IRA ACCOUNT TRANSFER

For Internal Use	
PM	A/C#

Instructions: Use this form to transfer cash from an existing account to Johnson Mutual Funds Trust. If you are opening a new account, the completed Account Application must accompany this Account Transfer form. Please be aware that your present institution may require additional documentation including a signature guarantee by a commercial bank or New York Stock Exchange member firm. Please complete all the information requested below. Johnson Mutual Funds Trust will process your transfer and the Custodian will send you notification when the cash has been received and invested.

1. PARTICIPANT INFORMATION:

NAME _____ TAX ID OR SSN _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PRIMARY PHONE NUMBER _____ SECONDARY PHONE NUMBER _____ DATE OF BIRTH _____

2. NAME, ADDRESS, AND PHONE NUMBER OF RESIGNING TRUSTEE:

NAME OF ORGANIZATION _____ ATTENTION _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PRIMARY PHONE NUMBER _____ ACCOUNT OR POLICY NUMBER _____

TYPE OF ACCOUNT TO BE TRANSFERRED:

☐ Traditional IRA ☐ IRA Rollover ☐ Roth IRA ☐ SEP-IRA ☐ Other
☐ SIMPLE IRA ☐ Inherited IRA ☐ Inherited Roth IRA

3. RECENT STATEMENT:

Is a copy of your resigning trustee account statement attached?

☐ YES ☐ NO

4. FUND SELECTION:

Please indicate your fund selection below:

☐ Initial Investment (see accompanying IRA Application)

OR

$ Amount or % Per Fund

☐ Johnson Equity Income Fund _____
☐ Johnson Opportunity Fund _____
☐ Johnson International Fund _____
☐ Johnson Fixed Income Fund _____
☐ Johnson Municipal Income Fund _____

5. AUTHORIZATION FOR TRANSFER:

Note: If you are 70½ or older this year, the required minimum distribution MUST be taken before the transfer is made.

Please check one:

☐ Liquidate all full and fractional shares (estimated value of transfer $_____) of the account(s) indicated in Section 2 and transfer the proceeds payable to "Johnson Mutual Funds" ☐ **immediately** OR ☐ **at maturity**. **Close the account.** Send any subsequent dividends or interest that post to the above listed address as specified.

☐ Liquidate part ($_____) of the account(s) indicated in Section 2 and transfer the proceeds payable to "Johnson Mutual Funds" ☐ **immediately** OR ☐ **at maturity**. **Do not close account.**

Details of Liquidation:

_____

_____

_____

_____

6. AUTHORIZATION FOR TRANFER:

TO RESIGNING TRUSTEE OR CUSTODIAN:

_____ _____ _____

INVESTOR SIGNATURE PRINTED NAME DATE

_____

SIGNATURE GUARANTEE (IF NEEDED)

7. NEW CUSTODIAN:

TO BE COMPLETED BY NEW CUSTODIAN:

We have been requested to send you a letter of acceptance in order to transfer the assets of the above-mentioned account for deposit to the Johnson Mutual Funds Trust. To ensure proper crediting, contact the Funds for trustee-to-trustee delivery instructions.

This is to be executed as a trustee-to-trustee transfer so as not to put the plan participant in actual or constructive receipt of all or any part of the transferred assets.

_____ _____ _____

TRUST OFFICER'S SIGNATURE PRINTED NAME DATE