

Non-Retirement Change of Ownership Form



Please complete and return this form to **Davis Funds, P.O. Box 8406, Boston, MA 02266-8406**. For overnight mail: **Davis Funds, 30 Dan Rd, Canton, MA 02021-2809**. For assistance please call **Investor Services at 1-800-279-0279**.

TO ENSURE PROPER PROCESSING, PLEASE PRINT CLEARLY IN CAPITAL LETTERS USING BLACK INK

INSTRUCTIONS

Use this form to re-register, transfer, or gift shares **in kind**. (Example, shares in a New York Venture Fund Class A account will be re-registered, transferred, or gifted to another New York Venture Fund Class A account.)

If there are any outstanding stock certificates on the account that you wish to re-register or transfer, please return the certificates, unsigned, along with this form.

To avoid delays, be sure the requested transaction will not reduce each fund balance to below the established minimum that must be met and maintained. Please check the current prospectus at www.davisfunds.com for these minimums or call Investor Services for additional information.

Please note that if you are using this form to GIFT shares, the recipient of your gift **may** be required to sign this form. Please see Section C, Number 2 and have the recipient sign the form when applicable.

A. EXISTING ACCOUNT INFORMATION

When transferring shares, non-covered shares (those shares purchased prior to January 1, 2012) will be depleted first. In most cases, the remaining covered shares (those shares purchased after January 1, 2012) will be depleted using the cost basis method currently selected for the existing account.

If you are transferring covered shares AND the current cost basis election for these shares is Specific Lot Identification (SLID) you are required to notify us of the EXACT shares, including purchase dates, that you wish to transfer.

If you wish to change your cost basis election on your covered shares prior to this transfer, please complete the Davis Funds Cost Basis Change Form and submit it along with this request.

In the case of multiple recipients, shares will be transferred on a pro-rata basis unless otherwise requested. Pro-Rata applies to covered and non covered shares.

CURRENT OWNER(S)

Enter the information exactly as it appears on your Davis Funds Account Statement

Account Registration _____

Account Number _____

Daytime Phone Number _____

AMOUNT THAT YOU WISH TO TRANSFER

All shares of all funds

OR

Fund Name or Number	Amount	OR	Number of Shares	OR	Percentage
_____	\$ _____	OR	_____	OR	_____ %

_____	\$ _____	OR	_____	OR	_____ %
-------	----------	----	-------	----	---------

For accounts with covered shares using Specific Lot Identification, and not transferring all shares, please provide the specific share lots to transfer:

Fund Name or Number	Number of Shares	Date Acquired
_____	_____	_____
_____	_____	_____
_____	_____	_____

If more space is needed, attach a separate page that includes the sending and receiving account numbers, the fund name or number and the amounts, shares, or percentages to be re-registered, transferred, or gifted.

B. RECEIVING ACCOUNT INFORMATION

Please check one.

- 1. Existing Account

Account Number _____

Name of Owner/UTMA or UGMA Custodian/Trustee _____

Name of Co-Owner/UTMA or UGMA Minor/Co-Trustee _____

Daytime Phone Number _____

- 2. New account. **COMPLETE AND ATTACH A NEW DAVIS FUNDS ACCOUNT APPLICATION**

C. REASON FOR THE CHANGE IN OWNERSHIP

Please check one box to indicate the reason for the transfer to ensure accurate cost basis reporting. If no reason for the transfer is provided, the transfer **will** be processed as a gift.

- 1. **Due to Death** (Inheritance)

Date of Death is required (mm/dd/yyyy) ____/____/_____

OR

The date of death will serve as the acquisition date unless an **Alternative Valuation Date** (mm/dd/yyyy) ____/____/_____ or **Alternate Value** _____ is provided.*

*In some instances an executor (the person in charge of the estate) may elect a different valuation date. If the estate qualifies for this election, and the executor makes the election, the valuation date is six months after the date of death. **For additional information please consult a tax advisor.**

- 2. **Gift**

Date of Gift (mm/dd/yyyy) ____/____/_____. If no gift date is provided we will use the trade date.

If you are the recipient of gifted shares and have elected the cost basis method of average cost (ACST) for your account, the Internal Revenue Service requires that you provide acceptance of the fair market value. Fair Market Value will only apply if the shares being transferred have depreciated in value since the original purchase date. If you fail to sign the Fair Market Value Acceptance, your gifted shares will be transferred into an account using the default cost basis method (currently First In First Out). For additional information please consult a tax advisor.

Fair Market Value Acceptance: X _____
SIGNATURE OF GIFT RECIPIENT

- 3. **Re-registration, please select one.**

- a. **Name Change**

- b. **UTMA/UGMA** to an **Individual** account once the minor has reached the age of majority.

If you are transferring assets from an UTMA/UGMA registration after the minor has reached the age of termination of custodianship, **EITHER** the custodian or the former minor may sign this form. A new account application, completed and signed by the former minor, is also required for this re-registration.

- c. **Divorce/Separation**

- d. **Transfer to a Trust**

- e. **Other**, describe _____

