Qualified

NEIMAN FUNDS

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Do not use this application to establish a regular Neiman Funds account. To print out a regular Shareholder Account Application and /or an IRA Transfer Form, please visit our website at **www.neimanfunds.com** or call toll-free **1-877-385-2720**. For any assistance, please call the above toll-free number.

IRA Account Application

To open your IRA account please mail (or send overnight) the completed application to:
Neiman Funds
c/o Mutual Shareholder Services, LLC
8000 Town Centre Dr., Suite 400
Broadview Hts., OH 44147

1. Social Security Number

Social Security Number

2. Account Registration (Please Print or Type)

Name (First, Middle, Last) Date of Birth

3. Mailing Address

Street

City, State, Zip Code

( ) ( )

Daytime Telephone Evening Telephone

Additional Address (optional) to send copies of confirms/statements

Name

Street

City, State, Zip Code

4. Type of Account

- ☐ Traditional IRA, For the Tax Year ______
- ☐ Educational IRA, Tax Year______
- ☐ Spousal IRA, For the Tax Year ______
- ☐ Roth Conversion IRA
- ☐ Roth Spousal IRA, For the Tax Year______ *
- ☐ Roth IRA, For the Tax Year______*
- ☐ Rollover IRA
- ☐ Simplified Employee Pension (SEP) IRA, For the Tax Year______
- ☐ Catch – Up IRA, For Tax Year______

IF THE ACCOUNT IS A ROLLOVER, COMPLETE THE FOLLOWING:

- ☐ Rollover of an existing Traditional IRA to a Traditional IRA
- ☐ Simplified Employee Pension (SEP) IRA to a Traditional IRA
- ☐ Employer Sponsored SIMPLE IRA to a Traditional IRA
- ☐ Simplified Employee Pension (SEP) IRA to a SEP IRA
- ☐ Previous Qualified Employer Plan or 403(b) to a Traditional IRA
- ☐ Traditional IRA to a Roth IRA*
- ☐ Traditional IRA to Roth Conversion IRA
- ☐ Roth IRA to Roth IRA
- ☐ Roth Conversion IRA to Roth IRA*
- ☐ Other IRA to Roth IRA*
- ☐ Other IRA to Roth Conversion IRA

* If you want to commingle Roth annual contributions and conversion amounts in one account, select a Roth IRA account (and not a Roth Conversion IRA).
If you are age 70 1/2 or older, you must take your required minimum distribution from your present IRA with the current Custodian before rolling over your retirement assets to the Neiman Funds.

IF THE ACCOUNT IS A TRANSFER, CHECK THE FOLLOWING:

☐ Transfer of existing IRA, Roth IRA or SEP-IRA from another Custodian.
You did not have constructive receipt of assets, assets are a direct transfer from previous Custodian (you must also complete the Fund IRA Transfer Form).

5. Your Fund Selection(s)

Minimum Initial Investment Amount:

- $1,000 per IRA account
- $1,000 with an Automatic Investment Plan (AIP)

(For AIP, complete Sections 10 and 11)

☐ Payment by Check — Please make check payable to Neiman Funds.

☐ Purchase by Wire — Call 1-877-385-2720 for instructions.

6. Your Fund Selection(s) (Continued)

Neiman Large Cap Value Fund No-Load	Total $______
Neiman Large Cap Value Fund Class A	Total $______
Neiman Balanced Allocation Fund Class A	Total $______
Neiman Balanced Allocation Fund Class C	Total $______
Neiman Tactical Income Fund Class A	Total $______
Neiman Opportunities Fund Class A	Total $______

7. Reduced Sales Charge (If Applicable)

Letter of Intent
You can reduce the sales charge you pay on Class A shares by investing a certain amount over a 13-month period. Please indicate the total amount you intend to invest over the next 13-months.

☐ $50,000 ☐ $100,000 ☐ $250,000 ☐ $500,000
☐ $1,000,000 or more

Rights of Accumulation
If you already own Class A shares of any Neiman Funds, you may already be eligible for a reduced sales charge on Class A share purchases. Please provide the eligible account number(s) below to qualify (if eligible).

Account No. ______

Account No. ______

☐ Net Asset Value (NAV). I have read the prospectus and qualify for a complete waiver of the sales charge on Class A shares. Registered representatives may complete the Dealer Information section as proof of eligibility.

