

# IRA TRANSFER/ROLLOVER FORM

**IMPORTANT:** If transferring to a new WesMark Funds account, please complete a new Account Application Form along with Transfer of Assets Form.

## SECTION 1: Account Information

<b>Account Number</b>	<b>Owner's Name (Last, First, Middle Initial)</b>
Owner's Social Security Number	Date of Birth (MM/DD/YY)
Address of Residence - <i>P.O. Box is not accepted</i>	City, State, Zip Code
Mailing Address - <i>If different from above (P.O. Boxes accepted)</i>	City, State, Zip Code
(      ) Day Phone	(      ) Evening Phone
E-mail Address	

## SECTION 2: Current Custodian

To avoid delays, please confirm your current Custodian's address and if they require a Signature Guarantee. If required please complete Section 6. Attach a copy of the current account statement.

Type of Plan Being Transferred/Rolled Over	
<b>Current Trustee/Custodian/Employer/Plan Administrator</b>	Account Number
Address of Custodian (Required) - <i>P.O. Box not accepted</i>	City, State, Zip
Mailing Address - <i>If different from above (P.O. Boxes accepted)</i>	City, State, Zip
(      ) Day Phone	(      ) Evening Phone

## SECTION 3: Transfer/Direct Rollover Instructions

I have established an individual retirement account (IRA) with WesBanco Bank. Please transfer my assets and follow the instructions below.

I authorize and direct the transfer of the amount stated below to the WesMark Funds.

Liquidate all assets in my IRA Account Number and transfer the entire proceeds.

Liquidate only part of my assets in my IRA Account Number and transfer:

Fund Name	Fund Number	Ticker	Amount	or	Percent	%
WesMark Large Company Fund	16803	WMKGX	\$			%
WesMark Government Bond Fund	16804	WMBDX	\$			%
WesMark Balanced Fund	16805	WMBLX	\$			%
WesMark West Virginia Municipal Bond Fund	16802	WMKMX	\$			%
WesMark Small Company Fund	16801	WMKSX	\$			%
WesMark Tactical Opportunity Fund	16806	WMKTX	\$			%
<b>Total</b>			<b>\$</b>		<b>100</b>	<b>%</b>

Liquidate ONLY the assets listed below (**For CD's**): Account Number \_\_\_\_\_ Immediately \_\_\_\_\_ At maturity on \_\_\_\_\_ date

**Direct Rollover.** Directly rollover my qualified plan distribution to my IRA. I would like a distribution from my qualified plan for the following reason:

Termination of Employment      Death      Plan Termination      Attainment of Retirement Age (Typically 59 ½)

Fund Name	Fund Number	Ticker	Amount	or	Percent	%
WesMark Large Company Fund	16803	WMKGX	\$			%
WesMark Government Bond Fund	16804	WMBDX	\$			%
WesMark Balanced Fund	16805	WMBLX	\$			%
WesMark West Virginia Municipal Bond Fund	16802	WMKMX	\$			%
WesMark Small Company Fund	16801	WMKSX	\$			%
WesMark Tactical Opportunity Fund	16806	WMKTX	\$			%
<b>Total</b>			<b>\$</b>		<b>100</b>	<b>%</b>

**SECTION 3: Transfer/Direct Rollover Instructions (continued)**

**"In Kind" Transfer.** If the account listed in Section 2 contains shares of the WesMark Funds family of funds – you may choose to transfer them "In Kind." To transfer all other assets, they must be liquidated.

Fund Name	Fund Number	Ticker	Amount	or	Percent	%
			\$			%
			\$			%
			\$			%
			\$			%
<b>Total</b>			<b>\$</b>		<b>100</b>	<b>%</b>

Make Checks Payable to:      WesMark Funds      Client Name \_\_\_\_\_  
    FBO Traditional IRA, SEP IRA, or Roth IRA      SSN \_\_\_\_\_

**SECTION 4: Transfer/Rollover Investment Allocation**

I authorize and direct the transfer of the amount indicated in Section 3 to the WesMark Funds per the below allocation.

You may not transfer from a Roth IRA to a Traditional IRA or a SEP IRA.

Open a new account – I have attached a completed IRA application      Invest in my existing WesMark Funds IRA account \_\_\_\_\_

**Investment Allocation**

Fund Name	Fund Number	Ticker	Amount	or	Percent	%
			\$			%
			\$			%
			\$			%
			\$			%
<b>Total</b>			<b>\$</b>		<b>100</b>	<b>%</b>

**SECTION 5: Authorization/Signatures**

Current Trustee/Custodian: I have established an Individual Retirement Account or 403(b)(7) Custodial Account with the WesMark Funds and have appointed WesBanco Bank 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 have begun taking my minimum required distributions from the account which is being transferred to the WesMark Funds, I understand and acknowledge that I am responsible for notifying the WesMark Funds of the existence and birth date of any spouse beneficiary which existed on my account as of my required beginning date, 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) \_\_\_\_\_

**SECTION 6: Signature Guarantee**

A signature guarantee is required if redeeming within 30 days of changing bank information or address, in addition to sending 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 the Medallion program requirements. Signatures notarized by a Notary Public are not acceptable.

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]

**SECTION 7: WesBanco Bank**

To be completed by the Custodian.

This is to inform you that WesBanco Bank will accept the account referenced in Section 2.

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 WesBanco Bank as Custodian for the WesMark Funds.

WesBanco Bank Authorized Representative

Date (MM/DD/YY)

**Please mail completed form to:****Regular Mail:**

WesMark Funds  
One Bank Plaza, Fourth Floor  
Wheeling, WV 26003

**Overnight Mail:**

WesMark Funds  
1290 Broadway, Suite 1000  
Denver, CO 80203

or Fax to 866-205-1499

If you have any questions, please contact an Investor Service Representative at 1-800-864-1013.

**SECTION 8: Acceptance by Custodian to Be Completed by Wesbanco Bank, Custodian (For Retirement Accounts Only)**

NOTICE TO EMPLOYER, CUSTODIAN, TRUSTEE OR INSURANCE CARRIER

An IRA account has been established for the above-named individual. WesBanco Bank, hereby agrees to serve as custodian for the account of the above-named individual and, in that capacity, agrees to receive the direct transfer of the assets listed in Section 3. Please make the check payable as follows:

WesBanco Bank, Custodian FBO \_\_\_\_\_ IRA

**Mail To:**

WesMark Funds  
1 Bank Plaza  
Wheeling, WV 26003

**Phone Contact:**

Shareholder Services  
(800) 864-1013

ACCEPTED: WESBANCO BANK, CUSTODIAN

Authorized Signature

Date (MM/DD/YY)

**SECTION 9: Acceptance by Wesmark Funds**

WesMark Funds agrees to accept the transfer of assets for the account of the above named person(s). Please make the check payable to WesMark Funds and mail to the above address with a copy of this transfer authorization.

Authorized Signature

Date (MM/DD/YY)

**INTERNAL USE ONLY:**

Registered Rep's Name (Last, First, Middle Initial)

Broker Dealer Name

Address

City, State, Zip Code

Representative #

( )  
Phone

Broker Number

Representative Signature

Principal Approval