



PO Box 219945 | Kansas City, MO 64121-9945 | [www.transamerica.com](http://www.transamerica.com)

## Welcome to Transamerica

Thank you for your interest in investing with Transamerica. At Transamerica, we pride ourselves on offering a wide variety of investment options to help you reach your financial goals and transform your tomorrow.

This mutual fund application will allow you to open a Traditional or Roth Individual Retirement Account (IRA) with a contribution or a rollover/transfer of assets\*. Please read the prospectus carefully before investing in our funds. To access our online prospectus you can visit [www.transamerica.com](http://www.transamerica.com), select Mutual Funds and then click the Prospectus tab. You can also access the prospectus by clicking [here](#).

\*additional forms may be required to complete a transfer or rollover.

To establish a new Transamerica Funds account, be sure to complete the following steps:

- Carefully read the IRA Disclosure Statement and Custodial Agreement.
- Complete sections one and two in their entirety.
- Make the appropriate investment selections to meet your financial goals and provide instruction regarding the fiduciary fee in section three.
- Transamerica Funds requires that all applications include a financial advisor or an approved broker-dealer of record. Please have a financial advisor or authorized representative of an approved broker-dealer complete the Investment Representative Section of the application.
- Ensure that the owner signs and dates the application.
- Review the application to ensure that all applicable sections are completed.
- Mail your application to Transamerica Fund Services Inc. with your investment check using the address at the bottom of the application.

For information about opening a Transamerica Funds account, please contact your financial advisor or call us at 1-888-233-4339, Monday through Friday between 8:00 a.m. and 7:00 p.m. ET.

Best regards,

Transamerica

TFIRAAPP0117



# IRA Application

Thank you for choosing Transamerica. We appreciate the opportunity to serve your financial needs, and to help you transform your tomorrow. Please complete this Mutual Fund IRA Application in its entirety. If you have any questions or need assistance in completing this form, please call us at 888.233.4339.

## Section One – Account Registration

Legal Name of Account Owner		Social Security Number
Date of Birth	Daytime Telephone Number	
Residential Address	Email Address	
City	State	Zip Code
Mailing Address (if different than residential address)		
City	State	Zip Code
<b>Owner Resident Status</b> <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> U.S. Resident Alien <input type="checkbox"/> U.S. Non-Resident Alien (Form W-8BEN Required)		<b>Account Type</b> <input type="checkbox"/> Traditional IRA <input type="checkbox"/> Roth IRA <input type="checkbox"/> Rollover IRA <input type="checkbox"/> Inherited Traditional <input type="checkbox"/> Inherited Roth

## Section Two – Source of Funds

- Personal contribution check is enclosed.**  
Contribution year \_\_\_\_\_ If the year isn't specified it will be applied for the current year.
- Payroll Deduction or an Automatic Investment Plan (AIP)** - Refer to Section Four for more information.
- Transfer from another Traditional, Rollover, SEP, or SIMPLE IRA Custodian.**  
*Note: SIMPLE IRA Accounts must have been in existence for more than 24 months.*
- Direct Rollover** - If you would like your current custodian to send a check directly to Transamerica Funds, please complete and attach an IRA Direct Rollover Request Form.
- Indirect Rollover** - If you have received a distribution from your IRA or prior qualified plan within the last 60 days and are enclosing a check for all or part of that distribution, then please make your check payable to Transamerica Fund Services, Inc.
- Roth IRA Conversion** - By making this election, you agree that 1) the amount converted, excluding any nondeductible contributions, shall be taxable to you as ordinary income, and 2) none of the assets to be converted include required minimum distributions.  
Conversion amount \$ \_\_\_\_\_ or \_\_\_\_\_% of Roth IRA.  
**Withholding election:** If you choose to withhold taxes, a portion of your conversion may be automatically withheld for state taxes, depending on your state. If you elect to not have withholding, you are still liable for payment of federal income taxes on the taxable portion of your distribution.
  - Amount to be withheld on conversion (10% minimum) \_\_\_\_\_%
  - Do not withhold taxes on my conversion

**Note: If you DO NOT make a withholding election above, federal law requires 10% to be withheld for federal income taxes and forwarded to the IRS.**

## Section Three – Investment Selections

If you choose **Class A** or **Class C** shares, there is a minimum investment amount of \$1,000 for each fund in these share classes. The minimum investment amount is reduced to \$500 if you choose to invest at least \$50 per month via Automatic Investment Plan or Payroll Deduction Agreement. If you choose **Class I** shares, there is a minimum investment amount of \$1,000,000.

