



Retail New Account Application

(Please Print in Black Ink)

For assistance in completing this application, please call your financial professional or a Virtus Mutual Funds (the "Funds") customer service representative at 800-243-1574. For more information about the Funds, including how to obtain a prospectus, call 800-243-4361 or visit **Virtus.com**.

Important Information

1. This application cannot be used for a custodial account with BNY Mellon Investment Servicing Trust Company as custodian or Class I Shares. **Please call 800-243-1574 or visit Virtus.com to obtain appropriate IRA and Institutional Share Applications.**
2. Please remember to **provide your Social Security or Tax ID number**. Without it, we will be unable to establish the account.
3. Non-Resident Aliens must provide an original completed Form W-8 BEN. Without it, we will be unable to establish the account.
4. Texas State Residents may designate a "representative for notice" for escheatment by submitting the completed designation form from the state of Texas Comptroller's website. The designee has no rights to claim or access the shareholder's account or assets. The completed form may be mailed to one of the addresses listed below.
5. To help the government fight financial crime, Federal regulation requires certain financial institutions to obtain, verify and record information about the beneficial owners of legal entity customers. If you are establishing a **legal entity account**, which includes an account in the name of a corporation, limited liability company, or other entity that is created by a filing of a public document with a Secretary of State of similar office, a general partnership, and any similar business entity formed in the United States or a foreign country, this application **must** be accompanied by the *Certification of Beneficial Owners for Legal Entity Customers* form. The form is available on our website, Virtus.com, or by calling 800-243-1574.
6. Mail completed application to one of the following addresses:

Regular Mail

Virtus Mutual Funds
PO Box 534470
Pittsburgh, PA 15253-4470

Overnight Mail

Virtus Mutual Funds
Attn: 534470
AIM: 154-0520
500 Ross Street
Pittsburgh, PA 15262

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 check the information you provide against publicly available databases, information obtained from consumer reporting agencies, other financial institutions or other services. If reasonable efforts to verify your identity have failed, we reserve the right to close the account and redeem the shares at the net asset value next calculated after the decision is made by us to close the account.

Pursuant to anti-money laundering rules, U.S. financial institutions must perform due diligence, and in some cases enhanced due diligence, with respect to certain correspondent accounts. As such, we may require additional documentation to conduct an assessment for the correspondent account. If we are unable to obtain and verify the information, we reserve the right to close the account at the next calculated net asset value.

Bolded fields are required to be completed and will be verified. If bolded fields in Sections 1 and 2 are not completed, this application will not be accepted.

Not insured by FDIC/NCUSIF or any federal government agency. No bank guarantee. Not a deposit. May lose value.

Distributed by **VP Distributors, LLC**, member FINRA and subsidiary of Virtus Investment Partners, Inc.

1. Account Registration

↓ Select **only one** type of registration and complete the information within that section.

☐ - Individual or Joint Tenant

Taxable Individual (First, Middle, Last)

U.S. Tax I.D. Number

Date of Birth

If this account is to include a joint tenant, please complete the information below. Joint Tenants with Rights of Survivorship will be presumed unless otherwise specified. Please note that Louisiana and Puerto Rico do not recognize Joint Tenant with Rights of Survivorship. Joint accounts in Louisiana and Puerto Rico will be registered as Tenants in Common.

Joint Tenant (First, Middle, Last)

Relationship to Individual

U.S. Tax I.D. Number

Date of Birth

If you wish to add a Transfer on Death (TOD) beneficiary designation to an Individual or Joint Tenant account, please complete the following beneficiary information:

- ☐ Primary, or
☐ Contingent

Name

U.S. Tax I.D. Number

Relationship

Adult Name/Capacity if beneficiary is a minor

Date of Birth

Percentage

- ☐ Primary, or
☐ Contingent

Name

U.S. Tax I.D. Number

Relationship

Adult Name/Capacity if beneficiary is a minor

Date of Birth

Percentage

- If a beneficiary is a minor, you must also indicate the name of an adult and the person's legal capacity (e.g., trustee, custodian, guardian) to act for the minor in the designation.
- Percentages must total 100%. If no percentages are indicated, all beneficiaries who survive the account owner will receive equal shares. If there are multiple beneficiaries and the percentages are not evenly divided, the first beneficiary listed would receive the additional fraction necessary to bring the total to 100%. Example: 3 individuals at 1/3 each. The first individual will be listed to receive 33.334% while the remaining two beneficiaries will be listed to receive 33.333% each.

For additional beneficiaries, please complete a Transfer on Death Registration Request Form, which is available on our website, www.Virtus.com, and submit with the completed application.

☐ - Uniform Gifts/Transfers to Minors

Name of the state in which the gift is registered _____

Please indicate the Minor's relationship to the Custodian _____

Name of Custodian (Only One) (First, Middle, Last)

U.S. Tax I.D. Number

Date of Birth

Name of Minor (Only One) (First, Middle, Last)

U.S. Tax I.D. Number

Date of Birth

☐ - Qualified Plan

Plan Type: ☐ 401(k) ☐ Profit Sharing ☐ Money Purchase ☐ Defined Benefit ☐ Other _____

Trustee(s)/Custodian

U.S. Tax I.D. Number

Plan Dated

Name of Plan

For the Benefit of

Qualified Plan NAV sale based on:

- ☐ 100 or more employees ☐ \$10 million in plan assets ☐ \$1 million initial investment ☐ Letter of Intent for \$1 million (complete Section 9)

☐ - Entity Options

IMPORTANT – Please refer to page 1, number 5 for the additional requirement needed for some legal entity accounts. If the *Certification of Beneficial Owners for Legal Entity Customers* form is required and is not included with the application, we will be unable to establish the account.

