

Hurricane Harvey Emergency Funds Relief Program Application for Funding

Summary of Plan

Morgan Stanley has established a Hurricane Harvey Emergency Funds Relief Program to provide immediate help to Morgan Stanley employees who have suffered catastrophic loss from Hurricane Harvey and who are in the need of short-term basic necessities (food, clothing, etc). Grants, which will be at a maximum of \$5,000, will be determined entirely based upon the individual needs of the employees as established through the application below.

Regular full-time and part-time employees who have suffered catastrophic loss from Hurricane Harvey are eligible to apply. Catastrophic loss is defined as:

- Extensive damage to a primary home rendering it uninhabitable for the foreseeable future, or
- Extensive loss of basic necessities such as food and clothing whereby an economic hardship has been created

To the extent that the employee is eligible for reimbursement through insurance or otherwise through FEMA and government programs etc, such amounts must be repaid back to the Firm at the time of reimbursement.

Please note that these funds are to be used exclusively to provide for:

- reasonable and necessary personal, family, and living expenses incurred as a result of Hurricane Harvey
- reasonable and necessary expenses incurred for replacement of the contents (e.g. food and clothing) of your personal residence.

We cannot support requests for income replacement payments, such as lost wages, lost business income or unemployment compensation that may have occurred in your family.

Application General Information

1. Date of Application:
2. Employee's Name:
3. Employee MSID:
4. Home address, email and/or working telephone number, as available:
5. List other members of immediate family (include name, age, relationship to employee) living with employee:
6. Do you have direct deposit? ☐ Yes ☐ No
(Funds will be distributed through payroll, via direct deposit. If direct deposit is not set up, please let your HR representative know)

Detailed Need Description

1. Please describe in detail your immediate relief needs (examples: temporary housing, food, clothing etc.) Please only include those short-term needs that are not covered by any insurance. Please be specific about how this grant will benefit you and your family.

2. Please provide details on what aspects of your overall loss are covered by insurance and the expected payout. As possible, please share a copy of your insurance documentation.

Alternative Funding Description

1. Please provide a brief description of any relief funding provided to the family by sources other than Morgan Stanley (including government agencies and/or other charities).

Signature

I understand that any distributions I receive from the Hurricane Harvey Emergency Funds Relief Program are solely for the benefit of me and/or members of my immediate household. I understand that I may not accept distributions from the Program for amounts covered by insurance or any other third-party source of funds (e.g., relief from some other source). I further understand that distributions from the Program are entirely discretionary, and that I have no right to a distribution.

In connection with receipt of any distribution from the Program, I agree:

- to refund to Morgan Stanley any amounts I receive from the Program to the extent they relate to expenses that are covered by insurance or any other third-party source of funds (e.g., relief from some other source), and
- to inform Human Resources in the event that the information provided above materially changes.

I hereby affirm the accuracy and truthfulness of this application.

Signature of Applicant

Date