

ACH Authorization Agreement

Please complete the following fields to begin the electronic transfer of funds between your brokerage account and your bank/credit union account. You may begin depositing funds into your brokerage account from your bank/credit union account or send payments to your bank/credit union account from your brokerage account. All transactions are processed through the Automated Clearing House ("ACH") system.

STEP 1. ACCOUNT INFORMATION

Brokerage Account Number	Brokerage Account Holder's Name(s)
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STEP 2. BANK/CREDIT UNION ACCOUNT INFORMATION

- Set up new instructions.
 Replace existing instructions.

ABA Number	DDA Number	
Bank/Credit Union Name		
City	State	Zip/Postal Code

Account Type: Checking Savings

STEP 3. STANDING INSTRUCTIONS

Save this instruction for future on-demand use.

- Standing Instruction — into and out of your brokerage
 Standing Instruction — into your brokerage account only (Deposit)
 Standing Instruction — out of your brokerage account only (Withdrawal)

If you would like to set up a periodic recurring payment and also save banking information as a standing instruction, select appropriate check boxes in both standing and periodic sections.

If you make no standing instruction selection, banking information cannot be used for other payments outside the periodic payment request.

STEP 4. PERIODIC INSTRUCTIONS

Distribution Type

A distribution form is required for distributions from retirement accounts where pershing is the custodian.

- Periodic distributions from your brokerage account to your bank account (Pay Principal)
 Income distributions from your brokerage account to your bank account (Pay Income)

Contribution Type

- Periodic purchase of mutual funds (SRS). ACH is contingent upon the execution of periodic mutual fund purchases.
 Periodic deposits into your brokerage account.

For applicable Pershing retirement accounts only:

- | | | |
|---|---|---|
| <input type="checkbox"/> Participant current year | <input type="checkbox"/> Employer prior year | <input type="checkbox"/> Qualified matching |
| <input type="checkbox"/> Employee deferral current year | <input type="checkbox"/> Employer matching current year | <input type="checkbox"/> Qualified non-elective |
| <input type="checkbox"/> Employee deferral prior year | <input type="checkbox"/> Employer matching prior year | <input type="checkbox"/> Voluntary after tax |
| <input type="checkbox"/> Employer current year | | |



Frequency

- Monthly - Occurs every month
- Semi-monthly - Occurs twice a month
- Bi-monthly - Occurs every other month
- Quarterly - Occurs every 3 months
- Semi-annually - Occurs twice a year
- Annually - Occurs once a year

Amount for Periodic Deposits and Principal Distributions

Dollar Amount (leave blank for Income Distributions or Required Minimum Distribution)	Start Date
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Voided Check

Attach an original or copy of a voided check here.

Jane Doe 101
 123 Anywhere Street
 Anytown, NY

Pay to the Order of _____ \$
 _____ Dollars

MY BANK USA

Memo _____

⑆ 123456789 ⑆ 12345678910 ⑆ 0101

↓
 Bank Routing
 Number

↓
 Checking Account
 Number

↓
 Check Number

We cannot accept starter checks or counter checks (or check numbers below 100).

If a voided check is not available, please attach a MICR-encoded deposit slip or bank statement that includes full bank name, full account name and full account number, or a letter from the bank, on letterhead and signed by a bank employee, confirming the bank account ownership, number and routing information.

For business (e.g., corporations, limited liability companies, partnerships, etc.) and trust accounts, separate supporting documentation confirming the signature authority for both the brokerage and bank accounts are required (for bi-directional and deposit setups).

This space intentionally left blank.

STEP 5. SIGNATURE

I/we hereby authorize Pershing LLC to initiate credit and or debit entries to the above referenced bank/credit union account (the "Bank Account"). This authority remains in full force and effect until Pershing has received written notification of its termination to afford Pershing a reasonable opportunity to act. We may authorize payments for purchasing securities via the Systematic Reinvestment System ("SRS").

I/we represent and warrant that each of us is an owner of the Bank Account and/or that each of us has full authority to cause movement of funds between my/our Pershing account and the Bank Account. I/we understand that Pershing is relying upon this representation in agreeing to permit the movement of funds via ACH between my/our Pershing account and the Bank Account. I/we hereby authorize Pershing LLC and/or my broker-dealer to initiate credit/debit entries to correct any potential erroneous ACH deposit or withdrawal transactions.

Print Name	Date
Signature X	

Print Name	Date
Signature X	

Print Name	Date
Signature X	

Print Name	Date
Signature X	