

Institutional New Account Application

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**.

Please complete this application in its entirety (print or type) and fax to 833-782-4117 or mail with your initial investment 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.

1. Initial Investment and Purchase Instructions

Class I Shares

The initial minimum investment for Class I shares is \$100,000. This share class is generally intended for institutional investors. Class I shares are offered primarily to clients of financial intermediaries that (i) charge such clients and ongoing fee for advisory, investment, consulting, or similar services; or (ii) have entered into an agreement with the distributor to offer Class I shares through a no-load network or platform. Class I Shares are also offered to private and institutional clients of, or referred by, the adviser, the subadvisers or their affiliates, and to Trustees of the funds and trustees/directors of affiliated open- and closed-end funds, and directors, officers and employees of Virtus and its affiliates. Please refer to the prospectus and statement of additional information for more details.

Class R6 Shares

Class R6 shares are available to the following investors (provided that they do not require or receive any compensation, administrative payments, sub-transfer agency payments or service payments with respect to Class R6 shares) without a minimum initial investment: (i) qualified retirement plans, including, but not limited to, 401(k) plans, 457 plans, employer sponsored 403(b) plans, defined benefit plans and other accounts or plans whereby Class R6 shares are held on the books of a fund through plan level or omnibus accounts; (ii) banks and trust companies; (iii) insurance companies; (iv) registered investment companies; and (v) non-qualified deferred compensation plans. Other institutional investors may be permitted to purchase Class R6 shares subject to the fund's determination of eligibility and may be subject to a \$2,500,000 minimum initial investment requirement. Please refer to the prospectus and statement of additional information for more details.

Institutional Class

The minimum investment for Institutional Class shares is \$1,000,000. Institutional Class shares are offered to pension and profit-sharing plans, employee benefit trusts, endowments, foundations, corporations and other high net worth individuals. For purchases of Institutional Class Shares by Trustees of the Virtus Mutual Funds and directors, officers and employees of Virtus and its affiliates, the minimum initial investment is waived.

If you are eligible to purchase Class I shares, Class R6 shares or Institutional Class because you are a director, officer or employee of Virtus or its affiliates, or you are a Trustee of the funds or trustee/director of affiliated open- and closed-end funds, please visit VirtusNet, call 800-243-1574 or email virtus.customer.service@virtus.com to obtain the appropriate form.

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. Initial Investment and Purchase Instructions, continued. **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. 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 of New York Mellon Bank Name Routing Number 0110 0123 4 **Account Number** 733199 BNY Mellon Investment Servicing (US), Inc., as Agent For credit to Name of Fund - i.e. Virtus Newfleet Core Plus Bond Fund Shareholder Name For the benefit of Shareholder Account Number (do not include the fund number) ☐ By Mail Complete application. Make check payable to Virtus Mutual Funds Mail application and check to one of the addresses listed above. **2.** Type of Account – Select only one type of registration and complete the requested information. Class I Shares & Institutional Class - Generally, for Class I Shares and Institutional Class, the following account types are available: Pension Plan ☐ Profit Sharing Plan ☐ Employee Benefit Trust ☐ Endowment ☐ Foundation ☐ C Corporation ☐ S Corporation Limited Liability Company (indicate the U.S. federal income tax classification of LLC): ↑ *Other – List type of registration or type of business: Please check if you are a private and institutional client of, or have been referred by, the adviser, the subadvisers or their affiliates. R6 Shares - Generally, for R6 Shares, the following account types are available: ☐ Pension Plan ☐ Profit Sharing Plan ☐ Employee Benefit Trust ☐ Endowment ☐ Foundation ☐ C Corporation S Corporation Limited Liability Company (indicate the U.S. federal income tax classification of LLC): Qualified Retirement Plan – specify plan type: ☐ Bank / Trust Company ☐ Insurance Company Registered Investment Company ☐ Non-Qualified Deferred Compensation Plan

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

↑Other – List type of registration or type of business:

If applicable, a copy of the articles of organization, articles of incorporation 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. In the case of a trust, a properly executed Certificate of Trust may be submitted. All documentation must be certified within 60 days of our receipt. Please contact our office for the necessary requirements.

