



STATE FARM FUNDS COLLATERAL ACCOUNT AGREEMENT

This form is used to authorize State Farm Funds® to establish a new account and move shares from one account to the new account in the name of a financial institution for the benefit of the investor in order to collateralize shares. **The pledgee of the collateralized account must submit to us a list of authorized signers and their signatures on letterhead of the financial institution.**

If you have any questions or need additional information before completing this form, please call **800-447-0740**.

Please print all information.

1 COLLATERAL ACCOUNT REGISTRATION INFORMATION

NAME OF FINANCIAL INSTITUTION (PLEDGEE) _____ Pledgee

FBO _____
NAME OF REGISTERED OWNER (PLEDGOR)

Address of Pledgee: _____
STREET

CITY/STATE/ZIP

Address of Pledgor: _____
STREET

CITY/STATE/ZIP

2 TRANSFER INFORMATION

	Shares	or	\$	from	Account #	Fund	to	Fund
Transfer of	_____		_____		_____	_____		_____
Transfer of	_____		_____		_____	_____		_____
Transfer of	_____		_____		_____	_____		_____
Transfer of	_____		_____		_____	_____		_____

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SIGNATURE(S) (all owners of transferor account must sign)

By signing this form, I/we agree to the following terms:

- The Pledgee’s address will be the primary address on this account and the Pledgor’s address will be the secondary address on this account. Duplicate statements will be mailed to both addresses.
- The Pledgor will only be able to change the secondary address on this account. The Pledgor will not be able to make any other transactions on this account. The Pledgee has the right to sell or transfer any and all shares without further action by the Pledgor.
- This account will not have telephone, wire, or ACH privileges.
- All dividends and capital gains will be reinvested, unless otherwise noted. If cash distributions are elected, the proceeds will be mailed to the address of the Pledgee.
- Any tax reporting will be to the Pledgor’s Tax ID # as certified on the Application of the transferor account. **All tax information will be mailed to the address of the Pledgee and it is the responsibility of the Pledgee to forward these items to the Pledgor.**
- No exchanges will be able to be made on this account.
- **All instructions** concerning this account will require a letter of instruction, on letterhead of the financial institution, signed by authorized signers of the Pledgee institution along with a **signature guarantee**.*
- It is the responsibility of the Pledgee to notify State Farm Funds when this account is no longer pledged as collateral.
- This account will not have shares issued in certificate form.
- State Farm Funds is not liable for any information contained in any agreements between the Pledgor and the Pledgee.
- I/we have received, read, and agree to the terms of the prospectus for each fund in which I/we are investing. I/we are of legal age, have the authority and legal capacity to purchase shares of the State Farm Funds.

PLEDGOR(S) SIGNATURE	DATE	*AUTHORIZED GUARANTOR’S SIGNATURE (REQUIRED)
PLEDGOR(S) SIGNATURE	DATE	*AUTHORIZED GUARANTOR’S SIGNATURE (REQUIRED)
SIGNATURE OF AUTHORIZED REPRESENTATIVE OF PLEDGEE	DATE	*AUTHORIZED GUARANTOR’S SIGNATURE (REQUIRED)
AUTHORIZED REPRESENTATIVE’S TITLE		

A signature guarantee is a written representation signed by an officer or authorized employee of the grantor, showing that the signature of a shareowner is genuine. Please take this form to a commercial bank, broker dealer, or other authorized guarantor to have your signature guaranteed.

A notary cannot be accepted.

Please make a copy of this form for your records and mail the original to:

**State Farm Mutual Funds
P.O. Box 4766
Chicago, IL 60680-4766**

Financial Institution: Place Medallion Signature Guarantee stamp here.