



NON-QUALIFIED TRANSFER OF ASSETS FORM

Please complete this form only if you are transferring assets directly to a new or existing non-qualified account with the Absolute Capital Funds (the "Fund"). Please complete a separate form for each account you wish to transfer. Transfers may take 3 to 5 weeks to complete after your paperwork is received in good order.

For Additional Copies or Assistance

If you need additional copies of this form, or would like assistance completing it, please **1-877-594-1249** or go to www.abscapfunds.com.

Instructions

1. If you are establishing a new account, please contact **1-877-594-1249** or go to www.abscapfunds.com about additional information that must be submitted with this Form.
2. Mail this Transfer Form to:

Absolute Capital Funds c/o Gemini Fund Services, LLC P.O. Box 541150 Omaha, NE 68154	Overnight Delivery: Absolute Capital Funds c/o Gemini Fund Services, LLC 17605 Wright Street, Suite 2 Omaha, NE 68130
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3. Retain a copy for your records.

Anti-Money Laundering

To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

What this means for you: When you open an account, we will ask for your name, address, date of birth, social security number/ Tax ID number and other information that will allow us to identify you. We may also ask to see other identifying documents. Until you provide the information or documents we need, we may not be able to open an account or effect any additional transactions for you.

When opening an account for a foreign business, enterprise or a non-U.S. person that does not have an identification number, we require alternative government-issued documentation certifying the existence of the person, business or enterprise.

For questions about these policies, or for additional copies of the Absolute Capital Funds Privacy Policy Statement, please contact the Fund at **1-877-594-1249** or www.abscapfunds.com or contact the Absolute Capital Funds at PO Box 541150, Omaha, NE 68154.

Please provide your primary legal address, in addition to any mailing address (if different).

Owner's Name (First, Middle, Last)

Social Security Number

Street Address

Date of Birth

City, State, Zip

Daytime Telephone

Email Address

Evening Telephone

- This is a new account. I have completed and enclosed an Application with this transfer form.
- This is an existing account. Please apply transfer proceeds to my account number: _____

2. INFORMATION ABOUT YOUR EXISTING ACCOUNT

Name of Firm Currently Holding Your Account

Account Name

Street Address

Account Number

City, State, Zip

Firm Telephone Number

Please attach a copy of the most recent statement for this account.

Please transfer assets from the above account to Absolute Capital Funds. Transfers should be according to the following instructions:

This transfer is a: (check one)

Complete Transfer. Please liquidate all assets in my account.

Partial Transfer. Liquidate \$ _____ from my account.

Transfer in kind:

Please transfer _____ shares of _____
(Fund Name)

The type of account I am transferring from is a: (check one)

- Individual
- Joint Tenant
- Transfer on Death
- Trust
- Other

The type of account I am transferring to is a: (check one)

- Individual
- Joint Tenant
- Transfer on Death
- Trust
- Other

4. CERTIFICATIONS AND SIGNATURES

I hereby authorize this liquidation and/or transfer in kind from my current financial institution to the account designated on this form. By signing below, I certify the information set forth herein is accurate and I have received and read a prospectus for the funds in which I am making my investment. To the extent that I have requested a redemption of mutual fund shares in connection with my transfer, I understand that such shares will be redeemed at the net asset value next determined after my transfer request is reviewed and determined to be in good order by the delivering firm. **The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.**

Medallion Signature Guarantee* (if required):

Some Firms require a Medallion Signature Guarantee to transfer assets. Please check with your current firm to see if they require a Medallion Signature Guarantee. Failure to obtain a required signature guarantee may result in a delay in the transfer of assets.

Account Owner's Signature

Date

Joint Owner's Signature (if applicable)

Date

*A Medallion Signature Guarantee can be obtained from a bank, broker-dealer, a credit union, a national securities exchange, savings association or other financial intermediaries that are members of an Approved Medallion Guarantee Program. A signature by a Notary Public is not acceptable as a signature guarantee.

Make check payable to:

Absolute Capital Funds

FBO: _____

Account Number: _____

Mail this Transfer Form to:

Absolute Capital Funds

c/o Gemini Fund Services, LLC

P.O. Box 541150

Omaha, NE 68154

Or

Via Overnight Delivery

17605 Wright Street, Suite 2

Omaha, NE 68130

Internet

www.abscapfunds.com

Toll Free - 1-877-594-1249