VIRTUS FUNDS

Transfer of Assets/ Direct Rollover Form

For assistance, please contact us at 800-243-1574 or visit our website at Virtus.com.

Instructions

Use this form to request an IRA transfer of assets or a direct rollover (excluding qualified rollover contributions (conversions) to a Roth IRA) from an existing retirement plan account to your IRA at Virtus Mutual Funds. Based on your instructions, BNY Mellon Investment Servicing Trust Company will initiate the transfer or rollover for you. If you reached or passed the age Required Minimum Distributions begin (age 70 ½ if you were born on or prior to June 30, 1949, age 72 if you were born on or after July 1, 1949 or age 73 if you were born in 1951 or after), you are responsible for distributing any required minimum distribution amounts from your current retirement plan account (excluding Roth IRAs) in advance of the transfer or rollover. Incomplete information will result in delays in processing your request. If you need assistance completing this form, please contact our Customer Service Department at 800-243-1574.

DIRECT ROLLOVER NOTICE
If this contribution is a direct rollover from a qualified plan, 403(b), or 457 plan, I understand that by signing page 3 of this form, I am acknowledging that the direct rollover contribution is an irrevocable election and is no longer eligible for special tax treatment which may be accorded to distributions from a qualified plan, 403(b), or 457 plan.

You should contact your current plan administrator or custodian prior to completing this form to ensure that you have received and completed any in-house forms that they may require. Direct rollovers from a qualified plan to an IRA can only be in the form of cash.

Section 1 – Participant Information

Name (First, Middle, Last) U.S. Social Security Number Date of Birth

Address City State ZIP Code

Mobile Telephone Number Home Telephone Number Email Address

Section 2 – Investment Instructions

Complete items A, B, C and D

A. ☐ I am opening a new IRA and have attached the required IRA Application.

☐ Deposit proceeds into my existing IRA, account number: ______________________________

B. Type of account transferring into: ☐ Traditional IRA ☐ Rollover IRA
☐ SEP IRA ☐ Roth IRA ☐ Roth Inherited IRA
☐ Traditional Inherited IRA (including SEP or SIMPLE[1] Inherited IRA)
[1]If the required two-year holding period has been met.

C. ☐ Invest the proceeds in accordance with the investment allocation provided on the IRA Application & Adoption Agreement; ***or***

☐ Invest as follows:

Fund Name: ______________________ Amount: $______________ OR __________%

Fund Name: ______________________ Amount: $______________ OR __________%

Fund Name: ______________________ Amount: $______________ OR __________%

Fund Name: ______________________ Amount: $______________ OR __________%

Fund Name: ______________________ Amount: $______________ OR __________%

Fund Name: ______________________ Amount: $______________ OR __________%

Fund Name: ______________________ Amount: $______________ OR __________%

Fund Name: ______________________ Amount: $______________ OR __________%

D. Type of Request

☐ IRA Transfer of Assets (like accounts) - SEP and SIMPLE (after the required two-year holding period) IRAs can be transferred into a Traditional IRA.

☐ Direct Rollover from a Qualified Plan to an IRA

☐ Direct Rollover of Inherited Qualified Plan assets to an Inherited IRA

☐ Direct Rollover from a 403(b) or 457 to an IRA

☐ Direct Rollover of Inherited 403(b) or 457 Plan assets to an Inherited IRA

For any rollover requests, please contact the current plan administrator for distribution/rollover requirements, as the plan may require in-house forms or other action. For all account types, please attach a copy of the most recent account statement from the current custodian, if possible.

Section 3 – Current Custodian and Account Information

Name of Current Custodian

Address

City, State, ZIP Code

Contact Name | Telephone Number

Type of account you are transferring/rolling over from (check one):

☐ Traditional/Rollover IRA

☐ SEP IRA

☐ Roth IRA - Please provide the establishment date of the original Roth IRA: ____________________________________

☐ 403(b)

☐ 457 Plan

☐ Qualified Plan - Please contact your current plan administrator for distribution/rollover in-house form requirements.

☐ SIMPLE IRA (after the required two-year holding period) that is being transferred into a Traditional IRA.

