

### Application for Trust, Estate, Corporate, Partnership Account

Third-party checks are not accepted. A third-party check is any check that is not made payable on its face to "Neuberger Berman Funds." Money orders, cash, starter and travelers checks are also not acceptable.

Please return your check, application and required documents to:

Regular MailOvernight MailNeuberger Berman FundsNeuberger Berman FundsPO Box 219189430 West 7th Street, Suite 219189Kansas City, MO 64121-9189Kansas City, MO 64105-1407

If you have any questions about completing this Application, please call Neuberger Berman Shareholder Services at 800.877.9700, Monday-Friday, from 9AM to 5PM Eastern Time.

This application can be faxed to 816.218.0478. Please note that we do not accept faxes for applications that require a Medallion Signature Guarantee.

Please type or print clearly in ink.

1 SHAREHOLDER ACCOUNT REGISTRATION				
Please select one of the following:				
TRUST ESTATE				
Name of Trust/Estate		Name of Trust/Estate		
Name(s) of Trustee(s)/Executor/Executrix		Name(s) of Trustee(s)		
Tax Identification Number*		Date of Trust		
Required Document: Copy of trust agreement.				
Check appropriate box				
S-Corp	Foundation			
LP	Partnership			
C-Corp	LLP			
LLC – Enter the tax classification Other				
(C=C Corp, S=S Corp, P=Partnership)				
Name of Corporation, Partnership or Entity		Tax Identification Number*		
Name of Officers or Partners				
Required Document: Copy of certified articles of incorporation or a business license or copy of the partnership agreement.				
GOVERNMENT ENTITIES:				
Check appropriate box				
Public Institution	Public Charity			
U.S. Government/Federal State or Local Government				
Name of Entity		Tax Identification Number*		
Name of Officers				

<sup>\*</sup>Any application without a Taxpayer Identification Number or Social Security Number (or notation that it is "applied for") will be returned.

# 2 ACCOUNT ADDRESS

Street or P.O. Box		Suite/Apt. Number
If the above address is a P.O. Box you must also provide a street address below. We are required by various federal rules to obtain your street address.		
City	State	Zip Code
Daytime Phone	Cell/Evening Phone	Email (Optional)
I am a citizen of U.S. Other	(Please Specify Other)**	Foreign Identification Number

Required Documents for non-U.S. Citizens: For identification information, foreign customers must provide a copy of a government-issued document that includes a government-issued identification number and the country of issuance, such as a passport, an alien identification card, or other government-issued photo identification.

# 3 AUTHORIZED SIGNER(S) (An authorized signer includes Trustees, Executors and Officers)

We are required to obtain the following information for the authorized signer(s) of the account. Please attach an additional sheet if necessary.

First Name	Middle	Last	
Social Security Number*		Date of Birth	
Street or P.O. Box		Suite/Apt. Number	
If the above address is a P.O. Box you must also provide a stree	et address below. We are required by various federal rul	es to obtain your street address.	
City	State	Zip Code	
First Name	Middle	Last	
Social Security Number*		Date of Birth	
Street or P.O. Box		Suite/Apt. Number	
If the above address is a P.O. Box you must also provide a street address below. We are required by various federal rules to obtain your street address.			
City	State	Zip Code	

<sup>\*</sup>Any application without a Taxpayer Identification Number or Social Security Number (or notation that it is "applied for") will be returned.

<sup>\*\*</sup>Please visit www.nb.com to obtain a W-8BEN Form. If a W-8BEN Form is not on file, non-U.S. citizens will also be subject to backup withholding.

