# Reinvesting an ISA into Investment Funds (in the event of a death)



## Internal Ref: Form A

#### How to fill in this form

- This should be completed by all Executor(s) or Administrator(s) and be sent to us with a sealed Grant of Representation.
- If you are reinvesting offshore holdings originally held in an ISA by the deceased, please complete the Fidelity Funds/Fidelity Funds II (SICAV) application form and submit with this form.
- Please note the entire ISA holding will be sold.
- Please use black ink and write clearly inside the boxes using capital letters.
- Mark your answers with a cross in the appropriate box like this:

**Please Note:** A small number of funds may require us to switch assets into an alternative share class of the same fund as soon as the transfer into the beneficiary account is complete. For guidance on how to confirm which funds are eligible for stock transfers and which will be switched to an alternative share class, please refer to our supporting document **'Stock Transfers: What you need to know'**.

- Any applications that are not completed correctly may incur delays or could be returned to you.
- If you make a mistake, please correct it but don't use correction fluid.
- If you have any queries about this form, please call our Customer Services Team on **0800 41 41 16.**
- Applications can only be accepted on original forms. Photocopies or faxed copies cannot be accepted.

### What's next?

Please send your completed application form to:

Fidelity PO Box 80 Tonbridge TN11 9YA

### About the late account holder

ISA account number	Date of death (DDMMYYYY)
2 Estate information	
I/We the Executor(s)/Administrator(s) of the E	

request that the above mentioned ISA, currently registered in the name of the deceased, may be sold and the proceeds reinvested outside the ISA wrapper in the name of the recipient.

## 3 Executor(s) or Administrator(s)

#### **Executor or Administrator 1**

	Gender
Mr Mrs Ms Other	Male Female
Surname	
First and other names in full	
Address	
House number/name	
Street, city, county and country	
	stcode

### M 0 0 2 1 2 0 1

## 3 Executor(s) or Administrator(s) (continued)

### Signature

	Print name
	Date signed Date control (DDMMYYYY)
Executor or Administrator 2	
Title	Gender
Surname	
First and other names in full	
Address	
House number/name	
	Print name Date signed (DDMMYYYY)
Executor or Administrator 3	
Mr         Mrs         Ms         Other         Other </th <th>Gender</th>	Gender
Surname	
First and other names in full	

## 3 Executor(s) or Administrator(s) (continued)

Address	
House number/name	
Street, city, county and country	
	Postcode
Signature	
	Print name
For such as a desired such as a	
Executor or Administrator 4	
Mr Mrs Ms Other	Male Female
Surname	
First and other names in full	
Address	
House number/name	
Street, city, county and country	
•••••••••••••••••••••••••••••••••••••••	
Signature	Print name

## 4 Transferee details (new holder)

Note: If you are dividing the holdings between multiple beneficiaries, please print a copy of sections 4-6 for each recipient and provide a percentage split of holdings. Please ensure that the percentage across all beneficiaries totals 100%.

Percentage of holdings		
Title		
Mr Mrs Ms Other		
Surname		
First and other names in full		
Gender Male Female	Date of birth	
or a letter from HMRC)		Account number (existing client only) This must be the account number you wish to transfer to.
Email       Image: State of the	count this reinvestment will be treated	as a top up. If you would like the holdings to
go into a new Investment Funds Account, maximum number of characters is 18, but complete section 5 if an intermediary/adv	please enter a designation of your choic we are unable to accept the word 'trust'.	e below to differentiate the holdings. The
Account Designation		
Your address - 'Care of' and PO Box are Employee or the spouse/civil partner of a House number/name		eligible unless you are a Crown
Street, city, county and country		
		Postcode         Image: Constraint of the second secon
Are you a resident in the UK for tax pu	<b>poses?</b> If yes please mark this box	
Are you also a resident in any other co	untry for tax purposes? If so, please co	mplete the following fields
First country	First country tax id	entifier
Additional country	Additional country	

M 0 0 2 1 2 0 4

Reinvest\_DeceasedInt/12.15/v3.0/

## 4 Transferee details (new holder) (continued)

Would you like Joint Holders on this account?

Office Use Only Please ignore

All holders must sign Section 6 (Declaration and signature). The Joint Holder Supplement Form must also be completed and returned with this application form.

## 5 Intermediary details (Recipient Account)

#### Company stamp

#### **Unique Adviser Number**

#### FCA number

I confirm that I am registered with the FCA to conduct business and my authorisation number is:

1	 _	 _	 		 		

#### **Remuneration details**

Have you provided a personal recommendation?

