

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

**Important Information**

- This form cannot be used for retirement accounts with BNY Mellon Investment Servicing Trust Company as custodian.
- Types of registrations that may be eligible to use this form are:
  - Individually registered accounts
  - Joint accounts
  - Transfer on Death (TOD)
  - Trusts
  - UGMA/UTMA Accounts
- **If a redemption is being requested, the shares must be transferred to a new account prior to the shares being redeemed. Therefore, transfer instructions must be provided for all requests.**

**Additional Documentation Requirements:**

- **Affidavit of Domicile** - An Affidavit of Domicile, which can be downloaded from Virtus.com or by calling the number above, will be required in the following circumstances:
  1. When the address of record is an Inheritance Tax Waiver state but the executor, surviving joint tenant, beneficiary or other legally authorized party claims that the decedent was not domiciled in the address of record state at the time of his/her death.
  2. When supporting documentation/legal paperwork (if any) submitted with the request suggests that the decedent was domiciled in an Inheritance Tax Waiver state at the time of death despite the address of record.
- **Inheritance Tax Waiver** – An Inheritance Tax Waiver (ITW) may be required depending on the decedent’s legal residence, date of death and relationship to the claimant. If the shareholder’s legal residence was in one of the following states, an *original* ITW must accompany this form:
  - \*Indiana
  - \*Ohio
  - \*\*Pennsylvania
  - Puerto Rico
  - \*\*\*Tennessee

An ITW may be required for additional states depending on certain factors. We suggest that you contact the tax agency of the decedent’s state of residence to determine if the document is required prior to submitting this form.

\* An ITW is required if the decedent passed prior to 2013.  
 \*\*An ITW is not required if the assets are being transferred to the shareholder’s estate.  
 \*\*\*An ITW is required if the decedent passed prior to 2016.
- **Small Estates** - If the estate was not probated, we suggest that you contact your local probate court/office for the specific requirements regarding the administration of small estates for the state in which the shareholder resided at the time of his or her death.

*If the state requirements allow for an affidavit, although a photocopy of the affidavit is acceptable, it must bear the affiant's original signature and original notarization and be dated within 12 months of our receipt for account balances \$50,000 and under and within 60 days for account balances \$50,000 and over. The affidavit must be accompanied by a certified death certificate.*

*If the state requires documentation for the administration of small estates be issued by the court, although a photocopy is acceptable, it must bear the original court certification stamp or raised seal and be certified by the court or clerk of the court within 12 months of our receipt for account balances \$50,000 and under and within 60 days for account balances over \$50,000.*

**Refer to Section 4 for additional requirements for trust and estate registration types.**

**1. Existing Account Information**

Shareholder Name/Account Registration	U.S. Social Security Number	
Address	Shareholder Date of Birth	Date of Death (if applicable)
City, State, ZIP Code	Fund and Account Number(s)****	

\*\*\*\* If no fund number(s) is provided with the account number, all funds associated with the account number will be processed.

**2. Claimant Information**

I/We are requesting that the shares in the fund and account number(s) in Section 1, be:

- Transferred (*please be sure to complete all steps in Section 4*), or
- Transferred and Redeemed (*please be sure to complete all steps in Section 4 and indicate partial or full liquidation in Section 7*)

I/We are requesting this transaction, acting in my/our capacity as:

- Surviving Joint Tenant(s)
- Executor(s)/Administrator(s) of the estate
- Surviving Trustee(s)/Successor Trustee(s)
- Transfer on Death beneficiary
- Former Minor
- Other: \_\_\_\_\_

Claimant daytime telephone number in the event there are any questions concerning this request: \_\_\_\_\_

### 3. Reason for Transfer (death and gift only)

To ensure accurate cost basis reporting on covered shares (shares purchased after 2012), you must indicate the type of transfer and provide the following details. This section is not applicable for trust accounts, with the exception of individual trusts in which a Social Security number is being used. Other exceptions may apply. Due to the tax and financial consequences associated with this election, we recommend that you review the information available on the IRS website, [www.irs.gov](http://www.irs.gov) and/or consult a tax or financial advisor for guidance.

- Transfer due to Death (Inheritance)** - If the transfer is being processed as a result of an inheritance, the cost basis will depend on when you inherited it and the relationship to the decedent (spouse versus non-spouse). To determine the cost basis, we must be provided with the following information:

Date of Death: \_\_\_\_\_ or Alternate Date: \_\_\_\_\_

For joint accounts, please provide the relationship:

- Spouse - Cost basis will be adjusted per IRS regulations for inherited assets
- Non-Spouse - Please indicate the percentage of joint property contributed by the decedent \_\_\_\_\_%. If no percentage is indicated, the shares will be transferred as 100% non-covered on non-spousal accounts. *If there are more than two account holders, please include a separate letter of instructions to advise us of the percentage applicable to each account holder, including the decedent(s).*
- Transfer as a Gift** - Virtus Mutual Funds will determine the cost basis in accordance with IRS regulations governing gifted shares.