Reason for Waiver ______

8. Beneficiary Designation

I designate the individual(s) named below the beneficiary(ies) of this IRA. I revoke all prior IRA beneficiary designations, if any, made by me for these assets. I understand that I may change or add beneficiaries at any time by written notice to the Custodian. (If you are not survived by any beneficiary, see "Designation of a Beneficiary or Beneficiaries" section of the IRA Disclosure Statement for the distribution of your account assets.)

Primary Beneficiary(ies)

Name

Social Security Number Date of Birth

% of Account Relationship

Name

Social Security Number Date of Birth

% of Account Relationship

Secondary Beneficiary(ies)

Name

Social Security Number Date of Birth

% of Account Relationship

Name

Social Security Number Date of Birth

% of Account Relationship

Application is continued on the back

9. Telephone Purchase Option

Telephone Purchase of Shares Option: This option allows you to make additional investments ($100 minimum per purchase) into your Neiman Funds 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

10. 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.

11. Automatic Investment Plan

Automatic Investment Program: This option allows you to make automatic monthly or quarterly investments into your Neiman Funds 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 12.

☐ I accept this option, and request ☐ Monthly or ☐ Quarterly

Neiman Large Cap Value Fund No-Load	$ ______ ($100 minimum)
Neiman Large Cap Value Fund Class A	$ ______ ($100 minimum)
Neiman Balanced Allocation Fund Class A	$ ______ ($100 minimum)
Neiman Balanced Allocation Fund Class C	$ ______ ($100 minimum)
Neiman Tactical Income Fund Class A	$ ______ ($100 minimum)
Neiman Opportunities Fund Class A	$ ______ ($100 minimum)

Begin investment on ____________ (month, year) and on the ☐5th or ☐20th* 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.

Important Note: IRA contributions made through the Automatic Investment Program will be credited as contributions for the year in which the shares are purchased. Be sure investmens do not exceed your annual contribution limit.

12. Bank Information

You must complete this section to make additional investments into your Neiman Funds account(s) by telephone (see Section 8) 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 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

13. Withholding

You must select one of the options below. The distributions you receive from your retirement account are subject to federal income tax withholding unless you elect not to have withholding apply. If you elect not to have federal income tax withheld, you are liable for payment of federal income tax on the taxable portion of the distributions. You may also be subject to tax penalties under the estimated tax payment rules if your payments of estimated tax and withholding, if any, are not adequate. You may change your withholding election by notifying the Neiman Funds in writing.

☐ I do not want federal income tax withheld from distributions from this account.

☐ I want federal income tax withheld of 10% from distributions from this account.

☐ I want federal income tax of ______ % (greater than 10%) withheld from distributions from this account.

14. Spousal Consent (If Applicable)

Your state may require the spousal consent below if you live in a community or marital property state and you designate someone other than your spouse as a beneficiary. Consult your tax adviser.

I hereby consent to and join in the designation of the benefici-ary(ies) identified above. I give my spouse any interest I have in the funds deposited in this account.

Name of Spouse

Signature of Spouse — Date

15. Signature

By signing below:

I hereby adopt the Neiman Funds' IRA Custodial Account Agreement and appoint U.S. Bank, N.A., to serve as the Custodian and accept its agent to perform administrative services. I have received the current Prospectus for the Neiman Fund to which I am making my initial contribution and I have read the appropriate IRA Custodial Account Agreement and Disclosure Statement and agree to be bound by its terms.

I understand that an $8 annual maintenance fee may be collected by redeeming sufficient shares from the Neiman Funds account balance in which I have an IRA. The Custodian may change the fee schedule from time to time.

By completing Section 12 and signing below:

I authorize debits from the bank account referenced in conjunction with the account options selected. I agree that the Neiman Funds shall be fully protected in honoring any such transaction. I also agree that the Neiman Funds 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.

I authorize the Neiman Funds 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 Neiman Funds, the transfer agent nor U.S. Bank, N.A., 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 proce-dures are not followed.

Under penalty of perjury, I certify that the Social Security Number shown on this application is correct.

The owner must sign.

X

Signature of Individual Owner — Date

If you have any questions, please call: 1-877-385-2720.

Please return applications to:

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

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Broadview Hts., OH 44147

16. To Be Completed By Investment Representative

Owner's Name (First, Middle, Last) Social Security Number or Taxpayer Identification Number

Representative Number Branch Number Telephone Number

Representative Name (First, Middle Initial, Last)

Firm Name (or Clearing Firm, if applicable)

Street Address City State Zip

Authorized Signature - Representative Authorized Signature - Princiapal (if required by your broker/dealer)

Neiman FUNDS

IRA Transfer: Use this form **and** the Neiman Funds *IRA Account Application* if you are transferring your existing IRA assets from another custodian directly to a **new** Neiman Funds IRA. Use this form **only** if you are transferring IRA assets from another custodian to an **existing** Neiman Funds IRA.

