

ENROLLMENT PACKET



Welcome to NY MuniTrust®

Thank you for choosing the NY MuniTrust Cooperative Investment Pool.

We are pleased to offer two competitive short-term, highly liquid investment funds for your operational and excess cash needs. The Pool and its investment funds are professionally managed and serviced by affiliates of BNY Mellon, one of the largest and oldest institutions headquartered in the state of New York. We are excited to partner with you and will deliver a streamlined process that seeks to maximize liquidity while providing competitive rates of return.

The enrollment packet includes the documents needed to set up your NY MuniTrust fund account(s). If you have any questions about the enrollment process or about your NY MuniTrust account(s), please contact BNY Mellon Institutional Services at 1 (833) NYS-MUNI or by email at: LGIPService@bnymellon.com.

Investors should read the NY MuniTrust Information Statement carefully before investing. Investors should consider the investment objectives, risks, charges, and expenses associated with this or any security prior to investing. Investment in NY MuniTrust is not insured or guaranteed by the Federal Deposit Insurance Corporation (FDIC) or any other government agency, and although NY MuniTrust seeks to preserve the value of the investment at a fixed share price, it is possible to lose money by investing in NY MuniTrust.

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Not FDIC Insured. Not Bank Guaranteed. May Lose Value.

For New York Municipal Institutional Investors Only. | Not For Use with Retail Investors.

MIC-289500-2022-07-28



Enrollment Procedures

To join NY MuniTrust[®], please complete the following:

- 1. Read the NY Municipal Trust Cooperation Agreement and Information Statement on the NY MuniTrust website at www.nymunitrust.com.
- 2. Approve, complete and sign the NY MuniTrust Authorizing Resolution Form.
- 3. Complete and sign the NY MuniTrust Local Government Investment Pool (LGIP) New Account Application.
- 4. Email the completed NY MuniTrust Authorizing Resolution Form and the NY MuniTrust Application to BNY Mellon Institutional Services at LGIPService@bnymellon.com.
- 5. Upon receipt, BNY Mellon Institutional Services will provide a secure email confirmation with your new fund account number(s), AdvisorCentral[®] web portal credentials, navigation and trade guides. Note: If you do not receive your account number(s) or Web Portal credentials within 3-5 business days, please check your junk/spam folder before calling BNY Mellon Institutional Services at 1 (833) NYS-MUNI.
- 6. When ready to invest, please visit the NY MuniTrust website for access to the AdvisorCentral web portal to place your initial subscription trade orders for your new fund account(s).
- 7. Trade orders and payment for subscription order(s) must be received by The Bank of New York Mellon by 12:00 P.M. ET. Subscription monies (via Fed wire or ACH) must be sent to:

The Bank of New York Mellon

4400 Computer Drive, Westborough, MA 01581 US

ABA Number: 011001234 DDA Number: 639230

DDA Name: BNY Mellon Investment Servicing (U.S.) Inc. as Agent FBO LGIP-NY Municipal Trust FFC: Name of Fund, Account Number(s) (4-digit fund code, 10-digit account number) and Trade Date

8. Please access the NY MuniTrust website (www.nymunitrust.com) for information about the Municipal Cooperative Pool, fund yields, monthly performance fact sheets, holiday trading schedule, audited annual statements, and access to AdvisorCentral.

For enrollment or servicing inquiries, please contact:

BNY Mellon Institutional Services at 1 (833) NYS-MUNI or email us at <u>LGIPService@bnymellon.com</u>, Monday-Friday from 8:30 A.M. – 5:00 P.M. ET

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Municipal Cooperative Authorizing Resolution Form

WHEREAS, New York General Municipal Law, Article 3-A, empowers municipal corporations (school d services, counties, cities, towns, villages, and fire district agreements for the performance among themselves (or powers, and duties on a cooperative or contract basis;	listricts, boards of cooperative educational cts) to enter into, amend, cancel, and terminate
WHEREAS the portions of its available funds in cooperation with other Municipal Cooperation Agreement dated as of February Orange County and the participants thereto;	municipal corporations pursuant to the
WHEREAS thesafety and liquidity needs of their funds while optimizing	[Municipal Corporation] wishes to satisfy the grates of return;
Now, therefore, it is hereby resolved as follows:	
That [Key Co [Municipal Corporation] is hereby authorized to particip terms of the Agreement.	
Key Contact Signature	Title
Printed Name	Date
*The key contact on an account is the main point of contact for a Municipal elections and all other important communications.	Corporation. They receive voting credentials for Governing Board
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MIC-289503-2022-07-28



NY MuniTrust® Local Government Investment Pool New Account Application

This account application is for use by local government entities. If you need assistance completing this application, please call us toll free at **1 (833) NYS-MUNI**, option 1.