Depending on the account type and the nature of the transfer, not all requests require a selection to be made above. If a selection is made and is not applicable to the account type or transfer situation, the information will not be applied to our records. Additionally, if this section is not completed and we are not aware of the relationship or transfer type, the assets will be transferred as non-covered shares.

### 4. Transfer Instructions – Must be completed in full for all requests, including requests to transfer and redeem the shares.

#### IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

- **Cost Basis Reporting:** Virtus Mutual Funds has elected Average Cost as our default method. We will apply our default method Average Cost to all of the new funds and accounts, unless a **Cost Basis Election Form**, which is available on our website [www.Virtus.com](http://www.Virtus.com), is submitted with this form. Due to the tax and financial consequences associated with this election, we recommend that you review the information available on the IRS website, [www.irs.gov](http://www.irs.gov) and/or consult a tax or financial advisor for guidance.
- **Options:** The dividend and capital gain options will automatically be reinvested and the Telephone Redemption/Exchange Option will automatically be added for the new owner(s) and, if applicable, the financial advisor, unless the new owner(s) notifies us otherwise. If the current account has the eDelivery option, and the new account will have the same primary Social Security or tax identification number as the current account, the eDelivery option will be carried over to the new account. **No additional options will be maintained on the new account.** If any options are to be established, the new account owner(s) will need to complete the appropriate form or contact us.

To help the government fight the funding of terrorism and money laundering activities, Federal Law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account.

What this means for you: When you open an account, we will ask for your name, address, date of birth and other information that will allow us to identify you. We may check the information you provide against publicly available databases, information obtained from consumer reporting agencies, other financial institutions or other services. If reasonable efforts to verify your identity have failed, we reserve the right to reject this form. **Bolded fields must be completed and will be verified. If bolded fields are not completed, this form will not be accepted.**

#### Step 1 - Re-Register/Transfer Amount

Please re-register/transfer:  All Shares or  \$\_\_\_\_\_ or  \_\_\_\_\_ Shares

#### Step 2 - Re-Registration/Transfer Instructions

**Option 1:** If you are transferring to an existing Virtus Mutual Funds account, list the fund and account number(s): \_\_\_\_\_

**Option 2:** If you are transferring to a new account with Virtus Mutual Funds, provide the following new registrant information:

- Individual** - Must be 18 years or older.
- Joint Tenant** - Joint Tenant with Rights of Survivorship will be presumed unless otherwise specified. All individual(s) named in the registration must be 18 years or older.
- Uniform Gifts/Transfers to Minors Act** - Only one adult custodian and only one minor may be listed in the account registration. The minor's Social Security number must be maintained on the account.  
Please indicate the minor's relationship to the custodian: \_\_\_\_\_
- Individual Trust** - Please include a copy of the title page, signature page and those portions of the trust document which pertain to trustee's powers and successor trustees. As an alternative, a properly executed Certificate of Trust may also be submitted.
- Estate** - If the shares are being transferred to an estate account, please include a copy of the Letters Testamentary or Letters of Administration appointing the Executor(s)/Administrator(s) of the estate.

\_\_\_\_\_  
Name of Taxable Individual, Custodian, Trustee, Executor/Administrator      Social Security Number      Date of Birth

\_\_\_\_\_  
Name of Joint Tenant, Minor, Trustee, Executor/Administrator      Social Security Number      Date of Birth

\_\_\_\_\_  
Name of Trust or Estate      U.S. Tax ID Number      Trust Dated

**If there is not sufficient space to list all individuals to be named in the account registration, please attach a brief note providing the name, Social Security number, date of birth and street address for each additional individual. Note: If you would like to establish a registration not listed above, please contact our office at the number above for instructions.**

**4. Transfer Instructions, continued**

**Step 3 - New Account Mailing and Email Addresses**

If mailing address is a post office box, a street address is also required. APO and FPO addresses will be accepted.

