Selected FUNDS

Request for Transfer of Assets or Direct Rollover

TOA

P.O. Box 8243, Boston, MA 02266-8243

Use this form when transferring an IRA, a 403(b) or when rolling over an employer sponsored retirement plan to a Selected IRA.

- Do not use when transferring a Coverdell Savings Account or when converting or recharacterizing IRA Assets.
- To expedite your request please contact your current Trustee, Custodian or Employer to ensure all necessary forms are submitted, including a copy of your most recent statement.
- For additional information, please call a Customer Service Representative at 800-243-1575.
- Sign and mail your completed TOA form (along with any current Trustee's, Custodian's or Employer's required forms) and a new Selected IRA or 403(b) application if you do not already have a Selected account to: Selected Funds P.O. Box 8243, Boston, MA 02266-8243.

A. ACCOUNT REGISTRATION – *Please type or print clearly.*

Name

Address

City State Zip Code + 4

( ) -

Daytime Telephone Number Social Security Number

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

Name of Custodian

Address of Custodian

City State Zip Code + 4

( ) -

Telephone Number of Custodian

C. INSTRUCTIONS TO DELIVERING TRUSTEE/CUSTODIAN – *Please select one option below.*

From my current plan type: ❑ Traditional ❑ ROTH ❑ SEP ❑ SIMPLE ❑ 403(b) ❑ Other Employer Retirement Plan

TRANSFER/ROLLOVER INSTRUCTIONS

❑ **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.

Name of Mutual Fund or Investment Transferring From	Account Number	Amount	or	Percentage
		$ ____________		____________%
		$ ____________		____________%
		$ ____________		____________%
		$ ____________		____________%

If you are liquidating from a Certificate of Deposit (CD):

Amount to liquidate: ❑ All ❑ Partial Liquidation of $ ____________ When to liquidate: ❑ Immediately ❑ At Maturity*

**Please send completed paperwork to Davis Funds 30 days prior to maturity date.*

❑ **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.

Existing Account Number	Amount	or	Percentage
	$ ____________		____________%

D. ASSETS ARE MOVING TO THIS SELECTED ACCOUNT

❑ Traditional ❑ ROTH ❑ SEP ❑ SIMPLE ❑ 403(b)

❑ New Selected Account or ❑ Existing Account

INVESTMENT ALLOCATION

Please indicate fund(s) and investment percentages.

Name	Class	Percentage (total should be 100%)
	TOTAL	1 0 0 %

_______________________________ _______________

Shareholder Signature Date

Note: The current Trustee/Custodian may require your signature to be medallion guaranteed. Call that institution for their requirements.

Medallion Guarantee:

A Medallion Guarantee may NOT be obtained through a notary public.

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

Letter of Acceptance - State Street Bank and Trust Company hereby accepts custodianship for the IRA, or 403(b) 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

____
FBO

Return to: State Street Bank & Trust Company
c/o The Selected Funds
P.O. Box 8243
Boston, MA 02266-8243

Accepted by:

____
Date

For overnight delivery: State Street Bank & Trust Co., 30 Dan Road, Canton, MA 02021