

For more information, call (800) 446-6662

Do not use this form for IRA accounts

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the U.S. government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies persons opening accounts.

What this means for you: To comply, we require your name, address, date of birth and government-issued identification number (generally, a Social Security Number) and other information that may help us identify you. We may ask for copies of identifying documents and we may consult third-party databases to help verify your identity. For certain entities, such as trusts, estates, corporations, partnerships, or other organizations, we require information about individuals with authority or control over the account and certified copies of organizational documents. **Your account may be restricted and/or closed if you fail to provide information marked as "required" or we cannot verify relevant required information.**

We will not be responsible for any losses or damages (including but not limited to lost opportunities) resulting from any failure to provide this information, or from any restriction placed upon, or closing of, your account. By opening an account you signify you agree to these procedures and accept responsibility for any losses or damages resulting from their implementation.

PLEASE PRINT.

I am a U.S. resident with a U.S. Social Security Number (Meridian generally does not accept foreign accounts).

1. Account Registration – REQUIRED

Please print or type. Check ONE box only.

Individual

Joint Account (Joint Owners have rights of survivorship, unless you indicate otherwise)

Uniform Gifts to Minors (UGMA) or Uniform Transfers to Minors (UTMA).
Minor's state of residence _____

Transfer on Death (TOD)

Trust/Estate (Please attach the initial page(s) of the trust agreement identifying the parties to the trust and signature page(s). Foreign trusts are not permitted to have shareholder accounts)

Corporation (A copy of the certified articles of incorporation or certificate of good standing from the secretary of state of the state of incorporation must be attached, otherwise there will be a delay in establishing your account.)

_____ S-Corporation
_____ C-Corporation

Partnership Limited Liability Company or Other Entity

not listed above (A copy of the partnership agreement, LLC Agreement or other organizational document must be attached, otherwise there will be a delay in establishing your account.)

Indicate Federal Income Tax classification

_____ **S-Corporation**

_____ **C-Corporation**

_____ **Partnership**

_____ **Disregarded Entity**

(indicate Federal Income Tax Classification of Owner _____)

Type of Entity under State Law, if different _____

Is this account for a governmental agency or a government sponsored 403(b), 457 or 529 Plan? Yes No

Name of Individual, Adult Custodian (One per account for Gift or Transfer to minor account), **Corporation, or Trust**

FULL NAME OF INDIVIDUAL, CUSTODIAN OR ENTITY (FIRST, MIDDLE INITIAL, LAST)

NAME OF PRIMARY TRUSTEE FOR TRUST OR AUTHORIZED SIGNER FOR CORPORATION

DATE OF TRUST/TITLE OF AUTHORIZED SIGNER FOR CORPORATION

Citizenship*

U.S.

Resident Alien

*For non-U.S. citizens, one of the following must be provided: Taxpayer ID, Alien ID or passport number with country of issuance.

SOCIAL SECURITY NUMBER OF INDIVIDUAL ACCOUNT OWNER OR ADULT CUSTODIAN – **REQUIRED**

*ALIEN ID OR PASSPORT NUMBER

DATE OF BIRTH OF INDIVIDUAL ACCOUNT OWNER OR ADULT CUSTODIAN – **REQUIRED**

TAX IDENTIFICATION NUMBER OF CORPORATION, TRUST OR OTHER ENTITY

Name of Joint Owner, Minor, Trustee(s), Beneficiary (One per account), (for TOD accounts only)

FULL NAME (FIRST, MIDDLE INITIAL, LAST)

FOR ADDITIONAL TRUSTEES, PLEASE ATTACH ADDITIONAL SHEET OF PAPER AND INCLUDE DATE OF BIRTH AND SOCIAL SECURITY NUMBER FOR EACH ADDITIONAL TRUSTEE.

Citizenship*

U.S.

Resident Alien

*For non-U.S. citizens, one of the following must be provided: Taxpayer ID, Alien ID or passport number with country of issuance.

SOCIAL SECURITY NUMBER OF JOINT OWNER, MINOR, TRUSTEE OR BENEFICIARY – **REQUIRED**

*ALIEN ID OR PASSPORT NUMBER

DATE OF BIRTH OF JOINT OWNER, MINOR, TRUSTEE OR BENEFICIARY – **REQUIRED**

TAX IDENTIFICATION NUMBER OF CORPORATION, TRUST OR OTHER ENTITY

Are you an existing Meridian Funds Shareholder? Yes No
If yes, please list **ONE** of your Meridian Funds' Account Numbers _____

1. Account Registration – continued...

Individual, Custodian, Corporation, or Trust Mailing Address

ADDRESS STREET OR P.O. BOX (APO AND FPO ADDRESSES WILL BE ACCEPTED)

ADDRESS IF ABOVE ADDRESS IS A P.O. BOX, YOU MUST ALSO PROVIDE A STREET ADDRESS.

