

Deposit Form



Homestead
Funds

Make all checks payable to Homestead Funds and mail:

Regular Mail

Homestead Funds
c/o of Ultimus Fund Solutions, LLC
P.O. Box 46707
Cincinnati, OH 45246

Overnight Mail

Homestead Funds
c/o of Ultimus Fund Solutions, LLC
225 Pictoria Drive
Suite 450
Cincinnati, OH 45246

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 homesteadadvisers.com or by calling the above toll-free number.

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

1. Ownership

Owner/Minor's First Name Middle Initial Last Name

Social Security Number Daytime Telephone Number (in case we have questions) - -

◆ **If a Joint or Minor's Account**

Joint/Custodian's First Name Middle Initial Last Name

Social Security Number Daytime Telephone Number (in case we have questions) - -

◆ **If an Entity**

Name of Entity Entity Tax Identification Number

Daytime Telephone Number (in case we have questions) - -

2. Contributions

Please include your account number and, if contributing to an IRA or Coverdell ESA, the tax year of the contribution on the memo section of your check. **If no tax year is indicated, your contribution will be reported as a current year contribution.**

Account Number Amount \$
Tax Year if Contributing to an IRA or Coverdell ESA (yyyy)

We accept personal checks with preprinted name and address made payable directly to Homestead Funds. We do not accept third party checks, credit card convenience checks, bank account starter checks, cash or cash equivalents (including money orders, traveler's checks, or bearer bonds).

Business accounts must submit business checks.

Need Help?
Homestead Funds Client Service Representatives are available on business days from 8:30 a.m. to 5:00 p.m. E.T.
Call **1.800.258.3030**

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3. Select Your Funds

Indicate how the amount in **Section 2** should be allocated.

Fund Name	Investment Allocation		
Daily Income Fund (168)	\$ <input type="text"/>	or	<input type="text"/> %
Short-Term Government Securities Fund (170)	\$ <input type="text"/>	or	<input type="text"/> %
Intermediate Bond Fund (171)	\$ <input type="text"/>	or	<input type="text"/> %
Short-Term Bond Fund (172)	\$ <input type="text"/>	or	<input type="text"/> %
Stock Index Fund (174)	\$ <input type="text"/>	or	<input type="text"/> %
Value Fund (176)	\$ <input type="text"/>	or	<input type="text"/> %
Small-Company Stock Fund (178)	\$ <input type="text"/>	or	<input type="text"/> %
International Equity Fund (180)	\$ <input type="text"/>	or	<input type="text"/> %
Growth Fund (182)	\$ <input type="text"/>	or	<input type="text"/> %
Asset Allocation Model (555)	\$ <input type="text"/>	or	<input type="text"/> %
Total	\$ <input type="text"/>	or	100 %

Only choose 555 Asset Allocation Model if you have established an Asset Allocation Model in your account online or with a phone representative.

4. Signature

By my signature below, I certify that the information and instructions provided, and the elections made by and through this Deposit Form, are true and correct. Homestead Funds may justifiably rely upon the instructions and elections made herein and is authorized to deposit the funds in the manner provided by this Deposit Form.

Owner's Signature Date (mm/dd/yyyy) / /

OR

Signature of Depositor Date (mm/dd/yyyy) / /

I certify that I am legally able to make deposits for the owner's benefit.

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