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Recharacterization Form (Internal)

Use this form to recharacterize a contribution for an Impax Roth or Impax Traditional 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. This form is not intended to facilitate Roth IRA conversions.

The Internal Revenue Service (“IRS”) Announces an Important Change — Effective January 1, 2018, a Roth IRA conversion cannot be recharacterized back to a traditional IRA, SEP, or SIMPLE IRA. A Roth IRA conversion is considered an irrevocable election which cannot be “reversed” or “corrected”. For more information, please visit the IRS web site www.irs.gov using the search term “IRA FAQs - Recharacterization of Roth Rollovers and Conversions”.

Fields noted with an asterisk (*) are required.

1. Participant Information

Name* (please print name exactly as it appears on your current IRA account)		Social Security/Tax ID No.*	
Mailing Address*	City*	State*	Zip Code*
Birthdate* (mm/dd/yyyy)	Contact Telephone	Email Address	

Check here if contact information above is new. The new information will replace the information currently on file.

2. Recharacterization Instructions

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date, including extensions, for filing your federal income tax return for the tax year for which the contribution was originally made.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 for more information.

3. Transaction Type — select one of the following (A or B)

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

Date of Contribution: Amount to Recharacterize: \$

From: Traditional IRA Account Number:

To: Roth IRA Account Number: or Application attached

B. Recharacterize my **annual contribution** (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

4. Investment Instructions for Recharacterized Proceeds

Distribute Recharacterized Amounts from the Following Funds:

FROM	Percentage
Fund Name:	%
Fund Name:	%
Fund Name:	%
TOTAL	100 %

Reinvest Recharacterized Proceeds into the Following Funds:

TO	Percentage
Fund Name:	%
Fund Name:	%
Fund Name:	%
TOTAL	100 %

5. Certification and Signature

I authorize Impax Funds and the Custodian to process this recharacterization request. I certify that I am the Participant authorized to make this election and that all information provided on this form is true and accurate. I further certify that no tax or legal advice has been given to me by the Custodian, Impax Funds, or any agent of either of them, and that all decisions regarding the elections made on this form are my own. The Custodian may conclusively rely on this certification and authorization without further investigation or inquiry. I expressly assume responsibility for any adverse consequences which may arise from the election and agree that the Custodian, Impax Funds, and their agents shall in no way be responsible, and shall be indemnified and held harmless, for any tax, legal or other consequences of the election(s) made on this form.

I have read and understand and agree to be legally bound by the terms of this form.

Signature of Depositor	Date
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