Fund Name	Class A	Class C	Class I	Other share class as allowed	% or \$
<b>Asset Allocation</b>					
Transamerica Asset Allocation-Conservative Portfolio	<input type="checkbox"/> 724	<input type="checkbox"/> 771	<input type="checkbox"/> 1156	_____	_____
Transamerica Asset Allocation-Growth Portfolio	<input type="checkbox"/> 736	<input type="checkbox"/> 774	<input type="checkbox"/> 1153	_____	_____
Transamerica Asset Allocation-Moderate Portfolio	<input type="checkbox"/> 728	<input type="checkbox"/> 772	<input type="checkbox"/> 1155	_____	_____
Transamerica Asset Allocation-Moderate Growth Portfolio	<input type="checkbox"/> 732	<input type="checkbox"/> 773	<input type="checkbox"/> 1154	_____	_____
<b>Alternative Investments</b>					
Transamerica Event Driven	<input type="checkbox"/> N/A	<input type="checkbox"/> N/A	<input type="checkbox"/> 1197	_____	_____
Transamerica MLP & Energy Income	<input type="checkbox"/> 1345	<input type="checkbox"/> 1346	<input type="checkbox"/> 1184	_____	_____
Transamerica Multi-Manager Alternative Strategies	<input type="checkbox"/> 779	<input type="checkbox"/> 780	<input type="checkbox"/> 1157	_____	_____
<b>Fixed Income</b>					
Transamerica Emerging Markets Debt	<input type="checkbox"/> 1321	<input type="checkbox"/> 1322	<input type="checkbox"/> 1171	_____	_____
Transamerica Flexible Income	<input type="checkbox"/> 204	<input type="checkbox"/> 751	<input type="checkbox"/> 1166	_____	_____
Transamerica Floating Rate	<input type="checkbox"/> 1407	<input type="checkbox"/> 1408	<input type="checkbox"/> 1189	_____	_____
Transamerica Government Money Market	<input type="checkbox"/> 600	<input type="checkbox"/> 500	<input type="checkbox"/> 1168	_____	_____
Transamerica High Yield Bond	<input type="checkbox"/> 211	<input type="checkbox"/> 766	<input type="checkbox"/> 1165	_____	_____
Transamerica High Yield Muni	<input type="checkbox"/> 1347	<input type="checkbox"/> 1348	<input type="checkbox"/> 1185	_____	_____
Transamerica Inflation Opportunities	<input type="checkbox"/> 1415	<input type="checkbox"/> 1416	<input type="checkbox"/> 1192	_____	_____
Transamerica Intermediate Muni	<input type="checkbox"/> 1339	<input type="checkbox"/> 1340	<input type="checkbox"/> 1180	_____	_____
Transamerica Short-Term Bond	<input type="checkbox"/> 543	<input type="checkbox"/> 544	<input type="checkbox"/> 1167	_____	_____
Transamerica Unconstrained Bond	<input type="checkbox"/> N/A	<input type="checkbox"/> N/A	<input type="checkbox"/> 1195	_____	_____
<b>Global/International Equity</b>					
Transamerica Emerging Markets Equity	<input type="checkbox"/> 1327	<input type="checkbox"/> 1328	<input type="checkbox"/> 1174	_____	_____
Transamerica Global Equity	<input type="checkbox"/> 776	<input type="checkbox"/> 778	<input type="checkbox"/> 1158	_____	_____
Transamerica International Equity	<input type="checkbox"/> 1319	<input type="checkbox"/> 1320	<input type="checkbox"/> 1170	_____	_____
Transamerica International Growth	<input type="checkbox"/> 1349	<input type="checkbox"/> N/A	<input type="checkbox"/> 1198	_____	_____

