

ACH Authorization Agreement

PERSHING ADVISOR SOLUTIONS LLC

Please complete the following fields to set up the electronic transfer of funds between your Pershing Advisor Solutions LLC account and the account with your bank/financial institution. You may begin depositing funds into your brokerage account from your bank/financial institution or send payments to your bank/financial institution account from your brokerage account upon approval. All transactions are processed through the Automated Clearing House ("ACH") system. **If you need to request a distribution from your retirement account, please complete an IRA or QRP Distribution Form in addition to this Agreement.**

All steps/fields marked with an asterisk ("*") are required to ensure timely and accurate processing.

STEP 1. ACCOUNT INFORMATION*

Account Number	Account Title
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STEP 2. INSTRUCTIONS*

Set up new instructions. Replace existing instructions. Complete all applicable sections.

Nickname/description for instructions (optional)

STEP 3. TYPE OF REQUEST*

Standing Instructions — Ad-Hoc (set up does not include a periodic/recurring instruction)

- Standing instructions for contributions INTO my Pershing Advisor Solutions account ONLY.
- Standing instructions for distributions OUT OF my Pershing Advisor Solutions account ONLY.
- Standing instructions for transfers INTO and OUT of my account.
Proceed to Bank and Other Financial Institution ACH Information section.

Periodic/Recurring Contributions/Distributions

Select all applicable options below then proceed to Amount, Start Date and Frequency of Periodic/Recurring Requests section.

- Set up recurring contributions INTO my Pershing Advisor Solutions account (Deposit). For retirement accounts, also complete the Retirement Contribution Type section.
- Set up recurring distributions OUT OF the cash balance in my Pershing Advisor Solutions account (Pay Principal).
- Set up a distribution OUT OF the income generated in my Pershing Advisor Solutions account (Pay Income). Dollar amount does not need to be indicated below.
- Set up systematic purchase of mutual funds. ACH is contingent upon the execution of periodic/recurring mutual fund purchases.

Optional Standing Instruction Set Up

Check here if you would also like to save banking information as a standing instruction for ad-hoc requests.

Use banking information for Withdrawal Deposit Both (If no selection is made, direction will follow set up of the periodic instruction.)

STEP 4. AMOUNT, START DATE AND FREQUENCY OF PERIODIC/RECURRING REQUESTS*

Dollar Amount (not required for Income or Retirement Account Minimum Distributions)	
Start Date	End Date (optional)

Frequency Semi-monthly distributions take place 14 calendar days after the start date. Requests scheduled on a weekend or holiday will occur on the following business day.

Select one option only.

Weekly: M T W TH F

- | | |
|--|--|
| <input type="checkbox"/> Semi-monthly - Occurs twice a month | <input type="checkbox"/> Quarterly - Occurs every 3 months |
| <input type="checkbox"/> Monthly - Occurs every month | <input type="checkbox"/> Semi-annually - Occurs every 6 months |
| <input type="checkbox"/> Bi-monthly - Occurs every other month | <input type="checkbox"/> Annually - Occurs every 12 months |



STEP 5. RETIREMENT CONTRIBUTION TYPE

*Required for applicable retirement accounts only.

Select one option 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 | | |

STEP 6. BANK AND OTHER FINANCIAL INSTITUTION ACH INFORMATION (*REQUIRED)

Bank/Financial Institution Name*			
ABA Number*	Account Number*	City	State
If title of bank account differs from title on your Pershing Advisor Solutions LLC account, please provide the relationship between the parties (*required for account title mismatches)			

Account Type*: Checking Savings **Bank account type** Individual/Joint Entity

Is bank account title and ownership the same as the brokerage account? Yes No

I (we) hereby authorize Pershing Advisor Solutions LLC to initiate credit/debit entries to the financial institution indicated in Bank and other financial institution ach information section and further authorize my (our) financial institution to debit the same to such account.

*All bank account holders must be entered exactly as they appear on the bank account registration.

Individual/Joint Bank Account Holder 1

Prefix	First Name (required)	Middle Name	Last Name (required)	Suffix
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Individual/Joint Bank Account Holder 2

Prefix	First Name (required)	Middle Name	Last Name (required)	Suffix
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Individual/Joint Bank Account Holder 3

Prefix	First Name (required)	Middle Name	Last Name (required)	Suffix
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Individual/Joint Bank Account Holder 4

Prefix	First Name (required)	Middle Name	Last Name (required)	Suffix
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Entity Bank Account Holder

Entity Name (64 characters)
Entity Name (64 characters)

Third Party Disbursements

Outbound (one directional) requests to a third party are allowed where the recipient is clearly identifiable. Disbursements to corporate recipients (i.e. bill payment requests) are not acceptable as the recipient may not be able to properly apply the payment for the benefit of the account holder. **Note: Incoming (one directional) requests from a third party are approved on an exception basis only.**

Outbound requests based on bi-directional instructions will require the signatures of the receiving account authorized signers.

