

# FAS 106 Account Maintenance Form



**Homestead**  
Funds

Use this form to update your account records.

Return your completed form 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

**Fax**

877-513-0756

**Note:** If you are updating Trustees in **Section 6**, this form must be returned by mail.

If you have a question, 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.

Be sure this sign this form in **Section 7**.

## 1. Ownership

Tell us how the account is currently registered.

Cooperative/Organization Name

State

Account Number

Trust Tax Identification Number

Daytime Telephone Number (in case we have questions)

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## 2. Update Main Contact

This may be either a Trustee or other individual at the cooperative/organization. Statements and tax forms will be mailed to their attention and they will serve as the contact for questions on the account. If the main contact is not a Trustee, then their access will be limited to account inquiries only.

First Name

Middle Initial

Last Name

Daytime Telephone Number (in case we have questions)

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## 3. Update Cooperative/Organization Address

The cooperative/organization's **new residential street address** is:

Residential Street Address

City

State

Zip Code

The cooperative/organization's **new mailing address** is:

Mailing Address

City

State

Zip Code

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

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## 4. Interested Party

Use this section to request or discontinue duplicate statement mailings to a third party.

☐ Add or Update

☐ Remove

First Name

Middle Initial

Last Name

Address

City

State

Zip Code

Please note that for phone purchases we must have bank instructions on file. Complete **Section 6**.

## 5. Phone Services

We will act on your instructions to buy, exchange or sell shares by phone unless you check the box to opt out of those services below.

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

**Check to Opt Out:**

☐ I DO NOT want to make **purchases, exchanges** and **distributions** by phone. You must have bank instructions on file to make purchases by phone. If you do not have bank instructions on file, complete **Section 6** also.

## 6. Add or Update Bank Information

Complete this section to add or update the bank information we have on file.

**Add or update. Check one:** ☐ This bank information replaces any prior bank information on file.

☐ This bank information should be added in addition to any prior information on file.

**Account type. Check one:** ☐ Checking ☐ Savings

To add or update bank information complete **Sections 1, 6 and 7**. You must wait 30 days after the instructions have been added to your account before you can process a distribution to the new bank instructions.



**Attach voided check here.**

Checks must be preprinted with the name, address and account information. We do not accept starter checks.

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## 7. Signatures and Certifications and/or Update Trustees

Use this section to update Trustees and/or to authorize account updates requested in sections 2-6.

Be sure to sign this form. If you are updating Trustees, all Trustees must sign the form.

By signing this form, I certify that:

- I have received, read and agree to the terms of the prospectus for the funds in which the Trust is investing.
- I have been granted the authority and have the legal capacity to purchase mutual fund shares on behalf of the Trust. I am of legal age in my state and believe such investment is suitable for the Trust.
- I understand that it is my responsibility as a Trustee to determine that all requests are in compliance with the Trusts provisions.
- I understand that it is my responsibility as a Trustee to keep the list of Trustees (Authorized Traders) current.
- I, as a Trustee, authorize Homestead Funds, Ultimus Fund Solutions, their agents and affiliates to act on any instructions believed to be genuine for any service authorized by any of the Trustees on this form and agree that such parties will not be liable for any resulting loss or expense to the Trust resulting from such reliance.
- I, as Trustee, authorize Homestead Funds to provide account information to NRECA as necessary for IRS filings done on behalf of the plan.

### Check one:

- ☐ **We are updating Trustees** (Authorized Traders) on file with Homestead Funds. All Trustees to act on the account must sign below. This form must be returned by mail for processing when updating Trustees.
- ☐ **We are not updating Trustees.** We are only requesting account updates as specified in **Sections 2-6** of this form. Only one Trustee needs to sign below.

Trustee updates will replace existing Trustees on file with Homestead Funds. When updating Trustees, all Trustees to act on this account must sign. This form must be returned by mail for processing when updating Trustees.

Trustee's Signature

Date (mm/dd/yyyy)

 /  / 

Printed First Name

Middle Initial

Last Name

Trustee's Signature

Date (mm/dd/yyyy)

 /  / 

Printed First Name

Middle Initial

Last Name

Trustee's Signature

Date (mm/dd/yyyy)

 /  / 

Printed First Name

Middle Initial

Last Name

If there are more than three Trustees attach a list of names and provide all of the information requested here along with the signature for each Trustee.