

Automatic Transactions Sign-Up Form



Use this form to begin a program of systematic investments, exchanges or redemptions made to, within, or from an existing Homestead Funds account.

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

703-907-5606

Note: Forms with Section 9 completed cannot be faxed.

If you have a question about the form, call us at **800.258.3030**.

For complete information about Homestead Funds and services, see the prospectus, which is available at **homesteadfunds.com** or by calling the above toll-free number.

Be sure to sign your completed form (Section 8).

1. Ownership

Tell us how your account is currently registered and provide your account number.

Account Owner/Minor's First Name	Middle Initial	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Social Security Number	Account Number	
<input type="text"/>	<input type="text"/>	
Daytime Telephone Number (in case we have questions)		
<input type="text"/> - <input type="text"/> - <input type="text"/>		

If we do not already have your phone number on file we will add it to your contact information.

◆ **If a Joint or Minor's Account**

Joint/Custodian's First Name	Middle Initial	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Daytime Telephone Number (in case we have questions)		
<input type="text"/> - <input type="text"/> - <input type="text"/>		
Joint/Custodian's First Name	Middle Initial	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Daytime Telephone Number (in case we have questions)		
<input type="text"/> - <input type="text"/> - <input type="text"/>		

◆ **If an Entity, Trust, or Estate Account**

Entity/Trust/Estate Name	Account Number
<input type="text"/>	<input type="text"/>
Printed Name of Agent Signing Section 8	Tax Identification Number
<input type="text"/>	<input type="text"/>
Daytime Telephone Number (in case we have questions)	
<input type="text"/> - <input type="text"/> - <input type="text"/>	

Depending on your account type, this transaction may require a Signature Validation Program Stamp.

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2. Begin Automatic Investing Program

Complete this section to begin a program of regular purchases with money moved directly from your bank account (Section A) or paycheck (Section B) to your Homestead Funds account.

A. ACH Transfer From Bank Account

Amount to transfer \$

Transfer frequency (Transfers will be made on or about the 20th of the month):

Monthly Quarterly Semi-annually Annually

First Purchase (mm/yyyy)

/

Indicate how the amount above should be allocated.

Daily Income Fund (168)	\$	<input type="text"/>
Short-Term Government Securities Fund (170)	\$	<input type="text"/>
Short-Term Bond Fund (172)	\$	<input type="text"/>
Stock Index Fund (174)	\$	<input type="text"/>
Value Fund (176)	\$	<input type="text"/>
Small-Company Stock Fund (178)	\$	<input type="text"/>
International Value Fund (180)	\$	<input type="text"/>
Growth Fund (182)	\$	<input type="text"/>
Total (Must match transfer amount above)	\$	<input type="text"/>

B. Payroll Deduction

Select the funds you will be investing in. You do not need to indicate the investment amount at this time.

- | | |
|--|---|
| <input type="checkbox"/> Daily Income Fund (168) | <input type="checkbox"/> Value Fund (176) |
| <input type="checkbox"/> Short-Term Government Securities Fund (170) | <input type="checkbox"/> Small-Company Stock Fund (178) |
| <input type="checkbox"/> Short-Term Bond Fund (172) | <input type="checkbox"/> International Value Fund (180) |
| <input type="checkbox"/> Stock Index Fund (174) | <input type="checkbox"/> Growth Fund (182) |

If this is an IRA or ESA account all automatic purchases will be processed as current-year contributions. **It is your responsibility to ensure your total contributions do not exceed annual contribution limits.**

Complete this section to sign up for the Automatic Investing Program and have money moved regularly from your bank account to your fund account. If we do not already have bank information on file you must also complete **Sections 7 and 9.**

Complete this section to set up an account for receipt of payroll deductions to be sent by your employer. We will mail your new account numbers and other information you will need to provide to your payroll office to initiate deposits.

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3. Begin Automatic Exchange Program

Complete this section to begin a program of automatic exchanges made from one fund within your account to another. An exchange is a distribution followed by a subsequent purchase. For investors in regular (nonretirement) accounts, it is a taxable event.

A. Exchange Amount/Fund Details

Complete this section in its entirety to tell us which fund you want to exchange from and the dollar amount you want to exchange into each fund.

Exchange from (Fund Name):

Exchange to:

Daily Income Fund (168)	\$	<input type="text"/>
Short-Term Government Securities Fund (170)	\$	<input type="text"/>
Short-Term Bond Fund (172)	\$	<input type="text"/>
Stock Index Fund (174)	\$	<input type="text"/>
Value Fund (176)	\$	<input type="text"/>
Small-Company Stock Fund (178)	\$	<input type="text"/>
International Value Fund (180)	\$	<input type="text"/>
Growth Fund (182)	\$	<input type="text"/>
Total		\$ <input type="text"/>

If exchanging to a new fund, your existing account registration (account number, ownership information and account type) will be preserved.

B. Exchange Frequency

Complete this section to tell us how often you would like your exchange to occur and when you want it to start.

Amount to Exchange \$

Exchange frequency:

Monthly Quarterly Semi-annually Annually

First Exchange (mm/yyyy)

/20/ (Mandatory. You must provide a First Exchange date)

Last Exchange (mm/yyyy)

/20/ (Optional. If no date is provided exchanges will continue until source Fund is depleted or until we receive different instructions from you.)

Exchanges will be made on or about the 20th of the month. You must indicate the start month. If this form is not received in time to process for the start month indicated, it will begin the next month.

