

BRETTON FUND

Please visit our website at www.brettonfund.com or call toll-free 1-800-231-2901 for any assistance. Do not use this application to establish a Bretton Fund Individual Retirement Account.

Shareholder Account Application

Please mail (or send overnight) the completed application to:

Bretton Fund
c/o Mutual Shareholder Services, LLC
8000 Town Centre Dr., Suite 400
Broadview Hts., OH 44147

1. Taxpayer Identification Number

For joint accounts, provide
SSN of first listed owner;
For UGMA/UTMA use minor's SSN

Social Security Number or Taxpayer Identification Number

2. Account Registration (Please Print or Type)

Please check only one type of registration below:

Individual (may not be a minor)

Owner's Name (First, Middle, Last) _____ Date of Birth _____

Joint* (may not be a minor)

Joint Owner's Name (First, Middle, Last) _____ Date of Birth _____

Joint Owner's Name (First, Middle, Last) _____ Date of Birth _____

***Joint tenants with right of survivorship, unless otherwise noted.**

Gift/Transfer to a Minor (UGMA/UTMA)

Minor's Name (First, Middle, Last) _____ Minor's Date of Birth _____

Custodian's Name (First, Middle, Last) _____ Custodian's SSN Required _____

Trust (Please attach a trust resolution)

Name of Trust _____

Name of Trustee _____

Additional Trustee (If applicable) _____ Date of Trust _____

Corporation or other Entity

Type of Entity: Corp. Partnership Other _____

Name of Corporation, Partnership, Estate, ect. _____

Please attach a corporate / non-corporate resolution.

3. Mailing Address

Street _____

City, State, Zip Code _____

() () _____

Daytime Telephone _____ Evening Telephone _____

Owner's Citizenship:

U.S. Citizen U.S. Resident alien _____

Country

Non-resident alien – Residence for tax purposes _____

Country

Non-resident aliens with a U.S. address
must also submit IRS Form W-8

4. Additional Address or Broker Dealer Information (If Applicable)

To send copies of confirms and statements for this account (optional)

Name _____

Street _____

City, State, Zip Code _____

Broker Dealer Rep Name _____ Broker Dealer Account Number _____

5. Investment Amount

Minimum Initial Investment Amounts:

- \$5,000 per regular Fund account.
 - \$1,000 with an Automatic Investment Plan.
- (for this option, also complete Sections 9 and 10)

Payment by Check Please make check payable to Bretton Fund.

Purchase by Wire Call 1-800-231-2901 for instructions.

Bretton Fund Total \$ _____

6. Distribution Options

All distributions will be reinvested into additional Fund shares unless you indicate otherwise by selecting payment by check:

Reinvest all Income Dividends and Capital Gains into my account (default).

Pay all Income Dividends and Capital Gains to me by check.

7. Telephone Purchase Option

Telephone Purchase of Shares Option: This option allows you to make additional investments (\$100 minimum per purchase) into your Bretton Fund account(s) by phone. Upon your request, we will automatically withdraw the purchase directly from your bank account. **To select this option, you must check the box below and complete Section 11.**

I accept this option

8. Telephone Redemption Option

Telephone Redemption of Shares Option: You can sell shares of your Fund by phone (\$25,000 maximum per day) and a check will be sent to your address of record. You will not be able to redeem by telephone and have a check sent to your address for a period of 15 days following an address change. You will automatically be granted telephone redemption privileges unless you decline them by checking the box below:

I decline this option. All requests to redeem shares from this account must be submitted in writing.

9. Mandatory Cost Basis Reporting Requirement

Internal Revenue Service (IRS) rules require us to report cost basis on mutual fund shares acquired after January 1, 2012. These regulations were enacted as a result of the Economic Stabilization Act of 2008. As part of the new regulations, brokers and mutual fund companies are now required to provide cost basis reporting to the IRS. Below is a list of cost basis methods available to you. Please select your preferred reporting method, sign and return with your account application. You may select only ONE option. If you do not return this form, the default method of AVERAGE COST will be assigned to your account.

