



New Fidelity Account® — Trust — Brokerage

Use this application to open a Fidelity Account® for a trust. To open other account types, visit [redacted] for the appropriate form. Type on screen or print out and fill in using CAPITAL letters and black ink. If you need more room for information or signatures, make a copy of the relevant page.

Important to Understand

By signing this application, you acknowledge that:

- Fidelity Brokerage Services LLC ("FBS") will perform brokerage and administrative services.
- National Financial Services LLC ("NFS") will provide administrative, clearing, and custody services.
- FBS and NFS are together referred to herein as "Fidelity."
- Important documents related to your account include the Fidelity Account Customer Agreement ("Customer Agreement") and other relevant information delivered from time to time.
- In this application, "You," "you," and "your" refers to all account holders, including individual, joint, trustees, and/or custodians. Each of the account holders agrees that any account holder has authority to act on behalf of this account.

Additional Documentation Requirements

- Fidelity Certification of Trust form, provided with this application, or it can be downloaded from [redacted]
- OR if your account is in the name of a foreign trust, or if you prefer not to complete the Fidelity Certification of Trust form, you will need to certify your trust by providing a copy of the pages of the trust document that includes the full name of the trust, trust date, name of the updated or successor trustee(s) that match the trustee(s) listed in this form, and all signatures. **Do not include the entire trust document.**
- Any other required documents as indicated in the appropriate sections of this application (if applicable).

1. Trust Information

Trust Name Enter full trust name as evidenced by the trust document.			
BUTTERFLY TRUST			
For the Benefit of			
Trust Social Security or Tax ID Number	<input type="checkbox"/> SSN	<input checked="" type="checkbox"/> TIN	Date of Trust MM.DD.YYYY
[redacted]			
State/Country of Organization			

Provide the tax reporting number for the trust. A decedent's SSN cannot be used as the tax reporting number.

Trust Address This is the legal address used for tax reporting.

Street Address		
6100 RED HOOK QUARTER B3		
City	State	ZIP Code
ST THOMAS	VI	00802

Mailing Address This may be a [redacted] Box, drop box, or c/o location.

Same as residential address Default if no other information is indicated below.

Mailing Address		
City	State	ZIP Code

Form continues on next page. >>



2. Primary Trustee Information

Provide the following information for the primary trustee. To provide information for any additional trustee(s), grantor(s), and/or any others with the authority to appoint/remove trustees and/or revoke/amend the trust, you can do so in Section 3 and **have all trustees sign in Section 8**. Do not make copies of Section 2 for additional individuals.

Required.
Check ALL that apply.

- Trustee only Authority to appoint/remove trustees
 Trustee and grantor Authority to revoke/amend the trust
 Trustee is an entity *If the trustee is an entity, check the box, enter full entity name as evidenced by the relevant formation document (e.g., trust document, partnership agreement, corporate resolution), and a completed Fidelity Trustee Certification, Partnership Account Agreement, or Corporate Resolution form, as applicable, is required. All required forms and supporting documentation must be provided at the time this application is submitted, or we will be unable to process this request.*

Enter full first and last name as evidenced by a government-issued, unexpired document (e.g., driver's license, passport, permanent resident card).

First Name	Middle Name	Last Name
RICHARD		KAHN
Entity Name		
Date of Birth MM DD YYYY		
[REDACTED]		
Email		
[REDACTED]		
Social Security or Taxpayer ID Number	<input checked="" type="checkbox"/> SSN OR <input type="checkbox"/> TIN	Daytime Phone
[REDACTED]	[REDACTED]	[REDACTED]
		Extension
		[REDACTED]

Residential Address This is the legal address used for tax reporting.

Street Address		
130 EAST 75ST APT 7E		
City	State	ZIP Code
NEW YORK	NY	10021

Mailing Address This may be a Box, drop box, or c/o location.

Same as residential address Default if no other information is indicated below.

Mailing Address		
575 LEXINGTON AVE 4FL		
City	State	ZIP Code
NEW YORK	NY	10022

Citizenship

Indicate your citizenship status.

U.S. citizen
 Foreign citizen *Information in this box must be completed.*
 Permanent U.S. resident Nonpermanent U.S. resident Nonresident of U.S.

Country of Citizenship	Country of Tax Residency <i>Only applicable to nonresidents of the U.S.</i>
City, State/Province, and Country of Birth	
[REDACTED]	

Passport Employment Authorization Document
 DHS Permanent Resident Card Foreign National Identity Document

Check one and **attach a copy of a valid and unexpired government ID** showing number and photo. To claim non-U.S. tax status, also complete and submit an IRS Form W-8BEN.

Primary Trustee Information continues on next page. ►►

2. Primary Trustee Information, continued

Income Source Industry regulations require us to ask for this information.

Check one and provide information.

Employed: Self-employed:

Occupation FINANCIAL EXECUTIVE		Employer <i>Leave blank if self-employed.</i> HBRK ASSOCIATES INC	
Employer Address 575 LEXINGTON AVE 4FL			
City NEW YORK	State/Province NY	ZIP/Postal Code 10022	Country USA

Retired: Not employed:

Source of Income *Pension, investments, spouse, etc.*

Associations

As a person associated with a member firm, you are obligated to receive consent from that firm. Fidelity has existing consent agreements with many firms for their employees to maintain accounts with Fidelity and to deliver transactional data. If your firm is not one of them, Fidelity will attempt to contact your firm's compliance office.

