

Regular mail:

Impax Funds P.O. Box 534463 Pittsburgh, PA 15253-4463 Overnight mail:

Impax Funds Attention: 534463 500 Ross Street, 154-0520 Pittsburgh, PA 15262 Telephone: 1 (800) 372 7827

Change of Ownership Form/Account Re-Registration Form

Use this form to re-register all or a portion of the ownership of a non-retirement account. The change of ownership is an "in-kind" transfer of shares to the new account and is not a sale of securities or a taxable event. This form may be used for a transfer of shares due to divorce or separation, to transfer ownership from an individual or joint account to a trust account, to designate a new custodian for a minor's account, or to transfer shares due to death. You may wish to consult with a tax advisor for inheritance questions.

Notes

- A new Mutual Fund Account Application may be required to be completed and submitted with this form.
- Impax requires a Medallion Signature Guarantee (MSG) Stamp when using this form, unless otherwise noted.

This form is not to be used to transfer or update the registration of Individual Retirement Accounts (IRAs), 403(b) retirement accounts, Coverdell Education Savings Accounts (ESAs), or the Minor of UTMA/UGMA custodial accounts and IRA accounts.

1. Account Information — as Name	e(s) Appear on	the Account	Statement			
Account Number						
Account Owner's Name (or Trustee, Custodian, etc.)			Social Security/1	Social Security/Tax ID No.		
Joint Account Owner's Name (or Trustee, Co	ustodian, etc.)		Social Security/1	Social Security/Tax ID No.		
Mailing Address		City	State	Zip Code		
Day Telephone	Evening Teleph	none	Cell Telephone	l l		
Email Address			I			
2. Reason for Transfer — Complete A Medallion Signature Guarantee (MSG) St A. Re-registration of the account by t Individual to Joint Account	tamp will be requ					
Individual or Joint Account to is not required.	Trust Account - I	f the owner(s) an	nd trustee(s) are one and the	e same, an MSG Stamp		
Joint to Individual Account						
Individual or Joint to Corporat Customers with the new Mutu			tion Regarding Beneficial C	Owners of Legal Entity		
Divorce - Additional document	tation may be rec	quested.				
Reference Number (if additional of	documentation has a	lready been provided	d):			
Joint to separate Individua	l Account					
Individual to Individual						

Change of Ownership Form/Account Re-Registration Form (continued)



	Trust - Additional documentation may be requ	uested (Certificati	on dissolvir	ng the Trust or other I	egal d	docume	nts).
	Grantor (Trustor) to a new Trust account						
	Grantor (Trustor) to a new Individual or Jo	int account					
3.	Inheritance/Death of Account Owner – If you have confirm if any additional documentation will be recomplete the Non-Retirement Redemption Form	quired. If the trans					
	Reference Number (if additional documentation has already	ady been provided):					
	Date of death (required):	(m	nm/dd/yyyy)				
	Please select one of the below if it applies:						
	I am a Transfer on Death (TOD) Beneficiary en	titled to	% of th	e account.			
	I am the spouse of the deceased who solely he	eld an account.					
	I am a surviving Joint owner or co-Trustee of the surviving Joint owner owner or co-Trustee of the surviving Joint owner o	he account AND	are the	ir spouse OR 🔲 are	not th	neir spo	use.
	The cost basis of the shares will be adjusted in the percentage of assets invested by each own		IRS regula	tions for inherited sha	ires. P	lease pi	rovide
	Deceased Account Owner's Name:			Percent (%) Invested	1:		%
	Surviving Account Owner's Name:			Percent (%) Invested	1:		%
	I am a Successor Trustee of an account registe	red with the dece	eased as a T	rustee.			
	I am the Executor of the deceased's Estate.						
	Alternate Valuation						
	There is a special rule under the estate tax tha different valuation date in certain cases. If the the valuation date is six months after the date the amount of estate tax that must be paid. Be means you will now use the later date to deter	estate qualifies for of death. The pring a aware the electi	or this elect ncipal reaso on also has	ion, and the executor on for making this ele	make: ction i	s the el	ection, luce
	Alternate Valuation Date:		(mm/dd/yy	уу)			
	Alternate Value (optional): \$						
3. Aı	mount to be Transferred						
Fu	ull Account						
Pa	artial Account - Transfer across all funds proportion	ally	%				
Pa	artial Account - List Fund(s) and amount(s) below:						
		Amount		# of Shares		Per	cent
Fund	<u>:</u>	\$	OR	%	OR		%
Fund	l:	\$	OR	%	OR		%
Fund	l:	\$	OR	%	OR		%
Fund	l:	\$	OR	%	OR		%
Fund	·	\$	OR	%	OR		%

Change of Ownership Form/Account Re-Registration Form (continued)



4. Receiving Acco	unt Information				
Please indicate the rec	eiving account inform	ation to which th	e shares should	be transferred.	
Account Owner's Nar	ne (or Trustee, Custodian,	etc.)			
Joint Account Owner	's Name (or Trustee, Cust	todian, etc.)			
Existing Account -	- I (We) have an accou	ınt with Impax, re	egistered as ind	icated above.	
Deposit the shares	into the account: #				
	new account is being of form is a new Mutual I				
5. Owner Authoriz	zation and Medallic	on Signature G	Suarantee		
				rship by signing below. If the acc account owner, please sign in y	
domestic bank or trust program recognized by Transfer Agents Medall Signature Program (MS I certify that I am authono tax or legal advice I elections made on this manner requested. The I expressly assume respectation agents shall in no of the election(s) made Important: If you are as the appropriate box be	company, securities by the Securities Transfelion Program (known as SP). A notarization from the second of the sec	proker/dealer, clear Agents Associas STAMP), Stock manotary public elections and that by the Fund, or and the fund is hereby a ly rely on this cerese consequence and shall be indentated, plear is not listed, plear	aring agency or ation. The three Exchanges Mec is NOT an access all information by agent of eith authorized and actification and actification and held and held allease indicate the ase check "Other actions are the a	aranteed by an eligible guaranto savings association that particite recognized medallion program dallion Program (SEMP), and the eptable substitute for a signature provided is true and accurate. If er of them, and that all decision directed to distribute funds from authorization without further inverse from the election(s) and agreed tharmless, for any tax, legal or compare and specify your capacity.	ipates in a medallion is are the Securities e Medallion re guarantee. I further certify that is regarding the in my account in the estigation or inquiry, that the Fund and other consequences
Administrator	Custodian	Surviving	Joint Owner	Agent under POA	
Executor	Trustee	Conservato	or/Guardian	Other (please specify)	
]		
Signature of Account	Owner [Date	Signatur	e of Account Owner	Date
Medallion Signature G	Guarantee		Medallion	n Signature Guarantee	

Please include a Completed Mutual Fund Account Application or Non-Retirement Redemption Form.