

Please send your signed and completed application to Nuveen Funds per the Return Completed Forms section below or in the enclosed postage-paid business-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. Check ONE box only.

- |   |   |
|---|---|
| <input type="checkbox"/> Individual   | <input type="checkbox"/> Transfer on Death (TOD) (select one) <input type="checkbox"/> Individual <input type="checkbox"/> Joint<br>(add your beneficiary designation in section 11.)                                     |
| <input type="checkbox"/> Joint Account (Joint Owners have rights of survivorship unless you indicate otherwise.)                                      | <input type="checkbox"/> Estate   |
| <input type="checkbox"/> Uniform Gifts to Minors (UGMA) or Uniform Transfers to Minors (UTMA) State <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> Trusts (Please attach the initial page(s) of the trust agreement identifying the parties to the trust and the signature page(s). Foreign trusts are not permitted to have shareholder accounts.) |

If you are opening any of the accounts in the section below, you must complete the included Nuveen Funds Legal Entity Beneficial Ownership Certification F40214 in order for the account to be established.

- |  |   |
|--|---|
| <input type="checkbox"/> Corporation (A copy of the certified articles of incorporation and business license of the corporation must be attached. Please also select S or C Corporation below.)<br><input type="checkbox"/> S Corporation <input type="checkbox"/> C Corporation | <input type="checkbox"/> Statutory Trust (The initial page(s) of the trust agreement identifying the parties to the trust, the date, and the signature page(s) must be attached.) |
| <input type="checkbox"/> Limited Liability Company   | <input type="checkbox"/> Nonprofit, Foundation or Other 501(c)(3) (Copy of the articles of incorporation must be attached.)   |
| <input type="checkbox"/> Partnership (Copy of the partnership agreement must be attached.)   | <input type="checkbox"/> Unincorporated Association   |
|  | <input type="checkbox"/> Other If you select other, please specify and include any other applicable documents.:   |

Check below if exempt from verification due to:

- |  |   |
|--|---|
| <input type="checkbox"/> Financial institution regulated by a federal functional regulator | <input type="checkbox"/> Bank regulated by a state bank regulator |
| <input type="checkbox"/> Publicly traded corporation Ticker/Symbol <input type="text"/>    | <input type="checkbox"/> Sole Proprietorship                      |

Name of Individual, Custodian (one per account), Entity, or Trust

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

Name of Entity or Trust

Social Security Number/

Taxpayer Identification Number

Date of Birth (mmddyyyy)



(Continued)



**1. ACCOUNT REGISTRATION (REQUIRED) (CONTINUED)****Name of Individual, Custodian** (one per account), **Entity, or Trust** (continued)

Address (If the below address is a P.O. Box, you must also provide a street address)

City

State

Zip Code

Address Street or P.O. Box (APO and FPO addresses will be accepted)

City

State

Zip Code

Are you an existing Nuveen Funds Shareholder? ☐ Yes ☐ No

If yes, please list ONE of your Nuveen Funds' Account Numbers

**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

Primary Phone Number

Phone Number Type

☐

Mobile

☐

Home

☐

Business

Secondary Phone Number

Phone Number Type

☐

Mobile

☐

Home

☐

Business

Alternate Phone Number

Phone Number Type

☐

Mobile

☐

Home

☐

Business

Email Address

**Check One:**☐

Name of Joint Owner, Minor (one per account)

☐

Trustee(s)

☐

Entity (Authorized Signer)

☐

Executor

For additional trustees, or executors, please attach a separate piece of paper.

