

# New Account Agreement Instructions

For your account to be opened promptly and accurately, please provide the information requested on the form as outlined in the Instructions below.

## Account Registration (check one)

Additional documentation may be required to open certain account types. Use the supplemental form to identify all participants and their respective roles in the account. Contact your investment professional for more information.

## Institutional/Non-Institutional Account and USA Patriot Act Information

These sections MUST be completed in order to establish the account.

## Account Holder Information and Secondary Account Holder Information

The legal address MUST be a street address. A post office box is not acceptable for a legal address. A legal address is the account holder's permanent residence address or, in the case of an entity, the place where it maintains a physical presence. For those accounts opened for nonresident aliens and foreign entities, the legal address must be the same as the permanent residence address listed on IRS Form W-8BEN, W-8BENE or W-8IMY. You must provide annual income and net worth in the same manner. For instance, if the account is a joint account, and you are providing a combined annual income, you must also provide a combined net worth.

**NOTE:** To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial organizations to obtain, verify, and record information that identifies each person who opens an account. When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask you to provide a copy of your driver's license or other identifying documents. The information you provide in this form may be used to perform a credit check and verify your identity by using internal sources and third-party vendors. If additional space is needed, attach a separate sheet.

## Trusted Contact

Use this section to provide information for a Trusted Contact who may be contacted about the account on behalf of the account holder.

## FinCEN Certification

U.S. Treasury Department Financial Crimes Enforcement Network (FinCEN) require financial institutions to collect customer due diligence information to comply with anti-money laundering regulations.

## Interested Parties

If you would like to add an interested party to your account, provide the interested party's contact information in this section. Indicate if you would like the interested party to receive copies of your statements, confirmations, and proxies.

## Cash Management

If you elect to sweep the available free credit balance in your account, enter the product name or acronym to designate your sweep instruction.

## User ID and E-Delivery Preferences

Use this section to create a User ID and temporary password for online access, and to provide instructions to establish electronic delivery (e-delivery) of certain brokerage account communications.

## Objective and Investment Details

Use this section to provide details about your account objectives and investments. Account investment objectives are defined as follows:

**Income** - An investment approach by which an investor generally seeks current income over time.

**Long-Term Growth** - An investment approach by which an investor generally seeks capital appreciation through buying and holding securities over an extended period of time.

**Short-Term Growth** - An investment approach by which an investor generally seeks short-term capital gains through buying and selling securities over a short period of time.

## Tax Lot Disposition Methods

**First In, First Out** (the tax lot(s) with the earliest trade date(s) will be disposed, sold, transferred or exchanged first based on the order of their acquisition).

**Last In, First Out** (the tax lot(s) with the latest trade date(s) will be disposed, sold, transferred or exchanged first based on the order of their acquisition).

**Average Cost Using First In, First Out** (this option is available ONLY for mutual fund shares and covered stocks in BNY Pershing's dividend reinvestment plans, and it reflects the average cost per share, considering all tax lots of a security, even those no longer held by the investor. Upon disposition of mutual fund shares, the average cost per share is used to calculate gain or loss and although the calculation of gain or loss is based on an average cost, the tax lots are disposed of on a FIFO basis).

**High Cost** (the tax lot(s) with the highest unit cost are disposed of first, whether the tax lot(s) are short-term or long-term for capital gain tax purposes).

**High Cost Long-Term** (the tax lot(s) that have the highest unit cost, and produce a long-term capital gain or loss, are disposed of first—If no long-term shares are identified, or if an inadequate number of long-term shares are identified, then the short-term shares with the highest unit cost will be disposed of).

**High Cost Short-Term** (the tax lot(s) that have the highest unit cost, and produce a short-term capital gain or loss, are disposed of first—If no short-term shares are identified, or if an inadequate number of short-term shares are identified, then the long-term shares with the highest unit cost will be disposed of).

**Low Cost** (the tax lots with the lowest unit cost are disposed of first, whether the tax lots are short-term or long-term for capital gain tax purposes).

**Low Cost Long-Term** (the tax lots with the lowest unit cost, and produce a long-term gain or loss, are disposed of first—If no long-term shares are identified, or if an inadequate number of long-term shares are identified, then the short-term shares with the lowest unit cost will be disposed of).

**Low Cost Short-Term** (the tax lot(s) with the lowest unit cost, and produce a short-term capital gain or loss, are disposed of first—If no short-term shares are identified, or if an inadequate number of short-term shares are identified, then the long-term shares with the lowest unit cost will be disposed of).

**Minimize Short Term Gains** (take losses first and gains last. The tax lots are disposed in the following order: Short term lots sold at a loss, from highest cost to lowest cost; long term lots sold at a loss, from highest cost to lowest cost; short term lots sold at no gain or loss; long term lots sold at no gain or loss; long term loss sold at a gain, from highest to lowest cost; short term lots sold at a gain, from highest cost to lowest cost).

Please consult a tax advisor before selecting a tax lot disposition method. Pershing LLC may not provide tax advice, and accordingly, you are solely responsible for the tax effect of any selected method (or your use of your introducing brokerage firm's default method), and change from or to a new method, for federal, state, local and foreign tax purposes. Please contact your introducing brokerage firm to change a selection. Pershing LLC reserves the right to introduce new tax lot disposition methods at any time or to make any change in the offered tax lot disposition methods that is required by applicable law or regulations, without prior notice.

# New Account Agreement Instructions

BNY Pershing's application of the tax lot disposition methods to all account trades and transactions shall control in all instances.

**NOTE:** Data provided by outside vendors may not be the actual data that is reported to the IRS, Pershing LLC will be reporting the data that is Maintained at Pershing LLC.

## Bond Elections

Bonds contain provisions that allow investors to elect to amortize the premium or accrete the discount when calculating and reporting cost basis for federal income tax purposes.

## Additional Information

Use this section to provide additional information about your account.

## Standing/Periodic Instructions

Check the appropriate boxes to tell us how your income and periodic principal distributions should be handled.

## U.S. Taxpayer Number Certification

U.S. persons must sign the U.S. taxpayer certification built into the New Account Form. If the account is a JOINT account, you must provide the

Social Security Number or the Taxpayer Identification Number of the individual whose name appears first. For custodial accounts, use the Social Security Number of the minor. If you are a nonresident alien or foreign entity, you should not sign the taxpayer certification included in this form, and instead submit an IRS Form W-8BEN, W-8IMY or other appropriate W8 series forms with this application. Nonresident alien joint accounts require IRS Form W-8BEN for each account holder. The account holder's country of permanent residence is the country where the account holder claims to be a resident for purposes of that country's income tax. If a reduced rate of withholding is being claimed under an income tax treaty, residency must be determined in the manner required by the treaty. If the account holder does not have a tax residence in any country, the permanent residence is where the account holder normally resides (or maintains an office for accounts not owned by individuals). The primary account owner whose Social Security Number or Taxpayer Identification Number is used should sign the Taxpayer Certification section.

## Signatures

Sign and date the form. The primary and secondary owners of a joint account must sign the form on the Signatures section. Additional owners must sign the additional participant form. For a custodial account, only the custodian needs to sign.

