

# **Registration Packet**



## **Welcome to NYCLASS**

Thank you for choosing NYCLASS!

This packet contains all the materials necessary to set up your NYCLASS account(s). If you have any questions about the registration process or about your NYCLASS account(s), please do not hesitate to contact us. The NYCLASS Client Service team can be reached any business day from 8:00 a.m. to 5:00 p.m. ET by phone at (855) 804-9980 or by email at <u>clientservices@newyorkclass.org</u>.

NYCLASS is not a bank. An investment in NYCLASS is not insured or guaranteed by the Federal Deposit Insurance Corporation or any other government agency. Although NYCLASS seeks to preserve the value of your investment at \$1.00 per share, it cannot guarantee it will do so. Please read the applicable NYCLASS Information Statements carefully before making an investment decision. Many factors affect performance including changes in market conditions and interest rates and in response to other economic, political, or financial developments. Investment involves risk including the possible loss of principal. No assurance can be given that the performance objectives of a given strategy will be achieved. **Past performance is no guarantee of future results. Any financial and/or investment decision may incur losses.** 



## **Registration Procedures**

#### To join NYCLASS, please complete the following:

- 1. Read the Municipal Cooperation Agreement (located in the Document Center at <u>www.newyorkclass.org</u>).
- 2. Pass the resolution authorizing participation in NYCLASS (page 3).
- 3. Complete the Entity Registration (page 4).
- 4. Complete the Authorized Contacts Form (pages 5/6). NYCLASS recommends having multiple authorized signers to help prevent fraud.
- 5. Complete the Accounts to be Established Form (page 7); you may open as many accounts as you wish.
- 6. Keep the original forms for your records and send the completed packet to the NYCLASS Client Service team by fax (855) 804-9981 or by email <u>clientservices@newyorkclass.org</u>.

#### **Questions? Please contact us; we would love to hear from you:**

NYCLASS Client Service Team T (855) 804-9980 <u>clientservices@newyorkclass.org</u>

Through the NYCLASS website, <u>www.newyorkclass.org</u>, Participants will be regularly informed of important program information, holidays, upcoming Board meetings, Participant events, conferences, and more. Governing Board meetings, which are open to the public, are generally held quarterly and discuss relevant issues to the governance and operations of the NYCLASS program.





## **Municipal Cooperation Resolution**

WHEREAS, New York General Municipal Law, Article 5-G, Section 119-o (Section 119-o) empowers municipal corporations [defined in Article 5-G, Section 119-n to include school districts, boards of cooperative educational services, counties, cities, towns and villages, and districts] to enter into, amend, cancel, and terminate agreements for the performance among themselves (or one for the other) of their respective functions, powers, and duties on a cooperative or contract basis;

WHEREAS theEntity Name	wishes to invest portions of its available
investment funds in cooperation with other corporations	and/or districts pursuant to the NYCLASS Municipal
Cooperation Agreement Amended and Restated as of Au	gust 1, 2023;
WHEREAS the Entity Name	wishes to satisfy the safety and liquidity
needs of their funds;	
Now, therefore, it is hereby resolved as follows: That, Contact Name	of
	ized to participate in the NYCLASS program under
Entity Name	
the terms of the NYCLASS Municipal Cooperation Agreem	nent Amended and Restated as of August 1, 2023.
Contact Signature Printed Name	Title Date



### **Fund Registration**

Entity Informatio	tion ticipant)			
Entity Name (Parti	cipant)			
Entity Type:	City/Town/Village	County	School District	Fire District
	Other (Specify)			
Mailing Address				
City		Zip	County	
Physical Address (i	f different than above)			
City		Zip	County	
Tax ID	Fiscal Y	ear End Date (Month/Da	y)	

NYCLASS and its transfer agent and administrator are authorized by the Participant to act on any instructions believed to be genuine for any service authorized on this form. To the extent permitted by law, the Participant agrees that NYCLASS, its transfer agent, and administrator, Public Trust Advisors LLC, and their respective officers, directors, affiliates, representatives, employees and agents (each an "Indemnified Party") will not be liable for any losses, claims, expenses and liabilities (collectively, the "Losses") that result from accepting such instructions, and agrees to indemnify and hold harmless each Indemnified Party from and against any and all Losses arising from or resulting from such reliance on, or acceptance of, such instructions. Withdrawal proceeds can be sent only to the bank(s) indicated below unless otherwise amended in the NYCLASS Online Transaction Portal. Each Participant is responsible for notifying NYCLASS of any changes to its account(s).