If you are employed by or associated with a broker-dealer, stock exchange, exchange member firm, the Financial Industry Regulatory Authority (FINRA), a municipal securities dealer, or other financial institution, or are the spouse or an immediate family member residing in the same household of someone who meets the aforementioned employment criteria, provide the company's name and address below. By providing this information and completing this form, you hereby authorize Fidelity to provide the associated person's employer with duplicate copies of confirmations and statements, or the transactions data contained therein, for your account(s) and any accounts you choose to have on a consolidated statement for purposes of their compliance review.

Company Name			
Company Address			
City	State/Province	ZIP/Postal Code	Country

If you are, or an immediate family/household member is, a director, corporate officer, or 10% shareholder of a publicly held company, or a control person of a publicly traded company under SEC Rule 144, you must provide the information below.

Company Name	Trading Symbol or CUSIP
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3. Additional Individual Information

Provide the following information for each additional trustee, grantor, and any others with the authority to appoint/remove trustees and/or revoke/amend the trust. If there are more than two individuals, make a copy of this Section 3 and **have all trustees sign in Section 8.**

Required. Check ALL that apply.

Trustee only Grantor only* Authority to appoint/remove trustees*
 Trustee and grantor DECEASED Grantor* *Provide ONLY full legal name* Authority to revoke/amend the trust*

Trustee is an entity *If the trustee is an entity, check the box, enter full entity name as evidenced by the relevant formation document (e.g., trust document, partnership agreement, corporate resolution), and a completed Fidelity Trustee Certification, Partnership Account Agreement, or Corporate Resolution form, as applicable, is required. All required forms and supporting documentation must be provided at the time this form is submitted, or we will be unable to process this request.*

*These individuals will be listed as Beneficial Owners and will not have any authority or be able to take any action on this account or receive any account documentation, unless they are also trustees or granted account authority. If the Beneficial Owner is an Entity, a separate *Beneficial Ownership for Trusts* form, or *Beneficial Ownership—Control Person/Entity Owner for Entities* form, as applicable, must be attached.

Enter full first and last name as evidenced by a government-issued, unexpired document (e.g., driver's license, passport, permanent resident card).

First Name ERIKA	Middle Name	Last Name KELLERHALS
Entity Name		
Date of Birth <i>MM DD YYYY</i>	Email	
Social Security or Taxpayer ID Number	<input type="checkbox"/> SSN <input checked="" type="checkbox"/> OR <input type="checkbox"/> TIN	Daytime Phone Extension

Residential Address This is the legal address used for tax reporting.

Street Address			
ROYAL PALMS PROFESSIONAL BUILDING		62-3A & 62-3B ESTATE THOMAS	
City	State	ZIP Code	
ST THOMAS	VI	00802	

Mailing Address This may be a Box, drop box, or c/o location.

Same as residential address ▷ Default if no other information is indicated below.

Mailing Address			
9053 ESTATE THOMAS SUITE 201			
City	State	ZIP Code	
ST THOMAS	VI	00802	

Citizenship

Indicate your citizenship status. ▶

U.S. citizen

Foreign citizen *Information in this box must be completed.*

Permanent U.S. resident Nonpermanent U.S. resident Nonresident of U.S.

Country of Citizenship	Country of Tax Residency <i>Only applicable to nonresidents of the U.S.</i>
City, State/Province, and Country of Birth	

Passport Employment Authorization Document
 DHS Permanent Resident Card Foreign National Identity Document

Check one and **attach a copy of a valid and unexpired government ID** showing number and photo. To claim non-U.S. tax status, also complete and submit an IRS Form W-8BEN. ▶

Income Source Required ONLY for trustees.

Check one and provide information. Industry regulations require us to ask for this information.

Employed: Self-employed:

Occupation	Employer <i>Leave blank if self-employed.</i>		
ATTORNEY	KELLERHALS FERGUSON KROBLIN PLLC		
Employer Address			
9053 ESTATE THOMAS SUITE 201			
City	State/Province	ZIP/Postal Code	Country
ST THOMAS	VI	00802	USA

Retired: Not employed:

Source of Income *Pension, investments, spouse, etc.*

Additional Individual Information continues on next page. ▶▶



Associations Required ONLY for trustees.

As a person associated with a member firm, you are obligated to receive consent from that firm. Fidelity has existing consent agreements with many firms for their employees to maintain accounts with Fidelity and to deliver transactional data. If your firm is not one of them, Fidelity will attempt to contact your firm's compliance office.

If you are employed by or associated with a broker-dealer, stock exchange, exchange member firm, the Financial Industry Regulatory Authority (FINRA), a municipal securities dealer, or other financial institution, or are the spouse or an immediate family member residing in the same household of someone who meets the aforementioned employment criteria, provide the company's name and address below. By providing this information and completing this form, you hereby authorize Fidelity to provide the associated person's employer with duplicate copies of confirmations and statements, or the transactions data contained therein, for your account(s) and any accounts you choose to have on a consolidated statement for purposes of their compliance review.

Company Name			
Company Address			
City	State/Province	ZIP/Postal Code	Country

If you are, or an immediate family/household member is, a director, corporate officer, or 10% shareholder of a publicly held company, or a control person of a publicly traded company under SEC Rule 144, you must provide the information below.

Company Name	Trading Symbol or CUSIP
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4. Initial Funding This is a one-time contribution.

Check all funding options that apply to this one-time transfer.

Your name and SSN must be identical on both accounts.

