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.

- **Individuals** - When an individual opens an account, the following information is required: full legal name, residential address, date of birth and Social Security Number. We may also request other information that will allow us to identify the individual and we may need to obtain a driver's license, passport, or other identifying documents.

- **Legal Entities** - When corporations, partnerships, trusts, and other legal entities open an account, the following information is required: full legal name, physical address, and Tax Identification Number. We may also request other information that will allow us to identify the entity and may need to obtain certified articles of incorporation, partnership agreement, trust instrument, or other identifying documents. The Financial Crimes Enforcement Network’s (“FinCEN”) Customer Due Diligence Requirements for Financial Institutions (“CDD Rules”) require financial institutions to identify and verify the identity of beneficial owners of legal entity customers, subject to certain exclusions and exemptions.

**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.” Shareholders of BNY Mellon mutual funds (“Funds”) 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 state 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.

**Payment Instructions**

Please mail application and payment to: BNY Mellon Shareholder Services
P.O. Box 9879
Providence, RI 02940-8079

Please send registered, certified and overnight mail to: BNY Mellon Shareholder Services
4400 Computer Drive
Westborough, MA 01581

This application must be filed with BNY Mellon Transfer, Inc. (“Transfer Agent”) before any redemption can be honored. You will receive a confirmation showing your Fund account number, dollar amount received, shares purchased and price paid per share.
You may use this application to open any one of the following account types.

Please note the type of documentation required and, if completing this application electronically, all items except the signature may be filled in electronically. Signatures must be hand-written and the signed application should be sent to the address found on page 1.

All information should be printed clearly.

NOTE: If any party to the application is not a U.S. citizen or resident alien, he/she will also need to provide a copy of his/her passport, alien ID card, or other government issued document with residence and photograph.

- **Corporation** — Complete sections 1 through 10A, B & D (if applicable). Obtain Medallion Signature Guarantee or Corporate Seal.

  Account is established for all types of incorporated entities, whether for profit or non-profit.

  You will need to provide
  - A copy of certified articles of incorporation
  - A copy of a certificate of good standing from the state of incorporation, issued within the last six months
  - A copy of corporate resolution identifying the authorized signers, certified within the last 60 days by an authorized officer

- **Partnership or Joint Venture** — Complete sections 1 through 10A, C & D. Obtain Medallion Signature Guarantee.

  You will need to provide
  - A copy of general partnership/joint venture agreement. If documentation does not identify the current authorized signers, provide a resolution certified within the last 60 days by an authorized member.

If your account does not fall into one of these categories, please call us at **1-800-645-6561**.
1. How would you like to register your account?

- Corporation – please complete sections 1 through 10A, B & D (if applicable)
- Partnership or Joint Venture – please complete sections 1 through 10A, C & D
- Other (please specify) – please complete sections 1 through 10A, C & D (if applicable)

You must provide all documentation specified in the instructions on page 2 for each of these registration types.

Call 1-800-645-6561 and ask to speak to a representative.

Please note: If you are a non-publicly traded Corporation (S or C), Limited Liability Corporation, Partnership (limited or general), Non-Profit Organization (provide Control Prong only), Investment Club or Religious Organization, you must complete Section 10D as applicable.

Full Legal Name ____________________________

Taxpayer ID Number ____________________________

Tax Residence  □ U.S.  □ Other (please specify) ____________

Corporate Accounts: □ S-Corporation □ C-Corporation

If the status of the corporation is not indicated, we will default your account to S-Corporation.

2. Please provide your address information.

<table>
<thead>
<tr>
<th>Mailing Address</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Address (if different from mailing address) (no P.O. boxes)</td>
<td>City</td>
<td>State</td>
<td>Zip</td>
</tr>
</tbody>
</table>

E-Mail Address ____________________________

3. Please provide additional required information.

A. Corporation, Partnership or Other Entity

State/Country of Organization ________________

If publicly traded: Ticker symbol ____________ Exchange ____________

Line of Business ______________________________________________________________________________________

Casino or Gaming Establishment: □ Yes □ No
**Authorized Person (must be same name as provided in 10A)**
*Administrator/Corporate Signer, etc.*

<table>
<thead>
<tr>
<th>(Full Legal Name)</th>
<th>First Name</th>
<th>Initial</th>
<th>Last Name</th>
<th>Social Security Number</th>
<th>Date of Birth</th>
</tr>
</thead>
</table>