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4. Begin Automatic Distribution Program

Complete **Sections A, B, and C** to begin a program of regular distributions from your account.

If this is an IRA account, you may use this form to set up automatic distributions only if you are age 59½ or older. Also, complete **Section 5** for tax withholding.

A. Distribution Amount

Complete this section to tell us the amount you want to distribute from each fund.

Distribute from:

Daily Income Fund (168)	\$	<input type="text"/>
Short-Term Government Securities Fund (170)	\$	<input type="text"/>
Short-Term Bond Fund (172)	\$	<input type="text"/>
Stock Index Fund (174)	\$	<input type="text"/>
Value Fund (176)	\$	<input type="text"/>
Small-Company Stock Fund (178)	\$	<input type="text"/>
International Value Fund (180)	\$	<input type="text"/>
Growth Fund (182)	\$	<input type="text"/>
Total		\$ <input type="text"/>

B. Distribution Frequency

Complete this section to tell us how often you would like your distribution to occur and when you want it to start.

Exchanges will be made on our about the 20th of the month. You must indicate the start month. If this form is not received in time to process for the start month indicated, it will begin the next month.

Distribution frequency

Monthly Quarterly Semi-annually Annually

First Distribution (mm/yyyy)

/ (**Mandatory.** You must provide a First Distribution date)

Last Distribution (mm/yyyy)

/ (**Optional.** If no date is provided distributions will continue until source Fund is depleted or until we receive different instructions from you.)

C. Payment Method

Complete this section to tell us how to send your distribution proceeds.

Must check one:

ACH transfer to bank of record. If bank information is not already on file, you must also complete **Sections 7 and 9.**

Check mailed to address of record.

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5. Tax Withholding – IRA Accounts Only (Excluding Roth IRAs)

Federal Income Tax Withholding

Federal income tax will automatically be withheld from IRA distributions at the rate of 10% unless you check one of the boxes below. We encourage you to consult your tax advisor regarding your IRA distributions. Even if you elect not to have federal income tax withheld, you are liable for payment of federal income tax on the taxable portion of your distribution.

Check one:

- I do not wish to have federal income tax withheld.
- Withhold federal income tax at the rate of _____% (minimum 10%).

State Income Tax Withholding

Mandatory:

We will withhold state tax in accordance with the respective state's rules if, at the time of the distribution, your address of record is within a mandatory withholding state and you have federal income tax withheld, or if the state's requirement is independent of federal withholding. Contact your tax advisor for the withholding amount, or see your state's website for more information.

Voluntary:

If state withholding is voluntary in your state and you would like to withhold state taxes, please fill out the section below (unless not allowed in your state).

Voluntary state tax withholding will only be withheld if allowed in your state.

If applicable, check one:

- Withhold my state minimum.
- Withhold my state minimum plus an additional \$ _____ (dollars).
- Do not withhold my state minimum.

6. Cost Basis Election – Taxable Accounts Only

If you are setting up systematic redemptions from a non-retirement account all redemptions will be reported using the cost basis election currently on your account. If you want to change your current cost basis election please call a Homestead Funds client service representative at 800.258.3030 for instructions. Homestead Funds will report cost basis information to both shareholders and the Internal Revenue Services (IRS) on mutual fund shares acquired and subsequently redeemed after January 1, 2012.

Need Help?

Homestead Funds client service associates are available on weekdays from 8:30 a.m. to 5:00 p.m. E.T.

Call **1.800.258.3030**

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7. Bank Information

Be sure to complete this section if we do not currently have bank information on file and you:

- Signed up for the Automatic Investing Program and chose to have money moved by ACH transfer from your bank account (**Section 2**)
- Signed up for the Automatic Distribution Program and chose to have distribution proceeds deposited directly to your bank account (**Section 4**)

Account type. Check one: Checking Savings

By completing this section, you authorize Homestead Funds to deduct money from your bank account via ACH to purchase shares into your Homestead Funds account and to send distribution proceeds via wire or ACH to your bank account of record. Your signature must be authenticated in Section 9.



Attach voided check here.
Checks must be preprinted with your name and address. At least one common name must match exactly between your Homestead Funds and Bank accounts. We do not accept starter checks.

8. Signature

If this is a joint account all account owners must sign below. If this is a minor account the custodian must sign below. If this is an Entity, Trust, or Estate account the signer must provide their title below. See **Section 9**, Signature Validation Program Stamp, before signing this form.

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

Signature <input type="text"/>	Title (if an Entity/Trust/Estate Account) <input type="text"/>	Date (mm/dd/yyyy) <input type="text"/> / <input type="text"/> / <input type="text"/>
Signature <input type="text"/>	Title (if an Entity/Trust/Estate Account) <input type="text"/>	Date (mm/dd/yyyy) <input type="text"/> / <input type="text"/> / <input type="text"/>
Signature <input type="text"/>	Title (if an Entity/Trust/Estate Account) <input type="text"/>	Date (mm/dd/yyyy) <input type="text"/> / <input type="text"/> / <input type="text"/>

9. Signature Validation Program Stamp

Your signature on this form must be validated if you completed **Section 7** to add bank information that we did not previously have on file. We will not accept a guarantee from a notary. If your guarantor does not use the Signature Validation Program Stamp, please request that they use their Medallion Signature Guarantee Stamp instead. Both types of stamps can be obtained from any eligible guarantor, including banks, broker/dealers, and credit unions.

Financial Institution – Affix stamp here.