



Please refer to the Fund's prospectus for minimum investment amounts and subsequent investment requirements.

www.destracapital.com

If you have any questions or need any help filling out the application, please call 833-597-5348.

After you have completed and signed this application,

Please mail to:

Destra Capital
PO Box 541150
Omaha, NE 68154

Overnight Delivery:

Destra Capital
4221 N 203rd St, Suite 100
Elkhorn, NE 68022

Fax 402-963-9094

1. ACCOUNT OWNERSHIP

Please provide complete information for EITHER A, B, C, D or E:

A. INDIVIDUAL OR JOINT (Please check one):

Individual

Individual with Transfer on Death Designation (Section 10 must be completed)

Joint Account (Joint owners have rights of survivorship, unless state laws regarding community property apply)

Joint Tenants with Rights of Survivorship

Joint Tenants in Common

Joint Tenants Community Property

(if no account type is specified, account will be established as joint tenants with rights of survivorship)

Joint Tenants with Rights of Survivorship with Transfer on Death Designation

(Section 10 must be completed)

Name Social Security Number Date of Birth

Joint Owner Social Security Number Date of Birth

Email

Citizenship: U.S. or Resident Alien Other (please specify)

Joint Owner's Relationship to Owner: Spouse Non-spouse (if no election, relationship will be considered Non-Spouse)

B. UNIFORM TRANSFERS TO MINORS ACCOUNT (UTMA)

Custodian's Name Custodian's Social Security Number Custodian's Date of Birth

Minor's Name Minor's Social Security Number Minor's Date of Birth

Minor's State of Residence Email

C. TRUST (Include a copy of the title page, authorized individual page and signature page of the Trust Agreement. Failure to provide this documentation may result in a delay in processing your application.)

Trust or Plan Name _____ Email _____

Trust Date (mo/day/yr) _____ Employer or Trust Taxpayer Identification Number _____

Trustee's (Authorized Signer's) Name (First, Middle Initial, Last) _____

Trustee's Date of Birth (mo/day/yr) _____ Trustee's Social Security Number _____

Co-Trustee's (Authorized Signer's) Name (First, Middle Initial, Last) _____

Co-Trustee's Date of Birth (mo/day/yr) _____ Co-Trustee's Social Security Number _____

D. CORPORATIONS OR OTHER ENTITIES (Include a copy of one of the following documents: registered articles of incorporation, government-issued business license, partnership papers, plan documents or other official documentation that verifies the entity and lists the authorized individuals.

To help the government fight financial crime, Federal regulation requires certain financial institutions, including mutual funds, to obtain, verify, and record information about the beneficial owners of legal entity customers.

Please complete section entitled "Certification Regarding Beneficial Owners of Legal Entity Customers" if the account is to be established on behalf of a legal entity, which includes a corporation, limited liability company, or other entity that is created by a filing of a public document with a Secretary of State or similar office, a general partnership, and any similar business entity formed in the United States or a foreign country. Legal entity does not include sole proprietorships, unincorporated associations, or natural persons opening accounts on their own behalf. Failure to provide this documentation may result in a delay in processing your application.)

C Corporation S Corporation Corporation Partnership Government Entity Other (please specify)

If no classification is provided, per IRS regulations, your account will default to an S Corporation.

Name of Corporation or Other Business Entity	Tax ID Number	Email
Authorized Individual	Social Security Number	Date of Birth
Co-Authorized Individual	Social Security Number	Date of Birth
Co-Authorized Individual	Social Security Number	Date of Birth
Co-Authorized Individual	Social Security Number	Date of Birth

The number of individual(s) required to transact business without the consent of the board or any director, officer, or other person of the Corporation as indicated below (check one):

Any authorized signer may act independently. Two authorized signers are required.
Three authorized signers are required. All authorized signers are required.

E. Estate (Include a copy of a probate document indicating the name of the Executor of the Estate, such as Letters Testamentary or Letters of Administration.)

Name of Estate	Estate Tax ID Number	Email
Executor	Social Security Number	Date of Birth
Co-Executor	Social Security Number	Date of Birth

2. MAILING AND CONTACT INFORMATION

Account Owner or Trustee:

LEGAL ADDRESS (Must be a street address)

Street Address Cell Phone Number

City, State, ZIP Alternate Telephone

Please send mail to the address below. Please provide your primary legal address above, in addition to any mailing address (if different).

