



**Regular mail:**  
Pax World Funds  
PO Box 9824  
Providence RI 02940-8024

**Overnight mail:**  
Pax World Funds  
4400 Computer Drive  
Westborough MA 01581-1722  
Telephone: 1(800) 372-7827

## SIMPLE IRA Application and Adoption Agreement - Investor Class Shares

**Important Information about procedures for opening a new account.** To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. Your account may be restricted and/or closed if we cannot verify your information. We will not be responsible for any losses or damages resulting from any failure to provide this information, or from any restriction placed upon, or closing of, your account.

**State Unclaimed Property Law Disclosure:** The assets in your custodial account are subject to state unclaimed property laws which provide that if no activity occurs in your account within the time period specified by the particular state law, your assets must be transferred to the appropriate state.

### 1. Participant Information

First Name	Middle Initial	Last Name	Social Security/Tax ID No.	
Street Address (required; PO Box not permitted, except APO or FPO)		City	State	Zip Code
Mailing Address (if different from above)		City	State	Zip Code
( )	( )	( )		
Day Telephone	Evening Telephone		Cell Telephone	
Birthdate (mm/dd/yyyy)	Email Address			

### Employer Information

A copy of your employer's 5304 SIMPLE Form or SIMPLE Adoption Agreement must accompany this document in order to establish your SIMPLE IRA. Your employer's plan must permit each eligible employee to select a financial institution that will serve as the custodian, trustee or issuer of the SIMPLE IRA.

Employer's Name	( )			
	Telephone			
Employer's Address	City	State	Zip Code	

### 2. Broker-Dealer or Advisor Information (if applicable)

By designating a broker/dealer or financial adviser, I/we hereby authorize the Fund and its transfer agent to accept instructions from, and transmit information to, such designee concerning my/our account(s).

**RIA check here.** RIAs and other financial advisors without selling agreements with Pax World will receive duplicate statements only and will not be authorized to provide instructions for transactions or account changes.

FirmName	Dealer Number	Branch Number	Rep. Number	
Mailing Address	City	State	Zip Code	
Email Address	( )			
	Contact Telephone			

Representative's Name

### 3. Investment Instructions

- Establish a new SIMPLE-IRA for salary deferrals.
- Transfer from another SIMPLE IRA. Please complete the "Transfer of Assets" form.
- Rollover from another SIMPLE IRA. Initial Participation Date: \_\_\_\_\_



Note: Consent of the Participant's spouse may be required in a community property or marital property state to effectively designate a beneficiary other than, or in addition to, the Participant's spouse.

Disclaimer for Community and Marital Property States: The Participant's spouse may have a property interest in the account and the right to dispose of the interest by will. Therefore, any sponsors, issuers, depositories and other persons or entities associated with the investments and the Custodian specifically disclaim any warranty as to the effectiveness of the Participant's beneficiary designation or as to the ownership of the account after the death of the Participant's spouse. For additional information, please consult your legal advisor.

I consent to the Beneficiary Designation.

\_\_\_\_\_  
Signature of Depositor's Spouse (if applicable)

\_\_\_\_\_  
Date

## 6. Bank Account Information (optional)

Please attach a voided, unsigned check for the bank account to be used in conjunction with electronic transactions for on request redemptions including Telephone requests, submitted forms, and letters of instruction. If you are unable to provide a voided check, attach a copy of your bank statement, or a letter on bank stationery with your account registration, account number and bank routing number. The letter must be signed by a bank official.

\_\_\_\_\_  
Bank Name

\_\_\_\_\_  
Name(s) on Bank Account

\_\_\_\_\_  
Bank Routing/ABA Number

\_\_\_\_\_  
Bank Account Number

This is a:  Checking  Savings Account

Note: one common name must appear on both your Pax World account registration and the bank account registration.

Use this information for:  Automated Clearing House (ACH)  Federal Wire (\$10 fee for Wire Redemptions)

If neither option is checked, Pax World will use the default of Automated Clearing House.

You are hereby authorized to pay and charge to my account debits drawn on my account by and payable to the order of Pax World Funds. This authority is to remain in effect until revoked by me in writing and, until you receive such notice, I agree you shall be fully protected in honoring any such check. I further agree that if any such check is dishonored, whether with or without cause and whether intentionally or inadvertently, you shall be under no liability whatsoever. This option, if exercised, shall become part of the account application and the terms, representations and conditions thereof.

