

Please mail your completed application to:
Parnassus Investments
1 Market Street, Suite 1600
San Francisco, CA 94105

Investment Account Application

Thank you for choosing Parnassus Funds for your investment account. Please complete sections of this application that apply to the type of account you are opening unless noted as optional. If you have any questions about this form, please call us at (800) 999-3505.

We are required by law to obtain certain personal information from you, which will be used by us to verify your identity. If you do not provide the information, we will not be able to open your account. If we are unable to verify your identity, we reserve the right to close your account or take such other steps as we deem reasonable.

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Type of Account Select one

- Individual or Joint Tenants (complete Section A)
- Uniform Gift/Transfer to a Minor (complete Section B)
- Trust (complete Section C)
- Corporation, Partnership or Other Entity (complete Section D)

A. Individual Account/Joint Account Please print

First Name _____ Middle Name _____ Last Name _____
(Primary Account Holder)

Social Security Number _____ Date of Birth _____ Citizenship _____

First Name _____ Middle Name _____ Last Name _____
(Secondary Account Holder)

Social Security Number _____ Date of Birth _____ Citizenship _____

B. Uniform Gift/Transfer to Minor Account (UGMA/UTMA)

Custodian's Name _____
(One Custodian Only) First Middle Last

Social Security Number _____ Date of Birth _____ Citizenship _____

Minor's Name _____
(One Minor Only) First Middle Last

Social Security Number _____ Date of Birth _____ Citizenship _____

C. Trust Account*

Name of Trust _____ Date of Trust _____ Taxpayer ID No. _____

Name of Trustee 1 _____ Social Security No. _____ Date of Birth _____

Name of Trustee 2 _____ Social Security No. _____ Date of Birth _____
(optional)

***Please include a copy of the title page and trustee's signature page.**

D. Corporation, Partnership, or Other Entity Account*

Name _____ Taxpayer ID No. _____
(of Corporation, Partnership or Other Entity)

Name _____ Social Security Number _____ Date of Birth _____
(Authorized Signer 1)

Name _____ Social Security Number _____ Date of Birth _____
(Authorized Signer 2 - Optional)

***Include certified organizational documents such as a Corporate Resolution or Partnership Agreement.**

2 Address of Record

Residential Address _____
(May not be a P.O. Box) Street City State Zip

Mailing Address _____
(If different than address above) Street City State Zip

Daytime Phone _____ Evening Phone _____ E-mail _____

3 Investment Selection

Please indicate the dollar amount and in which fund(s) you would like to invest. The minimum initial investment is **\$2,000** per fund with **\$50 subsequent investments**; however, the minimum initial investment is lowered to \$500 if you sign up for our automatic investment plan or you are establishing a custodial account for a minor (UGMA). **Please make check payable to Parnassus Funds.**

Fund	Amount to Invest	Dividends	Capital Gains
<input type="checkbox"/> Parnassus Fund	\$ _____	<input type="checkbox"/> cash * or <input type="checkbox"/> reinvest	<input type="checkbox"/> cash * or <input type="checkbox"/> reinvest
<input type="checkbox"/> Parnassus Equity Income Fund	\$ _____	<input type="checkbox"/> cash * or <input type="checkbox"/> reinvest	<input type="checkbox"/> cash * or <input type="checkbox"/> reinvest
<input type="checkbox"/> Parnassus Mid-Cap Fund	\$ _____	<input type="checkbox"/> cash * or <input type="checkbox"/> reinvest	<input type="checkbox"/> cash * or <input type="checkbox"/> reinvest
<input type="checkbox"/> Parnassus Small-Cap Fund	\$ _____	<input type="checkbox"/> cash * or <input type="checkbox"/> reinvest	<input type="checkbox"/> cash * or <input type="checkbox"/> reinvest
<input type="checkbox"/> Parnassus Workplace Fund	\$ _____	<input type="checkbox"/> cash * or <input type="checkbox"/> reinvest	<input type="checkbox"/> cash * or <input type="checkbox"/> reinvest
<input type="checkbox"/> Parnassus Fixed-Income Fund	\$ _____	<input type="checkbox"/> cash * or <input type="checkbox"/> reinvest	<input type="checkbox"/> cash * or <input type="checkbox"/> reinvest

* **If you would like to have your cash distributions direct deposited electronically to your bank account, check here. Also, please provide us with your bank information in the next section.**