- By check payable to Fidelity Brokerage Services LLC. *▶ This must be a check written by you, as third-party checks cannot be accepted.*
- Transfer from another firm *▶ Include a completed Transfer of Assets form available at Fidelity.com/toa.*
- Transfer from your Fidelity nonretirement account: *▶ If entire account value is transferred, the source account will be closed. Account features do not transfer and must be reestablished for the new account.*

Brokerage Account

Your Fidelity Brokerage Account Number	Amount	Must be available as cash.
	\$	

OR All Assets

Mutual Fund-Only Account

Your Fidelity Mutual Fund-Only Account Number	Fidelity Fund Name
Dollar Amount	Number of Shares
\$	

OR Transfer All Shares

5. Core Position

Your core position ("Core Position") is where your money is held until you invest it. For your Core Position, you can choose either of the money market mutual fund options, listed below. If no choice is indicated, the default election is the Fidelity® Government Money Market Fund. You can change your election after your account is open, and there may be options other than those listed here that are available to you. For more information, contact Fidelity. Note that in certain circumstances, such as when Fidelity determines that you reside outside the United States, the Core Position will operate differently. Please refer to the Customer Agreement for further details.

Fidelity taxable money market fund

- Fidelity® Government Money Market Fund (SPAXX) *▶ Default if no choice is indicated.*
- Fidelity® Treasury Money Market Fund (FZFX)

Form continues on next page. ▶▶



6. Ongoing Funding Options

Electronic Funds Transfer (EFT)

See **"Important Information About Electronic Funds Transfer (EFT)"** at the end of this application.

EFT allows you to electronically transfer funds between your bank or other financial institution and Fidelity. This section must be completed for automatic investments from outside Fidelity. Not ready to sign up now? Log in to [Fidelity.com/eft](https://www.fidelity.com/eft) after your account has been opened to establish EFT.

You **must** be an owner of the account at the other financial institution. You will need to attach a voided check, deposit slip, or bank statement with the account number and all owner names preprinted on it.

- Checking
 Savings

Provide bank information below to set up the EFT feature.

Owner(s) Name(s) Exactly as on Bank Account	
Bank Routing/ABA Number	Bank Name
Checking or Savings Account Number	

Automatic Investments

Automatic Investments may be set up at any time to direct Electronic Funds Transfer that are held in your Core Position into the investment vehicle of your choice. This can be established by visiting [REDACTED]

Income and Dividends

All income from securities (dividends, capital gains, or sale proceeds) is automatically deposited into your account. Dividends from mutual funds are reinvested in the originating fund. To change your distributions, call Fidelity or log in to [REDACTED]

7. Account Features

Additional account features are available for your new account. You may establish most of these online at [REDACTED] Or, you may choose from the following:

Checkwriting

- Establish now—Checkwriting form is included with this application.
 Please send information to establish checkwriting in the future.
- Establish Fidelity BillPay®.
- Order me a Fidelity® Visa® Gold Check Card.
 Order a second card for the Additional Account Owner.
- Request Active Trader. *To sign up later, call a trading specialist at 800-564-0211.*
Trades per year 36-119 120+
- Send me information on automatic investments.

Electronic or Paper

If you provided an email address in Section 2 and unless you indicate otherwise below, all materials will be sent to you electronically. To confirm electronic delivery, respond to the Electronic Delivery Agreement and Consent, which we will email to you.

Choose to receive the following by U.S. mail:

- Account statements
 Other documents (including shareholder reports and regular prospectus mailings)
 Trade confirmations and related prospectuses
 Tax forms and related disclosures

Form continues on next page. ►►

8. Account Owner Signatures and Dates

Please be sure to read all the language included on the following pages, as well as sign, date, and return all pages of this application (1–9) to Fidelity.

<p>If you are a U.S. person for tax purposes:</p> <ul style="list-style-type: none"> • Certify under penalties of perjury that you are a U.S. person (including a U.S. resident alien or other U.S. person as defined in the instructions to IRS Form W-9) and the Social Security or Taxpayer Identification Number provided is correct (or that you are waiting for a number to be issued to you). <p>If the IRS has notified you that you are currently subject to backup withholding because you failed to report all interest and dividends on your tax return, CROSS OUT all text in brackets.</p>	<ul style="list-style-type: none"> • Certify under penalties of perjury that you are not subject to backup withholding because any of the following applies: <ul style="list-style-type: none"> – You are exempt from backup withholding. – You have not been notified by the Internal Revenue Service (IRS) that you are subject to backup withholding as a result of a failure to report all interest or dividends. – The IRS has notified you that you are no longer subject to backup withholding. 	<ul style="list-style-type: none"> • Certify under penalties of perjury that the FATCA code(s) entered on this form (if any) indicating that you are exempt from FATCA reporting are correct. <p>If you are not a U.S. person for tax purposes:</p> <ul style="list-style-type: none"> • You are submitting the applicable Form W-8 with this form to certify your foreign status and, if applicable, claim tax treaty benefits.
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To help the government fight financial crimes, federal regulation requires Fidelity to obtain your name, date of birth, address, and a government-issued ID number before opening your account, and to verify the information. In certain circumstances, Fidelity may obtain and verify comparable information for any person authorized to make transactions in an account. Also, federal regulation requires Fidelity to obtain and verify the beneficial owners and control persons of legal entity customers. Requiring the disclosure of key individuals who own or control a legal entity helps law enforcement investigate and prosecute crimes. Your account may be restricted or closed if Fidelity cannot obtain and verify this information. Fidelity will not be responsible for any losses or damages (including, but not limited to, lost opportunities) that may result if your account is restricted or closed.

<p>The IRS does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.</p>	<p>You acknowledge that this account is governed by a predispute arbitration clause, which appears on the last page of the Fidelity Account Customer Agreement, and that you have read the predispute arbitration clause.</p>
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By signing below, you acknowledge that you have read, understand, and agree to be bound by the provisions of this application, including the Terms and Conditions on the next pages.

