

You should use this form to convert an existing Nuveen Funds Traditional IRA to a Roth IRA. If you are converting a Traditional IRA from another custodian, you must complete both this *IRA Conversion Form* and the *IRA Asset Transfer Form*.

By signing this form, investor(s) acknowledges that neither Nuveen Funds nor any affiliate or service provider to Nuveen Funds has provided the investor(s) with advice, recommendations or suggestions as to any specific investment decisions. Investors in Nuveen Funds are urged to consult their own professional advisors before making investment-related decisions, including but not limited to those related to transfer or rollover from retirement plans, purchase or sale of investments, selection or retention of investment managers, or selection of account beneficiaries.

Please send your signed and completed form to Nuveen Funds per the Return Completed Forms section below or in the enclosed customer reply envelope. Please contact Nuveen Funds with any questions at 800-257-8787.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account.

What this means for you: When you open an account, we will ask for your name, address, date of birth, Social Security Number and other information that will allow us to identify you (including a state-issued driver's license or other government-issued identification). This information will be verified to ensure the identity of all individuals opening a mutual fund account. Until you provide the information we need, we may not be able to open an account or effect any transactions for you.

1. ACCOUNT REGISTRATION (REQUIRED)

Please print or type. Please complete this section if you are converting an existing Nuveen Funds Traditional IRA to a Nuveen Funds Roth IRA, or if you are converting a Traditional IRA held at another institution. Please provide the information exactly as you want it to appear on your account.

Prefix	First Name	MI	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Name of Entity

If you are establishing an entity account as beneficiary due to the death of the owner in this section and you are an authorized signer, you must complete the Nuveen Funds Legal Entity Beneficial Ownership Certification Form F40214 included in order for the account to be established.

Social Security Number/ Taxpayer Identification Number	Date of Birth (mm/dd/yyyy)
<input type="text"/>	<input type="text"/>

Citizenship For foreign accounts, one of the following must be provided: non-U.S. citizen ID or passport number with country of issuance along with photocopy of ID.

U.S. Resident Non-U.S. Citizen Nonresident Non-U.S. Citizen (Specify country.)

Non-U.S. Citizen ID or Passport Number

Address Street or P.O. Box (APO and FPO addresses will be accepted.)	City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Address (If the above address is a P.O. Box, you must also provide a street address.)	City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

(Continued)



1. ACCOUNT REGISTRATION (REQUIRED) (CONTINUED)

Primary Phone Number <input type="text"/>	Phone Number Type <input type="checkbox"/> Mobile <input type="checkbox"/> Home <input type="checkbox"/> Business	Secondary Phone Number <input type="text"/>	Phone Number Type <input type="checkbox"/> Mobile <input type="checkbox"/> Home <input type="checkbox"/> Business
Alternate Phone Number <input type="text"/>	Phone Number Type <input type="checkbox"/> Mobile <input type="checkbox"/> Home <input type="checkbox"/> Business	Email Address <input type="text"/>	
Nuveen Wealth Management Advisor (Name) <input type="text"/>		Dealer Number <input type="text"/>	

2. ACCOUNT INFORMATION

Please complete this section if you are converting all or part of an existing Nuveen Funds Traditional IRA to a Nuveen Funds Roth IRA. FUND NAMES ARE LISTED IN SECTION 4.

Fund Name	Existing IRA Fund and Account Number You Wish to Convert	Convert % of Assets	Dollar Amount
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>

3. CONVERSIONS FROM ANOTHER INSTITUTION

(For New or Existing Accounts) Please complete a separate IRA Asset Transfer Form for each Traditional IRA being converted from another institution. Check the box corresponding to the source of the money now being transferred.

Traditional Contributory IRA Traditional Rollover IRA



4. INVESTMENT ALLOCATION

If you are converting a Traditional IRA from another institution, please indicate below the funds in which you would like to invest. The minimum initial investment in any fund is \$2,000.

Please check here to set this allocation for future investments, unless other instructions are received.

Fund Name (Fund Code)	Existing IRA Account Number You Wish to Convert	Convert % of Assets	Dollar Amount
Nuveen 5-15 Year Laddered Tax Exempt Bond Fund (98)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen All-American Municipal Bond Fund (1167)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Arizona Municipal Bond Fund (5002)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Bond Index Fund (91)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen California High Yield Municipal Bond Fund (1780)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen California Municipal Bond Fund (5003)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Colorado Municipal Bond Fund (5004)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Connecticut Municipal Bond Fund (5005)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Core Bond Fund (66)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Core Equity Fund (64)*	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Core Impact Bond Fund (45)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Core Plus Bond Fund (96)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Credit Income Fund (6942)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Dividend Growth Fund (5031)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Dividend Value Fund (6759)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Emerging Markets Debt Fund (2794)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Emerging Markets Equity Fund (67)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Emerging Markets Equity Index Fund (69)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Equity Index Fund (65)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Equity Long/Short Fund (5044)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Flexible Income Fund (5052)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Floating Rate Income Fund (5064)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Georgia Municipal Bond Fund (5006)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>

* Effective 5/1/24 the following fund name changes were made: TIAA-CREF Growth and Income Fund was renamed Nuveen Core Equity Fund, TIAA-CREF Social Choice International Equity Fund was renamed Nuveen International Responsible Equity Fund, TIAA-CREF Social Choice Equity Fund was renamed Nuveen Large Cap Responsible Equity Fund, Nuveen Large Cap Value Fund was renamed Nuveen Large Cap Value Opportunities Fund, Nuveen Mid Cap Value Fund was renamed Nuveen Mid Cap Value 1 Fund and TIAA-CREF Real Estate Securities Fund was renamed Nuveen Real Estate Securities Select Fund.

