



| |
|----------------|
| Account Number |
| |

Premiere Select® IRA Application

Type on screen or fill in using CAPITAL letters and black ink. If you need more room for information or signatures, use a copy of the relevant page.

**For Authorized agent/
Advisor Use Only**

To provide information on more Authorized agent(s)/Advisor(s), owners, etc., make additional copies of necessary page(s).

As defined in Article VIII 1(d) of Premiere Select IRA Custodial Agreement or Article IX 1(d) of the Premiere Select Roth IRA Custodial Agreement.

* For electronic confirms.

| | | |
|-------------------------------------|-------------|----------|
| Primary Authorized agent/Advisor | DTC Number* | G Number |
| | | G |
| Additional Authorized agent/Advisor | | G Number |
| | | G |
| Additional Authorized agent/Advisor | | G Number |
| | | G |
| Additional Authorized agent/Advisor | | G Number |
| | | G |
| Additional Authorized agent/Advisor | | G Number |
| | | G |

For Advisor Use Only:

Account referred through Wealth Advisor Solutions program (Use WAS specific G Number in Primary Authorized agent/Advisor G Number field above.)

Check one.

Traditional IRA Rollover IRA Roth IRA SEP-IRA

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

| | | | |
|------------------------|--|------------------------------|--|
| First Name | Middle Name | Last Name | |
| | | | |
| Social Security Number | Date of Birth MM DD YYYY | U.S. Driver's License Number | State |
| | | | |
| Primary Phone | <input type="checkbox"/> Mobile Number | Secondary Phone | <input type="checkbox"/> Mobile Number |
| | | | |
| Email* | | | |
| | | | |

Provide phone number(s) to be used to verify and/or authorize transactions. Provide an email address to be used to authorize transactions and/or for electronic delivery of documents.

U.S. Mail – Send the following document types to me by U.S. mail instead of electronically:

Monthly Account Statement Immediate and Quarterly Trade Confirm
 Tax Documents and Related Disclosures Prospectuses, other financial reports, etc.

* Fidelity will use this email address for electronic delivery of account documents. Unless U.S. Mail is checked for all document types, you will receive a follow-up email from Fidelity and will need to consent to begin receiving documents electronically. See Document Delivery and Frequency section for more information regarding eDelivery.

Address of Record

Required for all accounts. Unless otherwise indicated, account documentation will be delivered to the account owner at the account mailing address. The mailing address should not be your Authorized agent's/Advisor's address.

Permanent Address of Account *Cannot be a P.O. Box or Mail Drop.*

Mailing Address of Account *Complete if different than Permanent Address.*

| | | |
|---------------|----------------|-----------------|
| Address | | |
| | | |
| City | State/Province | Zip/Postal Code |
| | | |
| Country | | |
| UNITED STATES | | |

| | | |
|---------------|----------------|-----------------|
| Address | | |
| | | |
| City | State/Province | Zip/Postal Code |
| | | |
| Country | | |
| UNITED STATES | | |

continued on next page



Citizenship

Indicate your citizenship status.

| | | |
|--|-----------|---|
| <input checked="" type="checkbox"/> U.S. Skip to Income Source | OR | <input type="checkbox"/> Foreign citizen Information in this box must be completed. |
| | | Country of Citizenship |

Choose one.

Permanent U.S. Resident
 Non-Permanent U.S. Resident
 Non-Resident of U.S.

Government Identification

Unexpired ID must include reference number and photo. Attach copy of ID.

Passport Other Government-Issued ID

| | |
|-----------|---------------------|
| ID Number | Country of Issuance |
|-----------|---------------------|

Country of Tax Residence

U.S. Other

| |
|---------|
| Country |
|---------|

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

Check one.

Employed
 Not Employed
 Retired List Income Source if Retired or Not Employed.

| | | |
|---|----------------|-----------------|
| Employer/Income Source required for margin privileges | Occupation | |
| Address | | |
| City | State/Province | Zip/Postal Code |
| Country | | |

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 | Zip/Postal Code | Country |

continued on next page



Affiliations

If you, your spouse, or any of your relatives (including parents, in-laws and/or dependents, etc.), living in your home (at the same address), is a member of the board of directors, is a 10% shareholder, or is a policy-making officer or can direct corporate management of policies of a publicly traded company (an "Affiliate"), you must provide the information below.

| | |
|--------------|-----------------|
| Company Name | CUSIP or Symbol |
| Company Name | CUSIP or Symbol |
| Company Name | CUSIP or Symbol |

Trusted Contact *Optional.*

Fidelity will contact this individual if there are questions or concerns about your health or welfare due to potential diminished capacity, financial exploitation or abuse, endangerment, and/or neglect. We will:

- Provide the trusted contact with information about you and/or your account(s), but not 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, or trustee).

