

TRADING AUTHORIZATION LIMITED TO PURCHASE AND SALES OF SECURITIES**CUSTOMER IDENTIFICATION PROGRAM NOTICE
IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT**

To help the government fight the funding of terrorism and money laundering activities, all financial institutions are required by law to obtain, verify and record information that identifies each individual or entity that opens an account.

What this means for you: When you open an account, we will ask you for your name, address, taxpayer or other government identification number and other information, such as date of birth for individuals, that will allow us to identify you. We may also ask to see identification documents such as a driver's license, passport or corporate authority documents. In addition, in accordance with the Unlawful Internet Gambling Enforcement Act (Act), transactions associated with unlawful internet gambling are prohibited. Specifically, the Act prohibits any person engaged in the business of betting or wagering from knowingly accepting payments in connection with the participation of another person in unlawful internet gambling. BNY Mellon customers must not initiate or receive wire transfers, checks, drafts or other debit/credit transactions that are restricted by the Act. For more information, please refer to: <http://www.federalreserve.gov/newsevents/press/bcreg/bcreg20081112a1.pdf>.

If required information is missing, your application may be rejected.

If this Power of Attorney is executed in the State of New York:

CAUTION TO THE PRINCIPAL: Your Power of Attorney is an important document. As the "principal," you give the person whom you choose (your "agent") authority to spend your money and sell or dispose of your property during your lifetime without telling you. You do not lose your authority to act even though you have given your agent similar authority.

When your agent exercises this authority, he or she must act according to any instructions you have provided or, where there are no specific instructions, in your best interest. "Important Information for the Agent" at the end of this document describes your agent's responsibilities.

Your agent can act on your behalf only after signing the Power of Attorney before a notary public.

You can request information from your agent at any time. If you are revoking a prior Power of Attorney by executing this Power of Attorney, you should provide written notice of the revocation to your prior agent(s) and to any third parties who may have acted upon it, including the financial institutions where your accounts are located.

You can revoke or terminate your Power of Attorney at any time for any reason as long as you are of sound mind. If you are no longer of sound mind, a court can remove an agent for acting improperly.

Your agent cannot make health care decisions for you. You may execute a "Health Care Proxy" to do this.

The law governing Powers of Attorney is contained in the New York General Obligations Law, Article 5, Title 15. This law is available at a law library, or online through the New York State Senate or Assembly websites, www.senate.state.ny.us or www.assembly.state.ny.us.

If there is anything about this document that you do not understand, you should ask a lawyer of your own choosing to explain it to you.

The undersigned hereby authorizes _____ Agent (whose signature appears below) as his or her agent and attorney in fact to buy, sell (including short sales) and trade in stocks, bonds, options contracts, and any other securities and/or contracts relating to the same on margin or otherwise in accordance with your terms and conditions for the undersigned's account and risk and in the undersigned's name, or number on your books. The undersigned hereby agrees to indemnify and hold you harmless from and to pay you promptly on demand any and all losses arising therefrom or debit balance due thereon.

In all such purchases, sales or trades you are authorized to follow the Agent's instructions in every respect concerning the undersigned's account with you; and he or she is authorized to act for the undersigned and in the undersigned's behalf in the same manner and with the same force and effect as the undersigned might or could do with respect to such purchases, sales or trades as well as with respect to all other things necessary or incidental to the furtherance or conduct of such purchases, sales or trades including but not limited to the execution of any agreements necessary to effect those transactions or in connection with the account.

The undersigned hereby ratifies and confirms any and all transactions with you heretofore or hereafter made by the aforesaid Agent or for the undersigned's account.

This authorization and indemnity is also a continuing one and shall remain in full force and effect until revoked by the undersigned by a written notice addressed to you, delivered to and received by you at your office at BNY Brokerage Services, 144 Glenn Curtiss Blvd., Uniondale, NY 11556, but such revocation shall not affect any liability in any way resulting from transactions initiated prior to such revocation. This authorization and indemnity shall enure to the benefit of your present firm and of any successor firm or firms irrespective of any change or changes at any time in the personnel thereof for any cause whatsoever, and or the assigns of your present firm or any successor firm.

The undersigned has read the foregoing in its entirety before signing.

In Witness Whereof, I have hereunto signed my name this _____ day of _____, 20____.