† Effective 12/13/24 the Nuveen Social Choice Low Carbon Equity Fund merged into Nuveen Large Cap Responsible Equity Fund.

(Continued)



4. INVESTMENT ALLOCATION (CONTINUED)

Fund Name (Fund Code)	Existing IRA Account Number You Wish to Convert	Convert % of Assets	Dollar Amount
Nuveen Global Dividend Growth Fund (3037)			\$
Nuveen Global Equity Income Fund (1759)			\$
Nuveen Global Infrastructure Fund (6725)			\$
Nuveen Global Real Estate Securities Fund (7270)			\$
Nuveen Green Bond Fund (2608)			\$
Nuveen High Yield Fund (95)			\$
Nuveen High Yield Income Fund (5055)			\$
Nuveen High Yield Municipal Bond Fund (5000)			\$
Nuveen Inflation Linked Bond Fund (90)			\$
Nuveen Intermediate Duration Municipal Bond Fund (1170)			\$
Nuveen International Bond Fund (2957)			\$
Nuveen International Dividend Growth Fund (5068)			\$
Nuveen International Equity Fund (61)			\$
Nuveen International Opportunities Fund (49)			\$
Nuveen International Responsible Equity Fund (2762) *			\$
Nuveen International Small Cap Fund (7175)			\$
Nuveen International Value Fund (1159)			\$
Nuveen Kansas Municipal Bond Fund (5007)			\$
Nuveen Kentucky Municipal Bond Fund (5008)			\$
Nuveen Large Cap Growth Fund (68)			\$
Nuveen Large Cap Responsible Equity Fund (62)*, †			\$
Nuveen Large Cap Select Fund (2605)			\$
Nuveen Large Cap Value Fund (85)			\$
Nuveen Large Cap Value Opportunities Fund (5034)*			\$
Nuveen Lifecycle Retirement Income Fund (70)			\$
Nuveen Lifestyle Aggressive Growth Fund (94)			\$

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† Effective 12/13/24 the Nuveen Social Choice Low Carbon Equity Fund merged into Nuveen Large Cap Responsible Equity Fund.

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4. INVESTMENT ALLOCATION (CONTINUED)

Fund Name (Fund Code)	Existing IRA Account Number You Wish to Convert	Convert % of Assets	Dollar Amount
Nuveen Lifestyle Conservative Fund (78)			\$
Nuveen Lifestyle Growth Fund (93)			\$
Nuveen Lifestyle Income Fund (77)			\$
Nuveen Lifestyle Moderate Fund (79)			\$
Nuveen Limited Term Municipal Bond Fund (5001)			\$
Nuveen Louisiana Municipal Bond Fund (5009)			\$
Nuveen Managed Allocation Fund (99)			\$
Nuveen Maryland Municipal Bond Fund (5010)			\$
Nuveen Massachusetts Municipal Bond Fund (5011)			\$
Nuveen Michigan Municipal Bond Fund (5012)			\$
Nuveen Mid Cap Growth Fund (86)			\$
Nuveen Mid Cap Growth Opportunities Fund (6449)			\$
Nuveen Mid Cap Value 1 Fund (6786)*			\$
Nuveen Mid Cap Value Fund (87)			\$
Nuveen Minnesota Intermediate Municipal Bond Fund (6804)			\$
Nuveen Minnesota Municipal Bond Fund (6484)			\$
Nuveen Missouri Municipal Bond Fund (1186)			\$
Nuveen Money Market Fund (63)			\$
Nuveen Multi Cap Value Fund (1157)			\$
Nuveen Nebraska Municipal Bond Fund (5022)			\$
Nuveen New Jersey Municipal Bond Fund (5013)			\$
Nuveen New Mexico Municipal Bond Fund (5014)			\$
Nuveen New York Municipal Bond Fund (5015)			\$
Nuveen North Carolina Municipal Bond Fund (5016)			\$
Nuveen Ohio Municipal Bond Fund (5017)			\$
Nuveen Oregon Intermediate Municipal Bond Fund (6779)			\$

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† Effective 12/13/24 the Nuveen Social Choice Low Carbon Equity Fund merged into Nuveen Large Cap Responsible Equity Fund.