IF YOU WOULD LIKE TO ELECT AVERAGE COST AS YOUR COST BASIS METHOD, THERE IS NO NEED TO ELECT A METHOD.

Average Cost (ACST)

First In First Out (FIFO)

Last In First Out (LIFO)

High Cost First Out (HIFO)

Low Cost First Out (LOFO)

Loss/Gain Utilization (LGUT)

Specific Lot Identification (SLID)

*Secondary Accounting Method Selection: _____

(Note: Average Cost is NOT a valid secondary method)

Application is continued on the back

10. Automatic Investment Plan

Automatic Investment Program: This option allows you to make automatic monthly or quarterly investments into your Bretton Fund account(s) directly from your bank account. To establish a new account with this program you must initially invest at least \$1,000 per account and subsequent investments must be at least \$100 per purchase.

You must also include the bank information in Section 11.

I accept this option

Monthly or Quarterly

Bretton Fund _____ \$ _____
Fund Name Amount (\$100 minimum)

Begin investment on _____ and on the 5th or 20th*
(month, year)
day of the month/quarter.

* Investments will be made on the 20th, unless you select the 5th. Your first automatic investment will become available approximately 15 days after your application is processed.

11. Bank Information

You must complete this section to make additional investments into your Bretton Fund account(s) by telephone (see Section 7) or to establish an Automatic Investment Plan (see Section 10). **Please attach a voided, unsigned check or savings account deposit slip for the bank account you will be using for using for transfers.**

Name of Bank

Address of Bank

City, State, Zip Code

Name(s) on Bank Account

Bank Account Number

ABA Number (Available from your bank)

()
Bank Phone Number

This is a: Checking Account Savings Account

James A. Sample _____ 0001
123 Main Street
Anywhere, USA 12345

Pay to the order of: _____

_____ DOLLARS

Attach Voided Check or Deposit Slip Here.
We cannot establish options in Sections 7 or 9 without it.

ANY CHECKS
VOID

1 1234567890123456789012 0001

12. Signatures (All Account Owners/Trustees Must Sign)

By signing below:

- I certify that I have received and read the current Prospectus for the Bretton Fund and understand its terms are incorporated in this application by reference. I certify that I have the authority and legal capacity to make this purchase and that I am of legal age in my state of residence. I understand that the Bretton Fund is not backed or guaranteed by any bank, or insured by the FDIC.
- I authorize the Bretton Fund and its agents to act upon instructions (by phone, in writing or other means) believed to be genuine and in accordance with procedures described in the Prospectus for this account or any account into which exchanges are made. I agree that neither the Bretton Fund nor the transfer agent will be liable for any loss, cost or expense for acting on such instructions. Such entities will employ reasonable procedures to confirm that instructions communicated by phone are genuine, and may be liable for losses due to unauthorized or fraudulent instructions only if such procedures are not followed.

By completing Section 11 and signing below:

I authorize debits from the bank account referenced in conjunction with the account options selected. I agree that the Bretton Fund shall be fully protected in honoring any such transaction. I also agree that the Bretton Fund may make additional attempts to debit my account if the initial attempt fails and I will be liable for any associated costs. All account options selected (if any) shall become part of this application and the terms, representations and conditions thereof.

Under penalty of perjury, I certify that:

- The Social Security Number or Taxpayer Identification Number shown on this application is correct.
- I am not subject to backup withholding because: (a) I am exempt from backup withholding; or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends; or (c) the IRS has notified me that I am no longer subject to backup withholding.

Cross out item 2 if you have been notified by the IRS that you are currently subject to backup withholding.

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

All Owners/Trustees Must Sign. For UGMA/UTMAs, Custodian Should Sign.

X _____
Signature of Individual Owner, Trustee, Custodian, etc. Date

X _____
Signature of Joint Owner, Trustee, Custodian, etc. (If applicable) Date

X _____
Signature of Joint Owner, Trustee, Custodian, etc. (If applicable) Date

If you have any questions, please call: 1-800-231-2901.

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THE USA PATRIOT ACT

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. This information will be verified to ensure the identity of all persons opening a mutual fund account.