## Participant Information Supplement

Use one of the codes below to designate the participant role for the additional participant on an account.

|                         |                                      |                              |
|-------------------------|--------------------------------------|------------------------------|
| ADMN-Administrator      | GPMM-General Partner/Managing Member | PREP-Personal Representative |
| AGNT-Agent              | GRNT-Grantor                         | PLAD-Plan Administrator      |
| BENF-Beneficiary        | GRDN-Guardian                        | PATN-Power of Attorney       |
| BEOW-Beneficial Owner   | IPTY-Interested Party                | PRM-Primary Account Holder   |
| BORW-Borrower           | IMGR-Investment Manager              | RIND-Responsible Individual  |
| CONS-Conservator        | LHLD-Lien Holder                     | SEC-Secondary Account Holder |
| CPER-Controlling Person | LPAR-Limited Partner                 | STLR-Settlor                 |
| CUST-Custodian          | MNGR-Manager                         | SHLR-Shareholder             |
| DECD-Deceased           | MMBR-Member                          | SPSR-Sponsor                 |
| DPTR-Depositor          | MINR-Minor                           | SUSO-Substantial Owner       |
| DRTR-Director           | OFCR-Officer                         | TCON-Trusted Contact         |
| EXEC-Executor           | PTNR-Partner                         | TSTE-Trustee                 |

## For Broker-Dealer Use Only

Provide investment professional and principal approvals.

## Account Category Codes (for office use only)

|  |   |   |
|--|---|---|
| BKCL-Bank Collateral Account                                 | IACU-Investment Advisor/Custodian                         | NPLT-Nonpurpose Loan Trust                      |
| BOLI-Bank Owned Life Insurance                               | IAES-Investment Advisor/Estate                            | NPRO-Nonprofit Organization                     |
| BTRS-Bank Owned Life Insurance Trust                         | IAGU-Investment Advisor/Guardian                          | N401-Prototype Individual 401(k)                |
| CLUB-Investment Club   | IAGV-Investment Advisor/ Government Agency                | N457-Nonqualified Deferred Compensation Plan    |
| COD-Receive/Deliver Versus Payment                           | IAIN-Investment Advisor/Individual                        | N529-State Sponsored Higher Education Plan      |
| COLI-Corporate Owned Life Insurance                          | IAJT-Investment Advisor/Joint                             | PART-Partnership                                |
| CONS-Conservatorship   | IANP-Investment Advisor/Nonprofit Organization            | PRME-Prime Broker                               |
| CORN-Noncorporate Account                                    | IAPA-Investment Advisor/Partnership                       | PWRA-Power of Attorney                          |
| CORP-Corporation   | IAPP-Investment Advisor/Corporate Pension/ Profit Sharing | RETC-Third Party as Custodian SIMPLE IRA        |
| CPPS-Corporate Pension or Profit Sharing Plan                | IAPW-Investment Advisor/Power of Attorney                 | RETE-Third Party as Custodian ERISA Account     |
| CTRS-Corporate Owned Life Insurance Trust                    | IART-Investment Advisor/Retirement Account                | RETG-Third Party as Custodian IRA Guardian      |
| CUST-Custodian   | IASP-Investment Advisor/Sole Proprietor                   | RETH-Third Party as Custodian 403(b)(7)         |
| DLJC-Pershing LLC SIMPLE Individual Retirement Account (IRA) | IATI-Investment Advisor/Transfer on Death Individual      | RETI-Third Party as Custodian IRA               |
| DLJI-Pershing LLC IRA  | IATJ-Investment Advisor/Transfer on Death Joint           | RETN-Third Party as Custodian Roth IRA Guardian |
| DLJP-Pershing LLC SARSEP and Prototype SEP                   | IATR-Investment Advisor/Trust INDV-Individual             | RETP-Third Party as Custodian Prototype SEP     |
| DLJQ-Pershing LLC Qualified Retirement Plan (QRP)            | INVA-Investment Advisor/Managed Account                   | RETR-Third Party as Custodian QRP               |
| DLJS-Pershing LLC SEP IRA                                    | JNTN-Joint  | RETS-Third Party as Custodian Roth IRA          |
| ESTT-Estate  | LLCP-Limited Liability Corporation                        | RETV-Third Party as Custodian Education Savings |
| EXMP-Exempt Organization                                     | LPAR-Limited Partnership                                  | SOLE-Sole Proprietorship                        |
| FINL-Financial Organization                                  | NPLC-Nonpurpose Loan Corporate                            | TODI-Transfer on Death Individual               |
| GOVT-Government Entity/Agency                                | NPLI-Nonpurpose Loan Individual                           | TODJ-Transfer on Death Joint                    |
| GRDN-Guardian  | NPLJ-Nonpurpose Loan Joint                                | TRST-Trust                                      |
| IACP-Investment Advisor/Corporation                          | NPLP-Nonpurpose Loan Partnership                          |   |

# New Account Agreement

OFFICE USE ONLY | Account Number \_\_\_\_\_

IP Number \_\_\_\_\_

## STEP 1. ACCOUNT REGISTRATION

Additional documentation may be required to open these account types. Contact your investment professional for more information.

Retirement     Retail (Select a type of retail account below)

| TYPE OF ACCOUNT   | ADDITIONAL DESIGNATION   |
|---|--|
| <input type="checkbox"/> Individual   |  |
| <input type="checkbox"/> Corporation  | <input type="checkbox"/> C Corp<br><input type="checkbox"/> S Corp   |
| <input type="checkbox"/> Corporate Pension/Profit Sharing   | Plan Name: _____<br>Trustees: _____<br>Beneficiaries: _____  |
| <input type="checkbox"/> Custodial  | <input type="checkbox"/> UGMA (Uniform Gift to Minors Act)<br><input type="checkbox"/> UTMA (Uniform Transfer to Minors Act)<br>Complete Custodial Accounts Section.   |
| <input type="checkbox"/> Estate   | Person or Entity Appointed to Act on Behalf of the Account:<br><input type="checkbox"/> Administrator<br><input type="checkbox"/> Personal Representative<br><input type="checkbox"/> Special Administrator<br><input type="checkbox"/> Temporary Administrator<br><input type="checkbox"/> Executor<br><input type="checkbox"/> Executrix<br>Number Appointed to Account: _____ |
| <input type="checkbox"/> Joint Tenant   | Complete Joint Accounts Sections.  |
| <input type="checkbox"/> Limited Liability Company  | <input type="checkbox"/> C Corp<br><input type="checkbox"/> S Corp<br><input type="checkbox"/> Partnership<br><input type="checkbox"/> Disregarded Entity* (name of owner): _____  |
| <input type="checkbox"/> Power of Attorney  | Power of Attorney Agent's Name: _____  |
| <input type="checkbox"/> Individual Single Member LLC   |  |
| <input type="checkbox"/> Sole Proprietorship  |  |
| Transfer on Death:<br><input type="checkbox"/> Individual<br><input type="checkbox"/> Joint (Complete Joint Accounts) | Agreement Execution Date: _____  |

| Section)   | ADDITIONAL DESIGNATION  |
|--|---|
| <input type="checkbox"/> Trust                                   | Establishment Date: _____<br>Trust Type:<br><input type="checkbox"/> Charitable <input type="checkbox"/> Revocable<br><input type="checkbox"/> Living <input type="checkbox"/> Irrevocable<br><input type="checkbox"/> Irrevocable Living <input type="checkbox"/> Testamentary<br><input type="checkbox"/> Family<br>Trustees: _____<br>Beneficiaries: _____<br>Can the trustee act independently?<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> 529 Plan                                |   |
| <input type="checkbox"/> Bank Collateral                         |   |
| <input type="checkbox"/> Conservatorship                         |   |
| <input type="checkbox"/> Coverdell Education Savings Account     |   |
| <input type="checkbox"/> Exempt Organization                     |   |
| <input type="checkbox"/> Financial Organization                  |   |
| <input type="checkbox"/> Government Entity/ Agency               |   |
| <input type="checkbox"/> Guardianship                            |   |
| <input type="checkbox"/> Investment Club                         |   |
| <input type="checkbox"/> IRA or Retirement Third Party Custodian |   |
| <input type="checkbox"/> Noncorporate                            |   |
| <input type="checkbox"/> Nonprofit Organization                  |   |
| <input type="checkbox"/> Nonpurpose Loan                         |   |
| <input type="checkbox"/> Partnership                             |   |
| <input type="checkbox"/> Other                                   | Please Specify: _____   |

\*If the owner is a U.S. person, complete the Primary Account Holder Information section using the owner's information. If the owner is a non-US person, the appropriate IRS form W-8 must be provided from the non- U.S. owner.

