**NUVEEN FUNDS** 



# COVERDELL EDUCATION SAVINGS ACCOUNT APPLICATION/ADOPTION AGREEMENT

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To get started, simply complete the following sections. The terms of the account are contained in the document titled *Coverdell Education*Savings Account Disclosure Statement and Custodial Account Agreement. This form cannot be used to establish a Nuveen Funds Traditional IRA or Roth IRA, or to convert a Traditional IRA to a Roth IRA.

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)

A Student Information

In Section A below, provide the requested information about the Student for whose benefit the Coverdell Education Savings Account (Coverdell ESA) is being opened. The Student must be under age 18 or a Special Needs Student for an Annual Contribution Coverdell ESA, or under age 30 or a Special Needs Student for a Rollover or Transfer from another Coverdell ESA. In Section B, provide the requested information about the Parent or Legal Guardian who will control the account on behalf of the Student. In Section C below, provide the requested information about the Donor who is making the contribution to the account. The Student, Parent/Legal Guardian or anyone else who meets the applicable income limits can be the Donor.

Prefix F	First Name		MI	Last Name		
	not reality			Lust Humb		
Social Security Taxpaver Identi	Number/ fication Number	Date of Birth (mm/dd/yyyy	)			
Citizenship For	foreign accounts, one of the	e following must be provided: nonresident IC	or pass	sport number with country of issua	nce along with pho	tocopy of ID.
U.S.	Resident Non-U.S. Cit	izen Nonresident Non-U.S. C	itizen			(Specify country.)
		Nonresident ID or Pass	port Nu	ımber		
Student's Maili	ing Address					
Address Street	or P.O. Box (APO and FF	O addresses will be accepted.)	City	<b>y</b>	State	Zip Code
Address (If the a	above address is a P.O. Box	you must also provide a street address.)	City	У	State	Zip Code
Daytime Phone	Number	Evening Phone Number	Ema	il Address		

(Continued)

TFDIA A11751 (06/25)



#### 1. ACCOUNT REGISTRATION (REQUIRED) (CONTINUED) B. Parent/Legal Guardian Information (Only one person may be listed) Parent Legal Guardian (If Legal Guardian, submit proof of guardianship.) Prefix First Name MI Last Name Social Security Number/ Date of Birth (mm/dd/yyyy) Taxpayer Identification Number Citizenship For foreign accounts, one of the following must be provided: nonresident 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) Nonresident ID or Passport Number Parent/Legal Guardian's Mailing Address Address Street or P.O. Box (APO and FPO addresses will be accepted.) City Zip Code State 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 Secondary Phone Number Phone Number Type Mobile Home **Business** Mobile Home **Business** Alternate Phone Number **Email Address** Phone Number Type Mobile Home **Business** C. Donor Information (If Donor is the Parent/Legal Guardian set forth in Section B, do not complete this section.) Prefix First Name MI Last Name Social Security Number Date of Birth (mm/dd/yyyy) **Donor's Mailing Address** Address Street or P.O. Box (APO and FPO addresses will be accepted.) City State Zip Code City State Zip Code Address (If the above address is a P.O. Box, you must also provide a street address.) **Daytime Phone Number Evening Phone Number Email Address**



# 1. ACCOUNT REGISTRATION (REQUIRED) (CONTINUED) D. Broker-Dealer Information Broker-Dealer Branch Number (if known) Representative Number (if known) Financial Advisor Name Financial Advisor Street Address City Zip Code State Financial Advisor Telephone Number Financial Advisor Email Address 2. INVESTMENT ALLOCATION Be sure to read the current prospectuses carefully before investing. The maximum annual investment under the law is \$2,000, and the minimum investment to open a Coverdell ESA is \$2,000. Please make check payable to Nuveen Funds. FUND NAMES AND FUND CODES ARE LISTED IN SECTION 3. **FUND NAME FUND CODE** CONTRIBUTION FOR CURRENT YEAR

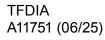
\$

This contribution does not exceed the maximum permitted amount as described in the Coverdell ESA Disclosure Statement.