Please check the box that describes your new account:

- ☐ Trust - A copy of first page, signature page(s), page showing certification of Trust Agreement and pages indicating named Trustee(s) who will have authority to act must be attached. A properly executed Certificate of Trust may also be submitted.

Trust Dated: _____

- ☐ Estate - A copy of the Letters Testamentary or Letters of Administration appointing the Executor/Administrator(s) of the estate must be attached.
- ☐ Foreign Business or Enterprise - A copy of a foreign government-issued documentation certifying existence of business or enterprise must be attached.
- ☐ Foreign Bank; Foreign Branch of U.S. Bank; or a Business/Enterprise organized under a foreign law that if it were located in the U.S. would be: a futures commission merchant, money transmitter or currency exchanger, securities broker-dealer or introducing broker in commodities or a mutual fund - Additional documentation is required; please contact us for details.
- ☐ *Other - List type of registration or type of business _____

*Contact our office prior to submitting the application for possible additional documentation requirements.

- | | | |
|----------------------------------------------|--------------------------------------------------------|------------------------------------------------------------------|
| <input type="checkbox"/> C Corporation | <input type="checkbox"/> Endowment | <input type="checkbox"/> Investment Company |
| <input type="checkbox"/> S Corporation | <input type="checkbox"/> Bank or financial institution | <input type="checkbox"/> Securities/Commodities broker or dealer |
| <input type="checkbox"/> Partnership | <input type="checkbox"/> International organization | <input type="checkbox"/> Government organization |
| <input type="checkbox"/> Sole proprietorship | <input type="checkbox"/> Trust Company | <input type="checkbox"/> Tax-Exempt organization |

- ☐ Limited Liability Company (indicate the U.S. federal income tax classification of LLC): _____

Unless otherwise noted, a copy of the articles of organization, articles of incorporation, Partnership/Membership Agreement or other document confirming the existence of the entity and a copy of the corporate resolution or equivalent document indicating who is authorized to act on the behalf of the entity must be attached.

Name of Entity **U.S. Tax I.D. Number**

Trustee Name/Executor Administrator (First, Middle, Last) **U.S. Tax I.D. Number** **Date of Birth**

**** Authorized Trader Name (First, Middle, Last)** **U.S. Tax I.D. Number** **Date of Birth**

**** Attach a separate list for additional Trustees or Authorized Traders including full name, Social Security number and date of birth for each.**

Check if exempt from verification due to:

- | | | | |
|-------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|-----------------------------------------------------------------|--------------------------------------------------------------|
| <input type="checkbox"/> Publicly traded company
symbol: _____ | <input type="checkbox"/> Financial Institution regulated
by a federal functional regulator | <input type="checkbox"/> Bank regulated by a state
regulator | <input type="checkbox"/> Retirement plan covered
by ERISA |
|-------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|-----------------------------------------------------------------|--------------------------------------------------------------|

2. Account Mailing and Email Addresses

Street Address **City** **State** **Zip Code**

(If your mailing address is a P.O. Box, you must provide your street address. APO and FPO addresses will be accepted.)

Mailing Address (if different from above) **City** **State** **Zip Code**

Mobile Phone **Home Phone** **Email Address**

State in which you file taxes if different from above: **Country of Citizenship:**

Joint Registrant Street Address (if different from above) **City** **State** **Zip Code**

Business Phone **Home Phone** **Country of Citizenship:**

3. Initial Investment (check one)

Preferred Methods of Payment

- Checks drawn on an account in the name of the Investor or the Investor's company or employer.
- Wire transfers or drafts from an account in the name of the Investor or the Investor's company or employer.

Initial Purchase Amounts - The minimum initial purchase amount is \$2,500 per Fund or \$100 when establishing the Systematic Purchase or Systematic Exchange option.

- ☐ **Mail Order** - Enclosed is/are my check(s) made payable to **Virtus Mutual Funds**.
- ☐ **Federal Funds Wire** (Your bank may charge a fee for this service) – Instruct your bank to transmit your investment by Federal Funds wire to:

Bank Name	Bank of New York Mellon
Routing Number	0110 0123 4
Account Number	733199
For credit to	BNY Mellon Investment Servicing (US), Inc., as Agent FBO Virtus
For the benefit of	Name of Fund – i.e. Virtus Newfleet Core Plus Bond Fund Shareholder Name Shareholder Account Number (do not include the fund number)

- ☐ **ACH Purchase** - Initiate a one-time investment from your bank account via Automated Clearing House (ACH). Please complete the banking information on page 8 and include an original voided check.

I/We hereby authorize Virtus Mutual Funds to initiate a one-time purchase of \$_____, to be allocated as indicated on the fund selection page, from my bank information listed on page 8. I have also included an original voided check for the account from which the funds are to be withdrawn. The purchase of shares will be made at the current offering price for Class A shares and/or the current Net Asset Value for Class C and C1 shares determined as of the close of business on the day on which the purchase is made.

4. NAV Account

If this account qualifies for purchase of Virtus Mutual Funds ("the Funds") at Net Asset Value (NAV) under the terms of the current prospectus, please check one of the following reasons:

- ☐ For an organization that charges an account management fee (under the terms of the current prospectus).
- ☐ For individual investors, please complete the **NAV Authorization Form** and submit with this application. To obtain a form, call 800-243-1574 or visit Virtus.com.

