

IRA Conversion and Recharacterization Request Form



Complete this form to (a) convert your Traditional IRA to a new or existing Roth IRA or (b) recharacterize your contribution to a Traditional IRA.

Note: Effective January 1, 2018, a conversion from a Traditional, SEP, or SIMPLE IRA to a Roth IRA cannot be recharacterized. See IRS Publication 590-A for details.

Please complete all applicable fields using blue or black ink, and print clearly in capital letters.

1. Investor Information

<input type="text"/> Full Legal Name (First, MI, Last, Suffix)		<input type="text"/> Social Security or Tax ID Number	<input type="text"/> Date of Birth
<input type="text"/> Daytime Phone Number	<input type="text"/> Evening Phone Number	<input type="text"/> Email Address	

2. Account Allocation Information

Indicate below how the conversion or recharacterization amount should be allocated from your fund(s).

Fund Name and Share Class or Fund Number	Full Account Number	Amount (\$ or %)
<input type="text"/>	<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="text"/>	<input type="text"/>	<input type="checkbox"/> \$ <input type="checkbox"/> % <input type="text"/>

3. Type and Method of Distribution

Convert Traditional IRA to a Roth IRA

Convert: All shares Dollar Amount \$ Percentage %

To: A new Roth IRA (Complete and return an IRA New Account Application)

My existing Roth IRA below*

<input type="text"/>	<input type="text"/>
Fund Name and Share Class or Fund Number	Full Account Number

*I understand that commingling conversion assets with other assets is not recommended.

Recharacterize Contribution

Recharacterize my contribution of \$ for tax year from my Roth IRA

To: A new Traditional IRA (Complete and return an IRA New Account Application)

My existing Traditional IRA below

<input type="text"/>	<input type="text"/>
Fund Name and Share Class or Fund Number	Full Account Number

4. Federal Income Tax Withholding

The default Federal income tax withholding is 10%. If you would like to choose a withholding percentage other than the default, please complete IRS Form W-4R or contact a Client Service Representative.

Note: If you choose a withholding percentage (percentage must be a whole number) that is different from the default withholding rate, your instructions apply to a one-time distribution or remain in effect for a systematic withdrawal plan until you change them. If you choose that Federated Hermes withhold no Federal income tax, you may be responsible for payment of estimated tax. Under the estimated tax rules, you may incur penalties if your withholding/estimated tax payments are not sufficient.

5. State Income Tax Withholding

Certain states require withholding from retirement distributions. If you are a resident of one of the mandatory withholding states and elect to have Federal income tax withheld, the Custodian will automatically withhold the required amount of state tax.

Other states allow voluntary withholding from retirement distributions. To elect voluntary withholding, check the box below and indicate the amount you want withheld.

Please withhold \$ from each distribution and apply it to my state tax.

Note: You may waive Federal income tax withholding and still elect state income tax withholding.

6. Acknowledgements and Signature Authorization

By signing below, you:

- Assume full responsibility for all tax consequences of your elections.
- Agree that neither UMB Bank, n.a., Federated Securities Corp., the Funds, their transfer agent, nor their respective officers, directors, or affiliates will be responsible for the authenticity of any instructions, provided reasonable processes are used to confirm the instructions are genuine, and will be fully indemnified and held harmless from any and all direct and indirect liabilities, losses, or costs.

Please sign exactly as your name appears in the account registration.

Investor Signature

____|____|____|____|____|____|____|____|

Date

7. Mailing Instructions

Please mail this form and any additional documentation to **The Federated Hermes Funds:**

Regular Mail:

P.O. Box 219318
Kansas City, MO 64121-9318

Overnight Delivery:

430 W 7th Street, Suite 219318
Kansas City, MO 64105-1407