(Continued)



4. INVESTMENT ALLOCATION (CONTINUED)

Fund Name (Fund Code)	Existing IRA Account Number You Wish to Convert	Convert % of Assets	Dollar Amount
Nuveen Pennsylvania Municipal Bond Fund (5018)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Preferred Securities and Income Fund (5040)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Quant International Small Cap Equity Fund (2966)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Quant Small Cap Equity Fund (88)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Quant Small/Mid Cap Equity Fund (2956)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Real Asset Income Fund (6732)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Real Estate Securities Fund (817)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Real Estate Securities Select Fund (89)*	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Short Duration High Yield Municipal Bond Fund (5026)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Short Duration Impact Bond Fund (2609)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Short Term Bond Fund (97)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Short Term Bond Index Fund (2797)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Short Term Municipal Bond Fund (5024)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Small Cap Growth Opportunities Fund (2454)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Small Cap Select Fund (5061)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Small Cap Value Fund (6740)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Small Cap Value Opportunities Fund (5028)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Small/Mid Cap Value Fund (5037)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Strategic Income Fund (1345)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Strategic Municipal Opportunities Fund (6992)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Virginia Municipal Bond Fund (5019)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Winslow Large-Cap Growth ESG Fund (5049)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Nuveen Wisconsin Municipal Bond Fund (5020)	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>
Total Amount or Percentage		<input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>

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† Effective 12/13/24 the Nuveen Social Choice Low Carbon Equity Fund merged into Nuveen Large Cap Responsible Equity Fund.



5. WITHHOLDING REQUIREMENTS

If you're transferring assets from another custodian, you must complete only the withholding section on the IRA Asset Transfer Form.

Important income tax information: We are required to withhold federal income taxes (at a rate of 10%) on the amount you convert unless you elect not to have withholding apply. **These rules do not apply to nonresident, non-U.S. citizens. (See NOTE below.)**

You must make a withholding election. If you do not check a box, taxes will be withheld at a rate of 10% on your conversion. (State withholding also may apply.)

I hereby notify Nuveen that I decline to provide a substitute federal form W-4R Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions. I understand that federal withholding will be withheld at the default rate of 10%.

I am providing a substitute federal form W-4R Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions. I am making a federal withholding election as indicated on my substitute federal form W-4R Withholding Certificate by entering a rate between 0% and 100% (including 0% and 100%) on line 2.

I am providing a substitute federal form W-4R Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions. I am choosing to have no federal income tax withheld by entering "-0-" on line 2.

Generally, you are not permitted to elect to have federal income tax withheld at a rate of less than 10% (including 0%) on payments to be delivered outside of the United States and its territories.

NOTE: If you are a nonresident, non-U.S. citizen, you must check the box below.

Notwithstanding the above, as a nonresident, non-U.S. citizen, I understand that special withholding rules apply to a conversion of my Traditional IRA to a Roth IRA.

If you are a nonresident, non-U.S. citizen, you must certify your foreign tax status by providing IRS Form W-8BEN prior to requesting a distribution. A W-8BEN is maintained on file for a three-year period.

STATE TAX WITHHOLDING ELECTION

State income tax withholding may be required from your distribution. If state withholding is mandatory, we will withhold at the rate required by your state. Please note that the state may allow you to elect not to have withholding applied, to choose additional withholding, or to specify the rate of withholding. Please contact Nuveen Funds with any questions at **800-257-8787**.



6. DESIGNATE YOUR BENEFICIARIES

Please complete this section to designate your beneficiaries. We will transfer ownership of your IRA to your primary beneficiaries upon your death. Your primary beneficiaries will share equally in your IRA unless you specify different percentages below. If a primary beneficiary predeceases you, his or her share of your IRA shall be divided proportionately among the surviving primary beneficiaries. In addition, we will transfer ownership of your IRA to your contingent beneficiaries only if there are no surviving primary beneficiaries at the time of your death. If this happens, your contingent beneficiaries will share equally in your IRA unless you specify different percentages below. If there are no surviving contingent beneficiaries at the time of your death, we will transfer ownership of your IRA to your estate. All percentages must total 100%.

NOTE: If more than one primary and/or contingent beneficiary is designated and no percentages are indicated, equal percentages totaling 100% will be allocated to each beneficiary.

Primary Beneficiary

First Name or Name of Entity MI Last Name

Relationship Percentage % Social Security Number/
Taxpayer Identification Number Date of Birth (mm/dd/yyyy) / /

Primary Beneficiary

First Name or Name of Entity MI Last Name

Relationship Percentage % Social Security Number/
Taxpayer Identification Number Date of Birth (mm/dd/yyyy) / /

Contingent Beneficiary

First Name or Name of Entity MI Last Name

Relationship Percentage % Social Security Number/
Taxpayer Identification Number Date of Birth (mm/dd/yyyy) / /

Contingent Beneficiary

First Name or Name of Entity MI Last Name

Relationship Percentage % Social Security Number/
Taxpayer Identification Number Date of Birth (mm/dd/yyyy) / /

Note: If you reside in a community property state, you may need your spouse's consent to your beneficiary designation. You may wish to seek legal advice.



7. TELEPHONE OPTIONS

The services below allow you to invest or exchange by telephone or web among your identically registered Nuveen Funds IRA. These services are automatically included unless you opt out by checking **No** below. You will also have access to your IRA through the Automated Telephone Service (ATS) and the internet. See the Nuveen Funds prospectuses for details.