Prefix

First Name

MI

Last Name

Role of Entity - Authorized Signer

Social Security Number/  
Taxpayer Identification Number

Date of Birth (mm/dd/yyyy)

(Continued)



**1. ACCOUNT REGISTRATION (REQUIRED) (CONTINUED)****Joint Owner, Minor, Trustee(s) Mailing Address** (Only required if different from owner's street address)

Address Street or P.O. Box (APO and FPO addresses will be accepted)

City

State

Zip Code

Address (If the above address is a P.O. Box, you must also provide a street address)

City

State

Zip Code

**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

Primary Phone Number

Phone Number Type

☐

Mobile

☐

Home

☐

Business

Secondary Phone Number

Phone Number Type

☐

Mobile

☐

Home

☐

Business

Alternate Phone Number

Phone Number Type

☐

Mobile

☐

Home

☐

Business

Email Address

**Broker-Dealer Information**

Broker-Dealer

Branch Number (if known)

Representative Number (if known)

Financial Advisor Name

Financial Advisor Street Address

City

State

Zip Code

Financial Advisor Telephone Number

Financial Advisor Email Address



## 2. INITIAL INVESTMENT

Be sure to read the current prospectuses carefully before investing. The minimum investment per fund is \$2,500 unless you plan to participate in our Automatic Investment Plan. (See Section 9.) The minimum initial investment for a UGMA or UTMA account is also \$2,500 per fund. Please indicate below the amount to be invested per fund.

### A CLASS

FUND NAME (FUND CODE)	AMOUNT	PERCENT	FUND NAME (FUND CODE)	AMOUNT	PERCENT
Nuveen 5-15 Year Laddered Tax Exempt Bond Fund (98)	\$ <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"/> %
Nuveen All-American Municipal Bond Fund (1167)	\$ <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"/> %
Nuveen Arizona Municipal Bond Fund (5002)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %	Nuveen Global Dividend Growth Fund (3037)	\$ <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"/> %	Nuveen Global Equity Income Fund (1759)	\$ <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"/> %	Nuveen Global Infrastructure Fund (6725)	\$ <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"/> %	Nuveen Global Real Estate Securities Fund (7270)	\$ <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"/> %	Nuveen Green Bond Fund (2608)	\$ <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"/> %	Nuveen High Yield Fund (95)	\$ <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"/> %	Nuveen High Yield Income Fund (5055)	\$ <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"/> %	Nuveen High Yield Municipal Bond Fund (5000)	\$ <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"/> %	Nuveen Inflation Linked Bond Fund (90)	\$ <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"/> %	Nuveen Intermediate Duration Municipal Bond Fund (1170)	\$ <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"/> %	Nuveen International Bond Fund (2957)	\$ <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"/> %	Nuveen International Dividend Growth Fund (5068)	\$ <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"/> %	Nuveen International Equity Fund (61)	\$ <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"/> %	Nuveen International Opportunities Fund (49)	\$ <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"/> %	Nuveen International Responsible Equity Fund (2762)	\$ <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"/> %	Nuveen International Value Fund (1159)	\$ <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"/> %	Nuveen Kansas Municipal Bond Fund (5007)	\$ <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"/> %	Nuveen Kentucky Municipal Bond Fund (5008)	\$ <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"/> %	Nuveen Large Cap Growth Fund (68)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %

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

\*\* Effective 2/28/25 the following name change was made: Nuveen Mid Cap Growth Opportunities Fund was renamed Nuveen Small/Mid Cap Growth Opportunities Fund.

† Effective 3/1/25 Nuveen Mid Cap Growth Fund was renamed to Nuveen Quant Mid Cap Growth Fund.

†† Effective 7/1/25 Mid Cap Value 1 Fund was renamed to Nuveen Mid Cap Value Opportunities Fund.

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**2. INITIAL INVESTMENT (CONTINUED)****A CLASS**

