## Request for Transfer of Assets or Direct Rollover Investor Services 800-243-1575

- To expedite your request please contact your current Custodian or Employer to ensure all necessary forms are submitted, including a copy of your most recent statement.
- Sign and mail your completed TOA form along with any current Custodian's or Employer's required forms and a new Selected IRA application (if you do not already have a Selected IRA account) to: Selected Funds, PO Box 219662, Kansas City, MO 64121-9662. For overnight mail: Selected Funds, 430 W 7th Street, Suite 219662, Kansas City, MO 64105-1407.


## A. ACCOUNT REGISTRATION - Please type or print clearly.


B. ASSETS ARE MOVING FROM THIS ACCOUNT - Please attach a copy of your most recent statement.


## C. INSTRUCTIONS TO DELIVERING TRUSTEE/CUSTODIAN - Please select one option below.

From my current plan type:Traditional ROTHSEPSIMPLE403(b)Other Employer Retirement PlanESA

## TRANSFER/ROLLOVER INSTRUCTIONS

$\square$ Option 1 - Liquidate - Choose this option if you are not currently invested in shares of Selected Funds. Also, please complete Section D. Please liquidate the account(s) listed below and issue check payable to SELECTED FUNDS.

Amount or Percentage
\$ $\qquad$
$\qquad$ \%
$\qquad$
$\qquad$
$\qquad$
$\qquad$ \%
\$ $\qquad$
$\qquad$ \%

If you are liquidating from a Certificate of Deposit (CD):
Amount to liquidate:AllPartial Liquidation of \$ $\qquad$ When to liquidate:ImmediatelyAt Maturity*
*Please send completed paperwork to Selected Funds 30 days prior to maturity date.
$\square$ Option 2 - Transfer all of my existing Selected Funds - Choose this option if you currently own and are trying to transfer/rollover shares in a Selected Fund "in kind". A transfer/rollover "in kind" is a movement of currently owned Selected Funds from one custodian to Selected Funds without liquidating the shares. Please complete Section $D$ as well.
$\qquad$
$\qquad$ \%

## D. ASSETS ARE MOVING TO THIS SELECTED ACCOUNT

TraditionalROTHSEP $\square$ SIMPLE $\square$ 403(b) $\square$ ESANew Selected Account (Please attach a new Selected Funds Account Application) orExisting Account
## INVESTMENT ALLOCATION

Please indicate fund(s) and investment percentages.
Name

## Shareholder Signature

Date

Note for Education Savings Account transfers: If the Student is a minor under the law of the Student's state of residence, the parent or guardian must sign this transfer form
Medallion Guarantee: $\longrightarrow$

Do Not Complete this Section Instructions for delivery to the Selected Funds IRA account.

Letter of Acceptance -UMB Bank accepts custodianship for the IRA, 403(b) or ESA of the above named individual. Please transfer on a custodian to custodian basis, all or part of the designated account as instructed in Section 3 and send the check payable to "Selected Funds" with a copy of this request.

| Fund Name |
| :--- |
| Account Number |

Return to: Selected Funds
PO Box 219662
Kansas City, MO 64121-9662
Accepted by:
$\qquad$

For overnight mail:
Selected Funds
430 W 7th Street, Suite 219662
Page 2 of 2
Kansas City, MO 64105-1407