### 3. ROLLOVER OR TRANSFER OF EXISTING COVERDELL ESA

Be sure to read the current prosp	ectuses carefully	before investing.			
Direct transfer of existing Cov Complete the separate Cove and return it with this form.			Check the box below that desc Student in Section 1 above an ESA. The person in Section 1 is	d the Student in th	•
	ovieting Coverde	II FCA within 60	Same Person C	hild or Stepchild	Sibling
Rollover of distribution from days after distribution The requirements for a valid	_		Child of Sibling Pa	arent	First Cousin
Coverdell ESA Disclosure Sta			Stepparent 0	ther	
Check enclosed for \$			Spouse of One of the Fore	going	
For rollover distributions only. Please	do not complete th	is section for a direct	transfer of assets from another Coverc	lell ESA. Use the Dire	ct Asset Transfer Form.
Please check here to set thi	s allocation for fu	ıture investments uı	nless other instructions are receive	ed.	
A CLASS					
FUND NAME (FUND CODE)	AMOUNT	PERCENT	FUND NAME (FUND CODE)	AMOUNT	PERCENT
Nuveen 5-15 Year Laddered Tax Exempt Bond Fund (98)	\$		Nuveen Dividend Value Fund (6759)	\$	<u> </u>
Nuveen All-American Municipal Bond Fund (1167)	\$		Nuveen Emerging Markets Debt Fund (2794)	\$	%
Nuveen Arizona Municipal Bond Fund (5002)	\$		Nuveen Emerging Markets Equity Fund (67)	\$	%
Nuveen Bond Index Fund (91)	\$		Nuveen Emerging Markets Equity Index Fund (69)	\$	%
Nuveen California High Yield Municipal Bond Fund (1780)	\$		Nuveen Equity Index Fund (65)	\$	%
Nuveen California Municipal Bond Fund (5003)	\$		Nuveen Equity Long/Short Fund (5044)	\$	%
Nuveen Colorado Municipal Bond Fund (5004)	\$		Nuveen Flexible Income Fund (5052)	\$	%
Nuveen Connecticut Municipal Bond Fund (5005)	\$	%	Nuveen Floating Rate Income Fund (5064)	\$	%
Nuveen Core Bond Fund (66)	\$		Nuveen Georgia Municipal Bond Fund (5006)	\$	%
Nuveen Core Equity Fund (64)	\$		Nuveen Global Dividend Growth Fund (3037)	\$	%
Nuveen Core Impact Bond Fund (45)	\$		Nuveen Global Equity Income Fund (1759)	\$	%
Nuveen Core Plus Bond Fund (96)	\$		Nuveen Global Infrastructure Fund (6725)	\$	%
Nuveen Credit Income Fund (6942)	\$		Nuveen Global Real Estate Securities Fund (7270)	\$	<u> </u>
Nuveen Dividend Growth Fund (5031)	\$	%	Nuveen Green Bond Fund (2608)	\$	<u></u>

 $<sup>^{\</sup>dagger\dagger}$  Effective 7/1/25 Mid Cap Value 1 Fund was renamed to Nuveen Mid Cap Value Opportunities Fund. (Continued)





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

<sup>\*\*</sup> 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.

 $<sup>^\</sup>dagger\,$  Effective 3/1/25 Nuveen Mid Cap Growth Fund was renamed to Nuveen Quant Mid Cap Growth Fund.