FUND NAME (FUND CODE)	AMOUNT	PERCENT	FUND NAME (FUND CODE)	AMOUNT	PERCENT
Nuveen Large Cap Responsible Equity Fund (62)*	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %	Nuveen Multi Cap Value Fund (1157)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %
Nuveen Large Cap Select Fund (2605)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %	Nuveen Nebraska Municipal Bond Fund (5022)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %
Nuveen Large Cap Value Fund (85)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %	Nuveen New Jersey Municipal Bond Fund (5013)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %
Nuveen Large Cap Value Opportunities Fund (5034)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %	Nuveen New Mexico Municipal Bond Fund (5014)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %
Nuveen Lifecycle Retirement Income Fund (70)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %	Nuveen New York Municipal Bond Fund (5015)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %
Nuveen Lifestyle Aggressive Growth Fund (94)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %	Nuveen North Carolina Municipal Bond Fund (5016)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %
Nuveen Lifestyle Conservative Fund (78)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %	Nuveen Ohio Municipal Bond Fund (5017)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %
Nuveen Lifestyle Growth Fund (93)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %	Nuveen Oregon Intermediate Municipal Bond Fund (6779)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %
Nuveen Lifestyle Income Fund (77)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %	Nuveen Pennsylvania Municipal Bond Fund (5018)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %
Nuveen Lifestyle Moderate Fund (79)	\$ <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"/> %
Nuveen Limited Term Municipal Bond Fund (5001)	\$ <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"/> %
Nuveen Louisiana Municipal Bond Fund (5009)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %	Nuveen Quant Mid Cap Growth Fund (86)†	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %
Nuveen Managed Allocation Fund (99)	\$ <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"/> %
Nuveen Maryland Municipal Bond Fund (5010)	\$ <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"/> %
Nuveen Massachusetts Municipal Bond Fund (5011)	\$ <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"/> %
Nuveen Michigan Municipal Bond Fund (5012)	\$ <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"/> %
Nuveen Mid Cap Value Opportunities Fund (6786)††	\$ <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"/> %
Nuveen Mid Cap Value Fund (87)	\$ <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"/> %
Nuveen Minnesota Intermediate Municipal Bond Fund (6804)	\$ <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"/> %
Nuveen Minnesota Municipal Bond Fund (6484)	\$ <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"/> %
Nuveen Missouri Municipal Bond Fund (1186)	\$ <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"/> %
Nuveen Money Market Fund (63)	\$ <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"/> %

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

\*\* Effective 2/28/25 the following name change was made: Nuveen Mid Cap Growth Opportunities Fund was renamed Nuveen Small/Mid Cap Growth Opportunities Fund.

† Effective 3/1/25 Nuveen Mid Cap Growth Fund was renamed to Nuveen Quant Mid Cap Growth Fund.

†† Effective 7/1/25 Mid Cap Value 1 Fund was renamed to Nuveen Mid Cap Value Opportunities Fund.

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**2. INITIAL INVESTMENT (CONTINUED)****A CLASS**

FUND NAME (FUND CODE)	AMOUNT	PERCENT	FUND NAME (FUND CODE)	AMOUNT	PERCENT
Nuveen Small Cap Growth Opportunities Fund (2454)	\$ <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"/> %
Nuveen Small Cap Select Fund (5061)	\$ <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"/> %
Nuveen Small Cap Value Fund (6740)	\$ <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"/> %
Nuveen Small Cap Value Opportunities Fund (5028)	\$ <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"/> %
Nuveen Small/Mid Cap Growth Opportunities Fund (6449)**	\$ <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"/> %
Nuveen Small/Mid Cap Value Fund (5037)	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %	<b>Total Amount or Percentage</b>	\$ <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %

Please indicate payment method below (U.S. dollars only):

Wire Date (mm/dd/yyyy)

☐ Check made payable to Nuveen Funds
 ☐ Wire assets directly. (See prospectuses for instructions.)
   /   / 20  
☐ Payment from other Nuveen account: (Payments under \$2,500 will be returned.)

☐ Existing Mutual Fund account number 

(Complete the Redemption and Transfer Form for Non-IRA Accounts F11416)

☐ Existing other Nuveen account 

(Please complete required paperwork and direct funds to the new account.)

**Please note:** Third-party checks can be accepted for subsequent purchases only and if \$10,000 or less. Cashier's checks can be accepted if \$10,000 or less. All purchases must be in U.S. dollars and all checks must be drawn on U.S. banks. Nuveen Funds will not accept payment in the following forms: traveler's checks, money orders, credit card convenience checks, cash, counter checks, virtual currency (such as Bitcoin), or starter checks. Nuveen Funds will not accept corporate checks for investment into noncorporate accounts.

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\*\* Effective 2/28/25 the following name change was made: Nuveen Mid Cap Growth Opportunities Fund was renamed Nuveen Small/Mid Cap Growth Opportunities Fund.

† Effective 3/1/25 Nuveen Mid Cap Growth Fund was renamed to Nuveen Quant Mid Cap Growth Fund.

