



CGM FUNDS TRANSFER FORM

Please use this form to re-register all or partial shares of an existing account.
A transfer is a non-taxable re-registration of assets.

1. PLEASE TELL US ABOUT THE ACCOUNT FROM WHICH THE TRANSFER WILL BE MADE

CGM Fund Name	Account Number
Name(s) of Account Owner(s)	Name of Contact Person (if different from owner(s))
Address of Contact Person (if different from owner(s))	Daytime Telephone Number
<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Social Security Number on Account	Employer Identification Number (EIN) on Account

2. REASON FOR YOUR TRANSFER Please check one box. (See section 7 for additional requirements)

As part of the Emergency Economic Stabilization Act of 2008, mutual fund companies are required to report cost basis information to shareholders and to the Internal Revenue Service (IRS) on mutual fund shares acquired and subsequently redeemed after January 1, 2012.

To ensure accurate cost basis reporting, indicate the type of transfer requested and provide details where applicable. If no box is checked, this transfer will be defaulted to a **Change of ownership/registration – gift**.

- Minor has attained age of majority (For custodial UGMA/UTMA accounts only)**
- Change of ownership/registration — current owner(s) living**
- Change of ownership/registration — other**
- Change of ownership/registration — gift** Date of Gift: _____

If the gift recipient's existing or new account is coded for Average Cost as a cost basis calculation method, then the recipient's signature below indicates acceptance of the shares valued at fair market value as of the date of the gift or settlement date.

Fair Market Value Acceptance: _____
(Signature of gift recipient)

- Change of ownership/registration — one or more of current owner(s) deceased** Date of Death: _____ (required)

In certain instances, the executor of the estate may elect a different valuation date other than the date of death. If the estate qualifies for this election, then the estate can be valued for federal estate tax purposes exactly six months after the date of death.

Please consult a tax advisor as to whether the estate qualifies for such an election.

Alternate Date of Death and Value (optional): _____ \$ _____
Date Value

3. COST BASIS INFORMATION

The cost basis method that is currently on your account will be utilized to deplete the shares for this transfer unless you choose another cost basis method or provide specific share lots below.

Consult your tax advisor to determine which method best suits your individual tax situation.

- Utilize existing cost basis method (default if none checked);

Elect a new cost basis method for this transfer, please check one box below.

- FIRST IN, FIRST OUT (FIFO) — Shares acquired first in the account are the first shares depleted.
- LAST IN, FIRST OUT (LIFO) — Shares acquired last in the account are the first shares depleted.
- HIGH COST (HIFO) — Shares acquired with the highest cost per share are the first shares depleted.
- LOW COST (LOFO) — Shares acquired with the lowest cost per share are the first shares depleted.
- LOSS/GAIN UTILIZATION (LGUT) — Depletes losses before gains, consistent with the objective of minimizing taxes.
- Provide specific share lot(s):

Specific Lot Identification Information*: (To add additional lots, please attach a separate piece of paper with all necessary information)

Date of Purchase: _____ Number of Shares: _____

Date of Purchase: _____ Number of Shares: _____

Date of Purchase: _____ Number of Shares: _____

*If you are transferring shares that were purchased prior to January 1, 2012 (non-covered shares), CGM will provide average cost information (on eligible accounts) for these non-covered shares. This information will be provided to you on your Average Cost Statement in January. You are not required to use the cost basis information CGM provides on your non-covered shares.

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4. TRANSFER INSTRUCTIONS — Please complete section A or B.

Please write the name(s) of each new account owner below. Also, attach a completed CGM Funds Application for each new account being established, or provide an account number if the new owner(s) has an existing account. Please indicate the number or percentage of shares to be transferred in each case.

A. SINGLE TRANSFER — Transfer existing shares to one new account.

_____ # of shares to be transferred **OR**;

_____ % of shares to be transferred

Name(s) of New Owner(s)

New Account Application is attached **OR**;

Existing account number

B. MULTIPLE TRANSFERS — Transfer existing shares to more than one new account.

To add additional new account owners, please attach a separate sheet of paper with all the necessary information.

Account 1 — Please check one box and complete as indicated.

_____ # of shares to be transferred **OR**;

_____ % of shares to be transferred

Name(s) of New Owner(s)

New Account Application is attached **OR**;

Existing account number

Account 2 — Please check one box and complete as indicated.

_____ # of shares to be transferred **OR**;

_____ % of shares to be transferred

Name(s) of New Owner(s)

New Account Application is attached **OR**;

Existing account number

Account 3 — Please check one box and complete as indicated.