2. Type of Account, continued.

- > Bolded fields are required to be completed and will be verified.
- > If bolded fields in Sections 2 and 3 are not completed, this application will not be accepted.
- Note that all legal entity accounts must also complete Section 4. If not completed, we will be unable to establish the account.

Name of Trust, Corporation or Othe	r Entity			
U.S. Tax I.D. Number	Date of Trust/Incorporation	Name of Trust Bo	eneficiary (optional)	
Trustee's Name (First, Middle, Last)		U.S. Social Sect	urity Number	Date of Birth
Trustee's Name (First, Middle, Last)		U.S. Social Sec	urity Number	Date of Birth
If additional trustees are to be Security numbers of all trustee	listed, please submit a separate s es.	sheet with the names,	addresses, date	s of birth and Social
Check if exempt from verific ☐ Publicly traded compan ☐ Financial Institution regi ☐ Bank regulated by a sta ☐ Retirement plan covere	y, symbol: ulated by a federal functional regula te regulator	tor		
3. Account Mailing and	I Email Addresses			
Street Address (If your mailing address is a P.O.	Box, you must provide your street add	City ress. APO and FPO add	State dresses will be acc	ZIP Code epted.)
Mailing Address (if different from above		City	State	ZIP Code
ivialing Address (ii dilierent nom abovi	5)	City	State	ZIF Code
Attention Person(s)	Daytime Te	lephone Number	Email Address	

4. Certification of Beneficial Owners for Legal Entity Customers

What is this?

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. Legal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, fraud, and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforcement investigate and prosecute these crimes.

Who has to complete this information?

This section must be completed by the person opening a new account on behalf of a legal entity with any of the following U.S. financial institutions: (i) a bank or credit union; (ii) a broker or dealer in securities; (iii) a mutual fund; (iv) a futures commission merchant; or (v) an introducing broker in commodities.

For the purposes of this application, a **legal entity** includes a corporation, limited liability company, or other entity that is created by a filing of a public document with a Secretary of State or similar office, a general partnership, and any similar business entity formed in the United States or a foreign country. **Legal entity** does not include sole proprietorships, unincorporated associations, or natural persons opening accounts on their own behalf.

What information do I have to provide?

This application requires you to provide the name, address, date of birth and Social Security number (or passport number or other similar information, in the case of foreign persons) for the following individuals (*i.e.*, the **beneficial owners**):

- (i) Each individual, if any, who owns, directly or indirectly, 25 percent or more of the equity interests of the legal entity customer (e.g., each natural person that owns 25 percent or more of the shares of a corporation); and
- (ii) An individual with significant responsibility for managing the legal entity customer (e.g., a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President or Treasurer).

4. Certification of Beneficial Owners for Legal Entity Customers, continued.

The number of individuals that satisfy this definition of "beneficial owner" may vary. Under section 4(c), below, depending on the factual circumstances, up to four individuals (but as few as zero) may need to be identified. Regardless of the number of individuals identified under section 4(c), you must provide the identifying information of one individual under section 4(d), below. It is possible that in some circumstances the same individual might be identified under both sections (e.g., the President of Acme, Inc. who also holds a 30% equity interest). Thus, a completed form will contain the identifying information of at least one individual (under section 4(d)), and up to five individuals (i.e., one individual under section 4(d)) and four 25 percent equity holders under section 4(c)).

If the legal entity information requested on this form is not provided, we will be unable to establish an account. Virtus Mutual Funds may also ask to see a copy of a driver's license or other identifying document for each beneficial owner listed on this application.