### For Joint Accounts Only

|  |   |   |
|--|---|---|
| Are the account holders married to each other?<br><input type="checkbox"/> Yes <input type="checkbox"/> No | Number of Tenants   | Tenancy State   |
| Tenancy Clause   |   |   |
| <input type="checkbox"/> Community Property  | <input type="checkbox"/> Community Property with Rights of Survivorship | <input type="checkbox"/> Tenants in Common            |
| <input type="checkbox"/> Tenants by Entirety   | <input type="checkbox"/> Joint Tenants with Rights of Survivorship      | <input type="checkbox"/> Usufruct (LA Residents only) |



**For Custodial Accounts Only**

|  |                                |  |  |
|--|--------------------------------|--|--|
| State in Which Gift was Given            | Date Gift Was Given            | Age Designated to Terminate                      | Minor's Date of Birth                          |
| Manner in Which Gift was Given           |                                |  |  |
| <input type="checkbox"/> Created by gift | <input type="checkbox"/> Trust | <input type="checkbox"/> Exercise by appointment | <input type="checkbox"/> Transfer by fiduciary |
|  |                                | <input type="checkbox"/> Transfer by obligor     | <input type="checkbox"/> Will                  |

**For Trust Accounts Only**

Are all trustees of this trust natural persons?  Yes  No

Are all beneficiaries of this trust natural persons?  Yes  No

Is the trust duly organized and validly existing under applicable law?  Yes  No

**Account Description For Statements**

**STEP 2. INSTITUTIONAL/NON-INSTITUTIONAL ACCOUNT**

**Institutional Account, as Defined in the FINRA Rule**

- A bank, savings and loan association, insurance company or registered investment company
- An investment adviser registered either with the Securities and Exchange Commission under Section 203 of the Investment Advisers Act of 1940 or with a state securities commission (or any agency or office performing like functions)
- Other Entity (whether a natural person, corporation, partnership, trust, or otherwise) with total assets of at least \$50 million
- None of the Above

**Institutional Account Suitability Obligation**

If None of the Above was selected in the previous section, this section is not required

- Waived for all recommendations
- Accepted for all recommendations
- Waived exclusively for the recommendations involving the following asset classes:  
Please select those which are applicable:
  - Equities
  - Options
  - Fixed Income
  - Mutual Funds
  - Unit Investment Trusts
  - Exchange Traded Funds
  - Other \_\_\_\_\_
- Determined at the time of each recommendation

**For Broker-Dealer Use Only**

if the selection above represents a full or partial waiver of the servicing broker/dealer's suitability obligation, the servicing broker/dealer represents that the institutional client account is capable of exercising independent judgment with respect to security and investment strategy decisions made in connection with the waiver.

**STEP 3. USA PATRIOT ACT INFORMATION**

What is the **initial** source of funds for this account? If you are transferring assets from another financial institution, please indicate the origin of those investments.

- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Accounts Receivable  | <input type="checkbox"/> Accumulated Savings | <input type="checkbox"/> Alimony                        | <input type="checkbox"/> Gift                 |
| <input type="checkbox"/> Income From Earnings | <input type="checkbox"/> Inheritance         | <input type="checkbox"/> Insurance Proceeds             | <input type="checkbox"/> Investment Proceeds  |
| <input type="checkbox"/> Legal Settlement     | <input type="checkbox"/> Lottery/Gaming      | <input type="checkbox"/> Pension/IRA/Retirement Savings |   |
| <input type="checkbox"/> Rollover             | <input type="checkbox"/> Rental Income       | <input type="checkbox"/> Sale of Business               | <input type="checkbox"/> Sales of Real Estate |
| <input type="checkbox"/> Spouse/Parent        | <input type="checkbox"/> Other _____         |   |   |

**Disclosures Required Under the USA PATRIOT ACT**

Special note for non-U.S. Accounts: with respect to assets custodied by BNY Pershing on your behalf, you acknowledge that income and capital gains or distributions to you from this account may be taxable in your home jurisdiction and/or your jurisdiction of tax residence if different from your home jurisdiction. You acknowledge to your financial organization and to BNY Pershing that you have taken your own tax advice in this regard.

- 1) Is this account for a Foreign Financial Institution (e.g. non-U.S. bank; non-U.S. branch of a U.S. bank; broker-dealer; futures merchant; commodities introducing broker; mutual fund; money transmitter or currency exchanger)?  Yes  No
- 2) Is this account a private banking account as defined under the USA PATRIOT Act?  Yes  No
- 3) Is this an account for a Foreign Bank as defined under the USA PATRIOT Act?
  - a) If yes, is the bank a Central Bank?  Yes  No
  - b) If yes, is this a Foreign Bank operating under an Offshore Banking License?  Yes  No
  - c) If yes, is this a Foreign Bank operating under a banking license issued by a Non-Cooperative Country or Territory?  Yes  No
  - d) If yes, is this a Foreign Bank operating under a banking license issued by a jurisdiction subject to Section 311 measures?  Yes  No

If the answer to questions b, c, or d above is yes, how many people or entities own 10% or more of the Bank (if its shares are not publicly traded?)\*

\*If number is greater than zero, a Foreign Bank Beneficial Ownership form must accompany this request.

- 4) Are you, or anyone with an interest in this account, currently or formerly, either (1) a senior military, governmental, or political official, or (2) closely associated with an immediate family member of such an official?  Yes  No

If yes, identify the name of the official, office held and country

**STEP 4. PRIMARY ACCOUNT HOLDER INFORMATION**

If disregarded entity, enter information for the U.S. owner.  
 A copy of the ID is required for each non-U.S. person and for U.S. citizens living abroad. Proof of address may also be required.  
 Primary account holder may include owner; entity; or for a UGMA/UTMA account, the minor is the primary account holder and the custodian is the secondary account holder. If disregarded entity, enter information for the regarded/owner. List disregarded entity in the additional account holder section. For UGMA/UTMA accounts the required phone number and email must be that of the custodian of the account.

|   |                |   |  |
|---|----------------|---|--|
| Name  |                |   |  |
| Social Security (SSN)/ Employee Identification #(EIN)                           |                | <input type="checkbox"/> Person <input type="checkbox"/> Entity | Date of Birth  |
|   |                |   | Specified Adult*<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
| Email   |                | NAICS Industry Code   |  |
| Home Phone  | Business Phone | Mobile Phone  |  |
| Primary Citizenship(s)  |                | Additional Citizenship(s)                                       |  |
| U.S. Resident Alien<br><input type="checkbox"/> Yes <input type="checkbox"/> No |                | Country of Birth  |  |
| <b>Legal Address</b> (no P.O box)   |                |   |  |
| City  | State/Province | Zip/Postal Code   |  |
| Country   |                |   |  |

**Mailing Address** (if different from legal address)

|         |                |                 |
|---------|----------------|-----------------|
| City    | State/Province | Zip/Postal code |
| Country |                |                 |

\*\*"Specified Adult" shall mean: (a) a natural person age 65 and older; or (b) a natural person age 18 and older who the member reasonably believes has a mental or physical impairment that renders the individual unable to protect his or her own interests. If you wish to add a trusted contact, please complete the trusted contact form.