STEP 7. ADDITIONAL ACH DETAILS (OPTIONAL)

Applicable for: Periodic Instructions and One-Time Payments. Additional details can be provided at time of initiation for requests based off of Standing Institutions.

Custom Trailer (maximum of 38 characters)

Custom Activity Description

STEP 8. ADVISOR ATTESTATION AND SIGNATURE*

Required for establishing new instructions or replacing existing instructions.

By signing below, I represent that the following are true regarding these client instructions and the respective client Letter of Authorization (“LOA”):

- The client instructions as described in this LOA have been reviewed and approved and are in full compliance with our firm’s policies and procedures.
- I have verbally confirmed **via outbound phone call to a phone number on record or in person** with the account holder(s) (or someone authorized to act on his/her behalf) that any written LOA instructions received were actually authorized by the account holder(s) (or someone authorized to act on his/her behalf). I understand that I am fully responsible for any loss resulting from fraudulent disbursement instructions presented to Pershing Advisor Solutions for approval without my prior verbal confirmation.
- I am an authorized signor of my firm and/or authorized to act on its behalf.

Advisor Signature

Print Name	Date
Signature X	
Title and Position	

STEP 9. SIGNATURE (*REQUIRED)

To establish bi-directional instructions allowing for movement of assets both into and out of your Pershing Advisor Solutions LLC account, or deposit only instructions for movement of assets into your Pershing Advisor Solutions LLC brokerage account, all parties on both the bank and brokerage accounts are required to sign the form. Establishing instructions against a joint bank account requires the signature of only the Pershing Advisor Solutions LLC account owner, provided the Pershing Advisor Solutions LLC account owner is one of the owners on the joint bank account.

To establish withdrawal only instructions allowing for movement of assets from your Pershing Advisor Solutions LLC account, only the signatures of the brokerage account parties are required.

Bi-directional and deposit set-ups: 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.

This authority is to remain in full force and effect until Pershing Advisor Solutions LLC has received written notification from me (or either of us) of its termination in such time and in such manner as to afford Pershing Advisor Solutions LLC and my (our) financial institution a reasonable opportunity to act on it. It is understood that if the period purchase of mutual funds is selected as a contribution type, this agreement authorizes payment for purchasing securities through my investment professional or financial organization via the systematic reinvestment system (SRS).

I/we represent and warrant that each of us is an owner on the Bank Account and/or that each of us has full authority to cause movement of funds via ACH between my Pershing Advisor Solutions LLC account identified in the Account Information section and the Bank Account. If I am executing this agreement on behalf of joint bank account owners I represent that I have authority to act on behalf of and bind all of the joint bank account owners, and I agree that I am executing on behalf of all of the joint account owners. I acknowledge that once this ACH agreement is executed, all joint account owners can use the ACH service even if only one bank account owner signed the agreement. I/we understand that Pershing is relying upon this representation in agreeing to permit the movement of funds via ACH between my/our Pershing Advisor Solutions LLC account and the Bank Account.

Examples of acceptable name differences include a bank account using middle initial instead of full middle name when the brokerage account does not. **Other name differences will require the completion of the ACH Authorization Agreement One and the Same Certification appended to the end of this form.** Electronic signatures have the same legal effect, validity or enforceability as a manually executed signature or physical delivery thereof, to the extent and as provided for in any applicable law.

ACH Authorization Agreement

PERSHING ADVISOR SOLUTIONS LLC

Account Number

Print Name	Date
Signature X	

Print Name	Date
Signature X	

Print Name	Date
Signature X	

Print Name	Date
Signature X	

Print Name	Date
Signature X	

Print Name	Date
Signature X	

STEP 10. ONE AND THE SAME CERTIFICATION

Name Differences

If the name on your brokerage account is not an exact match to the name on your bank account (i.e., using an initial for the first name instead of full first name or using the suffix Jr. or Sr. on one but not the other) but each account belongs to you, please certify that you are indeed one and the same person by signing below. Please note name changes due to marriage, divorce, or other legal name change do require a completed one and the same certification.

I certify that _____ and _____ are one and the same person.
(name on bank account) (name on brokerage account)

Name	Date
Signature X	