Certification of Beneficial Owner(s)	
Persons opening an account on behalf of a legal en	ntity must provide the following information:
a. Name and Title of Natural Person Opening the Acc	count:
b. Name and Address of Legal Entity for Which the A	ccount is Being Opened:
	who, directly or indirectly, through any contract, arrangement, understanding, of the equity interests of the legal entity listed above:
Name	Date of Birth
Address (Residential or Business Street Address)	
For U.S. Persons: Social Security Number	For Foreign Persons: Passport Number and Country of Issuance or other similar identification number ¹
Name	Date of Birth
Address (Residential or Business Street Address)	
For U.S. Persons: Social Security Number	For Foreign Persons: Passport Number and Country of Issuance or other similar identification number ¹
Name	Date of Birth
Address (Residential or Business Street Address)	
For U.S. Persons: Social Security Number	For Foreign Persons: Passport Number and Country of Issuance or other similar identification number ¹
Name	Date of Birth
Address (Residential or Business Street Address)	
For U.S. Persons: Social Security Number	For Foreign Persons: Passport Number and Country of Issuance or other similar identification number ¹

(If no individual meets this definition, please write "Not Applicable.)

4. Certification of Beneficial Owners for Le	egal Entity Customers, continued.
 d. The following information for <u>one</u> individual, with sign An executive officer or senior manager (e.g., Chie Managing Member, General Partner, President, \	
If appropriate, an individual listed under section (c	e) may also be listed in section (d).
Name	Date of Birth
Address (Residential or Business Street Address)	
For U.S. Persons: Social Security Number	For Foreign Persons: Passport Number and Country of Issuance or other similar identification number ¹
	ovide an alien identification card number, or country of issuance of any or residence and bearing a photograph or similar safeguard.
Authorizing Signature for Certification of Beneficial	Owner(s) for Legal Entity Customers
opening account), hereby certify, to the best of my knowled	(name of natural person dge, that the information provided on this form is complete and correct.
Signature/Capacity	Date
5. Dealer Information	
Is this investment being made through an investment de	ealer? 🗌 Yes 🔲 No
If "yes", please provide the following information. A Please print clearly. <i>Note:</i> Stamps will not be accepted.	Accurate completion of this section will expedite dealer concession. oted 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 Email Address	Representative Telephone Number

6. 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.

7. Investment Choices

Fund Names	Class I	Class R6	Inst. Class	Dollar Amount
The Merger Fund®	□ 301	n/a	n/a	\$
Virtus AlphaSimplex Global Alternatives	 ☐ 1993	□ 1994	n/a	\$
Virtus AlphaSimplex Managed Futures Strategy	 ☐ 2608	 □ 2609	n/a	\$
Virtus Ceredex Large-Cap Value Equity	□ 5512	□ 5993	n/a	\$
Virtus Ceredex Mid-Cap Value Equity	☐ 5412	□ 5994	n/a	\$
Virtus Ceredex Small-Cap Value Equity	□ 5588	□ 5589	n/a	\$
Virtus Convertible	n/a	□ 6557	□ 6408	\$
Virtus Duff & Phelps Global Infrastructure	□ 1850	□ 2529	n/a	\$
Virtus Duff & Phelps Global Real Estate Securities	□ 1860	□ 2498	n/a	\$
Virtus Duff & Phelps Real Asset	☐ 1870	□ 1879	n/a	\$
Virtus Duff & Phelps Real Estate Securities	☐ 1793	2449	n/a	\$
Virtus Duff & Phelps Select MLP and Energy	2466	n/a	n/a	\$
Virtus Duff & Phelps Water	n/a	n/a	☐ 4861	\$
Virtus Emerging Markets Opportunities	n/a	☐ 4836	☐ 4636	\$
Virtus Global Allocation	n/a	☐ 4517	☐ 4616	\$
Virtus Income & Growth	n/a	n/a	☐ 4635	\$
Virtus International Small-Cap	n/a	☐ 6810	☐ 6610	\$
Virtus KAR Capital Growth	☐ 1798	☐ 2530	n/a	\$
Virtus KAR Developing Markets	☐ 2555	□ 2556	n/a	\$
Virtus KAR Emerging Markets Small-Cap	2425	☐ 2544	n/a	\$
Virtus KAR Equity Income	☐ 1798	☐ 2534	n/a	\$
Virtus KAR Global Quality Dividend	☐ 1853	☐ 1596	n/a	\$
Virtus KAR Global Small-Cap	n/a	n/a	☐ 4664	\$
Virtus KAR Health Sciences	n/a	n/a	☐ 4659	\$
Virtus KAR International Small-Mid Cap	☐ 1967	☐ 2446	n/a	\$
Virtus KAR Mid-Cap Core	☐ 1868	☐ 2531	n/a	\$
Virtus KAR Mid-Cap Growth	☐ 1794	☐ 2532	n/a	\$
Virtus KAR Small-Cap Growth	□ 1787	☐ 2533	n/a	\$
Virtus KAR Small-Cap Value	☐ 1764	□ 2502	n/a	\$
Virtus KAR Small-Mid Cap Core	□ 2538	□ 2539	n/a	\$
Virtus KAR Small-Mid Cap Growth	☐ 2551	☐ 2552	n/a	\$
Virtus KAR Small-Mid Cap Value	☐ 2559	□ 2560	n/a	\$
Virtus Newfleet Core Plus Bond		☐ 2497	n/a	\$
Virtus Newfleet High Yield	□ *1972	☐ 2499	n/a	\$
Virtus Newfleet Low Duration Core Plus Bond	□ 1770	□ 1771	n/a	\$
Virtus Newfleet Multi-Sector Intermediate Bond	□ *1872	□ 2447	n/a	\$
Virtus Newfleet Multi-Sector Short Term Bond	□ *1852	□ 2500	n/a	\$
Virtus Newfleet Senior Floating Rate	□ 1807	□ 2503	n/a	\$
Virtus Newfleet Short Duration High Income	n/a	□ 6852	□ 6652	\$