†† Effective 7/1/25 Mid Cap Value 1 Fund was renamed to Nuveen Mid Cap Value Opportunities Fund.



### 3. COST BASIS ELECTION METHOD (CHOOSE ONE.)

Please select **one** of the cost basis determination methods from the list below. If you do not select an option, the Funds' default method of Average Cost will be recorded as your Cost Basis Method. If you select the Specific Lot Identification method, you are required to select a secondary cost basis method; otherwise, you will be defaulted into First In First Out as your secondary cost basis method.

- ☐ **ACST – Average Cost:** A method that calculates the gain/loss by adding up the number of shares owned as well as the total dollar amount of the shares; the dollar amount is divided by the number of shares. The average price of covered securities is calculated separately from noncovered securities, as if they were in two accounts.
- ☐ **FIFO – First In First Out:** A standing order to sell the oldest shares in the account first.
- ☐ **LIFO – Last In First Out:** A standing order to sell the newest shares in the account first.
- ☐ **HCFO – High Cost First Out:** A standing order to sell the most expensive shares in the account first.
- ☐ **LCFO – Low Cost First Out:** A standing order to sell the least expensive shares in the account first.
- ☐ **LGUT – Loss/Gain Utilization:** A method that evaluates losses and gains and then systemically selects lots based on that gain/loss in conjunction with a holding period.
- ☐ **SLID – Specific Lot Identification:** The shareholder designates specific shares for each redemption.

Secondary Reporting Method Required (SLID only)

### 4. DUPLICATE STATEMENTS

Complete this section if you wish someone else to receive copies of your statements.

Please send a duplicate copy of my statement to the address below:

First Name

MI

Last Name

Street Address

City

State

Zip Code

Daytime Telephone Number



## 5. TELEPHONE OPTIONS

These services allow you to invest, redeem or exchange by telephone or web among your identically registered accounts. You will also have access to your account through the Automated Telephone Service (ATS) and the Internet. See the Nuveen Funds prospectuses for details. These services will be automatically added to your account unless you check **No** below.

### 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 8.**

### Telephone Exchange

This option permits exchanges among Nuveen Funds with the same account registrations (\$50 minimum to an existing account/\$2,500 minimum to a new account or UGMA/UTMA account).

### Telephone Redemption

This option lets you redeem shares by telephone. The proceeds may be mailed to your account address, transferred to your bank by ACH, or wired to your bank account (\$5,000 minimum for wire).

For ACH or wire transactions, **please complete Section 8.**

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

## 6. DISTRIBUTION OPTIONS

Unless you choose an option below, all dividends and capital gains will be reinvested. See the prospectuses for other available distribution options.

☐ Dividends in Cash ☐ Capital Gains in Cash ☐ Check to Address on Record ☐ Automated Clearing House (ACH) to Bank on File (Section 8 must be completed.)

**Note:** Whatever option is selected for dividends, short-term capital gains will automatically use the same method.

## 7. CHECK WRITING PRIVILEGES—SIGNATURE CARD FOR MONEY MARKET FUND ONLY

**For Money Market Fund only:** Complete this section for check writing privileges. All Shareholders must sign below. However, only one signature will be required on each check. You can write checks for \$250 or more on your Nuveen Money Market Fund. A checkbook will be mailed to the address on the account 10 days after the account has been established.

**Please note:** You cannot write a check to redeem shares from the Money Market Fund for 10 days after sending us a check or automatic investment plan payment to purchase shares in the fund, or if your Money Market Fund Account does not otherwise have a sufficient balance to support the redemption check.

By signing this form, I agree to all of State Street Bank's checking account rules, and to any conditions and limitations on redeeming shares of the Nuveen Money Market Fund by check, including any described in the Nuveen Mutual Funds prospectus. I also agree that:

- State Street Bank is authorized to effect a redemption of sufficient shares in my account to cover payment of checks drawn upon this account.
- State Street Bank and Nuveen Funds reserve the right to change, revoke or close any checking account, and neither shall incur any liability to me for honoring checks or for effecting redemptions to pay checks, nor for returning checks that have not been accepted.
- The signatures are authentic, and, for organizations, I have submitted an original or certified resolution authorizing the individuals with legal capacity to sign and act on behalf of the organization.

