



Individual Retirement Account (IRA) Change of Beneficiary Form

Account Information

Name _____ Social Security Number _____

Account Number _____

Check which Fund(s):

Green Century Balanced Fund – Individual Investor Share Class	<input type="checkbox"/>
Green Century Balanced Fund – Institutional Share Class	<input type="checkbox"/>
Green Century Equity Fund – Individual Investor Share Class	<input type="checkbox"/>
Green Century Equity Fund – Institutional Share Class	<input type="checkbox"/>
Green Century International Index Fund – Individual Investor Share Class	<input type="checkbox"/>
Green Century International Index Fund – Institutional Share Class	<input type="checkbox"/>

Designation of Beneficiary *(Revocable)*

I designate the following to be my primary beneficiary (ies) of this IRA in case of my death. Unless otherwise designated, primary beneficiaries will share equally. If some but not all of the primary beneficiaries (or, if applicable, secondary beneficiaries) predecease the Depositor, the share of the predeceased beneficiary (ies) will be paid to the surviving beneficiary (ies) in proportion to the shares that they would otherwise receive. If no beneficiaries are named or if none of the beneficiaries survive the Depositor, the beneficiary will be the Depositor's estate. **Note:** If you wish to designate additional beneficiaries, please attach a piece of paper with the same information for the additional beneficiaries.

Primary Beneficiary (ies)

Name Complete Address

Birthdate Social Security Number Relationship % of Account

Name Complete Address

Birthdate Social Security Number Relationship % of Account

Secondary Beneficiary (ies)

If none of the above primary beneficiaries is living on the date of my death, I designate the following to be my contingent beneficiary(ies) to receive my interest in the Account in case of my death.

Name Complete Address

Birthdate Social Security Number Relationship % of Account

Name Complete Address

Birthdate Social Security Number Relationship % of Account

Signature

Signature _____ Date Signed _____

For assistance, call 1-800-221-5519 Monday through Friday, 8:00 am to 6:00 pm Eastern Time.

Return this form to: Green Century Funds, PO Box 588, Portland, ME 04112