



This form documents the rollover of your asset to Midland Trust. **MIDLAND TRUST WILL NOT INITIATE THE ROLLOVER.** Contact your current custodian to roll over your assets to Midland Trust. For multiple transactions, please use a separate form for each. Use this form to:

- **Document** your rollover contribution to Midland Trust (take receipt of the assets for up to 60 days before reinvesting in a new retirement plan).
- **Document** your direct rollover contribution (move assets directly from your qualified retirement plan to a new retirement plan).

1 PERSONAL INFORMATION

Name <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Dr. _____	Social Security Number
Legal Address	Midland Account Number

2 CURRENT CUSTODIAN/TRUSTEE

Name of Custodian/Trustee	Account Number
Type of Plan you are rolling over from: <input type="checkbox"/> 401K <input type="checkbox"/> Traditional <input type="checkbox"/> Roth <input type="checkbox"/> SEP <input type="checkbox"/> SIMPLE <input type="checkbox"/> ESA <input type="checkbox"/> HSA <input type="checkbox"/> Other (PS, MP, DB, 403(b), 457) _____	

3 ROLLOVER DETAILS (Market fluctuations and/or administrative fees may impact the amount received)

Type: <input type="checkbox"/> Direct Rollover <input type="checkbox"/> Indirect Rollover	Value
I am an eligible person to perform this transaction: (Select one) <input type="checkbox"/> Non-spouse beneficiary of account <input type="checkbox"/> Responsible Individual <input type="checkbox"/> Plan Participant <input type="checkbox"/> Spouse beneficiary of account <input type="checkbox"/> Ex-spouse of account due to divorce/legal separation	

ROLLOVER INSTRUCTIONS TO RESIGNING CUSTODIAN

To rollover **CASH**, please follow the instruction below. Contact our office for wire instructions.

Cash: Please make check payable to: **Midland Trust Company** (Reference Client Name & Account Number on the Check)

To roll over **INVESTMENTS** (Private Stock, Real Estate, LLCs, Notes, etc.), please complete the asset description below and contact us regarding the re-registration of your investment.

Asset Description (For Non-Cash Assets Only)	Amount

4 SIGNATURE AND ACKNOWLEDGEMENT

I hereby agree to the terms and conditions set forth in this Rollover form and acknowledge having established a Self-Directed Account through execution of an account application. I understand the rules and conditions applicable to a rollover. I qualify for the Indirect Rollover or Direct Rollover of assets listed in the Asset Description above and authorize such transactions. If this is a Indirect Rollover or Direct Rollover, I have been advised to see a tax advisor due to the important tax consequences of rolling assets into an self-direct account. If this is a Indirect Rollover or Direct Rollover, I assume full responsibility for any adverse consequences that may result. I understand that no one at Midland Trust or any of its licensees has authority to agree to anything different than my foregoing understandings of Midland Trust policy. If this is a Indirect Rollover or Direct Rollover, I irrevocably designate this contribution of the assets listed above as a rollover contribution. **If this is an Indirect Rollover, I further certify the following by signing this form:**

A. This rollover contribution is being made within 60 days after my receipt of funds from another IRA.

B. During the 12-month period prior to my receipt of the distribution being rolled over, I have not received a rollover distribution from any IRA which was subsequently rolled over to another IRA.

C. I am not rolling over any Required Minimum Distributions with respect to the distributing plan.

Your Signature: _____ Date: _____