Telephone Purchase

This option lets you invest by telephone with payments transferred by Automated Clearing House (ACH) from your designated bank account to your existing mutual fund account. (\$100 minimum. **Please complete Section 9.**)

Telephone Exchange

This option permits exchanges between your identically registered Nuveen Funds IRAs. The minimum initial investment in any fund is \$2,000.

If you do not want telephone options check this box **No**

8. AUTOMATIC INVESTMENT PLAN

If you would like to participate in the Nuveen Funds Automatic Investment Plan, the minimum investment per fund is \$100. Please indicate below the amount to invest, frequency, the first month to begin debiting your account and the time interval of your investments. Semimonthly investments occur on both the 1st and 15th, while monthly investments occur on either the 1st or 15th. All automatic investments are considered current year contributions. It takes up to 10 days to initiate this service. (Please also complete Section 9.)

FUND NAMES AND FUND CODES ARE LISTED IN SECTION 4.

FUND NAME (See Section 4)	FUND CODE	DOLLAR AMOUNT	SEMI	MONTHLY	START MONTH	1 ST MONTH	15 TH MONTH
<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. BANK INFORMATION

You must complete this section if you requested Telephone Purchase or the Automatic Investment Plan.

Type of Account Checking Savings

Name of Primary Bank Account Owner

Name of Joint Bank Account Owner

Bank Name

ABA Routing Number

Bank Phone Number

Bank Account Number

ATTACH A VOIDED BANK CHECK OR PREPRINTED SAVINGS DEPOSIT SLIP.

This will ensure accurate bank information.



10. SIGNATURES

By signing this form, I certify that:

I have received, read, and agree to the terms of the prospectus for each fund in which I am investing. I have the authority and legal capacity to establish this custodial (Conversion and/or Contribution) Roth IRA, and to direct the purchase of mutual fund shares, am of legal age in my state, and believe each investment is a suitable one for me.

I received, read, and agree to both the Nuveen Funds Individual Retirement Accounts Disclosure Statement and UMB Bank, n.a. Universal Individual Retirement Account Custodial Agreement.

I understand I may revoke this Agreement by notifying the Custodian in writing within seven days if I did not receive the Disclosure Statement at least seven days prior to today's date.

I authorize Nuveen Funds, UMB Bank, n.a. or their designees to act on any instructions believed to be genuine for any service authorized in the Custodial Agreement and on this form. The Nuveen Funds use reasonable procedures (including Shareholder identity verification) to confirm that instructions given by telephone/computer are genuine and are not liable for acting on these instructions. (However, if these procedures are not followed, it is the opinion of certain regulatory agencies that the Nuveen Funds may be liable for any losses that may result from acting on instructions given.) All services are subject to conditions set forth in the Nuveen Funds prospectus. I elect under paragraph 9(a) of the Custodial Agreement not to have life expectancy recalculated for minimum distribution purposes unless I notify the Custodian otherwise prior to my required beginning date.

To request assistance with accessing a prospectus, privacy policy, or business continuity policy please contact us at **800-257-8787**.

If I am a nonresident, noncitizen of the United States, I acknowledge that the below tax certifications do not apply to me. I have provided Nuveen with an IRS Form W-8BEN within the last three years or will submit a W-8BEN prior to requesting a distribution from this account. I acknowledge that I must have a W-8BEN on file to request a distribution.

Substitute W-9 Request for Taxpayer Identification Number and Certification

Under penalties of perjury, I certify that: (1) The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and (3) I am a U.S. citizen or other U.S. person (as defined in the form W-9 instructions); and (4) the FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Please Sign Here

Owner's Signature

Today's Date (mm/dd/yyyy)

 / /

CUSTODIAN ACCEPTANCE

UMB Bank, n.a. will accept appointment as Custodian of the Depositor's IRA. Receipt by the Depositor of a confirmation of the purchase of the fund shares indicated above will serve as notification of UMB Bank, n.a.'s acceptance of appointment as Custodian of the Depositor's Account.

UMB BANK, N.A., CUSTODIAN

Owner's Signature

Today's Date (mm/dd/yyyy)

 / / 

RETURN COMPLETED FORM(S) TO:

Please return ALL numbered pages, including any pages you did not need to complete.

STANDARD MAIL:

Nuveen Funds
P.O. Box 219140
Kansas City, MO 64121-9140

OVERNIGHT:

Nuveen Funds
801 Pennsylvania Ave
Suite 219140
Kansas City, MO 64105-1307





A TIAA Company

**WITHHOLDING CERTIFICATE FOR NONPERIODIC
PAYMENTS AND ELIGIBLE ROLLOVER DISTRIBUTIONS**
SUBSTITUTE FORM W-4R FOR CASH WITHDRAWALS

IMPORTANT INFORMATION

PLEASE READ BEFORE FILLING OUT FORM

This substitute form W-4R applies to non-rollover eligible payments that are nonperiodic and rollover-eligible payments.

