



MINNESOTA STATE BOARD OF INVESTMENT
60 Empire Drive Suite 100
St Paul MN 55103
651-296-3328 FAX 651-296-9572

TRUST and OTHER PARTICIPATING ENTITIES
TRANSACTION FORM

_____ Entity Name

Contribution: Complete this section if you are contributing funds to your account.

- If contributing by wire transfer please state the date the wire transfer will be made:
 _____ (Month/Day/Year)
****You will have to instruct your bank to submit the wire (see website for [wire details](#))****
- If contributing by check please enclose check.

Please indicate below how you wish to invest the contribution:

Non-Retirement Equity Fund	_____
Non-Retirement Bond Fund	_____
Non-Retirement Money Market Fund	_____
Total Contribution	_____

Withdrawal: Complete this section if you wish to withdraw funds from your account. Please indicate below which fund(s) from which you wish to withdraw. **Please note you must give 3 business days' notice for withdrawals and have your Entities bank information on file in order to withdraw funds (see website for [Wire Instruction form](#)).**

_____ (Month /Day/ Year) you would like your withdrawal.

Non-Retirement Equity Fund	_____
Non-Retirement Bond Fund	_____
Non-Retirement Money Market Fund	_____
Total Withdrawal	_____

Transfer: Complete this section if you wish to transfer funds from one investment option to another.

_____ (Month /Day/ Year) you would like your transfer

Account from which you wish to transfer funds:	Accounts into which you wish to transfer funds:
Non-Retirement Equity Fund _____	Non-Retirement Equity Fund _____
Non-Retirement Bond Fund _____	Non-Retirement Bond Fund _____
Non-Retirement Money Market Fund _____	Non-Retirement Money Market Fund _____

This form must be completed for all transactions and be sent to SBI before 2pm three business days prior to the wire transfer date:

_____ Signature

_____ Title

_____ Name (Must be Authorized Signer)

_____ Daytime Telephone Number