## Section Three – Investment Selections (Cont.)

Fund Name	Class A	Class C	Class I	Other share class as allowed	% or \$
<b>Hybrid Allocation</b>					
Transamerica Multi-Managed Balanced	<input type="checkbox"/> 205	<input type="checkbox"/> 749	<input type="checkbox"/> 1164	_____	_____
Transamerica Strategic High Income	<input type="checkbox"/> 1411	<input type="checkbox"/> 1412	<input type="checkbox"/> 1191	_____	_____
Transamerica Dynamic Allocation	<input type="checkbox"/> 1333	<input type="checkbox"/> 1334	<input type="checkbox"/> 1177	_____	_____
Transamerica Dynamic Income	<input type="checkbox"/> 1323	<input type="checkbox"/> 1324	<input type="checkbox"/> 1172	_____	_____
<b>U.S. Equity</b>					
Transamerica Capital Growth	<input type="checkbox"/> 260	<input type="checkbox"/> 761	<input type="checkbox"/> 1163	_____	_____
Transamerica Concentrated Growth	<input type="checkbox"/> 1417	<input type="checkbox"/> 1418	<input type="checkbox"/> 1193	_____	_____
Transamerica Dividend Focused	<input type="checkbox"/> 1343	<input type="checkbox"/> 1344	<input type="checkbox"/> 1182	_____	_____
Transamerica Large Cap Value	<input type="checkbox"/> 1317	<input type="checkbox"/> 1318	<input type="checkbox"/> 1169	_____	_____
Transamerica Mid Cap Growth	<input type="checkbox"/> 1401	<input type="checkbox"/> 1402	<input type="checkbox"/> 1186	_____	_____
Transamerica Mid Cap Value Opportunities	<input type="checkbox"/> 1419	<input type="checkbox"/> 1420	<input type="checkbox"/> 1194	_____	_____
Transamerica Multi-Cap Growth	<input type="checkbox"/> 580	<input type="checkbox"/> 769	<input type="checkbox"/> 1160	_____	_____
Transamerica Small Cap Core	<input type="checkbox"/> 1403	<input type="checkbox"/> 1404	<input type="checkbox"/> 1187	_____	_____
Transamerica Small Cap Growth	<input type="checkbox"/> 1337	<input type="checkbox"/> 1338	<input type="checkbox"/> 1179	_____	_____
Transamerica Small Cap Value	<input type="checkbox"/> 1331	<input type="checkbox"/> 1332	<input type="checkbox"/> 1176	_____	_____
Transamerica Small/Mid Cap Value	<input type="checkbox"/> 891	<input type="checkbox"/> 748	<input type="checkbox"/> 1161	_____	_____
Transamerica US Growth	<input type="checkbox"/> 1314	<input type="checkbox"/> 1316	<input type="checkbox"/> 1162	_____	_____
<b>Total</b>				_____	_____
				%	or \$

Retirement plan accounts are subject to an annual custodial fee of \$15 per fund account, with a maximum fee of \$30 per Social Security Number. The fee will be waived if the total of the retirement plan account value per Social Security Number is more than \$50,000.

- Deduct the custodial fee from my retirement account later in the year.
- I have included the additional amount to pay this year's fee in my investment check. Please reduce my contribution amount accordingly.

**For accounts being transferred from another custodian, please complete the information below:**

Yes  No Does the amount of the transfer satisfy the \$1,000 per fund account minimum investment requirement?

Current Custodian Name \_\_\_\_\_

Current Value of Funds Being Transferred \_\_\_\_\_

**Note: If the amount received is less than \$1,000 the funds may be returned.**

## Section Four – Automated Purchase Options

### Payroll Deduction

I wish to invest through payroll deduction (\$50 minimum investment per month, per fund account).

