

WIRELESS FUND™

Use this form only when transferring your existing IRA from another institution directly to a Wireless Fund IRA. If you are establishing a new IRA with the Wireless Fund, an IRA Account Application must accompany this form. To print out an IRA Account Application, please visit our website at www.wireless-fund.com or call toll-free 1-800-590-0898. If you have any questions, please contact an Investor Service Representative at 1-800-590-0898.

1. Social Security Number

Social Security Number

2. Investor Information (Please Print or Type)

Name (First, Middle, Last)

Street

City, State, Zip code
() ()

Daytime Telephone Evening Telephone

3. Information About Your Present IRA

Please attach a copy of a recent account statement to help us locate your current account.

Name of current Trustee, Custodian or Institution

Address

City, State, Zip
()

Telephone Number

Account Number

Date of Maturity (if a Certificate of Deposit)

Check one: Transfer immediately* Transfer upon maturity

Name of Mutual Fund, Brokerage Firm or Bank

*Penalties may be assessed for early withdrawal.

Asset Transfer or Conversion

Type of plan you now have:

- Traditional IRA
 Rollover IRA
 Roth IRA
 Roth Conversion IRA
 SEP-IRA
 SIMPLE IRA
 Other Employer Sponsored Plan: _____

Type of plan you are transferring to:

- Traditional IRA
 Rollover IRA
 Roth IRA
 Roth Conversion IRA
 SEP-IRA

IRA Transfer Form

Please mail the completed IRA Transfer Form to:

Wireless Fund
c/o Mutual Shareholder Services, LLC
8000 Town Centre Drive, Suite 400
Broadview Heights, Ohio 44147

4. Your Fund Selection(s) Please check one

Open a new Wireless Fund account:

If you are opening a new account, your completed IRA application must accompany this form.

Invest the proceeds in my existing Wireless Fund account.

Wireless Fund

Account Number (if applicable)

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 \$ _____ %
Amount or Percentage

5. Transfer Authorization (Your signature is required)

To the current Trustee/Custodian:

I have established an IRA with Wireless Fund.

Please consider this your authority to liquidate and transfer (check one)

All assets in my account or \$ _____ %
Amount or Percentage

of my assets in the account identified in Section 3 and prepare a check made payable to Wireless Fund. It is my intention to transfer these assets to an IRA account with the Wireless Fund for which US Bank, N.A. acts as Custodian.

I certify that I have received and read the Prospectus for the Wireless Fund which I am transferring my IRA.

X

Your Signature

Date

Please check with your current Trustee/Custodian to determine if a signature guarantee is required to process this transfer.

A signature guarantee may be obtained from any eligible guarantor institution. These institutions include U.S. banks, savings associations, credit unions and brokerage firms. **A Notary Public cannot provide a Signature Guarantee.**

Signature Guarantee. Place Guarantee Stamp and Authorized Signature here:

FOR OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE – TO BE COMPLETED BY US BANK, N.A., CUSTODIAN FOR Wireless Fund

Please be advised that US Bank, N.A., has been appointed to serve as successor Custodian of this IRA. Please send the check representing the liquidation of the investments indicated above along with a copy of this form to identify the check as a transfer of assets to:

Wireless Fund
c/o Mutual Shareholder Services, LLC
8000 Town Centre Drive, Suite 400
Broadview Heights, Ohio 44147

(If you prefer to wire funds directly, please call 1-877-593-8637 for further instructions)

X

Authorized Signature

Date