CITY, STATE, ZIP

EMAIL ADDRESS:

() DAYTIME PHONE () EVENING PHONE

Joint Owner, Minor, Trustee(s), Mailing Address
(Only required if different from owner's street address)

ADDRESS STREET OR P.O. BOX (APO AND FPO ADDRESSES WILL BE ACCEPTED)

ADDRESS IF ABOVE ADDRESS IS A P.O. BOX, YOU MUST ALSO PROVIDE A STREET ADDRESS.

CITY, STATE, ZIP

EMAIL ADDRESS:

() DAYTIME PHONE () EVENING PHONE

Financial Intermediary Inquiry

Is this account for a **financial intermediary*** as defined by SEC Rule 22c-2?

Yes No

If yes, you will be required to enter into a Shareholder Information Agreement with Meridian Fund, Inc. with respect to the opening of this account. If no, you represent and warrant that if you become a **financial intermediary*** with respect to this or other Meridian accounts at any time in the future, you will immediately notify Meridian Fund, Inc., and will take steps to comply with the requirement to enter into a Shareholder Information Agreement pursuant to SEC Rule 22c-2.

Financial Intermediary generally refers to any broker, dealer, bank or other person that holds shares in nominee name for other investors (e.g., omnibus accounts). The term may also include a unit investment trust, employee benefit/retirement plan, plan administrator, or any other person that maintains plan participant records. Financial intermediary does **not include individual investors.*

2. Initial Investment
(\$1,000 minimum per Fund/account)

NOTE: THE FUNDS DO NOT ACCEPT CASHIER'S CHECKS, TRAVELER'S CHECKS OR THIRD-PARTY CHECKS OR CHECKS DRAWN ON FOREIGN BANKS.

Meridian Growth Fund – 075. \$ _____
Meridian Contrarian Fund – 076 \$ _____
Meridian Equity Income Fund – 077 \$ _____
Meridian Small Cap Growth Fund – 078 \$ _____
Total Investment. \$ _____

Purchase will be made by:

- Check Make check payable to *Meridian Fund Inc.* and send to the address on the last page of this form.
- Wire Prior to wiring funds, call (800) 446-6662 for information on establishing a new account and wire instructions. Please note: without an account number and specific fund identification, wire transfers can not be completed.

3. Dividends and Capital Gains Payments

All distributions will be reinvested in additional shares unless you indicate otherwise, by checking the boxes, below.

Pay all capital gains *in cash*. Meridian Growth Fund
 Meridian Contrarian Fund
 Meridian Equity Income Fund
 Meridian Small Cap Growth Fund

Pay all dividends *in cash*. Meridian Growth Fund
 Meridian Contrarian Fund
 Meridian Equity Income Fund
 Meridian Small Cap Growth Fund

4. Cost Basis

Select one of the following cost basis methods to be used for calculating the gain or loss on all future sales of shares acquired on or after January 1, 2012. **If no election is made, Meridian's default cost basis method of Average Cost will be applied to your account(s).**

- Average Cost
- First In, First Out (FIFO)
- Last In, First Out (LOFO)
- High Cost In, First Out (HIFO)
- Low Cost In, First Out (LOFO)
- Specific Lot Identification *

** If Specific Lot Identification is elected and the specific lots you have chosen to redeem are not available or your request is otherwise not received in good order, then the shares you wish to redeem will be defaulted to the First In, First Out cost basis method.*

Please call Meridian at 1-800-446-6662 if you have questions about cost basis.

5. Bank Instructions

Please complete the following information if you would like funds transferred electronically using your bank checking account (unless you choose this option by providing the bank information, below, distributions and redemption proceeds will be sent by mail to your address on record).

BANK NAME	CITY, STATE ZIP
ABA ROUTING #	ACCOUNT#
NAME(S) ON ACCOUNT	

Please attach a voided check - REQUIRED

6. Electronic Asset Transfer Options

If you completed Section 5, above, redemptions and cash distributions will be sent by ACH, unless you specify that funds will be sent by Fed Wire, as directed below,

YOUR BANK NAME	ABA ROUTING #
BANK ADDRESS	CITY, STATE ZIP
ACCOUNT#	

7. Automatic Investment Plan

To enable this option, please complete Section 5 of this application. Our minimum automatic investment is \$100 per transaction. Bank transfers will be processed on or about the 21st of each month and usually become active 20 business days after your request is processed.

Invest the following amounts:

Meridian Growth Fund – 075	\$ _____
Meridian Contrarian Fund – 076	\$ _____
Meridian Equity Income Fund – 077	\$ _____
Meridian Small Cap Growth Fund – 078	\$ _____

Investments should be made (choose one):

Beginning (MM/YY) _____

Monthly _____

Quarterly _____

Semi-Annually _____

Annually _____

8. Telephone Transaction Options

NOTE: You must complete Section 5 of this application to fully enable the telephone purchase/redemption options.

Purchases, redemptions and exchanges can be made by telephone. Once initiated, telephone transactions can not be canceled. Unless declined, the following telephone transaction options will be added to your account. To decline these options, check the boxes below:

Telephone Purchase

Purchases can be made by telephone to an existing account and will be added to your account on the first business day following your call. *Purchases CAN NOT be made on the same day your call is placed.* Purchases will be deducted from your checking account by electronic transfer.