1. Fund Registration (please select eligible Fund(s))						
NY MuniTrust Excelsior Fund (4701): Counties Only Please check box to affirm that County Investment Policy Statement conforms with NY General Municipal Law, Section 11						
Registration Information						
Name of Participant (County)						
Physical Address	City	Zip Code	County			
Mailing Address (if different from above)	City	Zip Code	County			
Tax ID						
NY MuniTrust Empire Fund (470 Registration Information	2):					
Entity Type: County	City/Town/Village 🗌	School District	Fire District			
Other (Please specify)						
Name of Participant (Entity)						
Physical Address	City	Zip Code	County			
Mailing Address (if different from above)	City	Zip Code	County			
Tax ID						

2. Banking Instructions: L ACH	I \square Fed Wire (only for same day transactions)	☐ Both	
Name of Bank	ABA#		
Address of Bank			
Account Name	Account #		
Client Address on Bank Account (if different	than physical mailing address above)		
For Further Credit Account Name	For Further Credit Account #		

3. Authorized Persons and Signers - please read carefully and sign:

By the execution of this account application, the Participant: (i) represents and warrants that the designated Authorized Person(s) listed below has full right, power and authority to make the investment(s) by telephone, in writing or through the AdvisorCentral[®] portal (as designated by the LGIP), as designated authorized persons pursuant to this application; (ii) agrees that each of the above named Funds, BNY Mellon Investment Servicing (US), Inc. (the Transfer Agent), Dreyfus, a division of Mellon Investments Corporation (the Adviser), BNY Mellon Securities Corporation (the Distributor), The Bank of New York Mellon (the Custodian) and any subsidiary or affiliate thereof, and the respective officers, directors, trustees, employees and agents of each of the foregoing, shall not be liable for, and shall be indemnified and held harmless by the Participant from and against, any loss, damage, expense or cost (including but not limited to attorneys' fees) for acting upon any instructions or inquiries believed genuine; (iii) represents and warrants that it is duly authorized to sign this application and to purchase or redeem shares of the named Fund(s) for the account; and (iv) affirms that it has received a current Information Statement of the named Fund(s).

The Participant acknowledges that the NY MuniTrust Local Government Investment Pool is not FDIC-insured. The Fund(s) are not bank deposits, bank obligations or bank guaranteed. They pose investment risks, including the possible loss of principal.

<u>Taxpayer Identification Number Certification:</u> Under the penalties of perjury, the Institution certifies that
[1] Taxpayer Identification Number shown in Section 1 of this application is its correct Taxpayer Identification
Number, [2] it is not subject to backup withholding either because: (a) it is exempt from backup withholding, or
(b) it has not been notified that it is subject to backup withholding as a result of a failure to report all dividends,
or the Internal Revenue Service (IRS) has notified it that it is no longer subject to backup withholding, [3] it is
a U.S. person (including a U.S. resident alien) and [4] the Foreign Account Tax Compliance Act (FATCA) code(s)
entered on this form (if any) indicating that the Institution is exempt from FATCA reporting is (are) correct. If you
are exempt from FATCA reporting (if you are unsure, consult your tax advisor or the IRS), enter your exemption
from FATCA reporting code (if any) here:
NOTE: Strike out item [2] if the Institution has been notified that it is subject to backup withholding by the IRS
and has not received a notice from the IRS advising that backup withholding has been terminated.

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

PLEASE SIGN HERE:

By:	By:
Authorized Key Contact/Board Chairperson/Chief Fiscal O	icer Second Authorized Key Contact/Board Chairperson/Chief Fiscal Officer (if applicable)
Print Name	Print Name
Title Date	Title Date
Date of Birth	Date of Birth
City and State of Residence	City and State of Residence

4. Authorized Person(s) and AdvisorCentral[®] Access

Inquiry	Trader	Signer
Inquiry allows AdvisorCentral access to view account information only.	Trader has AdvisorCentral inquiry and trading access to process, modify or cancel transactions.	Signer has AdvisorCentral inquiry and trading access in addition to authorization to initiate, modify and/or change account information, authorized person(s)/signer(s), taxpayer identification number, dividend options, banking/ACH instructions, process, modify and/or cancel transactions.