	PRINT TRUSTEE NAME
	TRUSTEE SIGNATURE
SIGN	X
	TODAY'S DATE MM-DD-YYYY
DATE	

	PRINT TRUSTEE NAME
	TRUSTEE SIGNATURE
SIGN	X
	TODAY'S DATE MM-DD-YYYY
DATE	

446304.17.0

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9. Terms and Conditions

By signing the previous section, you:

- Hereby request Fidelity to open a Fidelity Account in the name of the Trust listed as on this application.
- Affirm that you are at least 18 years old and of full legal age to enter into the agreements associated with this application in your state of residence.
- Represent and warrant that if you have not completed the section titled Associations, you are not associated with or employed by a stock exchange or a broker-dealer and that you are not a control person or associate of a public company under SEC Rule 144 (such as a director, 10% shareholder, or a policy-making officer), or an immediate family or household member of such a person.
- Affirm that you have received, read, understood, and agree to be bound by the terms and conditions of the Customer Agreement, this Application (including, if applicable, the Important Information regarding Electronic Funds Transfer (EFT) and the Margin Agreement) and the Schedule of Fees (which is incorporated into the Agreement by reference and legally forms a part of that document), as is currently in effect and as may be amended in the future. It shall inure to the benefit of Fidelity's successors and assigns, whether by merger, consolidation, or otherwise. Fidelity may transfer your account to its successors and assigns, and this Agreement shall be binding upon your heirs, executors, administrators, successors, and assigns.
- Acknowledge that you have received the description of the Core Position in the Customer Agreement, including Fidelity's right to change the options available as Core Positions, and consent to having free credit balances held or invested in the Core Position indicated above.
- **Understand that your Core Position is a money market fund, and that you could lose money by investing in a money market fund. Although the fund seeks to preserve the value of your investment at \$1.00 per share, it cannot guarantee it will do so. An investment in the fund is not insured or guaranteed by the Federal Deposit Insurance Corporation or any other government agency. Fidelity Investments and its affiliates, the fund's sponsor, have no legal obligation to provide financial support to money market funds and you should not expect that the sponsor will provide financial support to the fund at any time.**
- Understand that Fidelity's government and U.S. Treasury money market funds will not impose a fee upon the sale of your shares, nor temporarily suspend your ability to sell shares if the fund's weekly liquid assets fall below 30% of its total assets because of market conditions or other factors.
- Understand that it is your responsibility to read the prospectus of the Core Position.
- Acknowledge that you have received and read either the full prospectus or summary prospectus for that fund.
- Consent to have only one copy of Fidelity mutual fund shareholder documents, such as prospectuses and shareholder reports ("Documents"), delivered to you and any other investors sharing your address. Your Documents will be householded indefinitely; however, you may revoke this consent at any time by contacting Fidelity at 800-343-3548, and you will begin receiving multiple copies within 30 days. As Documents for other investments become available in the future, these Documents may also be householded in accordance with this authorization or any notice or agreement you received or entered into with Fidelity or its service providers.
- Understand that, upon issuer's request in accordance with applicable rules and regulations, Fidelity will supply your name to issuers of any securities held in your account so you might receive any important information regarding them, unless you notify Fidelity.
- Acknowledge that if the prospectus you received was the summary prospectus, you have the right to request and review the full prospectus before you invest in the fund.
- Agree to indemnify and hold Fidelity harmless from and against any and all losses, liabilities, claims, and costs (including reasonable attorneys' fees) that are in any way connected with your instructions or with any telephone, Internet, or other electronic request for redemption so long as Fidelity transmits the redemption proceeds to the bank account identified above. You further agree that the indemnifications in this bullet are in addition to, and do not limit, any rights that Fidelity may have under any other agreement with you.
- Acknowledge that Fidelity will not be liable for any loss, cost, or expense arising out of your instructions, provided that it institutes reasonable procedures to prevent unauthorized transactions.
- Hereby constitute and appoint Fidelity your true and lawful attorney to surrender for redemption any and all shares held in the above-indicated accounts with full power of substitution in the premises.
- Acknowledge that Fidelity reserves the right to cease to act as agent in connection with the above appointment after provision of notice to the address noted on this form.
- Certify and agree that the certifications, authorizations, and appointments in this document will continue until Fidelity receives actual written notice of any change thereof.
- Agree to be responsible for any and all fees and charges that apply to the account.
- Upon transfer of assets due to any life event (death, divorce, etc.), and unless otherwise instructed, all dividend/interest income paid to the Transferor (Current Asset Holder) of \$100 or less will be systematically allocated to the Transferee (New Asset Holder) receiving the largest share proportion of the account assets. If the account is transferred evenly, the dividend/interest income will be systematically allocated to the last transferee paid. Acknowledge that Fidelity will not be liable for any loss, expense, or cost arising out of your instructions, provided that it institutes reasonable procedures to prevent unauthorized transactions.
- Certify that all information provided to us in this form is true, accurate, and complete.
- Acknowledge that you will receive a monthly account statement from Fidelity, unless there are no transactions in a particular month. In any case, you will receive a statement quarterly.
- Understand that you will be receiving and reviewing separate account agreements for using Fidelity BillPay®, and from PNC Bank, ■■■, for using the Fidelity® Cash Management Account Debit Card.
- Agree that any information you give to Fidelity on this application will be subject to verification, and you authorize Fidelity to obtain a credit report about you at any time. Upon written request, Fidelity will provide the name and address of the credit reporting agency used.
- Certify that this account is not a Pooled or Omnibus Account. A Pooled or Omnibus Account is a single account that pools the holdings of more than one beneficial owner, whose identities are not disclosed to Fidelity, in which the beneficial owners have the ability to effect transactions, and for which subaccounting is performed by the Omnibus Account holder or a third party.

