

SYSTEMATIC PURCHASE/WITHDRAWAL FORM



This Systematic Purchase/Withdrawal Form is used to move money between your bank account and your mutual fund account via ACH on a scheduled basis. If you have any questions regarding this form, please call Shareholder Services at 1-800-400-MIDAS (6432).

PART I: INVESTOR INFORMATION (*Denotes Required Information)

Owner's Name* (First, M.I., Last)	Date of Birth*	Social Security Number*	
Street Address (Physical Address)*	Apartment #	City*	State* Zip Code*
Mailing Address (if different from above)	City	State	Zip Code
Daytime Phone*	Evening Phone	Existing Account Number*	

Note: You must be a U.S. citizen with a U.S. mailing address.

PART II: SYSTEMATIC INVESTMENT/WITHDRAWAL PROGRAMS

Systematic Investment and Systematic Withdrawal allow you to move money between your bank account and your mutual fund account via ACH (Automated Clearing House) on a scheduled basis. Systematic Investment Program must be established with a \$100 minimum. Please refer to your prospectus for other account restrictions.

I AM INTERESTED IN SIGNING UP FOR:

- SYSTEMATIC INVESTMENT PROGRAM
- SYSTEMATIC WITHDRAWAL PROGRAM TO ADDRESS OF RECORD
- SYSTEMATIC WITHDRAWAL PROGRAM VIA ACH

I authorize the Midas Funds to initiate investments into or withdrawals from my mutual fund account in each of the following months:

- | | | | | | |
|-----------------------------------|--|------------------------------------|------------------------------------|---|-----------------------------------|
| <input type="checkbox"/> Annually | <input type="checkbox"/> Semi-Annually | <input type="checkbox"/> Quarterly | <input type="checkbox"/> Bi-Weekly | <input type="checkbox"/> Specific Months (specify): | |
| <input type="checkbox"/> January | <input type="checkbox"/> February | <input type="checkbox"/> March | <input type="checkbox"/> April | <input type="checkbox"/> May | <input type="checkbox"/> June |
| <input type="checkbox"/> July | <input type="checkbox"/> August | <input type="checkbox"/> September | <input type="checkbox"/> October | <input type="checkbox"/> November | <input type="checkbox"/> December |

Fund _____ Amount \$ _____ Day of Month (1st, 15th, etc.) _____

*Redemption proceeds of fund shares purchased via ACH may not be available for a period of fifteen (15) calendar days. Please provide all of your bank account information **AND** attach a voided check or deposit slip where requested in Part III.

PART III: BANK ACCOUNT INFORMATION

Bank Name _____

ABA number (if known) _____

Bank Address _____

City _____

State _____

Zip Code _____

Name(s) on Bank Account _____

Bank Account Number _____

Name(s) on Bank Account _____

Please attach one voided check or deposit ticket. Checking Savings

John and Jane Doe 123 Any Street Anytown, USA 12345	Date _____	1003
PAY TO THE ORDER OF _____	Tape your voided check or preprinted deposit slip here. Please do <u>not</u> use staples to attach it.	\$ _____ DOLLARS
BANK NAME BANK ADDRESS		
MEMO _____		
0: 123456789: 00 123456789 00 : 1003		

PART IV: SIGNATURE

The completion of this section is *REQUIRED*.

By signing this form, I represent and warrant that: (a) I am of legal age in my state of residence and wish to purchase shares of the Funds as described in the current Prospectus; and (b) I have the full right, power and authority to invest in the Funds; and (c) I have received a current Prospectus of the Funds and agree to be bound by its terms; and (d) I understand that no certificates will be issued and that my confirmation statement will be evidence of my ownership of fund shares.

Under penalties of perjury, I certify that: (1) the number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and (2) I am not subject to backup withholding because: (i) I am exempt from backup withholding, or (ii) 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 (iii) 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).

Certification Instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividend, you are not required to sign the Certification, but you must provide your correct TIN. (See IRS Form W-9, which is available from the Funds, for more information).

You must be a U.S. citizen with a U.S. mailing address. Persons signing as representatives or fiduciaries of corporations, partnerships, trusts or other organizations are required to furnish corporate resolutions or similar documents providing evidence that they are authorized to effect securities transactions on behalf of the Investor (alternatively, the secretary or designated officer of the organization must certify the authority of the persons signing in the space provided below). In addition, signatures of representatives or fiduciaries of corporations and other entities must be accompanied by a New Technology signature guarantee by a commercial bank that is a member of the Federal Deposit Insurance Corporation, a trust company or a member of a national securities exchange.

X

Shareholder, Custodian, Trustee, or Authorized Officer Date

X

Shareholder, Custodian, Trustee, or Authorized Officer Date

X

Shareholder, Custodian, Trustee, or Authorized Officer Date

X

Shareholder, Custodian, Trustee, or Authorized Officer Date

PART V: NEW TECHNOLOGY MEDALLION SIGNATURE GUARANTEE STAMP

The completion of this section is *REQUIRED*.