☐ Inquiry	□ Trader	☐ Signer			
First Name		Middle Initial		Last Name	Date of Birth
Title			City		State
Phone Number				Email Address (group email addresses are not accepted)	
Specimen Signatur	-e				
4.2. Authoriz	ed Person (please select a	access	type)	
☐ Inquiry	☐ Trader	☐ Signer			
First Name		Middle Initial		Last Name	Date of Birth
Title			City		State
Phone Number				Email Address (group en	nail addresses are not accepted)
Specimen Signatur	re				
4.3. Authorize	ed Person (j	olease select a	access	type)	
☐ Inquiry	☐ Trader	\square Signer			
First Name		Middle Initial		Last Name	Date of Birth
Title			City		State
Phone Number			Email Address (group email addresses are not accepted)		
Specimen Signatur	re				

	Trader	туре)	
First Name	Middle Initial	Last Name	Date of Birth
Title	City		State
Phone Number		Email Address (group emai	I addresses are not accepted)
Specimen Signature			
	t of additional Directors / Cont decision making on behalf of th		sons would be positioned to
Name <u>City and State</u>			
	am : 1		
in the U.S. or any oth	•	sely associated with such	
☐ Yes ☐ N	0		
If yes, please provide	name of official, office held, and o	country	
Name	Office	(Country
Name	Office	(Country
Name	Office	(Country

^{*}A related party can be an Authorized Key Contact, Board Chairperson or Chief Fiscal Officer as listed in Section 3.

6. three+one Balance and Transaction Data Author	rization*
Please check the box below to authorize BNY Mellon Investme information, as outlined below, to three+one, a liquidity service	•
Authorization to send balance and transaction data to three and agrees to allow the transmission of the aggregated balance account statement, to be sent via secure file transfer protocol or periodic data and liquidity analyses. three+one will comply laws regarding data collection, use, transfer, storage, protection	ce and transaction data, identical to that of a monthly I (SFTP) to three+one to facilitate monthly, quarterly, with privacy and security obligations under applicable
*If you are not currently a three+one customer and are interested in their ser	rvices, please call: 1 (585) 484-0311.
Please provide your three+one client code:	
7. Additional Accounts to be Established	
FBO Sub-Account Name(s)*: (To be completed by Participant – select appropriate Fund	(s))
	NY MuniTrust Excelsior Fund (4701)NY MuniTrust Empire Fund (4702)
	NY MuniTrust Excelsior Fund (4701) NY MuniTrust Empire Fund (4702)
	NY MuniTrust Excelsior Fund (4701)NY MuniTrust Empire Fund (4702)
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	NY MuniTrust Excelsior Fund (4701) NY MuniTrust Empire Fund (4702)
	NY MuniTrust Excelsior Fund (4701) NY MuniTrust Empire Fund (4702)

□ NY MuniTrust Excelsior Fund (4701)□ NY MuniTrust Empire Fund (4702)

^{*}Participant name and additional sub-account name must be limited to 35 characters. Additional sub-accounts will utilize the information completed in sections 1 through 6.

Customer Identification Program Notice Important Information About Procedures for Opening a New Account

USA PATRIOT Act, Bank Secrecy Act, and Anti-Money Laundering

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 individual or entity that opens an account. What this means for you: When you open an account, we will ask for information that will allow us to identify you. Until you provide the information or documents requested, we may not be able to open an account or effect any additional transactions for you.

Unlawful Internet Gambling Enforcement Act ("Act") Notice: Transactions associated with unlawful internet gambling are prohibited. Specifically, the Act "prohibits any person engaged in the business of betting or wagering (as defined in the Act) from knowingly accepting payments in connection with the participation of another person in unlawful internet gambling." LGIP Participants must not initiate or receive wire transfers, checks, drafts or other debit/credit transactions that are restricted by the Act. For more information, please refer to: https://www.federalreserve.gov/newsevents/pressreleases/files/bcreg20081112a1.pdf.

Escheatment Notice: Your property may be transferred to the appropriate state if no activity occurs in your Fund accounts within the time period specified by law.

If required information is missing, your application may be rejected. If an account is established pending receipt of requested information, it may be restricted to liquidating transactions only and closed if requested information is not received within specified time frames.

Please Note: After your new account is established, a secure email confirmation will be sent from LGIP1Service@bnymellon.com. It will contain your AdvisorCentral portal login credentials, navigation and trading guides. If you do not receive your login credentials within 3-5 business days, please check your junk/spam folder before calling the BNY Mellon Institutional Services Client Service team at 1 (833) NYS-MUNI or by email at LGIPService@bnymellon.com for assistance.

FOR INTERNAL USE BY BNY MELLON INSTITUTIONAL SERVICES ONLY				
Dealer Na	ame	_		
Dealer/Br	ranch Number	_		