

## Virtus Mutual Funds PO Box 534470 Pittsburgh, PA 15253-4470

## UGMA/UTMA Account Transfer Form

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

## Important Information

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This form can only be used to transfer assets from an account registered under the Uniform Gifts to Minors Act (UGMA) or the Uniform Transfers to Minors Act (UTMA) to an individual account in the name of the former minor beneficiary once the former minor has reached the age of majority for the state in which the account is registered. If a different registration type is desired, or if a redemption is being requested, please complete our Non-Retirement Account Transfer/Redemption Form, which can be obtained by calling a representative at the number above, or downloaded from our website, Virtus.com.

1. Existing Account Information		
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Custodian and Former Minor's Names	Former Minor's U.S. Sc	ocial Security Number
Street Address	Former Minor's Date of	Birth
City, State, ZIP Code	Account Number(s)	
2. New Account Information – Must be co	. ,	
IMPORTANT INFORMATION ABOUT PROCEDURES	· · · · · · · · · · · · · · · · · · ·	
<ul> <li>Cost Basis Reporting: Virtus Mutual Funds has elected Cost to all of the new funds and accounts, unless a C submitted with this form. Due to the tax and financial information available on the IRS website, <a href="www.irs.gov">www.irs.gov</a></li> <li>Options: The dividend and capital gain options will au automatically be added for the new owner and, if approurent account has the eDelivery option, and the new the current account, the eDelivery option will be carried account. If any options are to be established, the owner investment Selection: Unless otherwise specified, we investment selection, please attach a brief note proving the new investment(s) must be in the same share clast exchange of shares, may be considered a taxable any questions.</li> </ul> To help the government fight the funding of terrorism and response to the fight the funding of terrorism and response to the fight the funding of terrorism and response to the fight the funding of terrorism and response to the fight the funding of terrorism and response to the fight the funding of terrorism and response to the fight the funding of terrorism and response to the fight the funding of terrorism and response to the fight the funding of terrorism and response to the fight the funding of terrorism and response to the fight the funding of terrorism and response to the fight the funding of terrorism and response to the fight that the fight the fig	ed Average Cost as our default method. We cost Basis Election Form, which is available consequences associated with this election vand/or consult a tax or financial profession atomatically be reinvested and the Telephone dicable, the financial professional, unless the vaccount will have the same primary Social ed over to the new account. No additional event of the new account will need to complete will maintain the current investment selections are as the current account. A change of investment reportable event. Please contact your contents are and reportable event. Please contact your contents are contact your contents are contact your contents.	e on our website <a href="www.Virtus.com">www.Virtus.com</a> , is a, we recommend that you review the last for guidance. The Redemption/Exchange Option will be new owner notifies us otherwise. If the security or tax identification number as options will be maintained on the new let the appropriate form or contact us. If the owner would like change the dipercentages. Please keep in mind that the sestment selection, which is an our tax or financial professional with
verify and record information that identifies each person where		quires all linancial institutions to obtain,
What this means for you: When you open an account, we identify you. We may check the information you provide agagencies, other financial institutions or other services. If reform. Bolded fields must be completed and will be veri	gainst publicly available databases, informate easonable efforts to verify your identity have	tion obtained from consumer reporting failed, we reserve the right to reject this
Step 1 – Name and Mailing Address		
Name of Tarable Individual (Farmer Miner)	Operated Committee Mounth on	Date of Birth
Name of Taxable Individual (Former Minor)	Social Security Number	
If the mailing address is a post office box, a street addr	ess is required. APO and FPO addresse	s will be accepted.
Email Address	Mobile Telephone Number	
	·	
Street Address	City, State, ZIP Code	
Mailing Address (if different from above)	City, State, ZIP	
Step 2 – Documentary Evidence  Documentary evidence showing the minor has reached the Please check off and include a clear copy of one of the foll		ccount is registered must be submitted.
☐ Copy of Birth Certificate		
☐ Copy of Driver's License		
☐ Copy of Social Security Benefit Statement; or		
☐ Copy of Passport or other Government ID		

