

Account Options Change Form

Questions?

800.221.5672

Or visit our website at:

www.alliancebernstein.com

For literature call:

800.227.4618

Use this form to make changes to your existing AllianceBernstein account.

This form can NOT be used to establish a new account or for name changes.

Please complete the application and mail it to:

AllianceBernstein
P.O. Box 786003
San Antonio, TX 78278-6003

For certified or overnight deliveries, send to:

AllianceBernstein
8000 IH 10 W, 4th Floor
San Antonio, TX 78230

1 Account Changes

Please list the account(s) you wish to have updated with this form.

2 Address Changes

Please complete this section to indicate a change of address, for the account(s) listed in Section 1.

3 Distribution Option Changes

Please complete this section to indicate changes to your distribution options. Include the appropriate account number(s), then select the distribution option code that applies to each account.

4 Cost Basis Accounting Method

Use this section to elect or change one of the available cost basis accounting methods for your fund account(s).

Your cost basis accounting method election is used to determine reportable capital gains or losses.

5 Your Shareholder Options

(Complete only those options you want)

A Automatic Investment Plans (AIP)—You can make periodic investments into any of your existing AllianceBernstein Funds in one of three ways. First, by a periodic withdrawal (\$50 minimum) directly from your bank account and invested into an AllianceBernstein Fund. Second, you can direct your distributions (dividends and capital gains) from one AllianceBernstein Fund into another Fund. Third, you can automatically exchange monthly (\$25 minimum) shares of one AllianceBernstein Fund for shares of another Fund. To elect one of these options, complete the appropriate portion of Step A or Step D. If more than one dividend direction or monthly exchange is desired, please call our Literature Center to obtain a Shareholder Options Form for completion.

B Telephone Transactions via EFT—Complete this section if you would like to be able to transact via telephone between your fund account and your bank account.

C Systematic Withdrawal Plans (SWP)—Complete this section if you wish to periodically redeem dollars from one of your fund accounts. Payments can be made via Electronic Funds Transfer (EFT) to your bank account or by check.

D Bank Information—If you have elected any options that involve transactions between your bank account and your fund account or have elected cash distribution options and would like the payments sent to your bank account, please tape a pre-printed, voided check of the account you wish to use to this section of the application.

E Third Party Payment Details—If you have chosen cash distributions and/or a Systematic Withdrawal Plan and would like the payments sent to a person and/or address other than those provided in Section 1 or 2, complete this section. Note that a Signature Validation Program (SVP) Imprint is required.

F Reduced Charges (Class A only)—Complete if you would like to link fund accounts that have combined balances that might exceed \$100,000 so that future purchases will receive discounts. Complete if you intend to purchase over \$100,000 within 13 months.

G Brokers/Dealers/Advisors—If you are using the services of a broker/dealer or advisor, this section must be completed.

6 Shareholder Authorization (Required)

All owners must sign. If it is a custodial, corporate, or trust account, the custodian, an authorized officer, or the trustee, respectively, must sign. A Signature Validation Program (SVP) Imprint is required for the following:

- Accounts registered as a trust, corporation or other entity
- Third Party Payments (requests from Section 5E)

Continued on next page

Investment Products Offered

• Are Not FDIC Insured • May Lose Value • Are Not Bank Guaranteed

FGEN-WEB-4869-1212

AllianceBernstein Fund Names and Numbers

	Sales Charge	
	Initial	Asset-Based
	A	C

AllianceBernstein Asset Allocation/Multi-Asset Funds

Wealth Appreciation Strategy	151	351
Balanced Wealth Strategy	175	375
Conservative Wealth Strategy	187	387
Tax-Managed Wealth Appreciation Strategy	192	392
Tax-Managed Balanced Wealth Strategy	047	347
Tax-Managed Conservative Wealth Strategy	042	342
International Portfolio	164	364
International Tax-Managed Portfolio	197	397
Emerging Markets Multi-Asset Portfolio	99	300
Real Asset Strategy	162	363

