

Entity Account Application



Homestead
Funds

Use this form to open an entity account with Homestead Funds.

Return your completed application to Homestead Funds by mail to:

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

Before completing this application, see the prospectus, which is available at homesteadfunds.com. If you have any questions, call us at 800.258.3030.

Important Notice — The USA Patriot Act

To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account.

When you open an account, we will ask for your name, address, date of birth and other information that will allow us to identify you. This information will be verified to ensure the identity of all individuals opening a mutual fund account.

1. Account Type

Homestead Funds does not accept accounts registered to foreign entities, including foreign correspondent accounts.

Name of Entity

Tax Identification Number

Daytime Telephone Number (in case we have questions)

 - -

Type of Entity (select one):

Corporation

Attach a copy of the certified Articles of Incorporation or Corporate Resolution or a copy of the corporation's business license

If a Corporation check one: S Corporation C Corporation

Limited Liability Company

Attach a copy of the Articles of Incorporation or Corporate Resolution.

Partnership

Attach a copy of the partnership agreement.

Tax-Exempt Organization

Attach a copy of the Articles of Incorporation or Corporate Resolution.

Other (includes Hospitals, Cemeteries/Funeral Homes, Unions, Charitable Organizations, Religious Institutions, Colleges/Universities, Clubs/Fraternal Organizations, Investment Clubs, School Districts, Other Exempt Organizations, Foundations)

Organization Description

Attach a copy of the Articles of Incorporation or other official document listing your entity's name, address and Tax Identification Number.

Indicate if this entity is also a government agency or municipality

Please attach requested documentation based on the account type being established. Missing documentation may delay the establishment of the account.

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2. Beneficial Ownership

In order to help the government fight financial crime, financial institutions are required to obtain, verify, and record information about the beneficial owners of legal entity customers. Beneficial owners are defined as:

- a. Owner – Each individual, if any, who owns, directly or indirectly, 25 percent or more of the equity interests of the legal entity customer.
- b. Control – An individual with significant responsibility for managing the legal entity customer (e.g. a Chief Executive Officer, Chief Financial Officer, Chief Operation Officer, Managing Member, General Partner, President, Vice President, or Treasurer).

You must list all Owners (if any) that meet the 25 percent criteria. You can only list ONE Control person. If one Individual satisfies Control and Ownership criteria, select Both in the boxes below.

Name and Title	Date of Birth (mm/dd/yyyy)				
<input type="text"/>	<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>
Address (Residential Street Address)					
<input type="text"/>					
Social Security Number	Owner	Control	Both		
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/> U.S. Citizen	<input type="checkbox"/> Resident Alien	<input type="checkbox"/> Non-Resident Alien			

Name and Title	Date of Birth (mm/dd/yyyy)				
<input type="text"/>	<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>
Address (Residential Street Address)					
<input type="text"/>					
Social Security Number	Owner	Control	Both		
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/> U.S. Citizen	<input type="checkbox"/> Resident Alien	<input type="checkbox"/> Non-Resident Alien			

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3. Authorized Agents

Tell us who is authorized to make investment decisions and transactions for this account.

Name and Title	Date of Birth (mm/dd/yyyy)
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Residential Street Address	
<input type="text"/>	
Social Security Number	Agent's Signature
<input type="text"/>	<input type="text"/>

Don't forget each agent must sign this section. In order to establish the account, at least one agent must be listed in this section and must sign the application again in **Section 12**.

Name and Title	Date of Birth (mm/dd/yyyy)
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Residential Street Address	
<input type="text"/>	
Social Security Number	Agent's Signature
<input type="text"/>	<input type="text"/>

If there are multiple agents, attach a list of names and provide all of the information requested here for each person.

Name and Title	Date of Birth (mm/dd/yyyy)
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Residential Street Address	
<input type="text"/>	
Social Security Number	Agent's Signature
<input type="text"/>	<input type="text"/>

4. Address

Provide the entity's residential street address.

Residential Street Address		
<input type="text"/>		
City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>

A P.O. Box will not be accepted as a street address. A rural route, APO or FPO address will be accepted.

Provide a mailing address if you want account correspondence sent to an address other than the entity's street address.

Mailing Address (Your mailing address may be a P.O. Box)		
<input type="text"/>		
City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>

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5. Investment Amount

Write in the amount of your initial investment.

Total Dollars (\$500 minimum)

\$

Indicate method of investment. Check one:

By check

We accept 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).

By ACH transfer

Upon receipt of this application, we will initiate an electronic funds transfer from the account you indicate in Section 11.

By wire transfer

Call us at 800.258.3030 for transfer instructions.

If you are opening your new account with a check, wire or ACH transfer, complete this section. If you are funding your account only by establishing the Automatic Investment Plan, you may skip to Section 7.

6. Fund Selections

Indicate how the amount in Section 5 should be allocated.

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"/> %
Total (Must match amount from Section 5)	\$ <input type="text"/>	or	100 %

If you are opening your new account with a check, wire or ACH transfer, complete this section. If you are funding your new account only by establishing the Automatic Investment Plan, you may skip to Section 7.

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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7. Automatic Investment Plan

In addition to or instead of providing an initial investment in **Section 5**, you may elect to fund your account by making regular investments transferred directly from your bank account. Complete this section to establish that service.