3. Dealer (Financial Profe	ssional) Information	
☐ Maintain existing information	☐ Do not maintain broker/dealer information	☐ Update broker/dealer information to:
Dealer Name		Dealer Number
Branch Address		Branch Number
Representative Name If no election is made above or you broker/dealer will be assigned to the	Phone Number I elect not to maintain your current broker/dealer inf ne new account.	Representative Number formation, VP Distributors, LLC, Virtus's default
4. Authorizing Signature,	<b>New Account Acceptance and Certific</b>	cation
This section must be signed by t	he owner of the new account (the former minor).	
accordance with the terms of this for shall be held liable for any loss, liable Virtus Mutual Funds and its agents in accordance with the procedures that neither Virtus Mutual Funds not provided that the Transfer Agent er that I bear the risk from instructions certify that I have full right, power, a understand the prospectus and agr may request an exchange in the full account(s) (including any new account to the period assigned to such the state of t	vices, or its duly authorized agents, as agent for Virtus orm, and I further affirm that neither Virtus Fund Servicility, cost or expense for acting in accordance with the act upon instructions (by phone, in writing, on-line described in the prospectus for this account or any agent the Transfer Agent will be liable for any loss, cost of apploys reasonable procedures to confirm that instruct given by an unauthorized third party that the Transfer authority and legal capacity to receive and purchase the its terms. I agree to obtain and read the prospecture. By signing below, I acknowledge and agree the count(s) established under the same primary Social Secount(s) authorized to act on my behalf with respectifically for the purposes of unclaimed property later that the same primary social second to the purposes of unclaimed property later that the same primary social second to the purposes of unclaimed property later that the same primary social second to the purposes of unclaimed property later that the same primary social second to the purposes of unclaimed property later that the same primary social second to the purposes of unclaimed property later that the same primary social second to the purposes of unclaimed property later that the same primary social second to the purposes of unclaimed property later that the same primary social second that the same primary second that the same primary social second that the same primary second that the same prima	rices ("Transfer Agent") nor Virtus Mutual Funds his form, or any section thereof. I authorize to or by other means) believed to be genuine and account into which exchanges are made. I agree or expense for acting on such instructions, ctions communicated are genuine. I understand for Agent reasonably believes to be genuine. I shares and affirm that I have read and sectus for any Virtus Mutual Fund(s) into which I at any financial professional assigned to my/our ecurity Number or Tax Identification Number) will ct to my/our account(s) in all respects, including
	nts, my signature below indicates that I have read lition, by signing below, I agree to receive the Fu	
	ate a "representative for notice" for escheatment by absite. The designee has no rights to claim or accessine address listed on the first page.	
	checking the box at the end of this sentence, I acknowle to shareholders who are residents or citizens of the Eu	
2. I am not subject to backu a. I am exempt from ba b. I have not been notif or dividends, or c. the IRS has notified 3. I am a U.S. person (includany) indicating that I am exem	s form is my correct taxpayer identification number; p withholding because:	ng as a result of a failure to report all interest g; and (s) entered on this form (if 2 above if you have been notified by the IRS

If I am a nonresident alien, I am required to complete the appropriate Form W-8 to certify my foreign status. I understand that I am not under penalties of perjury certifying the above information.

NOTE REGARDING FORM W-9: The IRS does not require your consent to any provision on this application other than the certification required to avoid backup withholding.

I authorize Virtus Mutual Funds, their agents and affiliates to transfer the shares to a new account, as outlined in Section 2 on the previous page. I acknowledge that by signing below, For the purpose of inducing Virtus Mutual Funds, their agents and affiliates to act upon my/our instructions, I agree to fully indemnify and hold harmless Virtus Mutual Funds, their agents including Virtus Fund Services and BNY Mellon Investment Servicing (US) Inc., and the affiliates, officers, directors, employees, successors and assigns of each, from and against any and all losses, liabilities, claims and costs of whatever kind (including reasonable attorneys' fees) resulting from or caused by transactions made in accordance with these instructions.

Print Name Signature Date