5. Dealer Information

If broker/dealer information is to be maintained on the new account, please provide the following information. Accurate completion of this section will expedite dealer concession. Please print clearly. **Note: Stamps will not be accepted in place of providing the information below.**

Dealer Name	Dealer Number
Branch - Street Address	Branch Number
Branch - City, State, Zip Code	Branch Telephone Number
Representative Name	Representative Number
Representative E-mail Address	Representative Telephone Number
Representative's Signature	Date (Month/Date/Year)

6. Fund Selection

- **Class A shares will automatically be purchased if no class of shares is selected.**
- **Purchase Amounts** - The minimum initial purchase amount is \$2,500 per Fund or \$100 when establishing the Systematic Purchase or Systematic Exchange option. The minimum subsequent purchase amount is \$100 per Fund.
- All distributions will be reinvested **unless** otherwise indicated in Section 8.
- * Checkwriting available. Details on page 11.

Fund Names	Class A	Class C	Dollar Amount	Percentage
The Merger Fund®	<input type="checkbox"/> 260	n/a	\$ _____	or _____%
Virtus AlphaSimplex Global Alternatives	<input type="checkbox"/> 1991	<input type="checkbox"/> 1992	\$ _____	or _____%
Virtus AlphaSimplex Managed Futures Strategy	<input type="checkbox"/> 2606	<input type="checkbox"/> 2607	\$ _____	or _____%
Virtus Ceredex Large-Cap Value Equity	<input type="checkbox"/> 5513	<input type="checkbox"/> 5563	\$ _____	or _____%
Virtus Ceredex Mid-Cap Value Equity	<input type="checkbox"/> 5724	<input type="checkbox"/> 5411	\$ _____	or _____%
Virtus Ceredex Small-Cap Value Equity	<input type="checkbox"/> 5728	<input type="checkbox"/> 5552	\$ _____	or _____%
Virtus Convertible	<input type="checkbox"/> 6008	<input type="checkbox"/> 6208	\$ _____	or _____%
Virtus Duff & Phelps Global Infrastructure	<input type="checkbox"/> 1438	<input type="checkbox"/> 1439	\$ _____	or _____%
Virtus Duff & Phelps Global Real Estate Securities	<input type="checkbox"/> 1854	<input type="checkbox"/> 1855	\$ _____	or _____%
Virtus Duff & Phelps Real Asset	<input type="checkbox"/> 1641	<input type="checkbox"/> 1642	\$ _____	or _____%
Virtus Duff & Phelps Real Estate Securities	<input type="checkbox"/> 578	<input type="checkbox"/> 1422	\$ _____	or _____%
Virtus Duff & Phelps Select MLP and Energy	<input type="checkbox"/> 2464	<input type="checkbox"/> 2465	\$ _____	or _____%
Virtus Duff & Phelps Water	<input type="checkbox"/> 4081	<input type="checkbox"/> 4281	\$ _____	or _____%
Virtus Emerging Markets Opportunities	<input type="checkbox"/> 4036	<input type="checkbox"/> 4236	\$ _____	or _____%
Virtus Global Allocation	<input type="checkbox"/> 4016	<input type="checkbox"/> 4216	\$ _____	or _____%
Virtus Income & Growth	<input type="checkbox"/> 4035	<input type="checkbox"/> 4235	\$ _____	or _____%
Virtus International Small-Cap	<input type="checkbox"/> 6010	<input type="checkbox"/> 6210	\$ _____	or _____%
Virtus KAR Capital Growth	<input type="checkbox"/> 597	<input type="checkbox"/> 816	\$ _____	or _____%
Virtus KAR Developing Markets	<input type="checkbox"/> 2553	<input type="checkbox"/> 2554	\$ _____	or _____%
Virtus KAR Emerging Markets Small-Cap	<input type="checkbox"/> 2423	<input type="checkbox"/> 2424	\$ _____	or _____%
Virtus KAR Equity Income	<input type="checkbox"/> 835	<input type="checkbox"/> 837	\$ _____	or _____%
Virtus KAR Global Quality Dividend	<input type="checkbox"/> 1594	<input type="checkbox"/> 1595	\$ _____	or _____%
Virtus KAR Global Small-Cap	<input type="checkbox"/> 4064	<input type="checkbox"/> 4264	\$ _____	or _____%
Virtus KAR Health Sciences	<input type="checkbox"/> 4059	<input type="checkbox"/> 4259	\$ _____	or _____%
Virtus KAR International Small-Mid Cap	<input type="checkbox"/> 1965	<input type="checkbox"/> 1966	\$ _____	or _____%
Virtus KAR Long/Short Equity	<input type="checkbox"/> 2540	<input type="checkbox"/> 2541	\$ _____	or _____%
Virtus KAR Mid-Cap Core	<input type="checkbox"/> 1866	<input type="checkbox"/> 1867	\$ _____	or _____%
Virtus KAR Mid-Cap Growth	<input type="checkbox"/> 80	<input type="checkbox"/> 1369	\$ _____	or _____%
Virtus KAR Small-Cap Growth	<input type="checkbox"/> 1766	<input type="checkbox"/> 1767	\$ _____	or _____%
Virtus KAR Small-Cap Value	<input type="checkbox"/> 1742	<input type="checkbox"/> 1744	\$ _____	or _____%
Virtus KAR Small-Mid Cap Core	<input type="checkbox"/> 2536	<input type="checkbox"/> 2537	\$ _____	or _____%
Virtus KAR Small-Mid Cap Growth	<input type="checkbox"/> 2549	<input type="checkbox"/> 2550	\$ _____	or _____%
Virtus KAR Small-Mid Cap Value	<input type="checkbox"/> 2557	<input type="checkbox"/> 2558	\$ _____	or _____%
Virtus Newfleet Core Plus Bond	<input type="checkbox"/> 468*	<input type="checkbox"/> 702*	\$ _____	or _____%
Virtus Newfleet High Yield	<input type="checkbox"/> 69*	<input type="checkbox"/> 68*	\$ _____	or _____%
Virtus Newfleet Low Duration Core Plus Bond	<input type="checkbox"/> 1768	<input type="checkbox"/> 1769	\$ _____	or _____%
Virtus Newfleet Multi-Sector Intermediate Bond	<input type="checkbox"/> 558*	<input type="checkbox"/> 525*	\$ _____	or _____%
Virtus Newfleet Multi-Sector Short Term Bond	<input type="checkbox"/> 561*	n/a	\$ _____	or _____%
	Class C1 Shares	<input type="checkbox"/> 1429*	\$ _____	or _____%
Virtus Newfleet Senior Floating Rate	<input type="checkbox"/> 1805	<input type="checkbox"/> 1806	\$ _____	or _____%
Virtus Newfleet Short Duration High Income	<input type="checkbox"/> 6052	<input type="checkbox"/> 6252	\$ _____	or _____%

