



Pax World Mutual Funds

Regular mail:
Pax World Funds
PO Box 9824
Providence RI 02940-8024

Overnight mail:
Pax World Funds
4400 Computer Drive
Westborough MA 01581-1722
Telephone: 1(800) 372-7827

Coverdell Education Savings Account WITHDRAWAL AUTHORIZATION AND INSTRUCTIONS FOR DISTRIBUTION

Complete this form to request a total or partial distribution from your Pax World Coverdell Education Savings (ESA) account.

Note: For trustee to trustee transfers, please complete the appropriate receiving custodian's trustee to trustee transfer form. All required documentation must be received in good order before the withdrawal request can be honored.

For help filling out this form please call 1(800) 372-7827 between 8AM and 6PM ET M-F.

1. Participant Information Parent/Guardian of Designated Beneficiary

First Name	Middle Initial	Last Name	Social Security/Tax ID No.
Mailing Address	City	State	Zip Code
Birthdate (mm/dd/yyyy)	Contact Telephone	Email Address	

Check here if contact information above is new.

Designated Beneficiary of Coverdell ESA

Important Information: Under the terms of the BNY Mellon Investment Servicing Trust Company Coverdell ESA Custodial Agreement, if the Designated Beneficiary is of legal age (based on the state of residence) they acquire the role of Responsible Individual (excluding Special Needs Designated Beneficiary's). As such, they must sign this Coverdell ESA Withdrawal Request Form. In addition, they must complete, sign and enclose with this form a copy of IRS Form W-9. Upon receipt of the required documentation the Custodian will remove the former Responsible Individual from the account registration.)

First Name	Middle Initial	Last Name	Social Security/Tax ID No.
Account Number	Birthdate (mm/dd/yyyy)		

2. Reason for Distribution

Qualified Distribution - Is Being Used for Qualified Education Expenses:

The distribution from this account is being used for qualified education expenses of the Designated Beneficiary.

Non-Qualified Distribution - Is Not Being Used for Education Expenses:

1. This distribution is not being used for qualified education expenses and none of the other reasons listed below apply.
2. Permanent disability of the Designated Beneficiary (within the meaning of section 72(m)(7) of the Internal Revenue Code).
3. Removal of excess contribution plus earnings before the tax-filing deadline. In which tax year was the contribution made? _____. Is the contribution plus earnings being removed in the same year Yes No
4. Liquidation of the account for the Designated Beneficiary who has attained age 30.

- 5. Transfer incident to divorce or legal separation - attach a Medallion Signature Guarantee letter of instruction indicating how the proceeds are to be distributed.
- 6. The Coverdell ESA is being rolled over to a Coverdell ESA for another eligible family member. Attached is either: Pax World Funds Coverdell ESA account application or a Medallion Signature Guaranteed (MSG) letter of instruction indicating how the proceeds should be delivered.
- 7. Death - the Responsible Individual or representative of the Designated Beneficiary's estate must furnish a certified copy of the death certificate and select from the following options (A, B, or C) below.
 - A. Distribute assets payable to the estate of the Designated Beneficiary following the mailing instructions in **Section 5**. Estate's Tax Identification Number: _____
 - B. Distribute assets in cash payable to the named Designated Death Beneficiary following the mailing instructions in **Section 5**.
Beneficiary's Name: _____ Social Security Number: _____
 - C. The Coverdell ESA is being rolled over to a Coverdell ESA for an eligible family member who is under the age of 30.
Coverdell ESA Recipient's Name: _____
 - Attached is a new Pax World Funds Coverdell ESA account application indicating a rollover contribution investment.
 - Deposit as a rollover into an existing Coverdell ESA at Pax World Funds.
Account Number: _____
 - Issue proceeds to a Coverdell ESA in the recipient's name at another institution following the mailing instructions below.

4. Distribution Method - Complete sections A and B

A. Choose one:

- Total Liquidation
- Partial Distribution - Amount: \$ _____ (or) _____ Shares

B. Distributed from:

Fund: _____ Account: \$ _____ or percent: _____ %
 Fund: _____ Account: \$ _____ or percent: _____ %
 Fund: _____ Account: \$ _____ or percent: _____ %
 Total Account: \$ _____ Total: 100%

Note: If specific funds are chosen, but no percentage is provided, we will redeem equal portions from each fund listed.

5. Mailing Instructions:

- Mail to the Designated Beneficiary's address of record** – Check will be made payable to the Designated Beneficiary (or to their estate in case of death distribution).
- Mail to the following address** - (Medallion Signature Guarantee required if address is not already on file.)

_____|_____|_____|_____
 Address City State Zip Code

- Mail to an alternative payee address.** Payment instructions to an address other than the existing address of record will require a Medallion Signature Guarantee (see below).

Make Check payable to: _____

_____|_____|_____|_____
 Address City State Zip Code

- Send to my bank account by electronic transfer.** Adding banking instructions not currently on file for your Pax World Coverdell ESA, will require a Medallion Signature Guarantee (see below). For new instructions please attach a voided, unsigned check or savings deposit slip for the bank account to be used in conjunction with electronic (ACH) transactions.

Bank Name	Name(s) on Bank Account
Bank Routing/ABA Number	Bank Account Number

This is a: Checking Savings Account

Note: If a payment method is not selected, your distribution will be issued as a check payable to you and mailed to your address of record.

8. Tax ID Certification and Participant Authorization

I certify that I am the individual authorized to make these elections and that all information provided is true and accurate. I further certify that the Custodian, Pax World Funds, or any agent of either of them has given no tax or legal advice to me, and that all decisions regarding the elections made on this form are my own. The Custodian is hereby authorized and directed to distribute funds from my account in the manner requested. The Custodian may conclusively rely on this certification and authorization without further investigation or inquiry. I expressly assume responsibility for any adverse consequences which may arise from the election(s) and agree that the Custodian, Pax World Funds, and their agents shall in no way be responsible, and shall be indemnified and held harmless, for any tax, legal or other consequences of the election(s) made on this form.

Taxpayer Identification Number Certification

A. Under penalties of perjury, I certify that:

- I am a U.S. Person (including resident alien);
- The Social Security/Tax ID number provided in Section 1 is my correct SSN/TIN;
- I am not subject to backup withholding due to failure to report interest or dividend income (See Backup; and
- I am not subject to FATCA reporting.

Check the boxes below, if applicable:

- I am subject to backup withholding due to the failure to report interest or dividend income.
- I am subject to FATCA reporting.

B. I am not a U.S. citizen or other U.S. person (including a U.S. resident alien).

I am a citizen of _____ . Attach the applicable IRS Form W-8 (BEN, BEN-E, ECI, EXP, IMY)

Signature of Responsible Individual or Designated Beneficiary (if legal adult)	Date
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Medallion Signature Guarantee (if required): An eligible guarantor is a domestic bank or trust company, securities broker/dealer, clearing agency or savings association that participates in a medallion program recognized by the Securities Transfer Agents Association. The three recognized medallion programs are the Securities Transfer Agents Medallion Program (known as STAMP), Stock Exchanges Medallion Program (SEMP), and the Medallion Signature Program (MSP). A notarization from a notary public is NOT an acceptable substitute for a signature guarantee.

<p>Medallion Signature Guarantee</p>
