

1. INSTRUCTIONS

This form is used to transfer an existing IRA to your Community Capital Funds IRA.

- If a new account is being opened, complete this IRA Asset Transfer Form and an Individual Retirement Account Application.
- Include a statement from your existing IRA with this form.
- If you are transferring a passbook/certificate type account or an insurance type IRA, you must submit the passbook, certificate or insurance policy with this form.
- **The current custodian or trustee holding your IRA may require a "Signature Guarantee" or have other requirements. Please determine the requirements of your current custodian or trustee to avoid delays in processing your transfer.**
- Mail this completed form (along with your Individual Retirement Account Application, if opening a new account) to:

Community Capital Funds
P.O. Box 588
Portland, ME 04112

or Overnight Delivery to:

Community Capital Funds
c/o Apex Fund Services
Three Canal Plaza, Ground Floor
Portland, ME 04101

Contact us toll-free at: (888) 272-0007

2. YOUR COMMUNITY CAPITAL FUNDS IRA

Your Name	Your Account Number (unless new account)	Social Security Number
Your Mailing Address		
City	State	Zip Code
E-mail		
Birth Date	Telephone (day)	Telephone (evening)
Please select the fund(s) you wish the transfer proceeds to invest in:		
	CCM Alternative Income Fund	_____ %
	CCM Community Impact Bond Fund - Retail	_____ %

3. ACCOUNT BEING TRANSFERRED

Name of the Institution Currently Holding Your IRA (Shareholder Servicing Agent/Transfer Agent if mutual fund)			
Your Custodian's Mailing Address			
City	State	Zip Code	Customer Service Telephone Number
Account Number		Account Executive (if any)	

4. TRANSFER INSTRUCTIONS

☐ Mutual Fund Company Transfer

Name of Fund _____	Select One:	<input type="checkbox"/> Liquidate All Shares	<input type="checkbox"/> Liquidate \$ _____
Name of Fund _____	Select One:	<input type="checkbox"/> Liquidate All Shares	<input type="checkbox"/> Liquidate \$ _____
Name of Fund _____	Select One:	<input type="checkbox"/> Transfer In-Kind All Shares	<input type="checkbox"/> Transfer In-Kind _____

☐ Securities Transfer

Security Name _____	Select One:	<input type="checkbox"/> Liquidate All Shares	<input type="checkbox"/> Liquidate \$ _____
Security Name _____	Select One:	<input type="checkbox"/> Liquidate All Shares	<input type="checkbox"/> Liquidate \$ _____

☐ **Certificate of Deposit Transfer**

- ☐ Transfer the proceeds of my CD, which matures on _____, upon maturity
Date (MM/DD/YYYY)
- ☐ Transfer the proceeds of my CD immediately

Note: If you are transferring a CD, and you wish to transfer your CD at maturity, please check the "Upon Maturity" box above and send this form at least two weeks prior to maturity. There may be a premature withdrawal penalty if you choose to liquidate a CD prior to maturity.

5. SIGNATURE AND AUTHORIZATION

I hereby agree to the terms and conditions set forth in this IRA Asset Transfer Form, and acknowledge establishing an IRA in the Community Capital Funds through my execution of a Community Capital Funds IRA Application.

Please Note: The custodian or trustee holding your current IRA may require a "*Signature Guarantee*" prior to releasing your assets. To avoid processing delays, please check with your custodian to determine if a "*Signature Guarantee*" is required.

Your Signature

Date (MM/DD/YYYY)

Signature Guarantee (if required by your current custodian)

☐ **Fed Wire Asset Transfer:** By checking this box, I authorize my IRA asset transfer(s) to be transferred via Fed Wire. I understand that my resigning trustee/custodian may charge a wire fee for this service.

DO NOT COMPLETE THE SECTION BELOW

INSTRUCTIONS TO RESIGNING TRUSTEE/CUSTODIAN

Type of IRA: ☐ TRADITIONAL ☐ SEP-IRA ☐ ROTH ☐ QUALIFIED PLAN ROLLOVER ☐ BENEFICIARY IRA

Please forward a check made payable to the **Community Capital Funds, FBO** _____

Please include the following reference number on the check _____

Please forward the check or draft and any accompanying documents to:

Regular Mail

Community Capital Funds
P.O. Box 588
Portland, ME 04112

Overnight Delivery

Community Capital Funds
c/o Apex Fund Services
Three Canal Plaza, Ground Floor
Portland, ME 04101

Wire Delivery

UMB Bank
Kansas City, MO
Atlantic Shareholder Services, LLC FBO
Community Capital Funds
ABA 101000695
Account # 9872324919
Community Capital Funds
(Fund Account Number)

Contact us toll-free at: (888) 272-0007

INSTRUCTIONS FROM ACCEPTING CUSTODIAN

The Custodian hereby accepts its appointment as IRA Custodian, agrees to accept the transfer described above and, upon receipt, will apply the proceeds to the Community Capital Funds IRA established on behalf of the individual named herein.

Authorized Signature (On behalf of the Community Capital Funds)

Date (MM/DD/YYYY)