



A Division of Regal Securities, Inc. Member FINRA/SIPC

**Hilltop Securities Inc. and/or  
Broker/Dealers for which it clears**  
Hilltop Securities Inc. Member NYSE/FINRA/SIPC

<b>FOR BROKER USE ONLY</b>		<input type="checkbox"/> HTS to HTS Transfer ONLY	<input type="checkbox"/> Broker Change ONLY
<input type="checkbox"/> CO=Corporate	<input type="checkbox"/> EI=Ed. IRA	<input type="checkbox"/> JT=Joint	<input type="checkbox"/> SI=Simple IRA <input type="checkbox"/> ACAT
<input type="checkbox"/> CT=Co-Trustee	<input type="checkbox"/> ES=Estate	<input type="checkbox"/> OT=Other	<input type="checkbox"/> SN=Single <input type="checkbox"/> Non-ACAT
<input type="checkbox"/> CU=Custodian	<input type="checkbox"/> HSA	<input type="checkbox"/> QP=Qual/PS/Pen/Plan	<input type="checkbox"/> TR=Trust <input type="checkbox"/> Partial
<input type="checkbox"/> DR=Direct Rollover	<input type="checkbox"/> IR=IRA	<input type="checkbox"/> RI=Roth IRA	

## Account Transfer Form

Use a separate form for each account you transfer. To roll over from an employer-sponsored retirement plan, see your employer for specific details.

### 1. HTS Account Information. (Attach your completed new account application if for a new account.)

Name as it appears on your HTS account: \_\_\_\_\_ Primary SS/Tax ID #: \_\_\_\_\_

HTS Account Number (if applicable): \_\_\_\_\_ Secondary SS#: \_\_\_\_\_

### 2. Transferring Account Information. (Refer to your statement for the following information.)

Name as it appears on transferring account*					<b>Transferring Account Number</b>
Name of Transferring Firm					Firm Phone Number
					Delivering Broker Number
Transferring Firm's Address		City	State/Province	Country	Zip

\*If your HTS account is not the same type of account as the one you are transferring, you must complete the Letter of Authorization on the back of this form.

What types of assets are held in your transferring account?\* (Check ALL that apply.)

- Common Stocks   
  Options   
  Cash   
  Margin Debit Balance \$ \_\_\_\_\_  
 Mutual Funds   
  Government Securities   
  Corporate Bonds   
  Foreign Securities (May be assessed an additional charge.)  
 \* HTS will not accept limited partnerships or private placements.

### 3. Transfer Instructions. (Please complete section A, B or C.)

**A. Transfer my ENTIRE account.** (This is a total transfer which includes all assets held in your account.)

**B. Transfer only PART of my account.** (Please specify the assets you wish to transfer.)

Asset Description	Transfer (select one)	Asset Description	Transfer (select one)
	<input type="checkbox"/> All <input type="checkbox"/> # of Shares _____		<input type="checkbox"/> All <input type="checkbox"/> # of Shares _____
	<input type="checkbox"/> All <input type="checkbox"/> # of Shares _____		<input type="checkbox"/> All <input type="checkbox"/> # of Shares _____

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

Name of Fund Company: \_\_\_\_\_

Name of Fund	Fund Account #	Registration (select one)		Dividend (select one)	Capital Gains (select one)
		Liquidate	In Kind Transfer		
		<input type="checkbox"/> Liquidate all <input type="checkbox"/> Liquidate # _____	<input type="checkbox"/> Transfer all <input type="checkbox"/> Transfer # _____	<input type="checkbox"/> Reinvest <input type="checkbox"/> Pay in Cash	<input type="checkbox"/> Reinvest <input type="checkbox"/> Pay in Cash
		<input type="checkbox"/> Liquidate all <input type="checkbox"/> Liquidate # _____	<input type="checkbox"/> Transfer all <input type="checkbox"/> Transfer # _____	<input type="checkbox"/> Reinvest <input type="checkbox"/> Pay in Cash	<input type="checkbox"/> Reinvest <input type="checkbox"/> Pay in Cash
		<input type="checkbox"/> Liquidate all <input type="checkbox"/> Liquidate # _____	<input type="checkbox"/> Transfer all <input type="checkbox"/> Transfer # _____	<input type="checkbox"/> Reinvest <input type="checkbox"/> Pay in Cash	<input type="checkbox"/> Reinvest <input type="checkbox"/> Pay in Cash

### 4. Attach a Copy of Your Most Recent Statement for the Transferring Account.

Please be sure to attach a copy of your most recent statement for the account you are transferring to Hilltop Securities Inc.

### 5. Please Read and Sign this Section.

If this account is a qualified retirement account, I have amended the applicable plan so that it names Hilltop Securities Inc. (HTS) as successor custodian. Unless otherwise indicated in the instructions above, please transfer all assets in my account to HTS. 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 NYSE Rule 412 or similar rule of FINRA or other designated examining authority. **Unless otherwise indicated in the instructions above, I authorize you to liquidate any nontransferable proprietary money market fund assets that are part of my account and transfer the resulting credit balance to the successor custodian.** 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 in 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. If requesting a transfer of a retirement plan I acknowledge that I understand and meet all necessary requirements for the transfer.

