

Certification of Entitlement to Transfer On Death (TOD) Account

1. Account Information

First Investors Fund Account Number

Owner's Name **(print)**

TOD

Beneficiary's Name **(print)**

2. Certification of Beneficiary

(A) I am the Beneficiary (or duly authorized representative of the Beneficiary) named in the account referenced in **Section 1**. My name, social security number, date of birth and address are:

Beneficiary's Name (or duly authorized rep of the Beneficiary)

Beneficiary's Social Security Number

Beneficiary's Date of Birth

Beneficiary's Address (Street Address, City, State, Zip Code)

(B) I make this Certification to induce Foresters Financial Services, Inc. ("FFS") to transfer/liquidate the account referenced in **Section 1** in accordance with my instructions.

(C) The Account Owner died on (date of death) _____, as shown by the attached certified death certificate.

(D) At the Account Owner's death, the Account Owner was a resident of (State) _____, which (select one):

(1) requires inheritance tax waivers, which are attached; OR

(2) requires affidavit of domicile, which is attached.

(E) I know of no disputes or claims to the account which would affect the transfer/liquidation I have requested.

(F) Subject to the foregoing representations, I instruct FFS to transfer/liquidate the account referenced in **Section 1** as follows (select one):

(1) transfer the shares into a new customer account (Master Account Application is attached); OR

(2) transfer the shares into an existing (13-digit) master account number _____; OR

(3) liquidate account and mail proceeds to the Beneficiary's name and address listed in **Section 2(A)** above.

I authorize FFS to act in accordance with the above instructions. I understand that if shares are transferred, they will be transferred in the same fund as they are currently invested. I indemnify and hold harmless FFS and its affiliates, as well as its and their directors, officers, employees, agents, managers and representatives from and against any and all damages, claims, or causes of actions arising out of or in any way connected with this transaction.

3. Taxpayer Certification and Signature of Beneficiary

TAXPAYER CERTIFICATION. Under penalties of perjury, I certify that (1) the number shown on this Application is my correct taxpayer identification number (or I am awaiting a number to be issued to me); and (2) I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service ("IRS") that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and (3) I am a U.S. citizen or other U.S. person (defined in the Form W-9 instructions); and (4) I am exempt from Foreign Account Tax Compliance Act reporting. You must cross out (2) above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest or dividends on your tax return. If you are claiming an exemption as a non-resident alien, you should check this box and attach an IRS Form W-8BEN to this form. **The IRS does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.**

SG denotes a signature guarantee is required.

Affix Medallion Signature Guarantee Here, If Required:
Stamps qualified for a specific date and/or individual or altered in any manner, may not be accepted.

SG

Signature of Beneficiary (or duly Authorized Rep of Beneficiary) Date

I CERTIFY THAT ALL SIGNATURES THAT REQUIRE A SIGNATURE GUARANTEE ON THIS FORM ARE GENUINE.

Reg. Rep #	Office #	Registered Representative's Name (print)	Registered Representative's Signature	Date
Principal #	Principal's Name (print)		Principal's Signature	Date

Return by Regular Mail:
Foresters Investor Services, Inc.
P.O. Box 7837, Edison, NJ 08818-7837

Return by Overnight Mail:
Foresters Investor Services, Inc.
Raritan Plaza I, 8th Floor, Edison, NJ 08837-3620

For More Information:
First Investors Funds
800-423-4026 (Shareholder Services)
www.forestersfinancial.com