



## Transfer On Death - Beneficiary Distribution Form

Please submit this agreement via email, fax or mail as follows:

**E-mail** - help@interactivebrokers.com (Insert your account number/Estate Processing in the subject line). Only the following attachment types are accepted: .gif .tiff .tif .jpeg .jpg .png .bmp .pdf.

**Fax** - (312)984-1017 (Insert your account number in the subject line)

**Mail:**

**Overnight/Courier**

Interactive Brokers LLC  
Estate Processing  
209 South LaSalle Street  
10th Floor  
Chicago, IL 60604

**Postal**

Interactive Brokers LLC  
Estate Processing  
P.O. Box A3770  
Chicago, IL 60690-3770

### Beneficiary Contact Information

Name: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Email address \_\_\_\_\_

I, \_\_\_\_\_ am a designated beneficiary for Account # \_\_\_\_\_ registered to \_\_\_\_\_. My Social Security number is \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_. My Interactive Brokers account number is (write N/A if you currently do not have an account with IB) \_\_\_\_\_.

In accordance with the Transfer on Death Registration Form & Agreement, I am providing this notarized distribution form and a certified copy of the death certificate. In addition, if I do not have an existing account, I have completed an IB Account Application to open a new account. I request that Interactive Brokers transfer the percent of assets indicated in the Transfer on Death Registration Form & Agreement to my Interactive Brokers account.

By: \_\_\_\_\_

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Notary:

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, before me appeared \_\_\_\_\_  
\_\_\_\_\_ who acknowledged herself or himself to be the person who executed the Transfer on Death  
Beneficiary Distribution Form set forth above and acknowledged that he/she executed the same for the purposes therein  
contained. In witness whereof, I hereto set my hand and official seal.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_