4 DIVIDEND AND DISTRIBUTION OPTIONS				
If you do not check any of the boxes below, all income dividends and capital gain distributions will automatically be reinvested in shares.				
Dividends:				
Reinvest				
Send dividends via check to the address of record				
Send dividends via ACH to bank account on file (If no bank account on	file, please complete Section 6)			
Invest dividends in Neuberger Berman fund name and account number liste	ed below*			
Account Number		Fund		
Capital Gain Distributions:				
Reinvest				
Send distributions via check to the address of record				
Send distributions via ACH to bank account on file (If no bank account o	on file, please complete Section 6)			
Invest distributions in Neuberger Berman fund name and account number l	isted below*			
Account Number		Fund		
*Note: Accounts registered differently require a Medallion Signature	Guarantee.			
5				
5 FUND(S) SELECTION	D	Land Brown		
(You may make one check, payable in the total amount shown below, to "Neuber Equity Funds: \$1,000 minimum initial investment per fund Mone	_	eck to Application.) 100 minimum initial investment per fund		
Equity Fullus: \$1,000 minimum initial invesament per fullu	ey warket and meome runus. \$2,0			
Fund		Amount (\$)		
Fund		Amount (\$)		
Fund		Amount (\$)		
Please read the prospectus for information on funds that are closed	to investors.	Total (\$)		
6 AUTOMATIC TRANSACTIONS BETWEEN YOUR BANK A	AND NEUBERGER BERMAN I	FUND ACCOUNTS		
(Optional) You may use your bank account to make purchases of Fund shares. You may also send the proceeds from redemptions or distributions of Fund shares to your bank account. (See note below.)				
Please indicate the following information about the bank account you wish to use:				
	se:			

Account Number Type of Account (Savings or Checking)

Name(s) on Account

Address and Branch of Bank

Note: For the purpose of establishing bank transactions, in addition to your investment check, please attach a voided, unsigned check to this Application. (We cannot accept money market fund or starter checks.) For transactions to and from a savings bank account, please attach a letter on your financial institution's letterhead with the information listed in Box 6.

Note: A Medallion Signature Guarantee Stamp is required for all Neuberger Berman account owners and any bank account owners that differ in any way from the Neuberger Berman account owner(s).

AUTOMATIC INVESTMENT				
Please withdraw \$ (minimum \$ and invest it in the Fund(s) indicated below:	100 per fund) from my bank account shown above on or abo	out the day of every month		
Fund		Amount (\$)		
Fund		Amount (\$)		
Fund		Amount (\$)		
Fund		Amount (\$)		
Note: If no date is selected, your automatic transaction	tion will occur on or about the tenth day of every n	nonth.		
7 COST BASIS METHOD				
Please choose <b>one</b> cost basis accounting method from the	list of reporting methods listed below by marking an X in the extend in the event the lots you have chosen are not	ne box of your chosen method. If option 6 (SLID) is available. Please consult a tax professional for		
1. First In First Out (FIFO)	5. Loss/Gain Utilization (LGUT)			
2. Last In First Out (LIFO)	6. Specific Lot Identification (SLID)			
3. High Cost First Out (HIFO)	7. Average Cost (ACST)			
4. Low Cost First Out (LOFO)				
Secondary Reporting Method Selection (Only if you selec	t Specific Lot Identification)			
Write selection here				
Wite Selection Here				
8 TELEPHONE EXCHANGES AND REDEM	PTIONS (INCLUDING FUND <i>fone®</i> AND ONI	INF TRANSACTIONS)		
	s and conditions. You will automatically have these servic			
I <b>do not</b> want the telephone/online exchange service.	I <b>do not</b> want the telephone/online redemption service.			
9 SIGNATURES				
By signing this Application, I certify that:				
I have full authority and legal capacity to purchase Fund sh	ares and I believe the Fund investment is suitable for me.			
I have received and read a current prospectus of the Fund in writing or electronically and agree to be bound by its terms.				
The Fund can redeem shares from my account(s) to reimburse the Fund for any loss due to nonpayment or lack of funds.				
I ratify any instructions (whether written, telephonic or electronic) given on this account. I agree that neither the Fund nor its agent is responsible for any loss, cost or expense caused by acting upon instructions reasonably believed by it to be genuine and in accordance with the procedures described in the prospectus.				
	n Fund, I acknowledge that I have received and read the cur given and options selected in this Application (except for inv y be exchanged.			
I understand that neither the Fund nor Neuberger Berman	LLC is a bank, and Fund shares are not backed or insured by	the FDIC or guaranteed by any bank.		
effect until revoked by me and, until the Fund or its agent if further agree that neither the Fund nor its agent shall be li-	count, I authorize the bank to make debits from that accoun eceives such notice, I agree that the Fund and its agent sha able if any such transaction is dishonored, regardless of the ake up any resulting deficiency. The automatic purchase opt	Il be fully protected in honoring each transaction. I reason. In the event a draft is dishonored, State Street		
funds mailing costs, which benefits all shareholders. I unde	y of prospectuses and financial reports for all account-holderstand that I can begin receiving my own copies of these does ase note that this policy applies only to regulatory documen	cuments within 30 days by calling or writing Neuberger		