Federal laws may require mandatory federal income tax be withheld from cash withdrawals. Our records indicate that you are a U.S. person (U.S. citizen or resident non-U.S. citizen), and may, therefore, be subject to federal tax withholding from your cash distribution. If you claim residence AND citizenship outside the United States, you must complete Form W-8BEN instead of this form W-4R to certify your foreign tax status. U.S. citizens living abroad, except in any U.S. territories, must elect to have taxes withheld. Distributions from retirement plans are subject to a federal default withholding rate depending on the type of payment. If you want the federal default rate applied, you do not need to submit this form as the federal default rate will be applied automatically. If you want a rate other than the federal default rate for either a non-periodic payment or an eligible rollover distribution or want no withholding on a non-periodic payment, please submit this form.





A TIAA Company

WITHHOLDING CERTIFICATE FOR NONPERIODIC PAYMENTS AND ELIGIBLE ROLLOVER DISTRIBUTIONS
SUBSTITUTE FORM W-4R FOR CASH WITHDRAWALS

1. PROVIDE YOUR INFORMATION

STEP 1A.

Title	First Name	Middle Initial
<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name	Suffix	
<input type="text"/>	<input type="text"/>	
Mailing Address	City	State Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
Contact Telephone Number	Extension	
<input type="text"/>	<input type="text"/>	

STEP 1B.

Social Security Number/
Taxpayer Identification Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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STEP 1C.

Account Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Your withholding rate is determined by the type of payment you will receive.

- For nonperiodic payments, the default withholding rate is 10%. You can choose to have a different rate by entering a rate between 0% and 100% on line 2. Generally, you can't choose less than 10% for payments to be delivered outside the United States and its territories.
- For an eligible rollover distribution, the default withholding rate is 20%. You can choose a rate greater than 20% by entering the rate on line 2. You may not choose a rate less than 20%.

See IRS Form W-4R Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions Instructions attached at the end of this form for more information.

STEP 2

Complete this line if you would like a rate of withholding that is different from the default withholding rate. See the IRS Form W-4R Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions Instructions and the Marginal Rate Tables attached at the end of this form for additional information.

Enter the rate as a whole number (no decimals) _____ Line 2

STEP 3. YOUR SIGNATURE

The form will become effective with your next available payment. You may revoke this election at any time by filing a new federal income tax withholding election form with Nuveen

Under penalties of perjury, I certify that: (1) The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and (3) I am a U.S. citizen or other U.S. person; and (4) the FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Please sign your full legal name with suffix, if applicable, using black ink.

Your Signature

Today's Date (mm/dd/yyyy)

 / / 20



A TIAA Company

**WITHHOLDING CERTIFICATE FOR NONPERIODIC
PAYMENTS AND ELIGIBLE ROLLOVER DISTRIBUTIONS**
SUBSTITUTE FORM W-4R FOR CASH WITHDRAWALS

OPTIONS TO RETURN COMPLETED FORM(S)

Please return **ALL** numbered pages, including any pages you did not need to complete.

STANDARD MAIL:

Nuveen Funds
P.O. Box 219140
Kansas City, MO 64121-9140

OVERNIGHT:

Nuveen Funds
801 Pennsylvania Ave
Suite 219140
Kansas City, MO 64105-1307



WITHHOLDING CERTIFICATE FOR NONPERIODIC PAYMENTS AND ELIGIBLE ROLLOVER DISTRIBUTIONS SUBSTITUTE FORM W-4R FOR CASH WITHDRAWALS

IRS FORM W-4R WITHHOLDING CERTIFICATE FOR NONPERIODIC PAYMENTS AND ELIGIBLE ROLLOVER DISTRIBUTIONS INSTRUCTIONS

GENERAL INSTRUCTIONS

Section references are to the Internal Revenue Code.

Future developments. For the latest information about any future developments related to Form W-4R, such as legislation enacted after it was published, go to www.irs.gov/FormW4R.

Purpose of form. Complete Form W-4R to have payers withhold the correct amount of federal income tax from your nonperiodic payment or eligible rollover distribution from an employer retirement plan, annuity (including a commercial annuity), or individual retirement arrangement (IRA). See page 2 for the rules and options that are available for each type of payment. Don't use Form W-4R for periodic payments (payments made in installments at regular intervals over a period of more than 1 year) from these plans or arrangements. Instead, use Form W-4P, Withholding Certificate for Periodic Pension or Annuity Payments. For more information on withholding, see Pub. 505, Tax Withholding and Estimated Tax.

Caution: If you have too little tax withheld, you will generally owe tax when you file your tax return and may owe a penalty unless you make timely payments of estimated tax. If too much tax is withheld, you will generally be due a refund when you file your tax return. Your withholding choice (or an election not to have withholding on a nonperiodic payment) will generally apply to any future payment from the same plan or IRA. Submit a new Form W-4R if you want to change your election.

2024 MARGINAL RATE TABLES

You may use these tables to help you select the appropriate withholding rate for this payment or distribution. Add your income from all sources and use the column that matches your filing status to find the corresponding rate of withholding. See page 2 for more information on how to use this table.

