Redemption Authorization Form

Questions? Or visit our web site at: For literature call:

800.221.5672 www.alliancebernstein.com 800.227.4618

In the event the redemption you are requesting requires a change of ownership for tax reporting purposes, please use the AllianceBernstein Transfer/Redemption Authorization Form. This form should NOT be used for AllianceBernstein sponsored IRA or retirement plans.

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, 4th Floor San Antonio, TX 78230

1. Requestor Information (Please print clearly)

Are you the registered shareholder of the AllianceBernstein account?

- □ Yes (Please proceed to Section 2).
- □ No (Please provide your name and daytime phone number and check the appropriate box indicating the capacity in which you are acting. If not listed, please check "Other" and specify your capacity).

Last Name	First Name	MI	
Daytime Phone Number			
Attorney-in-fact	Executor(trix)	Surviving Tenant	
Custodian	Former Minor	Trustee	
Conservator	Other		

2. AllianceBernstein Current Shareholder Information

Date of Birth (MM/DD/YYYY)	Daytime Phone Number
First Name	MI
Date of Birth (MM/DD/YYYY)	Daytime Phone Number
First Name	МІ
Date of Birth (MM/DD/YYYY)	Daytime Phone Number
	Date of Birth (MM/DD/YYYY) First Name

Investment Products Offered • Are Not FDIC Insured • May Lose Value • Are Not Bank Guaranteed

∕₿ AllianceBernstein

3. Redemption Information¹

List the account(s) from which you would like to take the redemption(s) as well as the amount.

Fund Number	Account Number	Redeem (Check One) (A: All Shares; D: Dollar Amount; S: Sha	res)
1.		A D \$	S
2.		AD \$	S
3.		AD \$	S
4.		AD \$	S
5.		AD \$	S
6.		AD \$	S

Cost Basis Default Depletion Method

The Internal Revenue Service requires mutual funds to track cost basis for shares purchased on or after January 1, 2012 (covered shares). By default, covered shares will be depleted using the cost basis accounting method currently applied to the originating fund/accounts(s). All non-covered shares will be depleted before covered shares in a first-in first-out order, unless specific tax lots² are requested. If the originating fund/account(s) do not use Average Cost, a cost basis method can be specified for this redemption. To request a different depletion method or to identify specific tax lots² for depletion, include instructions in the box below or use a separate sheet.

¹Withdrawal of mutual funds may be subject to a Contingent Deferred Sales Charge fee. See prospectus for details or contact Client Services at 800.221.5672. ²If the originating fund/account use Specific Lot Identification and you do not specity the logs or if the available share amounts for the specified lots do not cover the transfer, a secondary cost basis accounting method will be used. If already existing on the account, the secondary method listed on the originating account will be used for depletion. If no secondary method is already existing, the first-in first-out method will be used.

4. Payment Method

Please note that any certificates representing shares of a fund from which a redemption is being requested must be returned (preferably unsigned) with this form. Please choose one of the following:

 $\hfill\square$ Make check(s) payable to the name and address on the account(s).

Make check(s) payable to a special payee and/or mail to a special address as provided below.			
Last Name	First Name	MI	
Address		Daytime Phone Number	
City	State	ZIP Code	
,			

□ Electronic Funds Transfer (EFT)

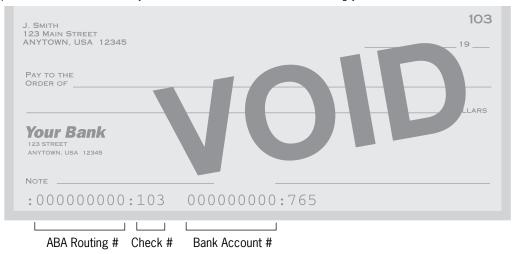
- Existing Bank Account—Check if you want the distribution deposited into a bank account for which you have already established the ability to perform EFT transactions with AllianceBernstein for the account(s) listed in Section 3.
- New Bank Account Information—Check if bank account EFT transaction capability has not been established with AllianceBernstein or if you want the distribution deposited into a bank account different from the bank account already established on the account(s) listed in Section 3. Attach a preprinted voided check/deposit slip.

Bank Information

Your Bank's ABA Routing Number	Your Bank Account Number	Account Type (check one)
		□ Checking Account □ Savings Account

Please Tape a Pre-printed Voided Check Here.

The above services cannot be established without a pre-printed voided check. If you are using a savings account rather than a checking account, please attach a pre-printed deposit slip. The check or deposit slip provided 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 signatures of bank account owners exactly as they appear on bank records. If the registration at the bank differs from that on the AllianceBernstein mutual fund, all owners of the bank account must authorize the draft by signing below.

Signature (All account owners must sign)	Date
X	
Signature	Date
X	
Signature	Date
X	

Please note that the AllianceBernstein account owner or authorized third party must sign in Section 5.

5. Signature

By signing below you certify that you are eligible to engage in the requested transaction(s) and are acting in capacity indicated in Section 1.

Your Signature	Date
X	
Your Signature	Date
Х	

A Medallion Signature Guarantee will be required for any of the following:

- Authorization from an individual other than the AllianceBernstein Shareholder
- Special Payees
- Special mailing instructions
- Redemptions over \$100,000
- Address listed on form has been changed within the past 30 days or is not the same as the address AllianceBernstein has on record.

Affix Medallion Signature Guarantee Stamp Below ³		

³A 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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www.alliancebernstein.com