Enter information if you want to designate a person who is 18 years or older for this account. Name, Phone and Address are all required.

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

This cannot be a P.O. box, Mail Drop, or C/O.

| | | |
|---------|----------------|-----------------|
| Address | | |
| City | State/Province | Zip/Postal Code |
| Country | | |



1. Account Characteristics

These features can be modified or withdrawn upon written notice to Fidelity. For Cash Management or Options Trading, obtain the appropriate form(s) from your Authorized agent(s)/Advisor(s).

Trading and Asset Movement Authorizations

Trading Authorization

Authorizes Fidelity to accept trades, servicing, and account-related instructions on your account from your Authorized agent(s)/Advisor(s), without direct instructions from you. Trading authorization is a feature of all accounts opened with this application; you grant trading authorization when you sign the application. By granting trading authorization to your Authorized agent(s)/Advisor(s), you understand and agree that your Authorized agent(s)/Advisor(s) will have the ability to instruct Fidelity to initiate transfers of cash from your bank account to your Fidelity account, based on standing written funds transfer instructions provided by you to Fidelity. See the Client Agreement for more complete information.

Asset Movement Authorization *Check one only.*

Authorizes Fidelity to accept instructions from your Authorized agent(s)/Advisor(s) to move assets in and out of your account, without direct instructions from you, including the authority to make federal and state tax withholding elections on your behalf. If you elect the No Asset Movement Authorization option, or if no Asset Movement option below is chosen, your Authorized agent/Advisor will not be able to move money from this account without your signature. See the Client Agreement for more complete information. Fidelity may require direct instructions from you for transactions over a certain amount.

By checking Level 1 Limited, Level 1, or Level 2, you direct Fidelity to accept instructions from your Authorized agent(s)/Advisor(s) concerning the types of transactions indicated for that level. In the Level 1 and Level 2 descriptions, "same-registration" means the same owner or owners and the same registration type.

- No Asset Movement Authority on this Account** Your Authorized agent/Advisor will not be able to move money from this account without your signature.
- Level 1 Limited (First Party only)** This authorization includes one-time disbursements and the establishment of, and changes to, periodic disbursements (Periodic Distribution Plans) from your account, including:
 - checks made payable to you and sent to your address.

- bank wires or electronic funds transfers (EFTs) to any first-party account you have authorized through standing written instructions and first-party check disbursements you have authorized through standing written instructions.
- for Premiere Select individual retirement accounts (IRAs), transfers of cash or securities from this account to other same registration IRAs that are not reported for tax purposes, distributions from this account to Fidelity nonretirement brokerage accounts you own individually, conversions to Roth IRAs and transfers from this account to other Fidelity non-retirement accounts owned by you individually.

Level 1 (First and Third Party) This includes all Level 1 Limited authorizations, plus:

- bank wires or electronic funds transfers (EFTs) to any third-party account you have authorized through standing written instructions and third-party check disbursements to any payee and address you have authorized through standing written instructions.
- for Premiere Select individual retirement accounts (IRAs), transfers of cash or securities from this account to other third-party accounts at Fidelity you have authorized through standing written instructions, including distributions from this account to Fidelity non-retirement accounts with different owners and/or registrations.

Level 2 This includes all Level 1 authorizations, plus:

- bank wires to any same-registration account outside Fidelity, without direct instructions from you.

Note: You understand and agree Fidelity cannot confirm the account registration at the receiving bank and will rely solely on the representations of your Authorized agent/Advisor as to the registration of the receiving account. Your Authorized agent/Advisor will have the authority to direct Fidelity with regard to the timing, amount and reason of any IRA distribution and the amount of federal and state tax withholding to apply on your behalf. You are advised to consult with your legal or tax advisor regarding all elections made with respect to distributions. You assume the responsibility that results from any IRA distribution initiated by You or your Authorized agent/Advisor.