AllianceBernstein Growth Funds

Domestic		
Growth Fund	031	331
Large Cap Growth Fund	078	378
Discovery Growth Fund ¹	044	344
Small Cap Growth Fund	026	326
US Strategic Research	199	399

Global and International

Global Thematic Growth Fund	082	382
International Discovery Equity Portfolio	109	329
International Focus 40 Portfolio	131	313
International Growth Fund	112	312

AllianceBernstein Value Funds

Domestic		
Global Risk Allocation Fund ²	096	396
Core Opportunities Fund	102	302
Growth & Income Fund	094	394
Discovery Value Fund ³	157	357
Equity Income Fund	009	309
Value Fund	153	353

Global and International

Global Real Estate Investment Fund	110	310
Global Value Fund	158	358
International Value Fund	159	359
Emerging Markets Equity Portfolio	140	840

AllianceBernstein Equity Core Funds

Select US Equity Portfolio	132	376
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AllianceBernstein Alternative Funds

Dynamic All Market Fund	127	301
Market Neutral Strategy—US	138	339
Market Neutral Strategy—Global	169	368
Select US Long/Short Portfolio	130	330

¹Fund name prior to November 1, 2012: AllianceBernstein Small/Mid Cap Growth Fund

²Fund name prior to October 8, 2012: AllianceBernstein Balanced Shares

³Fund name prior to November 1, 2012: AllianceBernstein Small/Mid Cap Value Fund

	Sales Charge	
	Initial	Asset-Based
	A	C

AllianceBernstein Fixed Income Funds

Taxable Bond Funds		
Bond Inflation Strategy	116	306
Unconstrained Bond Fund	124	324
Global Bond Fund	055	355
High Income Fund	166	366
Intermediate Bond Portfolio	104	304
Short Duration Portfolio	189	389
Limited Duration High Income Portfolio	137	393

AllianceBernstein Tax-Exempt Municipals

National Portfolio	084	384
Arizona Portfolio	114	314
California Portfolio	085	385
High Income Municipal Portfolio	122	323
Massachusetts Portfolio	115	315
Michigan Portfolio	117	317
Minnesota Portfolio	061	361
Municipal Bond Inflation Strategy	119	320
New Jersey Portfolio	069	369
New York Portfolio	083	383
Ohio Portfolio	080	380
Pennsylvania Portfolio	067	367
Virginia Portfolio	121	321

Intermediate Municipal Bond Funds

Intermediate Diversified (National) Portfolio	148	348
Intermediate California Portfolio	143	343
Intermediate New York Portfolio	141	341

Cash Management

Exchange Reserves	136	336
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AllianceBernstein Retirement Strategies

2000 Retirement Strategy	2200	2400
2005 Retirement Strategy	2201	2401
2010 Retirement Strategy	2202	2402
2015 Retirement Strategy	2203	2403
2020 Retirement Strategy	2204	2404
2025 Retirement Strategy	2205	2405
2030 Retirement Strategy	2206	2406
2035 Retirement Strategy	2207	2407
2040 Retirement Strategy	2208	2408
2045 Retirement Strategy	2209	2409
2050 Retirement Strategy	2210	2410
2055 Retirement Strategy	2211	2411

Please use this form for existing accounts only. If you wish to establish a new account, please use a new account application.
Please print all information clearly to avoid processing delays.

Type of Request: ☐ This is a new request ☐ This is a request to CHANGE existing account options

1 Account Changes Please print clearly

A Individual Account Registration

Please list the account(s) that you wish to have these options apply to:

Owner or Custodian (First Name, MI, Last Name)	Fund Number	Account Number
	<div><div></div><div></div><div></div><div></div></div>	
Owner or Custodian (First Name, MI, Last Name)	Fund Number	Account Number
	<div><div></div><div></div><div></div><div></div></div>	

2 Address Changes

Please complete this section to let us know if your address has changed.

