

## VanEck Funds **Electronic Dividend Transfer – Application**

The "Electronic Dividend Transfer" privilege allows you to have your dividends and/or capital gains deposited directly into your bank account, automatically and at no charge. Instead of receiving checks for dividends and/or capital gains, such distributions are processed through the Automated Clearing House (ACH) and deposited to your designated bank account, ordinarily within two

business days after payment date. Retirement Plan accounts, accounts and not use this service.			
Existing VanEck Fund and Account Information			
Full VanEck Fund Name (Please indicate Fund class.)		VanEck Account Number	
<b>Dividend Option</b> (If no designation is made, both dividends and capital gains will automatic	cally be transferre	ed to the bank account indicated below.)	
$\hfill\Box$ Transfer my dividends to my bank account indicated below.	☐ Transfer r	ny capital gains to my bank account ind	licated below.
Bank Account Information			
Name of Bank		Bank ABA (routing) Number (if known)	
Address of Bank	City	State	Zip
Bank Account Number (please attach deposit slip)	_	Full Name(s) of Bank Account	
All registered owners must sign exactly as their names appear on sign. In the case of estates, trusts, guardianships, custodianships administrator, trust instruments or certificates of corporate authoriand related matters. If applicable, please indicate title or capacity "signature guarantee stamp" from your bank or broker if this appli on an existing account.  The Fund reserves the right to modify or end this privilege at any respect to institutional accounts) any modification in, or termination with this privilege will require a new authorization form to be computed shareholder at any time on 15 days written notice to SS&C. I authorize the transfer agent for VanEck Funds, SS&C Global Indistributions from my VanEck Fund account to my designated accomplete and the power to authorize the Electronic Dividend Transfer pasch authority.  X	, partnerships a ity), please atta under your sig cation is used to time. Any modion of, the resolubleted and subrovestor & Distribution of the count in a dome areholder other low their name privilege and the	and corporations (e.g., appointments as ch any additional documents concerning that the state of establish the Electronic Dividend Transfication of the information contained he ations adopted or agreements executed mitted to SS&C. The privilege may be to the stic commercial bank which is a member than an individual, I certify that the per (s) and the organization is duly organization.	s executor or ag authority with a series privilege rein or (with in connection erminated by ransfer per of the son(s) signing and existing and existing
X Signature(s) of registered owner(s) *Indicate title or capacity if applicable Telephone Number Please mail this application to: VanEck Funds P.O. Box 218407	- le	Signature Guarantee(s)	(MM/DD/YYYY)

Kansas City, MO 64121-8407

Account Assistance: 1.800.544.4653