Core Transaction Account *Check one only.*

The core account is used for settling transactions in your account, and for holding balances awaiting investment. Availability of core account options may change. If you do not select a core account option, select more than one option, or select an option that is not eligible for your account, you will be put into the default option indicated below. You understand and agree that Fidelity may change your core account selection with notice to you when required. You may make a different core account selection from available options. Contact your advisor to change your core account option. Money Market funds are not eligible as core options to non-U.S. customers. See the Core Transaction section of the Client Account Agreement for details.

| | | |
|--|--|--|
| <input checked="" type="checkbox"/> FDRXX Fidelity Government Cash Reserves Money Market Fund <i>U.S. Accounts Only. Default if no choice is indicated.</i> | <input type="checkbox"/> FZFXX Fidelity Treasury Money Market Fund <i>U.S. Accounts Only</i> | <input type="checkbox"/> QIWSQ Bank Deposit Sweep <i>U.S. Accounts Only</i> |
| <input type="checkbox"/> QFUPQ Federated Short-Term U.S. Prime Offshore Fund - Institutional Service Series <i>Non-U.S. Accounts Only. Not eligible for residents of Ireland. Default for non-U.S. accounts if not elected.</i> | <input type="checkbox"/> OTHER Available to Authorized Investors <i>If you have authorization from Fidelity to use a different core fund option, enter the fund name and/or symbol.</i> | |
| <div style="border: 1px solid black; width: 200px; height: 20px; margin: 0 auto; padding: 2px;">Other</div> | | |



1. Account Characteristics *continued*

Dividend and Capital Gain Payments *Check one only.*

These choices concern handling of any dividends, capital gains, and similar payments made by securities you own. Any payments that you choose to have reinvested will be used to purchase additional shares of the security that is making the payment. Any payments that you choose to have paid to you will be placed in your account. Note that only certain domestic stocks and closed-end funds held in a Fidelity brokerage account are eligible for dividend reinvestment. For more information on reinvestment policies, see Dividend Reinvestment section in Client Agreement.

- Reinvest:** Payments from all mutual funds
Pay to Core Account: Payments from all eligible U.S. equities and closed-end funds (3)
Default choice if you make no indication
- Reinvest:** Payments from all eligible U.S. equities and closed-end funds
Pay to Core Account: Payments from all mutual funds (S)
- Reinvest:** Payments from all eligible securities; any payments from ineligible securities will be paid to your core account (D)
- Pay All to Account:** Do not distribute by check (4)

Document Delivery and Frequency

Electronic Delivery

By providing your email address in this application, you have elected to receive Statements, Trade Confirmations, Tax Forms and related disclosures, Prospectuses, Financial Reports and other documents electronically. If you do not want any of these document types to be delivered to you electronically, you can choose U.S. Mail delivery for that document type.

By receiving documents electronically, you may be eligible for reduced trading commissions. Consult your Authorized agent/Advisor for more details. In order to begin receiving documents electronically, you will need to read the Electronic Delivery Agreement and agree to its terms. You will receive this agreement at the email address you provide unless you are applying via eSignature.

Note:

- Your delivery preferences are applied across all eligible Fidelity accounts owned by you based upon your most recent election. Therefore, your choice of electronic or paper delivery for this new account will be applied to all eligible accounts unless you elect otherwise in the future.
- The email address provided should not be your Authorized agent/Advisor's email address.
- This email address will replace any existing email address already on our system.
- If you are applying using eSignature you have already agreed to these terms and will be enrolled without receiving this agreement again via email.

Document Redirection *Election to redirect the document below to your advisor will supersede electronic delivery selection above.*

| | Send to My Advisor | OR | Send to Me | |
|---|-------------------------------------|----|--------------------------|---|
| Proxies ¹ Includes all proxy-voting materials. | <input checked="" type="checkbox"/> | | <input type="checkbox"/> | For Authorized agent/Advisor Use Only Proxy Voting G Number (Agent/Advisor or Administrator) G _____ Name (Administrator Only) EWA PRIMARY |
| Reports Includes annual reports and information statements. | <input checked="" type="checkbox"/> | | <input type="checkbox"/> | |
| Prospectuses | <input checked="" type="checkbox"/> | | <input type="checkbox"/> | |
| Corporate Actions ² | <input checked="" type="checkbox"/> | | <input type="checkbox"/> | |

¹ In choosing this option, you also direct Fidelity to accept votes regarding these proxies from your Primary Authorized agent/Advisor. If your Primary Authorized agent/Advisor has a Proxy Voting G Number or uses a proxy administrator, provide the G Number and administrator name as appropriate.

² Notwithstanding your election to receive Corporate Actions/Reorganization Notices at your account's mailing address. Fidelity will accept decisions on the corporate actions/reorganization notices from your Primary Authorized agent/ Advisor.

Trade Confirmation Frequency

Check one. **Quarterly** **Immediately**

Duplicate Materials

Attach additional sheet if necessary. Completing this section will be considered your request to instruct Fidelity to send the type(s) of duplicate documents checked to the party or parties indicated.

