

Hartford Funds Change of Ownership Form

HARTFORDFUNDS

Our benchmark is the investor.®

Important Notice – The USA PATRIOT Act

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. In some cases, Federal law also requires us to verify and record information that identifies the natural persons who control and beneficially own a legal entity that opens an account.

What this means to you: When you open an account, we will ask for names, addresses, dates of birth, and other information that will allow us to identify you and certain other natural persons associated with the account. This information will be verified to ensure the identity of all such natural persons.

Purpose

To change the account owner; remove, add, or change an existing joint account owner; gift shares to another owner.

Important Notes

Do not use this form for IRA plans with UMB Bank, n.a. as Custodian or for 403(b) plans.

A separate form must be completed for different account registrations and/or transfers to multiple new accounts.

Section A - Current Account Owner Information

Owner Name	Joint Owner (if applicable)		
Telephone Number	Joint Owner's Telephone Number		
Permanent Address (P.O. Boxes not allowed)	City	State	ZIP Code
Mailing Address (if different than permanent address)	City	State	ZIP Code

Section B - Account Information and Amount

Choose one option below.

Account Number: _____

- ☐ Full change of ownership - all funds within the following account number will be changed to the ownership indicated in Section C.
- ☐ Partial change of ownership - the following account, fund(s), and amount(s) will be changed to the ownership indicated in Section C.

Fund Name/Fund Number	Class	Amount Type (select one only)	%, \$, or Number of Shares
		<input type="checkbox"/> All <input type="checkbox"/> % <input type="checkbox"/> \$ <input type="checkbox"/> Shares	
		<input type="checkbox"/> All <input type="checkbox"/> % <input type="checkbox"/> \$ <input type="checkbox"/> Shares	
		<input type="checkbox"/> All <input type="checkbox"/> % <input type="checkbox"/> \$ <input type="checkbox"/> Shares	
		<input type="checkbox"/> All <input type="checkbox"/> % <input type="checkbox"/> \$ <input type="checkbox"/> Shares	
		<input type="checkbox"/> All <input type="checkbox"/> % <input type="checkbox"/> \$ <input type="checkbox"/> Shares	

Note: Beneficiary information and systematic agreements listed on the above fund/accounts will not transfer to the new registration. To designate a new beneficiary, please complete the Transfer on Death Form (MF-10002). To establish a systematic agreement if available, please complete the Automatic Investment Form (MF-10003) or Systematic Withdrawal Plan Form (MF-10011).

Hartford Funds Change of Ownership Form

Section C - New Account Owner Information

Choose one option below:

- ☐ Change the ownership to the person or entity indicated in this section
☐ Add a new joint owner (complete number 4 below, then go to Section E)
☐ Remove the existing joint owner (go to Section E)

1. Individual or Custodian Information

Individual's Name	Individual's Date of Birth	Individual's Social Security Number	
Individual's Citizenship Status <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Resident Alien		Individual's Phone Number	
Individual's Residential Address	City	State	ZIP Code
Individual's Mailing Address (if different from above)	City	State	ZIP Code

2. Trust Accounts

Name of Trust	Tax Identification Number (TIN)	Date of Trust Agreement
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Note: If you are opening an account in the name of a trust you must also complete the Hartford Funds Trustee Certification Form (MF-10092).

3. Corporation, Partnership or LLC Information

Name of Corporation			
Type	<input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> LLC - if LLC was selected, enter the tax classification here: ____ (S=S Corporation, C=C Corporation, P=Partnership, D= Disregarded Entity)		
Tax Identification Number			
Corporation Mailing Address	City	State	ZIP Code

Note: All legal entities are required to complete the Corporate Resolution Form (MF-10103). If you are opening an account for a Limited Liability Company, C Corporation, S Corporation, Partnership, Statutory Trust, or Non-Profit, you must also complete the Legal Entity Beneficial Ownership Certification Form, (MF-10098) and provide a formation document (e.g. Articles of Incorporation) that proves the legal existence of the entity.

4. Joint Owner, Minor or Power of Attorney (POA) Information

Joint Owner's, Minor's or POA's Name	Date of Birth	Social Security Number	
Type	<input type="checkbox"/> Joint Owner <input type="checkbox"/> Minor <input type="checkbox"/> POA		
Citizenship Status <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Resident alien		Phone Number	
Residential Address	City	State	ZIP Code
Mailing Address (if different from above)	City	State	ZIP Code

Section D - Broker Dealer Information

At the time the account is re-registered to you, the broker dealer of record on the former owner's account will not be carried over to the new account(s) unless you check the box below.

☐ I would like to retain the legacy broker dealer of record.

