

# MUTUAL FUND TRANSFER FORM

## MARSICO FUNDS®

### IMPORTANT INFORMATION

If you have any questions about this form, call **888-860-8686**. Use this form to purchase Marsico Funds when all or part of your holdings are being redeemed from another mutual fund account. **Do not use this form for IRA Transfers.** If you are establishing a new account with Marsico Funds, a Marsico Funds Account Application must accompany this form. Please read the applicable Prospectus carefully before investing. **Copies of this document shall be treated as original for all purposes. Void if not signed by account holder.**

### INVESTORS ARE REMINDED THAT

- A medallion signature guarantee is most likely required. Please confirm with your current mutual fund group.
- If a medallion signature guarantee is required, it may be obtained from a U.S. bank, member of a national securities exchange, savings and loan association, credit union, broker or other acceptable financial institution. A stamp or seal by a notary public will NOT be accepted. Corporations, trusts or estates may be required to submit additional documentation.
- If share certificates were issued for your current investment, they must be duly endorsed and accompany this form. For your protection, you are encouraged to send them by registered mail.

## 1 INVESTOR INFORMATION

Social Security Number _____		Date of Birth _____	
Name (first, middle, last) _____			
Street _____			
City, State, ZIP Code _____			
( ) _____		( ) _____	
Daytime Telephone _____		Evening Telephone _____	

## 2 TYPE OF ACCOUNT

### Type of plan you now have:

- Individual
- Joint
- UGMA/UTMA
- Trust
- Corporation
- Partnership
- Other \_\_\_\_\_

## 3 PLEASE REDEEM MY ACCOUNT FROM

Fund Name _____	
Account Number or Certificate of Deposit _____	
( ) _____	
Telephone Number _____	
\$ _____	
Approximate Value _____	Maturity Date (if applicable) _____
<input type="checkbox"/> Transfer Immediately or <input type="checkbox"/> At Maturity	
Penalties may be assessed by your current Trustee/Custodian for early withdrawal. Please attach a copy of your current account statement(s).	

## REDEMPTION COMING FROM

Name of Current Custodian (bank, mutual fund, etc.) _____	
Address _____	
City, State, ZIP Code _____	

## 4 YOUR FUND SELECTION(S) (Please Check One)

### Invest the proceeds in my existing Marsico Funds account.

<b>40</b> – Marsico Focus Fund (Investor Class)	<input type="checkbox"/>	\$ _____	%
Account Number		Amount	or Percentage
<b>41</b> – Marsico Growth Fund (Investor Class)	<input type="checkbox"/>	\$ _____	%
Account Number		Amount	or Percentage
<b>42</b> – Marsico Midcap Growth Focus Fund (Investor Class)	<input type="checkbox"/>	\$ _____	%
Account Number		Amount	or Percentage
<b>43</b> – Marsico International Opportunities Fund (Investor Class)	<input type="checkbox"/>	\$ _____	%
Account Number		Amount	or Percentage
<b>45</b> – Marsico Global Fund (Investor Class)	<input type="checkbox"/>	\$ _____	%
Account Number		Amount	or Percentage
<b>540</b> – Marsico Focus Fund (Institutional Class)	<input type="checkbox"/>	\$ _____	%
Account Number		Amount	or Percentage
<b>541</b> – Marsico Growth Fund (Institutional Class)	<input type="checkbox"/>	\$ _____	%
Account Number		Amount	or Percentage
<b>542</b> – Marsico Midcap Growth Focus Fund (Institutional Class)	<input type="checkbox"/>	\$ _____	%
Account Number		Amount	or Percentage
<b>543</b> – Marsico International Opportunities Fund (Institutional Class)	<input type="checkbox"/>	\$ _____	%
Account Number		Amount	or Percentage
<b>545</b> – Marsico Global Fund (Institutional Class)	<input type="checkbox"/>	\$ _____	%
Account Number		Amount	or Percentage
<b>Total Investment</b>		\$ _____	100%
		Amount	

### Open a new Marsico Funds Account

If you are opening a new account, a completed and signed Account Application must accompany this form.

<b>40</b> – Marsico Focus Fund (Investor Class)	<input type="checkbox"/>	\$ _____	%
Account Number		Amount	or Percentage
<b>41</b> – Marsico Growth Fund (Investor Class)	<input type="checkbox"/>	\$ _____	%
Account Number		Amount	or Percentage
<b>42</b> – Marsico Midcap Growth Focus Fund (Investor Class)	<input type="checkbox"/>	\$ _____	%
Account Number		Amount	or Percentage
<b>43</b> – Marsico International Opportunities Fund (Investor Class)	<input type="checkbox"/>	\$ _____	%
Account Number		Amount	or Percentage
<b>45</b> – Marsico Global Fund (Investor Class)	<input type="checkbox"/>	\$ _____	%
Account Number		Amount	or Percentage
<b>540</b> – Marsico Focus Fund (Institutional Class)	<input type="checkbox"/>	\$ _____	%
Account Number		Amount	or Percentage
<b>541</b> – Marsico Growth Fund (Institutional Class)	<input type="checkbox"/>	\$ _____	%
Account Number		Amount	or Percentage
<b>542</b> – Marsico Midcap Growth Focus Fund (Institutional Class)	<input type="checkbox"/>	\$ _____	%
Account Number		Amount	or Percentage
<b>543</b> – Marsico International Opportunities Fund (Institutional Class)	<input type="checkbox"/>	\$ _____	%
Account Number		Amount	or Percentage
<b>545</b> – Marsico Global Fund (Institutional Class)	<input type="checkbox"/>	\$ _____	%
Account Number		Amount	or Percentage
<b>Total Investment</b>		\$ _____	100%
		Amount	

Application is continued on the back

**5 SIGNATURES** (Exactly as Registered)

**To Current Trustee/Custodian:**

Please consider this your authority to sell  $\$$  \_\_\_\_\_ %  
of my assets in the account identified in Section 3 and prepare a check made payable to:  
*Amount or Percentage*

**Marsico Funds**

\_\_\_\_\_  
*FBO*

\_\_\_\_\_  
*Account Number*

It is my intention to transfer these assets to a Marsico Funds account with the above named Fund(s).

**I certify that I have received and read the Prospectus and Privacy Policy for the Fund(s) into which I am transferring my Account.**

X \_\_\_\_\_  
*Signature of Individual Owner, Trustee, Custodian, Date*  
*Corporation, Partnership or Other Entity*

X \_\_\_\_\_  
*Signature of Joint Owner, Trustee or Custodian (if applicable) Date*

X \_\_\_\_\_  
*Additional Owner's Signature (if applicable) Date*

**Please check with your current Trustee/Custodian to determine if a medallion signature guarantee is required to process this transfer.**

The medallion signature guarantee must be provided by a U.S. bank, member of a national securities exchange, savings and loan association, credit union, broker or other acceptable financial institution. **A notary public cannot provide a medallion signature guarantee.**

Medallion signature guarantee. Place guarantee stamp and authorized signature here (if required).

Please return this form by mail to:  
Marsico Funds  
UMB Fund Services, Inc.  
P.O. Box 3210  
Milwaukee, WI 53201-3210

Send overnight deliveries to:  
Marsico Funds  
UMB Fund Services, Inc.  
235 W. Galena St.  
Milwaukee, WI 53212-3948