

IRA and ESA Beneficiary Designation Form

Use this form to add or update beneficiary records for an existing Individual Retirement Account (Traditional, Roth or Rollover) or Education Savings Account. So that we can process your instructions without delay or inconvenience to you, please print neatly in blue or black ink. If you have a question about this form, call us at **1-800-258-3030**. Client service associates are available on weekdays from 8:30 a.m. to 5:00 p.m., ET.

Return your completed form to:

REGULAR MAIL
Homestead Funds
c/o BFDS
P.O. Box 219486
Kansas City, MO 64121-9486

OVERNIGHT MAIL
Homestead Funds
c/o BFDS
330 W. 9th Street, 1st Floor
Kansas City, MO 64105-1514
Attn: Shareholder Services

FAX TO:
703-907-5606

For complete information about Homestead Funds and services, see the prospectus.

 **Be sure to sign your completed form (section 3).**

1. Ownership

Tell us how the account is registered and provide your account number. See a recent statement or trade confirmation for your account number, or call us. If multiple accounts are listed, the same beneficiary designations will apply to all.

Owner's First Name Middle Initial Last Name

Owner's Social Security Number Date of Birth

Account Number _____

Account Number _____

Account Number _____

Account Number _____

2. Beneficiary Designation

Complete this section to designate who should receive account assets in the event of your death. Assets are divided among primary beneficiaries first. If there are no surviving primary beneficiaries, assets are divided among secondary beneficiaries. Attach a separate sheet if you have more than four beneficiaries, and provide all of the information requested here for each beneficiary.

Your most current beneficiary designations replace any previous instructions we have on file.

Primary Beneficiaries

| Name | Relationship | Birth Date | Social Security Number | If minor, name of parent/guardian | Percent |
|-------|--------------|------------|------------------------|-----------------------------------|-------------|
| _____ | _____ | _____ | _____ | _____ | _____% |
| _____ | _____ | _____ | _____ | _____ | _____% |
| _____ | _____ | _____ | _____ | _____ | _____% |
| _____ | _____ | _____ | _____ | _____ | _____% |
| | | | | | 100% |

Secondary Beneficiaries

| Name | Relationship | Birth Date | Social Security Number | If minor, name of parent/guardian | Percent |
|-------|--------------|------------|------------------------|-----------------------------------|-------------|
| _____ | _____ | _____ | _____ | _____ | _____% |
| _____ | _____ | _____ | _____ | _____ | _____% |
| _____ | _____ | _____ | _____ | _____ | _____% |
| _____ | _____ | _____ | _____ | _____ | _____% |
| | | | | | 100% |

For IRA account owners: If you are married and reside in a community property or marital property state (Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington or Wisconsin), you may need to obtain your spouse's consent if you have not designated your spouse as primary beneficiary for at least half of your account. See your lawyer or other tax professional for additional information and advice.



Be sure to sign this form. We cannot act on your instructions without your signature.

3. Signature

The account owner as named in the registration must sign below. If the account owner is a minor under the laws of the minor's state of residence, a parent or guardian must also sign.

▶ **X** _____
Signature of Account Owner Date

▶ **X** _____
Signature of Parent or Guardian Date