If you do not wish to retain the legacy broker dealer and want to add a new broker dealer, have your broker dealer complete the information below.

Registered Representative's Name	Broker Dealer Name		
Dealer Number	Branch Number		
Branch Street Address	City	State	ZIP Code
Telephone Number	Representative's Number		

Note: If you do not designate a broker dealer, your account will, by default, have No Broker Dealer of Record.

At Hartford Funds, we believe it is important to make informed financial decisions; this is why we believe in the value of advice from a trusted financial professional. We are unable to provide you with investment, tax, legal or any other advice.

Section E - Cost Basis Information

The new account owner is to complete this section.

Internal Revenue Service (IRS) regulations require fund companies that produce 1099-B tax forms to include, among other things, cost basis reporting and holding period information for any new shares purchased on or after January 1, 2012.

1. Cost Basis Methods (review before completing Section E2)

Average Cost (ACST)	Each time you request to remove shares, this method will add the adjusted cost of the shares in the account and divide the total cost by the number of shares to calculate an average cost for each share. Adjustments to cost per share may be due to prior calculations or other transactions. This method averages the cost of uncovered shares separately from covered shares, and will remove all uncovered shares first.
First in, First Out (FIFO)	This method will remove shares based on the order purchased; shares purchased first will be removed first.
Last In, First Out (LIFO)	This method will remove shares based on the order purchased; shares purchased last will be removed first.
High Cost, First Out (HIFO)	This method will remove shares based on the cost per share; shares with the highest cost per share will be removed first.
Low Cost, First Out (LOFO)	This method will remove shares based on the cost per share; shares with the lowest cost per share will be removed first.
Loss/Gain Utilization (LGUT)	This method will remove shares based on the calculated gain or loss per share in the following order: 1. Short-term losses per share, in order of greatest loss per share to least 2. Long-term losses per share, in order of greatest loss per share to least 3. Long-term gains per share, in order of least gain per share to greatest 4. Short-term gains per share, in order of least gain per share to greatest

Hartford Funds Change of Ownership Form

2. Election Method Selection (complete one option below)

Hartford Funds will apply the default cost basis method of Average Cost (ACST) to all funds and accounts you or your agent do not list below.

Hartford Funds cannot offer tax advice. You should consult with a qualified tax advisor to determine the method that makes the most sense for you, or if you have tax questions regarding your account.

When choosing FIFO, LIFO, HIFO, LOFO, or LGUT for your cost basis method, you may override this election by identifying specific lots. Specific lot information must be given to Hartford Funds at the time of the applicable transaction, such as a redemption, exchange, or transfer.

Elect a method for all funds and accounts under the SSN/TIN of the primary owner listed in Section A. This method will also apply to all funds/accounts the primary owner may own in the future.	ACST	FIFO	LIFO	HIFO	LOFO	LGUT
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OR						
Elect a different method for each fund included in this request						
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Note: Please attach a separate piece of paper for additional funds.

Section F - Current Account Owner Acknowledgment and Signature(s)

The signatures of all current account owners must be Medallion Signature Guaranteed. If there is a joint account owner, both owners must sign below.

I understand that by changing the owner, my rights to the account may be revoked. I also understand that adding a joint owner to the account will not affect my rights, but the new joint owner will have the same rights to the account. Any changes in ownership may have tax consequences. Please consult your tax advisor.

Current Account Owner's, Trustee's, or Custodian's signature

Date Signed (mm/dd/yyyy)

Current joint owner's or co-trustee's signature (if applicable)

Date Signed (mm/dd/yyyy)

Power of Attorney's signature

Date Signed (mm/dd/yyyy)

Medallion Signature Guarantee Stamp Here

Hartford Funds Change of Ownership Form

Section G - New Account Owner Acknowledgment and Signature(s)

I have received and read Hartford Funds' prospectus for each of the Funds I am investing in and believe that the investment is suitable for me.

If I am investing in a closed-end interval fund, I understand that I do not have the right to redeem shares of the Fund on a daily basis and that I may only sell Fund shares through the Fund's quarterly offers to repurchase between 5% and 25% of its outstanding shares at Net Asset Value per share. I understand that there is no guarantee that I will be able to sell my shares in the quantity desired during a quarterly repurchase offer. I understand I should not invest in the Fund if I seek liquidity or cannot tolerate risk of loss.

Neither Hartford Funds nor any of its service providers and/or any employee will be liable for any claims, losses, or expenses for acting on any instructions or inquiries believed to be genuine provided that reasonable security procedures have been followed. I understand my property may be transferred to the appropriate state if no activity occurs in the account within the time frame specified by state law.

