

Exchange by phone

Allow

Do Not Allow

Account Preferences Change Form

- · Use this form to add or change account preferences and options on your existing mutual fund account
- · Please complete separate forms for accounts that are not identically registered
- If your change requires a Medallion Signature Guarantee stamp, Guarantee stamp, the original form must be mailed

1. ACCOUNT INFORMATION	ON (*Required Ir	nformation)				
Name of Fund*		Account Number*				
Owner's Name* (First, M.I., Last)		Joint Owner's Name* (Joint Owner's Name* (First, M.I., Last)			
Street Address (Physical Address)*		Street Address (Physic	Street Address (Physical Address)*			
Telephone Number	Date of Birth	Telephone Number	Date of E	Birth		
2. ADDRESS UPDATE	_		_	_		
Mailing Address		City	State	Zip Code		
NOTE: If you are using a P.O. I	Box for a mailing a	address you must also include your phys	sical street addres	s		
Street Address		City	State	Zip Code		
New Telephone Number		Cell Phone	Home Phone			
NOTE: Descriptions to a re-				. Madallian Cinna		
		ress will require the request to come or details regarding potential restriction		i Medaillon Signa	iture	
Add Interested Party to re	eceive statements					
Name						
Mailing Address		City	State	Zip Code		
3. TELEPHONE PRIVILEGI	ES					
Redemption by phone		Do Not Allow				

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4. DIVIDEND AND CAPITAL GAIN DISTRIBUTIONS

Dividends Reinvest Cash*
Capital Gains Reinvest Cash*

*If 'Cash' is selected, please indicate how you would like your distributions to be paid. If no selection is made we will default to mail a check to your address of record.

Mail a check to my address of record

Send my Dividends and Capital Gains to the bank account listed in Section 6.

Reinvest my Dividends and Capital Gains in to an additional existing account

Account Number

Fund Name

5. NAME CHANGE

Please update the name on my account from

to my new name

*Please include of copy of your court documents (for example, Marriage Certificate, Divorce Decree, etc...) that certify your name change. If no supporting documents are included, you must sign Section 9 in both your old and new name and contain a Medallion Signature Guarantee.

**Your signature in section 8 must include a Medallion Signature Guarantee (MSG) if your account balance is over \$100,000.00

6. BANK INFORMATION

Request Type

Adding new bank information to my account

Change the existing bank information on my account

NOTE: Redemptions to a newly added or updated bank account will require the request to come in writing with a Medallion Signature Guarantee. Please see the Fund's prospectus for details regarding potential restriction periods.

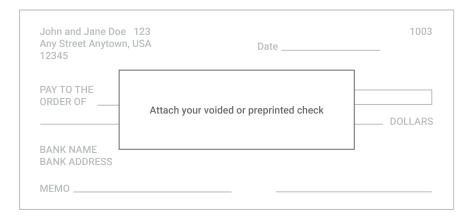
Account Type:

Checking

Savings

Please attach a voided check for your bank account. We are unable to update or add a new bank account unless we receive a voided check for bank verification.

Note: Temporary or starter checks are not accepted.



7. COST BASIS ELECTIONS

Use this section to elect or change a method of cost basis calculation for shares purchased in a non-IRA account. Cost basis and gain/loss information from sales of these shares will be reported to you and the Internal Revenue Service (IRS). You will need to report capital gains/losses to the IRS when you file your taxes.

Please note: Neither Ultimus Fund Solutions, LLC (UFS), nor its representatives are legal or tax advisors. Before making any financial commitment or decisions regarding the issues discussed here, consult with the appropriate professional advisor.

UFS' default cost basis calculation method is Average Cost. Unless you elect a specific cost method in this section or at the time of your transaction (if applicable), UFS' default method will apply on taxable transactions that occur in your account from shares purchased.

Average Cost
First-In, First-Out
Last-In, First-Out
High Cost In, First-Out
Highest Cost Long-Term In, First Out
Highest Cost Short-Term In, First Out
Lowest Cost In, First Out
Lowest Cost Long-Term In, First Out
Lowest Cost Short-Term In, First Out
Specific Share Identification*

NOTE: If you would like to select a different cost basis method for each fund in your account, please provide that information on a separate sheet with the date and your signature.

*If you choose Specific Share Identification and do not provide specific instructions in good order at the time of each sale (including systematic withdrawals), we will default to the First In First Out method.

Please apply the above changes to future purchases only
Please apply the above changes for future purchase as well as for current cost basis sharelots (if applicable)

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8. TRUSTED CONTACT

Relationship to Account Owner

Designating a trusted contact is not required and does not authorize the named individual to make trades in your account or to make changes to your account, but it does authorize us to communicate with the trusted contact regarding the account.

By providing the information in this section, I authorize to contact the person listed below and to disclose information about me and the account in the following circumstances: to prevent the presumption of abandonment, to address possible financial exploitation, to confirm the specifics of my current contact information, health status, or the identity of any legal guardian, executor, trustee, or holder of a power of attorney or as otherwise permitted by federal law

Note:

- There can be only be one trusted contact per account.
- · Your trusted contact should not be the financial professional on record.

Full Name of Trusted Contact		
Mailing Address (Including apartment or P.O. Box number)		
City	State	ZIP
Foreign Routing or Postal Code	Country of Residence if outside the U.S.	
Cell Phone Number	Email Address	

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9. SIGNATURE AND MEDALLION SIGNATURE GUARANTEE

I authorize the Fund and its agents to act upon instructions (by phone, in writing, on-line or by other means) believed to be genuine and in accordance with procedures described in the prospectus for this account or any account into which exchanges are made. I agree that neither the Funds nor the transfer agent will be liable for any loss, cost or expenses for acting on such instructions, provided the Fund employs reasonable procedures to confirm that instructions communicated are genuine.

By signing and including bank information, I authorize credits/debits to/from the bank account referenced in conjunction with the account option(s) selected. I agree that Ultimus Fund Solutions, LLC shall be fully protected in honoring any such transaction. I also agree that Ultimus Fund Solutions, LLC may make additional attempts to debit/credit my account if the initial attempt fails and I will be liable for any associated costs. All account options elected will become part of the account application and the terms, representations and conditions thereof.

All Account Owners Must	Sian
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Signature of Owner, Trustee, or Custodian

Signature of Joint Owner or Co-Trustee (if applicable)

Date

Note: Please sign your name exactly how it appears in the registration.

If requesting a name change in Section 5, please sign in your old name

Signature of Owner Date

A Medallion Signature Guarantee Stamp is designed to protect the account from fraud.

A Medallion Signature Guarantee can be obtained from a bank, broker-dealer, credit union, national securities exchange, savings association or other financial intermediaries that are members of an Approved Medallion Guarantee Program. The stamp must also contain the letter prefix (A, B, C, D, E, F, X, Y or Z) that identifies the grantor's maximum surety amount, and that bond must cover the amount of the requested transaction. Please note that a Notary Public stamp is not acceptable.

Medallion Signature Guarantee

OR

Signature Validation Stamp

Medallion Signature Guarantee

OR

Signature Validation Stamp

Date

10. MAILING INSTRUCTIONS

Please send completed form to:

Regular Delivery
Ultimus Fund Solutions, LLC
P.O Box 46707
Cincinnati, OH 45246

Overnight Delivery
Ultimus Fund Solutions, LLC
225 Pictoria Dr, Suite 450
Cincinnati, OH 45246

Fax 1-877-513-0756