

## IRA TRANSFER/CONVERSION REQUEST FORM

Use this form when redeeming and transferring funds from an existing IRA. You must complete this form along with your IRA Application, if this is a new account. Include a copy of your most recent account statement from the current Trustee or Custodian.

Please send completed form to:

## Regular Mail Delivery

Zacks Funds PO Box 2175 Milwaukee WI 53201-2175

## **Overnight Delivery**

Zacks Funds C/O UMB Fund Services, Inc. 235 W. Galena Street Milwaukee WI 53212

| CURRENT TRUSTEE/CUSTODIAN INFORMATION:  |  |                                    |  |  |  |
|---|--|------------------------------------|--|--|--|
| Trustee/Custodian Name (Bank, Mutual Fund, etc.)  |  |                                    |  |  |  |
| Trustee/Custodian Street Address  |  |                                    |  |  |  |
| Trustee/Custodian City, State, and Zip Code   |  |                                    |  |  |  |
| PART I: IRA OWNER INFORMATION   |  |                                    |  |  |  |
| Name:   | Taxpayer ID Number:  | Date of Birth:                     |  |  |  |
| Primary Phone:  | Email Address:   |                                    |  |  |  |
| PART II: TRANSACTION DESCRIPTION  |  |                                    |  |  |  |
| Type of Transaction (Select One)  Transfer (Nonreportable, Nontaxable Transaction)  ☐ Traditional (or SEP) IRA to Traditional (or SEP) IRA  | Receiving Account Number**:  **If you are purchasing into a newly established IRA please enclose a completed IRA application.                |                                    |  |  |  |
| <ul><li>☐ Roth IRA to Roth IRA</li><li>☐ SIMPLE IRA to Traditional IRA (or SEP)*</li></ul>  |  |                                    |  |  |  |
| Conversion (Reportable, Taxable Transaction)  Traditional (or SEP) IRA to Roth IRA  SIMPLE IRA to Roth IRA*  *At least two years must elapse from the time of your initial parts. | Receiving Account Number**:  **If you are purchasing into a newly establish IRA application.  articipation in your employer's SIMPLE IRA pla | ned IRA please enclose a completed |  |  |  |
| IRA assets to a Traditional (or SEP) IRA or convert SIMPLE  |  | , .                                |  |  |  |
| PART III: LIQUIDATION INSTRUCTIONS  |  |                                    |  |  |  |
| I authorize and direct the current IRA Trustee/Custodian to liq below (select one).   | uidate assets as follows and send all proceeds to  | the new IRA Custodian identified   |  |  |  |
| ☐ Immediately liquidate all assets and send the cash proceeds to the new IRA Custodian.   |  |                                    |  |  |  |
| ☐ I wish to withdraw the requested amount on a pro rata basis across all investments.   |  |                                    |  |  |  |
| ☐ I wish to withdraw the requested amount from my investr<br>(Indicate from which investments the withdrawal should be  |  | e.g., 33%, not 33 1/3%.)           |  |  |  |

| Investment<br>Description  | Share Class<br>(if applicable)  | Approximate<br>Value   | Withdrawal Amount or %    |                               |                          | Liquidation                       | or Distribute I                        | n-Kin             |     |
|--|---|--|---------------------------|-------------------------------|--------------------------|-----------------------------------|--|-------------------|-----|
| 1.   |   |  |                           |                               |                          |                                   | □Liquidate In Distribute               | mmediately and    |     |
|  |   |  | \$                        | c                             | or                       | %                                 | □Distribute I                          | n-kind            |     |
| 2.   |   |  |                           |                               |                          |                                   | ☐Liquidate Immediately and Distribute  |                   |     |
|  |   |  | \$                        | 0                             | or                       | %                                 | □Distribute In-kind                    |                   |     |
| 3.   |   |  |                           |                               |                          |                                   | □Liquidate In Distribute               | mmediately and    |     |
|  |   |  | \$                        |                               | or                       | %                                 | □Distribute I                          | n-kind            |     |
| 4.   |   |  |                           |                               |                          |                                   | □Liquidate<br>Distribute               | Immediately       | and |
|  |   |  | \$                        | 0                             | or                       | %                                 | □Distribute I                          | n-kind            |     |
| 5.   |   |  |                           |                               |                          |                                   | ☐Liquidate<br>Distribute               | Immediately       | and |
|  |   |  | \$                        | 0                             | or                       | %                                 | □Distribute I                          | n-kind            |     |
|  |   |  | TOTAL:\$_                 |                               | _ or                     | %                                 |  |                   |     |
| Addendum attached for information requested above  |   |  | lditional spac            | e to list inves               | tments, a                | ttach a separa                    | ate sheet that inc                     | cludes all of the |     |
| PART IV: TRANSFER  | /Conversion In  | NSTRUCTIONS  |                           |                               |                          |                                   |  |                   |     |
| FBO Please mail check to:  | Z<br>P  | egular Mail Deliv<br>acks Funds<br>O Box 2175<br>Iilwaukee WI 5320 | <u>ery</u>                |                               | <u>Q</u><br>Z<br>C<br>2: | <i>vernight Del</i><br>acks Funds | ivery<br>ad Services, Inc.<br>a Street |                   |     |
| •  |   |  | am an a D                 |                               | NY (DM                   | (D)                               |  |                   |     |
| PART V: INSTRUCTION Note: Complete this sect   |   |  |                           |                               |                          |                                   | ibutions (RMD                          | s).               |     |
| ☐ I have already satisfie ☐ Send me my RMD the ☐ Keep my RMD in the ☐ Transfer my RMD to | en transfer/convert the<br>existing IRA and tra<br>the new IRA Custod | e remaining IRA b<br>nsfer the balance a<br>ian. (This option is   | s instructed.  NOT availa | (This option<br>ble for Conve | is <u>NOT</u> a          |                                   | Conversions to l                       | Roth IRAs).       |     |
| Special Instructions:  |   |  |                           |                               |                          |                                   |  |                   |     |
| PART VI: INVESTME  | NT SELECTION (  |  | •                         |                               |                          |                                   |  |                   |     |
| Name o   | f Investment  |  | are Class<br>pplicable)   | Allocation                    |                          |                                   |  |                   |     |
| 1.   |   |  |                           |                               | \$                       |                                   | or                                     | %                 |     |
| 2.   |   |  |                           |                               | \$                       |                                   | or                                     | %                 |     |
|  |   |  |                           | TOTAL:                        | \$                       |                                   | or                                     | %                 |     |
| Addendum attached for  | or additional investme  | ent selections. If vo  | ou need addit             | ional space to                | make inv                 | vestment sele                     | ctions attach a                        | senarate sheet t  | hat |