I do not want my prospectuses and financial reports to be householded.

#### IMPORTANT INFORMATION ABOUT NEW ACCOUNTS:

To help the U.S. government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

When you open an account, we will require your name, address, date of birth, and Social Security Number or other identifying number. We may also require other identifying documents. If we cannot verify the information you supply to us or if it is incomplete, we may be required to return your funds or redeem your account.

#### Under penalty of perjury, I also certify that:

- 1. I am a U.S. Citizen or Resident Alien, as I have indicated above.
- 2. The Social Security or Taxpayer Identification Number provided above is correct (or I am waiting for a number to be issued to me).
- 3. I am not subject to backup withholding because:
  - (a) I am exempt from backup withholding.
  - (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding for failure to report all dividend and interest income.
  - (c) I have been notified by the IRS that I am no longer subject to backup withholding.

#### (Please cross out item 3 if it does not apply to you.)

OF

As I have indicated above, I am a Non-Resident Alien, and the information entered above is correct. If a reduced rate of tax or exemption from tax applies, I have complied with all requirements to qualify for the reduced tax, and I am an exempt foreign person under IRS regulations.

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

#### Account Owner(s) (Sign Below)

In order to protect the security of your account, a Medallion Signature Guarantee is required if the bank account owners differ in any way from the Neuberger Berman account owners.

Signature (Owner, Trustee, Custodian, etc. exactly as it appears in Section 1)	Date
Signature (Joint Owner, Trustee, POA, etc. exactly as it appears in Section 1)	Date

You can obtain a Stamp 2000/Medallion Signature Guarantee from most banks, stockbrokers and dealers, credit unions and other financial institutions. The level of coverage provided by the Medallion Signature Guarantee must cover the dollar amount of the transaction or it may be rejected.

STAMP 2000/MEDALLION SIGNATURE GUARANTEE: (if necessary)
If you need more space, please use an additional blank sheet of paper

#### Bank Account Owner(s) (Sign Below)

All owners of the bank account must sign below and obtain a Medallion Signature Guarantee Stamp.

Bank Account Owner	Date
Bank Account Owner	Date

STAMP 2000/MEDALLION SIGNATURE GUARANTEE: (if necessary)	

#### Please attach your voided unsigned check.

We are unable to establish Bank Transaction Services without it.

Note: We are unable to accept money market fund or starter checks.

### **Trusted Contact Authorization Form**

Please return this Application to:

Regular Mail **Overnight Mail** Neuberger Berman Neuberger Berman 430 West 7th Street, Suite 219189 PO Box 219189

Kansas City, MO 64121-9189 Kansas City, MO 64105-1407

If you have any questions about completing this Application, please call Neuberger Berman Shareholder Services at 800.877.9700, Monday – Friday, from 9AM to 5PM Eastern Time.

This application can be faxed to 816.218.0478.

By my signature below, I/We authorize Neuberger Berman Investment Adviser LLC and its affiliates ("Neuberger Berman") to share my/our nonpublic personal information\* held at Neuberger Berman to the named Trusted Contact Person(s) identified below.