**Note: Once the account is established, payroll deduction forms will be sent to you.**

### Automatic Investment Plan (AIP)

I wish to invest directly from my checking or savings account (\$50 minimum investment per purchase, per fund account).  
By establishing this AIP, I understand that my account will automatically receive the Electronic Bank Link option.

I have attached a pre-printed voided check or savings account deposit slip with my bank information.

Use the bank information on the enclosed investment check.

**Note: Due to your bank's requirements, please allow up to 30 days for your AIP to begin.**

**Frequency:**     Monthly                       Quarterly                       Semi-Annually                       Annually

Start Date (Month/Day)	Fund Name	Amount

## Section Five – Electronic Bank Link

By checking one of the boxes below, I authorize money to be transferred between my financial institution and Transamerica Funds.

I have attached a pre-printed voided check or savings account deposit slip with my bank information.

Use the bank information on the enclosed investment check.

**Note: If the Transamerica Funds account holder's name does not appear on the enclosed check, an original Securities Transfer Agents Medallion Program (STAMP2000) Signature Guaranteed letter from the bank account owner and the Transamerica Funds account owner, authorizing use of the bank information will be required. Also, if the account owner does not have a void check or deposit slip they may also submit a letter on bank letterhead with the routing and account number, the account type, and the names of the registered bank account owners. This letter must be signed by a branch manager and must have a Medallion Signature Guarantee stamp. Due to your bank's requirements, please allow up to 30 days for the Electronic Bank Link to begin.**

Attach voided check or savings deposit slip here (Please use clear tape. Do not staple.)





# IRA Application

## Section Six – Reduced Sales Charges (Class A and Class T Shares Only)

**Net Asset Value** - I am eligible to purchase at Net Asset Value (NAV) as described in the prospectus.

Qualifying Reason

**Rights of Accumulation** - My spouse, children under age 21, and/or I own shares in other Transamerica Funds listed below which may entitle this purchase to have a reduced sales charge under the rights of accumulation provisions described in the prospectus. See prospectus for additional eligibility information regarding the reduced sales charges listed below.

Existing account owner name/registration

Account Number(s)

**Letter of Intent** (For all funds excluding Transamerica Short-Term Bond) - I agree to the terms of the Letter of Intent described in the prospectus and grant the distributor a security interest in the shares to be reserved. It is my intention to invest over a 13-month period an aggregate amount of at least:

\$50,000

\$100,000

\$250,000

\$500,000

\$1,000,000

**Letter of Intent** (For Transamerica Short-Term Bond only) - I agree to the terms of the Letter of Intent described in the prospectus and grant the distributor a security interest in the shares to be reserved. It is my intention to invest \$250,000 over a 13-month period. **Note: This fund offers only a \$250,000 Letter of Intent option.**

Existing account owner name/registration

Account Number(s)

**\$1 Million Purchase** (Jumbo - For all funds excluding Transamerica Short-Term Bond) - I qualify for NAV pricing on my accounts because my initial investment is \$1 million or more and/or I currently own shares in other Transamerica Funds that equal \$1 million or more.

**\$250,000 Purchase** (Jumbo - For the Transamerica Short-Term Bond) - I qualify for NAV pricing on my Short-Term Bond accounts because my initial investment is \$250,000 or more and/or I currently own shares in the Transamerica Short-Term Bond Fund that equal \$250,000 or more.

Existing account owner name/registration

Account Number(s)

**Note: Please see prospectus for additional eligibility information regarding all reduced sales charges.**

## Section Seven – Beneficiary Information

**Primary Beneficiary(ies):** In the event of my death, pay any interest I may have under my account to the following Primary Beneficiary(ies) who survive me. Make payment in the proportions specified below (or in equal proportions if none is specified). If any Primary Beneficiary predeceases me, his/her share should be divided among the other Primary Beneficiaries who survive me in the relative proportions assigned to each such surviving Primary Beneficiary.