Mailing Address City, State, ZIP

Joint Account Owner or Co-Trustee:

LEGAL ADDRESS (Must be a street address)

Street Address Cell Phone Number

City, State, ZIP Alternate Telephone

Please send mail to the address below. Please provide your primary legal address above, in addition to any mailing address (if different).

Mailing Address City, State, ZIP

3. INITIAL INVESTMENT (Please refer to the Fund's prospectus for minimum investment amounts.)

Name	Amount	Share Class		
Destra Flaherty & Crumrine Preferred and Income Fund	\$	Class A	Class C	Class I
Total:	\$			

Make check payable to **Destra Capital**.

If investing by wire: Call **833-597-5348** and indicate the amount of the wire:

\$

If opening an A or C Class account, section 11 must be completed.

Third Party checks are not accepted. Automated Clearing House (ACH) cannot be used for the initial purchase.

4. DIVIDEND AND CAPITAL GAIN DISTRIBUTIONS

Please complete this section to choose a distribution option. If no option is selected, all dividends and capital gains will be reinvested. If Cash is selected, the distribution will be sent by ACH if bank information is included in Section 7, otherwise sent by check to the address of record.

Dividends: Reinvest Cash (ACH) **Capital Gains:** Reinvest Cash (ACH)

8. COST BASIS METHOD

Cost Basis calculation method for all accounts established by this application:

- Average Cost*
- First-In, First-Out (FIFO)** (default method, if not specified)
- Last-In, First-Out (LIFO)**
- Highest-Cost, First-Out (HIFO)**
- Specific Share Identification***

* If your account cost basis method is Average Cost, and you are receiving a gift, you agree to receive that gift at FMV if received at a loss

** If you have any questions, please contact our shareholder services group at 833-597-5348.

*** If Specific Share Identification is selected and no instruction is provided at the time of redemption as to which shares should be redeemed, First-In, First-Out (FIFO) will be used.

9. TELEPHONE PRIVILEGES

Telephone privileges, as described in the prospectus, automatically apply unless this box is checked.

No, I do not want telephone privileges

10. TRANSFER ON DEATH BENEFICIARY DESIGNATION

Note: Complete only if Individual with Transfer on Death Designation or Joint with Transfer on Death Designation was selected in section 1 and if you want to add a Transfer on Death Beneficiary designation to your account.

The following individual(s) or entity(ies) shall be my primary and/or contingent beneficiary(ies). If neither primary nor contingent is indicated, the individual or entity will be deemed to be a primary beneficiary. If more than one primary beneficiary is designated and no distribution percentages are indicated, the beneficiaries will be deemed to own equal share percentages in the account(s). Multiple contingent beneficiaries with no share percentage indicated will also be deemed to share equally.

If any primary beneficiary dies before I do, his or her interest and the interest of his or her heirs shall terminate completely, and the percentage share of any remaining primary beneficiary(ies) shall be increased on a pro rata basis. If no primary beneficiary(ies) survives me, the contingent beneficiary(ies) shall acquire the designated share of my account(s). If any contingent beneficiary dies before I do, his or her interest and the interest of his or her heirs shall terminate completely, and the percentage share of any remaining contingent beneficiary(ies) shall be increased on a pro rata basis.

Additional Information

Account Ownership. The designation of a TOD beneficiary on a registration beneficiary form has no effect of ownership until the owner's death. Beneficiaries have no rights to account information and/or trading authority until the death of all owners and until proper documentation is provided.

NO.	BENEFICIARY NAME	DATE OF BIRTH	RELATIONSHIP	PRIMARY OR CONTINGENT	SHARE %
1				Primary Contingent	
2				Primary Contingent	
3				Primary Contingent	
4				Primary Contingent	

If you wish to add additional beneficiaries, include that with the application on a separate page.

This section should be completed if any marital or community property interest exists in the aforementioned account (s) and the account holder is married. Due to the important tax consequences of giving up one's community property interest, individuals signing this section should consult with a competent tax or legal advisor.

CURRENT MARITAL STATUS

I am not married. I understand that if I become married in the future, I must complete a new designation of beneficiary form.

I am married. I understand that if I choose to designate a primary beneficiary other than my spouse, my spouse must sign below.