6. Fund Selection, continued

Fund Names	Class A	Class C	Dollar Amount	Percentage
Virtus NFJ Dividend Value	<input type="checkbox"/> 4057	<input type="checkbox"/> 4257	\$ _____	or _____%
Virtus NFJ Emerging Markets Value	<input type="checkbox"/> 6063	<input type="checkbox"/> 6263	\$ _____	or _____%
Virtus NFJ Global Sustainability	<input type="checkbox"/> 6073	n/a	\$ _____	or _____%
Virtus NFJ International Value	<input type="checkbox"/> 4068	<input type="checkbox"/> 4268	\$ _____	or _____%
Virtus NFJ Large-Cap Value	<input type="checkbox"/> 4050	<input type="checkbox"/> 4250	\$ _____	or _____%
Virtus NFJ Mid-Cap Value	<input type="checkbox"/> 4022	<input type="checkbox"/> 4222	\$ _____	or _____%
Virtus NFJ Small-Cap Value	<input type="checkbox"/> 4030	<input type="checkbox"/> 4230	\$ _____	or _____%
Virtus Seix Core Bond	<input type="checkbox"/> 5507	n/a	\$ _____	or _____%
Virtus Seix Corporate Bond	<input type="checkbox"/> 5730	<input type="checkbox"/> 5413	\$ _____	or _____%
Virtus Seix Floating Rate High Income	<input type="checkbox"/> 5201	<input type="checkbox"/> 5202	\$ _____	or _____%
Virtus Seix High Grade Municipal Bond	<input type="checkbox"/> 5525	n/a	\$ _____	or _____%
Virtus Seix High Income	<input type="checkbox"/> 5709	n/a	\$ _____	or _____%
Virtus Seix High Yield	<input type="checkbox"/> 5856	n/a	\$ _____	or _____%
Virtus Seix High Yield Income	<input type="checkbox"/> 6009	<input type="checkbox"/> 6209	\$ _____	or _____%
Virtus Seix Investment Grade Tax-Exempt Bond	<input type="checkbox"/> 5509	n/a	\$ _____	or _____%
Virtus Seix Tax-Exempt Bond	<input type="checkbox"/> 1783	<input type="checkbox"/> 1784	\$ _____	or _____%
Virtus Seix Total Return Bond	<input type="checkbox"/> 5801	n/a	\$ _____	or _____%
Virtus Seix U.S. Government Securities Ultra-Short Bond	<input type="checkbox"/> 6003*	n/a	\$ _____	or _____%
Virtus Seix Ultra-Short Bond	<input type="checkbox"/> 6002*	n/a	\$ _____	or _____%
Virtus SGA Emerging Markets Equity	<input type="checkbox"/> 1734	<input type="checkbox"/> 1735	\$ _____	or _____%
Virtus SGA Global Growth	<input type="checkbox"/> 4812	<input type="checkbox"/> 4813	\$ _____	or _____%
Virtus SGA International Growth	<input type="checkbox"/> 5541	<input type="checkbox"/> 5542	\$ _____	or _____%
Virtus Silvant Focused Growth	<input type="checkbox"/> 4023	<input type="checkbox"/> 4223	\$ _____	or _____%
Virtus Silvant Large-Cap Growth Stock	<input type="checkbox"/> 5511	n/a	\$ _____	or _____%
Virtus Silvant Mid-Cap Growth	<input type="checkbox"/> 4065	<input type="checkbox"/> 4265	\$ _____	or _____%
Virtus Small-Cap	<input type="checkbox"/> 6067	<input type="checkbox"/> 6267	\$ _____	or _____%
Virtus Stone Harbor Emerging Markets Bond	<input type="checkbox"/> 4970	n/a	\$ _____	or _____%
Virtus Stone Harbor Emerging Markets Debt Income	<input type="checkbox"/> 4974	n/a	\$ _____	or _____%
Virtus Stone Harbor Local Markets	<input type="checkbox"/> 4978	n/a	\$ _____	or _____%
Virtus Tactical Allocation	<input type="checkbox"/> 552	<input type="checkbox"/> 700	\$ _____	or _____%
Virtus Westchester Credit Event	<input type="checkbox"/> 4500	n/a	\$ _____	or _____%
Virtus Westchester Event-Driven	<input type="checkbox"/> 2516	n/a	\$ _____	or _____%
Virtus Zevenbergen Innovative Growth Stock	<input type="checkbox"/> 5403	n/a	\$ _____	or _____%
Virtus Zevenbergen Technology	<input type="checkbox"/> 4060	<input type="checkbox"/> 4260	\$ _____	or _____%
Other: _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	\$ _____	or _____%

