

IRA ROLLOVER FORM



The IRA Direct Rollover Request Form is used to facilitate the direct rollover of assets between a tax-qualified plan and a Traditional or Roth IRA. This form should not be used to facilitate a rollover or direct transfer of assets between IRAs. You will need to complete a New Account Agreement if you do not already have an account established. If you have any questions regarding this form, please call Shareholder Services at 1-877-764-3863.

Regular Mail
 SMI Funds
 PO Box 46707
 Cincinnati, OH 45246

Overnight Express Mail
 SMI Funds
 225 Pictoria Dr, Suite 450
 Cincinnati, OH 45246

***If this is for a new IRA Account, an IRA Application must accompany this form**

STEP 1 IRA Owner Information

Please print in ink

First Name, MI

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Social Security Number

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Last Name

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Date of Birth

/	/
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Email

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Residential Street Address

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City

State

Zip Code

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Daytime Phone

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Evening Phone

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STEP 2 Rollover Description

Only qualifying distributions from eligible retirement plans defined in IRC Sec. 402(c)(8)(B) are eligible to be rolled over to an IRA.

*Select this option only if you are rolling over assets to a Roth IRA.

- Qualified Plan under IRC Sec. 401(a) (including 401(k) plans)
- 457(b) Deferred Compensation Arrangement
- 403(b) Tax Sheltered Annuity (including 403(b)(7) Custodial Accounts)
- Designated Roth account under a 401(k) or 403(b) plan*
- Other: _____

QUESTIONS?

For more information

1-877-SMI-FUND

STEP 3 Instructions to Current Plan Custodian

Current Custodian:
Send the check representing the assets payable along with a copy of this form to:

SMI Funds
FBO [Shareholder Name]
PO Box 46707
Cincinnati, OH 45246

Name of Plan Participant/Employee **Plan/Account Number**

Street Address of Plan Sponsor

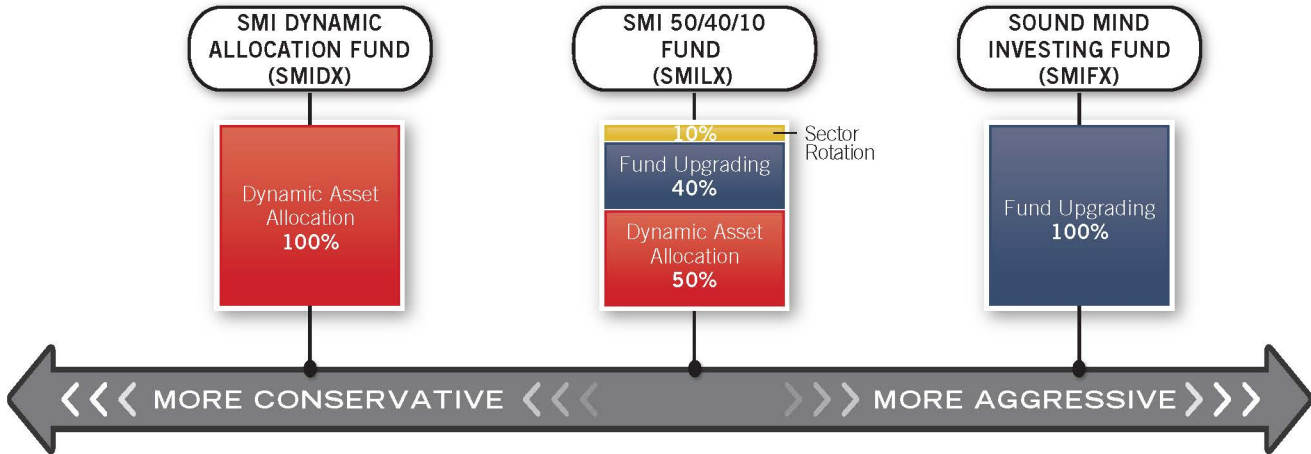
City, State, Zip Code

Name of Plan Sponsor/Employer **Plan Sponsor Phone Number**

Account Owner:
Please select one option and attach a current account statement.

- Immediately rollover entire balance and send the cash proceeds to the IRA Trustee/Custodian.
- Partially rollover \$_____ of the current plan balance and send the proceeds to the IRA Trustee/Custodian. (Owner: please provide written liquidation instructions).
- Other: _____

STEP 4 Investment Choices



New Account - Please complete an IRA Account Application to process this transfer. Ignore the table below and go directly to Step 5.

Existing Account Number:

<input type="checkbox"/> SMI 50/40/10 Fund (SMILX)	%
<input type="checkbox"/> SMI Dynamic Allocation Fund (SMIDX)	%
<input type="checkbox"/> Sound Mind Investing Fund (SMIFX)	%
<input type="checkbox"/> Money Market Fund (GOAXX)	%

QUESTIONS? | For more information

1-877-SMI-FUND

STEP 5 Authorization to Speak with SMI Funds About the Status of My Rollover

I authorize the firm surrendering these assets to provide any information related to the status of the rollover to representatives of the SMI Funds. This provision is for information related to the status of the rollover only and no further authorization is required in order for the surrendering firm to provide this information.

STEP 6 Signature of Certification

By signing this IRA Direct Rollover Request Form, I certify that the information I have provided is true and correct. I understand that I am responsible for ensuring I am eligible to authorize this rollover and I assume all responsibilities for any consequences that arise as a result of my actions. I have been advised to seek competent legal and tax advice, and have not been provided any such advice from the Trustee/Custodian. I also understand that if I am subject to the required minimum distribution requirements, special rules apply; and I assume responsibility for my actions regarding those issues. I elect to irrevocably designate this deposit as a rollover contribution. I will indemnify and hold the Trustee/Custodian harmless from any consequences related to executing my directions. I authorize the plan administrator to directly roll over the plan assets as indicated above and certify the plan is qualified under the appropriate section of the Internal Revenue Code.

X

Signature of Owner*

Today's Date (MM/DD/YYYY)

Print Name of Owner

Contact your current custodian to determine if a signature guarantee* is required.

New Technology Medallion Signature Guarantee Stamp*
(For transfer from another custodian)

* A signature guarantee may be obtained from any eligible guarantor institution, including banks, savings associations, credit unions, and brokerage firms. The words "SIGNATURE GUARANTEED" must be stamped or typed near your signature being guaranteed. The guarantee must appear with the printed name, title, and signature of an officer and the name of the guarantor institution. Please note that a Notary Public Seal or Stamp is not acceptable.

STEP 7 Acceptance / Custodian Authorization

Unified Asset Services hereby accepts its appointment as Custodian of the above IRA account and upon receipt of assets, will deposit such assets in a SMI Fund IRA on behalf of the Depositor authorizing this transfer.

QUESTIONS?

For more information

1-877-SMI-FUND