I/We authorize this information to be shared with the Trusted Contact Person(s) in the discretion of Neuberger Berman. This authorization includes, but is not limited to, any of the undersigned client's information regarding investments in financial products or services offered by or through Neuberger Berman or any financial information the undersigned may have provided to Neuberger Berman.

I/We understand that Neuberger Berman may contact the named Trusted Contact Person(s) if there are questions/concerns about my current contact information or health status (i.e., if Neuberger Berman becomes concerned that I might no longer be able to handle my financial affairs) or in the event that Neuberger Berman becomes concerned that I may be a victim of fraud or exploitation.

Neuberger Berman suggests that the named Trusted Contact Person(s) not be someone authorized to transact business on the account, or who is already otherwise able to receive the information described above. Multiple contact persons may be designated by completing additional copies of this form. Note that the Trusted Contact Person(s) is not authorized to make investments decisions or make distributions from your account.

Name of Contact Person			Relationship	
Daytime Phone	Cell/Evening Phone		Email	
Mailing Address	City, State		Zip	
Check here if this Contact Authorization supersedes a pre	vious Contact Authoriz	ation		
Name of Contact Person			Relationship	
Daytime Phone	Cell/Evening Phone		Email	
Mailing Address	City, State		Zip	
Check here if this Contact Authorization supersedes a previous Contact Authorization				
I certify that my Trusted Contact Person(s) is 18 years or older. I cand that I may withdraw this Contact Authorization at any time I and my heirs indemnify and hold harmless Neuberger Berman, any liability in connection with either acting, or failing to act, on	by notifying Neuberger its officers, directors, er	Berman in writing at the address mployees, agents, affiliates, share	ss shown on my account statement. By signing below, eholders, successors, assigns and representatives from	
Client Signature		Client Signature		
Printed Name		Printed Name	Printed Name	
Date		Date		

\*"Nonpublic personal information" includes but is not limited to: financial account information and balances, and as defined in Neuberger Berman's Privacy Policy and under the Securities and Exchange Commission Regulation S-P privacy rules promulgated under Title V of the Gramm-Leach-Bliley Act, or as defined by any other federal or state law, personally identifiable financial

information: (i) provided by a client to Neuberger Berman; (ii) resulting from any services that Neuberger Berman performed for you; or (iii) otherwise obtained by Neuberger Berman. Version 2.010918 FINRA Rule 4512 & 2165



### Certification Regarding Beneficial Owners of Legal Entity Customers

Please return this Application to:

Regular Mail Neuberger Berman Funds PO Box 219189 Kansas City, MO 64121-9189 Overnight Mail Neuberger Berman Funds 430 West 7th Street, Suite 219189 Kansas City, MO 64105-1407

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This application can be faxed to 816.218.0478.

	I regulation requires certain fina eted by the person opening the Legal Entity Type	new account on behalf of a lega		mation about the heneficial
	eted by the person opening the	new account on behalf of a lega		mation about the heneficial
	Legal Entity Type		ai entity.	mation about the beneficial
		L	egal Entity Tax ID	
		I		
ame and Title	Middle	L	ast	
			<b>ber</b> (or passport n	number in the case of non-Unite
eholder): legal entity mu	st provide the following informa	tion for <b>each</b> individual, if any,	who directly or inc	directly, through any contract,
		Social S	ecurity Number	Driver's License <b>or</b> Passport Number & Country of Issuance (Passport required for Non-U.S.
e write "Not A	oplicable.")			
r <b>one</b> individua anaging Memb	al with significant responsibility f ver, General Partner, President, Vi	ce President or Treasurer, or any	ted above, such as other individual w	a Chief Executive Officer, Chief who regularly performs similar
ate of Birth	egal Address			Driver's License <b>or</b> Passport Number & Country of Issuance (Passport required for Non-U.S
ount	, hereby certify, to the bes	st of my knowledge, that the inf	ormation provided	l above is complete and correct.
		Date		
r r r a c	t in the case of t	thin the case of non-United States persons for the cholder): legal entity must provide the following information or otherwise owns 25 percent or more of the case of Birth    Legal Address  Exercise Write "Not Applicable.")  Senior Officer or Senior Manager):  Tone individual with significant responsibility from an aging Member, General Partner, President, Vidin section above may also be listed in this section above may also be listed in this section.  Legal Address  unt    hereby certify, to the best	tin the case of non-United States persons for the following individuals:    Cholder   Comparison   Comparison	legal entity must provide the following information for each individual, if any, who directly or incorron or otherwise owns 25 percent or more of the equity interests of the legal entity listed above:    Social Security Number (For U.S. Persons)