**Title**

<table>
<thead>
<tr>
<th>Permanent Residential Address (no P.O. boxes)</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
</tr>
</thead>
</table>

**Phone Number Evening**

**Phone Number Daytime**

**Additional Authorized Person (must be same name as provided in 10A)**
*Administrator/Corporate Signer, etc.*

<table>
<thead>
<tr>
<th>(Full Legal Name)</th>
<th>First Name</th>
<th>Initial</th>
<th>Last Name</th>
<th>Social Security Number</th>
<th>Date of Birth</th>
</tr>
</thead>
</table>

**Title**

<table>
<thead>
<tr>
<th>Permanent Residential Address (no P.O. boxes)</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
</tr>
</thead>
</table>

**Phone Number Evening**

**Phone Number Daytime**

**B. Political/Military Officials**

Please indicate if any account owner or related party* is either a senior military, government or political official in the U.S. or any other country or jurisdiction, or is closely associated with such official or an immediate family member of such official (including spouse, parents, siblings, children, and in-laws):

- [ ] Yes
  - [ ] No

If Yes, please provide name of official, office held, and country ________________________________

* A related party includes a custodian, trustee, or beneficiary, or any principal shareholder, beneficial owner, partner or authorized person listed in sections 3A and 10A.
4. Please indicate the Fund(s) for your investment.

Write the entire name of the Fund(s) and indicate the share class you are selecting (if applicable) and the dollar amount of your investment. (Refer to Prospectus for minimum initial investment).

<table>
<thead>
<tr>
<th>FUND NAME(S)</th>
<th>CLASS OF SHARES (see Prospectus)</th>
<th>One of the following: CUSIP, NASDAQ Symbol OR Fund Code</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>$</td>
</tr>
</tbody>
</table>

Make check payable to The BNY Mellon Family of Funds.

**Dividend and capital gains distribution options**

Check one box only. If no box is checked, all dividends and capital gains will be reinvested.

- [ ] Reinvest all dividends and capital gains.
- [ ] Pay all dividends and capital gains by check.
- [ ] Pay all dividends by check and reinvest all capital gains.
- [ ] Pay all dividends by ACH (Electronic Transfer) and reinvest all capital gains. (Please attach a voided check in section 8 from the bank account to be credited.)
- [ ] Pay all dividends and capital gains by ACH. (Please attach a voided check in section 8 from the bank account to be credited.)

**OPTIONAL** - If you would like dividend and/or capital gains distribution checks to be payable to a person or address other than as registered in Sections 1 and 2 of this form, please indicate here the person or address to which you would like your distributions to be paid.

(Full Legal Name) First Name   Initial   Last Name

Mailing Address

Physical Address (if different from mailing address)(no P.O. Boxes)

City   State   Zip Code

If you complete this section, your application must be Medallion Signature Guaranteed.
5. Cost Basis Method Election

Note – This election will not be applied to money market fund accounts. If you are opening a money market fund account and at a later date process an exchange to open a fluctuating NAV fund account, you should make your cost basis selection at that time.

Federal regulations require that we report to the IRS on Tax Form 1099-B the cost basis information on mutual fund shares purchased on or after January 1, 2012 (covered shares), and redeemed on or after that date.

Please choose one of the cost basis reporting methods listed below for your account(s). If no method is selected, the Fund(s) will report cost basis using Average Cost. Specific Lot Identification is also a cost basis method option and is offered at the time of your redemption or exchange transaction.

☐ First In, First Out (FIFO)
☐ Last In, First Out (LIFO)
☐ High Cost, First Out (HIFO)
☐ Low Cost, First Out (LOFO)
☐ Average Cost

Please consult your tax professional to determine which cost basis method is best for your personal tax situation.

Changing your cost basis method: If the cost basis method for your account(s) is Average Cost, you may retroactively change your cost basis method only before the date of the first redemption or transfer of covered shares. You may change your cost basis method for future purchases at any time. Changes to or from the Average Cost method must be made in writing or via bnymellonim.com/us. Changes to or from all other methods may be made in writing, via bnymellonim.com/us or by telephone.

SHAREHOLDER PRIVILEGES (Refer to the Fund Prospectus to determine availability and for additional terms.)