Direct Rollover: Use this form **and** the Neiman Funds *IRA Account Application* if you are directly rolling over your existing employer - sponsored retirement plan assets to a **new** Neiman Funds IRA. Use this form **only** if you are directly rolling over to an **existing** Neiman Funds IRA.

IRA Transfer / Direct Rollover Request Form

To obtain a copy of the *IRA Account Application*, please visit **www.neimanfunds.com** or call toll-free **1-877-385-2720**. For any assistance, please call the number.

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

Neiman Funds
c/o Mutual Shareholder Services, LLC
8000 Town Centre Drive, Suite 400
Broadview Heights, Ohio 44147

1. Social Security Number

Social Security Number

2. Investor Information (Please Print or Type)

Name (First, Middle, Last)

Street

City, State, Zip code

( ) Daytime Telephone

( ) Evening Telephone

3. Transfer/Direct Rollover Assets From This Account

Name of Current Trustee, Custodian or Plan Employer

Address

City, State, Zip

( ) Telephone Number

Account Number

- **Please attach a copy of a recent account statement to help us locate your current account.**

4. Instructions to Current IRA Custodian/Plan Employer

I have established an IRA with Neiman Funds. Please transfer (or direct rollover) assets, in **cash**, from the above account identified in Section 3 according to the instructions **(a)**, **(b)**, and **(c)**.

(a) • IRA Transfer From: (check one if IRA Transfer)

☐ Traditional IRA ☐ Rollover IRA ☐ Roth IRA
☐ Roth Conversion IRA ☐ SEP–IRA ☐ SIMPLE IRA

• Direct Rollover From: (check one if Direct Rollover)

☐ Employer – Sponsored Plan ☐ Other

(b) Payment Information:

☐ Immediately liquidate all assets and send the cash proceeds.
☐ Partial Liquidation. $______________or______ % and retain balance.
☐ Send cash proceeds of all investments at maturity.
☐ Send the assets at maturity for the investments listed below.

Investment	Maturity Date

☐ Other. Please attach additional transfer / direct rollover instructions.
☐ Transfer in kind all Neiman Fund Shares.

Note. There may be a penalty for early liquidation.

(c) Please make check payable to Neiman Funds and send it, along with a copy of this form to the above address.

If you prefer to wire funds, please call 1-877-385-2720 for instructions.

Suggestion: Contact your current custodian (or plan employer) to determine that they have completed all necessary paperwork to ensure the timely transfer of assets.

5. Instructions to Neiman Funds (Please check one)

☐ New IRA Account: Open a new Neiman Funds IRA account in accordance with the instructions in the attached *IRA Account Application,* and invest the transferred proceeds in this account.

☐ Existing IRA Account: Invest the transferred proceeds in my existing Neiman Funds account.

Neiman Funds Account Number

6. Signature of Investor (required)

I acknowledge that I have sole responsibility for my investment choices and that I have received a current prospectus which I have been advised to read carefully before investing.

I understand that the requirements for a valid transfer to a Traditional IRA, SEP IRA, or Roth IRA are complex and that I have the responsibility for complying with all requirements and for the tax results of any such transfer.

I certify to the current IRA custodian, trustee or plan employer that I have established a successor Individual Retirement Custodial Account with the Neiman Funds for which US Bank, N.A. acts as its custodian, and to which assets will be transferred (or directly rolled over).

X

Signature of Investor (required) Date

Signature Guarantee: Please check with your current Trustee/Custodian / Plan Employer to determine if a signature guarantee is required to process this transfer.

A signature guarantee may be obtained from any eligible guarantor institution. These institutions include U.S. banks, savings associations, credit unions and brokerage firms. **A Notary Public cannot provide a Signature Guarantee.**

Name of Guarantor Institution / Guarantee Stamp

Authorized Signature Title

For Office Use Only. To be completed by US Bank, N.A., Custodian for Neiman Funds.

US Bank, N.A. agrees to accept custodianship and the transfer / direct rollover described above for the Neiman Funds IRA established on behalf of the above named individual. US Bank, N.A. accepts its appointment as successor custodian for the above IRA.

Authorized Signature Date