



IRA TRANSFER REQUEST FORM
DIRECT ROLLOVER LETTER
(M2 Trust is Non-ACAT eligible)

M2 Trust Services, LLC
 700 17th Street, Suite 1100
 Denver, CO 80202
 Phone: (888) 265-1225
 Fax: (720) 420-8381

Please complete Sections I, II, III, and IV

Section I: IRA Transfer/Rollover:

I am transferring/rolling over from one of the following type of accounts (check one):

- Traditional IRA Roth IRA SEP IRA SIMPLE IRA Other (Indicate account type): _____

CURRENT IRA CUSTODIAN INFORMATION

Contact your current IRA custodian to verify the information below before returning this form to M2 Trust. Be sure to ask if they will accept a fax of the Transfer Request. If so check the box under "Custodian Fax Number." Also ask if they will require a Medallion Stamp. If so check the "Medallion Stamp" box below.

Name of Present Trustee or Custodian

Name *(Your name as it appears at the present Trustee/Custodian)*

Physical Address Required—Address for mailing or delivering this Transfer Request *(check with your present Trustee/Custodian)*

Social Security Number

City, State, Zip

Custodian Telephone Number *(please include the area code)*

Contact Name

Custodian Fax Number

Account Number at present Trustee/Custodian

Send Transfer Request by fax to the number above.

Medallion Stamp

- Check box if a Medallion Stamp is required by your current custodian. If the Medallion Stamp is required you can take this form to your bank or brokerage office and have them apply the stamp, before returning to M2 Trust,

Delivery Instructions: I hereby authorize M2 Trust to send the Transfer Request by: Fax Regular Mail Overnight Mail (special fees apply).

Section II: Transfer of existing account [choose either Full (Complete) or Partial]:

Full (Complete) (Please choose one of the following):

- Transfer my entire account IN-KIND. Change of ownership only. Money market fund must be liquidated and transferred as cash.
 Liquidate all assets and transfer as cash.

Partial (Please choose one of the following):

- Only \$ _____ All cash in account.

Please transfer only the assets listed below (If In-Kind, a **current statement less than 6 months old is required**).

QUANTITY <i>(All, # of Shares, or \$ Amount)</i>	DESCRIPTION OF ASSET <i>(Name of Fund, Security, or Asset)</i>	INSTRUCTIONS <i>(Please check only one box per asset)</i>
		<input type="checkbox"/> Liquidate or <input type="checkbox"/> In-Kind
		<input type="checkbox"/> Liquidate or <input type="checkbox"/> In-Kind
		<input type="checkbox"/> Liquidate or <input type="checkbox"/> In-Kind
		<input type="checkbox"/> Liquidate or <input type="checkbox"/> In-Kind
		<input type="checkbox"/> Liquidate or <input type="checkbox"/> In-Kind

Section III: Instruction to Current Trustee/Custodian/Plan Sponsor (See attached for delivery instructions.):

- I wish to have my funds wired. I wish to have a check or asset re-registration paperwork mailed via:
- First Class mail
 Overnight delivery and charge my account the overnight fee.
 Overnight delivery. 3rd Party billing number: _____



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Section IV: Account Holder Signature:

I hereby authorize the transfer of cash and/or assets, as directed above, be transferred to M2 Trust for deposit into the following type of account:

- Traditional IRA Roth IRA SEP IRA SIMPLE IRA Other (Indicate account type): _____

Account Holder Signature

Date

Signature Guarantee
(Affix Medallion Stamp)

M2 TRUST WILL COMPLETE THE SECTION BELOW

IRA Account Holder Name: _____

IRA Account Number: _____

Section V: Acceptance by M2 Trust:

M2 Trust has entered into an Individual Retirement Custodian Agreement with the person named above, and M2 Trust, as Custodian of such account, agrees and does hereby accept transfer of the assets described above to such account.

By: _____
M2 Trust Authorized Signatory

Date: _____



DELIVERY INSTRUCTIONS

M2 Trust Services, LLC
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ASSETS – Assets should be re-registered and sent to the following address.

M2 Trust FBO [Account Holder’s Name]
700 17th Street, Suite 1100
Denver, CO 80202

FUNDS - funds can be sent to M2 Trust three ways: Wire, ACH, or Check.

WIRE

Beneficiary/Destination Bank: Vectra Bank
Address: 2000 S. Colorado Blvd., Suite 2-1200
City, State, Zip: Denver, CO 80222
Routing #: 102003154
Account #: 5795764579
Beneficiary Information: M2 Trust
Further Credit To: [Account Holder’s Name]

ACH

Beneficiary/Destination Bank: Vectra Bank
Address: 2000 S. Colorado Blvd., Suite 2-1200
City, State, Zip: Denver, CO 80222
Routing #: 102003154
Account #: 5795764579
Beneficiary Information: M2 Trust
Further Credit To: [Account Holder’s Name]

CHECK

Payable to: M2 Trust FBO [Account Holder’s Name]
700 17th Street, Suite 1100
Denver, CO 80202