Street Address	City	State	Zip Code
If Non-U.S., Specify Country	Home Phone Number	Daytime Phone Number	

3 Distribution Option Changes

Please change my Distribution Options to the following:

- ☒ **Reinvest distributions** into my fund account.
- ☐ **Send my distributions in cash** to my mailing address/address of record. (Complete Section 5D for direct deposit to your bank account. Complete Section 5E for payment to a third party.)
- ☐ **Direct my distributions to another AllianceBernstein Fund.** Complete the appropriate portion of Section 5A to direct your distributions (dividends and capital gains) to another AllianceBernstein Fund (the \$2,500 minimum investment requirement applies to funds into which distributions are directed).

		Distribution Options (Check one)				
		Dividends			Capital Gains	
Fund Number	Indicate Dollar Amount					
1. <div><div></div><div></div><div></div><div></div></div>	\$	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>
2. <div><div></div><div></div><div></div><div></div></div>	\$	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>
3. <div><div></div><div></div><div></div><div></div></div>	\$	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>

4

Cost Basis Accounting Method Election

Use this section to elect or change cost basis accounting methods for your existing 1099-B eligible AllianceBernstein fund account(s).

Note: This section does not apply to C-Corps.

Effective January 1, 2012, new Internal Revenue Service regulations require mutual funds to report the Adjusted Cost Basis for shares (sold or exchanged) on IRS Form 1099-B, in addition to the gross proceeds currently reported. The Adjusted Cost Basis requirement applies only to “covered” shares, defined as shares purchased on or after January 1, 2012.

The new regulations also require that mutual funds offer shareholders multiple cost basis accounting methods to calculate gains or losses on the sale or exchange of their covered shares. For shareholders who do not affirmatively elect a cost basis accounting method, mutual funds selected a default cost basis accounting method to be applied to their account(s).

The AllianceBernstein Funds have selected Average Cost as the default Adjusted Cost Basis calculation method. If you would prefer to use a different cost basis accounting method, please carefully review the available cost basis accounting methods to make your selection. Selecting your cost basis accounting method is a critical decision, and may ultimately affect the amount of taxes you pay on the sale or exchange of your shares. Before you choose a cost basis accounting method, we strongly recommend consulting a qualified tax consultant to determine which method is most appropriate for you. AllianceBernstein is unable to provide tax guidance.

What is Average Cost?

A method for valuing the cost of covered shares in an account by averaging the effect of all covered transactions in the account. The gain/loss is calculated by taking the cumulative dollar cost of the covered shares owned and dividing it by the number of covered shares in the account. Non-covered securities are calculated separately from covered securities and are not reported to the Internal Revenue Service.

Why did AllianceBernstein choose this method?

- **Continuity:** AllianceBernstein has been voluntarily reporting Average Cost on applicable shareholder accounts for approximately 20 years. We believe continuing to provide this calculation methodology will provide an uninterrupted service experience to our fund shareholders.
- **Consistency:** Based on information gathered from our peers, prior to the new regulation, the vast majority of shareholders, when given the option of choosing a cost basis accounting method, chose Average Cost. Additionally, an industry survey revealed that the majority of the industry have selected Average Cost as their default accounting method.

Note: You may prospectively change your method at any time. However, you can only revoke the Average Cost basis method on previously purchased covered shares until the first sale or exchange of those shares.

Choose one option from the three below.

- ☐ I choose to apply Average Cost, the AllianceBernstein Funds default method, to all my fund account(s).

Note: This election will also be applied to any new accounts unless otherwise requested.

- ☐ I choose ONE cost basis accounting method (other than Average Cost, the AllianceBernstein Funds default) to be applied to all the fund account(s). Note: This election will also be applied to new accounts unless otherwise requested.

