MERRILL
A BANK OF AMERICA COMPANY

Trustee Certification Form

For the CMA® Account for Trusts, the Individual Investor Account for Trusts, the Inherited Retirement Account for Trusts and the 529 Account with a Trust as Participant

Please see instructions for completing this form on page 9.

MLPF&S Account #1	MLPF&S Account #2	MLPF&S Account #3
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FOR INTERNAL USE ONLY

TO: MERRILL LYNCH, PIERCE, FENNER & SMITH INCORPORATED, AND AFFILIATED COMPANIES ("Merrill Lynch")
In consideration of Merrill Lynch's opening and maintaining the above accounts and any other subsequently established accounts for the trust described below, the undersigned trustees certify, represent and warrant to Merrill Lynch that the trust is in full force and effect, and that the following information is true, complete and accurate:

1. The legal name of the trust is:

_____

2. The trust is governed by the law of:

_____
(U.S. State/Commonwealth or other jurisdiction)

If the trust is NOT governed by US law (50 states/District of Columbia), provide a copy of the following pages from the trust agreement: the first page, the signature page(s), the page(s) listing the trustees and, if originally named trustees are no longer acting, any amendments or other documentation (appointment of trustees, acceptance of appointment of successor trustees, etc.) listing the current trustees. DO NOT PROVIDE THE ENTIRE TRUST.

3. Please complete either A or B (Only one section should be completed):

A. If the trust was created by a will, the decedent's name is:

B. If the trust was created by a trust agreement:

(i) The trust agreement is dated: _____
(ii) The name(s) of the grantor(s) of the trust is/are:

Grantor Name	Country of residency (if other than U.S.A.)	Date of Birth (for identification purposes only)
_____	_____	_____
_____	_____	_____

4. The trust is currently (please check as applicable):

☐ Revocable and amendable ☐ Irrevocable

5. Check if a Special or Supplemental Needs Trust ☐

(A Special or Supplemental Needs Trust is a type of trust established for the benefit of a person with special needs while preserving the beneficiary's ability to receive essential needs based government programs.)

6. The names of all current trustees are: (If trustee is an entity, documentation indicating authorized individuals of entity, such as Corporate Resolution or Certificate of Incumbency, will be required)

A. _____ / _____
Country of residency

B. _____ / _____
Country of residency

C. _____ / _____
Country of residency

D. _____ / _____
Country of residency

Please print the name, address, and telephone number of an individual that Merrill Lynch may contact in the event a trustee resigns, becomes incapacitated or dies:

_____
Name

_____ _____
Address Phone

7. **For trusts with more than one trustee only** – All trustees initial this section if pursuant to the terms of the trust, when one or more of the co-trustees dies, is removed, or becomes unable or unwilling to serve as trustee, the remaining trustee(s) has authority to continue acting as trustee(s) and no other person or entity is required to assume responsibility as co-trustee at such time. If the terms of the trust are changed to require the addition of a new trustee in case of such an event, the trustees agree to provide Merrill Lynch with a new Trustee Certification Form signed by all trustees at the time such event occurs. (Supporting documentation will be required to remove the name of any trustee from the account (e.g., letter of resignation, death certificate, letter from medical doctor confirming incapacity). Merrill Lynch reserves the right to require a new Trustee Certification Form at any time.) **If applicable, all current trustees must initial in spaces provided**.

