



# IVA Funds Gift or Transfer of Shares Form

PLEASE PRINT ALL ITEMS CLEARLY

This form may be used to make a gift or transfer shares from an existing non-retirement account to a new or existing non-retirement account. All transfers to a new account will require a New Account Application. Do not use this form for an IRA.

**Mail To:** IVA Funds  
P.O. Box 219061  
Kansas City, MO 64121-9061

**Overnight Mail To:** IVA Funds  
430 W 7<sup>th</sup> Street  
STE 219061  
Kansas City, MO 64105-1407

For more information, call 1-866-941-4482 or visit the Funds' website at [www.ivafunds.com](http://www.ivafunds.com).

## 1. CURRENT SHAREHOLDER INFORMATION

Complete a separate form for each account being transferred.

Account Number	<input type="text"/>	IVA Worldwide Fund	Class A	Class C	Class I
		IVA International Fund	Class A	Class C	Class I
<b>Account Owner</b>					
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
First Name	MI	Last Name			Suffix
<input type="text"/>		<input type="text"/>			<input type="text"/>
Social Security Number		Date of Birth (MM/DD/YYYY)			Telephone Number
<input type="text"/>		<input type="text"/>			<input type="text"/>
<b>Joint Account Owner (if applicable)</b>					
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
First Name	MI	Last Name			Suffix
<input type="text"/>		<input type="text"/>			<input type="text"/>
Social Security Number		Date of Birth (MM/DD/YYYY)			Telephone Number
<input type="text"/>		<input type="text"/>			<input type="text"/>
<b>Mailing Address</b>					
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Street Number	Street Name		Apt. # / Suite		P.O. Box
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
City		State		Zip Code	
<input type="text"/>		<input type="text"/>		<input type="text"/>	

## 2. REASON FOR TRANSFER

Prior to completing this section, you may wish to consult your accountant or tax adviser. On October 3, 2008, the Emergency Economic Stabilization Act, HR1424, was signed into law, which included provisions from the Energy Improvement and Extension Act of 2008, requiring mutual funds to provide cost basis reporting to their shareholders. IVA Funds will provide cost basis information to you and the IRS for shares purchased on and after January 1, 2012 (covered shares). If you have purchases or transfers made into your account with shares purchased prior to January 1, 2012 (non-covered shares), we may be able to provide you with an average cost for these shares.

To ensure accurate cost basis reporting, indicate the type of transfer requested and provide transfer details where applicable.

Re-registration

Change of ownership due to inheritance  
Date of Death (MM/DD/YYYY)

Alternate Valuation Date <sup>1</sup> (MM/DD/YYYY)  -OR- Alternate Value <sup>1</sup> \$

Gift/Transfer of shares to a new/existing account  
Date of Gift (MM/DD/YYYY)

If gift/transfer of shares is selected as a reason for transfer, the account owner receiving the shares must acknowledge whether they will accept the shares valued at fair market value of the date of gift or the settlement date if shares should be transferred at a loss by signing the below.

Fair Market Value Acceptance

Signature of New Owner

Date (MM/DD/YYYY)

<sup>1</sup> There is a special rule under the estate tax law that allows the executor (the person in charge of the estate) to elect a different valuation date. If you select an alternate valuation date or value, please consult your tax advisor for more details.

### NOTE:

- If a reason is not provided, this transfer will be defaulted to a transfer due to gift.
- Re-registrations and inheritance transfers will proportionally deplete gains and losses unless alternate instructions are provided below.
- For transfers due to inheritance on accounts with Joint Tenants with Rights of Survivorship (JWROS), the cost basis split will be 50/50 with half the basis determined using the fair market value of the date of death and the other half maintaining the current cost basis.
- After you have received confirmation of your transfer, we recommend that you review your tax lots online at [www.ivafunds.com](http://www.ivafunds.com).

### 3. TRANSFER INSTRUCTIONS

Transfer the amount indicated below: (choose one of the following)

Transfer percentage of account identified in Section 1:  % (if total account, enter 100%)

Transfer dollars: \$

Transfer shares: #

Transfer to: (choose one of the following)

Existing account number

New account (Please have the new owner complete a New Account Application and include it with this form)

### 4. COST BASIS INFORMATION

The cost basis method that is currently on your account will be utilized to deplete the shares for this transaction unless you provide specific share lots below or change the cost basis method on your account. Should you wish to change your cost basis method, please contact a Shareholder Services representative at 1-866-941-4482.

Date of Purchase (MM/DD/YYYY)	<input type="text"/>	Number of Shares	<input type="text"/>
Date of Purchase (MM/DD/YYYY)	<input type="text"/>	Number of Shares	<input type="text"/>
Date of Purchase (MM/DD/YYYY)	<input type="text"/>	Number of Shares	<input type="text"/>
Date of Purchase (MM/DD/YYYY)	<input type="text"/>	Number of Shares	<input type="text"/>
Date of Purchase (MM/DD/YYYY)	<input type="text"/>	Number of Shares	<input type="text"/>
Date of Purchase (MM/DD/YYYY)	<input type="text"/>	Number of Shares	<input type="text"/>

If you have shares transferred that were purchased prior to January 1, 2012 (non-covered shares), we may be able to provide you with an average cost for these shares upon depletion. This information will be provided to you on your 1099-B (or on a cost basis statement) and you may choose to use the information for your taxes. (This information will be noted as non-covered for the IRS if provided on 1099-B.)

### 4. SIGNATURES & AUTHORIZATION

A Medallion Signature Guarantee or Signature Verification Program (SVP) is required.

I/we request that the instructions indicated on this form be made to my/our account. I/we indemnify IVA Funds, its transfer agent, and any officers, directors, employees, or agents of these entities for following the instructions I/we have indicated on this form. I/we understand that once this request is received and processed the transactions cannot be reversed.

Signature of Existing Account Owner/Trustee/Authorized Individual

Date (MM/DD/YYYY)

Signature of Existing Account Owner/Trustee/Authorized Individual (if applicable)

Date (MM/DD/YYYY)

Affix Medallion Signature Guarantee or Signature Verification Program (SVP) Here

**NOTE:** A medallion signature guarantee or signature verification program stamp may be obtained from a domestic bank or trust company, broker, dealer, clearing agency, savings association, or other financial institution which participates in a Medallion program recognized by the Securities Transfer Association.