Check all that apply. ► Trade Confirmations Statements

| | | | |
|---|----------------|-----------------|----------------|
| Name | | | |
| Address <i>not required if providing G Number</i> | | | G Number |
| | | | G _____ |
| City | State/Province | Zip/Postal Code | Country |
| | | | |

2. Beneficiary Designation for This IRA

Read the instructions below completely before filling out this section.

Naming an IRA beneficiary can have important tax and financial consequences. Consult your attorney and/or tax advisor. Tax consequences can be a particular concern if your account contains community property or if you make a "per stirpes" designation (see the last instruction below). Note that a beneficiary designation is not valid until it is received and accepted by Fidelity.

If naming only one beneficiary in either category (i.e., primary or contingent), the share will automatically be 100%.

If naming more than one beneficiary in a category, indicate an ownership share for each (in percent, not dollars). Make sure the percentages total 100% exactly. If no shares are indicated, equal percentages will be assigned any beneficiaries in that category who are alive at the time of your death (or, if you checked "per stirpes" below, to the survivors of those beneficiaries). Upon transfer of assets to multiple beneficiaries, all residual income paid to your IRA and any fractional shares that cannot be divided equally among the beneficiaries will be systematically allocated to the beneficiary receiving the largest share proportion of the IRA assets. If the IRA is transferred evenly, or at different intervals, the income and/or fractional shares will be systematically allocated to the last beneficiary paid.

To designate more than four beneficiaries in either category, use a copy of the page or attach a sheet with all applicable beneficiary information, your Social Security number, your signature, and the date.

To designate your estate as beneficiary, enter "Estate" as the name.

To change a designation in the future, such as adding or removing a beneficiary, complete a *Premiere Select IRA Beneficiary Designation* form.

Per Stirpes. To have a beneficiary's share pass to his/her descendants (if the beneficiary dies before you), you need to provide "per stirpes" information, in consultation with an estate planning attorney. By electing "per stirpes," any share otherwise payable to the beneficiary's surviving descendants shall instead be paid to those descendants by right of representation.

If you have elected to convert a Traditional IRA, Rollover IRA, SEP-IRA, or SIMPLE IRA, other than a Premiere Select IRA or Fidelity SIMPLE IRA, as applicable, to a Premiere Select Roth IRA, you designate the person(s) named below as primary or contingent beneficiary(ies) to receive the value of the IRA established to facilitate the conversion and the Premiere Select Roth IRA. You understand that payment to any beneficiary(ies) of your IRA established to facilitate a conversion will be made according to the rules of succession as described above.

Enter Beneficiaries on next page ►



2. Beneficiary Designation for This IRA *continued*

The primary beneficiaries will receive payment of any assets that are in this IRA upon your death.

Note: Any attachments for additional beneficiaries must include your account number, your signature, and must be dated.

Electing "Per Stirpes" indicates that if the specified beneficiary(ies) predeceases you, his or her share of the account will pass through to his or her descendants.

Primary Beneficiaries

| | | | | |
|-------------------------------------|---|------------------------------------|--------------------------------|--------------------------------------|
| <input type="checkbox"/> Spouse | Beneficiary Name | | | <input type="checkbox"/> Per Stirpes |
| <input type="checkbox"/> Non-spouse | <input type="checkbox"/> SSN <input type="checkbox"/> TIN | Social Security/Taxpayer ID Number | Date of Birth/Trust MM DD YYYY | Share Percentage |
| <input type="checkbox"/> Trust | | | | % |
| <input type="checkbox"/> Entity | | | | |
| <input type="checkbox"/> Non-spouse | Beneficiary Name | | | <input type="checkbox"/> Per Stirpes |
| <input type="checkbox"/> Trust | <input type="checkbox"/> SSN <input type="checkbox"/> TIN | Social Security/Taxpayer ID Number | Date of Birth/Trust MM DD YYYY | Share Percentage |
| <input type="checkbox"/> Entity | | | | % |
| <input type="checkbox"/> Non-spouse | Beneficiary Name | | | <input type="checkbox"/> Per Stirpes |
| <input type="checkbox"/> Trust | <input type="checkbox"/> SSN <input type="checkbox"/> TIN | Social Security/Taxpayer ID Number | Date of Birth/Trust MM DD YYYY | Share Percentage |
| <input type="checkbox"/> Entity | | | | % |
| <input type="checkbox"/> Non-spouse | Beneficiary Name | | | <input type="checkbox"/> Per Stirpes |
| <input type="checkbox"/> Trust | <input type="checkbox"/> SSN <input type="checkbox"/> TIN | Social Security/Taxpayer ID Number | Date of Birth/Trust MM DD YYYY | Share Percentage |
| <input type="checkbox"/> Entity | | | | % |

Share percentage total must equal 100%. Must be in percentages; do not use dollar amounts.

