RECHARACTERIZATION REQUEST FORM - (INTERNAL) BETWEEN CROMWELL FUNDS INDIVIDUAL RETIREMENT ACCOUNTS

Complete when recharacterizing a Traditional or Roth IRA contribution within Cromwell Funds. PARTICIPANT INFORMATION Name: Daytime Telephone: () Address: State: Zip Code: City: Social Security Number: Date of Birth: **RECHARACTERIZATION INSTRUCTIONS** Use this form to recharacterize a Traditional or Roth Individual Retirement Account ("IRA") contribution between Cromwell Funds IRAs. If you do not have an existing Traditional IRA or Roth IRA to invest the recharacterized proceeds, you must complete a Traditional or Roth IRA Application and Adoption Agreement ("Application"). All or part of a contribution you make to your IRA, along with allocable earnings or losses, may be recharacterized and treated as if made to another IRA. For the purpose of the recharacterization, we will calculate the net income attributable ("NIA") to the contribution using the method provided for in the IRS Final Regulations for Earnings Calculation for Returned or Recharacterized Contributions. This method calculates the NIA based on the actual earnings and losses of the IRA during the time it held the contribution. Recharacterization of a contribution is irrevocable and must be completed on or before the due date, including extensions, for filing your federal income tax return for the tax year for which the contribution was originally made. A recharacterized contribution is reported as a distribution from the first IRA (reported on IRS Form 1099-R) and a recharacterization contribution to the second IRA (reported on IRS Form 5498) for the tax year in which the recharacterization occurs. The rules regarding recharacterization are complex and you should consult a professional tax advisor prior to any recharacterization. Please refer to IRS Publication 590-A for more information. This form is not intended to facilitate Roth IRA conversions. TRANSACTION TYPE - Select one of the following: (A or B) Recharacterize my annual contribution (plus allocable earnings) from my Traditional IRA to a Roth IRA. _____ Amount to Recharacterize: \$_____ From: Traditional IRA Account Number: _____ To: Roth IRA Account Number: _____ or Application attached Recharacterize my <u>annual contribution</u> (plus allocable earnings) from my Roth IRA to a Traditional IRA. Date of Contribution: _____ Amount to Recharacterize: \$_____ From: Roth IRA Account Number: _____ To: Traditional IRA Account Number: _______ or ___ Application attached

RECHARACTERIZATION REQUEST FORM - (INTERNAL) continued

Pittsburgh, PA 15253-4498

DISTRIBUTE RECHARA	ACTERIZED AMOUNTS FROM	THE FOLLOWING FUNDS:		
From:			%	
From:			%	
From:		Must equ	% al 100%	
REINVEST RECHARAC	TERIZED PROCEEDS INTO THI	FOLLOWING FUNDS:		
To:			%	
To:			%	
To:		Must equ	% al 100%	
CERTIFICATION AND	SIGNATURE			
Participant authorized to r given to me by the Custoc Custodian may conclusive consequences which may	nake this election and that all inform lian, Cromwell Funds, or any agent o y rely on this certification and auth arise from the election and agree	ation provided on this form is true and accur of either of them, and that all decisions regal orization without further investigation or ind	this recharacterization request. I certify that ate. I further certify that no tax or legal adviceding the elections made on this form are my quiry. I expressly assume responsibility for are ir agents shall in no way be responsible, and	e has been own. The ny adverse
I have read and understan	d and agree to be legally bound by t	he terms of this form.		
Participant's Signature:		Date:		
Mail to the following:	First Class Mail: Cromwell Funds P.O. Box 534498	Overnight Mail: Cromwell Funds ATTENTION: 534498	Customer Service: 1-855-625-7333	

500 Ross Street 154-0520 Pittsburgh, PA 15262