6. Would you like Checking Privileges?

☐ Checkwriting Privilege. Unless you check “No,” you will automatically receive the checkwriting privilege
7. Would you like Automatic Asset Builder?

Permits you to purchase shares automatically on a regular basis by electronically transferring a specified dollar amount (minimum of $100) from your bank account to your Fund account(s).

☐ Yes, I (we) want Automatic Asset Builder.

You must attach a voided check to this Application in the area designated next to Section 8. Money will be transferred only from the bank account indicated on the voided check.

Fund Name ___________________________________________ Amount $__________

Fund Name ___________________________________________ Amount $__________

Fund Name ___________________________________________ Amount $__________

Fund Name ___________________________________________ Amount $__________

Check the investment cycle that is most convenient for you to have your bank account debited.

☐ Bimonthly (twice a month)  ☐ Monthly  ☐ Quarterly  ☐ Semiannually  ☐ Annually

Starting month ___________________________ Date(s) ___________________________

NOTE: If a date falls on a non-business day, your Fund account will be credited on the next business day.

8. Would you like TeleTransfer and Wire Redemption Privileges?

TeleTransfer

Permits electronic transfer of money between your designated bank account and your Fund account by telephone or online through the bnymellonim.com/us website.

Wire Redemption

Permits proceeds of redemption requests initiated by telephone, letter or online through the bnymellonim.com/us website to be transmitted by Fed wire to your designated Federal Reserve Member Bank.

☐ Yes, I (we) want TeleTransfer and Wire Redemption privileges.

You must attach a voided check to this application in the area designated at the left of this section. (Starter checks not accepted.) Money will be wired or transferred to the bank account indicated on the voided check.

The Funds will require the Transfer Agent to employ reasonable procedures, such as requiring a form of personal identification, to confirm that instructions relayed by telephone and online are genuine and, if it does not follow such procedures, it may be liable for any losses due to unauthorized or fraudulent instructions. Neither a Fund nor its Transfer Agent will be liable for following instructions reasonably believed to be genuine.
The undersigned warrant(s) that I (we) have full authority and, if a natural person, am (are) of legal age to purchase shares pursuant to this application, have received a current Fund Prospectus for the Fund selected for investment and agree to be bound by the terms of such Prospectus, am (are) not a foreign financial institution, and that all representations accompanying this application are true. I agree to obtain the Prospectus for any Fund into which I exchange and to be bound by the terms of such Fund's Prospectus. I (We) agree that the Transfer Agent, the Fund in which I (we) am (are) investing or shall invest, BNY Mellon Investment Adviser, Inc. or any affiliate or their officers, directors, trustees or employees will not be liable for any loss, expense or cost for acting upon any instructions or inquiries believed to be genuine.

I authorize the Transfer Agent and the Fund in which I (we) am (are) investing or shall invest to act on telephone or online instructions from any person representing himself or herself to be me and reasonably believed by the Transfer Agent or Fund (as applicable) to be genuine. I understand that I may be responsible for any fraudulent telephone or online order as long as the Transfer Agent or Fund (as applicable) takes reasonable measures to confirm that instructions are genuine.

I (we) acknowledge that mutual fund shares are not FDIC-insured. They are not bank deposits, bank obligations or bank-guaranteed. They pose investment risks, including the possible loss of principal.

### Taxpayer Identification Number Certification

Under the penalties of perjury, I (we) certify that:

1. The Social Security Number(s) or Taxpayer Identification Number(s) shown in Section 1 of this application is (are) my (our) correct Taxpayer Identification Number(s),
2. I (we) am (are) not subject to backup withholding either because: (a) I (we) am (are) exempt from backup withholding, or (b) I (we) have not been notified that I (we) am (are) subject to backup withholding as a result of a failure to report all dividends, or the Internal Revenue Service (“IRS”) has notified me (us) that I (we) am (are) no longer subject to backup withholding,
3. I (we) am (are) 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 I am 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 you have been notified that you are subject to backup withholding by the IRS and you have not received a notice from the IRS advising you 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:

<table>
<thead>
<tr>
<th>Corporate Officer/Partner, etc.</th>
<th>Second Corporate Officer, Partner, etc.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title/Capacity</td>
<td>Date</td>
</tr>
<tr>
<td>Title/Capacity</td>
<td>Date</td>
</tr>
</tbody>
</table>
If you are a corporation, partnership or other entity, please complete this certification.