CONSENT OF SPOUSE

I am the spouse of the above-named account holder. I acknowledge that I have received a fair and reasonable disclosure of my spouse's property and financial obligations. Due to the important tax consequences of giving up my interest in this account, I have been advised to see a tax professional. No tax or legal advice was given to me by the Fund Company or Ultimus Fund Solutions.

I hereby give the account holder any interest I have in the funds or property deposited in the account referenced herein and consent to the beneficiary designations(s) indicated above. I assume full responsibility for any adverse consequences that may result.

Signature of Spouse

Date

11. DEALER/REGISTERED INVESTMENT ADVISOR INFORMATION

If opening your account through a Broker/Dealer or Registered Investment Advisor, please have them complete this section.

Dealer Name

Representative's Last Name, First Name

DEALER HEAD OFFICE

REPRESENTATIVE'S BRANCH OFFICE

Address

Address

City, State, ZIP

City, State, ZIP

Telephone Number

Rep Telephone Number

Rep ID Number

Email Address

Rep Email Address

Branch ID Number

Branch Telephone Number (if different than Rep Phone Number)

12. UNCLAIMED PROPERTY LAWS

Unclaimed property legislation, which varies by state, generally requires deemed abandoned or ownerless personal property, including your account and any unclaimed monies, to be transferred to the state of your last known address. Common reasons for your assets to be deemed eligible for being reported as unclaimed property include, though are not limited to, the absence of recent account activity, returned mail, obtainment of the RMD age and evidence of death. To preserve your assets and prevent them from being turned over as unclaimed property, you are encouraged to contact us annually and to promptly inform us of any change in your address.

13. TRUSTED CONTACT

Designating a trusted contact is not required and does not authorize the named individual to make trades in your account or to make changes to your account, but it does authorize us to communicate with the trusted contact regarding the account.

By providing the information in this section, I authorize Destra Capital to contact the person listed below and to disclose information about me and the account in the following circumstances: to prevent the presumption of abandonment, to address possible financial exploitation, to confirm the specifics of my current contact information, health status, or the identity of any legal guardian, executor, trustee, or holder of a power of attorney or as otherwise permitted by federal law

Note:

- There can be only be one trusted contact per account.
- Your trusted contact should not be the financial professional on record.

Full Name of Trusted Contact

Mailing Address (Including apartment or P.O. Box number)

City State ZIP

Foreign Routing or Postal Code Country of Residence if outside the U.S.

Cell Phone Number Email Address

Relationship to Account Owner

14. SIGNATURE(S) & CERTIFICATION (REQUIRED)

To help the 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.

What this means for you: When you open an account, we will ask for your name, address, date of birth, social security number/Tax ID number and other information that will allow us to identify you. We may also ask to see other identifying documents. Until you provide the information or documents we need, we may not be able to open an account or effect any additional transactions for you.

We must have signatures to process your Application and to certify your Taxpayer Identification number. IRS regulations require your signature to avoid any backup withholding.

The undersigned represents and warrants that:

- I have full authority and am of legal age to purchase shares of the Fund;
- I have received and read a current prospectus for **Destra Capital** and agree to be bound by the terms contained therein; and
- The information contained on this New Account Application is complete and accurate.

If Fund shares are being purchased on behalf of an Investment Company (as that term is defined under the Investment Company Act of 1940, as amended ("the 1940 Act"), including investment companies that are not required to register under the 1940 Act pursuant to section 3(c)(1) or 3(c)(7) exemptions), I hereby certify that said Investment Company will limit its ownership to 3% or less of the Fund's outstanding shares.

I am designating the above-mentioned individual(s) as the beneficiary(ies) on my account(s). This designation is effective upon receipt by the Fund's transfer agent and will remain in effect until I deliver written notice of change or revocation of beneficiary(ies) to the Fund's transfer agent.

Transfer-on-death (TOD) laws vary by state. Please consult an attorney licensed in your state for detailed advice regarding your TOD registration. If there is a dispute regarding the right of a TOD beneficiary to receive assets pursuant to this TOD registration, your states' laws could affect the dispensation of the assets.