### PLEASE SIGN HERE

Print Name of Owner, Custodian, or Trustee, etc.

Your Signature

Today's Date (mm/dd/yyyy)

 /  / 20

Print Name of Joint Owner or Co-Trustee, etc. (if any)

Your Signature

Today's Date (mm/dd/yyyy)

 /  / 20


## 8. BANK INFORMATION

You must complete this section if you requested Telephone Redemption via ACH or wire, 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.

## 9. 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, the frequency, the first month to begin debiting your account and the time interval. Semimonthly investments occur on both the 1<sup>st</sup> and the 15<sup>th</sup>, while monthly investments occur on either the 1<sup>st</sup> OR 15<sup>th</sup>. It takes up to 10 days to initiate this service.

(Please also complete Section 8.)

FUND NAME AND FUND CODES ARE LISTED IN SECTION 2.

FUND NAME	FUND CODE	DOLLAR AMOUNT	SEMI	MONTHLY	START MONTH	1 <sup>st</sup> MONTH	15 <sup>th</sup> MONTH
<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="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<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="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

## 10. TRUSTED CONTACTS (OPTIONAL)

Trusted contacts are people you know and trust who are at least 18 years of age and whom Nuveen Funds may contact if we have questions about your account, your well-being, or if we suspect you are the victim of fraudulent activity. If this is a joint account, please add respective contacts for each individual. A co-owner of the account should not be a trusted contact. See Section 12 for more information.

### FOR OWNER

First Name of Contact Person

Last Name

Relationship

Date of Birth (mm/dd/yyyy)

Phone Number

Email Address

Mailing Address

City

State

Zip Code

### IF JOINT OWNER

First Name of Contact Person

Last Name

Relationship

Date of Birth (mm/dd/yyyy)

Phone Number

Email Address

Mailing Address

City

State

Zip Code



## 11. DESIGNATE YOUR BENEFICIARIES

**NOTE: Applicable only to Individual or Joint account types, indicated in section 1.**

If there are no surviving contingent beneficiaries at the time of your death, we will transfer ownership of your account to your estate.

When designating beneficiaries, you consent to establishing a Transfer on Death account, and we will transfer ownership of your account to your primary beneficiaries upon your death. Your primary beneficiaries will share equally in your account unless you specify different percentages below. If a primary beneficiary predeceases you, his or her share shall be divided proportionately among the surviving primary beneficiaries. In addition, we will transfer ownership of your account to your contingent beneficiaries only if there are no surviving primary beneficiaries at the time of your death. If a beneficiary should predecease you and you want that beneficiary's share to go to his or her lineal descendants, check "per stirpes." Otherwise, a beneficiary's rights end with the death of that beneficiary, and the estate of a predeceased beneficiary has no claim to or interest in your account. If you do not check "per stirpes" and the beneficiary predeceases you, their share will be divided among surviving beneficiaries (if any).

All percentages must total 100%.

### PRIMARY BENEFICIARY(IES)

I designate the following as my Primary Beneficiary(ies) to receive any amounts due at my death. (Please take note that the Custodian or a joint owner may not be designated as the Beneficiary.) For additional beneficiaries, please attach a separate piece of paper.

#### Lineal Descendants Per Stirpes

☐ Yes, add Per Stirpes (For every beneficiary)

#### PRIMARY BENEFICIARY 1

Prefix	First Name	MI	Last Name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Social Security Number		Date of Birth (mm/dd/yyyy)		Relationship
<input type="text"/>		<input type="text"/>		<input type="text"/>
				Percent <input type="text"/> %
Custodian (If the beneficiary is a minor)			Relationship	
<input type="text"/>			<input type="text"/>	
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"/>
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"/>
Primary Phone Number	Phone Number Type	Secondary Phone Number	Phone Number Type	
<input type="text"/>	<input type="checkbox"/> Mobile <input type="checkbox"/> Home <input type="checkbox"/> Business	<input type="text"/>	<input type="checkbox"/> Mobile <input type="checkbox"/> Home <input type="checkbox"/> Business	
Alternate Phone Number	Phone Number Type	Email Address		
<input type="text"/>	<input type="checkbox"/> Mobile <input type="checkbox"/> Home <input type="checkbox"/> Business	<input type="text"/>		

