# CROMWELL FUNDS RECHARACTERIZATION REQUEST FORM (EXTERNAL)

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			Cromwell Funds IRA.
com			

#### PARTICIPANT INFORMATION

Name:	Daytime Telephone: ( )		
Address:			
City:	State:	Zip Code:	
Social Security Number:	Date of Birth:		

### **RECHARACTERIZATION INSTRUCTIONS**

Use this form to recharacterize a Traditional or Roth Individual Retirement Account ("IRA") contribution from another custodian or trustee to a Cromwell Funds IRA. 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"). For the purpose of the recharacterization, the custodian should calculate the net income attributable to the contribution using the method provided for in the IRS Final Regulations for Earnings Calculation for Returned or Recharacterized Contributions. 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date, including extensions, for filing your federal income tax return for the tax year for which the contribution was originally made.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 your Cromwell Funds 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)

A. C Recharacterize my annual contribution (plus allocable earnings) from my Traditional IRA to a Cromwell Funds Roth IRA.

Date of Contribution: \_\_\_\_\_\_ Amount to Recharacterize: \$\_\_\_\_\_

B. Recharacterize my annual contribution (plus allocable earnings) from my Roth IRA to a Cromwell Funds Traditional IRA.

Date of Contribution: \_\_\_\_\_ Amount to Recharacterize: \$\_\_\_\_

# INVESTMENT INSTRUCTIONS FOR RECHARACTERIZED PROCEEDS

New Traditional IRA - follow Application investment instructions (or) 🗌 New Roth IRA	- follow Application investment instruction	ns				
Invest the proceeds as follows into my existing IRA: 🔲 Traditional IRA <b>(or)</b> 🗌 Roth IRA						
Account number:						
Fund Name:	Dollar Amount \$	or Percentage	<u>%</u>			
Fund Name:	Dollar Amount \$	or Percentage	%			
Fund Name:	Dollar Amount \$	or Percentage	%			

Must equal 100%

To avoid delays, contact your current custodian to verify their correct address and ask if they require a Medallion Signature Guarantee. Please see the Participant Authorization section for an explanation of the Medallion Signature Guarantee. Please also attach your most recent statement, if possible.

### CURRENT CUSTODIAN AND ACCOUNT INFORMATION

Current Custodian:		Telephone Number: ( )	
Address:			
City:	State:	Zip Code:	
Investment to Recharacterize:			
Distributing Account Type: 🗌 Traditional/Rollover IRA 🗌 Roth	IRA		
Amount to be Distributed: 🛛 Liquidate Entire Account 🗌 Partia	l\$		
For Certificates of Deposit: 🗌 Immediate	ely* 🗌 At Maturity Date		

\*Note: if you wish to have certificates of deposit transferred immediately and they have not matured, you may incur a redemption penalty. We cannot accept requests to convert certificates of deposit more than 60 days before their maturity.

## PARTICIPANT AUTHORIZATION

I authorize the current custodian or trustee of my IRA to distribute the amount indicated for the purpose of recharacterizing it to an IRA with Cromwell Funds and to issue a check as indicated below. I understand it is my responsibility to insure the prompt recharacterization of assets by the current custodian or trustee. I understand that I am solely responsible for all tax consequences and agree that neither Cromwell Funds nor their Custodian shall have responsibility for any tax consequences resulting from my instructions. I authorize Cromwell Funds and BNY Mellon Investment Servicing Trust Company to process this request on my behalf.

I have read this form and understand and agree to be legally bound by the terms of this form. I also understand that the Custodian, Cromwell Funds and their agents will rely on my instructions within this form when accepting my recharacterization contribution. I understand this recharacterization is irrevocable.

#### **Participant's Signature:**

Medallion Signature Guarantee Stamp and Signature (If required by your current custodian or transfer agent): An eligible guarantor is a domestic bank or trust company, securities broker/dealer, clearing agency or savings association that participates in a medallion program recognized by the Securities Transfer Agents Association. The three recognized medallion programs are the Securities Transfer Agents Medallion Program (known as STAMP), Stock Exchanges Medallion Program (SEMP), and the Medallion Signature Program (MSP). A notarization from a notary public is NOT an acceptable substitute for a signature guarantee.

### INTERNAL USE ONLY – RESIGNING CUSTODIAN INSTRUCTIONS

Issue check payable to: BNY Mellon Investment Servicing Trust Company as custodian for the Cromwell Funds Traditional or Roth IRA.

Participant Name:\_

Mail to the following:

First Class Mail: Cromwell Funds P.O. Box 534498 Pittsburgh, PA 15253-4498 Overnight Mail: Cromwell Funds ATTENTION: 534498 500 Ross Street 154-0520 Pittsburgh, PA 15262 Customer Service: 1-855-625-7333

Recharacterization A/C # \_\_\_\_

Date:

Medallion Signature Guarantee Stamp