Amount to transfer

\$

Transfer frequency:

Monthly Quarterly Semi-annually Annually

First Purchase (mm/dd/yyyy) — Your automatic purchases will continue on the day you list for first purchase, or the next business day if the market is closed on your specified day. If you select the 29th, 30th or 31st, for any month without that many days, the system will schedule the last business day of the month for your purchase.

/ /

Complete this section to sign up for the Automatic Investment Plan and have money moved regularly from your bank account to your fund account. You must also complete **Section 11**.

Indicate how the amount above should be allocated by fund.

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"/> %

Total \$ or 100 %

8. Dividends and Capital Gains

All distributions will be automatically reinvested in your fund account unless you make a different election here.

Dividends and Short-Term Capital Gains:

Pay by Check Sent to Address of Record

Pay by Direct Deposit to Bank Account
You must also complete **Section 11**.

Long-Term Capital Gains:

Pay by Check Sent to Address of Record

Pay by Direct Deposit to Bank Account
You must also complete **Section 11**.

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9. Cost Basis Election

Homestead Funds will report cost basis information to both shareholders and the Internal Revenue Service (IRS) on mutual fund shares acquired and subsequently redeemed after January 1, 2012. In order to deliver this service to you, we ask that you select a cost basis accounting method for your new account. If you do not elect a method, our default method of Average Cost will be used.

Please choose one of the following available methods:

- Average Cost** — the purchase price of all covered shares in the account are averaged
- First In, First Out** — depletes shares beginning with the earliest acquisition date
- Last In, First Out** — depletes shares beginning with the most recent acquisition date
- High Cost** — depletes shares beginning with the most expensive shares
- Low Cost** — depletes shares beginning with the least expensive shares
- Specific Lot Identification** — depletes shares according to the lots chosen by the shareholder. FIFO will be used for shares withdrawn due to a systematic withdrawal plan and in cases where the lots you designate are insufficient or unavailable.

If you are a C Corporation or Tax-Exempt Organization you do not need to complete this section.

If we cannot determine your election method you will be defaulted to Average Cost.

10. Phone Services

We will act on your instructions to exchange or sell shares by phone unless you check the box to opt out of those services below. If you have bank instructions on file, phone purchases are automatically allowed for most account types.

Neither Homestead Funds nor the Transfer Agent will be liable for properly acting upon telephone instructions believed to be genuine.

- I DO NOT want to make exchanges and distributions by phone.

Please note that for phone purchases we must have bank instructions on file. Complete **Section 11**.

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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11. Bank Information

By completing this section, you authorize Homestead Funds to deduct money from the entity's bank account via ACH to purchase shares into the entity's Homestead Funds account and to send redemption proceeds via wire or ACH to the bank account of record.

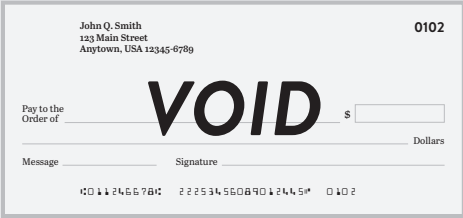
Be sure to complete this section if you:

- Elected to send the entity's investment by ACH transfer (**Section 5**)
- Signed up for the Automatic Investment Plan and chose to have money moved by ACH transfer from the entity's bank account (**Section 7**)
- Elected to have distributions deposited directly in the entity's bank account (**Section 8**)
- Want the option of having redemption proceeds deposited directly in the entity's bank account

Account type. Check one:

Checking Savings

Your request cannot be processed without a voided check or deposit slip for the account you wish to designate as your bank account of record unless you opt for us to use your initial purchase check.



Attach voided check here.

Check this box if you wish to use your attached purchase check to establish banking instructions instead of including an additional voided check.

Checks must be preprinted with your name and address. At least one common name must match exactly between your Homestead Funds and bank account. We do not accept starter checks.

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12. Certifications and Signatures

By signing this application, I represent and warrant that:

- (a) I have the full right, power and authority to make the investment applied for and I am of legal age in my state of residence. I certify that the Taxpayer Identification Number and tax status set forth in the application are correct.
- (b) I have read the Homestead Funds prospectus and this application and agree to the terms. I also agree that any shares purchased now or later are and will be subject to the terms of the Funds' prospectus as revised from time to time. The Homestead Funds prospectus is available at **homesteadfunds.com** or by calling **800.258.3030**.
- (c) I acknowledge that under certain circumstances, if no activity occurs in an account within a time period specified by state law, my shares in Homestead Funds may be transferred to the state (i.e. escheated). I may consult my state's website or call my state government's escheatment customer service number for more details.
- (d) I am a U.S. citizen or resident, or a representative of a U.S. entity, and I certify under penalty of perjury, that:
 - (1) The Social Security or Employer Identification Number shown on this form is my correct Taxpayer Identification Number
 - (2) I am not subject to backup withholding because
 - I am exempt from backup withholding, OR
 - I have not been notified that I am subject to backup withholding as a result of a failure to report all interest or dividend, OR
 - The Internal Revenue Services has notified me that I am no longer subject to backup withholding (Strike out this item (2) if you have been notified that you are subject to backup withholding)
- (e) I hereby certify, to the best of my knowledge, that the beneficial owner information provided on this application is complete and correct.

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

At least one Agent named in Section 3 must sign below.

Agent's Signature	Title	Date (mm/dd/yyyy)
<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Agent's Signature	Title	Date (mm/dd/yyyy)
<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Agent's Signature	Title	Date (mm/dd/yyyy)
<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>