

IRA Transfer or Direct Rollover Request



A fund family of Everence

- Please send the completed form to:

Regular mail

Praxis Mutual Funds
 c/o U.S. Bancorp Fund Services LLC
 P.O. Box 701
 Milwaukee, WI 53201-0701

Overnight mail

Praxis Mutual Funds
 c/o U.S. Bancorp Fund Services LLC
 615 E. Michigan St., 3rd Floor
 Milwaukee, WI 53202-5207

(800) 977-2947

- Praxis will forward these instructions to your present trustee/custodian.
- Attach a copy of your last account statement. **If this is an annuity, please attach your contract.**

1. Participant information

Name _____ Social Security number _____
 First middle last Birth date _____
 Address _____ Telephone *daytime* _____
 Street _____ *evening* _____
 City State ZIP code

2. Present custodian

Custodian/trustee _____ Type of account being transferred/rolled over:
 Account number _____ SEP IRA
 Address _____ IRA
 Street _____ Inherited IRA
 City State ZIP code SIMPLE IRA* – Original SIMPLE IRA funding date _____
 Qualified Retirement Plan (Pension, Profit Sharing, 401(k) or 403(b) plan)
 Contact name _____ Other _____

Telephone number (required) _____

**SIMPLE IRA funds cannot be combined with traditional IRA funds during the first two years of initial participation in the SIMPLE IRA.*

3. Investment selection

- I am opening a new account and **have attached a new application.**
- I have an existing IRA. Invest the proceeds as follows:

Fund selection	Percentage	Existing Account No.
Genesis Portfolios		
Conservative (3171)	_____ %	_____
Balanced (3172)	_____ %	_____
Growth (3173)	_____ %	_____
Money Market Account (3156)	_____ %	_____
Impact Bond Fund (3157)	_____ %	_____
Value Index Fund (3160)	_____ %	_____
Growth Index Fund (3162)	_____ %	_____
Small Cap Index Fund (3161) (formerly named Small Cap Fund)	_____ %	_____
International Index Fund (3163)	_____ %	_____
Total	100 %	