includes all of the information requested above. Sign and date the sheet. C-613 IRA Transfer/Conversion Request Form (Rev. 10/09)

## PART VII: WITHHOLDING NOTICE AND ELECTION FORM (FORM W4P/OMB NO. 1545-0074) DEPARTMENT OF TREASURY, INTERNAL REVENUE SERVICE

Complete only if you are converting a Traditional, SEP, or SIMPLE IRA to a Roth IRA.

**NOTICE:** The distributions you receive from your IRA are subject to Federal income tax withholding unless you waive withholding. You may waive withholding on your IRA distribution by returning a signed and dated IRS Form W-4P, *Withholding Certificate for Pension or Annuity Payments*, or substitute Form W-4P to the Custodian. Withholding will apply to the total amount of the distribution, whether taxable or not. If you waive withholding on your IRA distribution, or if you do not have enough Federal income tax withheld from your IRA distribution, you may be responsible for payment of estimated tax. You may incur penalties under the estimated tax rules if your withholding and estimated tax payments are not sufficient. You are responsible for determining and paying all Federal, and if applicable, state and local taxes on distributions from all IRAs you own. If you do not waive withholding or elect an alternative withholding amount, ten percent will be withheld from your nonperiodic IRA distribution. Your election is valid until you revoke it. You may change your withholding election by completing another Form W-4P or substitute. If you are a non-`resident alien you may not use Form W-4P to withhold income tax or to waive withholding.

| <b>Election:</b> Unless you indicate a withheld from your IRA distribu                                | different withholding amount below or you waive withholding by indicating your election below, ten percent will be tion.  |
|---|---|
| I want federal income tax of  | tax withheld from my distribution from this account.  10% withheld from my distribution from this account.  |
| PARTVIII: ACKNOWLEDO  | GEMENTS   |
| Trustee/Custodian to transfer/conthis transfer/conversion and I ass<br>IRA Trustee/Custodian harmless | inversion Request Form, I certify that the information I have provided is true and correct. I authorize the current IRA invert the IRA assets as instructed above. I understand that I am responsible for ensuring I am eligible to authorize sume all responsibilities for any consequences that arise as a result of my actions. I agree to indemnify and hold the afrom any consequences related to executing my directions. I have been advised to seek competent legal and tax ded any such advice from the IRA Trustee/Custodian. |
| Signature of IRA Owner (or other  | er authorized person):  |
| X   | is a minor, the responsible person designated on the current IRA account needs to sign this form  |
| If the owner of the IRA account   | is a minor, the responsible person designated on the current IRA account needs to sign this form  |
|   | n.a, agrees to accept this transfer/conversion as instructed above.   |
| Signature of Receiving IRA Cus  | todian Representative:  |
| X   | Date:   |
|   | Medallion signature guarantee (if required)   |
|   | Medamon signature guarantee (n requireu)  |

Please check with your current trustee/custodian to determine if a Medallion signature guarantee is required to process this transfer.

A Medallion signature guarantee may be obtained from any eligible guarantor institution. These institutions include U.S. banks, savings associations, credit unions and brokerage firms participating in the Securities Transfer Association Medallion Program. Approved programs currently include STAMP, SEMP and MSP. A notary public stamp or seal is not acceptable.