(Continued)



**11. DESIGNATE YOUR BENEFICIARIES (CONTINUED)****PRIMARY BENEFICIARY 2**

Prefix	First Name	MI	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Social Security Number	Date of Birth (mm/dd/yyyy)	Relationship	Percent
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> %
Custodian (If the beneficiary is a minor)		Relationship	
<input type="text"/>		<input type="text"/>	
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"/>
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"/>
Primary Phone Number	Phone Number Type	Secondary Phone Number	Phone Number Type
<input type="text"/>	<input type="text"/> Mobile <input type="text"/> Home <input type="text"/> Business	<input type="text"/>	<input type="text"/> Mobile <input type="text"/> Home <input type="text"/> Business
Alternate Phone Number	Phone Number Type	Email Address	
<input type="text"/>	<input type="text"/> Mobile <input type="text"/> Home <input type="text"/> Business	<input type="text"/>	

**CONTINGENT BENEFICIARY(IES)**

If none of the Primary Beneficiary(ies) are living on the date of my death, I hereby designate the following as my Contingent Beneficiary(ies) to receive any amounts due. (Please note that the Custodian may not be designated as the Beneficiary.)

**Lineal Descendants Per Stirpes**

☐ Yes, add Per Stirpes (For every beneficiary)

**CONTINGENT BENEFICIARY 1**

Prefix	First Name	MI	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Social Security Number	Date of Birth (mm/dd/yyyy)	Relationship	Percent
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> %
Custodian (If the beneficiary is a minor)		Relationship	
<input type="text"/>		<input type="text"/>	
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"/>
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"/>
Primary Phone Number	Phone Number Type	Secondary Phone Number	Phone Number Type
<input type="text"/>	<input type="text"/> Mobile <input type="text"/> Home <input type="text"/> Business	<input type="text"/>	<input type="text"/> Mobile <input type="text"/> Home <input type="text"/> Business
Alternate Phone Number	Phone Number Type	Email Address	
<input type="text"/>	<input type="text"/> Mobile <input type="text"/> Home <input type="text"/> Business	<input type="text"/>	

(Continued)



**11. DESIGNATE YOUR BENEFICIARIES (CONTINUED)****CONTINGENT BENEFICIARY 2**

Prefix  First Name  MI  Last Name

Social Security Number          Date of Birth (mm/dd/yyyy)   /   /     Relationship  Percent    %

Custodian (If the beneficiary is a minor)  Relationship

Address Street or P.O. Box (APO and FPO addresses will be accepted.)  City  State   Zip Code

Address (If the above address is a P.O. Box, you must also provide a street address.)  City  State   Zip Code

Primary Phone Number  Phone Number Type  Mobile  Home  Business  Secondary Phone Number  Phone Number Type  Mobile  Home  Business

Alternate Phone Number  Phone Number Type  Mobile  Home  Business  Email Address

Percent (Total 100%)

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



**12. SIGNATURES—YOUR SIGNATURE(S) MUST APPEAR TO ESTABLISH THE ACCOUNT**

By signing this form, I certify that I have received, read, and agree to the terms of the prospectuses for the Nuveen Funds. I have the full authority and legal capacity to purchase shares of the Nuveen Funds, am of legal age in my state to purchase such shares, and believe each investment is suitable.

I authorize Nuveen Funds and their agents to act for any service authorized on this Account Application on any instructions that they believe to be genuine and that are received from me or any person claiming to act as my representative who can provide my account registration. The Nuveen Funds use reasonable procedures (including Shareholder identity verification) to confirm that instructions given by telephone are genuine and are not liable for acting on these instructions. If these procedures are not followed, the Nuveen Funds may be liable for losses due to unauthorized or fraudulent transactions.

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.

To request assistance with accessing a prospectus, privacy policy, or business continuity policy please contact us at **800-257-8787** or go to [www.Nuveen.com](http://www.Nuveen.com).