8. The trust or applicable law authorizes the trustees and any authorized agents to make distributions or transfers of trust funds, securities, or other assets by check, debit card, credit card, or other means (including account-to-account transfers) to beneficiaries and others. Merrill Lynch, its employees or agents, shall have no responsibility to assure the proper application of trust funds, securities or other assets by any trustee. **(Please note that checking, debit cards and credit cards may not be available on certain accounts.)**

9. The trust or applicable law authorizes the trustees and any authorized agents (i) to enter into cash transactions for the purchase and sale of securities of all types (including buying and writing covered equity put/call options and buying index put/call options) and other investments available through Merrill Lynch, and (ii) **(for trusts governed by U.S. law only)** to purchase and own life insurance and annuity contracts and to exercise all rights associated with the ownership of life insurance and annuity contracts held in or linked to an account at Merrill Lynch, including but not limited to, surrendering the contract, withdrawing available contract values, borrowing against contract values and otherwise encumbering the contract, assigning the contract and making designations of beneficiaries. The trustees understand and agree that it is the obligation of the trustees to ensure that any investment restrictions and/or requirements that govern the trust/trust assets are followed. The trustees further acknowledge and agree that Merrill Lynch and its employees or agents are not responsible for determining whether the trust is subject to any investment restrictions or requirements.

10. COMPLETE THIS SECTION ONLY IF THE TRUST IS REVOCABLE AND THE GRANTOR IS A CURRENT TRUSTEE. The trust also authorizes the following activities or, to the extent necessary, this paragraph 10 shall be deemed to amend the trust to allow such activities. **All current trustees must initial those that apply in spaces provided:**

A. Margin transactions including short sales

B. Margin transactions including short sales, uncovered put/call options, spreads, straddles and combinations, whether index or equity

11. If the trustee(s) executes an investment management contract or power of attorney delegating the performance of investment management or other duties and authorizes the compensation of such advisors or agents or payment of related fees, charges and expenses to be assessed or deducted from trust assets, the trustee(s) represents and warrants that such delegation and payments are authorized by the trust document and/or applicable law,the trustees have filed necessary statements or elections with governmental authorities, and have provided timely written notice to all beneficiaries eligible to receive income from the trust of this delegation. The consent of no party other than the trustees is required to vest investment discretion in investment advisors or other agents engaged by the trustees. If, at any time, an investment advisor or other agent not affiliated with Merrill Lynch's programs or services, is granted discretionary authority over the trust, Merrill Lynch is authorized to act upon the instructions of such investment advisor or other agent to the extent authorized in a properly executed power of attorney. **(Please submit power of attorney)**.

12. The trustees represent, warrant and agree that Merrill Lynch is authorized for all purposes regarding the trust's accounts to follow the instructions of any one trustee. If there is more than one trustee, the trustees agree that it is their responsibility to agree among themselves before giving any instructions to Merrill Lynch for the trust's accounts, if required by the trust instrument or applicable law, and that Merrill Lynch may conclusively presume that any one trustee who provides instructions to Merrill Lynch has obtained such agreement. Merrill Lynch shall be entitled to assume the existence of a trust power and the proper exercise of a trust power by any trustee without inquiry. Merrill Lynch, its employees or agents shall have no responsibility to assure the proper application of trust funds, securities or other assets by any trustee. In the event Merrill Lynch receives inconsistent instructions from two or more trustees, reasonably believes instructions received from one trustee are not mutually agreeable to all trustees, or receives a court order with respect to the account, Merrill Lynch may, but is not obligated to, restrict activity in the trust account, require that all instructions be in writing signed by all trustees, restrict/suspend activity in and from the trust account or terminate the account and/or file an interpleader action in an appropriate court at the expense of the trust.
    The trustees are responsible for providing Merrill Lynch with the correct tax identification number for the trust and for contacting Merrill Lynch with any change to that number. A change in that number may result in the requirement that a new account be opened. Any purchase or sale in a trust account utilizing a Social Security number of a deceased person will be reported to the I.R.S under that Social Security number and the year-end tax reporting statement for the account will not provide a "step-up" in basis for the assets sold. Any resulting tax consequences must be addressed by the trustee(s) in consultation with the attorney or tax advisor representing the trust.

13. The trustees represent and warrant that none of the beneficiaries of the trust are business organizations operating for profit such as corporations, partnerships, limited liability companies, associations or business trusts.

