



Mail to: Kirr, Marbach Partners Funds
c/o U.S. Bank Global Fund Services
PO Box 701
Milwaukee, WI 53201-0701

Overnight Express Mail To: Kirr Marbach Partners Funds
c/o U.S. Bank Global Fund Services
615 E. Michigan St., FL 3
Milwaukee, WI 53202-5207

Purchase Application

Use this form for individual, custodial, trust, profit sharing or pension plan accounts. Do not use this form for Kirr, Marbach Partners Funds sponsored IRA or SEP IRA accounts. For any additional information, please call Kirr, Marbach Partners Funds at 1-800-870-8039 or visit us on the web at www.kmpartnersfunds.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 Funds reserve the right to redeem your account at the current day's net asset value.

A. Investment Choices
By check: Make check payable to Kirr, Marbach Partners Funds
By wire: Call 1-800-870-8039
Note: All checks must be in U.S. Dollars drawn on a domestic bank. The Fund will not accept payment in cash or money orders. Note: A completed application is required in advance of a wire. The Fund does not accept post-dated checks or any conditional order or payment. To prevent check fraud, the Fund will not accept third party checks, Treasury checks, credit card checks, traveler's checks, or starter checks for the purchase of shares.

Distribution Options: Capital Gains & Dividends Reinvested, Capital Gains Reinvested & Dividends in Cash*, Capital Gains and Dividends in Cash*, Dividend Reinvestment & Capital Gains in Cash*
Kirr, Marbach Partners Value Fund
Kirr, Marbach FA Retail Treasury Obligations Fund
*If cash distribution should be paid, please select one: Check to Address of Record, ACH to Bank of Record - Valid Voided Check or Savings Deposit Slip Needed

B. Registration

Individual
Joint Owner
Transfer to Minor
UTMA STATE (list state's law that governed the initial transfer)* AGE OF TERMINATION**2
"Minor" means an UTMA account owner (customer) who has not reached the age of termination (age the custodianship terminates, which is designated at the time of transfer and governed by state law). This means that depending on the applicable state, a minor could be older than 18 or 21.
Upon reaching the age of termination, the custodian must remove himself as custodian (and their authority over the account) so that the UTMA account owner can complete a new application solely in their name and under their control. The custodian will no longer be able to act on the account after the minor reaches the age of termination. Please note, transfers to a minor are irrevocable. Additionally, at the age of termination, U.S. Bank Global Fund Services as transfer agent for Kirr, Marbach Partners Funds reserves the right to restrict purchases and redemptions and reinvest any dividends and/or capital gains set to pay out in cash until the former minor completes a New Account Application.
*In the event that the custodian does not complete the "UTMA State" field above, the custodian hereby directs U.S. Bank to establish the UTMA state using the state from the Permanent Street Address provided in the Address section as the UTMA state. This designation shall permanently remain as the designated state for this account.
**In the event that the custodian does not complete the "Age of Termination" field above, the custodian hereby directs U.S. Bank to establish the account using the default age of termination for custodial property transferred by gift under the "UTMA State's" law

Trust3
Corporation5/ Partnership4/ Other Entity4
NAME OF TRUST3/CORPORATION5/PARTNERSHIP4
NAME(S) OF TRUSTEE(S)3 SOCIAL SECURITY # / TAX ID # DATE OF AGREEMENT (MM/DD/YYYY)

C. Permanent Address (Foreign Address & PO Boxes are not allowed)

Mailing Address (if Different from Permanent Address)

(If used, this address will be used as the Address of Record for all statements, checks, and required mailings. Foreign addresses are not allowed)

STREET APT/SUITE
CITY STATE ZIP
**DAYTIME PHONE # **EMAIL ADDRESS
CITY STATE ZIP

Minor's Address Check box if minor's address is same as the custodian's address. If not, please provide the minor's address below only if you wish

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

STREET APT/SUITE CITY STATE ZIP
NAME/COMPANY NAME
NAME/COMPANY NAME
STREET APT / SUITE CITY STATE ZIP
CITY STATE ZIP CITY STATE ZIP

D. Telephone and Internet Options

You automatically have the ability to make telephone and/or internet purchases*, redemptions*, or exchanges per the prospectus, unless you specifically decline below. See the prospectus for minimum and maximum amounts.

