

Transfer on Death Beneficiary Registration



Use this Transfer On Death Beneficiary Registration to designate or change your Transfer On Death (TOD) beneficiary(ies) on one or more of your Bennett Group of Funds account(s).*

Upon receipt of a completed Transfer on Death Beneficiary Registration, your Bennett Group of Funds account(s) identified in Section 1 below will reflect a TOD designation. Please note, the name(s) of the TOD beneficiary(ies) will not appear on your account registration.

Designating a TOD beneficiary on your Bennett Group of Funds account(s) may have certain tax and/or legal consequences. Neither the Bennett Group of Funds nor their agents and representatives are responsible for determining the tax and legal consequences to you concerning your decision to designate a TOD beneficiary on your Bennett Group of Funds account(s). You should consult with your attorney and financial advisor prior to completing this Transfer On Death Beneficiary Registration to ensure that a TOD registration meets your specific estate planning requirements.

*** This Transfer On Death Beneficiary Registration may NOT be used to add or change beneficiaries on a Bennett Group of Funds IRA. Please call 855-606-8290 for information on how to add or change a beneficiary on a direct Bennett Group of Funds IRA.**

For regular mail delivery:
Bennett Group of Funds
PO Box 9875
Providence, RI 02940-8075

For overnight delivery:
Bennett Group of Funds
4400 Computer Drive
Westborough, MA 01581

If you need additional copies of this application, or would like assistance completing it, please contact Bennett Group of Funds at 855-606-8290 or www.BennettFunds.com.

Section 1

Account Information

Fund Account Number(s) *(separated by comma)*

Registration of the Applicable Account(s) *(include name(s) of all registered owners using additional lines provided below)*

Additional Registration Information

Additional Registration Information

State of Residence of Registered Owner¹

Daytime Telephone Number

¹A Transfer On Death designation is not allowed for residents of the State of Louisiana.

Section 2

TOD Options

Please select one of the options below:

- ☐ Designate a TOD beneficiary on a new Bennett Group of Funds account(s) per the enclosed Mutual Funds Account Application.
- ☐ Designate a TOD beneficiary on the Bennett Group of Funds account(s) identified in Section 1.
- ☐ Change the previously designated TOD beneficiary(ies) on the Bennett Group of Funds account(s) identified in Section 1.

Section 3

Designation of TOD Beneficiary

Please designate a TOD beneficiary for the Bennett Group of Funds fund account(s) identified in Section 1. We are able to accept a "lineal descendants per stirpes" designation. If you designate more than one TOD beneficiary, upon the death of the last surviving account owner, our agent will accept non-conflicting instructions from all designated TOD beneficiaries regarding the disposition of the Bennett Group of Funds shares.

Please provide the following information for each TOD beneficiary:

Primary Beneficiary(ies):

Name

Date of Birth

Month

Day

Year

☐ U.S. Citizen

☐ U.S. Resident Alien

Social Security Number

% of Account

Relationship

Street Address

City

State

Zip Code

Email Address

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Section 3 (continued)

Designation of TOD Beneficiary

Primary Beneficiary(ies) (continued):

Name						
Date of Birth	Month	Day	Year	<input type="checkbox"/> U.S. Citizen	<input type="checkbox"/> U.S. Resident Alien	Social Security Number
% of Account		Relationship				
Street Address						
City					State	Zip Code
Email Address						

Please note:

Unless otherwise indicated, Bennett Group of Funds will assume equal beneficiary distribution if more than one secondary beneficiary is designated.

The sum of the percentages for all secondary beneficiaries must equal 100%.

If you wish to name more than three secondary beneficiaries, please attach a separate sheet with all of the requested information for each beneficiary.

Secondary Beneficiary(ies):

Name						
Date of Birth	Month	Day	Year	<input type="checkbox"/> U.S. Citizen	<input type="checkbox"/> U.S. Resident Alien	Social Security Number
% of Account		Relationship				
Street Address						
City					State	Zip Code
Email Address						

Name						
Date of Birth	Month	Day	Year	<input type="checkbox"/> U.S. Citizen	<input type="checkbox"/> U.S. Resident Alien	Social Security Number
% of Account		Relationship				
Street Address						
City					State	Zip Code
Email Address						

Name						
Date of Birth	Month	Day	Year	<input type="checkbox"/> U.S. Citizen	<input type="checkbox"/> U.S. Resident Alien	Social Security Number
% of Account		Relationship				
Street Address						
City					State	Zip Code
Email Address						

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Section 4

Spousal Consent

If you are married, please read the following information that applies to residents of community property or marital property states if spouse is not designated as primary beneficiary. It is the Account Owner's responsibility to determine if this section applies. The Account Owner may need to consult with legal counsel. Neither the Fund nor its Agent are liable for any consequences resulting from a failure of the Account Owner to provide proper spousal consent.

IMPORTANT: This Designation of Beneficiary may have tax or estate planning effects and consequences. If you are married and reside in a community property or marital property state (currently 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. Note that the states listed here may change. See your attorney or tax professional for additional information and advice.

Waiver of Beneficiary Rights by Spouse

As the spouse of the above-named owner of the account, I hereby consent to the designation of the beneficiary(ies) stated above.

Signature of Spouse	Month	Day	Year
Printed Name of Spouse			

Section 5

Signatures and Signature Guarantees

Medallion Signature Guarantee Stamp not required for new purchases, however Medallion Signature Guarantee Stamp is required for changing any existing registrations.

The undersigned hereby revokes any and all prior designations of a TOD beneficiary, and understands that he/she may change this TOD beneficiary designation at any time by submitting a new Bennett Group of Funds Transfer On Death Beneficiary Registration. The undersigned understands that he/she may revoke the establishment of a TOD registration at any time by submitting new registration instructions, in proper form.

This TOD beneficiary designation shall apply to all accounts identified in Section 1 of this form.

Each of the undersigned hereby agrees to release the fund(s), Bennett Group of Funds, and their agents and representatives from all liability and agree to indemnify them from any and all losses, damages or costs for acting in good faith in accordance with this Transfer On Death Registration instruction, and maintaining, and ultimately distributing the assets in accordance with this instruction.

A signature guarantee of all registered owners is required to add or change a TOD beneficiary. If this form is accompanying the Mutual Fund Account Application form to establish a new account, no signature guarantee is required.

Signature of Depositor	Month	Day	Year
Signature of Co-Depositor	Month	Day	Year

Signature guarantees can be obtained from a bank or brokerage firm, or other financial intermediary that is a member of an Approved Medallion Guarantee Program, or that is otherwise approved by the fund. Just take your unsigned form to one of these institutions and request that an officer guarantee your signature. The officer may require a driver's license and/or other identification, and should stamp and sign this application in the space provided.

Place signature guarantee here, if required.

Signature Guarantee Stamp	Signature Guarantee Stamp
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