



# New Account Application

**Overnight Delivery:**  
Wasatch Funds  
235 W. Galena Street  
Milwaukee, WI 53212

**Regular Mail:**  
Wasatch Funds  
P.O. Box 2172  
Milwaukee, WI 53201-2172

In compliance with the USA Patriot Act, all mutual funds are required to obtain and verify the following information for all registered owners and all authorized individuals: *full name, date of birth, social security number and permanent street address (no P.O. boxes)*. If any of this information is missing we will be unable to establish an account and your application and check will be returned.

## 1. INVESTOR INFORMATION (REQUIRED)

Please complete the section below that applies (A, B or C).

### A. Individual/Joint Owner

Name		Social Security Number	Birthdate
Permanent Address (no P.O. boxes)	City	State	Zip
Daytime Phone Number	Evening Phone Number	E-mail Address	
Joint Owner (Joint Tenant with Right of Survivorship unless otherwise specified.)		Social Security Number	Birthdate
Permanent Address (no P.O. boxes)	City	State	Zip
Daytime Phone Number	Evening Phone Number	E-mail Address	

### B. Custodial/Gift to Minor

Custodian		Custodian's Social Security Number	Custodian's Birthdate
Permanent Address (no P.O. boxes)	City	State	Zip
Daytime Phone Number	Evening Phone Number	E-mail Address	
Minor		Minor's Social Security Number	Minor's Birthdate
Permanent Address (no P.O. boxes)	City	State	Zip

**C. Trust, Corporation, Partnership or Other Entity** (All trustees, partners, officers or other authorized individuals must provide their full name, date of birth, social security number and permanent street address; no P.O. boxes. Additional space has been provided at the end of this application.)

- Trust   
 C-Corporation   
 S-Corporation   
 Government   
 Partnership   
 Other Entity\_\_\_\_\_
- LLC classified for tax purposes by one of the following:   
 C-Corporation   
 S-Corporation   
 Partnership

Trustee Name	Partner, Officer, Other	Social Security Number	Birthdate
Permanent Address (no P.O. boxes)	City	State	Zip
Daytime Phone Number	Evening Phone Number	E-mail Address	
Name of Entity	Taxpayer I.D. Number	Date of Trust	

### Required documentation for Corporate, Trust, Partnership or Other Entity:

**Corporate:** A copy of the Articles of Incorporation. Complete the Redemption and Exchange Privileges Form to add telephone exchange and redemption privileges.

**Trust:** A copy of the title and signature pages of the trust document.

**Partnership:** A copy of the partnership papers. Complete the Redemption and Exchange Privileges Form to add telephone exchange and redemption privileges.

**Other Entity:** Documentation supporting the entity's establishment. Complete the Redemption and Exchange Privileges Form to add telephone exchange and redemption privileges.

**2. MAILING ADDRESS (if different from permanent address above)**

Send duplicate confirmations to:

Address \_\_\_\_\_  
 City / State / Zip \_\_\_\_\_

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City / State / Zip \_\_\_\_\_

**3. INVESTMENT INSTRUCTIONS & COST BASIS ELECTION (REQUIRED)**

For Fund names, numbers and status, please see the "About Wasatch" insert in the Fulfillment Kit, log on to [www.wasatchfunds.com](http://www.wasatchfunds.com) or call Shareholder Services at 800.551.1700.

The minimum initial investment is \$2,000 per fund (\$1,000 if you are establishing an Automatic Investment Plan, see section 6). For Cost Basis Method Election, please choose only one option per fund. If nothing is selected, Wasatch's default election (average cost) will be applied.

Fund Name	Symbol or Ticker	Amount	Cost Basis Method Election				
			Average Cost	FIFO	LIFO	Specific ID	Other*
_____	_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
_____	_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
_____	_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
_____	_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
_____	_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<b>TOTAL: \$</b> _____					

If you need more space, provide the same information on a separate sheet. **If a specific fund is not selected, your contribution will be invested in the Wasatch-Federated Money Market Account until we received further notice.** Cash, credit cards, third party checks, credit card checks, money orders, traveler's checks and checks drawn on banks outside the U.S. will not be accepted.

Do you have other Wasatch Funds accounts?  Yes  No

**\*For a description of available cost basis methods see below or contact Shareholder Services at 800.551.1700 for additional information.**

- 1. Average cost:** Average cost of shares is determined by dividing the total dollar amount invested in a particular fund by the number of shares held prior to the trade date. Shares are removed in FIFO order.
- 2. FIFO (First-In, First-Out):** Share lots purchased first will be sold first.
- 3. LIFO (Last-In, First-Out):** Share lots purchased last will be sold first.
- 4. Specific Identification:** You direct Wasatch on each trade as to the shares to be sold.
- 5. HIFA (Highest Cost In, First-Out All):** Share lots with the highest cost will be sold first and all shares are considered regardless of long-term or short-term.
- 6. HIFL (Highest Cost In, First-Out Long-Term):** Share lots with the highest cost, long-term will be sold first.
- 7. HIFS (Highest Cost In, First-Out Short-Term):** Share lots with the highest cost, short-term will be sold first.
- 8. LOFA (Lowest Cost In, First-Out All):** Share lots with the lowest cost are sold first and all shares considered regardless of long-term or short-term.
- 9. LOFL (Lowest Cost In, First-Out Long-Term):** Share lots with the lowest cost, long-term are sold first.
- 10. LOFS (Lowest Cost In, First-Out Short-Term):** Share lots with the lowest cost, short-term are sold first.