NOTE: Retain a copy of this document for your records. Any modification of the information below will require an amendment to this form. This document is in full force and effect until another duly executed form is received by the Transfer Agent.

Name of Registered Owner

Registered Owner is a:

☐ Corporation/Incorporated Association (Complete 10A, B & D if applicable)

☐ Partnership (Complete 10A, C & D)

☐ Other (Complete 10A, C & D if applicable) (please specify) ____________________________________________________________________________________________
(such as Non-Profit Organization, Religious Organization, Investment Club, etc.)

A. The following named persons are currently officers/general partners/other authorized signatories of the Registered Owner, and any _________* of them ("Authorized Person(s)") is/are currently authorized under the applicable governing document to act with full power to sell, assign or transfer securities of the Fund(s) for the Registered Owner and to execute and deliver any instrument necessary to effectuate the authority hereby conferred:

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Specimen Signature

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Specimen Signature

The Transfer Agent may, without inquiry, act only upon the instruction of ANY PERSON(S) purporting to be (an) Authorized Person(s) as named above or in any amendment form last received by the Transfer Agent. Unless the Registered Owner has elected not to have TeleTransfer or Wire Redemption privileges, the Transfer Agent may, without inquiry, act only upon the instruction of ANY ONE Authorized Person placing a request to sell, assign or transfer securities by telephone or online through the bnymellonim.com/us website pursuant to any such applicable privileges, regardless of any number set forth above. The Transfer Agent and the Fund shall not be liable for any claims, expenses (including legal fee(s)) or losses resulting from the Transfer Agent having acted upon any instruction reasonably believed to be genuine.

*Insert a number. Unless otherwise indicated, the Transfer Agent may honor instructions of any one of the persons named above.
10. CERTIFICATIONS (cont’d)

B. FOR CORPORATIONS AND INCORPORATED ASSOCIATIONS ONLY.

NOTE: Either Medallion Signature Guarantee** or seal is required.

I, ____________________________________________________________________, Secretary of the above-named Registered Owner, do hereby certify that at a meeting on ____________________________________________________________________ at which a quorum was present throughout, the Board of Directors of the corporation/the officers of the association duly adopted a resolution, which is in full force and effect and in accordance with the Registered Owner’s charter and by-laws, which resolution did the following: (1) empowered the above-named Authorized Person(s) to effect securities transactions for the Registered Owner on the terms described above; (2) authorized the Secretary to certify, from time to time, the names and titles of the Authorized Persons of the Registered Owner and to notify the Transfer Agent when changes to Authorized Persons occur; and (3) authorized the Secretary to certify that such a resolution has been duly adopted and will remain in full force and effect until the Transfer Agent receives a duly executed amendment to the Certification form.

Witness my hand on behalf of the corporation/association this _______ day of _______________ 20____.

_____________________________________________________
Certifying Officer of the Corporation or Incorporated Association

MEDALLION SIGNATURE GUARANTEE OR SEAL

C. FOR ALL OTHER ENTITIES

NOTE: Either Medallion Signature Guarantee** or seal is required.

_________________________________________________________________________________
Certifying Trustee(s)/General Partner(s)/Other(s)

_________________________________________________________________________________
Certifying Trustee(s)/General Partner(s)/Other(s)

MEDALLION SIGNATURE GUARANTEE DATE
IF YOU ARE A CORPORATION, PARTNERSHIP OR OTHER LEGAL ENTITY SUBJECT TO FINCEN CUSTOMER DUE DILIGENCE REQUIREMENTS, PLEASE COMPLETE THE CERTIFICATION BELOW.

D. CERTIFICATION REGARDING BENEFICIAL OWNERS OF LEGAL ENTITIES

I. GENERAL INSTRUCTIONS

What is this certification?

To help the government fight financial crime, federal regulation requires certain financial institutions to obtain, verify, and record information about the beneficial owners of legal entities. Legal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, fraud, and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforcement investigate and prosecute these crimes.

Who has to complete this certification?

This certification must be completed by the person opening a new account with a Fund on behalf of a legal entity. For the purposes of this certification, a legal entity 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, estates, personal trusts or natural persons opening accounts on their own behalf.

