

Introduction

Instructions

Please use this form to designate or change the beneficial owner(s) on a John Hancock legal entity account. For the purposes of this form, a legal entity includes a corporation, limited liability company, or other entity that is created by filing of a public document with a secretary of state or similar office, a general or limited partnership, or similar business entity formed in the United States, or a nonprofit organization. Please print in all capital letters and use black ink.

Special considerations

This form should be completed by the person authorized to open or change an account on behalf of a legal entity.

Questions about this form?

☎ 800-225-5291

Contact us:

☎ 800-225-5291

🌐 jhinvestments.com

☑ See the end of this form for return instructions

1. Type of request

Please indicate the purpose of your request by marking the appropriate box below.

- Certify beneficial owner(s) on a new account Add or change a beneficial owner on an existing account

2. Legal entity account information

Entity name _____ Type of legal entity _____

Entity business address _____

City _____ State _____ Zip code _____

Employer identification number (TIN) _____ Phone number _____

3. Fund and account number(s)

If you are updating (an) existing account(s), please indicate the account number(s) below. If more space is needed, attach an additional sheet. If this is a new account, skip to Section 4.

Fund name or number _____ Account number _____

Fund name or number _____ Account number _____

Fund name or number _____ Account number _____

4. Beneficial owner designation (new accounts)

For new accounts, please complete Part A (required) and Part B (if applicable to the legal entity). If you are amending an existing designation, please skip to Section 5.

A. Controlling owner: The individual with significant responsibility for managing the legal entity (e.g., a chief executive officer, chief financial officer, managing member, general partner, president, vice president, or treasurer).

Note: Designation of one controlling owner is required to establish your account. The controlling owner cannot be another entity, and must be a U.S. citizen or U.S. resident.

Name (First) _____ (MI) _____ (Last) _____

Residential address (no business addresses or P.O. boxes, except A.P.O. or F.P.O. boxes) _____

City _____ State _____ Zip code _____

Social Security number (required) _____ Date of birth (MM/DD/YYYY) _____

4. Beneficial owner designation (new accounts) (continued)

B. Equity owner(s): The individual(s), if any, who own(s), directly or indirectly, 25% or more of the equity interests of the legal entity (e.g., each natural person who owns 25% or more of the shares of a corporation). This number may vary depending on the factual circumstances, but may be up to four individuals (but as few as zero). It is possible that the same individual named in Part A will be identified in Part B (e.g., the president of XYZ, Inc., who also holds a 30% equity interest). If no individual meets this definition, please check "Not applicable" below. An equity owner cannot be another entity, and must be a U.S. citizen or U.S. resident.

Not applicable. There are no individuals owning 25% or more of the legal entity.

1. _____
 Name (First) (MI) (Last)

 Residential address (no business addresses or P.O. boxes, except A.P.O. or F.P.O. boxes)

 City State Zip code

 Social Security number (required) Date of birth (MM/DD/YYYY) Percent owned

2. _____
 Name (First) (MI) (Last)

 Residential address (no business addresses or P.O. boxes, except A.P.O. or F.P.O. boxes)

 City State Zip code

 Social Security number (required) Date of birth (MM/DD/YYYY) Percent owned

3. _____
 Name (First) (MI) (Last)

 Residential address (no business addresses or P.O. boxes, except A.P.O. or F.P.O. boxes)

 City State Zip code

 Social Security number (required) Date of birth (MM/DD/YYYY) Percent owned

4. _____
 Name (First) (MI) (Last)

 Residential address (no business addresses or P.O. boxes, except A.P.O. or F.P.O. boxes)

 City State Zip code

 Social Security number (required) Date of birth (MM/DD/YYYY) Percent owned

5. Beneficial owner amendment (existing accounts)

If you would like to amend information on an existing legal entity account, please indicate your request in the space below. If you are adding a new individual, please be sure to identify if he or she is a controlling owner or beneficial owner and include all identifying information, as shown in Section 4. I, the undersigned, hereby request the following:

6. Signature

The undersigned officer/individual certifies that the following items are true:

The officer/individual of the above-named business has the authority, either by the terms of the business bylaws or applicable state law, to own and purchase mutual fund shares. The officer/individual named has sufficient authority to act on behalf of the business.

By signing this certification, the officer/individual verifies that all information contained herein is true and complete. I request that John Hancock make the above changes, and I agree to submit additional information on request if such information, at the discretion of John Hancock, is necessary to implement the changes on this form. I agree to inform the transfer agent, John Hancock Signature Services, Inc., in writing, of any amendments, changes of beneficial owners, or any other event that could alter the information provided above.

SIGN
HERE

Signature of authorized individual

Date signed (MM/DD/YYYY)

PRINT
HERE

Print name of authorized individual

7. Mail

Please enclose and mail to

Regular Mail
John Hancock Signature Services, Inc.
P.O. Box 219909
Kansas City, MO 64121-9909

Express Mail
John Hancock Signature Services, Inc.
430 West 7th Street
Suite 219909
Kansas City, MO 64105-1407



John Hancock Investment Management Distributors LLC ■ Member FINRA, SIPC
200 Berkeley Street ■ Boston, MA 02116 ■ 800-225-5291 ■ jhinvestments.com
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