* You must provide bank instructions and a voided check or savings deposit slip in the Bank Information section. Please check the box below if you wish to decline these options. If the options are not declined, you are acknowledging acceptance of these options.

I decline telephone and/or internet transaction privileges.

E. Automatic Investment Plan (AIP)

Your signed Application must be received up to 7 business days prior to initial transaction.

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

Draw money for my AIP (check one): Monthly Quarterly Semi-Annually Annually (if no option is selected, the frequency will default to monthly.)

Kirr, Marbach Partners Value Fund
(minimum \$100.00) _____ AMOUNT PER DRAW _____ AIP START MONTH _____ AIP START DAY _____

Kirr, Marbach FA Retail Treasury Obligations Fund
(minimum \$100.00) _____ AMOUNT PER DRAW _____ AIP START MONTH _____ AIP START DAY _____

Please keep in mind that:

- There is a 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.

F. Systematic Withdrawals

To ensure proper debiting/crediting of your bank account, an unsigned voided check (for checking accounts) or a savings account deposit slip is required with your Application

I would like to withdraw from the Kirr, Marbach Partners Funds \$ _____ (minimum \$250.00 and Account Balance is greater than \$50,000) as follows:

- I would like to have payments made to me on or about the _____ day of each month or,
 I would like to have payments made to me on or about the _____ day of the months that I have circled below:

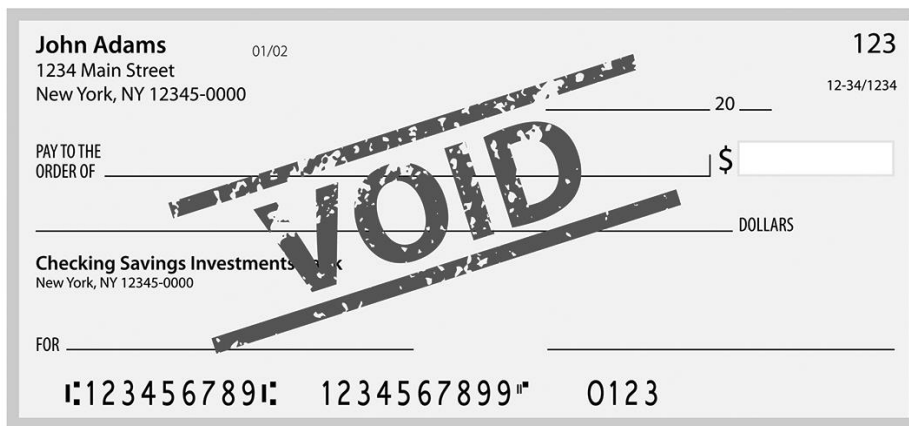
Jan. Feb. Mar. Apr. May June July Aug. Sept. Oct. Nov. Dec.

G. Bank Information

If you selected any options which require banking information, please attach a voided check or preprinted savings deposit slip. We are unable to debit or credit mutual fund or pass-through ("for further credit") accounts.

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

Note: There is a \$15 fee for next day wire and no fee for ACH (transfer takes 2-3 days).



H. Cost Basis Method

The Cost Basis Method you elect applies to all covered shares acquired from January 1, 2012 forward and to all identically registered existing and future accounts you may establish, unless otherwise noted. The Cost Basis Method you select will determine the order in which shares are redeemed and how your cost basis information is calculated and subsequently reported to you and to the Internal Revenue Service (IRS). **Please consult your tax advisor to determine which Cost Basis Method best suits your specific situation.** If you do not elect a Cost Basis Method, your account will default to Average Cost.

