

# Amundi US

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## SIMPLE IRA Application

### It's Easy to Open a SIMPLE IRA.

1. Select the Pioneer Funds you wish to invest in.
2. Complete and sign this application.
3. Make your check payable to **Pioneer Funds**.  
**We do not accept third-party checks, starter checks, or cash equivalents.**
4. If you are transferring assets from another IRA or retirement plan, complete all forms required by the employer maintaining your current plan. Also, fill out the *Rollover/Transfer/Conversion Form*. We will arrange the transfer for you.
5. Mail both your check and completed application to

**Pioneer Funds**  
**PO Box 219427**  
**Kansas City, MO 64121-9427**

Overnight Address:

**Pioneer Funds**  
**430 W 7th Street STE 219427**  
**Kansas City, MO 64105-1407**

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## USA PATRIOT Act Information

### Important Information About 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.

Please talk to your investment professional or call Amundi US at 1-800-622-0176 if you have any questions about completing this application.

For information about our privacy policy, see the Privacy of Customer Information brochure, which is mailed upon confirming the new account opening and annually thereafter. If you opened your account through a brokerage firm, you can also view the privacy brochure at [amundi.com/usinvestors](https://amundi.com/usinvestors). Check each fund's prospectus or summary prospectus for information about the share classes available and which is suitable for your investment.

Pioneer Funds (U.S. domiciled) are available for purchase only in the United States and its territories. The Funds will only accept accounts and purchases from U.S. citizens with a U.S. address, (including U.S. territories and military post offices), and a U.S. issued taxpayer identification number, or resident aliens with a U.S. address and U.S. taxpayer identification number.



# Amundi US

## SIMPLE IRA Application

Mail to Pioneer Funds, PO Box 219427, Kansas City, MO 64121-9427.

Overnight address: 430 W 7th Street STE 219427, Kansas City, MO 64105-1407.

Questions? Call our Retirement Plans Department at 1-800-622-0176.

For information about our privacy policy, see the Privacy of Customer Information brochure that accompanies each fund's prospectus.

Please print in blue or black ink.

### 1 Employee Information

If you are providing a P.O. Box as a mailing address, you must also provide a residential address or the address of a principal place of business. You must be a U.S. citizen or resident alien with a valid U.S. tax identification number and a valid U.S. mailing address to open an account.

First Name, Middle Initial, Last Name \_\_\_\_\_ Date of Birth (mo/day/yr) \_\_\_\_\_ Social Security Number \_\_\_\_\_

Residential or Business Address (Required) \_\_\_\_\_ Telephone Number \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address (If different from above) \_\_\_\_\_

#### Residency (Select one.)

U.S. citizen or  Resident alien If resident alien, indicate country of origin \_\_\_\_\_.

### 2 To Be Completed by Employer

Name of Employer Sponsoring Plan \_\_\_\_\_ Employer Federal Tax ID Number \_\_\_\_\_

Street Address \_\_\_\_\_ Telephone Number \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_ Contact Person \_\_\_\_\_

Plan ID Number (if available) \_\_\_\_\_

Have you previously submitted SIMPLE IRA applications for any other employees?  Yes  No

Do you want to receive Remittance Reminders?  Yes  No

If you are not supplying contribution information electronically or by remittance form, indicate the contribution amount for this employee. \$ \_\_\_\_\_ (Please make checks payable to Pioneer Funds.)

### 3 Source of Rollover / Transfer

Complete this section only if you are moving assets from another retirement account.

I am moving assets from a (check one):

Traditional IRA  Rollover IRA  Roth IRA  SEP-IRA/SARSEP

403(b)/ORP  Thrift Savings Plan  Governmental 457 plan

Other: \_\_\_\_\_

Employer-sponsored retirement plan (including 401(k), pension, and profit sharing)

Check here if you have made Roth contributions to your existing employer-sponsored retirement account.

Total Roth amount included in transfer/rollover: \$ \_\_\_\_\_

Date of first Roth contribution \_\_\_\_\_

Continued on next page.

**Check one:**

- I am enclosing a check representing a rollover that has been distributed from another account within the past 60 days.\*
- I am not enclosing a check but have attached an Amundi US *Rollover/Transfer/Conversion Form*. I understand that Amundi US will arrange the rollover/transfer. Prior to completing the form, please complete all forms required by the employer/custodian/trustee maintaining your current plan. (If any forms require a signature from Amundi US, submit them along with this form.)
- A rollover from an existing Amundi US account, account number \_\_\_\_\_. I have included all necessary paperwork.

**\* Additional 60-day rollover information:**

- You may roll over only one IRA distribution received by you into an IRA within any 12-month period.
- Rollovers must generally be completed within 60-days of receipt of the distribution proceeds. If you believe that you are eligible for a waiver of the 60-day rollover period as outlined by the IRS, please contact Amundi US for additional, self-certification requirements.

Amundi US cannot provide tax advice. Please consult with your financial professional or your qualified tax advisor before attempting an indirect or 60-day rollover.

