



Transfer Form

Overnight Delivery:
Wasatch Funds
235 W. Galena Street
Milwaukee, WI 53212

Regular Mail:
Wasatch Funds
P.O. Box 2172
Milwaukee, WI 53201-2172

Instructions: Use this form when transferring funds from an existing non-Wasatch Funds account to a Wasatch Funds account. Please call 800.551.1700 for Fund information, literature, prices and Wasatch account information. **If you are establishing a new account, you must also fill out a Wasatch Funds Application.** Include a copy of your most recent account statement from the current trustee or custodian.

TRANSFER COMING FROM:

Name of Trustee/Custodian (Bank, Mutual Fund Company, etc.)

Address

Phone Number

City / State / Zip

Account Number

—fold here

—fold here

1. INVESTOR INFORMATION (REQUIRED)

Name Social Security Number

Daytime Phone Number Evening Phone Number E-mail Address

Transfer to **existing** Wasatch account # _____

Transfer to new Wasatch account. Please include completed application.

2. TRANSFER INSTRUCTIONS (REQUIRED)

Select one: Liquidate and transfer cash **OR** Transfer existing Wasatch Fund assets in kind*
*Account registrations must be alike. Certain account types do not allow in-kind transfers and must be funded with cash.

Maturity date for Certificates of Deposit (if applicable): _____ Transfer immediately at maturity

Select one: Transfer my **entire** account (continue to section 3) Transfer a **portion** of my account as detailed below:

Investment Name	Symbol/CUSIP	Approximate Value
<input type="checkbox"/> All OR <input type="checkbox"/> # of Shares: _____	OR <input type="checkbox"/> \$ Amount: _____	OR <input type="checkbox"/> % of Assets: _____

Investment Name	Symbol/CUSIP	Approximate Value
<input type="checkbox"/> All OR <input type="checkbox"/> # of Shares: _____	OR <input type="checkbox"/> \$ Amount: _____	OR <input type="checkbox"/> % of Assets: _____

Investment Name	Symbol/CUSIP	Approximate Value
<input type="checkbox"/> All OR <input type="checkbox"/> # of Shares: _____	OR <input type="checkbox"/> \$ Amount: _____	OR <input type="checkbox"/> % of Assets: _____

Investment Name	Symbol/CUSIP	Approximate Value
<input type="checkbox"/> All OR <input type="checkbox"/> # of Shares: _____	OR <input type="checkbox"/> \$ Amount: _____	OR <input type="checkbox"/> % of Assets: _____

If you need more space, provide the same information on a separate sheet.

3. INVESTMENT INSTRUCTIONS (REQUIRED)

For Fund names, numbers and status, please see the "About Wasatch" insert in the Fulfillment Kit, log onto www.wasatchfunds.com or call Shareholder Services at 800.551.1700.

Fund Name	Fund #	Amount	or	If amount is unknown, state percentage (%)
_____	<input type="text"/> <input type="text"/>	\$ _____		_____ %
_____	<input type="text"/> <input type="text"/>	\$ _____		_____ %
_____	<input type="text"/> <input type="text"/>	\$ _____		_____ %
_____	<input type="text"/> <input type="text"/>	\$ _____		_____ %
_____	<input type="text"/> <input type="text"/>	\$ _____		_____ %
	TOTAL	\$ _____	or	_____ 100%

If you need more space, provide the same information on a separate sheet.

If a specific fund is not selected, your contribution will be invested in the WA-Federated Money Market Account until we receive further notice.

4. ASSET TRANSFER (REQUIRED)

Typically, the registration type and ownership of the account you are transferring should match the registration type and ownership of the account you maintain or are opening with Wasatch Funds. Please see your tax advisor regarding the tax consequences of transferring, rolling over, or converting your retirement assets.

Type of account you are transferring FROM
(please select one):

IRA

- Traditional IRA
- Rollover IRA
- Roth IRA
- SEP IRA
- SIMPLE IRA
- Coverdell IRA
- Qualified Plan

Please specify: _____

- Employer Sponsored Plan or Roth Employer Sponsored Plan
- Please specify: _____

NON-IRA

- Individual
- Joint
- UGMA/UTMA
- Corporation
- Trust/Estate
- Partnership
- Other

Please specify: _____

Type of account you are transferring TO
(please select one):

IRA

- Traditional IRA
- Rollover IRA
- Roth IRA
- SEP IRA
- SIMPLE IRA
- Coverdell IRA

NON-IRA

- Individual
- Joint
- UGMA/UTMA
- Corporation
- Trust/Estate
- Partnership
- Other

Please specify: _____

If transferring retirement assets, did you inherit these assets from a deceased participant or beneficiary IRA?