_____		_____	
Email Address		Daytime Phone Number	
_____		_____	_____
Street Address	City	State	ZIP Code
_____		_____	_____
Mailing Address (if different from above)	City	State	ZIP Code
_____		_____	_____
Joint Tenant, Trustee, Executor/Administrator Street Address (if different from street address above)	City	State	ZIP Code

**Step 4 - Investment Selection**

Unless otherwise specified below, we will maintain the current investment selection(s). If the new investor(s) would like change the investment selection, please provide the necessary information below. If there is not sufficient space, please attach a brief note providing the additional investment selections and percentages. Please keep in mind that the new investment(s) must be in the same share class as the current account.

Fund Name or Symbol: _____	Percentage: _____%
Fund Name or Symbol: _____	Percentage: _____%
Fund Name or Symbol: _____	Percentage: _____%

*Investors should carefully consider the investment objectives, risks, charges and expenses of any Virtus Mutual Fund before investing. The prospectus and summary prospectus contains this and other information about the fund. Please contact your financial advisor, call 800-243-1574 or visit Virtus.com to obtain a current prospectus and/or summary prospectus. You should read the prospectus and/or summary prospectus carefully before you invest or send money. A change of investment selection, which is an exchange of shares, may be considered a taxable and reportable event. Please contact your tax or financial advisor with any questions.*

**5. New Account Signature(s) and Certification**

**This section must be signed by all new account owner(s), trustee(s), custodian or executor(s)/administrator(s).**

I hereby authorize Virtus Fund Services, or its duly authorized agents, as agent for Virtus Mutual Funds, to honor any requests made in accordance with the terms of this form, and I further affirm that neither Virtus Fund Services ("Transfer Agent") nor Virtus Mutual Funds shall be held liable for any loss, liability, cost or expense for acting in accordance with this form, or any section thereof. I authorize Virtus Mutual Funds and its agents to act upon instructions (by phone, in writing, on-line or by other means) believed to be genuine and in accordance with the procedures described in the prospectus for this account or any account into which exchanges are made. I agree that neither Virtus Mutual Funds nor the Transfer Agent will be liable for any loss, cost or expense for acting on such instructions, provided that the Transfer Agent employs reasonable procedures to confirm that instructions communicated are genuine. I understand that I bear the risk from instructions given by an unauthorized third party that the Transfer Agent reasonably believes to be genuine. I certify that I have full right, power, authority and legal capacity to receive and purchase shares and affirm that I have read and understand the prospectus and agree to its terms. I agree to obtain and read the prospectus for any Virtus Mutual Fund(s) into which I may request an exchange in the future. By signing below, I acknowledge and agree that any financial advisor assigned to my/our account(s) (including any new account(s) established under the same primary Social Security Number or Tax Identification Number) will be for the period assigned to such account(s) authorized to act on my behalf with respect to my/our account(s) in all respects, including without limitation initiating contact specifically for the purposes of unclaimed property laws.

If the shares are being transferred as a gift and the new account will use the Average Cost method, by signing below the new owner(s) accept the shares at fair market value on the date of the gift if the shares are transferred at a loss.

**For each person providing a taxpayer identification number on this form/application, under penalties of perjury, I certify that: (1) the number shown on this form is my correct taxpayer identification number; and (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the IRS that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and (3) I am a U.S. person (including a U.S. resident alien); and (4) The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. Cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. NOTE: The IRS does not require your consent to any provision on this form other than the certification required to avoid backup withholding.**

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.

**In addition to the above statements, my signature below indicates that I have read the Fund prospectus(es) and this form and agree to the terms stated. In addition, by signing below, I agree to receive the Fund Privacy Notice within a reasonable time after I purchase Fund shares.**

**EU Residents or Citizens Only:** By checking the box at the end of this sentence, I acknowledge that I have received, read and accepted the terms of the Privacy Policy applicable to shareholders who are residents or citizens of the European Union, which is available on Virtus.com.

_____	_____	_____
Print Name	Signature	Date

_____	_____	_____
Print Name	Signature	Date

## 6. Dealer (Financial Advisor) Information

- Maintain existing information       Do not maintain broker/dealer information       Update broker/dealer information to:

Dealer Name \_\_\_\_\_ Dealer Number \_\_\_\_\_

Branch Address \_\_\_\_\_ Branch Number \_\_\_\_\_

Registered Representative Name \_\_\_\_\_ Phone Number \_\_\_\_\_ Representative Number \_\_\_\_\_

**If no election is made above or you elect not to maintain your current broker/dealer information, VP Distributors, LLC, Virtus's default broker/dealer will be assigned to the new account.**

## 7. Redemption Instructions

- Redemptions will be processed at the close of business on the day the request is received in good order.
- Requests received after 4:00PM Eastern Time will be processed at the next day's closing price.