Single or Married filing separately		Married filing jointly or Qualifying surviving spouse		Head of Household	
Total income over—	Tax rate for every dollar more	Total income over—	Tax rate for every dollar more	Total income over—	Tax rate for every dollar more
\$0	0%	\$0	0%	\$0	0%
14,600	10%	29,200	10%	21,900	10%
26,200	12%	52,400	12%	38,450	12%
61,750	22%	123,500	22%	85,000	22%
115,125	24%	230,250	24%	122,400	24%
206,550	32%	413,100	32%	213,850	32%
258,325	35%	516,650	35%	265,600	35%
623,950*	37%	760,400	37%	631,250	37%

* If married filing separately, use \$380,200 instead for this 37% rate.

Nonperiodic payments—10% withholding. Your payer must withhold at a default 10% rate from the taxable amount of nonperiodic payments **unless** you enter a different rate on line 2. Distributions from an IRA that are payable on demand are treated as nonperiodic payments. Note that the default rate of withholding may not be appropriate for your tax situation. You may choose to have no federal income tax withheld by entering “-0-” on line 2. See the specific instructions below for more information. Generally, you are not permitted to elect to have federal income tax withheld at a rate of less than 10% (including “-0-”) on any payments to be delivered outside the United States and its territories.

Note: If you don't give Form W-4R to your payer, you don't provide an SSN, or the IRS notifies the payer that you gave an incorrect SSN, then the payer must withhold 10% of the payment for federal income tax and can't honor requests to have a lower (or no) amount withheld. Generally, for payments that began before 2024, your current withholding election (or your default rate) remains in effect unless you submit a Form W-4R.



WITHHOLDING CERTIFICATE FOR NONPERIODIC PAYMENTS AND ELIGIBLE ROLLOVER DISTRIBUTIONS SUBSTITUTE FORM W-4R FOR CASH WITHDRAWALS

GENERAL INSTRUCTIONS (CONTINUED)

Eligible rollover distributions—20% withholding. Distributions you receive from qualified retirement plans (for example, 401(k) plans and section 457(b) plans maintained by a governmental employer) or tax-sheltered annuities that are eligible to be rolled over to an IRA or qualified plan are subject to a 20% default rate of withholding on the taxable amount of the distribution. You can't choose withholding at a rate of less than 20% (including "-0-"). Note that the default rate of withholding may be too low for your tax situation. You may choose to enter a rate higher than 20% on line 2. Don't give Form W-4R to your payer unless you want more than 20% withheld.

Note that the following payments are not eligible rollover distributions for purposes of these withholding rules:

- Qualifying "hardship" distributions;
- Distributions required by federal law, such as required minimum distributions;
- Generally, distributions from a pension-linked emergency savings account;
- Eligible distributions to a domestic abuse victim;
- Qualified disaster recovery distributions;
- Qualified birth or adoption distributions; and
- Emergency personal expense distributions.

See Pub. 505 for details. See also *Nonperiodic payments—10% withholding* above.

Payments to nonresident aliens and foreign estates. Do not use Form W-4R. See Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities, and Pub. 519, U.S. Tax Guide for Aliens, for more information.

Tax relief for victims of terrorist attacks. If your disability payments for injuries incurred as a direct result of a terrorist attack are not taxable, enter "-0-" on line 2. See Pub. 3920, Tax Relief for Victims of Terrorist Attacks, for more details.

SPECIFIC INSTRUCTIONS

Line 1b

For an estate, enter the estate's employer identification number (EIN) in the area reserved for "Social security number."

Line 2

More withholding. If you want more than the default rate withheld from your payment, you may enter a higher rate on line 2.

Less withholding (nonperiodic payments only). If permitted, you may enter a lower rate on line 2 (including "-0-") if you want less than the 10% default rate withheld from your payment. If you have already paid, or plan to pay, your tax on this payment through other withholding or estimated tax payments, you may want to enter "-0-".

Suggestion for determining withholding. Consider using the Marginal Rate Tables on page 1 to help you select the appropriate withholding rate for this payment or distribution. The tables are most accurate if the appropriate amount of tax on all other sources of income, deductions, and credits has been paid through other withholding or estimated tax payments. If the appropriate amount of tax on those sources of income has not been paid through other withholding or estimated tax payments, you can pay that tax through withholding on this payment by entering a rate that is greater than the rate in the Marginal Rate Tables.

The marginal tax rate is the rate of tax on each additional dollar of income you receive above a particular amount of income. You can use the table for your filing status as a guide to find a rate of withholding for amounts above the total income level in the table.

To determine the appropriate rate of withholding from the table, do the following. Step 1: Find the rate that corresponds with your total income not including the payment. Step 2: Add your total income and the taxable amount of the payment and find the corresponding rate.

If these two rates are the same, enter that rate on line 2. (See Example 1 below.)

If the two rates differ, multiply (a) the amount in the lower rate bracket by the rate for that bracket, and (b) the amount in the higher rate bracket by the rate for that bracket. Add these two numbers; this is the expected tax for this payment. To get the rate to have withheld, divide this amount by the taxable amount of the payment. Round up to the next whole number and enter that rate on line 2. (See Example 2 below.)