- I agree that the Nuveen Funds can redeem shares from my account(s) to reimburse a Fund for any loss due to nonpayment or lack of money.
- I understand that for joint owner accounts, "I" refers to all Shareholders, and each of the Shareholders agrees that any Shareholder has authority to act on the account without notice to the other Shareholders. Nuveen Funds, in its sole discretion, and for its protection, may require the written consent of all Shareholders prior to acting upon the instructions of any Shareholder.

Corporations or other entities must submit an original or certified resolution authorizing that the individual signing this form has the legal capacity to sign and act on behalf of the corporation/entity.

Trustee(s) Certification: I am/We are the currently acting Trustee(s) and am/are authorized by the trust agreement to purchase shares of the Nuveen Funds. All services are subject to conditions set forth in the Nuveen Funds Prospectuses.

**Note:** Trustee(s) must immediately notify Nuveen Funds if the trust becomes a foreign trust.

(Continued)



This paragraph is only applicable if you added a Trusted Contact in Section 10. I hereby authorize Nuveen Funds and its affiliates ("Nuveen Funds") to contact the person(s) I have listed above ("Contact") in the event Nuveen Funds has questions or concerns regarding my ability to handle my financial affairs (due to health-related matters or otherwise), potentially harmful financial transactions in my accounts or my whereabouts. In order to address any such questions or concerns, when speaking to my Contact, Nuveen Funds is authorized to: i. Share with the Contact nonpublic information about me and all of my investments/accounts/products/contracts held at Nuveen Funds and its affiliates now or in the future (or any other financial information I may have provided to Nuveen Funds), regardless of any previous election I have made under federal, state or other law regarding the sharing of such information; ii. Share with the Contact any concerns and details surrounding my potential financial exploitation; iii. Confirm with the Contact the specifics of my current contact information and/or health status; iv. Discuss with the Contact whether any other person has been designated to act on my behalf (through power of attorney, Executor, Trustee or legal guardian or otherwise); and v. Share information obtained from the Contact with its affiliates. I understand this authorization will remain in effect until I notify Nuveen Funds in writing that I am revoking or amending such authority and Nuveen Funds acknowledges the receipt of such revocation and/or amendment. Except as may be required by FINRA Rule 2165, Nuveen Funds is under no obligation to speak to, write to or otherwise interact with the Contact. Nuveen Funds is not responsible for any action taken by the Contact, and Nuveen Funds will not direct the Contact to take any particular action on my behalf. Nuveen Funds suggests that the named Contact(s) not be someone authorized to transact business on the account, or who is already otherwise able to receive the information described above. By signing, I am affirming that the Trusted Contact(s) listed in this form are at least 18 years old and, to the best of my knowledge, do not work for Nuveen Funds or its affiliates.

If I am a nonresident non-citizen 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

Signature

(Owner, Custodian, Trustee, Executor, Entity (Authorized signer))

Title or Capacity

Today's Date (mm/dd/yyyy)


 /  / 20

Signature (Joint Owner, Co-Trustee, Co-Executor, etc.)

Title or Capacity

Today's Date (mm/dd/yyyy)


 /  / 20

#### 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



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





A TIAA Company

NUVEEN FUNDS  
**LEGAL ENTITY BENEFICIAL  
OWNERSHIP CERTIFICATION FORM**

Page 1 of 3

**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)
-------------------------------	--	---	----------------------	-------------------

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.")

<b>A. Name (First, MI, Last)</b>	<b>Date of Birth (mm/dd/yyyy)</b>	<b>Social Security Number</b>	
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Residential Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**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>B. Name (First, MI, Last)</b>	<b>Date of Birth (mm/dd/yyyy)</b>	<b>Social Security Number</b>	
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Residential Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**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>C. Name (First, MI, Last)</b>	<b>Date of Birth (mm/dd/yyyy)</b>	<b>Social Security Number</b>	
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Residential Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**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>D. Name (First, MI, Last)</b>	<b>Date of Birth (mm/dd/yyyy)</b>	<b>Social Security Number</b>	
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Residential Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**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.