7. Add a Trusted Contact - Optional

To designate a Trusted Contact person for your Virtus Funds account(s), please complete this section. Adding a Trusted Contact provides us with a resource to contact on your behalf, if necessary. A Trusted Contact is someone you allow us, our agents, and/or your financial professional to contact and disclose information to about your account in the event that we suspect financial exploitation; to confirm your contact information, health status, or the identity of any legal guardian, executor, trustee, or holder of a power of attorney; or as otherwise permitted by applicable rules.

- Naming a Trusted Contact is optional.
- The Trusted Contact must be at least 18 years old.
- The Trusted Contact will not be able to execute transactions or inquire about account activity.
- We suggest that your Trusted Contact not be already authorized to transact business on your account(s) or already able to receive information about your account(s)—e.g., financial consultant, financial professional, or by virtue of Power of Attorney or View Only authority.
- For accounts with multiple account holders, trustees, or agents, please fill out a separate Trusted Contact form for each account holder, trustee or agent.
- Only you as the account holder have the ability to add, update, or remove a Trusted Contact for your account(s).

Trusted Contact Information: If you are electing to have a Trusted Contact person added to your account, please complete the following information. Please be sure to provide at least one method of contact for the Trusted Contact listed.

Name	Relationship to Account Holder	Mobile Telephone Number
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Address	Evening Telephone Number
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City, State, ZIP code	Email Address
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I understand that there is no requirement that Virtus Funds reach out to my Trusted Contact and that I may withdraw this Authorization at any time by notifying Virtus Funds via phone or in writing at the address shown on my account statement. By signing this document, I agree on behalf of myself and my heirs to indemnify and hold Virtus Funds, their transfer agent and sub-transfer agent, and the predecessors, successors, officers, directors, trustees, employees, agents, representatives, parents, affiliates, assigns, and attorneys of each harmless from and against any and all claims, judgments, taxes, fines, penalties, damages, liabilities, costs, and expenses (including but not limited to attorneys' fees and expert witness fees) incurred by them as a result of any claim, judgment, or proceeding arising out of or relating to Virtus Funds or their representatives contacting, or failing to contact, my Trusted Contact identified in this document.

I understand that by naming a Trusted Contact, I am authorizing, but not requiring, Virtus Funds, their transfer agent, and/or my financial professional to contact the Trusted Contact and disclose information about my account: (1) to address possible financial exploitation; (2) to confirm the specifics of my current contact information or health status or the identity of any legal guardian, executor, trustee, or holder of a power of attorney; or (3) as otherwise permitted by applicable law or regulation, including applicable FINRA rules.

I understand that if a financial professional is linked to my account(s), then my Trusted Contact information will be made available to the financial professional, and Virtus Funds or their agents may notify the financial professional of our interactions with the Trusted Contact. I agree that Virtus Funds and their agents will not be responsible for, and cannot monitor, the financial professional's use of the Trusted Contact information.

I understand that Virtus Funds and their agents may continue to treat this designation of my Trusted Contact as valid until either I notify Virtus Funds of its withdrawal as described above or they become aware that I have died.

8. Banking Information & Options

Unless otherwise specified, if banking information is provided below, it will be added to your account for future transactions. An original voided check or letter from your bank is required. Starter checks and photocopies of checks will not be accepted. The registered shareholder(s) name(s) must appear on the bank account. If the registered shareholder(s) is not listed in the bank registration, please contact our office for additional requirements.

Bank Name _____ Bank Routing Number _____

Bank Account Holder's Name(s) _____ Bank Account Number _____ Bank Telephone Number _____

Type of Account: ☐ *Checking Account* - ☐ Use initial investment check; or ☐ An original voided check is enclosed
☐ *Savings Account* - A letter from your bank on bank letterhead, signed by a bank officer, confirming the banking information is enclosed.

IMPORTANT: The application must be submitted at least 10 business days prior to the first transaction for the banking information to be properly verified for the options below.

The following options will automatically be added to the account for all registered shareholders and dealer representative, if any, unless otherwise stated:

Telephone/Internet Purchases

Allows for additional share purchases via ACH with a telephone call to Virtus Mutual Funds or account access via the Internet. Once a request is initiated, the Transfer Agent or its subagent will initiate the transaction by wiring a request for monies to the shareholder's commercial bank, savings bank or credit union via ACH. The shareholder's bank, which must be an ACH member, will in turn forward the monies to the Transfer Agent or its subagent for credit to the shareholder's account. The purchase is normally credited to the shareholder's account the day following receipt of instructions in good order.

☐ I do not elect the Telephone/Internet Purchase option for me or the Telephone Purchase option for my dealer representative.

Telephone/Internet Redemptions/Exchanges*

Allows shareholders to have amounts up to \$50,000 withdrawn and sent to their designated bank account or to the account mailing address on file according to the terms of the prospectus. Calls/trades received before the market close (generally 4:00 PM Eastern Time for the NYSE) will receive that day's closing price. Calls/trades received after the market close will receive the next day's closing price.