I understand that if I invest in the Funds directly with the transfer agent I may be charged a \$30 annual direct account fee on or about June 1 each year, which will be deducted automatically from my account.

My signature below indicates I have full authority, am of legal age to purchase shares and have received the prospectus for each of the funds selected and agree to the terms therein and herein.

W-9 Certification - By signing below you agree that the following certification applies to each person signing unless the person signing has indicated that they are not a U.S. person (for tax purposes) on this form.

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct Social Security Number or Taxpayer Identification Number, 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 (including a U.S. resident alien) as defined in the instructions to IRS Form W-9, and
4. I am exempt from FATCA reporting (if applicable).

Certification Instructions: You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

If you do not provide a correct taxpayer identification number, you may be subject to a \$50 IRS penalty.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

New Account Owner's, Trustee's, or Custodian's signature

Date Signed (mm/dd/yyyy)

New joint owner's or co-trustee's signature (if applicable)

Date Signed (mm/dd/yyyy)

Power of Attorney's signature

Date Signed (mm/dd/yyyy)

Medallion Signature Guarantee Stamp Here

For standard mail delivery, please mail this form to:

Hartford Funds
P.O. Box 219060
Kansas City, MO 64121-9060

For private express mail, please mail this form to:

Hartford Funds
801 Pennsylvania Ave Suite 219060
Kansas City, MO 64105-1307

If you have questions or require more information, contact your financial professional or call Hartford Funds at (888) 843-7824.

Following a significant business disruption, Hartford Funds will execute its **Business Continuity Plan** with the goal of recovering and resuming operations as quickly as possible given the scope and severity of the disruption. For further information regarding our Business Continuity Plan, please visit the Business Continuity section of our website at www.hartfordfunds.com or contact Hartford Funds at the above number.

Customer Privacy Notice
The Hartford Insurance Group, Inc. and Affiliates
(herein called “we, our, and us”)

This Privacy Policy applies to our United States Operations

We value your trust. We are committed to the responsible:

- a) management;
 - b) use; and
 - c) protection;
- of **Personal Information**.

This notice describes how we collect, disclose, and protect **Personal Information**.

We collect **Personal Information** to:

- a) service your **Transactions** with us; and
- b) support our business functions.

We may obtain **Personal Information** from:

- a) **You**;
- b) your **Transactions** with us; and
- c) third parties such as a consumer-reporting agency.

Based on the type of product or service **You** apply for or get from us, **Personal Information** such as:

- a) your name;
 - b) your address;
 - c) your income;
 - d) your payment; or
 - e) your credit history;
- may be gathered from sources such as applications, **Transactions**, and consumer reports.

To serve **You** and service our business, we may share certain **Personal Information**. We will share **Personal Information**, only as allowed by law, with affiliates such as:

- a) our insurance companies;
- b) our employee agents;
- c) our brokerage firms; and
- d) our administrators.

As allowed by law, we may share **Personal Financial Information** with our affiliates to:

- a) market our products; or
 - b) market our services;
- to **You** without providing **You** with an option to prevent these disclosures.

We may also share **Personal Information**, only as allowed by law, with unaffiliated third parties including:

- a) independent agents;
 - b) brokerage firms;
 - c) insurance companies;
 - d) administrators; and
 - e) service providers;
- who help us serve **You** and service our business.

When allowed by law, we may share certain **Personal Financial Information** with other unaffiliated third parties who assist us by performing services or functions such as:

- a) taking surveys;
- b) marketing our products or services; or
- c) offering financial products or services under a joint agreement between us and one or more financial institutions.

We, and third parties we partner with, may track some of the pages **You** visit through the use of:

- a) cookies;
- b) pixel tagging; or
- c) other technologies.

For more information, our Online Privacy Policy, which governs information we collect on our website and our affiliate websites, is available at <https://www.thehartford.com/online-privacy-policy>.

We will not sell or share your **Personal Financial Information** with anyone for purposes unrelated to our business functions without offering **You** the opportunity to:

- a) “opt-out;” or
 - b) “opt-in;”
- as required by law.

We only disclose **Personal Health Information** with:

- a) your authorization; or
- b) as otherwise allowed or required by law.

Our employees have access to **Personal Information** in the course of doing their jobs, such as:

- a) underwriting policies;
- b) paying claims;
- c) developing new products; or
- d) advising customers of our products and services.

We use manual and electronic security procedures to maintain:

- a) the confidentiality; and
 - b) the integrity of;
- Personal Information** that we have. We use these procedures to guard against unauthorized access.

Some techniques we use to protect **Personal Information** include:

- a) secured files;
- b) user authentication;
- c) encryption;

- d) firewall technology; and
- e) the use of detection software.

