# NON-QUALIFIED TRANSFER OF ASSETS

## Please do not use for IRA Accounts

Weitz | INVESTMENT MANAGEMENT


**MAILING ADDRESS**
Weitz Funds
PO Box 46707
Cincinnati, OH 45246

**OVERNIGHT MAILING ADDRESS**
Weitz Funds
225 Pictoria Dr, Suite 450
Cincinnati, OH 45246

**PHONE**
(888) 859-0698
**FAX**
(402) 963-9094

**EMAIL**
clientservices@weitzinvestments.com


Please complete this form only if you are transferring assets directly to a new or existing non-qualified (non-IRA) account with Weitz Funds (the "Fund"). Please complete a separate form for each account you wish to transfer. Transfers may take 3 to 5 weeks to complete after your paperwork is received in good order. Please print or type clearly.

**FOR ADDITIONAL COPIES OR ASSISTANCE:**

If you need additional copies of this form, or would like assistance completing it, please call **(888) 859-0698** or go to **weitzinvestments.com**.

**INSTRUCTIONS**

1. If you are establishing a new account, please contact **(888) 859-0698** or go to **weitzinvestments.com** for an Account Application that must be submitted with this Form.

2. Mail this Transfer Form to:
   **Weitz Funds**
   **PO Box 46707**
   **Cincinnati, OH 45246**

   Overnight Delivery:
   **Weitz Funds**
   **225 Pictoria Dr, Suite 450**
   **Cincinnati, OH 45246**

3. Retain a copy for your records.

## 1. Account Registration

Owner's Name (First, Middle, Last) _____

SSN ☐☐☐☐☐☐☐☐☐

Birth Date (MM-DD-YYYY) ☐☐-☐☐-☐☐☐☐

Street Address _____

Email Address _____

City _____ State _____ ZIP _____

Daytime Telephone _____

Evening Telephone _____

☐ This is a new account. I have completed and enclosed an Application with this transfer form.

☐ This is an existing account. Please apply transfer proceeds to my account number: _____

## 2. Information About Your Existing Account

Name of Firm Currently Holding Your Account _____

Account Registration _____

Street Address _____

Account Number _____

City _____ State _____ ZIP _____

Firm Telephone Number _____

(Please attach a copy of the most recent statement for this account.)

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## 3. Transfer Information

Please transfer assets from the above account to Weitz Funds. Transfers should be according to the following instructions

**This transfer is a (check one):**

☐ Complete Transfer. Please liquidate all assets in my account.

☐ Partial Transfer. Liquidate $ _____ from my account.

☐ Transfer in kind*:

Please transfer _____ shares of _____

*Only holdings in the Weitz funds can be transfered in kind.

**The type of account I am transferring from is a (check one):**

☐ Individual
☐ Joint Tenant
☐ Transfer on Death
☐ Trust
☐ Other

**The type of account I am transferring to is a (check one):**

☐ Individual
☐ Joint Tenant
☐ Transfer on Death
☐ Trust
☐ Other

## 4. Deposit Information

Monies should be invested in my account as follows
**(Please note the minimums listed below.)**

| FUND NAME / TICKER SYMBOL / FUND # | | INVESTMENT AMOUNT ($) | OR | % |
|---|---|---|---|---|
| **Large Cap Equity Fund** / Institutional Class / WVAIX / 541 | $1,000,000 minimum | | | |
| **Large Cap Equity Fund** / Investor Class / WVALX / 328 | $2,500 minimum | | | |
| **Multi Cap Equity Fund /** Institutional Class / WPVIX / 562 | $1,000,000 minimum | | | |
| **Multi Cap Equity Fund** / Investor Class / WPVLX / 331 | $2,500 minimum | | | |
| **Partners III Opportunity Fund /** Institutional Class / WPOPX / 310 | $1,000,000 minimum | | | |
| **Partners III Opportunity Fund**/ Investor Class / WPOIX / 436 | $2,500 minimum | | | |
| **Conservative Allocation Fund /** Institutional Class / WBAIX / 540 | $1,000,000 minimum | | | |
| **Conservative Allocation Fund** / Investor Class / WBALX / 400 | $2,500 minimum | | | |
| **Short Duration Income Fund** / Institutional Class / WEFIX / 329 | $1,000,000 minimum | | | |
| **Short Duration Income Fund** / Investor Class / WSHNX / 437 | $2,500 minimum | | | |
| **Core Plus Income Fund** / Institutional Class / WCPBX / 573 | $1,000,000 minimum | | | |
| **Core Plus Income Fund** / Investor Class / WCPNX/ 574 | $2,500 minimum | | | |
| **Ultra Short Government Fund** / SAFEX/ 330 | $25,000 minimum | | | |

Approximate amount of transfer: $_____

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## 5. Transfer Instructions

**Make check payable to:**

Weitz Funds

FBO: _____

Account Number: _____

**Send Transfer paperwork to:**

Mail this Transfer Form to:

**Weitz Funds**
**PO Box 46707**
**Cincinnati, OH 45246**

or via Overnight Delivery:

**Weitz Funds**
**225 Pictoria Dr, Suite 450**
**Cincinnati, OH 45246**

Fax: 402-963-9094

## 6. Certifications and Signatures

**MEDALLION SIGNATURE GUARANTEE** (IF REQUIRED BY CURRENT CUSTODIAN OR TRUSTEE)

Some Firms require a Medallion Signature Guarantee to transfer assets. Please check with your current firm to see if they require a Medallion Signature Guarantee. Failure to obtain a required signature guarantee may result in a delay in the transfer of assets.

I hereby authorize this liquidation and/or transfer in kind from my current financial institution to the account designated on this form. By signing below, I certify the information set forth herein is accurate and I have received and read a prospectus for the funds in which I am making my investment. To the extent that I have requested a redemption of mutual fund shares in connection with my transfer, I understand that such shares will be redeemed at the net asset value next determined after my transfer request is reviewed and determined to be in good order by the delivering firm. **The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.**

**Medallion Signature Guarantee (Affix stamp here)**

X _____
**Signature of Owner** **Date**

X _____
**Signature of Owner** **Date**

***A Medallion Signature Guarantee can be obtained from a bank, broker-dealer, a credit union, a national securities exchange, savings association or other financial intermediaries that are members of an Approved Medallion Guarantee Program. A signature by a Notary Public is not acceptable as a signature guarantee.**