



Asset Allocation Form

Use this form to systematically rebalance the allocation of the funds in your account.

- Your account must have a minimum account balance of \$5,000, with a minimum of \$500 per fund.
- Asset allocation cannot be established if any fund has a systematic exchange plan.
- Only available for A, C, R, Y, and Investor share classes.
- Not available for the Invesco Senior Loan Fund.

PLEASE USE BLUE OR BLACK INK

PLEASE PRINT CLEARLY IN BLOCK CAPITAL LETTERS

1 | Invesco Account Number and Registration Information

SSN or TIN (Required)

Invesco Account or Plan ID Number

Account Registration (Please print name(s) as it appears on account.)

Phone Number

Email Address

2 | Fund Selection

This feature will only be placed on the funds you have indicated below. If you have funds in your account that are not included on this form, those funds will not be reallocated.

- Select a minimum of 2 funds and a maximum of 10 funds.
- Minimum of 5% allocation per fund allowed.
- Reallocation must occur within the same class of shares.

	Fund Number	Fund Name	Class of Shares	Percentage
1.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>
4.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>
5.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>
6.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>
7.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>
8.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>
9.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>
10.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>

TOTAL % 100



3 | Reallocation Frequency (Select one.)

I authorize Invesco Investment Services, Inc. (IIS) to reallocate to the amounts indicated in section 2. Furthermore, I understand and agree to the terms listed below.

Notes:

- The program will not execute an exchange if the variance in the fund/account is 5% or less.
- If a reallocation date is not provided below, I am directing IIS to exchange on the 28th day of the last month of the period chosen (or the immediate proceeding business day if the 28th is not a business day).

Frequency: (Select one.)

- Monthly – Reallocation will occur monthly on the following day:
- Quarterly – Reallocation will occur quarterly (March, June, September, and December) on the following day:
- Semiannually – Reallocation will occur semiannually (June and December) on the following day:
- Annually – Reallocation will occur annually (December) on the following day:

Important information for non-retirement accounts: Shares will be depleted utilizing the current cost basis method on your account. If your current method is Specific Lot Identification, the First-In, First-Out (FIFO) method will be used to deplete the shares. If you would like to change your cost basis method, complete the Cost Basis Account Method Election Form or log into your account at invesco.com/us.

4 | Authorization and Signature(s) (Please sign and date below.)

By signing this form, (i) I authorize and direct IIS to take action as specified above, and (ii) I agree to indemnify and hold harmless IIS, its affiliates, each of their respective employees, officers, trustees, or directors and each of the Invesco Funds from and against any and all claims, losses, liabilities, damages and expenses that may be incurred by reason of your actions taken in accordance with the instructions set forth herein.

Signature (Required)

Date (mm/dd/yyyy)

X

Signature

Date (mm/dd/yyyy)

X

5 | Mailing Instructions

Please send completed and signed form to:

(Direct Mail)	(Overnight Mail)
Invesco Investment Services, Inc.	Invesco Investment Services, Inc.
P.O. Box 219078	c/o DST Systems, Inc.
Kansas City, MO 64121-9078	430 W. 7th Street
	Kansas City, MO 64105-1407

For assistance please contact an Invesco Client Services representative at 800 776 4246, weekdays, 7:30 a.m. to 5 p.m. Central Time.