**X** \_\_\_\_\_  
Applicant's Signature Date

**X** \_\_\_\_\_  
Co-Applicant's Signature Date

**Delivering Agents** - Please refer to the reverse side of this form for delivery instructions.

Signature Guaranteed By:

  
  
  
  
  

**Medallion Signature Guarantee Program (if applicable)**

<b>Letter of Acceptance</b> - To the prior trustee: Please be advised that Hilltop Securities Inc. does hereby accept appointment as successor custodian.			
<b>X</b> _____ Successor Custodian Authorized Signature	_____ Date	_____ Financial Advisor's Name	_____ Rep # _____ Office #

# Letter of Authorization

Please complete if the type of account in Section 1 is different than that in Section 2.

## To Hilltop Securities Inc.:

I hereby authorize the following transfer of assets:

### TRANSFER FROM:

Delivering Firm: \_\_\_\_\_

Account Number: \_\_\_\_\_

Account Title: \_\_\_\_\_

### TRANSFER TO:

HTS Account Number: \_\_\_\_\_

Account Title: \_\_\_\_\_

Financial Advisor's Name: \_\_\_\_\_ Office #: \_\_\_\_\_ Rep #: \_\_\_\_\_

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

All authorized signers on the account being transferred are required to sign.

Sincerely,

**X** \_\_\_\_\_

Applicant's Signature

Date

**X** \_\_\_\_\_

Co-Applicant's Signature

Date

### IMPORTANT:

Completion of this form does not guarantee acceptance by delivering firm. Please contact the firm you are transferring your account from as indicated in Section 2 to confirm acceptance of the Letter of Authorization.

## **! Did You . . .**

- Include a copy of your most recent transferring account statement with your account name clearly shown?
- Complete Sections 1 and 2 in full?
- Make sure that the type of account in Section 1 matches the type of account in Section 2? (If not, please fill out the Letter of Authorization.)
- Complete the appropriate boxes in Section 3?
- Sign in Section 5 if you are an account holder or trustee?
- Know to allow 3-6 weeks for your transfer to be completed. Time required to complete your transfer is influenced by industry rules and regulations.

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### Receiving Firm Information

#### Name and Address

Hilltop Securities Inc.  
1201 Elm Street, Suite 3500  
Dallas, TX 75270-2180

#### Tax ID Number

75-1382137

#### Fax Number

(214) 859-1828

### Delivery Instructions

All deliveries MUST include client name and HTS account number.

#### Depository Trust Company

DTC Clearing Number: 0279

#### Dividend Reinvestment or Close-End Mutual Funds

Transfer all full shares. Liquidate Fractions and send a check.

#### Option Instructions

OCC# 0279

#### ACAT Physical Delivery of Securities

Physical Delivery- 0279 NY Envelope, NSCC/SIAC  
[Dealersphvclear@hilltopsecurities.com](mailto:Dealersphvclear@hilltopsecurities.com)

#### Foreign Custody

Canadian Local Market: CUID: RBCT Account#: T12213111  
JPM Chase FAO: Southwest Securities  
Euro clear: JPMChase/Southwest # 16867  
Email: [DealersEuroclear@hilltopsecurities.com](mailto:DealersEuroclear@hilltopsecurities.com)  
Global Custodian BIC: MGTCBEBE

#### Checks

Hilltop Securities Inc.  
Attn: Receipts Department  
REF: Account Number  
1201 Elm Street, Suite 3500  
Dallas, TX 75270

#### Physical Delivery of Securities

Hilltop Securities Inc.  
Attn: Stock Transfer Department  
REF: Account Number  
1201 Elm Street, Suite 3500  
Dallas, TX 75270-2180

#### Fed Wired Funds

JP Morgan Chase Bank, N.A.  
270 Park Avenue  
New York, NY 10017-2070  
ABA # 021000021  
Hilltop Securities Inc.  
A/C 08805076955  
FFC: Name & Account Number @ Hilltop  
Attention: Settlement Dept.

#### Mutual Funds Registration

Hilltop Securities Inc.  
FBO: Name & Account Number  
P. O. Box 509002  
Dallas, TX 75250

#### International Wires

Same Above Instructions and add  
SWIFT address: CHASUS33

#### Fed-Entry Securities

BK OF NYC/HILLTOP  
ABA #021000018  
[FedDealers@hilltopsecurities.com](mailto:FedDealers@hilltopsecurities.com)

## Letter of Acceptance

To the prior trustee: Please be advised that Hilltop Securities Inc. does hereby accept appointment as successor custodian.

**X** \_\_\_\_\_

Successor Custodian Authorized Signature

Date

Financial Advisor's Name

Rep #

Office #