**Contingent Beneficiary(ies):** If none of the Primary Beneficiaries survive me, pay any interest I may have under my account to the following Contingent Beneficiary(ies) who survive me. Make payment in the proportions specified below (or in equal proportions, if none is specified). If any Contingent Beneficiary predeceases me, his/her share should be divided among the other Contingent Beneficiaries who survive me in the relative proportions assigned to each such surviving Contingent Beneficiary.

If I am not survived by a beneficiary, any benefits shall go to my estate unless otherwise required by the laws of the state in which I reside. I understand that I may change or add beneficiaries at any time by written notice, in a manner acceptable to the account Custodian. Any subsequent designation filed with the Custodian will revoke all prior designations, even if the subsequent designation does not dispose of my entire account.

**For each beneficiary noted, indicate if the person is a Primary Beneficiary (PB) or Contingent Beneficiary (CB). If you would like to name additional beneficiaries, please attach a letter of instruction with the same information being requested in this section.**

Beneficiary Name	Date of Birth	PB/CB
Social Security or Tax ID Number	Relationship	Percentage (%)
Beneficiary Name	Date of Birth	PB/CB
Social Security or Tax ID Number	Relationship	Percentage (%)
Beneficiary Name	Date of Birth	PB/CB
Social Security or Tax ID Number	Relationship	Percentage (%)

## Section Eight – Investment Representative

I authorize the following broker/dealer to act as my agent for this account in accordance with the Fund’s Dealer Sales Agreement and the terms of the Prospectus and Statement of Additional Information.

Branch Name	Branch Number	Firm Name	Firm Number
Branch Office Street Address	City	State	Zip Code
Financial Advisor’s Name	Financial Advisor’s Number	Financial Advisor’s Phone Number	

Authorized Signature of Dealer (required by most dealers)

## Section Nine – Signature

I hereby authorize each Fund, its distributor, and transfer agent to accept instructions from me (such as purchase, exchange, and redemption orders) made through the investment representative of record concerning my account. By signing this form I certify that the information provided in the application is true, correct, and complete, and that I have read the Transamerica Funds Prospectus and application for the Fund(s) in which I am investing and agree to be bound by their terms. I have received, read, and accepted the provisions of the Individual Retirement Account Disclosure Statement and Custodial Agreement. I hereby appoint UMB Bank, N.A. or its Successors as Custodian; and consent to the annual maintenance fee prescribed in this application. I have full authority and legal capacity to purchase Fund shares and authorize the instructions on this application. I am aware that telephone exchange, redemption, and purchase privileges exist and that these privileges are automatic unless affirmatively declined. I will examine my account statements and notify Transamerica Fund Services, Inc. promptly of any errors. Failure to do so shall preclude any claim against Transamerica Funds Services, Inc., the Fund, or its agents by reason of any unauthorized or missing signature or endorsement, alteration, error, or forgery of any kind. I understand that on any and all future distributions, if no federal income tax withholding selection is made, Transamerica Funds Services, Inc. will take the mandatory 10% withholding and forward it to the IRS. I understand that mutual fund shares are not deposits or obligations of, or guaranteed or endorsed by, any bank, and are not federally insured by the Federal Deposit Insurance Corporation, the Federal Reserve Board, or any other agency of the U.S. government, and that an investment in mutual fund shares involves risk, including the possible loss of principal.

**Under penalty of perjury, I certify that:**

- A) The identification number shown in Section One of this application is my correct Social Security or Tax Identification Number.**
- B) I am not subject to backup withholding (check this box if you are subject to backup withholding ).**
- C) The authorizations and directions contained herein will continue until Transamerica Fund Services, Inc. receives and accepts written notice of any changes with a signature guarantee, if required.**

---

Account Owner or Custodian Signature

Date

Custodian Acceptance: UMB Bank, N.A. accepts appointment as Custodian of the Depositor's Account; however, this Agreement is not binding upon the Custodian until the Depositor has received a statement confirming the initial transaction for the Account. Receipt by the Depositor of a confirmation of the purchase of the Fund Shares indicated above will serve as notification of UMB Bank, N.A.'s acceptance of appointment as Custodian of the Depositor's Account.

*Mail the completed and signed application 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