Total Share Percentage from this sheet plus any additional sheets must total 100% in the Grand Total field.

| | |
|--------------------------|-------------|
| Total Share % this sheet | GRAND TOTAL |
| % | % |

Contingent Beneficiaries

The contingent beneficiaries listed here cannot be the same as those listed above in the primary beneficiary section.

The contingent beneficiaries will receive payment of any assets that are in this IRA upon your death if no primary beneficiaries survive you.

Electing "Per Stirpes" indicates that if the specified beneficiary(ies) predeceases you, his or her share of the account will pass through to his or her descendants.

| | | | | |
|-------------------------------------|---|------------------------------------|--------------------------------|--------------------------------------|
| <input type="checkbox"/> Spouse | Beneficiary Name | | | <input type="checkbox"/> Per Stirpes |
| <input type="checkbox"/> Non-spouse | <input type="checkbox"/> SSN <input type="checkbox"/> TIN | Social Security/Taxpayer ID Number | Date of Birth/Trust MM DD YYYY | Share Percentage |
| <input type="checkbox"/> Trust | | | | % |
| <input type="checkbox"/> Entity | | | | |
| <input type="checkbox"/> Non-spouse | Beneficiary Name | | | <input type="checkbox"/> Per Stirpes |
| <input type="checkbox"/> Trust | <input type="checkbox"/> SSN <input type="checkbox"/> TIN | Social Security/Taxpayer ID Number | Date of Birth/Trust MM DD YYYY | Share Percentage |
| <input type="checkbox"/> Entity | | | | % |
| <input type="checkbox"/> Non-spouse | Beneficiary Name | | | <input type="checkbox"/> Per Stirpes |
| <input type="checkbox"/> Trust | <input type="checkbox"/> SSN <input type="checkbox"/> TIN | Social Security/Taxpayer ID Number | Date of Birth/Trust MM DD YYYY | Share Percentage |
| <input type="checkbox"/> Entity | | | | % |
| <input type="checkbox"/> Non-spouse | Beneficiary Name | | | <input type="checkbox"/> Per Stirpes |
| <input type="checkbox"/> Trust | <input type="checkbox"/> SSN <input type="checkbox"/> TIN | Social Security/Taxpayer ID Number | Date of Birth/Trust MM DD YYYY | Share Percentage |
| <input type="checkbox"/> Entity | | | | % |

Share percentage total must equal 100%. Must be in percentages; do not use dollar amounts.

Total Share Percentage from this sheet plus any additional sheets must total 100% in the Grand Total field.

| | |
|--------------------------|-------------|
| Total Share % this sheet | GRAND TOTAL |
| % | % |

3. Signatures and Dates *Form cannot be processed without signatures and dates.*

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.

By signing below, you acknowledge and agree that:

- You are asking Fidelity to establish the account in your name as described in this application, you understand that this application becomes effective when delivered to and accepted by Fidelity, and you are aware that acceptance of your application will be acknowledged in writing.
- You are at least 18 years of age, of full legal age in the state in which you reside, and fully authorized to apply for this account.
- All information about you is true, accurate, and complete, to the fullest extent of your knowledge, including information about securities industry affiliations, which you answer under penalties of perjury.
- If you have not provided information in either the Associations or Affiliations sections, you have determined that none of the scenarios are applicable.
- The terms and conditions set forth in this application and the Retirement Account Client Agreement ("Client Agreement") govern this brokerage account. Your Authorized agent(s)/Advisor(s) has provided you with a complete copy of the application, Client Agreement, and applicable Custodial Agreement and Disclosure Statement for the Premiere Select IRA and Roth IRA, and you have read, understood and agree to the terms as they are today and as they may be amended in the future, including, but not limited to:
 - your commitments to Fidelity
 - your authorizations and statements concerning your Authorized agent(s)/Advisor(s), including your agreement to grant your Authorized agent(s)/Advisor(s) discretion over your account (as described in a written advisory contract), and if indicated, asset movement authorization
 - the policies governing your account and any optional features you may have requested, such as options or separately managed accounts
 - your agreement to indemnify us
 - our policies on gathering information and recording phone calls
 - our privacy policy and other notices and disclosures
- You grant trading authorization to the Authorized agent(s)/Advisor(s) identified above, as described in the Client Agreement. By granting trading authorization to your Authorized agent/Advisor, you understand and agree that your advisor will have the ability to instruct Fidelity to initiate transfers of cash from your bank account to your Fidelity account, based on standing written funds transfer instructions provided by you to Fidelity. You also authorize Fidelity to deduct from your account the fees your Authorized agent(s)/Advisor(s) charges for their services, paying these fees to the Authorized agent(s)/Advisor(s) or his/her agent upon their instructions, as described in the Client Agreement. Be sure to read and understand all authorizations in the Client Agreement and this application before signing.
 - If you are transferring or opening a Premiere Select Roth IRA, you will track the five-year aging date, as described on the attached Account Funding page.
 - You adopt the type of IRA indicated on page 1 of this application, and appoint Fidelity Management Trust Company as custodian, and Fidelity Brokerage Services LLC and National Financial Services LLC to perform administrative services.
 - With respect to the fees associated with your account:
 - you authorize your Authorized agent(s)/Advisor(s) to set the fees you pay for their services and the fees you pay for Fidelity's services
 - you have reviewed the investment advisory fees with your Authorized agent(s)/Advisor(s), and you believe the fees are reasonable for the services provided.
 - you authorize Fidelity to accept instructions from your Authorized agent(s)/Advisor(s) to deduct Authorized agent(s)/Advisor(s)'s fees directly from your account.
 - you authorize brokerage commissions and termination fees to be deducted from your account (see the Client Agreement for more complete information on fees).
 - If you direct Fidelity to deliver your prospectuses, proxies, related materials or corporate actions/reorganization notifications to your Primary Authorized agent/Advisor instead of delivering these documents to you, and you authorize Fidelity to accept votes from your Authorized agent/Advisor on proxies, you represent and agree to the following:
 - Fidelity has no responsibility to verify any of the representations you make with respect to these instructions.
 - If your Primary Authorized agent/Advisor has identified a proxy related third-party administrator on this form, you represent that you have separately authorized your Primary Authorized agent/Advisor to use such an administrator, your Primary Authorized agent/Advisor may not delegate to the proxy administrator the right to determine your proxy vote and Fidelity may honor instructions from your Primary Authorized agent/Advisor to forward proxy materials to the administrator and may accept your Primary Authorized agent's/Advisor's proxy voting decisions
- Fidelity will provide your names to issuers of securities held in this account so that you might receive any important information regarding them, unless you notify us otherwise in writing. As provided by law and/or due to an independent relationship that may exist between an issuer and you, notwithstanding your objection, certain issuers of securities registered under the Investment Company Act of 1940, including the Fidelity Funds, have access to your identity through their transfer agent.
- Your Authorized agent(s)/Advisor(s) will have access to tax reporting information about your account, unless you notify us otherwise in writing.
- You will notify Fidelity in writing of any material changes to any designation or authorization you have granted to your Authorized agent/Advisor or to any representations you have made to Fidelity concerning of your Authorized agent(s)/Advisor(s), and understand that any changes in account features or instructions (including changes of beneficiary or the rescinding of authorizations relating to asset movement authorization, proxy voting or quarterly account statements) will be effective as soon as Fidelity receives written notice from you.
- If requested in this application, you will receive quarterly confirmation statements in place of transaction confirmations, and you acknowledge and accept the limitations this arrangement may place on your ability to closely and promptly monitor activity in your account.
- Fidelity is not affiliated with your Authorized agent(s)/Advisor(s).
- Fidelity will act only on authorized instructions and has no responsibility to monitor or review your account, to determine the suitability of any investment, or to judge the appropriateness of any instruction placed on the account so long as it appears to be authorized. You can revoke this authorization any time by giving written notice to Fidelity.
- You understand that all transactions and instructions related to your account are subject to Fidelity's policies and procedures, which may result in Fidelity's refusal to accept or execute any order, instruction or transfer related to your account for any reason at any time in its sole discretion.

