

IRA Direct Rollover Form



Please use a pen and print clearly in CAPITAL LETTERS. If you don't have an existing abrdn IRA, please also fill out a Retirement Account Application. If you are transferring IRA assets from more than one retirement plan account, complete a separate Transfer of Assets form for each transfer.

Section 1 - Account Holder Information

Individual (FirstName/Initial/LastName)

Fund / Account Number

/ / - -

Date of Birth (m/d/yyyy)

Social Security Number

Legal Residence (No P.O. Boxes)

City State ZIP

Daytime Phone Number

Section 2 - Current Trustee or Employer Information for Your Qualified Retirement Plan

Current Trustee or Employer Name

Name on the plan

Account Number

Street Address of Main Office or Headquarters

Name of Participant

City State ZIP

Current Trustee or Employer Phone Number

Please Attach a Current Statement for the Account Being Transferred

Section 3 - Direct Rollover Allocations

Total allocations must add up to 100%. Class A shares will be purchased if no share class or fund number is indicated.

Fund name	Class of shares	%	Fund code	Account number
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Fund name	Class of shares	%	Fund code	Account number
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Fund name	Class of shares	%	Fund code	Account number
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Section 4 - Transfer Instructions to the Financial Institution Currently Holding your IRA

Check one:

Transfer full balance

Transfer only \$

Transfer In Kind

Check one:

Liquidate immediately

Liquidate at maturity / /

Note: If you are transferring a Certificate of Deposit (CD), mail this form at least 14 days, but not more than 21 days before the maturity date

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Section 5 – Withholding Instructions for Roth Conversion IRA

When converting all or a portion of your IRA to a Roth Conversion IRA, the conversion amount is a taxable distribution. IRS regulations require the financial institution currently holding your IRA to withhold federal income tax from the amount you convert unless you do not want withholding to occur. The minimum withholding rate is 10%. Indicate your withholding election below.

Withhold 10%

Withhold %

Do not Withhold

Section 6 – Participant's Signature

To the current Trustee or Employer:

I have appointed UMB Bank, N.A. as the Custodian of my IRA and authorize you to forward the proceeds of my retirement plan to UMB Bank, N.A. Please send any documents or records needed by the new Custodian to complete the rollover.

Investor's Signature

/ /
Date (m/d/yyyy)

A medallion signature guarantee may be obtained from a commercial bank, savings and loan association, credit union, or broker-dealer. We regret a notary public is not an acceptable guarantor. Please call 1-866-667-9231 for assistance.

Signature Guarantee – *If required by the firm currently holding your IRA*

Section 7 – Custodian's Acceptance – UMB Bank, N.A.

UMB Bank, N.A. agrees to accept transfer of the above amount for deposit to the Depositor's UMB Bank, N.A. Individual Retirement Custodial Account, and requests the liquidation and transfer of assets as indicated above.

See attached Letter of Acceptance for the signature of an authorized officer of the custodial agent.

Return by mail:

abrdn Funds
P.O. Box 219534
Kansas City, MO 64121-9534

Return by express delivery:

abrdn Funds
801 Pennsylvania Ave, Suite 219534
Kansas City, MO 64105-1307

For more information:

abrdn
866-667-9231
abrdn.com/usa