### Step 1 – Redemption Amount (all shares will be liquidated from all funds, if applicable, if an option is not elected)

#### If you hold one fund:

- Full Liquidation.  
 Partial Liquidation of \$ \_\_\_\_\_ or \_\_\_\_\_ shares.

#### If you hold multiple funds:

- Full Liquidation.  
 Partial Liquidation of \$ \_\_\_\_\_ or \_\_\_\_\_ shares and *distribute proportionately across all funds*; OR  
 Distribute as indicated below:

Fund: \_\_\_\_\_ Amount \$ \_\_\_\_\_ or \_\_\_\_\_ shares

Fund: \_\_\_\_\_ Amount \$ \_\_\_\_\_ or \_\_\_\_\_ shares

Fund: \_\_\_\_\_ Amount \$ \_\_\_\_\_ or \_\_\_\_\_ shares

### Step 2 – Payment Instructions

*If a redemption is requested in Section 2 and a payment method is not selected, the payment will be issued as a check payable to the new account information listed in Section 4. Additionally, if you request a Direct-to-Bank distribution and you have not included a voided check or a letter from your bank confirming your account information, we will issue a check payable to the new account information listed in Section 4.*

#### A. Distribution by Mail – Checks are generally mailed within two business days.

- Name and address on new account, **or**  
 Special Payee below

Special Payee Name \_\_\_\_\_

Special Payee Address \_\_\_\_\_

#### B. Direct-to-Bank Distributions

→ *One-Time Distribution* - May be sent to your bank electronically using two methods. ACH will be considered the default method if an election is not made. Choose one:

- Federal Fund Wire – Initiates the next business day. This option is *NOT* intended for trustee to trustee transfers. Please check with the receiving custodian for alternative payment instructions. Your bank may charge a fee for this service.  
 Automated Clearing House (ACH) – Initiates within one to three business days.

→ *New Accounts* – If banking information is provided below, it will automatically be added to the new account for future transactions, unless otherwise specified. Please note, the registered shareholder(s) name(s) must appear on the bank account. If the registered shareholder(s) is not listed in the bank registration, please contact our office for additional requirements.

Please complete the following section and include a preprinted voided check to have your withdrawals electronically transmitted to your checking account (no starter checks) or a letter from your bank on bank letterhead confirming the banking information to have the withdrawals electronically transmitted to your savings account.

Bank Name \_\_\_\_\_ Bank Routing Number \_\_\_\_\_

Bank Account Holder's Name(s) \_\_\_\_\_ Bank Account Number \_\_\_\_\_ Bank Telephone Number \_\_\_\_\_

- Type of Account:  *Checking Account* - Voided check enclosed. Starter checks will not be accepted.  
 *Savings Account* - A letter from your bank on bank letterhead confirming the banking information is enclosed.

**8. Authorizing Signature(s)**

All shareholders or authorized signers of the existing account must sign this form. The form must be signed in capacity if the signer is not listed in the registration of the account (example: executor/personal representative/administrator of an estate, successor trustee, attorney-in-fact, etc.). The signatures and capacity must be Medallion Guaranteed.

I/We authorize Virtus Mutual Funds, their agents and affiliates to make changes to the account registration or transfer the shares to a new account, as outlined in Section 4 on the previous page. I/We acknowledge that by signing below, I/we may be releasing any current ownership privileges and am/are authorized to request such changes. For the purpose of inducing Virtus Mutual Funds, their agents and affiliates to act upon my/our instructions, I/we 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.

**NOTE:** If a redemption is being requested, the authorized individual listed in Section 4, Step 2 must also sign in this section. The signature(s) and capacity must be Medallion Guaranteed.

For UGMA/UTMA account registrations, we will accept Medallion Guaranteed instructions from either the custodian or the former minor to transfer the shares to the former minor. However, if a redemption is being requested or if the new account is to name anyone other than or in addition to the former minor, we will require the instructions to be signed by the former minor with the signature Medallion Guaranteed.

_____	_____	_____
Print Name	Signature/Capacity	Date
_____	_____	_____
Print Name	Signature/Capacity	Date
_____	_____	_____
Print Name	Signature/Capacity	Date

**9. Medallion Guarantee**

Place Medallion Guarantee Stamp Here

**All signature(s) and capacity in Section 8 must be Medallion Guaranteed.**

A Medallion Guarantee Stamp may be obtained from an eligible guarantor. Eligible guarantors include Commercial Banks, Trust Companies, Savings Associations and Credit Unions, as defined by the Federal Deposit Insurance Act and registered Broker/Dealers.

**Notarization from a Notary Public is not acceptable.**

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