14. The trustees agree, jointly and severally, to indemnify Merrill Lynch, its employees, directors and agents to hold them harmless from any liabilities and expenses that arise from following the instructions of any trustee, or of any authorized investment advisors or agents, or that otherwise arise from Merrill Lynch's reliance on the representations, warranties and agreements included in this Trustee Certification Form. This agreement to indemnify Merrill Lynch shall survive termination of the trust or of the accounts.

15. **The trustees agree to provide a new Trustee Certification Form to Merrill Lynch in the event that any of these representations, warranties, agreements, or certifications change, or if they may no longer be relied upon by Merrill Lynch.**

16. The trustees agree that Merrill Lynch may rely upon this Trustee Certification Form (and any copies thereof) until Merrill Lynch and any investment advisors or other agents receive a new Trustee Certification Form, executed by all then-serving trustees, notifying Merrill Lynch of any changes involving the trust, in which case the new Trustee Certification Form will supercede this Trustee Certification Form in all respects, except as otherwise provided in Paragraph 14. The trustees also agree that this Trustee Certification Form supercedes any prior Trustee Certification Forms, documents, or information provided to Merrill Lynch regarding the trust, and that the INSTRUCTIONS printed on page 9 are an integral part of the Trustee Certification Form, and are specifically incorporated herein.
    Merrill Lynch may, but need not, require current Letters of Trusteeship.
    Except where it would be inconsistent to do so, words and phrases used in this document should be interpreted so the singular includes the plural and the plural includes the singular.

Signature(s) of Trustee(s) (All current trustees must sign. Notarization is required for trusts governed by certain U.S. States. See instructions below and on page 9 for list of states.)

USE THIS SIGNATURE PAGE FOR TRUSTS GOVERNED IN JURISDICTIONS THAT DO NOT REQUIRE NOTARIZATION

For trusts governed by the U.S states of California, Colorado, Delaware, Idaho, Illinois, Iowa, Michigan, Minnesota, Mississippi, Nebraska, Nevada, South Dakota, Tennessee, or Vermont, notarization is required, so do not sign this page, instead use one of the following Signature with Notary Pages that follow.

Use this Signature Page for trusts governed by all other jurisdictions.

A. Agreed and Certified to this _____ day of _____ year of _____

Signature of Trustee: _____

B. Agreed and Certified to this _____ day of _____ year of _____

Signature of Trustee: _____

C. Agreed and Certified to this _____ day of _____ year of _____

Signature of Trustee: _____

D. Agreed and Certified to this _____ day of _____ year of _____

Signature of Trustee: _____

MLPF&S Account #1	MLPF&S Account #2	MLPF&S Account #3
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FOR INTERNAL USE ONLY

Signature Page with Notary (All current trustees must sign. Notarization is required for trusts governed by certain U.S. States. See on page 9 for list of states.)

USE THIS SIGNATURE WITH NOTARY PAGE WHEN THE NOTARY IS IN ANY JURISDICTION **EXCEPT:**

IF THE NOTARY IS IN CO, ID, IA, MI, MN, MS, NE, NV, SD, TN or VT, USE PAGE 6.
IF THE NOTARY IS IN CA, USE PAGE 7.
IF THE NOTARY IS IN FL, USE PAGE 8.

A. Agreed and Certified to this _____ day of _____ year of _____

Signature of Trustee: _____

Please Note That All Fields, Including The Boxes Below, Must Be Completed By The Notary (Or The Document Will Be Rejected).

NOTARY ACKNOWLEDGEMENT:

State of _____ County of _____

The foregoing instrument was acknowledged before me, a Notary Public, this _____ day of _____, 20_____, by

_____, the person whose name is subscribed to within this instrument and acknowledged to me that he/she executed

Insert Signer's Name, NOT Notary's Name

the same in his/her authorized capacity.