7. Investment Choices, continued.

Fund Names	Class I	Class R6	Inst. Class	Dollar Amount
Virtus NFJ Dividend Value	n/a	□ 4857	□ 4857	\$
Virtus NFJ Emerging Markets Value	n/a	n/a	□ 6663	\$
Virtus NFJ International Value	n/a	□ 4868	☐ 4668	\$
Virtus NFJ Large-Cap Value	n/a	□ 6556	□ 4650	\$
Virtus NFJ Mid-Cap Value	n/a	☐ 4525	☐ 4622	\$
Virtus NFJ Small-Cap Value	n/a	□ 4830	□ 4630	\$
Virtus Seix Core Bond	□ 5506	☐ 5738	n/a	\$
Virtus Seix Floating Rate High Income	□ 5203	□ 5999	n/a	\$
Virtus Seix High Grade Municipal Bond	□ 5524	n/a	n/a	\$
Virtus Seix High Yield	□ 5855	□ 6001	n/a	\$
Virtus Seix Investment Grade Tax-Exempt Bond	□ 5508	n/a	n/a	\$
Virtus Seix Tax-Exempt Bond	□ 1785	n/a	n/a	\$
Virtus Seix Total Return Bond	□ 5800	□ 5997	n/a	\$
Virtus Seix U.S. Government Securities Ultra-Short Bond	□ *5932	□ 6000	n/a	\$
Virtus SGA Emerging Markets Equity	□ 1736	☐ 2443	n/a	\$
Virtus SGA Global Growth	☐ 4811	☐ 4810	n/a	\$
Virtus SGA International Growth	☐ 5540	□ 5980	n/a	\$
Virtus Silvant Focused Growth	n/a	□ 4823	☐ 4623	\$
Virtus Silvant Large-Cap Growth Stock	☐ 5510	□ 5995	n/a	\$
Virtus Silvant Mid-Cap Growth	n/a	☐ 4865	☐ 4665	\$
Virtus Small-Cap	n/a	□ 6867	□ 6667	\$
Virtus Stone Harbor Emerging Markets Bond	☐ 4971	n/a	n/a	\$
Virtus Stone Harbor Emerging Markets Debt Income	□ 4975	n/a	n/a	\$
Virtus Stone Harbor Local Markets	□ 4979	n/a	n/a	\$
Virtus Tactical Allocation	☐ 703	□ 708	n/a	\$
Virtus Westchester Credit Event	4501	n/a	n/a	\$
Virtus Westchester Event-Driven	☐ 2517	n/a	n/a	\$
Virtus Zevenbergen Innovative Growth Stock	□ 5558	□ 5559	n/a	\$
Virtus Zevenbergen Technology	n/a	n/a	4660	\$
Other:				\$

