

## 1. INSTRUCTIONS

This form is used to transfer an existing IRA to your DF Dent Growth Funds IRA.

- If a new account is being opened, complete this IRA Asset Transfer Form and an Individual Retirement Account Application.
- Include a statement from your existing IRA with this form.
- If you are transferring a passbook/certificate type account or an insurance type IRA, you must submit the passbook, certificate or insurance policy with this form.
- **The current custodian or trustee holding your IRA may require a "Signature Guarantee" or have other requirements. Please determine the requirements of your current custodian or trustee to avoid delays in processing your transfer.**
- Mail this completed form (along with your Individual Retirement Account Application, if opening a new account) to:

DF Dent Growth Funds  
P.O. Box 588  
Portland, ME 04112

or Overnight Delivery to:

DF Dent Growth Funds  
c/o Atlantic Fund Services  
Three Canal Plaza, Ground Floor  
Portland, ME 04101

Contact us toll-free at: (866) 2DF-DENT or (866) 233-3368

## 2. YOUR DF DENT GROWTH FUNDS IRA

Your Name \_\_\_\_\_ Your Account Number (unless new account) \_\_\_\_\_ Social Security Number \_\_\_\_\_

Your Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ E-mail \_\_\_\_\_

Birth Date \_\_\_\_\_ Telephone (Day) \_\_\_\_\_ Telephone (Evening) \_\_\_\_\_

Please select the fund(s) you wish the transfer proceeds to invest in:

DF Dent Premier Growth Fund	_____ %
DF Dent Midcap Growth Fund	_____ %
DF Dent Small Cap Growth Fund	_____ %

## 3. ACCOUNT BEING TRANSFERRED

Name of the Institution Currently Holding Your IRA (Shareholder Servicing Agent/Transfer Agent if mutual fund) \_\_\_\_\_

Your Custodian's Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Customer Service Telephone Number \_\_\_\_\_

Account Number \_\_\_\_\_ Account Executive (if any) \_\_\_\_\_

## 4. TRANSFER INSTRUCTIONS

### Mutual Fund Company Transfer

Name of Fund \_\_\_\_\_ Select One:  Liquidate All Shares  Liquidate \$ \_\_\_\_\_

Name of Fund \_\_\_\_\_ Select One:  Liquidate All Shares  Liquidate \$ \_\_\_\_\_

### Securities Transfer

Security Name \_\_\_\_\_ Select One:  Liquidate All Shares  Liquidate \$ \_\_\_\_\_

Security Name \_\_\_\_\_ Select One:  Liquidate All Shares  Liquidate \$ \_\_\_\_\_

**Certificate of Deposit Transfer**

- Transfer the proceeds of my CD, which matures on \_\_\_\_\_, upon maturity  
Date (MM/DD/YYYY)
- Transfer the proceeds of my CD immediately

Note: If you are transferring a CD, and you wish to transfer your CD at maturity, please check the "Upon Maturity" box above and send this form at least two weeks prior to maturity. There may be a premature withdrawal penalty if you choose to liquidate a CD prior to maturity.

**5. SIGNATURE AND AUTHORIZATION**

I hereby agree to the terms and conditions set forth in this IRA Asset Transfer Form, and acknowledge establishing an IRA in the DF Dent Growth Funds through my execution of a DF Dent Growth Funds IRA Application.

**Please Note: The custodian or trustee holding your current IRA may require a "Signature Guarantee" prior to releasing your assets. To avoid processing delays, please check with your custodian to determine if a "Signature Guarantee" is required.**

\_\_\_\_\_  
Your Signature

\_\_\_\_\_  
Date (MM/DD/YYYY)

\_\_\_\_\_  
Signature Guarantee (if required by your current custodian)

**Fed Wire Asset Transfer:** By checking this box, I authorize my IRA asset transfer(s) to be transferred via Fed Wire. I understand that my resigning trustee/custodian may charge a wire fee for this service.

**DO NOT COMPLETE THE SECTION BELOW**

**INSTRUCTIONS TO RESIGNING TRUSTEE/CUSTODIAN**

Type of IRA:     TRADITIONAL     SEP-IRA     ROTH     QUALIFIED PLAN ROLLOVER     BENEFICIARY IRA

Please forward a check made payable to the **DF Dent Growth Funds, FBO** \_\_\_\_\_

Please include the following reference number on the check \_\_\_\_\_

Please forward the check or draft and any accompanying documents to:

Regular Mail

DF Dent Growth Funds  
P.O. Box 588  
Portland, ME 04112

Overnight Delivery

DF Dent Growth Funds  
c/o Atlantic Fund Services  
Three Canal Plaza, Ground Floor  
Portland, ME 04101

Wire Delivery

The Huntington National Bank  
Westerville, OH  
Atlantic Shareholder Services, LLC FBO  
Forum Funds  
ABA 044000024  
Account # 01892542416  
DF Dent Growth Funds  
(Fund Account Number)

Contact us toll-free at: (866) 2DF-DENT or (866) 233-3368

**INSTRUCTIONS FROM ACCEPTING CUSTODIAN**

The Custodian hereby accepts its appointment as IRA Custodian, agrees to accept the transfer described above and, upon receipt, will apply the proceeds to the DF Dent Growth Funds IRA established on behalf of the individual named herein.

\_\_\_\_\_  
Authorized Signature (On behalf of the DF Dent Growth Funds)

\_\_\_\_\_  
Date (MM/DD/YYYY)