- ☐ First-In First-Out (FIFO)
- ☐ High-Cost First-Out (HIFO)
- ☐ Loss/Gain Utilization (LGUT)
- ☐ Last-In First-Out (LIFO)
- ☐ Low-Cost First-Out (LOFO)
- ☐ Specific Lot Identification (SLID)⁴
Secondary Method _____

- ☐ I choose to apply the following cost basis accounting methods to the following fund account(s).

Fund Number	Account Number	Cost Basis Accounting Method (mark one)	
1. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/> Average Cost <input type="checkbox"/> First-In First-Out (FIFO) <input type="checkbox"/> Last-In First-Out (LIFO) <input type="checkbox"/> High-Cost First-Out (HIFO)	<input type="checkbox"/> Low-Cost First-Out (LOFO) <input type="checkbox"/> Loss/Gain Utilization (LGUT) <input type="checkbox"/> Specific Lot Identification (SLID) ⁴ Secondary Method _____
2. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/> Average Cost <input type="checkbox"/> First-In First-Out (FIFO) <input type="checkbox"/> Last-In First-Out (LIFO) <input type="checkbox"/> High-Cost First-Out (HIFO)	<input type="checkbox"/> Low-Cost First-Out (LOFO) <input type="checkbox"/> Loss/Gain Utilization (LGUT) <input type="checkbox"/> Specific Lot Identification (SLID) ⁴ Secondary Method _____
3. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/> Average Cost <input type="checkbox"/> First-In First-Out (FIFO) <input type="checkbox"/> Last-In First-Out (LIFO) <input type="checkbox"/> High-Cost First-Out (HIFO)	<input type="checkbox"/> Low-Cost First-Out (LOFO) <input type="checkbox"/> Loss/Gain Utilization (LGUT) <input type="checkbox"/> Specific Lot Identification (SLID) ⁴ Secondary Method _____

⁴If Specific Lot Identification is chosen, a secondary reporting method must be elected in the event the lots you have chosen are not available or if you have systematic withdrawal plans on your account. Secondary method cannot be Average Cost.

5 Your Shareholder Options

A Automatic Investment Plans (AIP)—Periodic Purchases

For accounts that are established using an automatic investment plan (AIP), the monthly minimum AIP is \$200. In all cases, the fund minimum must be met within 12 months if you are using an AIP to fund your accounts. Minimum purchases for accounts that have met the fund minimum requirements is \$50.

- ☐ **Withdraw from my bank account via EFT.** I authorize AllianceBernstein to draw on my bank account for investment in my fund account(s) as indicated below. (Complete Section 5D also for the bank account you wish to use.)

Electronic Funds Transfer. Your bank must be a member of the National Automated Clearing House Association (NACHA).

Fund Number	Amount (\$50 minimum)	Frequency (M: Monthly; Q: Quarterly; A: Annually)	Beginning Date (MM/DD)
1. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$	<input type="text"/> M <input type="text"/> Q <input type="text"/> A	/
2. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$	<input type="text"/> M <input type="text"/> Q <input type="text"/> A	/
3. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$	<input type="text"/> M <input type="text"/> Q <input type="text"/> A	/

- ☐ **Direct My Distributions.** As indicated in Section 3, I would like my dividends and/or capital gains directed to the same class of shares of another AllianceBernstein Fund. (For existing accounts only.)

Fund Number	Account Number (If existing)
From: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Fund Number	Account Number (If existing)
To: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

- ☐ **Exchange My Shares Monthly.** I authorize AllianceBernstein to transact monthly exchanges, within the same class of shares, between my fund accounts as listed below. (For existing accounts only.)

Shares exchanged will be redeemed at the net asset value on the "Day of Exchange." (If the "Day of Exchange" is not a fund business day, the exchange transaction will be processed on the next fund business day.) The exchange privilege is not available if stock certificates have been issued.