Exchanges can only be made when the shares are of the same class and are subject to limitations as described in the current prospectus (e.g., Class A to Class A). Virtus Newfleet Multi-Sector Short Term Bond Fund Class C1 may be exchanged for Class C of any other Virtus Mutual Fund.

Redemptions being sent to a bank account may be made via ACH or federal fund wire. Redemption payments made via ACH will be sent within one to three business days and redemption payments through federal fund wire will typically be sent the next business day and may be subject to a fee at your chosen bank. If there are insufficient funds in an account to meet a redemption order, the transaction will not be processed. Shares must have been owned for at least 10 calendar days before they can be redeemed.

*The Internet Redemption option is not available for all account types. Eligible shareholders who wish to process internet redemptions or exchanges must establish a User ID and log into their account on Virtus.com. Please contact our office for additional information.

☐ I do not elect the Telephone/Internet Redemption option for me or the Telephone Redemption option for my dealer representative.

☐ I do not elect the Telephone/Internet Exchange option for me or the Telephone Exchange option for my dealer representative.

The following elections are optional and will be added to the account if the section is completed:

Cash Dividends and/or Capital Gains

Allows shareholders to have their distributions sent to their designated bank account via Automated Clearing House (ACH) or sent to the account mailing address. If the payment method is unclear and banking information is provided, the default payment method will be ACH. Otherwise, a check will be issued.

Fund Name: _____ Payment Method: ☐ ACH ☐ Check
Check one of the following: ☐ Dividends Only ☐ Both Dividends and Capital Gains ☐ Capital Gains Only

Fund Name: _____ Payment Method: ☐ ACH ☐ Check
Check one of the following: ☐ Dividends Only ☐ Both Dividends and Capital Gains ☐ Capital Gains Only

Fund Name: _____ Payment Method: ☐ ACH ☐ Check
Check one of the following: ☐ Dividends Only ☐ Both Dividends and Capital Gains ☐ Capital Gains Only

Fund Name: _____ Payment Method: ☐ ACH ☐ Check
Check one of the following: ☐ Dividends Only ☐ Both Dividends and Capital Gains ☐ Capital Gains Only

8. Banking Information & Options, continued

Systematic Purchase

Initiates regularly scheduled investments from your bank account via Automated Clearing House (ACH). The minimum purchase amount is \$100 per Fund. Purchases will occur on a monthly basis unless otherwise specified. If a dollar amount is specified, but specific funds/amounts are not listed, we will automatically use the allocation provided on the fund selection page, provided the purchase amounts meet the criteria of \$100 per fund. *Withdrawals will begin as soon as possible after the banking information has been verified, unless a later date is specified.*

Day of the month for withdrawals _____ (If no day is specified, withdrawals will occur on or about the 15th.)

Amount of purchase \$ _____ Fund Name/Share Class _____

Amount of purchase \$ _____ Fund Name/Share Class _____

Amount of purchase \$ _____ Fund Name/Share Class _____

Amount of purchase \$ _____ Fund Name/Share Class _____

RESTRICTIONS – Each purchase of shares will be made at the current offering price for Class A shares and/or the current Net Asset Value for Class C and C1 shares determined as of the close of business on the day on which such purchase is made. This payment service may be revoked or discontinued by either Virtus Fund Services or the purchaser upon 30 days written notice to the other. Virtus Fund Services reserves the right to cancel any transaction that was executed in reliance on a draft authorized where the bank upon which the draft was drawn refused to make payment thereon for any reason.

Systematic Withdrawal Plan

A Systematic Withdrawal Plan (SWP) is available provided shareholders own shares of the Fund worth \$5,000 or more. SWP is subject to restrictions described in the Fund's prospectus. This option will begin the month following receipt of this request. If a withdrawal plan is selected, all distributions must be reinvested.

1. Fund Name/Share Class _____ Amount of each withdrawal _____

2. Systematic Withdrawals for:

Class A withdrawals shall be made (choose one only): ☐ Monthly ☐ Quarterly ☐ Semiannually ☐ Annually

Class C and C1 withdrawals shall be made (choose one only): ☐ Monthly ☐ Quarterly

Class C and C1 shareholders should note that 1% can be withdrawn monthly or 3% quarterly without a sales charge.

Withdrawals are to begin on the _____ day of _____ (Month, Year). If no day is specified, withdrawals will occur on or about the 15th.

3. Choose one of the following methods of distribution:

☐ ACH - I have verified that my bank is a member of the Automated Clearing House (ACH).

☐ Check - I understand that the SWP checks will be made payable to me and sent to my account mailing address.

Systematic Exchange

This option allows you to dollar-cost average by automatically transferring shares between Funds, according to the terms of the current prospectus for each fund.

IMPORTANT INFORMATION

- Each "FROM" account must have the following **MINIMUM ACCOUNT BALANCE** when the systematic exchange option is established:
 - \$5,000 minimum account balance for a **Regular (non-qualified) Account**.
 - \$2,000 minimum account balance for a **Qualified Plan Account**.
- This option cannot begin until the month following receipt of this request.
- Exchanges are processed on approximately the 10th of each month.

