



Regular Application New Account

Please do not use this form for IRA accounts.

Mail to: FundX Upgrader Funds
c/o US Bancorp Fund Services, LLC
PO Box 701
Milwaukee, WI 53201-0701

Overnight Express Mail to: FundX Upgrader Funds
c/o US Bancorp Fund Services, LLC
615 E. Michigan St. FL 3
Milwaukee, WI 53202-5207

For additional information, please call toll free **866-455-FUND** or visit us on the web at **www.fundxfund.com**.

In compliance with the USA PATRIOT Act, all financial institutions (including mutual funds) are required to obtain, verify, and record the following information for all registered owners or others who may be authorized to act on an account: **full name, date of birth, Social Security number, and permanent street address. Corporate, trust, and other entity accounts require additional documentation.** This information will be used to verify your true identity. We will return your application if any of this information is missing, and we may request additional information from you for verification purposes. In the rare event that we are unable to verify your identity, the Fund reserves the right to redeem your account at the current day's net asset value.

1. Investor Information – Select one

Individual

FIRST NAME _____ M.I. _____ LAST NAME _____ DOB (Mo / Dy / Yr) _____
SOCIAL SECURITY NUMBER _____ DRIVER'S LICENSE OR STATE I.D. NUMBER _____ STATE OF ISSUE _____

Joint Owner

FIRST NAME _____ M.I. _____ LAST NAME _____ DOB (Mo / Dy / Yr) _____
SOCIAL SECURITY NUMBER _____ DRIVER'S LICENSE OR STATE I.D. NUMBER _____ STATE OF ISSUE _____
Registration will be Joint Tenancy with Rights of Survivorship (JTWROS) unless otherwise specified.

Gift to Minor

CUSTODIAN'S FIRST NAME _____ M.I. _____ LAST NAME _____ DOB (Mo / Dy / Yr) _____
(ONLY ONE PERMITTED)
CUSTODIAN'S SOCIAL SECURITY NUMBER _____ DRIVER'S LICENSE OR STATE I.D. NUMBER _____ STATE OF ISSUE _____
MINOR'S FIRST NAME _____ M.I. _____ LAST NAME _____ DOB (Mo / Dy / Yr) _____
(ONLY ONE PERMITTED)
MINOR'S SOCIAL SECURITY NUMBER _____ MINOR'S STATE OF RESIDENCE _____

Corporation/
Trust *

NAME OF TRUST/CORPORATION/PARTNERSHIP AND STATE OF ORGANIZATION _____

Partnership*

NAME(S) OF TRUSTEE(S) _____

Other Entity*

SOCIAL SECURITY NUMBER / TAX ID NUMBER _____ DATE OF AGREEMENT (Mo / Dy / Yr) _____

* You must supply documentation to substantiate existence of your organization (i.e. Articles of Incorporation / Formation / Organization, Trust Agreements, Partnership Agreement, or other official documents.)

Remember to include a separate sheet detailing the full name, date of birth, Social Security number, and permanent street address for all authorized individuals.

2. Permanent Street Address (PO Box is not acceptable)
(Residential Address or Principal Place of Business)

STREET _____ APT / SUITE _____
 CITY _____ STATE _____ ZIP CODE _____
 DAYTIME PHONE NUMBER _____ EVENING PHONE NUMBER _____

Mailing Address (if different from Permanent):

If completed, this address will be used as the Address of Record for all statements, checks, and required mailings.

STREET _____ APT / SUITE _____
 CITY _____ STATE _____ ZIP CODE _____

Duplicate Statement #1

Complete only if you wish someone other than the account owner(s) to receive duplicate statements.

STREET _____ APT / SUITE _____
 CITY _____ STATE _____ ZIP CODE _____

Duplicate Statement #2

Complete only if you wish someone other than the account owner(s) to receive duplicate statements.

STREET _____ APT / SUITE _____
 CITY _____ STATE _____ ZIP CODE _____

3. Investment Choices

- By check: Make check payable to FundX Upgrader Funds \$ _____
 (\$2,500 minimum; \$500 minimum with Automatic Investment Plan)
 By wire: Call 866-455-3863. Indicate amount of wire: \$ _____
 (\$2,500 minimum; \$500 minimum with Automatic Investment Plan)

Fund Name	Investment Amount	Distribution Options		
		Capital Gains & Dividends Reinvested	Capital Gains Reinvested & Dividends in Cash*	Capital Gains & Dividends in Cash*
<input type="checkbox"/> FundX Upgrader Fund (1053)	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> FundX Aggressive Upgrader Fund (1055)	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> FundX Conservative Upgrader Fund (1056)	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> FundX Flexible Income Fund (1057)	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> First American Prime Obligations Fund Class A (Money Market) (1054)	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If nothing is checked, all distributions will be reinvested.