Dividend and capital gain options will be reinvested in shares of the same Fund at net asset value unless otherwise specified in Section 8.

^{*}Checkwriting available. Details on page 11.

8. Banking information	& Options		
transactions. An original voice be accepted. The registered s	led check or letter from hareholder(s)/entity na	n is provided below, it will be added your bank is required. Starter chec me(s) must appear on the bank accor- ion, please contact our office for addit	ks and photocopies of checks will not unt. If the registered
☐ Savings		al investment check or an origin origir u nt – A letter from your bank, on bank ng information.	
Bank Name			Bank Telephone Number
Bank Account Holder's Name(s)			
Bank Routing Number		Bank Account Number	
IMPORTANT: The application n properly verified for the options in		at 10 business days prior to the first tran	saction for the banking information to be
of Fund shares to/from the bank	account referenced abo	other instructions from any authorized we. A savings and loan or credit union ge an incoming wire fee. Please check	may not be able to receive wire
The following options will aurepresentative, if any, unless		to the account for all registered sh	nareholders and dealer
Telephone Purchases / Rede	emptions / Exchanges	•	
Agent or its subagent will inition or credit union via ACH. The	ate the transaction by wi shareholder's bank, whi it to the shareholder's ac	ring a request for monies to the shareho ch must be an ACH member, will in turn	
terms of the prospectus. Call	s/trades received before	s withdrawn and sent to the designated the market close (generally 4:00 PM Ea e market close will receive the next day	astern Time for the NYSE) will receive
	Class A). Virtus Newfleet	the same class and are subject to limita t Multi-Sector Short Term Bond Fund Cl	
sent within one to three busin day and may be subject to a f	ess days and redemption ee at your chosen bank.	ade via ACH or federal fund wire. Rede n payments through federal fund wire w If there are insufficient funds in an acc been owned for at least 10 calendar day	ount to meet a redemption order, the
☐ I do not elect the Telepl	none Purchase option t	for me or my dealer representative.	
☐ I do not elect the Telepl	none Redemption option	on for me or my dealer representative	
☐ I do not elect the Telepl	none Exchange option	for me or my dealer representative.	
The following options are op	tional and will be add	led to the account if the section is	completed:
Cash Dividends and/or Capi Allows shareholders to have t provided above, unless other	heir distributions sent to	their designated bank account via feder	ral fund wire to the banking information
Fund Name:			
Check one of the follow	ing: Dividends Only	☐ Both Dividends and Capital Gains	☐ Capital Gains <i>Only</i>
Fund Name:			
Check one of the follow	ing: Dividends Only	☐ Both Dividends and Capital Gains	☐ Capital Gains <i>Only</i>
		☐ Both Dividends and Capital Gains	☐ Capital Gains <i>Only</i>
Fund Name:			
Check one of the follow	ing: Dividends Only	☐ Both Dividends and Capital Gains	☐ Capital Gains Only

9. Phone Order Authorization – For Corporations, Trusts, and other business entities only.

Please list up to five individuals who will be authorized to act on the account ("Authorized Persons") as well as the type of transactions and the dollar or share amount each is authorized for. The Authorized Persons will be able to act singularly, and without restriction to dollar amount unless indicated below, with respect to the mutual fund account(s) being established with this application. If there is not sufficient space to list all authorized individuals, please attach a separate list with the full name(s), title(s), signature(s), type of transactions and the dollar amount each is authorized for.