PRINCIPAL signs here:* ➡ _____

ACKNOWLEDGMENT

STATE OF _____ COUNTY OF _____ ss.: _____

On this _____ day of _____, 20____, before me, the undersigned, personally appeared _____,

personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, and that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

Notary Public

If this Power of Attorney is executed in the State of New York:

IMPORTANT INFORMATION FOR THE AGENT:

When you accept the authority granted under this Power of Attorney, a special legal relationship is created between you and the principal. This relationship imposes on you legal responsibilities that continue until you resign or the Power of Attorney is terminated or revoked. You must:

- 1) act according to any instructions from the principal, or, where there are no instructions, in the principal's best interest;
- 2) avoid conflicts that would impair your ability to act in the principal's best interest;
- 3) keep the principal's property separate and distinct from any assets you own or control, unless otherwise permitted by law;
- 4) keep a record of all receipts, payments, and transactions conducted for the principal; and
- 5) disclose your identity as an agent whenever you act for the principal by writing or printing the principal's name and signing your own name as "agent" in either of the following manners: (Principal's Name) by (Your Signature) as Agent, or (your signature) as Agent for (Principal's Name).

You may not use the principal's assets to benefit yourself or anyone else or make gifts to yourself or anyone else unless the principal has specifically granted you that authority in this Power of Attorney or in a Statutory Gifts Rider attached to this Power of Attorney. If you have that authority, you must act according to any instructions of the principal or, where there are no such instructions, in the principal's best interest. You may resign by giving written notice to the principal and to any co-agent, successor agent, monitor if one has been named in this document, or the principal's guardian if one has been appointed. If there is anything about this document or your responsibilities that you do not understand, you should seek legal advice.

Liability of agent:

The meaning of the authority given to you is defined in New York's General Obligations Law, Article 5, Title 15. If it is found that you have violated the law or acted outside the authority granted to you in the Power of Attorney, you may be liable under the law for your violation.

Agent - Please fill in

Agent's Name

Social Security Number

Date of Birth

Phone Number

Street Address

City

State

Zip Code

Citizenship of Agent: _____

☐ If you are not a U.S. Citizen, please check box, and specify country of legal residence: _____
_____. If you do not have a social security number, also provide IRS form W-8, and a copy of your passport, alien ID card or other government issued document with residence and photograph.

Employment/Affiliation Information: *We are required by industry regulations to obtain this information.*

☐ If you are not employed or have retired, please check here and state your source of income:

Occupation

Employer

Employer's Address

Is the Agent either a senior military, governmental or political official in the U.S. or a non-U.S. country or closely associated with an immediate family member of such official? ☐ Yes ☐ No

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

Please check below if applicable:

**Individual
or Custodian**

Joint

☐☐

I am affiliated with or work for BNY Mellon Investment Adviser, Inc./Bank of New York Mellon Corporation.

☐☐

I am affiliated with or work for a stock exchange, a member firm of an exchange or FINRA.

☐☐

I am a director/10% shareholder/policy-making executive officer of the publicly traded company listed:
_____.

If so, notification of your intent to be added to this account will be sent to your employer in accordance with current regulations.

By signing below, you, the authorized Agent:


- acknowledge that you have received a copy of the BNY Brokerage Account Client Agreement and Related Disclosures Booklet, and that you understand and agree to the terms.
- certify that the information supplied in this form is complete and correct.
- permit us to obtain credit information, verify information you have provided, and perform a background check on you, and to reject or remove you as authorized agent from this or any other account, at any time and for any reason we see fit.
- agree to notify us in writing immediately upon the death or disability of the last surviving account owner.

Pre-Dispute Arbitration Clause – I acknowledge that the BNY Brokerage Account Client Agreement and Related Disclosures Booklet contains a pre-dispute arbitration clause which provides that all disputes relating to the BNY Brokerage Account are to be resolved by binding arbitration. This clause is found in Sections 27 and 28 of the BNY Brokerage Account Client Agreement and Related Disclosures Booklet.

** Attorney-in-fact must sign on next page.*

I have read the foregoing Power of Attorney. I am the person identified therein as attorney-in-fact for the principal named therein.

I acknowledge my legal responsibilities.

ATTORNEY-IN-FACT signs here:  _____

ACKNOWLEDGMENT

STATE OF _____ COUNTY OF _____ ss.: _____

On this _____ day of _____, 20_____, before me, the undersigned, personally appeared _____,

personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, and that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

Notary Public

Please mail this completed form to:
BNY BROKERAGE SERVICES
PO Box 9008
Hicksville, NY 11802-9008

For Registered, Certified or Overnight Mail, please mail to:
BNY BROKERAGE SERVICES
144 Glenn Curtiss Boulevard, 106-9501
Uniondale, NY 11556-0144

