

Account Options Change Form

Questions?

(800) 221 5672, Monday through Friday,

8:30 a.m. to 6:30 p.m. Eastern Time

Or visit our web site at:

ABFunds.com

For literature call:

(800) 227 4618

Use this form **ONLY** to make changes to an existing AllianceBernstein account.

To establish a new account, complete and submit the **Mutual Fund Application** or **Traditional/Roth IRA Application**, as applicable. To change a name on the account, complete and submit the **Name Change Authorization Form**.

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, 13th 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.

Please note: Due to Section 326 of the USA Patriot Act, a physical address must be provided if a Post Office Box is the address of record.

3 Distribution Option Changes

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

4 Your Shareholder Options

(Complete only the desired options.)

A Automatic Investment Plans (AIP)—You can make periodic investments into any of the existing AllianceBernstein Funds in one of three ways. First, by a periodic withdrawal (\$50 minimum) directly from an associated bank account and invested into an AllianceBernstein Fund. Second, you can direct the 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 complete and submit additional copies of this form as needed.

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

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

D Bank Information—If you have elected any options that involve transactions between an associated bank account and the fund account, or have elected cash distribution options and would like the payments sent to an associated bank account, please tape a preprinted, voided check for the desired account 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 Medallion Signature Guarantee (MSG) Stamp 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.

5 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 Medallion Signature Guarantee (MSG) Stamp is required for the following:

- Requests submitted by an individual other than the AB shareholder.
- Accounts registered as a trust, corporation or other entity

Continued on next page



Investment Products Offered

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

AllianceBernstein Fund Names and Numbers

| | Fund Numbers/Share Class | |
|--|--------------------------|--------------------------|
| | Initial Sales Charge | Asset-Based Sales Charge |
| | A | C |
| AB Asset Allocation/Multi-Asset Funds | | |
| Emerging Markets Multi-Asset Portfolio | 99 | 300 |
| Wealth Strategies | | |
| AB All Market Total Return Portfolio | 175 | 375 |
| AB Sustainable Thematic Balanced Portfolio | 187 | 387 |
| Tax-Managed Wealth Appreciation Strategy | 192 | 392 |
| Wealth Appreciation Strategy | 151 | 351 |
| AB US Equity Funds | | |
| Core | | |
| AB Relative Value Fund | 094 | 394 |
| Core Opportunities Fund | 102 | 302 |
| Select US Equity Portfolio | 132 | 376 |
| Growth | | |
| AB Sustainable US Thematic Portfolio | 196 | 2427 |
| Concentrated Growth Fund | 033 | 333 |
| Discovery Growth Fund | 044 | 344 |
| Growth Fund | 031 | 331 |
| Large Cap Growth Fund | 078 | 378 |
| Small Cap Growth Fund | 026 | 326 |
| Value | | |
| Discovery Value Fund | 157 | 357 |
| Equity Income Fund | 009 | 309 |
| Value Fund | 153 | 353 |
| AB International/Global Equity Funds | | |
| Core | | |
| AB Sustainable Global Thematic Fund | 082 | 382 |
| Concentrated International Growth Portfolio | 190 | 890 |
| Global Core Equity | 147 | 847 |
| International Strategic Core | 021 | 821 |
| Growth | | |
| Sustainable International Thematic Fund | 112 | 312 |
| Value | | |
| Global Real Estate Investment Portfolio | 110 | 310 |
| International Value Fund | 159 | 359 |
| AB Alternative Funds | | |
| All Market Real Return | 162 | 363 |
| Global Risk Allocation Fund | 096 | 396 |
| Select US Long/Short Portfolio | 130 | 330 |