**Gender**

Male  Female

**Marital Status**

Single  Married  Divorced  Domestic Partner  Widowed

|                      |                 |
|----------------------|-----------------|
| Number of Dependents | Education Level |
|----------------------|-----------------|

**Employment Status and Industry Affiliations**

Employed  Self-Employed  Retired  Unemployed  Homemaker  Student

|                    |                |                  |
|--------------------|----------------|------------------|
| Occupation         | Years Employed | Type of Business |
| Employer Name      |                |                  |
| Employer's Address |                |                  |
| City               | State/Province | Zip/Postal Code  |
| Country            |                |                  |

**General Investment Knowledge and Experience**

Limited  Moderate  Extensive  None

**Knowledge and Experience by Investment Type**

| INVESTMENT              | INVESTMENT KNOWLEDGE             |                                   |                                    |                               | INVESTMENT EXPERIENCE |
|-------------------------|----------------------------------|-----------------------------------|------------------------------------|-------------------------------|-----------------------|
| Annuities Fixed         | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Annuities Variable      | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Commodities and Futures | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Equities                | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Exchange Traded Funds   | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Fixed Income            | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Insurance               | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Mutual Funds            | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Options                 | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Other                   | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Precious Metals         | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Real Estate             | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Unit Investment Trusts  | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |

**Financial Information**

**Identify Verification Method Used**

Compliance Data Center Inc. Report (CDCR)  Internal Review (INRV)  
 Regulatory Data Corporation (RDCR)  Other ID Vendor (OTHR)

|                               |       |
|-------------------------------|-------|
| <b>Annual Income:</b> From \$ | To \$ |
|-------------------------------|-------|

|  |       |
|--|-------|
| <b>Net Worth (excluding home):</b> From \$ | To \$ |
| <b>Liquid Net Worth:</b> From \$           | To \$ |

Check box if aggregated with other joint tenants.

**Tax Bracket:**  0-15%  15.1%-32%  32.1%-50%  50.1%+

**Unexpired Government Identification**

Government issued unexpired photo identification should be provided for all individuals that were not verified using non-documentary methods, and for non-resident aliens, along with an IRS form W-8BEN.

| GOVERNMENT PHOTO ID #1           |               |                    |
|----------------------------------|---------------|--------------------|
| Type of Unexpired Photo ID       | ID Number     | Country of Issue   |
| State/Province/Subdivision of ID | Date of Issue | Date of Expiration |

| GOVERNMENT PHOTO ID #2           |               |                    |
|----------------------------------|---------------|--------------------|
| Type of Unexpired Photo ID       | ID Number     | Country of Issue   |
| State/Province/Subdivision of ID | Date of Issue | Date of Expiration |

ID Verification Comments

**Corporate/Business Information**

|                              |  |                                 |
|------------------------------|--|---------------------------------|
| Corporate/Business ID Number | Formation Date of Corporation/Business | State/Province of Incorporation |
| Country of Incorporation     | Legal Entity Identifier (LEI)          |                                 |

**Broker-Dealer Affiliations**

Are you an employee of this broker-dealer?  Yes  No

Are you related to an employee at this broker-dealer?  Yes  No

|      |              |
|------|--------------|
| Name | Relationship |
|------|--------------|

Are you an employee of another broker-dealer?  Yes  No

Broker-Dealer Name

Is a member of your immediate family affiliated with or employed by another broker-dealer?  Yes  No

|                    |               |              |
|--------------------|---------------|--------------|
| Broker-Dealer Name | Employee Name | Relationship |
|--------------------|---------------|--------------|

Are you maintaining any other brokerage accounts?  Yes  No

|                |                                |
|----------------|--------------------------------|
| Brokerage Name | Years of Investment Experience |
|----------------|--------------------------------|

Are you a member/employee or related to a member/employee of a national securities association (i.e. NYSE or FINRA)?  Yes  No

If yes, please list the affiliation here.

Are you, or an immediate family member, a director, 10% shareholder, policy-making officer or controlling person of a publicly traded company?  Yes  No

If yes, please provide company(ies)

**STEP 5. ADDITIONAL HOLDER/PARTICIPANT INFORMATION**

If disregarded entity, enter information for the U.S. owner.

A copy of the ID is required for each non-U.S. person and for U.S. citizens living abroad. Proof of address may also be required.

|   |                |   |  |
|---|----------------|---|--|
| Name  |                |   |  |
| Holder/Participant Role   |                |   |  |
| Social Security (SSN)/ Employee Identification #(EIN)                           |                | <input type="checkbox"/> Person <input type="checkbox"/> Entity | Date of Birth  |
|   |                |   | Specified Adult*<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
| Email   |                | NAICS Industry Code   |  |
| Primary Citizenship(s)  |                | Additional Citizenship(s)                                       |  |
| U.S. Resident Alien<br><input type="checkbox"/> Yes <input type="checkbox"/> No |                | Country of Birth  |  |
| Home Phone  | Business Phone |   | Mobile Phone   |
| <b>Legal Address</b> (no P.O box)   |                |   |  |
| City  | State/Province | Zip/Postal code   |  |
| Country   |                |   |  |
| <b>Mailing Address</b> (if different from legal address)                        |                |   |  |
| City  | State/Province | Zip/Postal code   |  |
| Country   |                |   |  |

\*"Specified adult" shall mean: (a) a natural person age 65 and older; or (b) a natural person age 18 and older who the member reasonably believes has a mental or physical impairment that renders the individual unable to protect his or her own interests. If you wish to add a trusted contact, please complete the trusted contact form.

**Gender**

Male  Female

**Marital Status**

Single  Married  Divorced  Domestic Partner  Widowed

|                                       |                                  |
|---------------------------------------|----------------------------------|
| Number of Dependents                  | Education Level                  |
| Beneficial Owner Percent of Ownership | Controlling Person Position Held |

**Employment Status and Industry Affiliations**

Employed  Self-Employed  Retired  Unemployed  Homemaker  Student

|                    |                |                  |         |
|--------------------|----------------|------------------|---------|
| Occupation         | Years Employed | Type of Business |         |
| Employer Name      |                |                  |         |
| Employer's Address |                |                  |         |
| City               | State/Province | Zip/Postal Code  | Country |

**General Investment Knowledge and Experience**

Limited  Moderate  Extensive  None



**Knowledge and Experience by Investment Type**

| INVESTMENT              | INVESTMENT KNOWLEDGE             |                                   |                                    |                               | INVESTMENT EXPERIENCE |
|-------------------------|----------------------------------|-----------------------------------|------------------------------------|-------------------------------|-----------------------|
| Annuities Fixed         | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Annuities Variable      | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Commodities and Futures | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Equities                | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Exchange Traded Funds   | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Fixed Income            | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Insurance               | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Mutual Funds            | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Options                 | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Other:                  | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Precious Metals         | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Real Estate             | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |
| Unit Investment Trusts  | <input type="checkbox"/> Limited | <input type="checkbox"/> Moderate | <input type="checkbox"/> Extensive | <input type="checkbox"/> None | Since Year:           |