PLEASE CHECK ONE OF THE FOLLOWING (REQUIRED):

☐ **Personally known or** ☐ **Produced the following type of identification:** _____

_____

WITNESS my hand and official seal

_____ _____

Signature of Notary Public Print Name of Notary Public

My commission expires: _____ (Seal)

***All signatures must be acknowledged by a Notary Public. Copy this page as needed.**

B. Agreed and Certified to this _____ day of _____ year of _____

Signature of Trustee: _____

Please Note That All Fields, Including The Boxes Below, Must Be Completed By The Notary (Or The Document Will Be Rejected).

NOTARY ACKNOWLEDGEMENT:

State of _____ County of _____

The foregoing instrument was acknowledged before me, a Notary Public, this _____ day of _____, 20_____, by

_____, the person whose name is subscribed to within this instrument and acknowledged to me that he/she executed

Insert Signer's Name, NOT Notary's Name

the same in his/her authorized capacity.

PLEASE CHECK ONE OF THE FOLLOWING (REQUIRED):

☐ **Personally known or** ☐ **Produced the following type of identification:** _____

_____

WITNESS my hand and official seal

_____ _____

Signature of Notary Public Print Name of Notary Public

My commission expires: _____ (Seal)

***All signatures must be acknowledged by a Notary Public. Copy this page as needed.**

MLPF&S Account #1 ☐☐☐—☐☐☐☐☐

MLPF&S Account #2 ☐☐☐—☐☐☐☐☐

MLPF&S Account #3 ☐☐☐—☐☐☐☐☐

FOR INTERNAL USE ONLY

Signature Page with Notary (All current trustees must sign. Notarization is required for trusts governed by certain U.S. States. See on page 9 for list of states.)

USE THIS SIGNATURE WITH NOTARY PAGE WHEN THE NOTARY IS IN: CO, ID, IA, MI, MN, MS, NE, NV, SD, TN or VT.

A. Agreed and Certified to this _____ day of _____ year of _____

Signature of Trustee: _____

Please Note That All Fields, Including The Boxes Below, Must Be Completed By The Notary (Or The Document Will Be Rejected). Signature date and notary date must be the same.

NOTARY JURAT AND AFFIDAVIT FORM:

State of _____ County of _____

Signed and sworn to (or affirmed) before me this _____ day of _____, 20_____,

by _____, Trustee.

Insert Signer's Name, NOT Notary's Name

PLEASE CHECK ONE OF THE FOLLOWING (REQUIRED):

☐ **Personally known or** ☐ **Produced the following type of identification:** _____

_____

WITNESS my hand and official seal

_____ _____

Signature of Notary Public Print Name of Notary Public

My commission expires: _____(Seal)

***All signatures must be acknowledged by a Notary Public. Copy this page as needed.**

B. Agreed and Certified to this _____ day of _____ year of _____

Signature of Trustee: _____

Please Note That All Fields, Including The Boxes Below, Must Be Completed By The Notary (Or The Document Will Be Rejected). Signature date and notary date must be the same.

NOTARY JURAT AND AFFIDAVIT FORM:

State of _____ County of _____

Signed and sworn to (or affirmed) before me this _____ day of _____, 20_____,

by _____, Trustee.

Insert Signer's Name, NOT Notary's Name

PLEASE CHECK ONE OF THE FOLLOWING (REQUIRED):

☐ **Personally known or** ☐ **Produced the following type of identification:** _____

_____

WITNESS my hand and official seal

_____ _____

Signature of Notary Public Print Name of Notary Public

My commission expires: _____(Seal)

***All signatures must be acknowledged by a Notary Public. Copy this page as needed.**

MLPF&S Account #1	MLPF&S Account #2	MLPF&S Account #3
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FOR INTERNAL USE ONLY

Signature Page with Notary (All current trustees must sign. Notarization is required for trusts governed by certain U.S. States. See on page 9 for list of states.)

USE THIS SIGNATURE WITH NOTARY PAGE WHEN THE NOTARY IS IN CALIFORNIA.

Please note that all fields must be completed by the Notary Public or the document will be returned.

