

# IRA TRANSFER/ ROLLOVER FORM

**DGIFUND**



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This form is for transferring/rolling over IRAs, SEP IRAs and Roth IRAs from their current custodian to The DGI Fund.

- If you are transferring money from a 401K plan or other employer-sponsored retirement plan, you will need to contact your current plan administrator (their phone number is likely on your plan statement) and ask what is required in order to transfer your account to The DGI Fund.

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Unless you already have an active account with The DGI Fund, this form should be sent along with a corresponding IRA, SEP IRA or Roth IRA Application.

- This form should be used to transfer between like accounts. For example, IRA to IRA or Roth to Roth.

3

Include additional documentation as necessary.

- Please attach a copy of the most recent account statement for the account you are transferring/rolling over.

4

Mail completed Application and Transfer/Rollover Form to:

Mailing Address

The DGI Fund c/o Paralel Technologies  
P.O. Box 2170  
Denver, CO 80201

Overnight Address

The DGI Fund c/o Paralel Technologies  
1700 Broadway, Suite 1850  
Denver, CO 80290

If you have questions, or your situation require something other than the standard form, please contact an Investor Service Representative at 1-855-DGI-FUND (344-3863).

# IRA TRANSFER/ ROLLOVER FORM

**DGIFUND**

IMPORTANT: To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: when you open an account, we will ask for your name, address, date of birth, and information that will allow us to identify you.

## 1. ABOUT YOU

Owner's Name (*Last, First, Middle Initial*)

Owner's Social Security Number

Date of Birth (*MM/DD/YY*)

Address of Residence (*P.O. Boxes Not Accepted*)

City, State, Zip Code

Mailing Address—If different (*P.O. Boxes Accepted*)

City, State, Zip Code

( )

( )

Day Phone

Evening Phone

Email Address

## 2. ACCOUNT INFORMATION

If transferring to a new DGI Fund account, please complete a new Account Application and submit it along with this form.

☐ I am setting up a new DGI Fund Account to receive this transfer/rollover.

☐ Process this transfer/rollover into an existing DGI Fund Account. *Account Number:* \_\_\_\_\_

## 3. ACCOUNT BEING TRANSFERRED/ROLLED OVER

To avoid delays, please confirm your current Plan Administrator/Custodian's address and whether or not they require a Signature Guarantee. If Required, please complete section six.

**Plan Being Transferred:**

☐ IRA

☐ Roth IRA

☐ 401K

☐ 403b

☐ Defined Benefit Plan

☐ Other Retirement Plan (*please specify*) \_\_\_\_\_

Plan Administrator/Custodian

Account Number

Address of Custodian (*P.O. Boxes Not Accepted*)

City, State, Zip Code

Mailing Address—If different (*P.O. Boxes Accepted*)

City, State, Zip Code

( )

Custodian Phone

Please attach a copy of the most recent statement for the account you are transferring to The DGI Fund.

#### 4. TRANSFER/ROLLOVER INSTRUCTIONS

I have established an IRA, Roth IRA or SEP IRA with BOKF, NA dba Colorado State Bank and Trust. Please transfer my assets and follow the instructions below.

I authorize and direct the transfer of the following amount to the DGI Fund.

☐ Liquidate all assets in my account and transfer the entire proceeds

☐ Liquidate only part of the assets and transfer: \$ \_\_\_\_\_ OR \_\_\_\_\_ %  
Amount Percent

☐ Directly rollover my qualified plan (401K, 403b, pension plan, etc.) distribution for the following reason:

☐ Termination of Employment ☐ Death ☐ Plan Termination ☐ Attainment of Retirement Age (Typically 59.5)

Complete Transfer By:

Make Checks Payable to:

☐ Check (*regular mail—typically no fee*)

DGI FUND

☐ Overnight Check (*faster, but the sending institution may charge a fee*)

FBO Traditional IRA, SEP IRA or Roth IRA

Client Name \_\_\_\_\_

☐ Wire (*fastest, but the sending institution may charge a fee*)

SSN \_\_\_\_\_

#### 5. SIGNATURE

Current Trustee/Custodian: I have established an IRA, SEP IRA or Roth IRA with The DGI Fund and have appointed BOKF, NA dba Colorado State Bank and Trust as the custodian. Please accept this as your authorization and instruction to liquidate and/or transfer "in kind" the assets noted above, which your company holds for me.

If I am 70.5 years of age or older and have begun taking my minimum required distributions from the account which is being transferred to The DGI Fund. I understand and acknowledge that I am responsible for notifying The DGI Fund of the existence and birth date of any spouse beneficiary which existed on my account as of my required beginning data, as that term is defined in Treasury Regulation 1.401(a)(9); as well as the method of calculation which I elected for determining life expectancy over which required distributions are to be made from the account. Should I fail to provide this information, I understand that future calculations of my minimum required distribution amounts may result in underpayments, which would subject me to a 50% excess accumulations penalty tax.

Owner's Signature

Date (MM/DD/YY)

#### 6. MEDALLION SIGNATURE GUARANTEE (If you are unsure if needed, please call us)

A signature guarantee is required if redeeming within 30 days of changing bank information or address, in addition to sending wires, ACHs and checks to instructions other than that on record for this account.

To protect yourself against fraud, your signature(s) must be guaranteed ("Medallion Signature Guarantee") by any "eligible" Guarantor. The Medallion Signature Guarantee stamp MUST include the words "Signature Guaranteed, Medallion Guaranteed" and comply with Medallion program requirements. Signatures notarized by a Notary Public are not acceptable. Most banks offer the Medallion Signature Guarantee (MSG) service to banking clients. Please contact your banking institution or one of the following types eligible MSG guarantor instructions if you need a MSG.

Eligible Guarantor's: Commercial Banks, Credit Unions, Member Firms of a domestic stock exchange, Savings Associations, Trust Companies

Bank or Dealer Firm

Officer's Title

Officer's Signature

Date (MM/DD/YY)

(Stamp)

## INTERNAL DGI FUND USE ONLY

To be completed by the custodian.

This is to inform you that BOKF, NA dba Colorado State Bank and Trust will accept the account referenced in section 3.

This transfer of assets/direct rollover is to be executed from fiduciary to fiduciary and will not place the participant in actual receipt of all or any of the plan assets. No federal income tax is to be withheld from this transfer of assets or direct rollover.

Accepted by BOKF, NA dba Colorado State Bank and Trust as Custodian for The DGI FUND.

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BOKF, NA dba Colorado State Bank and Trust Authorized  
Representative

Date (MM/DD/YY)