Exchange "From" Account

Fund Name _____ New Account ☐ Yes ☐ No Existing Account Number _____ U.S. Tax I.D. Number _____

The amount of each exchange shall be \$ _____ (\$100 minimum) and will begin _____ (Month, Year)

Frequency of exchanges: ☐ Monthly ☐ Quarterly ☐ Semiannually ☐ Annually

Receiving "To" Account

Fund Name _____ New Account ☐ Yes ☐ No Existing Account Number _____ U.S. Tax I.D. Number _____

If the "To" account is new, all dividends and capital gains earned in this account will be reinvested unless one or both of the following are checked: ☐ Dividends paid in cash ☐ Capital Gains paid in cash

9. Letter of Intent (LOI)

Under the terms of the prospectus, I intend to purchase, within thirteen (13) months from the date of receipt, shares of one or more of the Virtus Mutual Funds (other than Class A Shares of the Ultra-Short Funds). The total amount of my purchase (at the maximum offering prices on the date of this application), will equal an aggregate amount not less than:

☐ \$50,000

☐ \$100,000

☐ \$250,000

☐ \$500,000

☐ \$1,000,000

Shares owned by me and held direct with Virtus Mutual Funds on the date of this Letter (including shares owned by my spouse or domestic partner, children and minor grandchildren or such other persons as described as a "single purchaser" in the current prospectus) are held in the below specified accounts:

Fund Name	Account Number	Account Registration	Relationship to Participant*
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Fund Name	Account Number	Account Registration	Relationship to Participant*
-----------	----------------	----------------------	------------------------------

Fund Name	Account Number	Account Registration	Relationship to Participant*
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**Must be self, spouse or domestic partner, child or minor grandchild; if grandchild, indicate current age.*

☐ This is a new Letter of Intent, which will be effective on the date the account(s) is established.

☐ This is an existing Letter of Intent. The Letter of Intent was:

Signed on: _____ For \$ _____ LOI #: _____

10. Right of Accumulation

If this account is entitled to a Reduced Sales Charge under the terms of the prospectus (see How to Buy Shares), please provide the following information:

Fund Name	Account Number	Account Registration	Relationship to Participant*
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Fund Name	Account Number	Account Registration	Relationship to Participant*
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Fund Name	Account Number	Account Registration	Relationship to Participant*
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**Must be self, spouse or domestic partner, child or minor grandchild; if grandchild, indicate current age.*

11. Cost Basis Election

IRS regulations require mutual fund companies to report cost basis on mutual fund purchases made after January 1, 2012 ("covered shares") on accounts that are eligible for 1099-B tax reporting. The Funds have elected Average Cost as our default method. You have the option to choose the same method as our default or you may choose any of the other cost basis reporting methods. This election is good for all future transactions unless you either revoke or change the election.

The average cost method can be revoked, and replaced with another method, up to the time of the first disposition of covered shares. After the first disposition of covered shares has occurred, then a change from the Average Cost method is effective only for the shares acquired after the change was made. Shares acquired prior to the change will retain the previously averaged cost per share for the purpose of calculating the gain or loss at the time of the sale. Note: IRS Regulations do not permit the change of a cost basis election on executed trades.

You may choose one cost basis election method to apply to all Funds under one account number or you may choose a different cost basis election for each Fund held under the account number. If you elect to choose a different cost basis election for each Fund held under the account number, please complete our **Cost Basis Election Form**, which is available on our website www.Virtus.com, and submit with this application. Otherwise, the following election will apply to all Funds that are established under your new account number. Please elect one of the following cost basis methods:

- ☐ **Average Cost** – Calculates the cost of shares in an account by averaging the cost of all purchases of covered shares. The gain/loss is calculated by taking the cumulative dollar cost of the covered shares owned and dividing it by the number of covered shares in the account.
- ☐ **First In, First Out (FIFO)** – Shares acquired first in the account are the first shares depleted.
- ☐ **Last In, First Out (LIFO)** – Shares acquired last in the account are the first shares depleted.
- ☐ **High Cost In, First Out (HIFO)** – Shares acquired with the highest cost per share are the first shares depleted.
- ☐ **Low Cost In, First Out (LIFO)** – Shares acquired with the lowest cost per share are the first shares depleted.
- ☐ **High Cost Long-Term In, First Out (HILT)** – The long-term highest cost shares are the first shares depleted.
- ☐ **High Cost Short-Term In, First Out (HIST)** – The short-term highest cost shares are the first shares depleted.
- ☐ **Low Cost Long-Term In, First Out (LILT)** – The long-term lowest cost shares are the first shares depleted.
- ☐ **Low Cost Short-Term In, First Out (LIST)** – The short-term lowest cost shares are the first shares depleted.
- ☐ **Specific Lot Depletion** – This method allows you to specify exactly which shares you are selling at the time of the sale.

Due to the tax and financial consequences associated with this election, we recommend that you review the information available on the IRS website, www.irs.gov and/or consult a tax or financial professional for guidance.

If you do not make an election, we will apply our default method Average Cost to all of your funds and accounts.

12. Checkwriting Privilege

Please refer to your prospectus for restrictions, if applicable.

Checkwriting minimum is \$250 per check.

Checkwriting is an optional feature available for the following funds:

- Virtus Newfleet Core Plus Bond Fund
- Virtus Newfleet High Yield Fund
- Virtus Newfleet Multi-Sector Intermediate Bond Fund
- Virtus Newfleet Multi-Sector Short-Term Bond Fund
- Virtus Seix U.S. Government Securities Ultra-Short Bond Fund
- Virtus Seix Ultra-Short Bond Fund

- We require the original signatures of all shareholders.
- For multiple shareholders, please check a box below for the number of required signatures. If no box is checked, the default will be that only one signature is required.
 - ☐ One Signature
 - ☐ Both Signatures – when 2 signatures are listed below.
 - ☐ Combination of Signatures (Any 2 of the 3 signatures required)

Printed name(s) of shareholder(s).

