## **Ironclad Funds**

# 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

Ironclad Funds PO Box 2175 Milwaukee WI 53201-2175

#### Overnight Delivery

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

CURRENT TRUSTEE/CUSTODIAN INFORMATI	ION:			
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)	Receiving Account Number**:			
☐ Traditional (or SEP) IRA to Traditional (or SEP) IR	**If you are purchasing into a newly established IRA please enclose a completed IRA application.			
☐ Roth IRA to Roth IRA				
☐ SIMPLE IRA to Traditional IRA (or SEP)*				
Conversion (Reportable, Taxable Transaction)	Receiving Account Number**:			
$\square$ Traditional (or SEP) IRA to Roth IRA	**If you are purchasing into a newly estable	ished IRA please enclose a completed		
☐ SIMPLE IRA to Roth IRA*	IRA application.			
*At least two years must elapse from the time of your ini IRA assets to a Traditional (or SEP) IRA or convert SIM		plan before you may transfer SIMPLE		
PART III: LIQUIDATION INSTRUCTIONS				
I authorize and direct the current IRA Trustee/Custodian below (select one).	to liquidate assets as follows and send all proceeds	to the new IRA Custodian identified		
$\square$ Immediately liquidate all assets and send the cash properties $\square$	roceeds to the new IRA Custodian.			
$\hfill \square$ I wish to withdraw the requested amount on a pro ra	ata basis across all investments.			
$\square$ I wish to withdraw the requested amount from my in	nvestments as indicated in the chart below.			

(Indicate from which investments the withdrawal should be taken. Percentages must be in whole numbers, e.g., 33%, not 33 1/3%.)

Investment Description	Share Class (if applicable)	Approximate Value	Withdrawal Amount or %			Liquidatio	Liquidation or Distribute In-Kin		
1.						□Liquidate Distribute	e Immediately and		
			\$	or	%	□Distribut	e In-kind		
2.						□Liquidate Distribute	e Immediately and		
			\$	or	%	□Distribut	e In-kind		
3.						□Liquidate Distribute	e Immediately and		
			\$	or	%	□Distribut	e In-kind		
4.						□Liquidate Distribute	e Immediately		
			\$	or	%	□Distribut	e In-kind		
5.						□Liquidate Distribute	e Immediately		
			\$	or	%	□Distribut	e In-kind		
			TOTAL:\$_	or _	%				
Addendum attached for information requested about			lditional space	e to list investment	ts, attach a sep	arate sheet that	includes all of the		
PART IV: TRANSFER	CONVERSION I	NSTRUCTIONS							
☐ By Check: Make	check payable as fol	lows: Ironclad Fun	ds as Custodi	an					
	o eneck payable as for				r SEP)	Roth			
Please mail check to:	,	Regular Mail Deliv	verv		Overnight D	elivery			
	Ī	ronclad Funds	<u> </u>		Ironclad Fun	ds			
		PO Box 2175 Milwaukee WI 532	01-2175		C/O UMB Fi 235 W. Gale	und Services, In na Street	ic.		
					Milwaukee V	WI 53212			
☐ By Wire For w	ire instructions call 8	88.979.4766.							
PART V: INSTRUCTION	ONS REGARDING	REQUIRED MI	NIMUM DI	STRIBUTION (F	RMD)				
Note: Complete this sect	tion only if the curre	ent (i.e., distributii	ng) IRA is su	bject to required	minimum dis	tributions (RM	IDs).		
☐ I have already satisfic									
Send me my RMD th									
☐ Keep my RMD in the	_				<del></del>		o Roth IRAs).		
☐ Transfer my RMD to	the new IRA Custod	ian. (This option is	NOT availab	ole for Conversions	s to Roth IRAs	3).			
Special Instructions:									
PART VI: INVESTME	NT SELECTION (	RECEIVING IR	<b>A</b> )						
	of Investment	Sha	are Class		A	llocation			
Name o		(1f a)	pplicable)						
Name o				ď		0**	94		
				\$ <u></u>		or	%		
1.				\$		or	% %		

Copyright © 2009, Convergent Retirement Plan Solutions, LLC, Brainerd, MN 56401

### 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 different withholding amount below or you waive withholding by indicating your election below, ten percent will be withheld from your IRA distribution.
I do not want federal income tax withheld from my distribution from this accountI want federal income tax of 10% withheld from my distribution from this accountI want federal income tax of% (greater than 10%) withheld from my distribution from this account.
PART VIII: ACKNOWLEDGEMENTS
By signing this <i>IRA Transfer/Conversion Request Form</i> , I certify that the information I have provided is true and correct. I authorize the current IRA Trustee/Custodian to transfer/convert the IRA assets as instructed above. I understand that I am responsible for ensuring I am eligible to authorize this transfer/conversion and I assume all responsibilities for any consequences that arise as a result of my actions. I agree to indemnify and hold the IRA Trustee/Custodian harmless from any consequences related to executing my directions. I have been advised to seek competent legal and tax advice, and have not been provided any such advice from the IRA Trustee/Custodian.
Signature of IRA Owner (or other authorized person):
X Date:
If the owner of the IRA account is a minor, the responsible person designated on the current IRA account needs to sign this form
ACCEPTANCE: By signing below, UMB Bank, n.a, agrees to accept this transfer/conversion as instructed above.
Signature of Receiving IRA Custodian Representative:
X Date:
Medallion signature guarantee (if required)
iviedation signature guarantee (ii required)

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.