

# Leigh Baldwin Total Return Fund

## Request for Transfer or Conversion to a Roth IRA

For assistance on completing this form  
Call 1-800-869-1679

Please print or type

### 1 GENERAL INFORMATION

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_ Employers Name \_\_\_\_\_

### 2 TRANSFER REQUEST (complete only for a transfer from a traditional IRA)

I authorize and direct you, the present Custodian / Trustee of my Roth IRA, to send as a transfer the assets indicated I Section 4 below to U.S. Bank N.A. Custodian for the Leigh Baldwin Total Return Fund.

**Please include a copy of your latest IRA statement**

Present Custodian / Trustee's Name \_\_\_\_\_ Phone \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Account Number \_\_\_\_\_ Five-Year Holding Period Starting Date \_\_\_\_\_

### 3 CONVERSION REQUEST (complete only for a transfer from a traditional IRA)

I authorize and direct you, the present Custodian / Trustee of my Traditional IRA, to convert assets in my traditional IRA to a Roth IRA as indicated in Section 4 below to U.S. Bank N.A. Custodian for the Leigh Baldwin Total Return Fund. *I understand that a conversation is a taxable event and that the amount I convert will be reported as a taxable distribution to the Internal Revenue Service.*

**A. Custodian / Trustee Information.** Please complete the following

Custodian / Trustee's Name \_\_\_\_\_ Traditional IRA Account # \_\_\_\_\_

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

**B. IRS Reporting.** For IRS reporting purpose I Am (check one):  Less than age 59 1/2  Age 59 1/2 or older

*Caution: If you are age 70 1/2 or older, it is recommended that you do not convert your required minimum distribution for the year.*

Attention: Conversions must be reported to the IRS. The Custodian / Trustee sending the funds will report the distribution and the Custodian / Trustee receiving the assets will report the subsequent Roth IRA contribution.

### 4 PAYMENT INFORMATION

**A. New Roth IRA Account Number** \_\_\_\_\_ (to be completed by transfer agent)

**B. Payment schedule.** I authorize and direct you to send my assets as follows:

(1)  Immediately liquidate all assets and send the cash proceeds (4)  Other \_\_\_\_\_

(2)  Send cash proceeds of all investments at maturity \_\_\_\_\_

(3)  Send the assets at maturity for the investments listed below \_\_\_\_\_

Investment Maturity Date (if applies)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. Payment Method.** I authorize and direct you to send my assets by check to U.S. Bank N.A. as follows: U.S. Bank N.A. Custodian FBO

Your Name \_\_\_\_\_ Social Security Number \_\_\_\_\_

**D. Roth Conversion IRA.** In intend to keep these funds on a separate account as a Roth Conversion IRA.  yes  no

(Note: A Separate Roth Conversion IRS should be established for conversion amounts received in different years)

### 5 SIGNATURES AND CERTIFICATIONS

I certify that I have or will establish a Roth IRA with my mutual fund. I agree to the terms of this form. I understand that I am responsible for determining my eligibility for all transfers or conversions and I agree to indemnify and to hold the custodian harmless against any and all situations arising from an ineligible transfer or conversion. I acknowledge that the Custodian cannot provide legal advice and I agree to consult with my own tax professional for advice

The Custodian agrees to accept these funds as a transfer or conversion.

X \_\_\_\_\_  
Signature of Roth IRA Owner Date

(You may wish to retain a copy of this form for your records)

X \_\_\_\_\_  
Signature of Custodian Date

**TO BE COMPLETED BY A US BANK N.A. REPRESENTATIVE (For office use only)**

US Bank N.A. hereby confirms that it has accepted its appointment as Custodian of the Leigh Baldwin Total Return Fund.

*Return completed form to:*

c/o: Mutual Shareholder Services, LLC  
8000 Town Centre Drive, Suite 400  
Broadview Heights, OH 44147

X \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

*Make check payable to:*  
Leigh Baldwin Total Return Fund