Fund Number	Account Number (If existing)	Day of Exchange (MM/DD)	Amount (\$25 minimum)
From: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			/ \$
Fund Number	Account Number (If existing)		
To: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			/ \$

B Telephone Transactions Via EFT

You may request these transactions by visiting our website at www.alliancebernstein.com or by calling our toll-free number, 800.221.5672, and instructing AllianceBernstein in a recorded conversation to purchase, redeem, or exchange shares for your account. Purchase and redemption requests will be processed via electronic funds transfer (EFT) to and from your bank account.

Instructions:

- Review the information in the prospectus about telephone transaction services.
- If you select the telephone purchase or redemption privilege, you must write "VOID" across the face of a check from the bank account you wish to use and attach it to Section 5D of this application.

- ☐ **Purchases and Redemptions via EFT.** I hereby authorize AllianceBernstein to effect the purchase and/or redemption of Fund shares for my account according to my telephone instructions or telephone instructions from my broker/agent, and to withdraw money or credit money for such shares via EFT from the bank account I have selected.

For shares recently purchased by check or electronic funds transfer, redemption proceeds will not be made available until the Fund is reasonably assured the check or electronic funds transfer has been collected, normally 15 calendar days after the purchase date.

5 Your Shareholder Options continued

C Systematic Withdrawal Plans (SWP)

In order to establish a SWP, a minimum fund account balance of \$5,000 is required and you must reinvest all dividends and capital gains.

☐ I authorize AllianceBernstein to transact periodic redemptions from my fund account and send the proceeds to me as indicated below.

Fund Number	Amount (\$50 minimum)	Frequency (M: Monthly; Q: Quarterly; A: Annually)	Day of the Month You Want the Transaction to Take Place	Month You Want the Service to Start
1. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/> M <input type="checkbox"/> Q <input type="checkbox"/> A	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
2. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/> M <input type="checkbox"/> Q <input type="checkbox"/> A	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
3. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/> M <input type="checkbox"/> Q <input type="checkbox"/> A	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>

Please send my SWP proceeds to:

- ☐ My Address of Record (via check).
- ☐ The Payee and address specified in Section 5E (via check). Signature Validation Program (SVP) Imprint required.
- ☐ My checking account—via EFT (complete Section 5D). Your bank must be a member of the National Automated Clearing House Association (NACHA) in order for you to receive SWP proceeds directly into your bank account. Otherwise payment will be made by check.

Important Note: If you wish to set up a withdrawal plan for your Alliance IRA or other Alliance prototype plan, please complete an IRA/SEP Distribution Form. You can download a free copy from our website at www.alliancebernstein.com, or you may call 800.227.4618 or your financial advisor.

D Bank Information

This bank account information will be used for (check one):

- ☐ Distributions (Section 3) ☐ Automatic Investments (Section 5A) ☐ Telephone Transactions (Section 5B) ☐ Withdrawals (Section 5C)

Your Bank Account Number	ABA Routing Number	Account Type (check one)
		<input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account

Please Tape a Pre-printed Voided Check Here.

The above services cannot be established without a pre-printed voided check. If you are using a savings account, rather than a checking account, please attach a pre-printed deposit slip. The check or deposit slip provided must include the following: Bank Routing Number, Bank Account Number and Bank Account Registration (name and address of account holder.) If you are unable to provide these items, please submit a letter from your bank (on bank letterhead) confirming your account information.

Bank Account Registration

J. SMITH
123 MAIN STREET
ANYTOWN, USA 12345

103

PAY TO THE
ORDER OF _____

19 _____

_____ DOLLARS

Your Bank
123 STREET
ANYTOWN, USA 12345

NOTE _____

: 000000000 : 103 000000000 : 765

ABA Routing # Check # Bank Account #

For EFT transactions, the Fund requires the authorization of each bank account owner listed. If the bank account registration differs from the AllianceBernstein mutual fund account registration, each bank account owner must authorize the Fund to accept investments from and/or make distributions/withdrawal payments to such accounts via EFT by signing below.

