



UBS Financial Services Inc.

Account Number _____

Check here if this document applies to multiple accounts.

Letter of Authorization for Duplicate Recipient of Tax Records



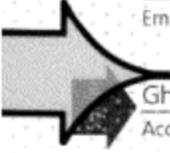
This letter authorizes UBS Financial Services Inc. to send a copy of your tax form for the below account(s) to the following interested party(ies). Such authorization will continue for ten years unless terminated by UBS Financial Services Inc. or until you notify UBS Financial Services Inc. in writing of your decision to terminate the mailing of your tax reports to the parties below.

Be advised that the service only pertains to your form 1099, 1099R or 1099Q. If you are eligible to receive a different tax report, this will not be sent to the below parties. Also be aware that if you are a beneficiary on an account or a participant of a qualified plan, you are not eligible to enroll the account to send duplicate tax information to a third party.

Interested Party Information (may select up to four)

INTERESTED PARTY

Robert		Kuchner	
First Name	Middle Name	Last Name	
[REDACTED]		[REDACTED]	
Address Line 1		Address Line 2	
New York	NY	10017	
City	State	Zip	
[REDACTED]		[REDACTED]	
Email Address		Phone	



Ghislaine	Maxwell	X	X
Account Owner First Name	Last Name	Account Owner Signature	Date

0159495149