continued on next page

3. Signatures and Dates *continued*

- Any beneficiary information provided in this application will apply only to an account established with this application. If you do not designate any beneficiary(ies), your beneficiary for this account will be your surviving spouse, or if you do not have a surviving spouse, your estate.
- Acknowledge that listing beneficiaries by name does NOT create a category of beneficiaries and that if you later want to include other beneficiaries, you will need to file a new beneficiary form.
- Acknowledge that “per stirpes” creates a category of beneficiaries (for example, the children of a beneficiary), and therefore may end up including individuals not yet born or adopted.
- Acknowledge that Fidelity Brokerage Services LLC (“FBS”), agent for Fidelity Management Trust Company (“FMTC”), custodian, and their affiliates, successors and employees, have no obligation to locate or notify any beneficiary or to independently verify any information submitted by any person claiming an interest in your IRA.
- Acknowledge that Fidelity reserves the right to not make any payments until at least 30 days after the original account owner's death.
- Understand that if you change your beneficiary designation at any time during the year, it is your responsibility to instruct FBS, in a letter of instruction, of the impact of any such changes to any previously requested required minimum distribution (“RMD”) calculations and that your RMD amount may increase or decrease. If you fail to do so, subsequent distributions in your payout plan may not satisfy your RMD requirements. (Consult with your tax advisor to determine how a beneficiary change may affect your RMD amount.)
- Acknowledge and agree that FBS, FMTC, FPTC, and their affiliates, their officers, directors, employees, agents, affiliates, shareholders, successors, assigns, and representatives have no responsibility for determining or monitoring any further use designated for any organization named as a beneficiary and no liability with respect to any future use.
- Acknowledge and agree that if you elect a custom beneficiary for your account you are responsible for calculating your RMD each year if the RMD calculation is based on joint life expectancy.
- Indemnify and hold harmless FBS, FMTC, FPTC, their officers, directors, employees, agents, affiliates, shareholders, successors, assigns and representatives from any liability in connection with any action or inaction taken in connection with any beneficiary designation instructions received on this form or separate custom designation you provide.
- You have received and read the prospectus for the core account investment vehicle that you have designated for your account.
- Any mutual fund or other investment company in which this IRA may be invested is not a bank and is not backed or guaranteed by any bank or insured by the FDIC.
- If you elect an IRA Direct Transfer on the following Account Funding page, you authorize Fidelity to journal assets from the account number you provided to this Premiere Select IRA.
- You acknowledge that if you or your Authorized agent/Advisor have elected a Bank Deposit Sweep Program as your core account option, your account is an eligible account, as that term is defined in the Bank Deposit Sweep Program disclosure documents. You further acknowledge that by electing a Bank Deposit Sweep Program as your core account option, the cash balance in your core account will be swept to an FDIC insurance-eligible interest-bearing account at a Bank. You also understand that a Bank Deposit Sweep Program is not a security and therefore is not protected by SIPC but when your core account balance is swept to an FDIC account at a Bank, it is eligible for FDIC insurance subject to FDIC insurance coverage limits.
- You acknowledge that you have received the description of the Core Account in the Retirement Account Client Agreement, including Fidelity's right to change the options available as core account options with notice to you when required, and consent to having free credit balances held or invested in the core account options made available.

Clients Adding Trusted Contact Only

- You authorize Fidelity, at Fidelity's sole discretion, to communicate with your trusted contact on any designated account(s) you may have on file and disclose information about designated accounts to address possible financial exploitation or confirm specifics about your current contact information, your health status, or inquire about the identity of any legal guardian, executor, trustee, or holder of a power of attorney, or as otherwise permitted. This does not allow your trusted contact to transact on your account(s).
- Certify that your trusted contact is 18 years or older.
- Understand that we may remove any trusted contact from any account at any time for any reason.
- Understand that this designation is optional and you may change or withdraw it at any time by notifying Fidelity in writing.

If you are not a U.S. person:

- State that you are submitting IRS Form W-8 BEN with this application to certify your foreign status.

For Texas Residents Only

- Acknowledge that in accordance with Texas House Bill 1454 Act No. 350, you, as an account owner of shares of a mutual fund, may designate a representative for the purpose of receiving a due diligence notice; however, you are not required to designate a representative.
- Agree that if you add a designated representative, Fidelity is required to mail the written notice upon presumption of abandonment to the representative, in addition to mailing the notice to the owner.
- Acknowledge that the designated representative does not have any rights to the mutual fund shares and may not access the shares.
- Understand that if you want to provide a designated representative, you must complete and attach a separate *Designated Representative—Texas* form.

Your Authorized agent/Advisor(s) determines with Fidelity the fees and rates you pay to Fidelity for its services. Contact your advisor for information on the pricing schedule of fees and rates applicable to your account.

Asset Based Pricing Clients:

You represent that you have read, understand, and agree to the terms and conditions of the Asset Based Pricing Supplement included with this application and agree to be bound by such terms and conditions as are currently in effect and as may be amended from time to time.