#### 3. ROLLOVER OR TRANSFER OF EXISTING COVERDELL ESA (CONTINUED)

#### A CLASS **FUND NAME (FUND CODE) AMOUNT** PERCENT **FUND NAME (FUND CODE) AMOUNT** PERCENT Nuveen High Yield Fund (95) Nuveen Lifestyle Income Fund (77) \$ \$ Nuveen High Yield Income Fund Nuveen Lifestyle Moderate Fund \$ \$ (5055)Nuveen High Yield Municipal Bond **Nuveen Limited Term** \$ \$ Fund (5000) Municipal Bond Fund (5001) **Nuveen Inflation Linked Bond Fund** Nuveen Louisiana \$ \$ Municipal Bond Fund (5009) **Nuveen Intermediate Duration Nuveen Managed Allocation Fund** % \$ \$ Municipal Bond Fund (1170) (99)**Nuveen International Nuveen Maryland** \$ \$ % **Bond Fund** (2957) Municipal Bond Fund (5010) **Nuveen International Nuveen Massachusetts** \$ % \$ % Dividend Growth Fund (5068) Municipal Bond Fund (5011) **Nuveen International Nuveen Michigan** \$ \$ Equity Fund (61) Municipal Bond Fund (5012) **Nuveen International Nuveen Mid Cap Value** \$ \$ Opportunities Fund (49) Opportunities Fund (6786)†† **Nuveen International** Nuveen Mid Cap Value Fund (87) \$ \$ Responsible Equity Fund (2762) **Nuveen International Nuveen Minnesota Intermediate** % \$ \$ **Value Fund** (1159) Municipal Bond Fund (6804) **Nuveen Kansas** Nuveen Minnesota \$ \$ **Municipal Bond Fund (5007)** Municipal Bond Fund (6484) **Nuveen Kentucky** Nuveen Missouri \$ \$ Municipal Bond Fund (5008) Municipal Bond Fund (1186) **Nuveen Large Cap Growth Fund** \$ Nuveen Money Market Fund (63) \$ (68)**Nuveen Large Cap** Nuveen Multi Cap Value Fund \$ \$ Responsible Equity Fund (62)\* (1157)Nuveen Large Cap Select Fund Nuveen Nebraska \$ % \$ Municipal Bond Fund (5022) (2605)**Nuveen New Jersey** Nuveen Large Cap Value Fund (85) \$ % \$ **Municipal Bond Fund (5013)** Nuveen Large Cap Value **Nuveen New Mexico** % % \$ \$ Opportunities Fund (5034) Municipal Bond Fund (5014) **Nuveen Lifecycle Nuveen New York** \$ \$ Retirement Income Fund (70) Municipal Bond Fund (5015) Nuveen Lifestyle **Nuveen North Carolina** \$ \$ Aggressive Growth Fund (94) Municipal Bond Fund (5016) Nuveen Lifestyle **Nuveen Ohio Municipal Bond** \$ \$ Conservative Fund (78) Fund (5017) **Nuveen Oregon Intermediate** Nuveen Lifestyle Growth Fund (93) \$ \$ Municipal Bond Fund (6779)



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

<sup>\*\*</sup> 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.

<sup>&</sup>lt;sup>†</sup> Effective 3/1/25 Nuveen Mid Cap Growth Fund was renamed to Nuveen Quant Mid Cap Growth Fund.

<sup>&</sup>lt;sup>††</sup> Effective 7/1/25 Mid Cap Value 1 Fund was renamed to Nuveen Mid Cap Value Opportunities Fund. (Continued)

## 3. ROLLOVER OR TRANSFER OF EXISTING COVERDELL ESA (CONTINUED)

A CLASS					
FUND NAME (FUND CODE)	AMOUNT	PERCENT	FUND NAME (FUND CODE)	AMOUNT	PERCENT
Nuveen Pennsylvania Municipal Bond Fund (5018)	\$	%	Nuveen Short Term Municipal Bond Fund (5024)	\$	%
Nuveen Preferred Securities and Income Fund (5040)	\$	%	Nuveen Small Cap Growth Opportunities Fund (2454)	\$	%
Nuveen Quant International Small Cap Equity Fund (2966)	\$	%	Nuveen Small Cap Select Fund (5061)	\$	%
Nuveen Quant Mid Cap Growth Fund (86)†	\$	%	Nuveen Small Cap Value Fund (6740)	\$	%
Nuveen Quant Small Cap Equity Fund (88)	\$	%	Nuveen Small Cap Value Opportunities Fund (5028)	\$	%
Nuveen Quant Small/Mid Cap Equity Fund (2956)	\$	%	Nuveen Small/Mid Cap Growth Opportunities Fund (6449)**	\$	<u> </u>
Nuveen Real Asset Income Fund (6732)	\$	%	Nuveen Small/Mid Cap Value Fund (5037)	\$	%
Nuveen Real Estate Securities Fund $(817)$	\$	%	Nuveen Strategic Income Fund (1345)	\$	<u> </u>
Nuveen Real Estate Securities Select Fund (89)	\$	<u>%</u>	Nuveen Strategic Municipal Opportunities Fund (6992)	\$	<u>%</u>
Nuveen Short Duration High Yield Municipal Bond Fund (5026)	\$	<u>%</u>	Nuveen Virginia Municipal Bond Fund (5019)	\$	<u>%</u>
Nuveen Short Duration Impact Bond Fund (2609)	\$	<u>%</u>	Nuveen Winslow Large-Cap Growth ESG Fund (5049)	\$	<u>%</u>
Nuveen Short Term Bond Fund (97)	\$	%	Nuveen Wisconsin Municipal Bond Fund (5020)	\$	<u>%</u>
Nuveen Short Term Bond Index Fund (2797)	\$	%	Total Amount or Percentage	\$	
Please indicate payment method  Check made payable to Nuve  Wire assets directly. (See pro	een Funds.	.,			
Wire Date (mm/dd/yyyy)	Spectrages for which	iod doctorio.			

