Request for Change of Registration



To an Individual Account, Joint Account, Uniform Gifts/Transfers to Minors Act

(UGMA/UTMA) Account, or Guardianship Account

Complete this form to transfer ownership of all or a portion of an existing Allspring Funds account. If you have questions, call P.O. Box 219967 | Kansas City, MO 64121 1-800-222-8222. allspringglobal.com

Transfer of ownership to (check one of the following):

| Add or remove an account owner. |
|--|
| 1. All current account owners must have their signatures Medallion Guaranteed on this completed form. |
| 2. The new account owner(s)—including any account owner(s) that will remain on the account—must complete and sign the New Account Application if you are not transferring the shares to an existing Allspring Funds account. |
| Reregister an UGMA/UTMA account. |
| Reregister to a new custodian or to the minor who has reached the age of majority or the age at which custodianship ends: |
| 1. The current custodian or the minor who has reached the age at which custodianship ends must have his or her signature Medallion Guaranteed on this completed form. |
| 2. The minor who has reached the age of majority and any additional account owner(s) must complete and sign the New Account Application if you are not transferring the shares to an existing Allspring Funds account. |
| Reregister due to reason not listed above. If you have questions, call 1-800-222-8222. |
| Note: A new account number may be assigned for each account listed on this form. If you have the checkwriting option on your current account(s) and you are transferring the full balance, checks will not be honored once the registration has changed. |
| 1 CURRENT ACCOUNT REGISTRATION (PLEASE PRINT) |
| List the registration as the accounts are currently registered: |

| Name of current account owner, custodian, or trustee (first, middle initial, last) | Social Security/taxpayer ID number |
|--|------------------------------------|
| Name of current joint owner, co-trustee, or minor (first, middle initial, last) | Social Security/taxpayer ID number |

If the address for the account(s)* listed in Section 2 of this form has changed, please provide the new address for delivery of year-end tax forms and statements.

To change the address on accounts not listed in Section 2 of this form, provide instructions on a separate sheet:

| U.S. residential street address | City | State | ZIP code |
|--|------|-------|----------|
| U.S. mailing address (if different than U.S. residential street address) | City | State | ZIP code |

* For UGMA/UTMA or guardianship accounts, only the current custodian/guardian is authorized to change the address. All future correspondence will be sent to the new address until you advise us otherwise. Distributions to a new address will require your signature to be Medallion Guaranteed if requested within 15 days of the address change.

TRANSFER FROM

2

| To list additional transfer instructions, include all | Full balance transfer List the current fund and account number(s): | |
|---|--|---------------------------------|
| information in this section on a separate sheet. | Current fund and account number | Current fund and account number |
| | Current fund and account number | Current fund and account number |
| | Transfer accrued dividends to the new account or Pay out th | e accrued dividends |
| | Note: If no box is checked, all accrued dividends will be transferred to the new ad | |
| | | |
| | Partial balance transfer: \$ or | shares |
| | List the current fund and account number(s): | |
| | | |
| | Current fund and account number | Current fund and account number |
| | Current fund and account number | Current fund and account number |
| | <i>Note:</i> All accrued dividends will remain in the account. | |
| 3 TRANSFER T | 0 | |
| | Transfer the assets indicated in Section 2 of this form to: | |

Name of account owner(s) (first, middle initial, last)

Transfer to a new account. (A New Account Application, signed by all owners listed above, is required to complete this request.)

] Transfer to an **existing** account that is registered in the same name(s) as listed above:

Fund and account number

Note: If the owner(s) as listed above do not have a separate account in the same fund on file, a New Account Application is required.

4 SIGNATURE(S) OF CURRENT OWNER(S) OR AUTHORIZED INDIVIDUAL(S)

| To complete this request, all signatures must be Medallion Guaranteed. | Signature of current account owner, custodian, trustee, or guardian Print name | Medallion Guarantee* |
|--|--|----------------------|
| | Date | _ |
| | Y | Medallion Guarantee* |
| | Signature of current joint account owner or co-trustee | — |
| | Print name | _ |
| | Date | — |
| | | |

* A Medallion Guarantee may be obtained from any eligible guarantor institution, as defined by the Securities and Exchange Commission. These institutions include banks, savings associations, credit unions, and brokerage firms that participate in the Medallion Program. The bar-coded stamp with the words "MEDALLION GUARANTEED" must be stamped near each signature being guaranteed. The guarantee must appear with the name of the guarantor institution and the signature of an individual authorized on behalf of the guarantor institution. Note that a notary public stamp or seal is not acceptable.

| Before you mail, have you: | Completed Sections 1 through 3 of this form? |
|----------------------------|--|
| | Had your signature(s) Medallion Guaranteed in Section 4? |
| | Included Supplement A or B (if applicable)? |
| | Included a completed and signed New Account Application (required unless transferring to an existing account)? |
| | |

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