- Yes* No

*If yes, are you the spouse and sole beneficiary of the assets and opting to treat the IRA as your own?

- Yes No

When transferring retirement assets, if you are age 70½ or older you must take your minimum annual distribution from your account with the current custodian prior to transferring assets to Wasatch Funds.

Please check with your current trustee/custodian to determine if a Medallion signature guarantee is required to process this transfer. Upon receipt of the completed form(s), we will contact the current trustee/custodian and submit the request for transfer. We will notify you when the transfer has been completed and your funds have been invested in Wasatch Funds.

Complete only if you are converting a Traditional, SEP, or SIMPLE IRA to a Roth IRA.

Notice: The distributions you receive from your IRA are subject to Federal income tax withholding unless you waive withholding. You may waive withholding on your IRA distribution by returning a signed and dated IRS Form W-4P, Withholding Certificate for Pension or Annuity Payments, or substitute Form W-4P to the Custodian. Withholding will apply to the total amount of the distribution, whether taxable or not. If you waive withholding on your IRA distribution, or if you do not have enough Federal income tax withheld from your IRA distribution, you may be responsible for payment of estimated tax. You may incur penalties under the estimated tax rules if your withholding and estimated tax payments are not sufficient. You are responsible for determining and paying all Federal, and if applicable, state and local taxes on distributions from all IRAs you own. If you do not waive withholding or elect an alternative withholding amount, ten percent will be withheld from your nonperiodic IRA distribution. Your election is valid until you revoke it. You may change your withholding election by completing another Form W-4P or substitute. If you are a non-resident alien you may not use Form W-4P to withhold income tax or to waive withholding.

Election: Unless you indicate a different withholding amount below or you waive withholding by indicating your election below, ten percent will be withheld from your IRA distribution.

- I do not want federal income tax withheld from distributions from this account.
- I want federal income tax of 10% withheld from distributions from this account.
- I want federal income tax of ____% (greater than 10%) withheld from distributions from this account.

6. SIGNATURE(S) (REQUIRED)

To current trustee/custodian:

Please consider this authorization to transfer the assets in the account identified above section 1. It is my intention to transfer these assets to the fund(s) named in section 3 for which UMB Bank, n.a. acts as trustee/custodian.

I certify that I have received and read the prospectus(es) for the fund(s) into which I am transferring my assets.

I further acknowledge that the Wasatch Funds are distributed by ALPS Distributors, Inc. The WA-Federated Money Market Account is distributed by Federated Securities Corp. and offered by a separate prospectus. The WA-Federated Money Market Account and Federated Securities Corp. are not affiliated persons of the Wasatch Funds or their investment advisor, Wasatch Advisors, Inc. Through an agreement with federated Securities Corp. and/or its affiliates, Wasatch Advisors, Inc. is providing administrative and recordkeeping services for the WA-Federated Money Market Account.

Signature of Individual or Custodian	Date
Signature of Joint Owner, Trustee, Partner, Officer, Other	Date
Signature of Joint Owner, Trustee, Partner, Officer, Other	Date
Signature of Joint Owner, Trustee, Partner, Officer, Other	Date

Medallion signature guarantee (if required)

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Stamp here

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Go paperless! You can receive shareholder reports (prospectus updates, annual and semi-annual reports) and statements (transaction confirmations and account statements) electronically. To enroll for this service, please visit our web site.

7. ACCEPTANCE

This portion to be completed by UMB Bank, n.a., custodian for Wasatch Funds.

Please be advised that UMB Bank, n.a. has been appointed to serve as successor custodian of this account. For assets transferred in cash please send a check representing the liquidation of the investments indicated within this form along with a copy of this form to identify the check as a transfer of assets to the address below. For existing Wasatch assets to be transferred in kind please execute the requested transfer as indicated within this form.

For assets transferred in cash please remit check payable to:

Wasatch Funds

FBO: _____

Account #: _____

P.O. Box 2172

Milwaukee, WI 53201-2172

Successor Trustee/Custodian Signature

Date