Wires will be distributed every hour with the final distribution ending at 12:00 p.m. ET; distribution times are subject to change as needed by the NYCLASS Administrator. Additionally, NYCLASS must be notified of any contributions by 12:00 p.m. ET to receive same day credit. **If funds are not received by 5:00 p.m. ET, contribution orders will be voided.** 

#### **Banking Information**

Bank Name			Bank Routing Number (ABA)
Account Title			Account Number
Bank Contact*			Contact's Phone Number
Wire	ACH	Both	
Additional Banking	g Information (Op	tional)	
Bank Name			Bank Routing Number (ABA)
Account Title			Account Number
Bank Contact*			Contact's Phone Number
Wire	ACH	Both	

\*If there will only be one Authorized Signer on the NYCLASS account, bank contact must be provided to verify bank account information

T (855) 804-9980 F (855) 804-9981



### **Authorized Contacts<sup>1</sup>**

Authorized Signers Can	Read-Only Users Can
Approve changes to the Investor Profile	Receive account updates
Update banking/contact information	Request "view-only" access to monthly statements and
Process transactions	transaction confirmations
Receive account updates	View banking/contact information

#### Key Contact<sup>2</sup> and Authorized Signer

Print First and Last Name	Title		
Signature Required	Phone (Required) <sup>3</sup>	Extension	
Email (Required)	Moblie <sup>3</sup>		

## Additional Contact (Optional) Note - NYCLASS strongly advises each participant to have multiple authorized signers to help prevent fraud

Title

Mobile<sup>3</sup>

Phone (Required)<sup>3</sup>

Print Fir	st and	Last	Name
-----------	--------	------	------

(Signature Required if Authorized Signer)

Email (Required)

Permissions (check only one)

Authorized Signer to Move Funds

Read-Only Access

Read-Only Access

#### Additional Contact (Optional)

Print First and Last Name	Title		
(Signature Required if Authorized Signer)	Phone (Required) <sup>3</sup>	Extension	
Email (Required)	Mobile <sup>3</sup>		
Permissions (check only one) Authorized Signer to Move Funds			

<sup>1</sup> All contacts listed on an account will receive email notifications when transaction confirmation documents and monthly statements are available for download in the online portal.

<sup>2</sup> The key contact on an account is the main point of contact for an entity. They receive voting credentials for Governing Board elections and all other important communications.

<sup>3</sup> A phone number that you can be reached at directly is required to receive the multi-factor authentication code via phone call. Mobile numbers can receive the code via phone call or text.

Extension



### Authorized Contacts (cont.)<sup>1</sup>

#### **Additional Contact (Optional)**

Print First and Last Name	Title		
(Signature Required if Authorized Signer)	Phone (Required) <sup>2</sup>	Extension	
Email (Required)	Mobile <sup>2</sup>		
Permissions (check only one)			
Authorized Signer to Move Funds			
Read-Only Access			
Additional Contact (Optional)			
Print First and Last Name	Title		
(Signature Required if Authorized Signer)	Phone (Required) <sup>2</sup>	Extension	
Email (Required)	Mobile <sup>2</sup>		
Permissions (check only one)			
Authorized Signer to Move Funds			
Read-Only Access			
Additional Contact (Optional)			
Print First and Last Name	Title		
(Signature Required if Authorized Signer)	Phone (Required) <sup>2</sup>	Extension	
Email (Required)	Mobile <sup>2</sup>		
Permissions (check only one)			
Authorized Signer to Move Funds			
Read-Only Access			

<sup>1</sup> All contacts listed on an account will receive email notifications when transaction confirmation documents and monthly statements are available for download in the online portal.

<sup>2</sup> A phone number that you can be reached at directly is required to receive the multi-factor authentication code via phone call. Mobile numbers can receive the code via phone call or text.

T (855) 804-9980 F (855) 804-9981



### Accounts to be Established

Entity Name:\_

Desired Subaccount Name(s)\* i.e. General Fund, etc.:

(To be completed by Participant, at least one Subaccount is required)

\*Name must be limited to 35 characters

Once your NYCLASS account has been established, you will receive a confirmation email with your login credentials from <u>no-reply@newyorkclass.org</u>. If you do not receive your login credentials within 48 business hours of submission, please first check your junk or spam folder before calling the NYCLASS Client Service team.



## **Dual Authorization Form (<u>Optional</u>)**

Entity Name:

Please utilize this form to request dual authorization capabilities on your NYCLASS account. Dual authorization ensures that any transaction entered via the NYCLASS online transaction portal requires approval from a second Authorized Signer in order to be processed (internal transfers between subaccounts do not require dual authorization). **Note**: All Authorized Signers listed on the account can enter transactions and approve them (not just the users below).

### **Request to Add Dual Authorization**

Dual authorization is hereby approved for \_\_\_\_\_\_\_ by the Authorized Signer below. By approving dual authorization, the Authorized Signer acknowledges that transactions not approved by the 12:00 p.m. ET cutoff will not be processed. Please ensure transactions are entered in a timely manner and that other authorized signers are available to approve the transactions for processing.

Authorized Signer's Signature

Date

Printed Name

Title