**Financial Information**

**Identify Verification Method Used**

- Compliance Data Center Inc. Report (CDCR)
  Internal Review (INRV)
  Regulatory Data Corporation (RDCR)
  Other ID Vendor (OTHR)

|  |       |
|--|-------|
| <b>Annual Income:</b> From \$              | To \$ |
| <b>Net Worth (excluding home):</b> From \$ | To \$ |
| <b>Liquid Net Worth:</b> From \$           | To \$ |

**Tax Bracket:**  0-15%  15.1%-32%  32.1%-50%  50.1%+

**Unexpired Government Identification**

Government issued unexpired photo identification should be provided for all individuals that were not verified using non-documentary methods, and for non-resident aliens, along with an IRS form W-8BEN.

| GOVERNMENT PHOTO ID #1           |               |                    |
|----------------------------------|---------------|--------------------|
| Type of Unexpired Photo ID       | ID Number     | Country of Issue   |
| State/Province/Subdivision of ID | Date of Issue | Date of Expiration |

| GOVERNMENT PHOTO ID #2           |               |                    |
|----------------------------------|---------------|--------------------|
| Type of Unexpired Photo ID       | ID Number     | Country of Issue   |
| State/Province/Subdivision of ID | Date of Issue | Date of Expiration |

ID Verification Comments

**Corporate/Business Information**

|                              |  |                                 |
|------------------------------|--|---------------------------------|
| Corporate/Business ID Number | Formation Date of Corporation/Business | State/Province of Incorporation |
| Country of Incorporation     | Legal Entity Identifier (LEI)          |                                 |

**Broker-Dealer Affiliations**

Are you an employee of this broker-dealer?  Yes  No

Are you related to an employee at this broker-dealer?  Yes  No

|      |              |
|------|--------------|
| Name | Relationship |
|------|--------------|

Are you an employee of another broker-dealer?  Yes  No

|                    |
|--------------------|
| Broker-Dealer Name |
|--------------------|

Is a member of your immediate family affiliated with or employed by another broker-dealer?  Yes  No

|                    |               |              |
|--------------------|---------------|--------------|
| Broker-Dealer Name | Employee Name | Relationship |
|--------------------|---------------|--------------|

Are you maintaining any other brokerage accounts?  Yes  No

|                |                                |
|----------------|--------------------------------|
| Brokerage Name | Years of Investment Experience |
|----------------|--------------------------------|

Are you a member/employee or related to a member/employee of a national securities association (i.e. NYSE or FINRA)?  Yes  No

|   |
|---|
| If yes, please list the affiliation here. |
|---|

Are you, or an immediate family member, a director, 10% shareholder, policy-making officer or controlling person of a publicly traded company.  Yes  No

|                                     |
|-------------------------------------|
| If yes, please provide company(ies) |
|-------------------------------------|

**Additional Participants**

Are there more than two participants for this account? If Yes, complete the Additional Holder/Participant Information Supplement sheet.  Yes  No

**STEP 6. FINCEN CERTIFICATION**

|                                     |                    |
|-------------------------------------|--------------------|
| FinCEN Certification Form Signed by | Certification Date |
| Position Held by FinCEN Certifier   |                    |

**STEP 7. TRUSTED CONTACT**

**Check this box to decline appointing a Trusted Contact.**  
 By checking this box you indicate that you do not choose to designate a Trusted Contact at this time.  
 Please add a separate sheet for additional trusted contacts.

|                 |                |                 |
|-----------------|----------------|-----------------|
| Name            |                | Date of Birth   |
| Email           |                |                 |
| Home Phone      | Business Phone | Mobile Phone    |
| Mailing Address |                |                 |
| City            | State/Province | Zip/Postal Code |
| Country         |                |                 |

|                 |                |                 |
|-----------------|----------------|-----------------|
| Name            |                | Date of Birth   |
| Email           |                |                 |
| Home Phone      | Business Phone | Mobile Phone    |
| Mailing Address |                |                 |
| City            | State/Province | Zip/Postal Code |
| Country         |                |                 |

**STEP 8. INTERESTED PARTIES**

Please add a separate sheet for additional interested parties.

|                 |                |                 |
|-----------------|----------------|-----------------|
| Name            |                | Date of Birth   |
| Email           |                |                 |
| Home Phone      | Business Phone | Mobile Phone    |
| Mailing Address |                |                 |
| City            | State/Province | Zip/Postal Code |
| Country         |                |                 |

Type of Notification:  Statement  Confirmation  Proxy

|                 |                |                 |
|-----------------|----------------|-----------------|
| Name            |                | Date of Birth   |
| Email           |                |                 |
| Home Phone      | Business Phone | Mobile Phone    |
| Mailing Address |                |                 |
| City            | State/Province | Zip/Postal Code |
| Country         |                |                 |

Type of Notification:  Statement  Confirmation  Proxy

**STEP 9. CASH MANAGEMENT**

Your financial organization makes certain sweep options available to you, which may include money market mutual funds as well as bank deposit sweep products. The options available to you are subject to change and you should contact your investment professional for additional information on the products available to you through your financial organization’s sweep program. Your financial organization may have a default sweep instruction.

Once a sweep option is elected, any free credit balance in your brokerage account will be automatically invested into the sweep product selected and any debits in your brokerage account will also be covered automatically by redemptions, to the extent you have a balance in the sweep product sufficient to cover the debit balance.

**To utilize the sweep feature, please enter your sweep option below.**

(Money market fund, or bank deposit sweep product.)

|  |
|--|
| Product Name or Acronym of Your Sweep Option |
|--|

**STEP 10. ON-LINE USER ID AND ELECTRONIC DELIVERY OF ACCOUNT COMMUNICATIONS**

For your convenience, account communications will be delivered to you electronically. (Account communications are described in the Portal Access Terms and Conditions; Electronic Delivery Consent below.) You will be notified by e-mail when documents become available for you to retrieve online at our website. The URL for the website will be provided to you via email once your ID has been established.

|  |
|--|
| To link this account to your existing ID, please provide the ID here |
|--|

Electronic delivery is subject to the Terms and Conditions that apply to this Agreement. A valid email address must be provided for delivery of notification emails. A valid phone number must be provided to setup a secure One Time Passcode.

**For online access, please provide this required information:**

|  |   |
|--|---|
| Security Word/Mother’s Maiden Name (last name) | Date of Birth ( <b>required</b> to establish a User ID)   |
| Email Address ( <b>required</b> )              | Online Access Phone Number and Country Calling Code ( <b>required</b> to establish One Time Passcode) |

Additional information about Electronic Delivery can be found in the Electronic Delivery Terms that accompany this Agreement.

If you are requesting a new User ID, indicate your first and second choices below. User IDs must have a minimum of 7 and maximum of 15 characters (using only letters and numbers, no special characters accepted). If you do not select a User ID, we will attempt to create one for you. You may log online with your existing User ID and link this new account to your User ID.

|                                |                                 |
|--------------------------------|---------------------------------|
| User ID Desired (first choice) | User ID Desired (second choice) |
|--------------------------------|---------------------------------|

If you do not request a User ID above, or if you change your delivery preferences, each Account Communication delivered via paper may be subject to a fee. At any time, if you would prefer to receive certain Account Communications via paper, please log in online upon receipt of your User ID and change your delivery preferences. Each Account Communication delivered via paper may be subject to a fee.