We are responsible for and must:

- a) identify information to be protected;
- b) provide an adequate level of protection for that data; and
- c) grant access to protected data only to those people who must use it in the performance of their job-related duties.

Employees who violate our privacy policies and procedures may be subject to discipline, which may include termination of their employment with us.

We will continue to follow our Privacy Policy regarding **Personal Information** even when a business relationship no longer exists between us.

As used in this Privacy Notice:

Application means your request for our product or service.

Personal Financial Information means financial information such as:

- a) credit history;
- b) income;
- c) financial benefits; or
- d) policy or claim information.

Personal Financial Information may include Social Security Numbers, Driver's license numbers, or other government-issued identification numbers, or credit, debit card, or bank account numbers.

Personal Health Information means health information such as:

- a) your medical records; or
- b) information about your illness, disability or injury.

Personal Information means information that identifies **You** personally and is not otherwise available to the public. It includes:

- a) **Personal Financial Information**; and
- b) **Personal Health Information**.

Transaction means your business dealings with us, such as:

- a) your **Application**;
- b) your request for us to pay a claim; and
- c) your request for us to take an action on your account.

You means an individual who has given us **Personal Information** in conjunction with:

- a) asking about;
 - b) applying for; or
 - c) obtaining;
- a financial product or service from us if the product or service is used mainly for personal, family, or household purposes.

If you have any questions or comments about this privacy notice, please feel free to contact us at The Hartford – Consumer Rights and Privacy Compliance Unit, One Hartford Plaza, Mail Drop: HO1-09, Hartford, CT 06155, or at ConsumerPrivacyInquiriesMailbox@thehartford.com.

This Customer Privacy Notice is being provided on behalf of The Hartford Insurance Group, Inc. and its affiliates (including the following as of February 2025), to the extent required by the Gramm-Leach-Bliley Act and implementing regulations:

1stAGChoice, Inc.; Access CoverageCorp, Inc.; Access CoverageCorp Technologies, Inc.; Business Management Group, Inc.; Cervus Claim Solutions, LLC; First State Insurance Company; FTC Resolution Company LLC; Hart Re Group L.L.C.; Hartford Accident and Indemnity Company; Hartford Administrative Services Company; Hartford Asia Limited; Hartford Casualty General Agency, Inc.; Hartford Casualty Insurance Company; Hartford Corporate Underwriters Limited; Hartford Fire General Agency, Inc.; Hartford Fire Insurance Company; Hartford Funds Distributors, LLC; Hartford Funds Management Company, LLC; Hartford Funds Management Group, Inc.; Hartford Holdings, Inc.; Hartford Insurance Company of Illinois; Hartford Insurance Company of the Midwest; Hartford Insurance Company of the Southeast; Hartford Insurance, Ltd.; Hartford Integrated Technologies, Inc.; Hartford Investment Management Company; Hartford Life and Accident Insurance Company; Hartford Lloyd's Corporation; Hartford Lloyd's Insurance Company; Hartford Management, Ltd.; Hartford Management (UK) Limited; Hartford Productivity Services LLC; Hartford Singapore Pte. Ltd; Hartford of the Southeast General Agency, Inc.; Hartford of Texas General Agency, Inc.; Hartford Residual Market, L.C.C.; Hartford Specialty Insurance Services of Texas, LLC; Hartford STAG Ventures LLC; Hartford Strategic Investments, LLC; Hartford Underwriters General Agency, Inc.; Hartford Underwriters Insurance Company; Hartford Underwriting Agency Limited; Heritage Holdings, Inc.; Heritage Reinsurance Company, Ltd.; HLA LLC; Horizon Management Group, LLC; HRA Brokerage Services, Inc.; Lattice Strategies LLC; Maxum Casualty Insurance Company; Maxum Indemnity Company; Maxum Specialty Services Corporation; Millennium Underwriting Limited; MPC Resolution Company LLC; Navigators Holdings (UK) Limited; Navigators Insurance Company; Navigators Management Company, Inc.; Navigators Specialty Insurance Company; Navigators Underwriting Limited; New England Insurance Company; New England Reinsurance Corporation; New Ocean Insurance Co., Ltd.; NIC Investments (Chile) SpA; Nutmeg Insurance Agency, Inc.; Nutmeg Insurance Company; Pacific Insurance Company, Limited; Property and Casualty Insurance Company of Hartford; Sentinel Insurance Company, Ltd.; The Navigators Group, Inc.; Trumbull Flood Management, L.L.C.; Trumbull Insurance Company; Twin City Fire Insurance Company; Y-Risk, LLC.