A. Agreed and Certified to this _____ day of _____ year of _____

Signature of Trustee: _____

NOTARY PAGE FOR CALIFORNIA ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California, County of _____,

On _____ before me, _____,
(Insert name and title of the officer)

personally appeared _____,
(Insert name of Trustee)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California
that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____ (Seal)

***All signatures must be acknowledged by a Notary Public. Copy this page as needed.**

B. Agreed and Certified to this _____ day of _____ year of _____

Signature of Trustee: _____

NOTARY PAGE FOR CALIFORNIA ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California, County of _____,

On _____ before me, _____,
(Insert name and title of the officer)

personally appeared _____,
(Insert name of Trustee)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California
that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____ (Seal)

***All signatures must be acknowledged by a Notary Public. Copy this page as needed.**

MLPF&S Account #1 ☐☐☐—☐☐☐☐☐

MLPF&S Account #2 ☐☐☐—☐☐☐☐☐

MLPF&S Account #3 ☐☐☐—☐☐☐☐☐

FOR INTERNAL USE ONLY

Signature Page with Notary (All current trustees must sign. Notarization is required for trusts governed by certain U.S. States. See on page 9 for list of states.)

USE THIS SIGNATURE WITH NOTARY PAGE WHEN YOU THE NOTARY IS IN FLORIDA.

Please note that all fields, including the boxes below, must be completed by the Notary Public or the document will be returned.

A. Agreed and Certified to this _____ day of _____ year of _____

Signature of Trustee: _____

Please Note That All Fields, Including The Boxes Below, Must Be Completed By The Notary (Or The Document Will Be Rejected).

NOTARY ACKNOWLEDGEMENT:

State of Florida, County of _____.

The foregoing instrument was acknowledged before me, a Notary Public, by means of (check one) ☐ **physical presence or** ☐ **online notarization**,

this _____ day of _____, 20_____, by _____, the person

Insert Signer's Name, NOT Notary's Name

whose name is subscribed to within this instrument and acknowledged to me that he/she executed the same in his/her authorized capacity.

PLEASE CHECK ONE OF THE FOLLOWING (REQUIRED):

☐ **Personally known or** ☐ **Produced the following type of identification:** _____

_____

WITNESS my hand and official seal

_____ _____

Signature of Notary Public Print Name of Notary Public

My commission expires: _____ (Seal)

***All signatures must be acknowledged by a Notary Public. Copy this page as needed.**

B. Agreed and Certified to this _____ day of _____ year of _____

Signature of Trustee: _____

Please Note That All Fields, Including The Boxes Below, Must Be Completed By The Notary (Or The Document Will Be Rejected).

NOTARY ACKNOWLEDGEMENT:

State of Florida, County of _____.

The foregoing instrument was acknowledged before me, a Notary Public, by means of (check one) ☐ **physical presence or** ☐ **online notarization**,

this _____ day of _____, 20_____, by _____, the person

Insert Signer's Name, NOT Notary's Name

whose name is subscribed to within this instrument and acknowledged to me that he/she executed the same in his/her authorized capacity.

PLEASE CHECK ONE OF THE FOLLOWING (REQUIRED):

☐ **Personally known or** ☐ **Produced the following type of identification:** _____

_____

WITNESS my hand and official seal

_____ _____

Signature of Notary Public Print Name of Notary Public

My commission expires: _____ (Seal)

***All signatures must be acknowledged by a Notary Public. Copy this page as needed.**

MLPF&S Account #1	MLPF&S Account #2	MLPF&S Account #3
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FOR INTERNAL USE ONLY

Instructions

This Trustee Certification Form is for use by trustees of any revocable trust or irrevocable trust to maintain one or more cash securities accounts and by trustees of any grantor revocable living trusts to maintain a margin account or engage in other investment activity. It is not to be used by employee benefit trusts, nominees or business trusts, nor for any trust for which the beneficiaries are business organizations operating for profit such as corporations, partnerships, limited liability companies, associations or business trusts. The Trustee Certification Form is also for use by trustees of revocable or irrevocable trusts for which the trustees delegate the performance of their discretionary duties to an investment advisor(s) or other agent(s).