If requesting EFT:

- Acknowledge that you have read and agree to the Important Information about Electronic Fund Transfer document.
- Authorize Fidelity, upon receiving instructions from you, to make payments of amounts representing redemptions by you or distributions payable to you by initiating credit or debit entries to the bank account identified in Section 6 ("Bank"), as indicated on the attached "voided" check, deposit slip, or bank statement. You authorize and request the Bank to accept such entries from Fidelity, and to credit or debit, as indicated, your account at the Bank in accordance with these entries.
- Acknowledge that this authorization may only be revoked by providing written notice of revocation to Fidelity, in such time and manner as afford Fidelity and the Bank a reasonable opportunity to act upon it.
- Understand that Fidelity may purge unused EFT instructions from your account on a periodic basis without notice to you.

Form continues on next page. ►►

- Understand that Fidelity may terminate the EFT instructions from your account at any time in its sole discretion.

Trustee Certification of Investment Power:

- Fidelity has the authority to accept instructions relative to the Trust account identified herein from those individuals listed as Trustees in Sections 2 and 3. They may execute any documents on behalf of the Trust that Fidelity may require.
- Certify that Fidelity is authorized to follow the instructions of any Trustee and to deliver funds, securities, or any other assets in the account to any Trustee on any Trustee's instructions, including delivering assets to a Trustee personally. Fidelity, in its sole discretion and for its sole

protection, may require the written consent of any or all Trustees before acting on the instructions of any Trustee.

- Certify that there are no Trustees of the Trust other than those listed above. Should only one person execute this agreement, it shall be a representation that the signer is the sole Trustee. Where applicable, plural references in this certification shall be deemed singular. The Trustees represent that they have the power under the Trust Agreement and applicable law to enter into the transactions and issue the instructions that they make on behalf of the Trust account with Fidelity. The Trustees understand that all such transactions and instructions will be governed by the

terms and conditions of all other account agreements applicable to this account. The Trustees, jointly and severally, indemnify Fidelity and hold Fidelity harmless from any claim, loss, expense, or other liability for acting pursuant to the instructions given by the Trustees. The Trustees further agree not to give any instructions for which they are not in full compliance with the Trust. The Trustees agree to inform Fidelity, in writing, of any change in the composition of the Trustees, or any other event that could alter the certifications made above.

- If included, the pages of the Trust document are true copies of the valid legal document currently in effect.

Did you sign the form and attach a check or any necessary documents?

Please return pages 1-9 and any necessary attachments. You will receive a "New Account Profile" confirming that your account(s) is opened.

Questions? Go to [redacted] or call 800-343-3548.

Use postage-paid envelope, drop off at a Fidelity Investor Center, OR deliver to:

Regular mail

Fidelity Investments

[redacted] Box 770001

Cincinnati, OH 45277-0002

Overnight mail

Fidelity Investments

100 Crosby Parkway KC1K

Covington, KY 41015

On this form, "Fidelity" means Fidelity Brokerage Services LLC and its affiliates. Brokerage services are provided by Fidelity Brokerage Services LLC, Member NYSE, SIPC. All trademarks and service marks used herein are the property of their respective owners. 446304.17.0 (03/18)

Trusted Contact Authorization Form

Your physical and financial well-being are among our top priorities. Let us help you safeguard both.

Use this form to designate a primary and alternate trusted contact, that is 18 years or older, for your Fidelity account(s). Do NOT use this form for charitable giving accounts or workplace retirement plans, such as a 401(k). Type on screen or fill in using CAPITAL letters and black ink. If you need more room for information or signatures, make a copy of the relevant page.

Helpful to Know

- To prepare yourself and your trusted contact(s) for success, consider choosing someone with whom you are comfortable discussing your health, relationships, loved ones, work, and finances. You may also want to consider selecting someone who isn't currently involved in your financial life, like a beneficiary or power of attorney, to ensure fairness and objectivity.
- This form supersedes any previous trusted contact designations that you may have submitted.
- If you are using this form for an Entity relationship (for ex: a business account), we will assign the Trusted Contact(s) to the Authorized Individual that signs this form.
- If Fidelity has questions or concerns about your health or welfare due to potential diminished capacity, financial exploitation or abuse, endangerment, and/or neglect, this form authorizes us to get in touch with the trusted contact(s) and:
 - Provide the trusted contact(s) listed below with information about you and/or your account(s), including notice of a temporary hold, but does not provide him or her with the ability to transact on your account(s).
 - Inquire about your current contact information or health status.
 - Inquire about whether another person or entity has legal authority to act on your behalf (e.g., legal guardian or conservator, executor, or trustee).

1. Account Owner

First Name	Middle Name	Last Name
Social Security or Taxpayer ID Number		

2. Accounts Included

Check only one. ALL eligible accounts associated with the above Social Security or Taxpayer ID Number > Skip to Section 3.
 ONLY the account(s) listed below:

Fidelity Account Number	Fidelity Account Number	Fidelity Account Number
Fidelity Account Number	Fidelity Account Number	Fidelity Account Number

3. Primary Trusted Contact

The trusted contact should be someone other than the individual listed in Section 1.

