

TRANSFER AND INVESTMENT REALLOCATION FORM

Use this form to request a transfer between UCF accounts or a reallocation among UCF investment funds within an existing UCF account.

1. ORGANIZATION INFORMATION:

Organization Name: _____

2. TRANSACTION TYPE (required choose one):

☐ **Transfer:** Move funds from one UCF account to another UCF account.

Transfer From Account Number(s): _____

Transfer To Account Number(s): _____

☐ **Reallocation:** Change investment allocation within the same UCF account.

Account Number(s): _____

3. SELECT THE UCF INVESTMENT FUND(S) YOU WISH THE TRANSACTION TO BE APPLIED:

Transfer a specific amount according to current allocation: \$_____ OR

Indicate the dollar amount or percentage you wish to reallocate or transfer for each fund

	FROM	TO
UCF Balanced Fund	_____	_____
Beyond Fossil Fuels Balanced Fund	_____	_____
Alternatives Balanced Fund *	_____	_____
Total Equity Fund	_____	_____
Fixed Income Fund	_____	_____
Domestic Core Equity Fund	_____	_____
Beyond Fossil Fuels Equity Fund	_____	_____
Beyond Fossil Fuels Fixed Income Fund	_____	_____
International Equity Fund	_____	_____
Small Cap Equity Fund	_____	_____
Alternatives Fund * *	_____	_____
Cash & Equivalents Fund	_____	_____

** Alternatives Balanced Fund and Alternatives Fund offer nonstandard liquidity. Please contact UCF Staff for additional information.*

☐ Check here if you want the above transaction to recur. Please also indicate the details

Frequency (required): _____ Start Date: _____ End Date: _____

If no end date is provided, UCF may continue the recurring instruction until the Organization provides written instructions to change or stop it, or until UCF requires updated instructions under its then-current procedures, which is currently every 5-7 years.

Recurring instructions are subject to UCF's administrative procedures, liquidity terms, valuation timing, market holidays and any applicable fund restrictions.

4. AUTHORIZATION INFORMATION

Requests are subject to UCF's review, acceptance and any applicable fund restrictions. Completed requests are generally processed within 3–5 business days, although some requests may require additional review, confirmation or processing time. The Organization's participation in UCF's pooled investment funds is governed by its Master Participation Agreement or other applicable account agreement with UCF. For your protection, forms containing banking information, account numbers, donor information or other sensitive information should be submitted through [UCF's secure upload page](#) whenever possible. Completed forms may also be submitted by email to UCF Client Services at info@ucfunds.org.

By signing below, the Authorized Officer certifies that they are authorized to provide the instructions set forth in this form on behalf of the Organization. UCF may rely on this instruction in accordance with the Organization's Master Participation Agreement or other applicable account agreement with UCF.

Authorized Officer Name: _____

Signature: _____ Date: _____