* Unless otherwise indicated, cash distributions will be mailed to the address in Section 2.

4. Automatic Investment Plan

If you choose this option, funds will be automatically transferred from your bank account monthly. Please attach a voided check or preprinted savings deposit slip to Section 7 of this application. We are unable to debit mutual fund or pass-through ("for further credit") accounts.

Your signed application must be received at least 15 business days prior to initial transaction.

	Amount per Draw	AIP Start Month	AIP Start Day
<input type="checkbox"/> FundX Upgrader Fund (1053)	\$ _____	_____	_____
<input type="checkbox"/> FundX Aggressive Upgrader Fund (1055)	\$ _____	_____	_____
<input type="checkbox"/> FundX Conservative Upgrader Fund (1056)	\$ _____	_____	_____
<input type="checkbox"/> FundX Flexible Income Fund (1057)	\$ _____	_____	_____
<input type="checkbox"/> First American Prime Obligation Fund Class A (Money Market) (1054)	\$ _____	_____	_____

Please keep in mind that:

- There is a \$25 fee if the automatic purchase cannot be made (assessed by redeeming shares from your account).
- Participation in the plan will be terminated upon redemption of all shares.

5. Telephone and Internet Options

Your signed application must be received at least 15 business days prior to initial transaction.

- Redemption** - permits the transfer of funds via:
 - Check to address in section 2
 - Federal wire to your bank account below (\$15.00 charge for each wire)*
 - EFT, at no charge, to your bank below (funds are typically credited within two days after redemption)*
- Purchase (EFT)** (\$100 minimum) - permits the on-demand purchase of shares from your bank account.*
- Exchange** (\$1,000 minimum) - permits the exchange of shares between identically registered accounts.
- E-mail Address** – permits the fund to send you fund updates _____

* If you selected any of these options, please attach a voided check or a preprinted savings deposit slip to this application. We are unable to draft or credit your account via EFT if it is a mutual fund or pass-through account.

6. Voided Check for Bank Information

If you have selected an automatic investment plan, wire redemptions, EFT purchases, EFT redemptions or a systematic withdrawal plan, please attach a voided check or a preprinted savings deposit slip in this space. We are unable to debit or credit mutual fund or pass-through accounts.

Please contact your financial institution to determine if it participates in the Automated Clearing House system (ACH).

PLEASE ATTACH
VOIDED CHECK OR
PRE-PRINTED SAVINGS
DEPOSIT SLIP HERE

7. Asset Re-Allocation Program

Aggressive (A1):

The aggressive investor has a long-term outlook and is willing to accept substantial risk to pursue higher returns. The aggressive investor is comfortable with portfolio volatility and willing to withstand even severe market corrections.

Growth (G1 & G2)

The growth investor is interested in accumulating wealth over time rather than generating current income. The growth investor has long-term goals and is willing to withstand significant market fluctuations, but not willing to take on as much risk as the aggressive investor.

Moderate (M1-M4)

The moderate investor seeks a balance between equity funds for long-term growth and income funds to dampen volatility. This investor must be willing to assume some risk of possible loss of principal in order to reach long-term goals.

Conservative (C1 & C2)

The conservative investor seeks more stable capital growth. This investor is cautious and wants to avoid substantial volatility, but is willing to accept some short-term risk and fluctuation in portfolio value. Modest exposure to equities provide growth potential to reach long-term goals; significant holdings in income-generating funds are intended to smooth returns, rather than provide current income.

- Please use this form to select a model and have your account(s) entered into the Asset Re-Allocation Program. I understand that my accounts will be rebalanced on a calendar quarter basis and all future changes/requests will need to be made in writing.

Aggressive:

- A1** (30% HOTFX; 70% FUNDX)

Growth:

- G1** (25% HOTFX; 50% FUNDX; 25% RELAX)

- G2** (25% HOTFX; 30% FUNDX; 25% RELAX; 20% INCMX)

Moderate:

- M1** (20% HOTFX; 50% RELAX; 30% INCMX)

- M2** (60% RELAX; 40% INCMX)

- M3** (50% RELAX; 50% INCMX)

- M4** (15% HOTFX; 15% FUNDX; 70% INCMX)

Conservative:

- C1** (10% HOTFX, 10% FUNDX; 80% INCMX)

- C2** (10% HOTFX; 90% INCMX)