**STEP 11. OBJECTIVE AND INVESTMENT DETAILS**

**Investment Time Horizon and Liquidity Needs**

|   |   |
|---|---|
| Risk Exposure<br><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High Risk <input type="checkbox"/> Speculation | Account Investment Objectives<br><input type="checkbox"/> Income <input type="checkbox"/> Long-Term Growth <input type="checkbox"/> Short-Term Growth |
| Time Horizon  | Liquidity Needs<br><input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low   |

**Other Investments**

| INVESTMENT             | INVESTMENT VALUE | INVESTMENT              | INVESTMENT VALUE |
|------------------------|------------------|-------------------------|------------------|
| Equities               | Value \$         | Fixed Annuities         | Value \$         |
| Options                | Value \$         | Precious Metals         | Value \$         |
| Fixed Income           | Value \$         | Commodities and Futures | Value \$         |
| Mutual Funds           | Value \$         | Other:                  | Value \$         |
| Unit Investment Trusts | Value \$         | Other:                  | Value \$         |
| Exchange-Traded Funds  | Value \$         | Other:                  | Value \$         |
| Real Estate            | Value \$         | Other:                  | Value \$         |
| Insurance              | Value \$         | Other:                  | Value \$         |
| Variable Annuities     | Value \$         | Other:                  | Value \$         |

**STEP 12. TAX LOT DISPOSITION METHODS**

Please choose one disposition method as your default for a) Mutual Funds, b) Stocks in BNY Pershing’s Dividend Reinvestment Plans and c) All other securities. If a default disposition method is not chosen by you or your Financial Organization, the federally mandated default method will be applied on the account.

**DISPOSITION METHODS FOR MUTUAL FUNDS**

- Average Cost (using FIFO)
- First In, First Out (FIFO)
- High Cost
- High Cost Long-Term
- High Cost Short-Term
- Last In, First Out (LIFO)
- Low Cost
- Low Cost Long-Term
- Low Cost Short-Term
- Minimize Short-Term Gains

**DISPOSITION METHODS FOR STOCKS IN BNY PERSHING’S DIVIDEND REINVESTMENT PLAN**

- Average Cost (using FIFO)
- First In, First Out (FIFO)
- High Cost
- High Cost Long-Term
- High Cost Short-Term
- Last In, First Out (LIFO)
- Low Cost
- Low Cost Long-Term
- Low Cost Short-Term
- Minimize Short-Term Gains

**DISPOSITION METHODS FOR ALL OTHER SECURITIES**

- First In, First Out (FIFO)
- High Cost
- High Cost Long-Term
- High Cost Short-Term
- Last In, First Out (LIFO)
- Low Cost
- Low Cost Long-Term
- Low Cost Short-Term
- Minimize Short-Term Gains

**STEP 13. BOND ELECTIONS**

If you do not choose bond elections, the noted IRS defaults will be selected.

**Election 1 - Bond Premium Amortization (tax free bonds must be amortized)**

- Yes/IRS Default:** Amortize.  
 **No/Alternative:** Do not amortize.

**Election 2 - Market Discount Accrual Method**

- Ratable/Alternative**  
 **Constant Yield/IRS Default**

**Election 3 - Include Market Discount as Income**

- No/IRS Default:** Don't include market discount as income.  
 **Yes/Alternative:** Include market discount in income.

**STEP 14. ADDITIONAL INFORMATION****Municipal Bond Offering Official Statements**

Municipal bond offering official statements are available electronically at: <http://www.emma.msrb.org/>

Are you interested in hard copy delivery of Municipal Bond Official Statements for this account?

Yes  No

*This space intentionally left blank.*

**STEP 15. STANDING/PERIODIC INSTRUCTIONS**

How would you like to handle Interest and Dividends?

- Remit  Credit

**Income Distribution**

**Method**

- First-Party Check  Third-Party Check (provide name and address below and a completed letter of authorization)  
 ACH (requires a completed ACH authorization form)  Journal (requires a completed letter of authorization)

Account for Journal

**Frequency**

- Annually  Semiannually  Quarterly  Bimonthly  Monthly  Semimonthly

First Payment Date

**Information for Third-Party Check (if applicable)**

|                 |                |                |                 |
|-----------------|----------------|----------------|-----------------|
| Name            |                | Email          |                 |
| Home Phone      | Business Phone | Mobile Phone   |                 |
| Mailing Address |                |                |                 |
| City            |                | State/Province | Zip/Postal Code |
| Country         |                |                |                 |

Type of Notification:  Statement  Proxy  Confirmation

**Principal Distribution**

**Method**

- First-Party Check  Third-Party Check (provide name and address below and a completed letter of authorization)  
 ACH (requires a completed ACH authorization form)  Journal (requires a completed letter of authorization)

Account for Journal

**Frequency**

- Annually  Semiannually  Quarterly  Bimonthly  Monthly  Semimonthly

First Payment Date

**Information for Third-Party Check (if applicable)**

|                 |                |                |                 |
|-----------------|----------------|----------------|-----------------|
| Name            |                | Email          |                 |
| Home Phone      | Business Phone | Mobile Phone   |                 |
| Mailing Address |                |                |                 |
| City            |                | State/Province | Zip/Postal Code |
| Country         |                |                |                 |

Type of Notification:  Statement  Proxy  Confirmation

**STEP 16. U.S. TAXPAYER NUMBER CERTIFICATION**

This section is not to be used by non-U.S. person (see definition of U.S. person below).

**Taxpayer Certification**

Under penalties of perjury, I certify that:

1. The number shown for the Primary Account Holder on this form is my correct Social Security Number or Taxpayer Identification Number (or I am waiting for a number to be issued to me);
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 (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**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. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. If you are an exempt payee (if you are unsure, ask us for a complete set of IRS instructions), enter your exempt payee code (if any) here:

If you are exempt from FATCA reporting (if you are unsure, ask us for a complete set of IRS instructions), enter your exemption from FATCA reporting code (if any) here: \_\_\_\_\_

**Definition of a U.S. person.**

For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7)

**STEP 17. SIGNATURES**

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

Please Review your information, read the New Account Agreement Disclosures and sign here. Keep a copy for your records.

**I ACKNOWLEDGE AND AGREE THAT THIS AGREEMENT CONTAINS A PREDISPUTE ARBITRATION CLAUSE, IN PARAGRAPHS 13 AND 14, ON PAGES 1 AND 2 OF THE NEW ACCOUNT AGREEMENT DISCLOSURES. I HEREBY ACKNOWLEDGE RECEIPT OF THIS NEW ACCOUNT AGREEMENT WITH PREDISPUTE ARBITRATION CLAUSE THEREIN.**

**Primary Account Holder or Authorized Person**

**Authorized Signer 1**

|                       |      |
|-----------------------|------|
| Print Name            | Date |
| Signature<br><b>X</b> |      |

**Authorized Signer 2**

|                       |      |
|-----------------------|------|
| Print Name            | Date |
| Signature<br><b>X</b> |      |

**For Broker-Dealer Use Only**  Accepted: Investment professional is registered in the client's state of residence.

|                                      |                        |
|--------------------------------------|------------------------|
| Investment Professional Printed Name | Principal Printed Name |
| Date                                 | Date                   |
| Signature<br><b>X</b>                | Signature<br><b>X</b>  |



# New Account Agreement Disclosures

## TO: FINANCIAL ORGANIZATION AND ITS ASSIGNS

"Your Account" means the account identified in Step 1: Account Registration.

### 1. Provisions in the Event of Failure to Pay or Deliver

Whenever I (we) do not, on or before the settlement date, pay in full for any security purchased for my (our) account, or deliver any security sold for such account, you are authorized (subject to the provisions of any applicable statute, rule, or regulation):

(A) Until payment or delivery is made in full, to pledge, repledge, hypothecate, or rehypothecate, without notice, any or all securities which you or your clearing agent may hold for me (either individually or jointly with others), separately or in common with other securities or commodities or any other property, for the sum then due or for a greater or lesser sum and without retaining in your possession and control for delivery a like amount of similar securities.