Inquiry Only access allows the Authorized Persons to request information by phone as to the account status, share balances, to confirm receipt of wire or transaction proceeds of redemptions, verify addresses, and other information concerning the mutual fund account(s), but not to effect any change or transactions in the account(s).

Inquiry and Transaction access allows the Authorized Persons to:

- Issue instructions via phone or in writing for the purchase, sale, exchange or transfer of shares with respect to the mutual fund account(s) being established with this application.
- Make, draw, sign, endorse, negotiate, cash, deliver or make a stop payment on checks drawn on any of the mutual fund account(s) being established with this application.
- Approve updates or changes to the account registration address on file for any of the mutual fund account(s) being established with this application.

Change Banking Information allows the Authorized Persons to approve updates or changes to the banking information on file for any of the mutual fund account(s) being established with this application. Medallion Guaranteed instructions must be submitted to our office to update banking information maintained on the account.

Title and Signature of Authorized		
Inquiry & Transaction: ☐ Yes or ☐ No		
Approved Dollar Amount: \$		
Title and Signature of Authorized		
Inquiry & Transaction: ☐ Yes or ☐ No		
Approved Dollar Amount: \$		
Title and Signature of Authorized		
Inquiry & Transaction: ☐ Yes or ☐ No		
Approved Dollar Amount: \$		
Title and Signature of Authorized		
Inquiry & Transaction: ☐ Yes or ☐ No		
Approved Dollar Amount: \$		
Title and Signature of Authorized		
Inquiry & Transaction: Yes or No		
Approved Dollar Amount: \$		

10.	Chec	kwriting	Privi	ege

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
- ➤ We require the original signatures of all shareholders.

 ➤ For multiple shareholders, please check a box below for the number 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) 	er of required signatures. If no box is checked, the default
Printed name of shareholder 1	Original signature of shareholder 1
Printed name of shareholder 2	Original signature of shareholder 2
Printed name of shareholder 3	Original signature of shareholder 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.

11. Authorized Signers - Please note that we do not accept electronic signatures unless they are Medallion Guaranteed.

The undersigned certifies that he/she has full authority and legal capacity to purchase shares of the Fund(s) and establish and use any related privileges including specifically the authorization of individuals to place telephone orders. This authorization is a continuing one and shall remain in full force and effect until revoked by the undersigned by a written notice addressed to the Funds(s) and delivered to Virtus Mutual Funds, P.O. Box 534470, Pittsburgh, PA 15253-4470. Such revocation will become effective as soon as the Funds and/or their agents have had reasonable amount of time to act upon it. The revocation shall not affect any liability in any way resulting from transactions initiated prior to the Funds and/or their agents acting on such instructions.

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.

I understand that if I am a Texas state resident, I may designate a "representative for notice" for escheatment purposes by submitting the completed designation form from the state of Texas Comptroller's website to Virtus Mutual Funds, P.O. Box 534470, Pittsburgh, PA 15253-4470. I acknowledge that the designee has no rights to claim or access the account or assets.

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Substitute Form W-9
Under penalties of perjury, I certify that:
1. The number shown on this form is my correct taxpayer identification number; and
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.
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.
NOTE REGARDING FORM W-9: The IRS does not require your consent to any provision on this application other than the certification required to avoid backup withholding.

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

erms of the Privacy Policy applicable to shareholders who are resid	ents or citizens of the European Union, wh	nich is available on Virtus.com. [_]
Authorized Signer (or Corporate Officer, Partner, or Trustee) - Print Name	Signature/Capacity	Date
Authorized Signer (or Corporate Officer, Partner, or Trustee) - Print Name	Signature/Capacity	Date
Authorized Signer (or Corporate Officer, Partner, or Trustee) - Print Name	Signature/Capacity	Date
Nutborized Signer (or Corporate Officer, Partner, or Tructoe). Print Name	Signatura/Canacity	Data

Authorized Signer (or Corporate Officer, Partner, or Trustee) - Print Name

Signature/Capacity

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.