☐ Inherited IRA - Please choose one of the following:

☐ Inherited Traditional IRA ☐ Inherited Roth IRA ☐ Inherited SIMPLE IRA

☐ Qualified Plan ☐ Qualified Plan Designated Roth

☐ 403(b) or 457 ☐ 403(b) or 457 Designated Roth

Please provide the following information for the original decedent:

Name | Date of Birth | Date of Death

Relationship to Beneficiary | $ Prior Year-End Balance

Has the current year required minimum distribution been satisfied? ☐ Yes ☐ No

Investment to Transfer

1. Account Number: ____ Share Class: __________ CUSIP: _____________

☐ Liquidate Entire Account ☐ Partial Dollar or Share Amount: ____

☐ Transfer-In-Kind Entire Account ☐ Transfer-in-Kind – Partial Dollar or Share Amount: ____________________________

For Certificates of Deposit: ☐ Immediately* ☐ At Maturity Date: ______________________________________

2. Account Number: ____ Share Class: __________ CUSIP: _____________

☐ Liquidate Entire Account ☐ Partial Dollar or Share Amount: ____

☐ Transfer-In-Kind Entire Account ☐ Transfer-in-Kind – Partial Dollar or Share Amount: ____________________________

For Certificates of Deposit: ☐ Immediately* ☐ At Maturity Date: ______________________________________

3. Account Number: ____ Share Class: __________ CUSIP: _____________

☐ Liquidate Entire Account ☐ Partial Dollar or Share Amount: ____

☐ Transfer-In-Kind Entire Account ☐ Transfer-in-Kind – Partial Dollar or Share Amount: ____________________________

For Certificates of Deposit: ☐ Immediately* ☐ At Maturity Date: ____________________________________

4. Account Number: ____ Share Class: __________ CUSIP: _____________

☐ Liquidate Entire Account ☐ Partial Dollar or Share Amount: ____

☐ Transfer-In-Kind Entire Account ☐ Transfer-in-Kind – Partial Dollar or Share Amount: ____________________________

For Certificates of Deposit: ☐ Immediately* ☐ At Maturity Date: ____________________________________

***Note:** If you wish to have certificates of deposit transferred immediately and they have not matured, you may incur a redemption penalty. We cannot accept requests to transfer assets from certificates of deposit more than 60 days before their maturity.

Section 4 – Participant Authorization

No information provided by the Virtus Mutual Funds shall be considered to be or is advice on which I may rely as the primary basis for my investment decisions. I agree that I need to make my own decisions, with whatever third-party advice I wish to obtain, and I agree that I am not to rely on any information Virtus Mutual Funds is providing as advice that is a primary basis for my decisions. I expressly confirm, and by signing below, I acknowledge, that none of Virtus Mutual Funds, their distributor, their transfer agent, and their affiliates, has made or is making a recommendation, or has provided or is providing investment advice of any kind whatsoever (whether impartial or otherwise), or is giving any advice in a fiduciary capacity with any decision I may make to invest or otherwise proceed with Virtus Mutual Funds.

I authorize the transfer of assets or direct rollover as noted above to my Virtus Mutual Funds IRA and authorize my current custodian, Virtus Mutual Funds and BNY Mellon Investment Servicing Trust Company, to process this request on my behalf. I understand it is my responsibility to insure the prompt transfer of assets or direct rollover by the current custodian. I have read and understand all information on this form and hereby provide the applicable authorization.

____

Participant Print Name Signature Date

IMPORTANT: Your existing custodian may require a signature guarantee. A signature guarantee helps to protect you and the parties who act upon your instructions from fraud. It guarantees that the person who signs this is, in fact, the person named. If a signature guarantee is required, notarization will not be acceptable. Please check with your existing custodian for requirements.

Medallion Signature Guarantee Stamp and Signature (If required by your current custodian or transfer agent): An eligible guarantor is a domestic bank or trust company, securities broker/dealer, clearing agency or savings association that participates in a medallion program recognized by the Securities Transfer Agents Association. The three recognized medallion programs are the Securities Transfer Agents Medallion Program (known as STAMP), Stock Exchanges Medallion Program (SEMP), and the Medallion Signature Program (MSP). A notarization from a notary public is NOT an acceptable substitute for a signature guarantee.

Please contact your financial institution in advance to determine their supporting documentation requirements, if any.

Place Stamp Here

Please mail to one of the following addresses:

First Class Mail	**Overnight Mail**
Virtus Mutual Funds	Virtus Mutual Funds
PO Box 534470	Attn: 534470
Pittsburgh, PA 15253-4470	AIM: 154-0520
	500 Ross Street
	Pittsburgh, PA 15262