

**SIT MUTUAL FUNDS INDIVIDUAL RETIREMENT ACCOUNT (IRA)  
TRANSFER OF ASSETS / DIRECT ROLLOVER FORM**



Use this form to request an IRA transfer of assets or a direct rollover (excluding qualified rollover contributions (conversions) to a Roth IRA) from an existing retirement plan account to your IRA at Sit Mutual Funds. Based on your instructions, BNY Mellon Investment Servicing Trust Company will initiate the transfer or rollover for you. **If you reached or passed the age Required Minimum Distributions begin (age 70½ if you were born on or prior to June 30, 1949 and age 72 if you were born on or after July 1, 1949), you are responsible for distributing any required minimum distribution amounts from your current retirement plan account (excluding Roth IRAs) in advance of the transfer or rollover.** Incomplete information will result in delays in processing your request. If you need assistance completing this form, please contact Shareholder Services at 1-800-332-5580.

**DIRECT ROLLOVER NOTICE**

If this contribution is a direct rollover from a qualified plan, 403(b), or 457 plan, I understand that by signing page 2 of this form, I am acknowledging that the direct rollover contribution is an irrevocable election and is no longer eligible for special tax treatment which may be accorded to distributions from a qualified plan, 403(b), or 457 plan.

**You should contact your current plan administrator or custodian prior to completing this form to ensure that you have received and completed any in-house forms that they may require. Direct rollovers from a qualified plan to an IRA can only be in the form of cash.**

**PARTICIPANT INFORMATION**

Name: \_\_\_\_\_ Cell Phone: (       ) \_\_\_\_\_

Address: \_\_\_\_\_ Alternate Telephone: (       ) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**INVESTMENT INSTRUCTIONS**

Complete items A, B, C and D.

- A.  I am opening a new IRA and have attached the required IRA Application.  
 Deposit the proceeds into my existing IRA. Account Number: \_\_\_\_\_

- B. Type of account transferring into:  Traditional IRA  Rollover IRA  SEP IRA  Roth IRA

C. Invest as follows:

Fund Name:	Percentage	%
_____	_____	_____
_____	_____	_____
_____	_____	_____

Must equal 100%

D. Type of Request:

- IRA Transfer of Assets (like accounts)\*  Direct Rollover from a Qualified Plan to an IRA  Direct Rollover from a 403(b) or 457 to an IRA

\* SEP IRAs can be transferred into a Traditional IRA.

\* SIMPLE IRAs (after the required two year holding period) can be transferred into a Traditional IRA.

Continued on next page

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**CURRENT CUSTODIAN AND ACCOUNT INFORMATION**

Type of account you are transferring/rolling over from (check one):

 Traditional/Rollover IRA     SEP-IRA     Roth IRA     403(b)     457 Plan     Qualified Plan\* SEP IRA that is being transferred into a Traditional IRA. SIMPLE IRA (after the required two year holding period) that is being transferred into a Traditional IRA.

\*If you are rolling over a qualified plan, please contact your current plan administrator for distribution/rollover in-house form requirements.

Please attach your most recent statement, if possible. Note: Your current custodian may require a Medallion Signature Guarantee to process your transfer or rollover request. Please see the Participant Authorization section for an explanation of the Medallion Signature Guarantee.

Name of current custodian: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Contact name: \_\_\_\_\_ Telephone number: (     ) \_\_\_\_\_

1) Investment to transfer: \_\_\_\_\_

Account number: \_\_\_\_\_ Share class: \_\_\_\_\_ CUSIP number: \_\_\_\_\_

 Liquidate Entire Account     Partial Dollar Amount \$ \_\_\_\_\_ or # of Shares \_\_\_\_\_     Transfer In-KindFor Certificates of Deposit:     Immediately\*     At Maturity Date \_\_\_\_\_

2) Investment to transfer: \_\_\_\_\_

Account number: \_\_\_\_\_ Share class: \_\_\_\_\_ CUSIP number: \_\_\_\_\_

 Liquidate Entire Account     Partial Dollar Amount \$ \_\_\_\_\_ or # of Shares \_\_\_\_\_     Transfer In-KindFor Certificates of Deposit:     Immediately\*     At Maturity Date \_\_\_\_\_**\*Note:** If you wish to have certificates of deposit transferred immediately and they have not matured, you may incur a redemption penalty. We cannot accept requests to transfer assets from certificates of deposit more than 60 days before their maturity.

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**PARTICIPANT AUTHORIZATION**

I authorize the transfer of assets or direct rollover as noted above to my Sit Mutual Funds IRA and authorize my current custodian, Sit Mutual Funds and BNY Mellon Investment Servicing Trust Company to process this request on my behalf. I understand it is my responsibility to insure the prompt transfer of assets or direct rollover by the current custodian. I have read and understand all information on this form and hereby provide the applicable authorization.

Participant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Mail to the following:****First Class Mail:**Sit Mutual Funds  
P.O. Box 9763  
Providence, RI 02940  
1-800-332-5580**Overnight Mail:**Sit Mutual Funds  
4400 Computer Drive  
Westborough, MA 01581

Medallion Signature Guarantee Stamp and Signature: An eligible guarantor is a domestic bank or trust company, securities broker/dealer, clearing agency or savings association that participates in a medallion program recognized by the Securities Transfer Agents Association. The three recognized medallion programs are the Securities Transfer Agents Medallion Program (known as STAMP), Stock Exchanges Medallion Program (SEMP), and the Medallion Signature Program (MSP). A notarization from a notary public is NOT an acceptable substitute for a signature guarantee.

Medallion Signature Guarantee Stamp