Survivor Reregistration and Redemption Options Form

(For Non-IRA accounts only)

Please mail completed form to:
State Street Global Advisors
PO Box 701
Milwaukee, WI 53201-0701

Please contact your local state tax department for inheritance tax waiver filing requirements prior to completing this form. If you have any questions, please call 800-242-0134.

1. Deceased Shareholder Account Information

Deceased Account Owner's Name (as it appears on the account) ____________________

Social Security / Tax I.D. Number XXX-XX-________

Date of Birth (MM/DD/YYYY) ________ Date of Death (MM/DD/YYYY) ________ State of Residence ________

Please indicate all accounts:

Fund Name ____________________ Account Number ________

Fund Name ____________________ Account Number ________

Fund Name ____________________ Account Number ________

2. Reregistration and Redemption Options

Note to Executor, Personal Representative, Authorized Signer, or Trustee: Please ensure that you include the information for all payees or new account owners. Failure to provide this information will result in a delay in the processing of your request. If more than one payee or new account owner, please provide additional information on the back of this form.

❑ **Option 1,** Redeem immediately upon receipt of this form.
Please select one of the following delivery options and complete the Payee Information below:

❑ Send a check to the current address of record/alternate address listed below
❑ Regular Mail ❑ Overnight Mail (a $15 fee applies)

❑ Electronic Funds Transfer via Automated Clearing House (ACH) to:
❑ The bank information currently on file ❑ New bank information (a voided check must be attached in Section 4)

❑ Wire Redemption to (a $15 wire fee applies):
❑ The bank information currently on file ❑ New bank information (a voided check must be attached in Section 4)

Payee Information: *You must select the relationship of the payee to the account, provide the redemption amount for the payee, and provide the payee's name and address.*

Relationship: ❑ Estate ❑ Beneficiary of the Estate ❑ Surviving Owner ❑ Successor/ Surviving Trustee
❑ Trust ❑ TOD/POD Beneficiary ❑ Other ____________________

Redemption Amount: ❑ All Shares ❑ ________ % of account ❑ $ ________ ❑ ________ shares

Name of Individual / Trust / Estate / Other ____________________ Social Security / Tax I.D. Number ________ Date of Birth (MM/DD/YYYY) ________

Street Address ____________________ Telephone Number ________

City ________ State ________ Zip Code ________

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2. Reregistration and Redemption Options (continued)

❑ **Option 2,** Reregister account to a new account, Elfun Funds and/or State Street Income and U.S. Core Equity Funds eligibility requirements must be met. A Non-IRA Application may be required. All new owners must also review Section 3 of the form regarding cost basis.

New Account Registration Information: You must select the relationship of each new account owner to the account, provide the reregistration amount for each new account registration, and provide the new account registration information.

New Account Registration Information: ❑ Estate ❑ Beneficiary of the Estate ❑ Surviving Owner ❑ Successor/ Surviving Trustee ❑ Trust ❑ TOD/POD Beneficiary ❑ Other ______________________________

Reregistration Amount: ❑ All shares ❑ __________ % of account ❑ $ ______________ ❑ ______________ shares

____
Name of Individual / Trust / Estate / Other

____
Name of Individual / Executor or Personal Representative / Trustee / Authorized Signer / Other

____
Name of Individual / Executor or Personal Representative / Trustee / Authorized Signer / Other

3. Cost Basis Information *(Reregistration only)*

Please review section A, B, or C based on the registration of the deceased shareholder's account(s). Please contact a professional tax advisor with any questions regarding adjusted cost basis specific to your tax situation.

A. For Individual Accounts being reregistered:

Per Internal Revenue Service (IRS) regulations, if the account was owned solely by the decedent, the fair market value (FMV) on the date of death will be used as the cost basis for the reregistered shares unless an adjusted basis is provided below by the estate representative or the TOD/POD beneficiary. Adjusted basis (optional) $______________.

B. For Joint Accounts being reregistered:

Per Internal Revenue Service (IRS) regulations, if the account was owned by more than one individual, shares owned by each owner will be applied proportionately based upon the total number of owners, unless an alternate percentage for the decedent's shares is provided. Shares applicable to remaining owner(s) will retain their original basis information. Alternate percentage for decedent's shares (optional) _____________%.

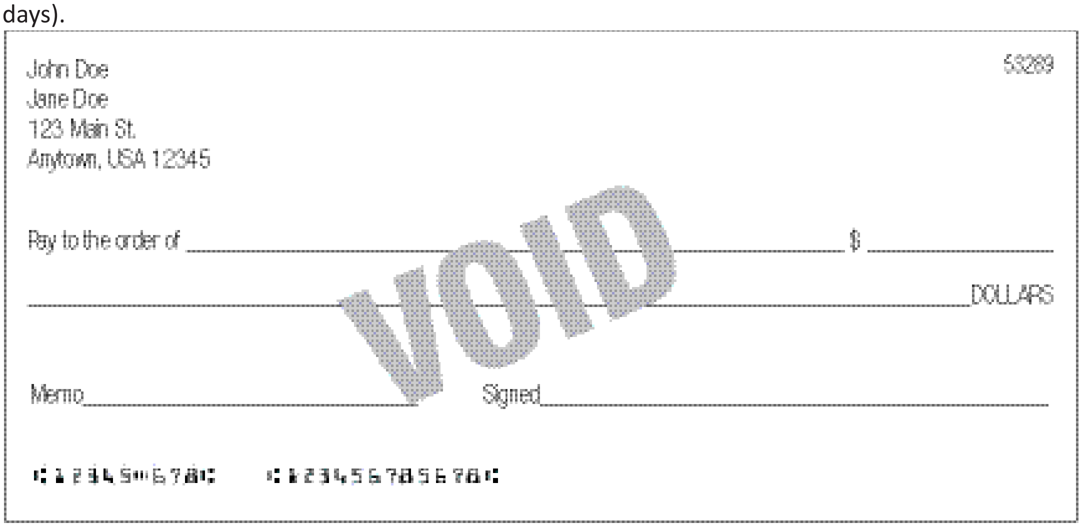
C. For Trust Accounts being reregistered:

Per Internal Revenue Service (IRS) regulations, if the Trust is changing to a new Trust due to the death of all grantors, the fair market value (FMV) on the date of death of the most recently deceased trustee will be used as the cost basis for the reregistered shares unless an adjusted basis is provided by the successor Trustee(s). Adjusted basis (optional) $___________.

4. Bank Information (optional)*

❑ Add Bank Information (attach pre-printed, voided check, or pre-printed deposit slip)

By completing this section, you authorize U.S. Bank Global Fund Services to send redemption proceeds via wire or ACH to your bank account of record. There is a $15 fee for next-day wires and no fee for ACH transfers (ACH transfers take 2-3 days).



Account Type:

❑ Checking

❑ Savings

* We are unable to draft or credit your account via ACH if it is a mutual fund or pass-through ("further credit to") account.

5. Tax Identification Number (TIN) Verification

For an individual account, a custodial account, or a joint account in which all shareholders are deceased: Please indicate below if a TIN was issued for the Estate of the deceased shareholder.

❑ I/We confirm that a TIN was not issued for the Estate.

❑ A TIN was issued for the Estate of ______________________________. The TIN is ___________________________.

For a Trust account: Please indicate if a new TIN should be associated with the Trust due to the passing of the Trustee(s).

❑ I/We confirm that the TIN for the trust is not changing.

❑ The TIN on file for the Trust is no longer valid, please update the TIN to _______________________.

6. Signatures and Medallion Signature Guarantee

I have received and understand the prospectus for my mutual fund. I understand the Fund's investment objectives and policies and agree to be bound by the terms of the prospectus. I agree to notify the Fund of any errors or discrepancies within 45 days after the date of the statement confirming a transaction. The statement will be deemed to be correct, and the Fund, the distributor, and its transfer agent shall not be liable if I fail to notify the Fund within such time period. I certify that I am of legal age and have legal capacity to initiate requests on the selected accounts.

I understand that my mutual fund account may be transferred to my state of residence if no activity occurs within my account during the inactivity period specified in my state's abandoned property laws.

I, the undersigned, authorize and request that U.S. Bank Global Fund Services, make the above distribution(s) from the account(s) listed in Section 1. I certify that all information in this distribution request is accurate, and I agree to hold the Fund, its advisor, and U.S. Bank Global Fund Services, any affiliate, and/or directors, trustees, employees, and agents harmless for any actions taken as a result of the information that I have provided. The undersigned acknowledges that it is his/her responsibility to properly calculate, report, and pay all taxes due with respect to the distribution(s) herein specified. I have been advised to consult my tax advisor regarding any questions about this distribution request.

Under penalty of perjury, I certify that:
(1) the Social Security or taxpayer identification number shown on this form is my correct taxpayer identification number, and
(2) I am not subject to backup withholding as a result of either being exempt from backup withholding, not being notified by the IRS of a failure to report all interest and dividends, or the IRS has notified me that I am no longer subject to backup withholding, and
(3) I am a U.S. person (including a U.S. resident alien), and
(4) I am exempt from FATCA reporting.
(Cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding due to a failure to report all interest and dividends).
The IRS does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Please select the appropriate box to confirm your relationship to the account.

❑ Surviving Owner ❑ TOD/POD Beneficiary ❑ Executor / Personal Representative / Administrator of the Estate
❑ Beneficiary of the Estate ❑ Successor /Surviving Trustee ❑ Other ________________________________

Signature * ______________________ Date Signed ______________________

Printed Name ______________________

Please select the appropriate box to confirm your relationship to the account.

❑ Surviving Owner ❑ TOD/POD Beneficiary ❑ Executor / Personal Representative / Administrator of the Estate
❑ Beneficiary of the Estate ❑ Successor /Surviving Trustee ❑ Other

Signature * ______________________ Date Signed ______________________

Printed Name ______________________

6. Signatures and Medallion Signature Guarantee (continued)

Medallion Signature Guarantee

*All signatures must be Medallion Signature Guaranteed. A Medallion Signature Guarantee can be obtained from a bank, savings association, credit union, a member firm of a domestic stock exchange or the Financial Industry Regulatory Authority, that is an eligible guarantor institution. We suggest you contact your financial institution to verify the documentation required to obtain a Medallion Signature Guarantee for this specific situation.

Note to Financial Institution: Please verify that the surety limit of your Medallion Signature Guarantee is equal to or greater than the value of this transaction request.

Additional Information

Please provide any additional information that pertains to your request.

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