a. Each individual, if any, who owns, directly or indirectly, 25 percent or more of the equity interests of the legal entity customer (e.g., each natural person that owns 25 percent or more of the

b. An individual with significant responsibility for managing the legal entity customer (e.g., a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President or Treasurer). The number of individuals that satisfy this requirement may vary. Under (a), depending on factual circumstances, up to four individuals, but as few as zero, may need to be identified. It is possible that in some circumstances the same individual might be identified under both (a) and (b) (e.g., the President of Acme Corp. also holds 30% equity interest).

\*\* A beneficial owner is defined by the following:

share of a corporation); and

T0083 03/23

Rev. 12/2010

# **FACTS**

# WHAT DOES NEUBERGER BERMAN DO WITH YOUR PERSONAL INFORMATION?

### Why?

Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.

## What?

The types of personal information we collect and share depend on the product or service you have with us. This information can include:

- Social Security number and account balances
- income and transaction history
- credit history and credit scores

When you are *no longer* our customer, we continue to share your information as described in this notice.

## How?

All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons Neuberger Berman chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does Neuberger Berman share?	Can you limit this sharing?
For our everyday business purposes— such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
For our marketing purposes — to offer our products and services to you	Yes	No
For joint marketing with other financial companies	No	We don't share
For our affiliates' everyday business purposes— information about your transactions and experiences	Yes	No
For our affiliates' everyday business purposes – information about your creditworthiness	No	We don't share
For nonaffiliates to market to you	No	We don't share

**Questions?** 

Call 800.223.6448

Who we are	
Who is providing this notice?	Entities within the Neuberger Berman family of companies, mutual funds, and private investment funds.
What we do	
How does Neuberger Berman protect my personal information?	To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.
	We restrict access to customer information to those employees who need to know such information in order to perform their job responsibilities.
How does Neuberger Berman collect my personal information?	We collect your personal information, for example, when you open an account or provide account information
	<ul> <li>seek advice about your investments or give us your income information</li> <li>give us your contact information</li> </ul>
	We also collect your personal information from others, such as credit bureaus, affiliates, or other companies.
Why can't I limit all sharing?	Federal law gives you the right to limit only
	<ul> <li>sharing for affiliates' everyday business purposes—information about your creditworthiness</li> <li>affiliates from using your information to market to you</li> <li>sharing for nonaffiliates to market to you</li> </ul>
	State laws and individual companies may give you additional rights to limit sharing.
Definitions	
Affiliates	Companies related by common ownership or control. They can be financial and nonfinancial companies.
	Our affiliates include companies with a Neuberger Berman name; financial companies, such as investment advisers, broker dealers; mutual funds, and private investment funds.
Nonaffiliates	Companies not related by common ownership or control. They can be financial and nonfinancial companies.
	Nonaffiliates we share with can include companies that perform administrative services on our behalf (such as vendors that provide data processing, transaction processing, and printing services) or other companies such as brokers, dealers, or counterparties in connection with servicing your account.
Joint marketing	A formal agreement between nonaffiliated financial companies that together market financial products or services to you.
	■ Neuberger Berman doesn't jointly market.