First Name	Middle Name	Last Name
Email		
Phone	Extension	<input type="checkbox"/> Check here if phone number is a mobile number.
Relationship to Owner		

Primary Trusted Contact continues on next page. >>



Legal/Permanent Address

This cannot be a PO box, mail drop, or c/o.

Street Address			
City	State/Province	ZIP/Postal Code	Country

4. Alternate Trusted Contact

The trusted contact should be someone other than the individual listed in Section 1.

First Name	Middle Name	Last Name
Email		
Phone	Extension	<input type="checkbox"/> Check here if phone number is a mobile number.
Relationship to Owner		

Legal/Permanent Address

This cannot be a PO box, mail drop, or c/o.

Street Address			
City	State/Province	ZIP/Postal Code	Country

5. Signature and Date *Form cannot be processed without your signature and date.*

By signing below, you:

- Authorize Fidelity to communicate with your trusted contact(s) and disclose information about designated accounts to address possible financial exploitation or confirm specifics about your current contact information, your health status, or the identity of any legal guardian, executor, trustee, or holder of a power of attorney, or as otherwise permitted.
- Understand that this does not authorize your trusted contact(s) to separately access or transact on your account(s).
- Understand that you may identify multiple trusted contacts on this form, provided they are 18 years or older.
- Understand that this trusted contact designation is optional and you may withdraw it at any time by notifying Fidelity in writing to one of the business addresses listed below.
- Understand that you may change your trusted contact(s) at any time by completing a new form.
- Certify that all information you provided is correct to the best of your knowledge.
- Acknowledge that we may remove any trusted contact from any account, at any time or for any reason.

PRINT OWNER/AUTHORIZED INDIVIDUAL NAME	
OWNER/AUTHORIZED INDIVIDUAL SIGNATURE	DATE MM/DD/YYYY
SIGN X	X

Did you sign the form? Send the ENTIRE form to Fidelity.
Questions? Go to [redacted] or call 800-343-3548.

Use the postage-paid envelope, drop off at a Fidelity Investor Center, OR deliver to:

Regular mail Fidelity Investments PO Box 770001 Cincinnati, OH 45277-0002	Overnight mail Fidelity Investments 100 Crosby Parkway KC1K Covington, KY 41015
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On this form, "Fidelity" means Fidelity Brokerage Services LLC and its affiliates. Brokerage services are provided by Fidelity Brokerage Services LLC, Member NYSE, SIPC. 802990.2.0 (12/18)

Important Information about Electronic Funds Transfer (EFT)

Keep this information for your records.

Privacy Statement

You understand that Fidelity will disclose information to third parties about your account or the transfers you make:

- (i) Where it is necessary for completing transfers, or
- (ii) In order to verify the existence and condition of your account for a third party, such as a credit bureau or merchant, or
- (iii) In order to comply with a government agency or court order, or
- (iv) If you give Fidelity your written permission, or
- (v) For other purposes in accordance with Fidelity's privacy statement

Fees

There is no fee to use the EFT service, although your financial institution may charge transaction fees.

Limitations for EFTs

There may be a four-day period after Fidelity processes your request to establish EFT, during which the service will be unavailable to transfer funds to or from your bank account. Thereafter, your use of the EFT service is in most cases subject to a maximum transaction amount limit, which will vary based on the type of Fidelity account for which you are establishing the EFT service. Generally speaking, this limit will prevent you from transferring more than \$100,000 to or from your bank account in any single transaction. Cumulative daily limits also apply. Finally, there is a required minimum transaction amount, which generally prohibits you from initiating a transfer of less than \$10 (or, with respect to a Fidelity mutual fund account, the fund minimum) to or from your bank account.

Brokerage Account Minimum Balances

There is no minimum account balance to process an EFT transaction; however, your core account must have adequate funds to cover a redemption.

Mutual Fund Account Minimum Balances

There is no minimum account balance to process an EFT transaction; however, you must have an adequate balance in your mutual fund position to cover a redemption.

Business Days

For purposes of EFTs, Fidelity's business days are Monday through Friday. Bank and New York Stock Exchange holidays are not included.

Documentation Periodic Statement

You will receive a monthly account statement from Fidelity, unless there are no transactions in a particular month. In any case, you will receive a statement quarterly.

Direct Deposits

If you have arranged to have direct deposits made to your Fidelity Account or Fidelity Mutual Fund Account, at least once every sixty (60) days from the same person or company, you can call Fidelity at 1-800-544-6666 to find out whether or not the deposit has been made.

Special Disclosure for Covered Transfers

In general, your use of the EFT service for transfer of funds electronically other than those for which the primary purpose is the purchase or sale of securities ("Covered Transfers") is covered under the Electronic Funds Transfer Act and the Bureau of Consumer Financial Protection's Regulation E and related laws and regulations. The following terms and disclosures apply to Covered Transfers:

Unauthorized Transfers

You will tell Fidelity promptly if you believe your password has been lost or stolen or may have been used without your permission. Telephoning Fidelity at the number listed below is the best way of keeping your possible losses down. If you believe your password has been lost or stolen, and you tell Fidelity within two (2) business days after you learn of the loss or theft, you can lose not more than \$50 for Covered Transfers if someone used your password without your permission. If you do NOT tell Fidelity within two (2) business days after you learn of the loss or theft of your password, and Fidelity can prove Fidelity could have prevented any unauthorized use if you had told Fidelity, you could lose as much as \$500. Also, if your statement shows Covered Transfers that you did not make, you will tell Fidelity promptly. If you do not tell Fidelity within sixty (60) days after the first statement was mailed to you, you may not get back any money you lost after sixty (60) days if Fidelity can prove that Fidelity could have stopped someone from taking the money if you had told Fidelity in time. In extenuating circumstances, Fidelity may extend such time periods. Additional protection may be available from Fidelity for specific accounts under certain circumstances.