NAMES OF TRUSTEES – If a change of trustees occurs by death or otherwise, a new Trustee Certification Form must be provided unless section 7 is completed and applicable.

POWER TO MAKE DISTRIBUTIONS/TRANSFERS – The authority of the trustees (and if applicable, the authority of any authorized agents) to make distributions/transfers shall (be understood to) include the power for the trustees and any authorized agents to draw upon the funds, securities or other assets in the account of the trust by check, debit card, credit card, or other means (including account-to-account transfers). If the trustees apply to participate in Merrill Lynch programs or services that include extensions of credit to the trust, the trustees hereby represent that the trust or applicable law authorizes the trustees to incur indebtedness to the extent required to qualify for such programs or services.

INVESTMENT POWERS – The authority of the trustees of any trust to purchase and sell securities and other investments including options to the extent described in paragraph 9 shall be unrestricted. The authority of the grantor/trustee of a grantor revocable living trust to maintain a margin account and to engage in other activities described in paragraph 10 shall be understood to be unrestricted. Merrill Lynch shall be entitled to assume the existence of a trust power and the proper exercise of a trust power by any trustee (and by any investment advisor or agent appointed by the trustees for the trust) without inquiry. Merrill Lynch shall have no responsibility to assure the proper application of trust funds, securities or other assets by any trustee (or by an agent appointed by the trustees for the trust).

GRANTOR REVOCABLE LIVING TRUSTS – By signing this certification, the trustee of a grantor revocable living trust represent and warrant that he/she/it has full power and authority to direct the transfer of trust assets, and that the grantor has full power and authority to revoke and amend the trust.

SIGNATURES OF TRUSTEES – All trustees must sign this Trustee Certification Form. If there are more than two trustees, use an additional signature page. If only one trustee signs, it shall be a representation that the trust has a single trustee. All trustees are required to sign any account opening documents. This Trustee Certification Form may be signed in counterpart.

INVESTMENT ADVISORS AND AGENTS – If the trustees have designated an investment advisor(s) or other agent outside of Merrill Lynch's programs or services with discretionary authority over the trust's funds, securities or other assets, a power(s) of attorney signed by all of the trustees must also be provided (refer to paragraph 11).

NOTARIZATION – For trusts governed by the U.S states of California, Colorado, Delaware, Idaho, Illinois, Iowa, Michigan, Minnesota, Mississippi, Nebraska, Nevada, South Dakota, Tennessee, Vermont notarization of all trustees' signatures by a notary public is required. Notarization is not required for trusts governed by the law of other jurisdictions.

Please see applicable notary block pages. Use the notary form that corresponds to the respective jurisdiction as noted on the top of each page. Please note that all fields must be completed, or the document will be rejected. California and Florida notaries are to use their state specific acknowledgement pages. Alternatively, California notaries may use the notarial acknowledgement available on the California Secretary of State website.

Merrill Lynch reserves the right to request a complete copy of the trust agreement or will at any time. Merrill Lynch may require written authorization of all co-trustees in some circumstances even though the trust instrument may allow a trustee to act individually and without the consent of other co-trustees for all purposes.

Merrill Lynch, Pierce, Fenner & Smith Incorporated (also referred to as "MLPF&S" or "Merrill") makes available certain investment products sponsored, managed, distributed or provided by companies that are affiliates of Bank of America Corporation (BofA Corp.). MLP&S is a registered broker-dealer, Member SIPC and a wholly owned subsidiary of BofA Corp.

Banking products are provided by Bank of America, N.A., and affiliated banks, Members FDIC and wholly owned subsidiary of BofA Corp.

Investment products:

Are Not FDIC Insured	Are Not Bank Guaranteed	May Lose Value

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