Termination)								
lease select one of the following options:								
А. [Liquidate all assets and transfer all proceeds to iPlanGroup							
в. [Transfer all assets in-kind (as-is without liquidating or selling) along with any cash balance to iPlanGroup							
с. [Liquidate only the assets below and transfer the proceeds in cash, along with any remaining cash and assets (in-kind) to iPlanGroup							
	Please list assets below in which y	you would like liquidated prior to the transfer:						
	Reference Number (i.e.: Stock symbol, cusip, asset, investment reference #, etc.)	(i.e.: Stock symbol, cusip, asset/			Quantity (Number of shares/units, value to transfer or "all")			
	1. 2.							
	3.							
	4.							
_								
P/	ARTIAL ACCOUNT TRANSFER (Mai	ntain Existing Account)						
lease complete all applicable options below to indicate the details of your partial transfer request:								
CASH								
	Send \$ in cash to IRA Plan Partners, LLC DBA iPlanGroup							
ASSETS								
Please list any assets (stocks, bonds, mutual funds, non-traditional assets etc.) in which you wish to have transferred, below. You may choose to have the asset(s) liquidated and transferred as cash, or transferred "in-kind" which means they will be transferred as-is, without liquidating or selling.								
	Reference Number (i.e.: Stock symbol, cusip, asset/ investment reference #, etc.)	Description of Asset (i.e.: Asset name, type, description in your account, etc.)	Quantity (Number of shares/units, value to transfer or "all")	Liquidate	In-Kind			

2. 3.



5. TRANSFER DELIVERY OPTIONS

Please indicate below how you would like your current custodian/trustee to deliver your cash and/or assets to iPlanGroup:

CASH TRANSFER DELIVERY OPTIONS							
Funds Availability: Funds received via wire and cashier's checks are typically available the same day of receipt. Funds received by regular check are typically available within 5 days from receipt.							
Regular Check	Regular Check Wire Transfer (\$35 Incoming Wire Fee)						
Cashier's Check							
If Check or Cashier's Check - P.	lease select a delivery option below	<i>y:</i>					
Regular Mail	Overnight Mail	Other:					
ASSET TRANSFER DELIVERY	OPTIONS						
Regular Mail	Overnight Mail	Other:	Not Applicable				
IMPORTANT: iPlanGroup requires that all original supporting documents related to each asset that are held by your current administrator/ custodian be mailed to iPlanGroup for safekeeping. If originals are not held by the company, we will accept copies.							
Initial here to instruct your current custodian/administrator to mail all original supporting documents, related to your asset(s) transfer, to iPlanGroup. Initial Here							
6. PAYMENT OF TRANSFE	R RELATED FEES						
Please indicate below how you would like to pay for any fees associated with this transfer. (if applicable)							
Debit fees from my accoun	t	Check enclosed	Charge New Credit Card ^{1,2}				
Not Applicable, I did not select any options on this form that would incur a fee							
 A Credit Card Processing Fee of 5% will be assessed on each credit card transaction. If selecting this option, you must complete, sign and attach the Credit Card Charge Form along with your transfer request. 							
7. SPECIAL INSTRUCTIONS							
Please use this section to list any special instructions for iPlanGroup and/or your current IRA administrator/custodian:							



8. TRANSFER AUTHORIZATION & ACCOUNT OWNER SIGNATURE

To Delivering Firm: Unless otherwise indicated in the above instructions, please transfer all assets in my account to IRA Plan Partners, LLC DBA iPlanGroup ("iPlan"). Furthermore: I understand that you will contact me regarding the disposition of other assets in my securities account that are nontransferable and I authorize you to deduct any outstanding fees due you from the credit balance in my account. If my account does not have a credit balance, or the credit balance in the account is not sufficient 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 hereby certify that I have established or will establish a Self-Directed IRA with iPlanGroup acting as Agent for Mainstar Trust ("Custodian"). Furthermore, I agree to the terms and conditions herein and understand that I am responsible for determining my eligibility for all transfers and I agree to indemnify and hold harmless iPlanGroup and Custodian against any and all claims or damages arising from an ineligible transfer. I understand and acknowledge that neither iPlanGroup nor Custodian offers legal or tax advice and I agree that I have or will consult with my own tax professional for advice.

Account Owner Authorization and Signature							
X	Print Na	me	Date				
Responsible Individual Autho	Responsible Individual Authorization and Signature (For a CESA or Minor Account)						
X	Print Na	me	Date				
A							
Medallion Signature Guarantee							
	Wh	at is a Medallion Signature Guarantee?					
Medallion Signature Guarantees are used in the investment industry to protect account owners from unauthorized transactions. An officer of a financial institution reviews the documents pertaining to your request, witnesses your signature, and guarantees that your signature is genuine by stamping the form and signing his or her name and title. The Medallion Signature Guarantee has security features to deter counterfeiting. For this reason, only originals will be accepted. Notes: Please contact your current custodian to see if required. A notary's seal cannot serve as an alternative to a Medallion Signature Guarantee.							
9. ACCEPTANCE (iPlanGroup Use Only) To the prior custodian: Please be advised that Mainstar Trust will accept the above account as successor custodian and as custodian, agrees to accept the assets of the account being transferred. Furthermore, IRA Plan Partners, LLC DBA iPlanGroup is executing this Account Transfer Form and accepting the assets as the agent and nominee of Mainstar Trust pursuant to a written delegation of authority.							
Authorized iPlanGroup Signatu	ıre						
X	Print Na	me	Date				
		AL USE ONLY					
Date Received:	Received by:	Date Approved:	Approved by:				

TRANSFER DELIVERY INSTRUCTIONS



ATTENTION DELIVERING CUSTODIAN/ADMINISTRATOR:

Use the Transfer Delivery Instructions below to deliver the cash and/or assets as requested by the client on the iPlanGroup Account Transfer Form.

WIRE/ACH DEPOSIT INSTRUCTIONS

Wire/Deposit to: For Credit To:

Key Bank IRA Plan Partners LLC - Client Funds

ABA # 041001039 Account #359681389193

Reference:

{Account Owner Name} {Account Type} {Account Number}

Wire Funds Availability Timeframe:

Funds received via wire are typically available the same day of receipt of funds.

REGULAR CHECK/CASHIER'S CHECK INSTRUCTIONS

Make Checks Payable to:

iPlanGroup

iPlanGroup FBO {Account Owner Name}, {Account Type}

Attention: New Accounts 28011 Clemens Road Westlake, Ohio 44145

Check Funds Availability Timeframe: Funds received via Regular Check

ASSET RE-REGISTRATION INSTRUCTIONS

Re-Register Assets to:

iPlanGroup Agent for Custodian FBO {Account Owner Name}, {Account Type}

iPlanGroup must receive re-registration paperwork along with copies of all non-original supporting documents. If original supporting documents are held by custodian/administrator in safekeeping, originals must be mailed to iPlanGroup along with the asset re-registration paperwork.

Mailing/Overnight Delivery Instructions:

Mailing/Overnight Delivery Instructions:

iPlanGroup Attention: New Accounts 28011 Clemens Road Westlake, Ohio 44145

ADDITIONAL INFORMATION

Mutual Fund Registration:

Registration of Physical Certificates:

IRA Plan Partners, LLC DBA

iPlanGroup Agent for Custodian FBO {Account Owner Name}, {Account Type} iPlanGroup Agent for Custodian FBO
{Account Owner Name}, {Account Type}

iPlanGroup Tax ID #: 46-4246162

28011 Clemens Road, Suite B Westlake, Ohio 44145