**4 Choose Your Investments**

See the Amundi US Fund Guide for a complete list of the available Pioneer funds. Select the funds you are purchasing, provide the fund name, fund number, and the percentage to be invested in the fund in Section 4A. Fund information may be updated periodically. Visit [amundi.com/usinvestors](http://amundi.com/usinvestors) or call us at 1-800-622-0176 for the most current fund availability.

**Note: Not all Pioneer funds and share classes may be available through your financial professional's firm. Contact your financial professional for additional information.**

**A. Select Your Funds**

Fund Name (including class of shares)	Fund Number	Indicate Percentage <sup>1</sup>
1. _____	_____	_____ %
2. _____	_____	_____ %
3. _____	_____	_____ %
4. _____	_____	_____ %
5. _____	_____	_____ %
6. _____	_____	_____ %
7. _____	_____	_____ %
8. _____	_____	_____ %
9. _____	_____	_____ %
10. _____	_____	_____ %
		TOTAL: _____ %

<sup>1</sup> Whole percentages only. The total of the percentages must equal 100%.

**B. Payment Method (Do not send cash, third-party checks, starter checks, or cash equivalents.)**

- Check (made payable to Pioneer Funds)
- Brokr/Dealer Order (Confirmation Number \_\_\_\_\_ )
- Other \_\_\_\_\_

**5 Telephone & Online Transactions\***

I understand Pioneer Funds will accept and act upon instructions from me (or any person purporting to act on my behalf either online or through FactFone<sup>SM</sup> system) unless indicated otherwise below.

- Do **not** accept telephone exchanges/redemptions
- Do **not** accept online exchanges

\* To establish online transaction privileges, you MUST complete the online registration found on [amundi.com/usinvestors](http://amundi.com/usinvestors).

## 6 Custodial Fee

The SIMPLE IRA custodial fee of \$15 for a single fund or \$20 per year for two or more funds will be automatically deducted from your account(s) unless otherwise indicated below.

One-time (\$75 lifetime fee for any number of funds, per individual)\*

\*If you choose to pay the one-time fee, please enclose a separate check for \$75 payable to Pioneer Funds.

## 7 Your Beneficiaries

Designate one or more beneficiaries who will inherit your SIMPLE IRA assets upon your death. In accordance with your designation, your assets will pass directly to your chosen beneficiary(ies). If you are naming a trust as beneficiary, the complete name of the trust must be listed and date of the trust must be included.

To the extent your beneficiary designations do not adequately dispose of your account at the time of your death, your beneficiary will be your estate (unless otherwise required by the laws of your state of residence).

**Primary Beneficiaries:** Upon my death, pay the value of my SIMPLE IRA to the following:

Full name of beneficiary	Relationship	Date of Birth (mo/day/yr)
Full name of beneficiary	Relationship	Date of Birth (mo/day/yr)
Full name of beneficiary	Relationship	Date of Birth (mo/day/yr)
Full name of beneficiary	Relationship	Date of Birth (mo/day/yr)

<b>Percentages must total 100%</b>	
Share	%
Share	%
Share	%
Share	%

If you have additional beneficiaries, attach a separate sheet and include all information requested here. **This additional sheet must be signed and dated by the account owner to be considered in good order.**

Check here if attaching additional information.

**Secondary Beneficiaries:** If no primary beneficiary survives me, pay the value of my SIMPLE IRA to the following:

Full name of beneficiary	Relationship	Date of Birth (mo/day/yr)
Full name of beneficiary	Relationship	Date of Birth (mo/day/yr)
Full name of beneficiary	Relationship	Date of Birth (mo/day/yr)
Full name of beneficiary	Relationship	Date of Birth (mo/day/yr)

<b>Percentages must total 100%</b>	
Share	%
Share	%
Share	%
Share	%

If you have additional beneficiaries, attach a separate sheet and include all information requested here. **This additional sheet must be signed and dated by the account owner to be considered in good order.**

Check here if attaching additional information.

If any primary (or secondary) beneficiary predeceases me, pay that person's share to the other primary (or secondary) beneficiary(ies) in proportion to the shares indicated (per capita).

**Note:** If you would like to elect a different distribution option, please contact us.

**Note:** Once the beneficiary information has been updated on your new account(s), you will receive written confirmation.

## 8 Reduced Sales Charges

### For purchases of Class A shares

**Note:** The accumulated holdings of all participants in an Amundi US SIMPLE IRA Plan may be aggregated for a reduced sales charge on A shares. You may also use Section A to notify us of any existing Amundi US accounts eligible for linkage under rights of accumulation. However, please note that unless all participants in your employer's SIMPLE IRA are also members of your immediate family, you cannot aggregate SIMPLE IRA plan assets and your family's existing accounts together for a reduced sales charge. Please see the fund prospectus for more details.

**A. Right of Accumulation (ROA)** Use the value of your Pioneer Funds and your immediate family's (you, your spouse, and children under 21 of a family and their trusts) existing Amundi US accounts to qualify for the lowest possible sales charge on Class A shares. List your qualifying accounts.