WITHHOLDING CERTIFICATE FOR NONPERIODIC PAYMENTS AND ELIGIBLE ROLLOVER DISTRIBUTIONS SUBSTITUTE FORM W-4R FOR CASH WITHDRAWALS

SPECIFIC INSTRUCTIONS (CONTINUED)

If you prefer a simpler approach (but one that may lead to overwithholding), find the rate that corresponds to your total income including the payment and enter that rate on line 2.

Examples. Assume the following facts for Examples 1 and 2. Your filing status is single. You expect the taxable amount of your payment to be \$20,000. Appropriate amounts have been withheld for all other sources of income and any deductions or credits.

Example 1. You expect your total income to be \$62,000 without the payment. Step 1: Because your total income without the payment, \$62,000, is greater than \$61,750 but less than \$115,125, the corresponding rate is 22%. Step 2: Because your total income with the payment, \$82,000, is greater than \$61,750 but less than \$115,125, the corresponding rate is 22%. Because these two rates are the same, enter "22" on line 2.

Example 2. You expect your total income to be \$43,700 without the payment. Step 1: Because your total income without the payment, \$43,700, is greater than \$26,200 but less than \$61,750, the corresponding rate is 12%. Step 2: Because your total income with the payment, \$63,700, is greater than \$61,750 but less than \$115,125, the corresponding rate is 22%. The two rates differ. \$18,050 of the \$20,000 payment is in the lower bracket (\$61,750 less your total income of \$43,700 without the payment), and \$1,950 is in the higher bracket (\$20,000 less the \$18,050 that is in the lower bracket). Multiply \$18,050 by 12% to get \$2,166. Multiply \$1,950 by 22% to get \$429. The sum of these two amounts is \$2,595. This is the estimated tax on your payment. This amount corresponds to 13% of the \$20,000 payment (\$2,595 divided by \$20,000). Enter "13" on line 2.

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to provide this information only if you want to (a) request additional federal income tax withholding from your nonperiodic payment(s) or eligible rollover distribution(s); (b) choose not to have federal income tax withheld from your nonperiodic payment(s), when permitted; or (c) change a previous Form W-4R (or a previous Form W-4P that you completed with respect to your nonperiodic payments or eligible rollover distributions). To do any of the aforementioned, you are required by sections 3405(e) and 6109 and their regulations to provide the information requested on this form. Failure to provide this information may result in inaccurate withholding on your payment(s).

Failure to provide a properly completed form will result in your payment(s) being subject to the default rate; providing fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. commonwealths and territories for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.



To get started, simply complete the following sections, and return with the appropriate documentation as listed below. Please send your signed and completed form to Nuveen Funds per the Return Completed Forms section below or in the enclosed customer reply envelope. If you have any questions regarding completion of this form, please contact Nuveen Funds at 800-257-8787.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ENTITY ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify and record information about the “beneficial owners” of business applicants. Businesses can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, fraud, and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforcement investigate and prosecute these crimes.

What this means for you: This form requires you to provide the name, address, date of birth and Social Security number (or passport number or other similar information, in the case of non-U.S. persons) for the such individuals (i.e., the **beneficial owners**). This information will be verified to ensure the identity of all individuals opening a mutual fund account. Until you provide the information we need, we may not be able to open an account or effect any transactions for you.

DEFINING OWNERSHIP

- **Beneficial owner:** Any natural person who, directly or indirectly, owns 25% or more of the legal entity customer.
- **Control person:** An individual with significant responsibility to control, manage, or direct the legal entity. This includes a member of the organization with control (including chief executive officer, chief financial officer, chief operating officer, managing member, general partner, president, vice president, or treasurer) and a controlling stake in the organization.

This form requires you to provide the information mentioned above for all of the entity’s beneficial owners, including individuals in a control role in the organization.

The number of individuals that satisfy this definition of “beneficial owner” may vary. Under Section 3, depending on the factual circumstances, up to four individuals (but as few as zero) may need to be identified. Regardless of the number of individuals identified under Section 3, you must provide the identifying information of one individual under Section 2. It is possible that in some circumstances, the same individual might be identified under both sections (e.g., the president of Acme, Inc., who is a controlling person may also be a beneficial owner by holding 30% equity interest in the company). Thus, a completed form will contain the identifying information of at least one individual under Section 2, and up to four individuals in Section 3.

Please note this form must be completed along with the appropriate Nuveen Funds Account Application or Adoption Agreement.

Please contact Nuveen Funds at 800-257-8787, if you need assistance obtaining one of these forms:

- Nuveen Funds Account Application (F11154)
- Nuveen Funds Account Application (Non-Retail Class Only) (F11488)
- Nuveen Funds Account Application Advisor Funds (F11624)
- Nuveen Funds Traditional and Roth IRAs New Account Form/Adoption Agreement (F11153)

RETURN COMPLETED FORM(S) TO:

Please return ALL numbered pages, including any pages you did not need to complete.

