



403(b)(7) Rollover Form

Thank you for choosing Transamerica. We appreciate the opportunity to serve your financial needs, and to help you transform your tomorrow. Use this form to roll over your existing Qualified Plan, 401(k), 403(b), 403(b)(7) tax-sheltered annuity or annuity, or other such retirement plan directly to a Transamerica Funds 403(b)(7). For assistance, call Transamerica Funds at 1.888.233.4339.

Section One – Account Registration

Legal Name of Owner or Custodian	Social Security Number	
Date of Birth	Daytime Telephone Number	
Mailing Address	Email Address	
City	State	Zip Code

Section Two – Current Custodian Information

Current Custodian or Trustee		
Address		
City	State	Zip Code
Telephone Number	Fax Number	

Section Three – Accounts to be Rolled Over

Rollover from:

- Qualified Plan (401(k), Profit Sharing Plan, Money Purchase Pension Plan, etc.)
- Individual Retirement account or annuity (Traditional, SIMPLE, or SEP)
- Governmental 457 Plan
 - I have completed the necessary forms** from my previous employer or current Custodian/Trustee to roll over my qualified plan retirement assets to a Transamerica Funds IRA account.

If the Direct Rollover is from a Transamerica Funds account, please complete the section below:

Fund and Account Number	<input type="checkbox"/> 100%	%	or	\$
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Note: Most plan custodians/trustees require their own forms be completed prior to any distribution or rollovers. Please check with your current plan Custodian or Trustee, or with your former employer, to complete any of their required forms, in addition to or in place of this form. Incomplete or incorrect forms may result in long delays.

Section Four – Investment Allocations

The rollover assets should be applied as follows:

- New Transamerica Funds 403(b)(7) account.** A completed Transamerica Funds IRA Application must accompany this Direct Rollover Request Form. Your rollover assets will be allocated as indicated in Section Three of your new account application.
- Existing Transamerica Funds 403(b)(7) account.** Unless you indicate otherwise, your rollover assets will be allocated as indicated on your original account application. If you would like to allocate your rollover assets differently, complete the section below.

Total for all funds must equal 100%

100%

Fund and Account Number

%

100%

Fund and Account Number

Section Six – Signature

I hereby authorize UMB Bank, N.A. to deposit the assets received from my existing retirement plan according to the terms stated in this form. I hereby acknowledge that strict requirements must be met to qualify for tax-free rollover treatment; I hereby certify that the assets being directly rolled over constitute an eligible rollover distribution as defined in the Internal Revenue Code of 1986, as amended. I acknowledge that I am personally responsible for any taxes and penalties that may result from this distribution, and release the Custodian and TFS from any responsibility or liability.

Signature

Date

Signature Guarantee (STAMP2000)

Name of Signing Officer (please print)

Date

NOTE: Please include Signature Guarantee if releasing custodian requires it. All checks from the releasing custodian must be made payable to Transamerica Fund Services.

Mail the completed and signed form to Transamerica Fund Services.

Regular Mail

Transamerica Fund Services, Inc.
P.O. Box 219945
Kansas City, MO 64121-9945

Overnight

Transamerica Fund Services, Inc.
330 W. 9th Street
Kansas City, MO 64105