(B) To sell any or all securities which you or your clearing agent may hold for me (either individually or jointly with others), to buy in any or all securities required to make delivery for my (our) account, or to cancel any or all outstanding orders or commitments for my (our) account.

### 2. Cancellation Provisions

You are authorized, in your discretion, should I (we) die or should you for any reason whatever deem it necessary for your protection, without notice, to cancel any outstanding orders in order to close out my (our) accounts, in whole or in part, or to close out any of the commitments made on my (our) behalf.

### 3. General Provisions

Any sale, purchase, or cancellation authorized hereby may be made according to your judgement and at your discretion on the exchange or other market where such business is then usually transacted, at public auction, or at private sale without advertising the same and without any notice, prior to tender, demand, or call. You may purchase the whole or any part of such securities free from any right of redemption, and I (we) shall remain liable for any deficiency. It is further understood that any notice, prior to tender, demand, or call, from you shall not be considered a waiver of any provision of this agreement. I (we) shall include any person executing this agreement. With my (our) signature on this document, I (we) authorize any free credit balance in my account to be automatically invested into the sweep product elected, unless I (we) instruct my financial organization differently. Pershing LLC is further authorized to rely on instructions that I (we) give to my financial organization regarding my (our) sweep elections. I (we) agree, that my (our) sweep option may be changed, including changes between money market funds and bank deposit products, with prior notification to me (us).

### 4. Successors and Assigns

This agreement and its provisions shall be continuous, and shall inure to the benefit of your present organization, and any successor organization or assigns, and shall be binding upon me (us) and/or the estate, executors, administrators, and assigns of my (our) account.

### 5. Age

I (we), if an individual, represent that I (we) am (are) of full age.

### 6. Interest in Account

No one except me (us) has an interest in any of my (our) accounts with you unless such interest is revealed in the title of such account, and in any case, I (we) have the interest indicated in such title.

### 7. Orders and Statements

Reports of the execution of orders and statements of my (our) account shall be conclusive if not objected to in writing, the former within two days and the latter within ten days, after forwarding by you to me (us) by mail or otherwise.

### 8. Extraordinary Events

You shall not be liable for loss or delay caused directly or indirectly by war, natural disasters, government restrictions, exchange, or market rulings, or other conditions beyond your control.

### 9. Fees and Charges

I (we) agree to the fees and charges on the fee schedule received by me (us). You may change the fee schedule from time to time.

### 10. Joint Accounts

If this is a joint account, unless we notify you otherwise and provide such documentation, as you require, the brokerage account(s) shall be held by us jointly with rights of survivorship (payable to either or the survivor of us). Each joint tenant irrevocably appoints the other as attorney-in-fact to take all action on his or her behalf and to represent him or her in all respects in connection with this Agreement. You shall be fully protected in acting, but shall not be required to act upon the instructions of either of us. Each of us shall be liable, jointly and individually, for any amounts due to you pursuant to this Agreement, whether incurred by either or both of us.

### 11. Address

Communications may be sent to me (us) at my (our) current address which is on file at your office, or at such other address as I (we) may hereafter give you in writing. All communications so sent, whether by mail, telegraph, messenger, or otherwise, shall be deemed given to me (us) personally, whether actually received or not.

### 12. Recording Conversations

I (we) understand and agree that for our mutual protection you may electronically record any of my (our) telephone conversations.

### 13. ARBITRATION DISCLOSURES

**THIS AGREEMENT CONTAINS A PREDISPUTE ARBITRATION CLAUSE. BY SIGNING AN ARBITRATION AGREEMENT THE PARTIES AGREE AS FOLLOWS:**

- **ALL PARTIES TO THIS AGREEMENT ARE GIVING UP THE RIGHT TO SUE EACH OTHER IN COURT, INCLUDING THE RIGHT TO A TRIAL BY JURY, EXCEPT AS PROVIDED BY THE RULES OF THE ARBITRATION FORUM IN WHICH A CLAIM IS FILED.**
- **ARBITRATION AWARDS ARE GENERALLY FINAL AND BINDING; A PARTY'S ABILITY TO HAVE A COURT REVERSE OR MODIFY AN ARBITRATION AWARD IS VERY LIMITED.**
- **THE ABILITY OF THE PARTIES TO OBTAIN DOCUMENTS, WITNESS STATEMENTS, AND OTHER DISCOVERY IS GENERALLY MORE LIMITED IN ARBITRATION THAN IN**

## COURT PROCEEDINGS.

- **THE ARBITRATORS DO NOT HAVE TO EXPLAIN THE REASON(S) FOR THEIR AWARD, UNLESS, IN AN ELIGIBLE CASE, A JOINT REQUEST FOR AN EXPLAINED DECISION HAS BEEN SUBMITTED BY ALL PARTIES TO THE PANEL AT LEAST 20 DAYS PRIOR TO THE FIRST SCHEDULED HEARING DATE.**
- **THE PANEL OF ARBITRATORS WILL TYPICALLY INCLUDE A MINORITY OF ARBITRATORS WHO WERE OR ARE AFFILIATED WITH THE SECURITIES INDUSTRY.**
- **THE RULES OF SOME ARBITRATION FORUMS MAY IMPOSE TIME LIMITS FOR BRINGING A CLAIM IN ARBITRATION. IN SOME CASES, A CLAIM THAT IS INELIGIBLE FOR ARBITRATION MAY BE BROUGHT IN COURT.**
- **THE RULES OF THE ARBITRATION FORUM IN WHICH THE CLAIM IS FILED, AND ANY AMENDMENTS THERETO, SHALL BE INCORPORATED INTO THIS AGREEMENT.**

## 14. ARBITRATION AGREEMENT

ANY CONTROVERSY BETWEEN YOU OR BNY PERSHING AND US SHALL BE SUBMITTED TO ARBITRATION BEFORE AND ONLY BEFORE THE FINANCIAL INDUSTRY REGULATORY AUTHORITY. NO PERSON SHALL BRING A PUTATIVE OR CERTIFIED CLASS ACTION TO ARBITRATION, NOR SEEK TO ENFORCE ANY PREDISPUTE ARBITRATION AGREEMENT AGAINST ANY PERSON WHO HAS INITIATED IN COURT A PUTATIVE CLASS ACTION; OR WHO IS A MEMBER OF A PUTATIVE CLASS WHO HAS NOT OPTED OUT OF THE CLASS WITH RESPECT TO ANY CLAIMS ENCOMPASSED BY THE PUTATIVE CLASS ACTION UNTIL; (I) THE CLASS CERTIFICATION IS DENIED; (II) THE CLASS IS DECERTIFIED; OR (III) THE CUSTOMER IS EXCLUDED FROM THE CLASS BY THE COURT. SUCH FORBEARANCE TO ENFORCE AN AGREEMENT TO ARBITRATE SHALL NOT CONSTITUTE A WAIVER OF ANY RIGHTS UNDER THIS AGREEMENT EXCEPT TO THE EXTENT STATED HEREIN. THE LAWS OF THE STATE OF NEW YORK GOVERN.