4 Bank Account of Record Optional

By establishing a bank account of record, you will have the convenience and ability to have Parnassus direct deposit electronically to your bank account any redemption, dividend or capital gain distributions via ACH (Automated Clearing House). You also will have the option to have Parnassus deduct money from your bank account to purchase shares in your Parnassus account with your instructions. Please provide us with your bank information and **attach a pre-printed voided check or deposit slip with this account application.**

Please check one: Checking or Savings

Bank Name _____ Telephone _____

Bank Routing Number _____ Account Number _____

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Parnassus Automatic Investment Plan Optional

You can have money transferred automatically from your checking or savings account to your investment account at Parnassus. This is a convenient and easier way to make scheduled investments. There is a **\$50 minimum per fund**. Also, please be sure to complete the Bank Account of Record section.

Fund	Amount to Invest	Month to Begin	Date of Investment	Frequency of Investment
<input type="checkbox"/> Parnassus Fund	\$ _____	_____	<input type="checkbox"/> the 3rd or <input type="checkbox"/> the 18th	<input type="checkbox"/> Monthly or <input type="checkbox"/> Quarterly
<input type="checkbox"/> Parnassus Equity Income Fund	\$ _____	_____	<input type="checkbox"/> the 3rd or <input type="checkbox"/> the 18th	<input type="checkbox"/> Monthly or <input type="checkbox"/> Quarterly
<input type="checkbox"/> Parnassus Mid-Cap Fund	\$ _____	_____	<input type="checkbox"/> the 3rd or <input type="checkbox"/> the 18th	<input type="checkbox"/> Monthly or <input type="checkbox"/> Quarterly
<input type="checkbox"/> Parnassus Small-Cap Fund	\$ _____	_____	<input type="checkbox"/> the 3rd or <input type="checkbox"/> the 18th	<input type="checkbox"/> Monthly or <input type="checkbox"/> Quarterly
<input type="checkbox"/> Parnassus Workplace Fund	\$ _____	_____	<input type="checkbox"/> the 3rd or <input type="checkbox"/> the 18th	<input type="checkbox"/> Monthly or <input type="checkbox"/> Quarterly
<input type="checkbox"/> Parnassus Fixed-Income Fund	\$ _____	_____	<input type="checkbox"/> the 3rd or <input type="checkbox"/> the 18th	<input type="checkbox"/> Monthly or <input type="checkbox"/> Quarterly

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Broker/Dealer or Financial Advisor Information Optional

This section should be completed if shares are being purchased through a dealer or if a financial advisor is to receive your account information.

Firm Name _____

Registered Rep. Name _____ Rep. No. _____ Branch No. _____

Address _____
Street City State Zip

Telephone No. _____ Fax No. _____ E-mail _____

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Telephone and Internet Privileges Optional

Telephone/Internet Exchange—Allows you to exchange shares from one fund to another for identically registered accounts held within Parnassus.

Telephone/Internet Purchase and Redemption—Allows you to make a purchase to your account at Parnassus via an electronic draft from your bank account of record. It also allows you to make a redemption and have the proceeds sent either to your address of record or your bank account of record.

The Fund's Transfer Agent employs reasonable procedures to confirm that such instructions are genuine. For telephone instructions, the procedures will be verification of personal identification information such as account number and social security number in addition to tape recording and storing your instructions. Procedures to accept Internet instructions will require verification of your account number, social security number and password via an encrypted Internet connection. If these procedures are not employed, the Transfer Agent may be liable for unauthorized transactions. For joint accounts, one joint owner can authorize a transaction. Your account will automatically have these privileges available. You may decline these privileges by checking off the opt out box below.

I do not want telephone and Internet privileges.

By completing and signing this application, I certify:

- I have read the Prospectus and agree to be bound by its terms.
- I am of legal age in my state of residence.
- I have provided my correct social security number.
- I am a U.S. Citizen or U.S. Resident Alien.
- I consent to the delivery of one prospectus to investors who share the same address.
- I have not been notified by the IRS that I am subject to backup withholding or the IRS has notified me that I am no longer subject to backup withholding. (**Note:** Strike out this section before signing if you are subject to backup withholding.)
- The Funds and its Transfer Agent shall not be liable for acting upon instructions or inquiries believed to be genuine.

All registered account owners or legal representatives, such as a custodian, must sign below.

Signature

Date

Signature

Date

How did you hear about the Parnassus Funds? _____