Stop Payment Procedures

If you have told Fidelity in advance to make regular Covered Transfers out of your Fidelity account, you can stop any of these payments. Here's how: you can call or write to Fidelity using the contact information listed below. Your notice must be made in time for Fidelity to receive your request at least three (3) business days or more before the payment is scheduled to be made. If you call, Fidelity may, as an additional measure, require you to put your request in writing and get it to Fidelity within fourteen (14) days after you call. **Unless otherwise provided, you may not stop payment of electronic funds transfers; therefore, you should not employ electronic access for purchases or services unless you are satisfied that you will not need to stop payment.**

Fidelity's Liability for Failure to Make Covered Transfers

If Fidelity does not complete a Covered Transfer to or from your Fidelity account on time or in the correct amount according to Fidelity's agreement with you, Fidelity may be liable for your losses or damages.

However, there are some exceptions. Fidelity will not be liable for instance:

- If, through no fault of Fidelity's, you do not have enough money in your Fidelity account to make the Covered Transfer.
- If the money in your Fidelity account is subject to legal process or other claim restricting such transfer.
- If the transfer would exceed your margin availability, if any.
- If the bank account information you provided to Fidelity when you established the EFT service was incorrect or has subsequently become incorrect.
- If circumstances beyond Fidelity's control (such as fire or flood) prevent the transaction, despite reasonable precautions taken by Fidelity.
- If there was a technical malfunction which was known to you at the time you attempted to initiate a Covered Transfer or, in the case of a preauthorized Covered Transfer, at the time the transfer should have occurred.
- There may be other exceptions stated in our agreement with you.

Error Resolution

In the case of errors or questions about your Covered Transfers, you will call or write Fidelity using the contact information listed below, promptly. You will call or write Fidelity if you think your statement is wrong or if you need more information about a Covered Transfer on the statement. **Fidelity must hear from you no later than sixty (60) days after Fidelity sent the FIRST statement on which the problem or error appeared.** You will:

- Tell Fidelity your name and account number.
- Describe the error or the Covered Transfer that you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.
- Tell Fidelity the dollar amount of the suspected error.

If you notify Fidelity orally, Fidelity may require that you send your complaint or question in writing within ten (10) business days. Fidelity will tell you the results of its investigation within ten (10) business days after Fidelity hears from you and will correct any error promptly. If Fidelity needs more time, however, it may take up to forty-five (45) days to investigate your complaint or question. If Fidelity decides to do this, it will credit your account within ten (10) business days for the amount that you think is in error, so that you will have the use of the money during the time it takes Fidelity to complete its investigation. If Fidelity asks you to put your request or question in writing and it does not receive it within ten (10) business days, or if your account is a brokerage account subject to Regulation T of the Board of Governors of the Federal Reserve System (Credit By Brokers and Dealers, 12 CFR 220), Fidelity may not credit your account. For questions involving new accounts, point of sale or foreign initiated transactions, we may take up to ninety (90) days to investigate your complaint or question. With respect to new accounts, we may take up to twenty (20) business days to credit your account for the amount you think is in error. Fidelity will inform you of the results of its investigation within three (3) business days of its completion. If Fidelity decides that there was no error, Fidelity will send you a written explanation. You may ask for copies of the documents that Fidelity used in the investigation.

Contact Information

Fidelity Investments
Box 770001
Cincinnati, OH 45277

Phone: 1-800-544-6666

Representatives are available 24 hours per day, seven days per week, to take your call.

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Automatic Investments—Transaction Policies

It can take up to 4 days to complete your transaction. During this period, the assets being invested will not appear in the account balance for either of the accounts involved. As noted in the table below, transaction processing can take even longer if there are insufficient funds in the source account.

All automatic investments involve two distinct transactions: a withdrawal from the source account and a deposit/investment into the receiving account. As noted in the table below, in some cases the investment transaction may go forward even if the withdrawal transaction that funds the investment does not occur due to insufficient funds.

Transaction Type	Time Frame	If Insufficient Funds
From bank/financial institution to brokerage account core position	Funds will generally leave the bank/financial institution at least 2 days prior to the trade date.	<ul style="list-style-type: none"> Investment portion of transaction occurs, unless prohibited by bank/financial institution. Bank may subsequently demand return of cash to satisfy overdraft. Your bank/financial institution may charge transaction and/or overdraft fees. You may need to contact your bank/financial institution to restart automatic transactions.
From bank/financial institution to purchase mutual fund	Funds will generally leave the bank/financial institution at least 2 days prior to the trade date.	<ul style="list-style-type: none"> Investment portion of transaction occurs, unless prohibited by bank/financial institution. If we do not receive full amount within 3 days, we will record a debit balance on your account and cancel future automatic investments. Your bank/financial institution may charge transaction and/or overdraft fees. You may need to contact both your bank/financial institution and Fidelity to restart automatic transactions.
Within the same account: - From core position to mutual fund - From one mutual fund to another	Transaction begins 2 days prior to the trade date.	<ul style="list-style-type: none"> Investment portion of transaction occurs. All available assets will be applied toward the transaction. If no further assets appear in the source account within 3 days, we will record a debit balance on your account for the insufficient amount.
Between two Fidelity accounts: - From core position or mutual fund in one brokerage account to core position in another brokerage account - From one Mutual Fund Only account to another Mutual Fund Only account	The withdrawal from the source account generally begins 4 days in advance of the trade date. For retirement accounts, investments from another account are placed in your core position for three days prior to being invested in any mutual funds you may have designated.	<ul style="list-style-type: none"> Investment portion of transaction occurs. <i>Nonretirement accounts:</i> <ul style="list-style-type: none"> If funds are not available at the end of the settlement period (0 days for core positions, 3 days for mutual fund positions), a debit balance will occur. An attempt is made to sell for 3 days (6 days for plans that are offered an immediate payment feature). Each day, we remove any available assets to apply toward the transaction. <i>Fidelity managed accounts:</i> <ul style="list-style-type: none"> If no further assets appear in the source account within 15 days, transaction is canceled without notice to you. Future transactions are not affected.