(You must mark either the Yes or No box)

Yes

#### No

Please note these assets will be added to your client's fee account and if an Adviser Ongoing Fee has previously been setup this will be automatically applied. An Initial Fee cannot be applied to this type of instruction.

An Adviser Ongoing Fee cannot be applied to this type of investment using an application form. If you would like to setup an Adviser Ongoing Fee, it must be done online once the assets have been received.

#### Verification of identity

I/We confirm and consent to your reliance upon the fact that I/we have verified the identity of the client named in section 4 in accordance with the Money Laundering Regulations and standards set in Guidance issued by the JMLSG. Please mark an X in this box.

This confirmation must carry an original signature or electronic equivalent.

I/We confirm that I/we have provided the client with the appropriate documentation for their investment:

- The Key Features Document Doing Business with FundsNetwork.
- The Key Investor Information Document and/or Fund Specific Information document applicable to the clients' investment.
- The FundsNetwork Client Terms.

#### Your signature

#### Intermediary signature



#### Date signed



## 6 Declaration and signature(s)

The underlying funds are to be transferred (outside the ISA wrapper). This will be done by selling the account and investing the proceeds in an Investment Funds Account in the name of the beneficiary. These transactions only reflect the administrative transfer of legal ownership from the estate to the beneficiary, not the vesting of beneficial ownership, which occurs separately under the estate and therefore generally will not count as a disposal and acquisition for CGT purposes.

- Where we offer the same share class of the fund that the deceased held in an ISA, we will purchase the same number of units in the beneficiary's Investment Funds Account
- Where we do not offer the same share class of the fund that the deceased held in an ISA, we will invest the monetary proceeds in the clean share class version of the funds which will therefore be subject to market movements
- I/We understand that the information I/we provide on this application form will be processed in accordance with Fidelity's data protection statement contained in the FundsNetwork Client Terms.
- I/We hereby accept the transfer of the shares, detailed in Section 4, into my/our account.

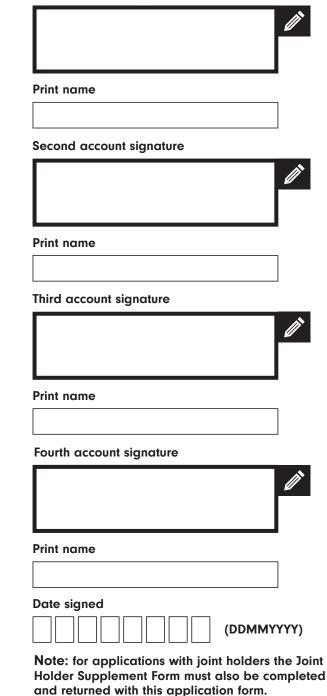
#### I/We declare that:

- By signing this form I/we confirm that I am not/ we are not a US citizen, that I am not/we are not resident in the US, and that I do not/we do not have an obligation to pay tax to the US tax authorities on my/our worldwide income.
- My adviser has provided me with the following documents either as an electronic version, which I/we have saved or printed, or as a paper copy and I/we have read:
- Key Features Document (Doing Business with FundsNetwork)
- the Key Investor Information Document and/or Fund Specific Information
- and accept the FundsNetwork Client Terms. For your own benefit and protection you should read the FundsNetwork Client Terms carefully before signing them.
- I/We have read the Stock Transfer document Stock Transfers: What you need to know
- Where I/we have elected to move the holdings into an alternative share class, I/We understand that the charges (and possibly income options) of the new share class may differ from the existing share class and that for a dual-priced fund, a bid-offer spread may be charged.

- All subscriptions made, and to be made, belong to me/us, and I am/we are 18 years of age or over.
- The information given by me/us is correct to the best of my/our knowledge, and I/we will inform Fidelity immediately of any changes to the information provided.

#### Signatures of all applicants

#### Primary account signature



## 7 Checklist before submission

Grant of Representation (Please refer to the guide for Executors and Administrators).
Fidelity Funds/Fidelity Funds II (SiCAV) Application form – for NEW Fidelity account holder for transfer of offshore holdings. This must be completed for each recipient. Offshore holdings can be identified on the Statement and Valuation at the date of death.
Written instruction for non-eligible funds. Please refer to the Stock Transfers: What you need to know document.
Copies of this form, if there are multiple recipients, showing the percentage splits for investment.
Joint Holder Supplement Form to be included where new account has joint holders.

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