Account Number	Relationship
Account Number	Relationship
Account Number	Relationship

**B. Letter of Intent (LOI)\*** Use the value of purchases made in the past 90 days and planned future purchases to qualify for the lowest possible sales charge on Class A shares. **Note:** The LOI must be fulfilled within 13 months of the date of the initial purchase. Certain restrictions may apply if you are linking a SEP IRA, SIMPLE IRA, and/or Uni-K Plan®. Call 1-800-622-0176 for more information.

Open a new LOI for OR Change an existing LOI to:

- \$50,000       \$250,000  
 \$100,000       \$500,000

\*Review each fund's prospectus for LOI breakpoint details.

## 9 Your Signature

**USA PATRIOT Act Certification:** By signing below, I certify that I have received, read, and understand the USA PATRIOT Act information provided by Amundi US and that the information that I am providing is true and accurate. I understand that Amundi US will not accept money and/or open this account on my behalf if my identity cannot be properly verified. I authorize Amundi US to inquire from any source, including a consumer reporting agency, as to my identity (as required by federal law) at account opening, at any time throughout the life of the account, and thereafter for debt collection or investigative purposes.

Please be advised that pursuant to state Unclaimed Property Laws, your account assets may be escheated to the state of residence on your account if the following occurs: 1. Mail sent to your address of record is returned and attempts to re-mail to you are unsuccessful; and 2. You do not contact us to maintain a current address; and 3. Your account remains dormant, which is generally defined by state law(s) as "inactive for an extended period of time (usually three to five years), in which no contact has been made with the shareowner."

I hereby establish an Amundi US SIMPLE IRA; incorporate the terms and conditions of the UMB Bank, n.a. SIMPLE Individual Retirement Account Custodial Agreement; and appoint UMB Bank, n.a. to serve as custodian. I verify that (1) I have received a current prospectus for each fund selected in this application and agree to be bound by its terms and the terms of this application; (2) any contribution designated as a rollover qualifies for rollover treatment and constitutes an irrevocable election to have such amount treated as a rollover contribution for federal income tax purposes; and additionally, if I am enclosing a check representing a rollover that has been distributed from another IRA within the past 60 days, I further certify that I have not rolled over any IRA distribution to any other IRA account registered in my name within a 12-month period; (3) under penalties of perjury, my social security number shown on this application is correct; (4) I consent to the custodian's fee; and (5) I understand that my account is automatically eligible for telephone and online transactions unless indicated otherwise in Section 5. I understand that each telephone transaction will be recorded, authorized in accordance with the reasonable procedures of the fund(s) and their transfer agent to confirm that such instructions are genuine, and confirmed in writing. If these or similar procedures are not followed, the fund(s) may be liable for any loss due to unauthorized or fraudulent instructions. In all other cases, I bear the risk of loss for unauthorized or fraudulent telephone and/or online transactions, and none of the Pioneer funds, or their agent or custodian, or their affiliated companies, or their directors, trustees, or employees will be liable for any loss, damage, or expense as a result of action upon, and will not be responsible for the authenticity of any telephone and/or online instructions that they reasonably believe to be authentic and authorized; and I further verify that (6) I acknowledge that Amundi US, the Pioneer Funds, and their service providers do not provide investment advice or investment recommendations; and (7) I have received and read the Amundi US SIMPLE IRA Plan Disclosure Statement and Custody Agreement.

### Under penalties of perjury:

- (1) The Taxpayer Identification Number (Social Security Number) shown on this form is correct.
- (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 failure to report all interest or dividends; or (c) the IRS has notified me that I am no longer subject to backup withholding.
- (3) I am a U.S. citizen or other U.S. person (as defined by the IRS on Form W-9).
- (4) I am exempt from FATCA reporting (if applicable).

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

**X**  
Signature of Individual \_\_\_\_\_ Date (Month/Day/Year) \_\_\_\_\_

### Spousal Consent and Agreement to Treat Plan Account as Separate Property

I hereby give to the IRA Owner any interest I have in the assets held in this SIMPLE IRA and consent to the above designation. I hereby agree and acknowledge that I understand that the assets in the IRA are the separate property of the IRA Owner and that any community property interest in such assets is extinguished by this agreement.

**X**  
Signature of Spouse\* \_\_\_\_\_ Date (Month/Day/Year) \_\_\_\_\_

**\*Required only if you reside in a community property state (AZ, CA, ID, LA, NV, NM, PR, TX, WA, WI) and have named a primary beneficiary other than your spouse**

## 10 To Be Completed by Investment Professional

Amundi US requires customers to establish accounts with the assistance of a registered investment professional that has an existing selling agreement with Amundi US. The section below must be completed in full in order for this application to be processed.

Representative Number \_\_\_\_\_ Branch Number \_\_\_\_\_ Telephone Number \_\_\_\_\_

Representative Name (First, Middle Initial, Last) \_\_\_\_\_

Firm Name (or Clearing Firm, if applicable) \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**X**  
Authorized Signature - Representative \_\_\_\_\_ Authorized Signature - Principal (if required by your broker/dealer) \_\_\_\_\_

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