W-9 Certification: Under penalty of perjury:

- (a) I certify that the number shown on this form is my/our current Social Security number(s) or Taxpayer Identification number(s).
- (b) I am not subject to backup withholding because; (1) I am exempt from backup withholding, or (2) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of failure to report all interest or dividends, or (3) the IRS has notified me that I am no longer subject to backup withholding.
- (c) I am a U.S. person (including a resident alien.)
- (d) I am exempt from FATCA reporting.

Certification Instructions. You must cross out item (b) 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.

I, my successors and assigns, do hereby agree to indemnify and hold harmless the Fund, its affiliates, and any directors, officers, employees, or agents of these entities, from and against all claims, liabilities, damages, actions, charges, costs, losses and expenses arising out of or resulting from the transfer upon my death of the balance in the above reference account(s).

Signature of owner (or custodian)

Date

Signature of joint owner (or corporate officer, partner or other)

Date

Trustee (if applicable)

Date

15. CERTIFICATION REGARDING BENEFICIAL OWNERS OF LEGAL ENTITY CUSTOMERS

Note: Complete only if Corporations or Other Entities was selected in Section 1.

In compliance with the Customer Due Diligence requirements issued by the Financial Crimes Enforcement Network (FinCEN), financial institutions must identify and verify the identity of the beneficial owners of all legal entity customers.

This form must be completed by the person opening a new account on behalf of a legal entity customer. For the purposes of this form, a legal entity includes a corporation, limited liability company, or other entity that is created by filing a public document with a Secretary of State or similar office, a general partnership, and any similar business entity formed in the United States or a foreign country. Legal entity does not include sole proprietorships, unincorporated associations, or natural persons opening account on their own behalf.

This form requires you provide the name, address, date of birth and Social Security number (or passport or other similar information, in the case of non-U.S. Persons) for the following individuals (i.e. beneficial owners):

- (i) 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 shares of a corporation); **and**
- (ii) An individual with significant responsibility for managing the legal entity customer (e.g. a Chief Executive Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, or Treasurer).

The number of individuals that satisfy this definition of "beneficial owner" may vary. Under section (i), depending on the factual circumstances, up to four individuals (but as few as zero) may need to be identified. **Regardless of the number of individuals identified in section (i), you must provide the identifying information of one individual under section (ii).** It is possible that in some circumstances the same individual might be identified under both sections (e.g., the President of ACME, Inc. who also holds a 30 percent equity interest). Thus, a completed form will contain the identifying information of at least one individual (under section (ii)), and up to five individuals (i.e., one individual under section (ii) and four 25 percent equity holders under section (i)).

The financial institution may also ask to see a copy of a driver's license or other identifying document for each beneficial owner listed on this form.

CERTIFICATION OF BENEFICIAL OWNER(S) – Persons opening an account on behalf of a legal entity must provide the following information:

a. Name and Title of Natural Person Opening Account:

b. Name, Type (select below), and Address of Legal Entity for Which the Account is Being Opened:

- Corporation Limited Liability Company Limited Partnership General Partnership
- Business Trust Other entity created by filing with a state office

c. The following information for each individual, if any, who, directly or indirectly, through any contract, arrangement, understanding, relationship or otherwise, owns 25 percent or more of the equity interests of the legal entity listed above:

Name	Date of Birth	Address (Residential or Business Street Address)	For U.S. Persons: Social Security Number	For Non-U.S. Persons: Social Security Number, Passport Number and Country of Issuance, or other similar identification number

(If no individual meets this definition, please write, "Not Applicable")

d. The following information for one individual with significant responsibility for managing the legal entity listed above, such as:

- An executive officer or senior manager (e.g., Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, Vice President, Treasurer):
OR
- Any other individual who regularly performs similar functions.

Name	Date of Birth	Address (Residential or Business Street Address)	<i>For U.S. Persons:</i> Social Security Number	<i>For Non-U.S. Persons:</i> Social Security Number, Passport Number and Country of Issuance, or other similar identification number

I, _____ (name of natural person opening account), hereby certify, to the best of my knowledge, that the information provided above is complete and correct.

