

Government Money Market Fund: Class X

Application Registration Form

All accounts must be opened in the name of the account entity and executed by an Account Representative with the authority and legal capacity to execute the document on behalf of the account entity.

If you need assistance in filling out this form, please contact Client Services at 800.325.3539.

Return completed form via:

Email: funds@meederinvestment.com

Fax: 614.766.6669

Mail: PO Box 7177, Dublin OH 43017

Account Registration—The account should be registered as follows:

ACCOUNT REPRESENTATIVE

ACCOUNT ENTITY

ACCOUNT ENTITY TYPE

ATTENTION OF

TAX ID OF ACCOUNT OWNER

REGISTRATION ADDRESS (PHYSICAL ADDRESS REQUIRED)

TELEPHONE NUMBER

CITY

STATE

ZIP CODE

EMAIL ADDRESS

FAX (IF ANY)

ELECTRONIC DELIVERY

I would like to receive my statements via e-Delivery.

MAILING ADDRESS (If different from Registration Address):

STREET ADDRESS

TELEPHONE NUMBER

CITY

STATE

ZIP CODE

Dividends and Capital Gain Distributions—All dividends and capital gains are to be reinvested. If you would like to receive payment in cash, please select the option below. Payments will be made by ACH to the bank of record. If there is no bank of record on file, payments will be made by check.

Receive dividends and capital gains payments in cash.

Telephone Transactions—I hereby authorize and direct the transfer agent to accept and act upon telephone instructions for exchanges and/or redemptions involving the account unless one or both of the following is (are) checked:

I do not authorize telephone exchanges.

I do not authorize telephone redemptions.

Bank Account Registration

I would like to: Add Delete **Type:** ACH Wire Both

Please note: ABA/Routing numbers may vary depending on transaction type. Please verify information below with your bank before submitting.

BANK NAME		REGISTERED NAME OF BANK ACCOUNT	
BANK ABA/ROUTING NUMBER		BANK ACCOUNT NUMBER	FOR FURTHER CREDIT (WIRE TRANSACTIONS ONLY)
ADDRESS	CITY	STATE	ZIP CODE

Bank Account Type (select one): Checking Savings

Please note: Meeder Funds requires a one business day hold on transactions initiated to a newly added bank account. In addition, there will be a five business day hold on all online transactions initiated to a newly added bank account. A verbal verification is required by an authorized signer prior to processing any requests to add a new bank payee.

Authorized Signer Designation—The following named persons are authorized signatories of the Meeder Funds account owner, and any one of them (“Authorized Signer(s)”) is authorized to act with full power to purchase, transfer or redeem investments in Meeder Funds on behalf of the account owner and to execute and deliver any instrument necessary to effectuate the authority hereby conferred. The telephone number provided will be used to perform verbal confirmation of transaction requests.

Each account requires at least two (2) Authorized Signers.

PRINTED NAME	SIGNATURE	Full Online Access View Only Online Access
TITLE	TELEPHONE NUMBER	EMAIL
PRINTED NAME	SIGNATURE	Full Online Access View Only Online Access
TITLE	TELEPHONE NUMBER	EMAIL
PRINTED NAME	SIGNATURE	Full Online Access View Only Online Access
TITLE	TELEPHONE NUMBER	EMAIL

Signature Certification—By executing this Application, the undersigned Account Representative represents and warrants that the Account Entity has the full right, power, and authority to invest in Meeder Government Money Market Fund – Class X. In addition, on behalf of the Account Entity, the undersigned represents and warrants that he/she is a duly designated representative of the Account Entity and is authorized to sign this application.

- » I have received, read and agree to the terms of the prospectus for Meeder Funds.
- » I understand there is a \$500,000 minimum to invest in the Meeder Government Money Market Fund – Class X.
- » I authorize Meeder Funds, their affiliates and agents to act on my instructions believed to be genuine for any service authorized on this form. I agree that they will not be liable for any resulting loss or expense associated with acting on such expense.
- » Meeder Funds is hereby authorized to redeem shares from my account(s) to reimburse a Fund for any loss due to nonpayment of annual fee for having below the minimum required balance. If shares are purchased by check, the Funds' transfer agent will not pay a redemption until reasonably satisfied the check used to purchase shares has been collected upon, which may take up to 10 days.
- » I CERTIFY UNDER PENALTIES OF PERJURY THAT (1) THE EMPLOYER IDENTIFICATION NUMBER PROVIDED IN THIS APPLICATION IS CORRECT (OR I AM WAITING FOR A NUMBER TO BE ISSUED) AND (2) THE ENTITY IS NOT SUBJECT TO BACKUP WITHHOLDING BECAUSE (A) IT'S EXEMPT FROM BACKUP WITHHOLDING OR (B) IT HAS NOT BEEN NOTIFIED BY THE INTERNAL REVENUE SERVICE (IRS) THAT IT IS SUBJECT TO BACKUP WITHHOLDING AS A RESULT OF A FAILURE TO REPORT ALL INTEREST AND DIVIDENDS OR (C) THE IRS HAS NOTIFIED THE ENTITY THAT IT IS NO LONGER SUBJECT TO BACKUP WITHHOLDING. CROSS OUT CLAUSE (2)(B) OF THIS PARAGRAPH IF THE IRS HAS NOTIFIED THE ENTITY THAT IT IS SUBJECT TO BACKUP WITHHOLDING AND (3) THE ENTITY IS A U.S. DOMESTIC ENTITY AND (4) IT IS EXEMPT FROM FATCA REPORTING.
- » THE IRS DOES NOT REQUIRE YOUR CONSENT TO ANY PROVISION OF THIS DOCUMENT OTHER THAN THE CERTIFICATION REQUIRED TO AVOID BACKUP WITHHOLDING.

SIGNATURE OF ACCOUNT REPRESENTATIVE

PRINTED NAME OF ACCOUNT REPRESENTATIVE

TITLE

DATE
