



**INDIVIDUAL RETIREMENT ACCOUNT (IRA)
CHANGE OF BENEFICIARY**

ACCOUNT NUMBER _____ SOCIAL SECURITY NUMBER _____

GREEN CENTURY BALANCED FUND _____ AND/OR GREEN CENTURY EQUITY FUND _____

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.

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

DATE SIGNED: _____

SIGNATURE: _____

**For assistance, call 1-800-221-5519.
Return this form to Green Century Funds, PO Box 6110, Indianapolis, IN 46206-6110.**