**In order to discourage market timing and protect the interests of shareholders, Wasatch Funds will deduct a fee of 2.00% from redemption proceeds on Fund shares held 60 days or less.**

**4. FUNDING THE ACCOUNT (REQUIRED)**

Please select method of purchase:

- Check payable to Wasatch Funds \$ \_\_\_\_\_
- ACH (Bank Purchase) \$ \_\_\_\_\_

Please provide bank information in section 5. Your initial investment will be withdrawn directly from your checking or savings account named in section 5 on the date your application is received in good order or the first business day thereafter.

Bank wire: Call 800.551.1700 for instructions. Date of wire \_\_\_\_\_ Amount \$ \_\_\_\_\_

## 5. BANK INFORMATION

Please complete this section if you would like to be able to move money between your bank and your Wasatch account. For checking accounts, please include a voided check with this form (other than your investment check). For savings accounts, provide your bank's ABA number and savings account number below. To add bank information after your account has been established, an Account Privileges Change Form (with a Medallion signature guarantee) is required.

Bank Name

Bank Address

Routing Number

Account Number

Name(s) on Bank Account

### Account Type

Checking Account

Savings Account

I authorize the bank listed above for:

Electronic Funds Transfer (takes 2 – 3 business days)

Wire Redemptions (\$15.00 fee – takes 1 business day)

## 6. AUTOMATIC INVESTMENT PLAN

Your signed application must be received at least 14 days prior to initial transaction. Please complete section 5.

The minimum initial investment for an Automatic Investment Plan is \$1,000. Minimum additions to any fund are \$100 quarterly; \$50 monthly. Automatic investments can be made on the 5th and/or 20th of each month.

Monthly  Quarterly (Jan., Apr., July, Oct. / Feb., May, Aug., Nov. / Mar., June, Sept., Dec.)

Begin investment on mm/yy

<input type="checkbox"/> 5th <input type="checkbox"/> 20th		\$	
	Fund		Amount
<input type="checkbox"/> 5th <input type="checkbox"/> 20th		\$	
	Fund		Amount
<input type="checkbox"/> 5th <input type="checkbox"/> 20th		\$	
	Fund		Amount

Your automatic investment will be withdrawn directly from your checking or savings account named in section 5 on the date you have selected or the first business day thereafter. If no date is selected, purchases will be made on the 20th of each month.

## 7. DISTRIBUTIONS

Dividends and capital gains reinvested\*

Dividends and capital gains in cash

If dividends and capital gains are paid in cash:

By check payable to address of record

By ACH payable to bank account named in section 5.

Dividends and capital gains directed to an **existing** Wasatch Fund. Account number:   / \_\_\_\_\_.

\* If no distribution option is checked, dividends and capital gains will be reinvested.

## 8. CHECKWRITING AUTHORIZATION

Checkwriting is available on the Wasatch-Federated Money Market Account.

To establish checkwriting privileges and have a checkbook sent to you please complete the Signature Verification Form. This form can be found online at [www.wasatchfunds.com](http://www.wasatchfunds.com).

Go paperless! You can receive shareholder reports (prospectus updates, annual and semi-annual reports) and statements (transaction confirmations and account statements) electronically. To enroll for this service, please visit our web site.

## 9. TELEPHONE REDEMPTIONS

Permits the redemption of a minimum of \$500 and a maximum of \$50,000. A minimum of \$500 must remain in your account to keep it open. The proceeds will be mailed to your address of record or deposited electronically in your bank account.

No, I do **not** want telephone redemption privileges.

Telephone redemption privileges will be automatically added to your account unless you check the "No" box. If you decline this option, adding this privilege at a later time will require a Medallion signature guarantee.

Accounts will automatically have the telephone exchange privilege unless it is specifically declined. Contact a shareholder services representative for more information.

**Wasatch Funds employs reasonable procedures to confirm that instructions communicated by telephone are genuine and may not be held liable for losses due to unauthorized or fraudulent instructions. Please see the prospectus for more information about telephone redemption privileges.**

## 10. SIGNATURES AND CERTIFICATION (REQUIRED)

I am (we are) of legal age, have received and read the prospectus and privacy policy and agree to the terms therein.

By selecting the box below, I am certifying that I am NOT a U.S. Citizen.

I am a Resident Alien

REQUEST FOR TAXPAYER IDENTIFICATION NUMBER (Substitute Form W-9)

Under penalties of perjury, I certify that: (1) the number shown on this form is my 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 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. person (including a U.S. resident alien), and (4) I am exempt from FATCA reporting.

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, acquisition 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 further acknowledge that the Wasatch Funds are distributed by ALPS Distributors, Inc. The Wasatch-Federated Money Market Account is distributed by Federated Securities Corp. and offered by a separate prospectus. The Wasatch-Federated Money Market Account and Federated Securities Corp. are not affiliated persons of the Wasatch Funds or their investment adviser, Wasatch Advisors, Inc. Through an agreement with Federated Securities Corp. and/or its affiliates, Wasatch Advisors, Inc. is providing administrative and recordkeeping services for the Wasatch-Federated Money Market Account.

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

I acknowledge and consent to the delivery of a single "shared" copy of each prospectus and shareholder report to me and all other shareholders who share my address. I understand that I may revoke my consent at anytime by calling a shareholder services representative at 800.551.1700 or by writing to Wasatch Funds.

I certify that I am not a Foreign Financial Institution as defined in the USA PATRIOT Act.

All registered owners, officers, partners, trustees or custodian must sign.

\_\_\_\_\_  
Signature of Individual or Custodian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Joint Owner, Trustee, Partner, Officer, Other

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Joint Owner, Co-Trustee, Partner, Officer, Other

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Joint Owner, Co-Trustee, Partner, Officer, Other

\_\_\_\_\_  
Date

## ADDITIONAL INDIVIDUALS

\_\_\_\_\_  
Name

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Birthdate

\_\_\_\_\_  
Permanent Address (no P.O. boxes)

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Birthdate

\_\_\_\_\_  
Permanent Address (no P.O. boxes)

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date