Decline Telephone Purchase

Telephone Redemption

You can redeem up to \$100,000 over the telephone. Larger redemptions must be made in writing and require a Medallion Signature Guarantee. Telephone redemptions can only be sent to the existing address of record or bank instructions on your account.

Decline Telephone Redemption

Telephone Exchange

You can exchange up to \$100,000 over the telephone between Fund accounts with identical registrations. Exchanges greater than \$100,000 must be made in writing and require a Medallion Signature Guarantee.

Decline Telephone Exchange

9. Duplicate Statements/Courtesy Copy

Please send a copy of my account statements to:

NAME (FIRST, INITIAL, LAST) _____

COMPANY NAME _____

STREET OR P.O. BOX NUMBER _____

CITY, STATE, ZIP _____

10. Meridian Mail Updates

To receive e-mail notification of Meridian news including quarterly report availability and distribution updates, provide your e-mail address below:

EMAIL ADDRESS: _____

11. REVIEW

Required by Federal tax law to avoid backup withholding:

I certify under penalties of perjury that:

1. The number shown on this form is my correct taxpayer identification number and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding or (b) I have not been notified by the IRS that I am subject to backup withholding as a result of failure to report all interest or dividends or (c) 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)
4. I am exempt from Foreign Account Tax Compliance Act ("FATCA") reporting. If you are exempt from FATCA reporting, please select the appropriate FATCA Exemption Code(s) (if any) from the list below and enter them here _____.

The following codes identify payees that are exempt from FATCA backup withholding:

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
2. The United States or any of its agencies or instrumentalities
3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities
4. A foreign government or any of its political subdivisions, agencies, or instrumentalities
5. A corporation
6. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States

7. A futures commission merchant registered with theCommodity Futures Trading Commission
8. A real estate investment trust
9. An entity registered at all times during the tax year under the Investment Company Act of 1940
10. A common trust fund operated by a bank under section 584(a)
11. A financial institution
12. A middleman known in the investment community as a nominee or custodian
13. A trust exempt from tax under section 664 or described in section 4947

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.

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

STATE UNCLAIMED PROPERTY LAW DISCLOSURE

- The assets in your custodial account are subject to state unclaimed property laws which provide that if no activity occurs in your account within the time period specified by the particular state law, your assets must be transferred to the appropriate state. We are required by law to advise you that your assets may be transferred to an appropriate state in compliance with these state laws.

Signature – REQUIRED by each owner

By signing this application, I also certify that:

- I have received and read the prospectus for the Fund and I agree to its terms. I have the authority and legal capacity to purchase mutual fund shares, am of legal age and believe each investment to be suitable for me.
- I understand that this Fund is not a bank, and Fund shares are not backed or guaranteed by any bank nor insured by the FDIC.
- I ratify any instructions, including telephone instructions, given on this account. I understand that the Fund(s) or Meridian will employ reasonable procedures to verify my identity and to confirm the genuineness of my instructions. I agree that neither the Fund(s) nor Meridian will be liable for any loss, cost, or expense for following the Funds' anti-money laundering procedures and/or following reasonable procedures designed to prevent unauthorized transactions.
- Corporations or other entities must submit an original or certified resolution authorizing that the individual signing this form has the legal capacity to sign and act on behalf of the corporation/entity.
- Trustee(s) Certification: I am/We are the currently acting Trustee(s) and am/are authorized by the trust agreement to purchase shares of the Meridian Funds, Note: Trustee(s) must immediately notify Meridian Fund, Inc. if the trust becomes a foreign trust.

For entities, the following persons are, and will continue to be, authorized signers for this account unless the Fund receives instructions to the contrary. At least _____(insert #) authorized signature(s) are required to execute transactions. If left blank, one authorized signer may execute transactions.

THE INTERNAL REVENUE SERVICE DOES NOT REQUIRE YOUR CONSENT TO ANY PROVISION OF THIS DOCUMENT OTHER THAN THE CERTIFICATIONS IN THIS SECTION OF THIS APPLICATION.

X

SIGNATURE OF OWNER, CUSTODIAN, TRUSTEE/AUTHORIZED SIGNER

PRINT NAME DATE

X

SIGNATURE OF JOINT OWNER, CO-TRUSTEE/AUTHORIZED SIGNER

PRINT NAME DATE

X

ADDITIONAL AUTHORIZED SIGNER

PRINT NAME DATE

SEND COMPLETED APPLICATION AND CHECK TO:

By regular mail:
Meridian Fund, Inc.
P.O. Box 9792
Providence, RI 02940-9694

By express mail or overnight courier:
Meridian Fund
4400 Computer Drive
Westboro, MA 01581
(800) 446-6662

Items delivered to the P.O. Box are not deemed "received" until they arrive at Meridian Fund, Inc. for processing. Time critical items requiring proof of receipt should be sent to the Westboro, MA address.

**Any questions? Call toll-free 1-800-446-6662.
Visit our website: www.meridianfund.com**