_____ # of shares to be transferred **OR**;

_____ % of shares to be transferred

Name(s) of New Owner(s)

New Account Application is attached **OR**;

Existing account number

5. SIGNATURE(S) OF OWNER(S) OR LEGAL REPRESENTATIVE(S):

By signing below, I/we certify under penalties of perjury that there are no known disputes or claims that would affect the transfer requested. The undersigned agrees to hold harmless and indemnify the CGM Funds, Boston Financial Data Services, and UMB Bank, n.a. for any claim, loss or liability resulting from any breach of the warranties and representations herein and from any action taken in connection with the re-registration or from any distribution thereafter made as requested or authorized.

I/We authorize the transfer of my/our shares as indicated in section 4. If you are signing for the account owner, please include your legal capacity, e.g. Trustee, Custodian, Executor, etc. A Medallion Signature Guarantee is required in most cases (see section 7).

Owner or Legal Representative (as listed in section 1)	Legal Capacity	Date
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6. MEDALLION SIGNATURE GUARANTEED BY:

Name of Bank or Firm

Signature of Officer, Title of Officer, and Date

Medallion Guarantee Stamp

7. TRANSFER PROCEDURES AND REQUIREMENTS

TRANSFER CHECKLIST

- Submit completed CGM Funds Transfer Form signed by current owner(s) or legal representatives.
- Obtain a Medallion Signature Guarantee for each account owner of the existing account to be transferred.
- Submit completed CGM Funds Application or provide existing account number for new owner(s).
- Submit shares held in certificate form (if any), unendorsed, via registered mail.
- Comply with additional requirements for specific situations, as outlined below.
- Mail items to: The CGM Funds, c/o BFDS, P.O. Box 8511, Boston, MA 02266 or by overnight mail to: 30 Dan Road, Canton, MA 02021.

ADDITIONAL REQUIREMENTS WHEN MINOR HAS ATTAINED AGE OF MAJORITY

- The Custodian can authorize the transfer by submitting a completed CGM Funds Transfer Form with a Medallion Signature Guarantee. The CGM Funds Transfer Form must be accompanied by a CGM Funds Application completed by the former Minor.
- Please call CGM Shareholder Services at 800-343-5678 for specific instructions for other situations.

ADDITIONAL REQUIREMENTS FOR CHANGE OF OWNERSHIP/REGISTRATION — CURRENT OWNER(S) LIVING

- When changing one type of registration to another (individual to joint, joint to trust, etc.), the CGM Funds Transfer Form must be signed by all current account owners.
- A Medallion Signature Guarantee is required for each signature.
- The CGM Funds Transfer Form must be accompanied by a completed CGM Funds Application.
- If re-registering the account as a trust, the title page and signature page(s) of the trust document must be included.

ADDITIONAL REQUIREMENTS FOR CHANGE OF OWNERSHIP/REGISTRATION — CURRENT OWNER(S) DECEASED

- A. For Joint Accounts (JT WROS)
1. The sole surviving tenant can authorize the transfer by submitting a CGM Funds Transfer Form with a Medallion Signature Guarantee and a completed CGM Funds Application.
 2. If the surviving owner(s) is adding any new owner(s), the CGM Funds Application must be signed by the existing and new owner(s).
- B. For Individual Accounts
1. If the owner is deceased, the executor or legal representative must submit a CGM Funds Transfer Form with a Medallion Signature Guarantee and a completed CGM Funds Application.
- C. Transfer on Death (TOD) Accounts (applies only to accounts already coded as TOD). Please submit the following items:
1. A CGM Funds Transfer Form signed by the beneficiary(ies). Each beneficiary's signature must be Medallion Signature Guaranteed.
 2. A CGM Funds Application signed by the beneficiary(ies). If doing multiple transfers, then each beneficiary must complete a separate CGM Funds Application.

ADDITIONAL REQUIREMENTS FOR CHANGE OF OWNERSHIP/REGISTRATION — GIFT

- A gift transfer of shares does not result in a sale of shares; therefore, the donor does not pay tax on the transferred shares. However, a gift tax may be applicable. Please consult your tax advisor for more information on gift taxes.
- The CGM Funds Transfer Form must be signed by all current owners.
- A Medallion Signature Guarantee is required for each signature.
- The CGM Funds Transfer Form must be accompanied by a CGM Funds Application, completed by the recipient(s) of the gift. If doing multiple transfers, then each gift recipient must complete a separate CGM Funds Application.

ADDITIONAL REQUIREMENTS FOR CHANGE OF OWNERSHIP/REGISTRATION — OTHER

- Please call CGM Shareholder Services at the number below for specific instructions if your transfer situation is not outlined above.

QUESTIONS? CALL 800-343-5678

Return this form to: The CGM Funds, c/o BFDS, P.O. Box 8511, Boston, MA 02266-8511

For overnight delivery, mail to: The CGM Funds, c/o BFDS, 30 Dan Rd., Canton, MA 02021-2809

Instructions and transaction requests by facsimile or e-mail are not accepted.