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Checkwriting Information and Terms

Helpful to Know

- You must complete a separate form for each account.
- This form REPLACES any checkwriting information currently on your account. **Be sure that ALL owners sign as well as any authorized individual to whom you want to grant checkwriting privileges.**

Who Needs to Sign

Individual/Joint	Each registered owner
UGMA/UTMA	Custodian only
Trust	At least one trustee
Corporate/Business	All authorized individuals
Individual with Power of Attorney	All account owners and any individual with Power of Attorney for whom checkwriting privileges are desired. If an account owner is incapacitated and cannot sign, attach a physician's letter stating this.

Name/Address

- Be sure we have your correct name and address in our records, because this is the information we will use when we print and mail your checks.
- If updating your signature because of a name change, complete and attach a Name Change form, as well as appropriate documentation, such as a copy of a marriage certificate or divorce decree.

Feature Specifics

- Checks are reported on your statement.
- For copies of canceled checks or to have checks sent to an alternate address, go to [REDACTED] or call us.

Brokerage Accounts

- Checks are drawn on your account's core position.

Mutual Fund Accounts

- For information on minimum balances, fees, and which funds are eligible for checkwriting, see the applicable fund prospectus.
- To add checkwriting to more than one fund, set it up on any eligible fund, then call Fidelity to have it added to other funds.

HSAs

- Be aware that Fidelity must report all checks to the IRS as distributions.

Terms and Conditions *Keep this for your records.*

By signing the form, you:

- Direct Fidelity and the processing bank (UMB Bank, NA, which is not affiliated with Fidelity) to act on all instructions pursuant to this form, and to honor any checks that appear to be properly executed and presented.
- Agree to be bound by all applicable rules and agreements, in their current or future state, including these Terms and Conditions, the Checkwriting Statement of Terms and Conditions (which will be enclosed with your initial check order), the Uniform Commercial Code as enacted in Missouri, your Fidelity

Brokerage Customer Agreement, the Fidelity HSA Custodial Agreement, and the Fidelity Brokerage HSA Customer Account Agreement.

- Agree not to write any checks on the account that exceed the available balance.
- Verify the authenticity of any other signature(s) on this form.

HSAs

- Acknowledge that any checks you write on this account will be reported to the IRS as distributions, and that any part of a distribution not used to pay qualified medical expenses (a) is counted as gross income and (b) may also be subject to a 20% penalty (unless an exception applies).
- Agree not to close your account by writing a check.

Checkwriting

Use this form to:

- add checkwriting to an existing Fidelity nonretirement brokerage, mutual fund only, HSA, or Fidelity® Cash Management Account. 529 College Savings Plans, ABLE Accounts, and Fidelity managed accounts are NOT eligible to establish checkwriting.
- change or update signatures for account owners or authorized individuals (for example, because of a name change or to remove an individual).

Type on screen or print out and fill in using CAPITAL letters and black ink. If you need more room for information or signatures, make a copy of this page.

1. Account Owner(s)

For business or trust accounts, provide entity name here, and names and signatures of authorized individuals in Section 3.

Name(s)	Account Number
Fidelity Fund Name or Symbol <i>Required if your account number begins with a "2" and then any two letters.</i>	

2. Checkwriting Setup

To change the account address before ordering checks, go to [redacted]

Check only one in each column. ALL owner names will be printed on checks.

Print on Checks

- Name(s), mailing address
Default if no choice indicated.
- Name(s) only
- Name(s), mailing address, phone:

Phone

Signatures Required on a Check

- Any one signature
Default if no choice indicated.
- Any two signatures

3. Signatures and Dates

ALL owners must sign and date.

By signing below, you agree to everything in the "Terms and Conditions" section of the previous page. Checkwriting can only be granted to owners or to people who are already listed on the account as authorized individuals.

PRINT OWNER/AUTHORIZED INDIVIDUAL NAME	
OWNER/AUTHORIZED INDIVIDUAL SIGNATURE	DATE MM/DD/YYYY
SIGN X	X

PRINT OWNER/AUTHORIZED INDIVIDUAL NAME	
OWNER/AUTHORIZED INDIVIDUAL SIGNATURE	DATE MM/DD/YYYY
SIGN X	X

PRINT OWNER/AUTHORIZED INDIVIDUAL NAME	
OWNER/AUTHORIZED INDIVIDUAL SIGNATURE	DATE MM/DD/YYYY
SIGN X	X

Did you print the form? Have all owners signed? Send the form to Fidelity. Your checks should arrive within two weeks.

Questions? Go to [redacted] or call 800-343-3548.

Use the postage-paid envelope, drop off at a Fidelity Investor Center, OR deliver to:

Regular mail
Fidelity Investments
Box 770001
Cincinnati, OH 45277-0002

Overnight mail
Fidelity Investments
100 Crosby Parkway KC1K
Covington, KY 41015

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