Original signature(s) of shareholder(s).

1. _____

1. _____

2. _____

2. _____

3. _____

3. _____

Checkwriting Terms and Conditions

Payment of funds is authorized by the signature(s) above. Regular checks may not be for less than \$250.

If the Checkwriting section is signed by more than one person, all checks will require only one of the signatures, unless otherwise indicated. Each signer guarantees the other's signature. The Bank of New York Mellon ("the Bank") is hereby appointed agent by the persons signing the Checkwriting section (the "Shareholders") and, as agent, is authorized and directed to present checks drawn on this checking account to Virtus Mutual Funds or its redemption agent as requested to redeem shares registered in the name of the Shareholders in the amounts of such checks, and to deposit the proceeds of such redemptions in this checking account. The Bank shall be held liable only for its own negligence. Shareholders hereby authorize Virtus Mutual Funds or its redemption agent to honor redemption requests presented in the above manner by the Bank. Virtus Mutual Funds and its redemption agent will not be held liable for any loss, expense or cost arising out of check redemptions. The Bank has the right not to honor checks in amounts exceeding the value of the Shareholders' account at the time the check is presented for payment less the value of any shares purchased by other than Federal Funds wire in the preceding 10 calendar days. The Shareholders agree to be subject to the rules and regulations of the Bank pertaining to this checking account as amended from time to time. The Bank reserves the right to change, modify or terminate this checking account at any time upon notification mailed to the address of record of the Shareholders.

Check Account Number(s) – To be completed by the Fund

1. _____

2. _____

13. Electronic Delivery (eDelivery)

Access your funds' regulatory documents, (including prospectuses, annual and semi-annual reports), tax forms or your account statements at your convenience via the Internet by signing up for eDelivery through **Virtus.com**.

Once registered, you will receive email notification when fund documents are available for you to view and download at Virtus.com.

eDelivery is a more secure and environmentally friendly alternative to traditional paper mailings – you are a few clicks away from faster access to information and simplified recordkeeping.

You can change your delivery options at any time, free of charge. If you own Virtus Mutual Funds through a broker/dealer or a retirement plan, you may not be eligible for eDelivery. Please contact us at 800-243-1574 for assistance.

14. Signature(s) & Certification

I hereby authorize Virtus Fund Services (the "Transfer Agent"), or its duly authorized agents, as agents for Virtus Mutual Funds, to honor any requests made in accordance with the terms of this application, and I further affirm that neither the Funds nor their agents shall be held liable for any loss, liability, cost or expense for acting in accordance with this application, or any section thereof. I authorize the Funds and their agents to act upon instructions (by phone, in writing, on-line or by other means) believed to be genuine and in accordance with the procedures described in the prospectus for this account or any account into which exchanges are made. I agree that neither the Funds nor their agents will be liable for any loss, cost or expense for acting on such instructions, provided that the Funds or their agent employs reasonable procedures to confirm that instructions communicated are genuine. I understand that I bear the risk from instructions given by an unauthorized third party that the Funds or their agent reasonably believes to be genuine. I certify that I have full right, power, authority and legal capacity to purchase shares and affirm that I have read and understand the prospectus and agree to its terms. I agree to obtain and read the prospectus for any Virtus Mutual Fund(s) into which I may request an exchange in the future.

If there is a financial professional and/or dealer assigned to my account, currently or in the future, I hereby authorize the listed individual(s) to act on my behalf with respect to my account in all aspects, including without limitation initiating contact specifically for the purposes of unclaimed property laws.

I acknowledge and understand that no information that the Funds or their agents provide or have provided shall be considered to be or is advice on which I may rely as the primary basis for my investment decisions. I acknowledge and agree that I need to make my own decisions, with whatever third-party advice I wish to obtain, and I am not authorized to rely on any information the Funds or their agents provide or have provided as advice that is a primary basis for my decisions. I acknowledge that the Funds and their agents have expressly confirmed that none of the Funds, their agents nor any of their affiliates has made or is making a recommendation, or has provided or is providing investment advice of any kind whatsoever (whether impartial or otherwise), or is giving any advice in a fiduciary capacity, in connection with any decision I may make to invest or otherwise proceed with Virtus Mutual Funds.

Under penalties of perjury, I certify that: (1) the number shown on this form is my correct taxpayer identification number; 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 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) The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. 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.

NOTE: The IRS does not require your consent to any provision on this application other than the certification required to avoid backup withholding.

If I am a nonresident alien, I am required to complete the appropriate Form W-8 to certify my foreign status. I understand that I am not under penalties of perjury certifying the above information.

In addition to the above statements, my signature below indicates that I have read the Fund prospectus(es) and this form and agree to the terms stated. In addition, by signing below, I agree to receive the Fund Privacy Notice within a reasonable time after I purchase Fund shares.

EU Residents or Citizens Only: By checking the box at the end of this sentence, I acknowledge that I have received, read and accepted the terms of the Privacy Policy applicable to shareholders who are residents or citizens of the European Union, which is available on Virtus.com. ☐

Individual (or Custodian)	Date
Co-Owner (or Corporate Officer, Partner or Trustee)	Date
(if applicable, Trustee)	Date
(if applicable, Trustee)	Date

Please note: If no activity occurs in your account within the time period specified by your state law, the assets in your account may be transferred to the state.