| | Fund Numbers/Share Class | |
|--|--------------------------|--------------------------|
| | Initial Sales Charge | Asset-Based Sales Charge |
| | A | C |
| AB Fixed Income Funds | | |
| Taxable Bond Funds | | |
| AB High Yield Portfolio | 185 | |
| AB Income Fund | 028 | 827 |
| AB Short Duration Income Portfolio | 183 | 883 |
| AB Sustainable Thematic Credit Portfolio | 194 | |
| Bond Inflation Strategy | 116 | 306 |
| Global Bond Fund | 055 | 355 |
| High Income Fund | 166 | 366 |
| Intermediate Duration Portfolio | 184 | |
| Limited Duration High Income Portfolio | 137 | 393 |
| Short Duration Portfolio | 189 | 389 |
| Total Return Bond Portfolio | 104 | 304 |
| Tax-Exempt Municipal Bond Funds | | |
| High Income Municipal Portfolio | 122 | 323 |
| Muni Income Fund Arizona Portfolio | 114 | 314 |
| Muni Income Fund California Portfolio | 085 | 385 |
| Muni Income Fund Massachusetts Portfolio | 115 | 315 |
| Muni Income Fund Minnesota Portfolio | 061 | 361 |
| Muni Income Fund National Portfolio | 084 | 384 |
| Muni Income Fund New Jersey Portfolio | 069 | 369 |
| Muni Income Fund New York Portfolio | 083 | 383 |
| Muni Income Fund Ohio Portfolio | 080 | 380 |
| Muni Income Fund Pennsylvania Portfolio | 067 | 367 |
| Muni Income Fund Virginia Portfolio | 121 | 321 |
| Tax-Aware Fixed Income Opportunities Portfolio | 107 | 307 |
| Intermediate Municipal Bond Funds | | |
| Intermediate California Muni Portfolio | 143 | 343 |
| Intermediate Diversified Muni Portfolio | 148 | 348 |
| Intermediate New York Muni Portfolio | 141 | 341 |
| Municipal Bond Inflation Strategy | 119 | 320 |
| Cash Management | | |
| AB Government Money Market Portfolio | 178 | 878 |

Please use this form for existing accounts only. If you wish to establish a new account, please complete and submit the **Mutual Fund Application** or **Traditional/Roth IRA Application**, as applicable. Please print all information clearly to avoid processing delays.

Type of Request: This is a request to ADD options to an existing account This is a request to CHANGE options on an existing account

1 Account Changes Please print clearly

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

Owner or Custodian (First Name, MI, Last Name) Daytime Phone Number

Fund Number Account Number

Fund Number Account Number

If you are not the registered account owner, please provide the following information:

I am acting on this account in the following capacity:

- Attorney-in-Fact for _____
- Guardian/Conservator for _____
- Other (please indicate capacity) _____

2 Address Changes

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

Street Address City State ZIP Code

If Non-US, Specify Country Home Phone Number Daytime Phone Number

3 Distribution Option Changes

Please change the Distribution Options on the specified account(s) to the following:

- Reinvest distributions** into the fund account.
- Send the distributions in cash** to the address of record. (Distributions of less than \$25.00 will be automatically reinvested in shares of the Fund. To receive distributions of less than \$25.00 in cash, bank instructions must be associated with this account. Complete Section 4D for direct deposit to the associated bank account. Complete Section 4E for payment to a third party.)
- Direct the distributions to another AllianceBernstein Fund.** Complete the appropriate portion of Section 4A to direct the distributions (dividends and capital gains) to another AllianceBernstein Fund (the \$2,500 minimum investment requirement applies to funds into which distributions are directed).

| | Fund Number | Account Number | Distribution Options (Check one) | | | | | |
|----|---|---|----------------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| | | | Dividends | | | Capital Gains | | |
| 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="checkbox"/> R | <input type="checkbox"/> C | <input type="checkbox"/> D | <input type="checkbox"/> R | <input type="checkbox"/> C | <input type="checkbox"/> D |
| 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="checkbox"/> R | <input type="checkbox"/> C | <input type="checkbox"/> D | <input type="checkbox"/> R | <input type="checkbox"/> C | <input type="checkbox"/> D |
| 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="checkbox"/> R | <input type="checkbox"/> C | <input type="checkbox"/> D | <input type="checkbox"/> R | <input type="checkbox"/> C | <input type="checkbox"/> D |

4 Your Shareholder Options

Note: If you wish to designate a Trusted Contact Person for this account, please complete and submit the **Trusted Contact Person Designation Form**.