## 15. Specified Adult and Trusted Contact Disclosure

By completing a physical or electronic contact form or providing Trusted Party information to my broker or investment professional for electronic capture, I/we authorize the named Financial Institution and Pershing LLC ("BNY Pershing") and their affiliates to share my nonpublic personal information\* held at Financial Institution and BNY Pershing with the named trusted contact person(s) (the "Trusted Contact Person(s)") identified as such. Additionally, I/we authorize this information to be shared with the Trusted Contact Person(s) at the discretion of Financial Institution and BNY Pershing. This authorization includes, but is not limited to, sharing or disclosing any information regarding securities, insurance, bank related, financial planning or other financial products or services offered by or through Financial Institution and/or BNY Pershing or any financial information I/we may have provided to Financial Institution and BNY Pershing. I/we understand that Financial Institution and Pershing, LLC may contact the named Trusted Contact Person(s) if there are questions/concerns about my whereabouts or health status (i.e., if Financial Institution and BNY Pershing becomes concerned that I may no longer be able to handle my financial affairs) or in the event that Financial Institution and BNY Pershing becomes concerned that I may be a victim of fraud or exploitation.

Account owners should contact their Financial Institution or financial representative with additional questions.

Account owners may also contact FINRA at its toll-free number for senior investors to get assistance or raise concerns about issues with brokerage accounts and investments.

CALL: 844-57-HELPS (844-574-3577)  
MONDAY - FRIDAY; 9 - 5 P.M. ET

\* "Nonpublic personal information" includes, but is not limited to: financial account information and balances, information regarding the purchase of a security or insurance product, and any other personally identifiable financial information: (i) provided by a me/us to my/our Financial Institution; (ii) resulting from any transaction in my/our account or any service performed on behalf of me/us by the Financial Institution; or (iii) otherwise obtained from me/us by the Financial Institution.

## 16. Amendment and Modification of Agreement

I (we) agree that you or your successors or assigns may unilaterally, at any time, change or modify the terms and conditions of this New Account Agreement by sending me notice of the change as required by law or regulation.

## 17. Portal Access Terms and Conditions; Electronic Delivery Consent.

"Website" or "Investor Portal" means the investor portal or portals, maintained by BNY Pershing, and/or your Financial Organization, that enables You to access information and perform other activities with respect to Your Account, whether such investor portal is accessed through an internet website, a mobile application that we maintain, or a third-party mobile application that we authorize.

"Account Communications" means all documents, communications and information related to Your Account including, but not limited to, account statements, trade confirmations, prospectuses, quarterly, semi-annual or annual shareholder reports, proxy statements, tax forms, and other legal and regulatory notices, disclosures and documents.

You acknowledge and agree that you have ready access to and use electronic communications.

Portal Access Terms and Conditions. You expressly agree and acknowledge that your use and any Authorized Users' use of the Portal is subject to the terms and conditions of use posted on the Portal or otherwise made available to You including, without limitation, any disclaimers of warranties and other notices. Such terms and conditions may be amended from time to time. Continued use of the Portal by You or any of your Authorized Users constitutes acceptance of the then-current terms and conditions. We will provide a user ID and password for accessing the Portal. In order to maintain Your Account, you are required to confirm your user ID and password and confirm that you are able to access the Portal. You agree that You are solely responsible for safeguarding and keeping confidential the password and user IDs that You and your Authorized Users use to access the Portal and any information that is retrieved from the Portal. You agree that You and your Authorized Users will only access the Portal from devices with industry standard anti-virus/anti-malware protection. You accept responsibility for all activities that occur under such user ID(s) or password(s). You understand and agree that access to the internet and a valid email address are required to open Your Account and to access it through the Portal, and that

# New Account Agreement Disclosures

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you are responsible for notifying us of any change to your email address, which You can do through the Portal. You understand that we may also require a method of two-factor authentication for access to the Portal, such as a mobile telephone or other device capable of receiving SMS messages or a device capable of running a multi-factor authentication application. You agree to immediately notify your Financial Organization if: (i) Your passwords or user IDs are lost or stolen, or (ii) You become aware of any unauthorized use of the passwords, user IDs, or access to Your Accounts that may be related to your use of the Portal. BNY Pershing is not liable for any loss or damage arising from any activity that occurs via the use of your password and/or user ID.

Use of this online service is at your sole risk. The Portal is provided on an "as is," "as available" basis and without warranties including, without limitation, those of merchantability, fitness for a particular purpose or non-infringement, other than those warranties which are implied by and incapable of exclusion, restriction, or modification under the laws applicable to this Portal service. No BNY Affiliate, nor their respective members, officers, partners, directors, employees, representatives, agents, contractors, information providers or services, warrants timeliness, sequence, accuracy, completeness, reliability, or content of electronic information or that Portal service will be uninterrupted or error free. You agree that BNY Pershing or your Financial Organization may send notices related to online activity in Your Account to the email address(es) that we have on record for electronic delivery purposes.

## **Consent to Electronic Services and Delivery.**

You agree to conduct business with respect to Your Account electronically. You consent to the use of electronic signatures in connection with all matters relating to Your Account and agree that your use of an electronic signature to sign any document or agreement relating to Your Account legally binds you in the same manner as if you had manually signed such document. You consent to the electronic delivery of all Account Communications, and you agree that this consent may be relied upon by any issuer or other third party from whom we receive Account Communications on your behalf or on behalf of whom we transmit Account Communications to You. Account Communications will be delivered to You through the Portal. We will send you an email or other digital notification when an Account Communication is available to be accessed on the Portal. The email or digital notification will provide You with a link to or instructions for accessing the Account Communication on the Portal. Any email notification will be sent to the email address(es) that we have on record for electronic delivery purposes. While Account Communications will be delivered through the Portal, we may also deliver Account Communications to you through any other form or manner of electronic communications permitted under applicable

law, including through email and text messages, by providing a hyperlink to Communications in this Agreement, or by providing written or electronic notice that includes a hyperlink to or URL or website address for a website where the Communications can be viewed or uploaded. You acknowledge that the Account Communications to be delivered electronically will contain your personal financial information, and you consent to the delivery of such information by electronic means.

Account Communications will be made available in portable document format (PDF) or HyperText Markup Language (HTML) or other compatible formats. You affirm that You have installed a recent version of Adobe Acrobat Reader or other software application that enables You to view and print your Account Communications. You may print or save a copy of any of the Account Communications at any time. Tax-related Account Communications will be available on the Portal for at least six (6) years from the date they were made available. In the event of an electronic delivery notification failure as defined by us, we may discontinue electronic delivery and mail Your Account Communications in paper form until we determine that it is appropriate to resume electronic delivery of Account Communications. If You lose access to the Portal, You should contact your Financial Organization to have your access reinstated. You agree that electronic delivery of an Account Communication is deemed accepted, regardless of whether You access or view a particular Account Communication. You acknowledge that any Authorized Users for Your Account are able to make changes to the electronic delivery settings for Your Account, and You agree to accept responsibility for such changes.

You may request a paper copy of any Account Communication through the mail by contacting your Financial Organization, which may charge you a fee for the delivery of such Account Communication to you. Notwithstanding your consent to electronic delivery of all Account Communications, we may, in our discretion, deliver any Account Communications to you through the mail, including by mailing You a document that includes a website or URL address for a Communication. We will also deliver Account Communications to you through the mail to the extent required by Applicable Law.

*Revocation of Consent.* Your consent to electronic delivery under this Agreement is effective until revoked by You. You may revoke your consent to electronic delivery and receive paper Account Communications by contacting your Financial Organization, who will receive such notice on behalf of us. Any revocation of consent to electronic delivery must be explicit, and any request to provide a paper copy of one or more Account Communications will not constitute a revocation of consent to electronic delivery.