

NON-IRA REDEMPTION

Please complete all sections and mail form to the address provided below.

This form may be used to request a redemption from your RiverPark Funds non-retirement account. Please refer to the RiverPark Funds Prospectus for additional information regarding redemptions.

ACCOUNT **INFORMATION**

Please print.		
Account Owner's Name		Joint Account Owner's Name (if applicable)
Residential Address		
Daytime Phone Number		
List only the account(s) from	n which you wo	ould like the redemption taken.
Fund Name/Number	Account Nu	umber Redemption Amoun (see Step 2 below)
7 REDEMP	TION	
2 AMOUNT	Γ	
Please select one of the fol	llowing.	
☐ Partial redemption \$ shares per fund/account amounts should be diffe	_	or multiple fund/accounts please indicate if
☐ Full redemption per fund	d/account	
3 COST BA		METHOD
Please select one of the fol	llowing.	
into law, which included pro	ovisions from th	nic Stabilization Act, HR 1424, was signed the Energy Improvement and Extension Act cost basis reporting to their customers
purchased on and after Jan	uary 1, 2012 (co Il be used to de	ormation to you and the IRS for shares overed shares). The cost basis accounting plete the shares for this transaction unless ate election method.
☐ First-In First-Out		☐ Low Cost
☐ Last-In First-Out ☐ High Cost		☐ Loss/Gain Utilization
☐ Specific Lot Depletion	1	
Date of Purchase/	/	Number of Shares
Date of Purchase/	/	Number of Shares
Date of Purchase /	/	Number of Shares

If you have shares redeemed that were purchased prior to January 1, 2012 (non-covered shares), we may be able to provide you an average cost for these shares upon depletion.

This information will be provided to you on your 1099-B and you can choose to use this information for your taxes. This information will not be provided to the IRS.

☐ Yes, please provide average cost information on my non-covered shares when available. I understand that non-covered shares will be redeemed first and that covered shares will be redeemed using the method elected above; after all non-covered shares have been depleted. I understand that if I chose Specific Lot I will not be eligible to receive average cost on my non-covered shares.

METHOD OF

Please select one of the following.
☐ Send my redemption check to my address of record.*
☐ Send my redemption check to an address other than my address of record, information provided below.*
Payee Name
Street Address or P.O. Box
City, State, Zip
☐ Send my redemption proceeds to my bank. (In order for us to send the proceeds to your bank please select one of the following methods. If bank instructions are not already on file, please attach a pre-printed, voided check and provide a Medallion Signature Guarantee in Step 5.)
$\ \square$ ACH (requires up to three business days, at no charge)
☐ Fed Wire (next day, may be subject to an additional charge of \$10, deducted directly from the redemption proceeds)
Attach Voided Check Here
Bank's Name
Bank Routing Number Checking or Savings

*A Medallion Signature Guarantee is required in Step 5 if you request a redemption to be sent to an address other than the address of record, the check is not made payable to the registered owner, the address of record has been changed within the last 30 days, or the above bank instructions are different than the bank of record.

Account Number

Account Registration

5 SIGNATURES AND AUTHORIZATION

In order to complete your request, the required number of authorized signers must sign below exactly as it appears on your account (if signing on behalf of the account owner, please include your designated title), a Medallion Signature Guarantee will be required.

A Medallion Signature Guarantee assures that a signature is genuine and protects investors from unauthorized requests. A Medallion Signature Guarantee may be obtained from an officer of a commercial bank or trust company, savings and loan or savings bank, or a member firm of a domestic stock exchange. Notarization by a notary public is <u>not</u> acceptable.

The Fund participates in the Paperless Legal Program. Requests received with a Medallion Signature Guarantee will be reviewed for the proper criteria to meet the guidelines of the Program and may not require additional documentation.

By signing below, the owner(s) of the above referenced account(s) hereby authorizes the change of account ownership or transfer of shares specified in this form.

Account Owner's Signature and Date

Capacity (if acting on behalf of the Account Owner)

Joint Account Owner's Signature and Date

Capacity (if acting on behalf of the Account Owner)

Please return the completed form to the address below:

Regular mail:

The RiverPark Funds
P.O. Box 219008

Kansas City, M0 64121-9008

C/O DST Systems

430 W. 7th Street

Kansas City, M0 64105

If you have any questions or to ensure that all legal requirements are met, please call Shareholder Services at 1-888-564-4517.

Affix Medallion Signature Guarantee stamp.

Affix Medallion Signature Guarantee stamp.