Signature (All bank account owners must sign)	Date
X	
Signature	Date
X	

5 Your Shareholder Options continued

E Third Party Payment Details

Your signature(s) in Section 6 must have a Signature Validation Program (SVP) Imprint stamp affixed if your broker has not completed and signed the broker information in Section 5G. This third party payee information will be used for:

- ☐ Distributions (Section 3)
- ☐ Systematic Withdrawals (Section 5C)

Name (First Name, MI, Last Name)

Street Address

City

State

Zip Code

F Reduced Charges (Available for Class A purchases only)

If you, your spouse, or minor children own shares in other AllianceBernstein funds (regardless of share class), you may be eligible for a reduced sales charge for your Class A share purchases. Please complete the Rights of Accumulation section or the Statement of Intent section.

- ☐ **A. Rights of Accumulation.** Please link the tax identification numbers or account numbers listed below for Rights of Accumulation privileges, so that this and future purchases will receive any discount for which they are eligible.
- Tax ID or Account Number

Tax ID or Account Number

Tax ID or Account Number

- ☐ **B. Statement of Intent.** I want to reduce my sales charge by agreeing to invest the following amount over a 13-month period:
- ☐ \$100,000
- ☐ \$250,000
- ☐ \$500,000
- ☐ \$1,000,000

If the full amount indicated is not purchased within 13 months, I understand that an additional sales charge must be paid from my account.

G Brokers/Dealers/Advisors

Please complete this section if you are using the services of a broker/dealer or financial advisor.

We hereby authorize AllianceBernstein to act as our agent in connection with transactions under this authorization form; and we guarantee the signature(s) set forth in Section 6, as well as the legal capacity of the shareholder.

Dealer/Agent Firm

Authorized Signature

Dealer/Agent Firm Number

X

Representative (First Name, MI, Last Name)

Representative Number

Branch Number

Branch Telephone Number

Branch Office Address

City

State

Zip Code

6 Shareholder Authorization

This section MUST be completed

Telephone Exchanges and Redemptions by Check

Unless I have checked one or both boxes below, these privileges will automatically apply, and by signing this application, I hereby authorize AllianceBernstein Investor Services to act on my telephone instructions, or on telephone instructions from any person representing himself to be an authorized employee of an investment dealer or agent requesting a redemption or exchange on my behalf. (NOTE: Telephone exchanges may only be processed between accounts that have identical registrations.) Telephone redemption checks will only be mailed to the name and address of record; and the address must not have changed within the last 30 days. The maximum telephone redemption amount is \$100,000 for redemptions by check.

- ☐ I do not elect the telephone exchange service.
- ☐ I do not elect the telephone redemption by check service.

By selecting any of the above telephone privileges, I agree that neither the Fund nor AllianceBernstein L.P., AllianceBernstein Investments, Inc., AllianceBernstein Investor Services, or any other Fund Agent will be liable for any loss, injury, damage, or expense as a result of acting upon telephone instructions purporting to be on my behalf, that the Fund reasonably believes to be genuine, and that neither the Fund nor any such party will be responsible for the authenticity of such telephone instructions. I understand that any or all of these privileges may be discontinued by me or the Fund at any time. I understand and agree that the Fund reserves the right to refuse any telephone instructions and that my investment dealer or agent reserves the right to refuse to issue any telephone instructions I may request.

I am of legal age and capacity and have received and read the prospectus and agree to its terms.

I certify under penalty of perjury that (1) I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and (2) I am a U.S. person (including a U.S. resident alien.) (Cross out item 1 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.)

The Internal Revenue Service does not require your consent to any provision of this document other than the certification required to avoid backup withholding.

Signature (All account owners must sign)	Date
X	
Signature	Date
X	

Signature Validation Program

Signature Validation Program

Signature Validation Program (SVP) is required for Third Party Payments (requests from Section 5E)

Special note to SVP: By affixing the SVP Imprint, you are verifying the identity of the individuals and entities assigned to this account and are accepting liability for any misrepresentation as it applies to this registration and any accompanying documentation.