A New Technology Medallion Signature Guarantee Stamp is designed to protect the account from fraud.

The following institutions are acceptable signature guarantors:

- Participants in good standing of the Securities Transfer Agents Medallion Program (“STAMP”)
- Commercial banks which are members of the Federal Deposit Insurance Corporation (“FDIC”)
- Trust Companies
- Firms which are members of a domestic stock exchange
- Eligible guarantor institutions qualifying under Rule 17Ad-15 of the Securities Exchange Act of 1934, as amended, that are authorized by charter to provide new technology medallion signature guarantee stamps (e.g., credit unions, securities dealers and brokers, clearing agencies and national securities exchanges)
- Foreign branches of any of the above

Note: The Transfer Agent cannot honor guarantees from notaries public, savings and loan associations, or saving banks.



MAILING INSTRUCTIONS

Please send completed form to:

Regular Mail Delivery

Midas Funds
Box 46707
Cincinnati, OH 45246-0707

Overnight Delivery

Midas Funds
225 Pictoria Drive, Suite 450
Cincinnati, OH 45246

PRIVACY POLICY

FACTS	WHAT DOES MIDAS DO WITH YOUR PERSONAL INFORMATION?
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Why?	Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.
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What?	<p>The types of personal information we collect and share depend on the product or service you have with us. This information can include:</p> <ul style="list-style-type: none"> <li style="display: inline-block; width: 45%;">▪ Social Security number <li style="display: inline-block; width: 45%;">▪ Account transactions <li style="display: inline-block; width: 45%;">▪ Account balances <li style="display: inline-block; width: 45%;">▪ Retirement assets <li style="display: inline-block; width: 45%;">▪ Transaction or loss history <li style="display: inline-block; width: 45%;">▪ Checking account information <p>When you are <i>no longer</i> our customer, we continue to share your information as described in this notice.</p>
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How?	All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons Midas chooses to share; and whether you can limit this sharing.
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Reasons we can share your personal information	Does Midas share?	Can you limit this sharing?
For our everyday business purposes – such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
For our marketing purposes – to offer our products and services to you	Yes	No
For joint marketing with other nonaffiliated financial companies	No	We don't share
For our affiliates' everyday business purposes – Information about your transactions and experiences	No	We don't share
For our affiliates' everyday business purposes – Information about your creditworthiness	No	We don't share
For our affiliates to market to you	Yes	Yes
For nonaffiliates to market to you	No	We don't share

To Limit Sharing	<ul style="list-style-type: none"> ▪ Call Midas at 212-785-0900 – our menu will prompt you through your choices; or ▪ Mail the form below <p>Please note:</p> <p>If you are a new customer, we can begin sharing your information 30 days from the date we sent this notice. When you are <i>no longer</i> our customer, we continue to share your information as described in this notice. However, you can contact us at any time to limit our sharing.</p>
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Questions?	Call 1-800-400-MIDAS (6432) or go to www.midasfunds.com
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Mail-in Form		
<p>Leave Blank or [If you have a joint account, your choice will apply to everyone on your account unless you mark below.]</p> <p><input type="checkbox"/> Apply my choice only to me]</p>	<p>Mark if you want to limit:</p> <p><input type="checkbox"/> Do not allow your affiliates to use my personal information to market to me.</p>	
Name		<p>Mail to: Midas Funds 11 Hanover Square, 12th Floor New York, NY 10005</p>
Address		
City, State, Zip		
Account #		

Who we are

Who is providing this notice?

Midas: Midas Fund and Midas Magic, each a series of Midas Series Trust, and Midas Securities Group, Inc.

What we do

How does Midas protect my personal information?

To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.

How does Midas collect my personal information?

We collect your personal information, for example, when you

- Open an account
- Buy securities from us
- Provide account information
- Give us your contact information
- Pay us by check

Why can't I limit all sharing?

Federal law gives you the right to limit only

- Sharing for affiliates' everyday business purposes – information about your creditworthiness
- Affiliates from using your information to market to you
- Sharing for nonaffiliates to market to you

State laws and individual companies may give you additional rights to limit sharing.

What happens when I limit sharing for an account I hold jointly with someone else?

Your choices will apply to everyone on your account – unless you tell us otherwise.

Definitions

Affiliates

Companies related by common ownership or control. They can be financial and nonfinancial companies.

- *Midas shares with our affiliates.*

Nonaffiliates

Companies not related by common ownership or control. They can be financial and nonfinancial companies.

- *Midas does not share with nonaffiliates so they can market their financial products or services to you.*

Joint marketing

A formal agreement between nonaffiliated financial companies that together market financial products or services to you.

- *Midas does not jointly market.*