STANDARD MAIL:
Nuveen Funds
P.O. Box 219140
Kansas City, MO 64121-9140

OVERNIGHT:
Nuveen Funds
801 Pennsylvania Ave
Suite 219140
Kansas City, MO 64105-1307



1. INDIVIDUAL OPENING THE ACCOUNT ON BEHALF OF THE LEGAL ENTITY (REQUIRED)

A. NAME AND TITLE OF NATURAL PERSON OPENING THE ACCOUNT (Must provide signature in box under Certification Section 4)

Prefix	First Name	MI	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Social Security Number/ Taxpayer Identification Number	Date of Birth (mmddyyyy)	Entity Role
<input type="text"/>	<input type="text"/>	<input type="text"/>

Mailing Address	City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

B. LEGAL ENTITY INFORMATION (for which the Account is being opened)

Name of Entity
<input type="text"/>

Entity's Mailing Address	City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

<input type="checkbox"/> Please check this box if you are updating the information in Section 2 or Section 3, and fill in the existing account number.	Account Number
	<input type="text"/>

2. CONTROL PERSON (REQUIRED)

An individual must be named here.

Name of Control Person (First, MI, Last)	Date of Birth (mm/dd/yyyy)	Social Security Number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Residential Address	City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Citizenship For foreign owners, one of the following must be provided: Alien ID or passport number with country of issuance along with a photocopy of the ID.

<input type="checkbox"/> U.S.	<input type="checkbox"/> Resident Non-U.S. Citizen	<input type="checkbox"/> Nonresident Non-U.S. Citizen	<input type="text"/>	(Specify country)
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Non-U.S. Citizen ID or Passport Number
<input type="text"/>



3. BENEFICIAL OWNER INFORMATION (REQUIRED)

Any individual who, directly or indirectly, owns 25% or more of the equity interest of the legal entity named above. (If no individual meets this definition, please write "Not Applicable.")

A. Name (First, MI, Last) **Date of Birth (mm/dd/yyyy)** / / **Social Security Number**
Residential Address **City** **State** **Zip Code**

Citizenship For foreign owners, one of the following must be provided: Non-U.S. Citizen ID or passport number with country of issuance along with photocopy of ID.

U.S. Resident Non-U.S. Citizen Nonresident Non-U.S. Citizen (Specify country)

Non-U.S. Citizen ID or Passport Number

B. Name (First, MI, Last) **Date of Birth (mm/dd/yyyy)** / / **Social Security Number**
Residential Address **City** **State** **Zip Code**

Citizenship For foreign owners, one of the following must be provided: Non-U.S. Citizen ID or passport number with country of issuance along with photocopy of ID.

U.S. Resident Non-U.S. Citizen Nonresident Non-U.S. Citizen (Specify country)

Non-U.S. Citizen ID or Passport Number

C. Name (First, MI, Last) **Date of Birth (mm/dd/yyyy)** / / **Social Security Number**
Residential Address **City** **State** **Zip Code**

Citizenship For foreign owners, one of the following must be provided: Non-U.S. Citizen ID or passport number with country of issuance along with photocopy of ID.

U.S. Resident Non-U.S. Citizen Nonresident Non-U.S. Citizen (Specify country)

Non-U.S. Citizen ID or Passport Number

D. Name (First, MI, Last) **Date of Birth (mm/dd/yyyy)** / / **Social Security Number**
Residential Address **City** **State** **Zip Code**

Citizenship For foreign owners, one of the following must be provided: Non-U.S. Citizen ID or passport number with country of issuance along with photocopy of ID.

U.S. Resident Non-U.S. Citizen Nonresident Non-U.S. Citizen (Specify country)

Non-U.S. Citizen ID or Passport Number



4. CERTIFICATION (REQUIRED)

I hereby certify, as the natural person opening the account, to the best of my knowledge, that the information provided above is complete and correct. Further, I agree to notify Nuveen Funds immediately in writing of any changes in the beneficial ownership interest of the above referenced organization.

By signing this form, investor(s) acknowledges that neither Nuveen Funds nor any affiliate or service provider to Nuveen Funds has provided the investor(s) with advice, recommendations or suggestions as to any specific investment decisions. Investors in Nuveen Funds are urged to consult their own advisors before making investment-related decisions, including but not limited to, those related to transfer or rollover from retirement plans, purchase or sale of investments, selection or retention of investment managers, or selection of account beneficiaries.

Under penalties of perjury, I certify that: (1) The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and (3) I am a U.S. citizen or other U.S. person; and (4) the FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

PRIMARY AUTHORIZED INDIVIDUAL

Your Signature

Today's Date (mm/dd/yyyy)

 / / 20
CHECKLIST

Remember to:

- Complete Section 1 with individual and entity information.
- Complete Section 2 with controlling party information.
- Complete Section 3 with beneficial owner information.
- Complete the certification in Section 4.
- Complete the appropriate new Account Application and Adoption Agreement and mail in with this form.
- Include any supporting documentation required.
- Make a copy of this form for your records.
- Please contact Nuveen Funds with any questions at 800-257-8787.