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 the accounts. Minimum purchases for accounts that have met the fund minimum requirements is \$50.

- Withdraw from the associated bank account via EFT.** I authorize AllianceBernstein to draw on the specified bank account for investment in the AllianceBernstein fund account(s) as indicated below. (Also complete section 4D to specify the associated bank account 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="checkbox"/> M <input type="checkbox"/> Q <input type="checkbox"/> A | / |
| 2. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | \$ | <input type="checkbox"/> M <input type="checkbox"/> Q <input type="checkbox"/> A | / |
| 3. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | \$ | <input type="checkbox"/> M <input type="checkbox"/> Q <input type="checkbox"/> A | / |

- Direct Distributions.** As indicated in Section 3, I would like the dividends and/or capital gains directed to 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 Shares Monthly.** I authorize AllianceBernstein to transact monthly exchanges, within the same class of shares, between the AllianceBernstein 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) | Day of Exchange (MM/DD) | Amount (\$25 minimum) |
| To: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | | | / \$ |

4 Your Shareholder Options *continued*

B Telephone Transactions Via EFT

These transactions may be requested by visiting our website at ABFunds.com or by calling a Client Services representative at (800) 221 5672 and instructing AllianceBernstein in a recorded conversation to purchase, redeem, or exchange shares for the account(s). Purchase and redemption requests will be processed via electronic funds transfer (EFT) to and from the bank account listed in Section 4D.

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 4D of this application.

Purchases and Redemptions via EFT. I hereby authorize AllianceBernstein to effect the purchase and/or redemption of Fund shares for the specified account(s) 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 selected bank account.

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 5 calendar days after the purchase date.

C Systematic Withdrawal Plans (SWP)

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

I authorize AllianceBernstein to transact periodic redemptions from the specified fund account(s) 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="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="checkbox"/> M <input type="checkbox"/> Q <input type="checkbox"/> A | <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> |

Please send all SWP proceeds to:

- The Address of Record (via check).
- The Payee and address specified in Section 4E (via check). A Medallion Signature Guarantee Stamp (MSG) is required.
- The associated bank account—via EFT (complete Section 4D). 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 an Alliance IRA or other Alliance prototype plan, please complete and submit the **IRA Distribution Form**. You can download a free copy from our website at ABFunds.com, or you may call (800) 227 4618 or your financial advisor.

4 Your Shareholder Options continued

D Bank Information

Note: The specified financial institution must be a US bank.

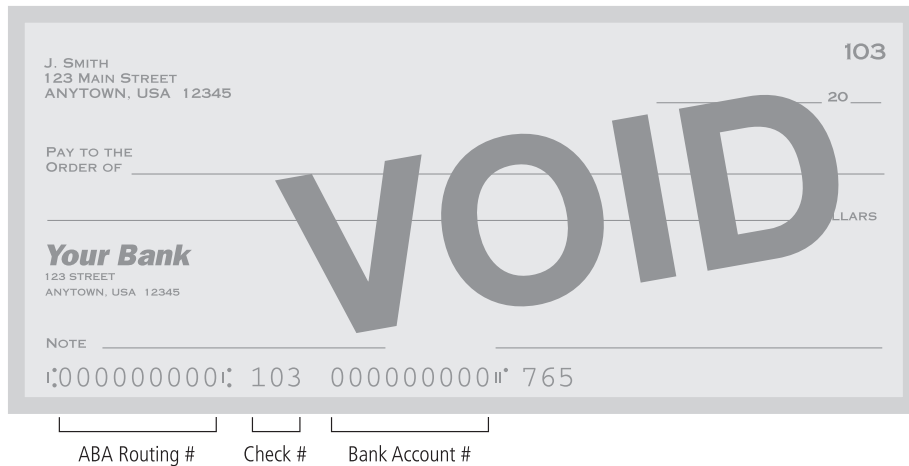
This bank account information will be used for (check all that apply):

Distributions (Section 3) Automatic Investments (Section 4A) Telephone Transactions (Section 4B) Withdrawals (Section 4C)

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

Please Tape a Preprinted Voided Check Here.