Signature:

Date:

TO CONTACT US:

By Telephone

Toll-free: **833-597-5348**

Fax: **402-963-9094**

In Writing

Destra Capital

PO Box 541150

Omaha, NE 68154

or

Via Overnight Delivery

4221 N 203rd St, Suite 100

Elkhorn, NE 68022

Internet

www.destracapital.com

Distributed by Destra Capital Investments, LLC

Privacy and Data Protection Policy for Destra INvestment Trust

The SEC adopted Regulation S-P and the privacy rules promulgated under section 504 of the Gramm- Leach- Bliley Act (“GLBA”). Under GLBA, a financial institution must provide its customers with a notice of its privacy policies and practices and must not disclose nonpublic personal information about a consumer to nonaffiliated third parties unless the institution provides certain information to the consumer and the consumer has not elected to opt out of the disclosure. GLBA also requires the SEC to establish appropriate standards for financial institutions to protect customer information. The final rules implement these requirements of GLBA with respect to investment advisers registered with the SEC, brokers, dealers, and investment companies, the financial institutions subject to the SEC’s jurisdiction under GLBA.

Regulation S-P requires registered investment companies to adopt written policies and procedures to protect "nonpublic personal information" about consumers, and to provide customers, no later than the time a customer relationship is established, a clear and conspicuous notice that reflects: (i) the policies and procedures adopted by the Funds to protect nonpublic personal information; (ii) the conditions under which nonpublic personal information about consumers will be disclosed to nonaffiliated third parties; and (iii) the methods available to consumers to prevent the sharing of such information with nonaffiliated third parties.

Regulation S-P applies only non-public personal information about individuals (i.e., natural persons) who obtain financial products and services primarily for personal, family or household purposes. Regulation S-P does not apply to information about companies or about individuals who obtain financial products or services primarily for business, commercial or agricultural purposes.

Consumers and Customers Under Regulation S-P, a “consumer” is an individual who provides nonpublic personal information when seeking to obtain a financial product, even if that financial product is ultimately not obtained. Regulation S-P restricts SEC-regulated companies from sharing with an unaffiliated third party any nonpublic personal information received from a consumer. “Customers” are consumers who have a continuing relationship with any SEC-regulated company. Regulation S-P imposes restrictions on the sharing of a customer’s nonpublic personal information as discussed below.

Regulation S-P contains two important exceptions to the “customer” definition which are applicable to the Fund. First, Regulation S-P does not restrict the sharing of information with respect to institutional clients of a financial institution, nor does it require that a notice of such institution’s Privacy Principles be provided to such clients. Second, and most important to the Fund, Regulation S-P makes clear that if the record owner of shares of a fund is a broker-dealer and not the ultimate shareholder, then that shareholder is a customer of the broker-dealer and not of the Fund.

Nonpublic Personal Information. Regulation S-P defines “nonpublic personal information” to include: (i) information supplied by a consumer in order to obtain a financial product (e.g., information on an application), (ii) information that results from a customer’s transactions (e.g., account balances, securities positions or whether an individual is a customer), and (iii) information obtained in connection with providing a financial product or service (e.g., information from an outside source to verify consumer information or information collected through Internet “cookies”).

Personally identifiable financial information means any information: (i) the consumer provides to a fund to obtain financial products or services, (ii) about the consumer resulting from a transaction between the consumer and a fund, or (iii) that a fund otherwise obtains from the consumer in connection with providing financial products or services to the consumer. Such information may include information provided on an account application, account balances and transaction information, the fact that the consumer is or has been a customer of a fund, information relating to services performed for or transactions entered into on behalf

of customers, and information from consumer reports and any data, list or analyses derived from such nonpublic personal information.

Privacy Notices: The Trust will provide each consumer with an initial notice of the Funds' privacy policy at the time a Prospectus is delivered, or an account is established, whichever is later. The Trust shall also provide each shareholder with a new notice of the Funds' current privacy policy at least annually. This notice may be included in or delivered with a Funds' updated Prospectus or Annual Shareholder Report. The initial notice may be delivered within a reasonable period of time if an unaffiliated broker/dealer or investment adviser establishes a customer relationship between a fund and a consumer without the fund's prior knowledge. If, at any time, the Trust adopts material changes to its privacy policy, the Trust shall provide each shareholder with a revised notice reflecting the new privacy policies. The Funds' CCO is responsible for ensuring that required notices are distributed to consumers and customers. If the Trust maintains a website, the privacy policy and the notice will be posted to the site. The Administrator will ensure that the selected method of posting the Funds' privacy notice, whether it be via the Prospectus or annual or semi-annual report, be implemented as often as is required under the rule.

