IRA Transfer of Assets Form

Please mail completed form to: State Street Global Advisors PO Box 701 Milwaukee, WI 53201-0701

There may be penalties for withdrawing certain investments before their maturity (i.e. certificates of deposit or annuities). Please contact your current custodian or plan administrator prior to submitting this form to determine the applicable time frames and penalties, if any, or if you need a signature guarantee in Section 6 to order this transfer/rollover. U.S. Bank Global Fund Services will initiate your request upon receipt of this form.

. Investor Information		
Name		Social Security Number
Address		Daytime Telephone Number
City / State / Zip Code		Evening Telephone Number
	ustodian or Plan Administrator	
Please attach a copy of your curren	t account statement.	
Current Custodian or Plan Administrator		
Account Number	Contact Person	Contact Telephone Number
Address Consider this your authorization to	City / State / Zip	Code onal IRA, SEP IRA, SIMPLE IRA, Roth IRA, or Inhe
	qualified retirement plan as directed below: *	onal ma, ser ma, siviree ma, notil ma, of fille
Please process this request:*	(month/day/year)	
* If no options are selected, please		
Instructions for Delivery (indicate h	ow you want your current Custodian/Trustee to delive	er the assets to U.S. Bank Global Fund Services):
☐ Wire - Funds available immediat	ely upon request, your Custodian/Trustee may ch	arge a fee for this service
☐ Check - Funds may not be availal	ole for 12-15 business days	
	ernight Delivery - take fee from my account arty - Charge fee to my 🖵 FedEx Account	or 🗖 UPS Account
Processing Instructions (indicate ho	w you want us to initiate your transfer/rollover):	
☐ Standard Processing Service - No	Charge, transfer form will be sent via First Class	Mail
☐ Overnight Delivery - \$15.00 fee, • We will overnight your trans	select one of the options below; if no selection if fer form to your current Custodian/Trustee provided, we cannot overnight to a P.O. Box	
☐ Use the attached check n	nade payable to U.S. Bank Global Fund Services	
☐ Charge the \$15.00 fee to	my □ FedEx Account or □ UP	S Account



2.	Instructions to	o Current IRA Cເ	ustodian or Pl	an Admini	istrator - ဖ	continued			
	Type of account	being transferred/	rolled-over:						
	☐ Pension	☐ Profit Sharing F	Plan 🖵 401(k) 🗖	403(b)	☐ Roth 401(k)	☐ Roth 403(b)	☐ Traditio	onal IRA
	☐ SEP IRA	☐ SIMPLE IRA	☐ Roth IRA	☐ Inherite	d IRA 🚨 O	ther			
	☐ Original Roth	IRA funding year (i	f applicable):						
		LE IRA funding date							
		neck representing top of the previous p		le to "Elfun I	Funds FBO	Shareholder's Nam	e]" along with a c	opy of this f	orm to the
2	Investment Se	election							
٠.			s IRA Application	n must accon	npany this f	orm to process a tra	nsfer or rollover if	a new acco	unt is being
						vill be used if they a			
		Fund Name	New	Existing	Account	# (if applicable)	Amount	P	ercentage
						(\$		%
				<u> </u>			*	OR	
							\$	OR	%
							\$	OR	%
							\$	OR	%
						_	<u>- </u>	. on <u> </u>	
1	Required Min	imum Distributi	ion (RMD) Ag	e Informat	tion				
Τ.	Check one of t		ion (Mivib) Ag	e illioillia					
		MD age and do not t	turn RMD age at	anytime du	ring this cal	andar vear			
	OR	vid age and do not	turri Mivib age at	arrytime dar	ing this can	indar year.			
			retand that no n	art of may DAV	ID is aligible	for transfer or rolle	war I furthar unda	vectored that	thoroman
		x penalties if a trans				for transfer or rollo	iver. i further unde	rstand that	there may
5.		f Traditional IRA		•					
	_			-	_	the assets from my cated in Section 3. I			
	•	lely responsible for		•	-			,	
	Signature*						Date (MM/DI	D/YYYY)	

*A conversion cannot be processed unless your signature is provided above.

6. Sigı	nature	and	Certification	1
---------	--------	-----	---------------	---

I certify that I have established an IRA with the Elfun Funds, of which U.S. Bank, NA, is the Custodian. I agree to contact my present Custodian from whom I am transferring to determine if specific documentation or a signature guarantee is required. I understand that I am responsible for determing my eligibility for all transfers or direct roll-overs. I agree to hold the Custodian harmless aganist any and all situations arising from an ineligible transfer or direct rollover. I acknowledge that the Custodian or its agent cannot provide legal advice and I agree to consult with my own tax professional for advice.

I authorize U.S. Bank Global Fund Services, to act on my behalf in contacting the current custodian or plan administrator to facilitate the transfer of assets/direct rollover.

Date (MM/DD/YYYY)

ignature of Account Owr	ner		

Signature Guarantee

Important: Please contact your current Custodian/Trustee to determine if a signature guarantee* is required.

*A signature guarantee may be obtained from any eligible guarantor institution, as defined by the Securities and Exchange Commission. These insitutions include banks, savings associations, credit unions and brokerage firms. The guarantee must appear with the printed name, title, and signature of an officer and the name of the guarantor institution. Please note that a Notary Public Seal or Stamp is not acceptable.

7. Acceptance / Custodian Authorization

U.S. Bank, NA, hereby accepts its appointment as Custodian of the IRA(s) and upon receipt of assets, will deposit such assets in an Elfun Funds IRA on behalf of the Depositor authorizing this transfer or direct rollover.

U.S. Bank, NA

Dregory Forly

For more information, please call toll-free at 800-242-0134 or visit us on the web at www.ssga.com.