The above services cannot be established without a preprinted voided check. If you are using a savings account, rather than a checking account, please attach a preprinted deposit slip. The check or deposit slip provided must be an original (copies cannot be accepted) and 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.



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 and affixing a Medallion Signature Guarantee Stamp (MSG) for each bank account owner.

| | |
|---|-------------------|
| Signature 1 (All bank account owners must sign) | Date (MM/DD/YYYY) |
| X | / / |
| Signature 2 | Date (MM/DD/YYYY) |
| X | / / |

Signer 1 Affix Medallion Signature Guarantee Stamp Below

Signer 2 Affix Medallion Signature Guarantee Stamp Below

A Medallion Signature Guarantee (MSG) stamp for each applicable signature is required. An MSG stamp can be obtained at a commercial bank, savings and loan, credit union, or brokerage firm. A Medallion Signature Guarantee for each applicable signature will be required for authorization from an individual other than the AB shareholder.

A Medallion Signature Guarantee is defined as a guarantee of signature as a warranty, with respect to the signature of an endorser of a security or an originator of an instruction regarding a security that, at the time of signing, guaranteed the signature was genuine; the signer was an appropriate person to sign, or, if the signature is by an agent, the agent had actual authority to act on behalf of the appropriate person; and the signer had legal capacity to sign.

4 Your Shareholder Options continued

E Third Party Payment Details

All signature(s) in Section 5 must have a Medallion Signature Guarantee Stamp (MSG) affixed. This third party payee information will be used for:

- Distributions (Section 3) Systematic Withdrawals (Section 4C)

Name (First Name, MI, Last Name)

Street Address

City

State

ZIP Code

F Reduced Charges (Available for Class A purchases only)

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

- A. Rights of Accumulation.** Please link the Taxpayer 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.

Taxpayer Identification Number or Account Number

Taxpayer Identification Number or Account Number

Taxpayer Identification Number or Account Number

- B. Statement of Intent.** I agree to invest the following amount over a 13-month period to reduce my sales charges. If the full amount indicated is not purchased within 13 months, I understand that an additional sales charge must be paid from my account.

- \$100,000 \$250,000 \$500,000 \$1,000,000

AllianceBernstein Mutual Funds will use the higher of cost or current NAV of the investor's existing investments as well as those of accounts with which it is combined via Rights of Accumulation toward the fulfillment of the Statement of Intent.

5 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 US citizen or US 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 1 (All account owners must sign)

Date (MM/DD/YYYY)

X

/ /

Signature 2

Date (MM/DD/YYYY)

X

/ /

Signer 1 Affix Medallion Signature Guarantee Stamp Below

Signer 2 Affix Medallion Signature Guarantee Stamp Below

A Medallion Signature Guarantee (MSG) stamp for each applicable signature is required. An MSG stamp can be obtained at a commercial bank, savings and loan, credit union, or brokerage firm. A Medallion Signature Guarantee for each applicable signature will be required for any of the following:

- Authorization from an individual other than the AB shareholder
- Third-party redemptions (Section 4E)

A Medallion Signature Guarantee is defined as a guarantee of signature as a warranty, with respect to the signature of an endorser of a security or an originator of an instruction regarding a security that, at the time of signing, guaranteed the signature was genuine; the signer was an appropriate person to sign, or, if the signature is by an agent, the agent had actual authority to act on behalf of the appropriate person; and the signer had legal capacity to sign.

AllianceBernstein Investments, Inc. (ABI) is the distributor of the AllianceBernstein family of mutual funds. ABI is a member of FINRA and is an affiliate of AllianceBernstein L.P., the manager of the funds.

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