

(If this is for a new IRA account - an IRA application must accompany this form)

Mail To: Guinness Atkinson Funds
 c/o U.S. Bancorp Fund Services, LLC
 P. O. Box 701
 Milwaukee, WI 53201-0701

Overnight Express Mail To: Guinness Atkinson Funds
 c/o U.S. Bancorp Fund Services, LLC
 615 E. Michigan St., 3rd Floor
 Milwaukee, WI 53202-5207

Thank you for investing with Guinness Atkinson. Complete this form to transfer existing IRAs and direct rollovers from qualified retirement plans. For additional information please call toll-free **1-800-915-6566**.

1 INVESTOR INFORMATION

NAME _____ SOCIAL SECURITY # _____

ADDRESS _____

CITY/STATE/ZIP _____

(_____) _____ (_____) _____
 DAYTIME PHONE NUMBER EVENING PHONE NUMBER

2 INSTRUCTIONS TO CURRENT IRA CUSTODIAN OR PLAN ADMINISTRATOR

Please include a copy of your current account statement

 CURRENT CUSTODIAN OR PLAN ADMINISTRATOR

ACCOUNT NUMBER _____ CONTACT PERSON _____ CONTACT NUMBER _____

ADDRESS _____

Consider this your authorization to send my IRA or my distribution from my qualified retirement plan:

- All Assets*
- OR
- \$ _____ or _____ %

Please process this request:

- Immediately
- OR
- at maturity _____ (month/day/year)

Note: 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 to determine the particular penalty, if any. Please send all transfer requests at least 3 weeks before maturity to allow for proper time limitations.

Send the check representing the assets payable to Guinness Atkinson Funds, along with a copy of this form to the address below:

Guinness Atkinson Funds
 FBO [Shareholder Name]
 [Account Number]
 c/o US Bankcorp Fund Services, LLC
 P. O. Box 701
 Milwaukee, WI 53201-0701

* If no selections are made, All Assets will be moved into your Guinness Atkinson IRA Account.

3 INVESTMENT CHOICES

Indicate your retirement investment amounts below.

A Guinness Atkinson Funds IRA Account Application must be completed to process this transfer if a new account is being established. The Fund(s) and the allocation(s) specified will be used if they are different from those indicated below.

<u>Fund Name</u>		New	Existing	Account # (if applicable)	Amount	Percentage
<input type="checkbox"/> Alternative Energy Fund	1298	<input type="checkbox"/>	<input type="checkbox"/>	_____	\$ _____ OR _____	%
<input type="checkbox"/> Asia Focus Fund	1096	<input type="checkbox"/>	<input type="checkbox"/>	_____	\$ _____ OR _____	%
<input type="checkbox"/> Asia Pacific Dividend Builder Fund	1299	<input type="checkbox"/>	<input type="checkbox"/>	_____	\$ _____ OR _____	%
<input type="checkbox"/> China & Hong Kong Fund	1094	<input type="checkbox"/>	<input type="checkbox"/>	_____	\$ _____ OR _____	%
<input type="checkbox"/> Global Energy Fund	1098	<input type="checkbox"/>	<input type="checkbox"/>	_____	\$ _____ OR _____	%
<input type="checkbox"/> Global Innovators Fund, Investor Class	1095	<input type="checkbox"/>	<input type="checkbox"/>	_____	\$ _____ OR _____	%
<input type="checkbox"/> Global Innovators Fund, Institutional Class	5323	<input type="checkbox"/>	<input type="checkbox"/>	_____	\$ _____ OR _____	%
<input type="checkbox"/> Dividend Builder Fund	1092	<input type="checkbox"/>	<input type="checkbox"/>	_____	\$ _____ OR _____	%
<input type="checkbox"/> Renminbi Yuan & Bond Fund	1099	<input type="checkbox"/>	<input type="checkbox"/>	_____	\$ _____ OR _____	%

4 AGE 70½ INFORMATION

Check one of the following:

- I am under the age of 70½ and do not turn 70½ at any time during the calendar year, or
- I am age 70½ or older and understand that no part of my required distribution is eligible for transfer or rollover. I further understand that there may be significant tax penalties resulting if a transfer or roll over of my required distribution occurs.

5 CONVERSION OF TRADITIONAL IRA TO ROTH IRA

- Check here if you are distributing assets from a Traditional IRA with the intention of establishing a Conversion Roth IRA.

6 SIGNATURE & CERTIFICATION

I certify that I have established an IRA with the Guinness Atkinson Funds, of which U.S. Bank, National Association is the Custodian. I agree to contact my present Custodian that I am transferring from to determine if specific documentation or a signature guarantee is required. I understand that I am responsible for determining my eligibility for all transfers or direct rollovers. I agree to hold the Custodian harmless against any and all situations arising from an ineligible transfer or direct rollover. I acknowledge that the Custodian cannot provide legal advice and I agree to consult with my own tax professional for advice.

I authorize U.S. Bancorp Fund Services, LLC to act on my behalf in contacting the current custodian or plan administrator to facilitate the transfer of assets.

X _____
SIGNATURE OF OWNER OR GUARDIAN (IF IRA OWNER IS A MINOR)

DATE

X _____
SIGNATURE GUARANTEE (FOR TRANSFERS FROM ANOTHER CUSTODIAN)

Important: Please contact your current Custodian 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 institutions include banks, savings associations, credit unions, and brokerage firms. The words "SIGNATURE GUARANTEED" must be stamped or typed near each of your signatures being guaranteed. 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 Stamp or seal is not acceptable.

7 ACCEPTANCE

Custodian Authorization: U.S. Bank, National Association hereby accepts its appointment as Custodian of the above IRA account and upon receipt of assets, will deposit such assets in a Guinness Atkinson Funds IRA on behalf of the Depositor authorizing this transfer or direct rollover.

U.S. Bank, National Association



Before you mail, have you:

- Completed an IRA Account Application if the transfer or direct rollover is going into a new account?
- Included documents from your current custodian or plan administrator, if required?
- Signed the application in section 6?