Please note: Third-party checks or any check not made payable to Nuveen Funds can be accepted for subsequent purchases only and if less than \$10,000. Cashier's checks can be accepted if less than \$10,000. 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 or starter checks. Nuveen Funds will not accept corporate checks for investment into non-corporate accounts.



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

<sup>\*\*</sup> 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.

<sup>&</sup>lt;sup>†</sup> Effective 3/1/25 Nuveen Mid Cap Growth Fund was renamed to Nuveen Quant Mid Cap Growth Fund.

<sup>&</sup>lt;sup>††</sup> Effective 7/1/25 Mid Cap Value 1 Fund was renamed to Nuveen Mid Cap Value Opportunities Fund.

#### 4. TELEPHONE OPTIONS

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

#### Telephone Exchange

This option permits exchanges among Nuveen Funds with the same account registrations (\$50 minimum to an existing account/\$2,000 minimum to a new fund account).

#### **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).

If you do not want telephone options check this box	No			

#### **5. 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 1st or the 15th. It takes up to 10 days to initiate this service. (Please also complete Section 6.)

FUND NAMES AND FUND CODES ARE LISTED IN SECTION 3.

FUND NAME	FUND CODE	DOLLAR AMOUNT	SEMI MONTHLY	START MONTH	1 <sup>ST</sup> MONTH	15 <sup>™</sup> MONTH
		<b>B</b>				
		\$				
		B				
		<b>B</b>				
		<b>B</b>				
6. BANK INFORMATION  You must complete this section if you re  Type of Account Checking Sa	quested Telephone vings	Purchase or the Automat	ic Investment Plan.			
Name of Primary Bank Account Owner		Name of Jo	int Bank Account Ov	vner		
Bank Name		ABA Routin	g Number			
Bank Phone Number		Bank Accou	ınt Number			

ATTACH A VOIDED BANK CHECK OR PREPRINTED SAVINGS DEPOSIT SLIP.

This will ensure accurate bank information.



#### 7. TRUSTED CONTACTS (OPTIONAL)

FOR OWNER

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. See Section 8 for more information.

First Name of Contact Person	Last Name		Rela	ationship	
Date of Birth (mm/dd/yyyy)	Phone Number		Email Address		
Mailing Address		City		State	Zip Code

#### 8. 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.

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

- 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 tenant 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.



#### 8. SIGNATURES - YOUR SIGNATURE(S) MUST APPEAR TO ESTABLISH THE ACCOUNT (CONTINUED)

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.

This paragraph is only applicable if you added a Trusted Contact in Section 7. 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 person(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. 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.

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	
Signature (Responsible Individual)	Today's Date (mm/dd/yyyy)
	/ 20

#### 9. STUDENT'S RIGHTS

If the Student is a minor under the laws of the Student's state of residence, acceptance by the Custodian of the contribution to this Account is expressly conditioned upon the Parent's (identified above in Section 1) agreement to be responsible for all requirements of the Student, and to exercise the powers and duties of the Student with respect to the operation of the Account. Upon reaching the age of majority in the state in which the Student then resides, the Student may advise the Custodian in writing (accompanied by such supporting documentation as the Custodian may require) that he or she is assuming sole responsibility to exercise all powers and duties associated with the administration of the Account. Absent such written notice by the Student, the Custodian shall have no responsibility to acknowledge the Student's exercise of such powers and duties of administration.



# RETURN COMPLETED FORM(S) TO:

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

STANDARD MAIL: OVERNIGHT:
Nuveen Funds Nuveen Funds
P.O. Box 219140 801 Pennsylvania Ave

Kansas City, MO 64121-9140 Suite 21914

Kansas City, MO 64105-1307