Transaction Based Pricing Clients:

Transaction Based pricing includes interest rates, commissions rates and fees applicable to your account. For some customers it will include a Custody Fee. You agree to be bound by the terms and conditions of such rates and fees as are currently in effect and as may be amended from time to time, and represent that your Authorized agent/Advisor has informed you of such fees. See the Client Agreement for additional information regarding rates and fees including Custody Fee.

Account Owner must sign and date on next page.

3. Signatures and Dates *continued*

You acknowledge that this account is governed by a pre-dispute arbitration clause, which appears on the last page of the Account Agreement, and you acknowledge that you have received a copy of this clause.

Owner Signature

| | |
|---|----------------------------|
| Print Owner Name <i>First, M.I., Last</i> | |
| Owner Signature | Date <i>MM - DD - YYYY</i> |
| SIGN ▶ | ▶ |

If you are funding the account, complete the following Account Funding page.

4. Account Funding *Complete and return with the signed application if you are funding the account.*

Read each option below for which document(s) must be included to complete the funding of your account. Make all checks payable to "National Financial Services" and include your Social Security number (and your account number, if known) on the check.

All contributions will be invested in Fidelity Cash Reserves money market fund.

Transfer or convert from a non-Fidelity IRA

Complete and include a *Transfer of Assets* form.

Transfer or convert from any type of Fidelity IRA

Conversion of a *Premiere Select IRA* to a Roth IRA, include a *Premiere Select Roth IRA Conversion* form.

IRA Direct Transfer, simply provide account number to transfer your existing IRA to a *Premiere Select IRA*. Eligible assets will be transferred in kind. You should confirm if assets in your existing account are eligible for transfer as certain assets may not be eligible for transfer and may be liquidated.

If converting a SIMPLE IRA to a Roth IRA, the conversion must occur at least 24 months after the date of the employer's first contribution to your SIMPLE IRA.

Rollovers From a non-Fidelity IRA or an Employer-Sponsored Retirement Plan

Direct Rollover (Employer-Sponsored Retirement Plan to IRA), include a check from the employer-sponsored plan.

60-Day Rollover, include a check for the amount you are rolling over.

Note: With a 60-day rollover, money from a qualified retirement account (such as an IRA or an employer-sponsored retirement plan) has been paid directly to you, and you are now providing us with a check from your account to roll over the proceeds. Note that in general, you must provide

your check within 60 days of the date you received the distribution (120 days in the case of IRA proceeds involved in a failed first-home purchase). Also, you may only make one 60-day rollover per IRA in any 12-month period.

With Roth rollovers and direct transfers, you will need to track your five-year aging date for each contribution (the date that determines your holding period for tax-free distributions.) The five-year aging date is January 1 of either the year you made your first Roth contribution or the year you converted to a Roth IRA, whichever is earlier.

Account Funding via Direct Transfer

With a direct transfer, both Fidelity accounts involved must be of the same type. For example, if the originating account is a Traditional IRA, the only direct transfer option is another Traditional IRA.

Annual Contributions

If making an annual contribution, indicate which calendar year it is for and write the amount in the correct box below. (If making contributions for both prior and current calendar years, fill in the correct amount for each year.) You can only make a contribution for a prior year between January 1 and April 15 of the current year. Contributions for which no year is indicated will be processed as current-year contributions.

If mailing a prior year contribution, your contribution must be postmarked no later than the tax filing deadline (generally April 15) — even if you are not filing your tax return at that time.

To set up automated annual contributions, complete a *Premiere Select IRA Contributions by Electronic Funds Transfer (EFT)* form.

You may schedule contributions to occur yearly, monthly, or at other intervals, but note that all EFT contributions are treated as current-year contributions.

Account funding via Direct Transfer

- IRA Direct Transfer** Provide account number below to transfer your existing IRA to a *Premiere Select IRA*. Eligible assets will be transferred in kind. Certain assets may not be eligible for transfer and may be liquidated.

| |
|-------------------------|
| Fidelity Account Number |
| |

Annual Contributions

Must be made in cash.

To a Traditional or Roth IRA

| |
|---|
| Contribution for Prior Calendar Year |
| \$ |
| Contribution for Current Calendar Year |
| \$ |

- Check from you** Write your Social Security number and tax-year designation on the check.
- Contribution paid directly from a Fidelity nonretirement account**

| |
|----------------|
| Account Number |
| |

To a SEP-IRA

| |
|---------------------|
| Contribution Amount |
| \$ |

- Check from employer** Your employer must already have established the plan. Note that your employer is legally obligated to provide you with a copy of the plan document and any future amendments to the plan.