Primary Method (Select only one)

- Average Cost – averages the purchase price of acquired shares
 First In, First Out – oldest shares are redeemed first
 Last In, First Out – newest shares are redeemed first
 Low Cost – least expensive shares are redeemed first
 High Cost – most expensive shares are redeemed first
 Loss/Gain Utilization – depletes shares with losses prior to shares with gains and short-term shares prior to long-term shares
 Specific Lot Identification – you must specify the share lots to be sold at the time of a redemption (This method requires you elect a Secondary Method below, which will be used for systematic redemptions and in the event the lots you designate for a redemption are unavailable.)

Secondary Method– applies only if Specific Lot Identification was elected as the Primary Method (Select only one)

- First In, First Out Last In, First Out Low Cost High Cost Loss/Gain Utilization

Note: If a Secondary Method is not elected, First In, First Out will be used.

I. Signature and Certification Required by the Internal Revenue Service

I have received and understand the prospectus for the Kirr, Marbach Partners Value Fund ("Value Fund") and/or the Kirr, Marbach FA Treasury Obligations Fund ("Treasury Obligations Fund"), together referred to as the "Funds". I understand the Funds' investment objectives and policies and agree to be bound by the terms of the applicable prospectus. Before I request an exchange between the Funds, I will obtain the current prospectus of the Value Fund or the Treasury Obligations Fund. I acknowledge and consent to the householding (i.e. consolidation of mailings) of regulatory documents such as prospectuses, shareholder reports, proxies, and other similar documents. I may contact the Funds to revoke my consent. I agree to notify the Funds of any errors or discrepancies within 45 days after the date of the statement confirming a transaction. The statement will be deemed to be correct, and the Funds and their transfer agents shall not be liable if I fail to notify the Funds within such time period. I certify that I am of legal age and have legal capacity to make this purchase.

The Funds, their transfer agent, and any officers, directors, employees, or agents of these entities (collectively "Kirr, Marbach Partners Funds") will not be responsible for banking system delays beyond their control. By completing the banking sections of this application, I authorize my bank to honor all entries to my bank account initiated through U.S. Bank N.A., on behalf of the applicable Fund. Kirr, Marbach Partners Funds will not be liable for acting upon instructions believed to be genuine and in accordance with the procedures described in the prospectus or the rules of the Automated Clearing House. When AIP or Telephone Purchase transactions are presented, sufficient collected funds must be in my account to pay them. I agree that my bank's treatment and rights to respect each entry shall be the same as if it were signed by me personally. I agree that if any such entries are dishonored with good or sufficient cause, my bank shall be under no liability whatsoever. I further agree that any such authorization, unless previously terminated by my bank in writing, is to remain in effect until the Funds transfer agent receives and has had reasonable amount of time to act upon a written notice of revocation.

I understand that my mutual fund account assets may be transferred to my state of residence if no activity occurs within my account during the inactivity period specified in my State's abandoned property laws.

Under penalty of perjury, I certify that:

- 1) the Social Security or taxpayer identification number shown on this form is my correct taxpayer identification number
- 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 not 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; and
- 4) The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. Certification Instructions.

You must cross out item 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 and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisitions or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN.

The IRS does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

SIGNATURE OF OWNER*

DATE (MM/DD/YYYY)

SIGNATURE OF JOINT OWNER*

DATE (MM/DD/YYYY)

*If shares are to be registered in (1) joint names, both persons must sign, (2) a custodian for a minor, the custodian should sign, (3) a trust, the trustee(s) should sign, or (4) a corporation or other entity, an officer should sign and print name and title on space provided below.

If the custodian listed in the Investor Information section is NOT a parent or legal guardian of the minor, a parent or legal guardian is REQUIRED to complete the following section.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Under penalty of perjury, I certify that:

- 1) the Social Security or taxpayer identification number shown on this form is the correct taxpayer identification number (or I am waiting for 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 not 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; and
- 4) The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. Certification Instructions.

You must cross out item 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 and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisitions or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN.

I am signing on behalf of the minor as a parent or legal guardian:

PRINT MINOR'S NAME

SIGNATURE OF PARENT/LEGAL GUARDIAN

DATE (MM/DD/YYYY)