## 7. Consent for E-Delivery

If you elect E-Delivery, you will receive a notification to the email address provided in Section 2 informing you when a document is available for viewing at [www.impaxam.com](http://www.impaxam.com).

You may view, change or revoke your E-Delivery preferences and the email address we have on file for you at any time by logging into our online account access system at [www.impaxam.com](http://www.impaxam.com). Confidential account information will not be sent to you or requested from you via email.

### Document Types for E-Delivery:

Prospectus

Annual Report

Semi-Annual Report

Quarterly Statements

Tax Forms

Proxy Materials

Transaction Confirmations

## 8. Terms and Conditions

I, the Participant, acknowledge receiving and reading the SIMPLE IRA Application and Adoption Agreement Instructions, the Disclosure Statement, the Custodial Account Agreement and the Privacy Notice (the "Account Documents"). I acknowledge receiving and reading the current prospectus for each Mutual Fund I may have designated for investment. I understand that contributions to my SIMPLE IRA will be invested in accordance with the written instructions I provide with respect to that contribution. The Custodian, upon proper instructions from me, is authorized to exchange units of one Eligible Asset for units of any other Eligible Asset and to purchase units of any Eligible Asset with the proceeds of any redemption.

Article VIII, Section 23 of the Custodial Account Agreement authorizes the Custodian to take or to omit to take certain actions in the event assets or property in my SIMPLE IRA account are liquidated and the Custodian does not receive timely instructions it can reasonably or practicably carry out and I agree to said Section 23.

I hereby establish a SIMPLE IRA in accordance with the instructions provided on these pages and agree to participate under the terms and conditions contained in the Account Documents and these pages titled "SIMPLE IRA APPLICATION AND ADOPTION AGREEMENT" (the "Full Agreement"). I agree that this SIMPLE IRA becomes effective only upon written acceptance by the Custodian and that such written acceptance will consist of a confirmation of transaction statement. I also acknowledge receiving a copy of the employer plan document under which this SIMPLE IRA is established.

I agree that the Custodian may amend (add to, delete from or revise) any term of the Full Agreement at any time by notice to me and that my sole remedy if I disagree with the amendment is to transfer funds in the SIMPLE IRA account to another custodian. I agree that the Full Agreement is binding on me and on my successors in interest.

**Custodial Fees:** \$15.00 annual maintenance fee per account per year, due in December. This fee is owed and due for each full and partial calendar year that the SIMPLE IRA is open. The Participant may pay the fee with funds other than those in the SIMPLE IRA ("non-custodial funds"). If the fee for a calendar year is not paid by the participant from non-custodial funds by the date in December designated by the Custodian or prior to closing the SIMPLE IRA account, the Custodian is authorized to deduct the fee from funds in the SIMPLE IRA account at any time immediately after such payment due date or immediately after receiving instructions to close the SIMPLE IRA account. The Custodian is authorized to change the fee but will give at least 30 days written notice to the Participant of any fee change. The Custodian will keep those records, identify and file returns and provide other information concerning the IRA as required of custodians by the Internal Revenue Code and any regulations issued or forms adopted by the Internal Revenue Service or U.S. Treasury Department.

I have reviewed the rules set forth in the prospectus and the appropriate IRA Agreement regarding telephone/online transactions, and certain circumstances which may require redemptions to be requested in writing, including significant restrictions which apply to IRA redemptions. I understand that the telephone/online transaction privileges will apply to my account. If I do not provide banking information, telephone redemptions will be mailed via check to my address of record. I agree that neither the Custodian, Pax World Funds, nor their transfer agent, their agents, officers, trustees, directors or employees will be liable for any loss, liability or expense for acting, or refusing to act on instructions given under the telephone/online transaction privileges that are reasonably believed to be genuine and I accept the risk of loss.

I direct that upon my death benefits be paid as indicated on the beneficiary designation. If I name a Trust as beneficiary, I understand I must provide certain information concerning such Trust to the Custodian.

I (the Participant) certify under penalties of perjury that (i) all information I have provided on this form or otherwise in connection with establishing my SIMPLE IRA is true, correct, and complete, (ii) I am a US person (including a US resident alien) and that my Social Security Number is true, correct and complete and that this number is my Taxpayer Identification Number, and (iii) I am not subject to FATCA reporting.

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Participant's Signature

Date

IRA Custodian: BNY Mellon Investment Servicing Trust Company, 4400 Computer Drive, Westborough, MA 01581