Opt Out. The Trust must provide a right to "opt out" if the fund reserves the right to disclose nonpublic personal information about the consumer to unaffiliated third parties, unless (i) the unaffiliated third party is performing servicing or marketing services for the fund, (ii) the consumer consents to the disclosure; or (iii) the disclosure is permitted or required by law.

Disposal of Information. A Trust that possesses consumer report information for business purposes are required to properly dispose of the information by taking reasonable measures to protect against unauthorized access to or use of the information in connection with its disposal. "Consumer Report Information" means any record about an individual (e.g., name, social security number, phone number, email address, etc.), whether in paper, electronic or other form, that is a consumer report or is derived from a consumer report. The definition includes a compilation of such records but does not include information that does not identify individuals, such as aggregate information or blind data. "Consumer Report" is defined in the Fair Credit Reporting Act ("FCRA"), but generally means information from a consumer reporting agency bearing on a consumer's creditworthiness, credit standing, reputation, etc., which is used for the purpose of establishing eligibility for credit, insurance or employment or used for other purposes permitted under the FCRA. A fund is not required to ensure perfect destruction of consumer report information. Rather, funds are required to take "reasonable measures" to protect against unauthorized access to or use of the information in connection with its disposal. The rule release states that this means that the SEC expects funding devising disposal methods to consider the sensitivity of the consumer report information, the nature and size of the entity's operations, the costs and benefits of different disposal methods and relevant technological changes. The SEC also notes that "reasonable measures" are very likely to require elements such as the establishment of policies and procedures governing disposal, as well as appropriate employee training.

Security of Client Information: The Funds' officers and employees, as well as the employees of the Adviser, Administrator, Transfer Agent, Custodian, and Distributor (collectively, "Fund Personnel") are prohibited, during or after termination of their employment, from disclosing nonpublic personal information to any person or entity outside the Fund, except under the circumstances described above. Fund Personnel are permitted to disclose nonpublic personal information only to such other Fund Personnel who need to have access to such information to deliver services to the client. All electronic or computer files containing such information shall be password secured and firewall protected from access by unauthorized persons. Any conversations involving nonpublic personal information, if appropriate at all, must be conducted by Fund Personnel in private, and care must be taken to avoid any unauthorized persons overhearing or intercepting such conversations.

Privacy Principles of the Funds

While the Funds may have “consumers” or “customers” as defined under Regulation S-P, the Fund’s Privacy Principles reflect the fact that neither the Funds nor the Adviser currently share any nonpublic personal information that it obtains about those individuals with any unaffiliated third parties, except in connection with the servicing of an individual’s account (e.g., providing information to a transfer agent or third-party administrator).

Regulation S-P requires disclosure of the Funds’ Privacy Principles to certain shareholders of record that are “customers” of the Fund. In situations where disclosure of personal, nonpublic information is to be limited, such as in the case of the Fund, disclosure to customers should include:

- The categories of nonpublic personal information collected;
- The fact that nonpublic personal information will not be disclosed to affiliates or non-affiliated third parties, except as authorized by Regulation S-P; and
- The policies and practices used to protect the confidentiality and security of nonpublic information.

In accordance with the above requirements of Regulation S-P, customers of the Funds must be provided with disclosure in the form attached as Exhibit F at (i) at the time they become “customers” of the Fund; and (ii) at least annually thereafter. To ensure compliance with Regulation S-P, the required disclosure will be made in each Fund’s annual report or annual prospectus.

Privacy Principles of the Trust for Shareholders

The Trust is committed to maintaining the privacy of shareholders and to safeguarding its nonpublic personal information. The following information is provided to help you understand what personal information the Funds’ collect, how we protect that information, and why, in certain cases” we may share information with select other parties.

Generally, the Funds do not receive any nonpublic personal information relating to its shareholders, although certain nonpublic personal information of its shareholders may become available to the Funds. The Funds do not disclose any nonpublic personal information about its shareholders or former shareholders to anyone, except as permitted by law or as necessary in order to service shareholder accounts (for example, to a transfer agent or third-party administrator).

The Funds restrict access to nonpublic personal information about the shareholders to Destra Capital Advisors, LLC employees with legitimate business need for the information. The Funds maintain physical, electronic, and procedural safeguards designed to protect the nonpublic personal information of its shareholders.

Adopted: May 25, 2022