What information do I have to provide?

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

(i) Each individual, if any, who owns, directly or indirectly, 10 percent or more of the equity interests of the legal entity customer (e.g., each natural person that owns 10 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 Financial 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 ten individuals (but as few as zero) may need to be identified. Regardless of the number of individuals identified under 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. Thus, a completed certification will contain the identifying information of at least one individual (under section (ii)), and up to eleven individuals (i.e., one individual under section (ii) and ten 10 percent equity holders under section (i)).

We may also ask to see a copy of a driver's license or other identifying document for each beneficial owner listed on this certification.
II. 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 and Address of Legal Entity for Which the Account is Being Opened:

c. The following information for each individual, if any, who, directly or indirectly, through any contract, arrangement, understanding, relationship or otherwise, owns 10 percent or more of the equity interests of the legal entity listed above:

<table>
<thead>
<tr>
<th>% Ownership of Equity Interests</th>
<th>Name</th>
<th>Date of Birth</th>
<th>Address (Residential or Business Street Address)</th>
<th>For U.S. Persons: Social Security Number</th>
<th>For non-U.S. Persons: Passport Number and Country of Issue, or other similar identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. If no individual meets this definition, please write “Not Applicable.”

2. In lieu of a passport number, non-U.S. persons may also provide an alien identification card number, or number and country of issuance of any other government-issued document evidencing nationality or residence and bearing a photograph or similar safeguard.
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, President, Vice President, Treasurer); or
- Any other individual who regularly performs similar functions.

(If appropriate, an individual listed under section (c) above may also be listed in this section (d)).

<table>
<thead>
<tr>
<th>Name/Title</th>
<th>Date of Birth</th>
<th>Address (Residential or Business Street Address)</th>
<th>For U.S. Persons: Social Security Number</th>
<th>For non-U.S. Persons: Passport Number and Country of Issuance, or other similar identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1In lieu of a passport number, non-U.S. persons may also provide an alien identification card number, or number and country of issuance of any other government-issued document evidencing nationality or residence and bearing a photograph or similar safeguard.

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: ___________________________

Legal Entity Identifier ___________________________ (Optional)
Important Information from BNY Mellon Securities Corporation Regarding Your Mutual Fund Account During A Significant Business Disruption

To Our Valued Mutual Fund Shareholders:

At BNY Mellon, we take great pride in the trust that our customers place in us. With that in mind, we want to tell you about our business continuity plan which documents how we will respond to a significant business disruption. Our plan is designed to enable us to promptly resume our business operations while providing you with ways to access your account information during our recovery period.

We maintain a business continuity plan that covers all aspects of the resumption of our business processes in the event of a significant disruption or emergency. Our plan addresses: data back-up and recovery; all mission critical systems; financial and operational assessments; alternative communications with customers, employees, and regulators; alternate physical location of employees; critical supplier and contractor impact; regulatory reporting; and assuring our customers prompt access to their funds and securities. The plan is updated whenever there is a material change to our business, and it is subject to periodic formal reviews, including business risk assessments. Changes to processes, products, or business environments are evaluated, and required modifications to the configuration of our recovery sites (described below) are performed. Current copies of our business continuity plan are maintained by various individuals at our firm.

As part of our business recovery plan, we maintain alternate business resumption sites for our employees that provide us with operational redundancy in the event of an emergency at our primary location. These facilities provide for the relocation of our employees so that we may resume processing operations and trading functions. Each employee's workstation at our relocation sites is equipped with all the software, as well as all the telecommunication equipment, needed for each employee to continue to provide client service. Our alternate sites have centralized faxes and printer rooms where communications are controlled. We also employ telephone rollover technology whereby inbound calls and faxes are re-routed to the appropriate alternate business resumption site.

Whether we are affected by a firm only, single building, business district, citywide or regional disruption, our firm's policy is clear: We will safeguard our employees' lives, make immediate financial and operational assessments, and work to quickly recover and resume operations. In the event of an emergency, our goal is to restore operations and resume transacting business as soon as possible. During the recovery period, you may access your investments electronically using the following options:

- **Call Express voice-activated account access system at 1-800-645-6561**
- **Visit our web site at www.bnymellonim.com/us**

Please note that before you can access your account through www.bnymellonim.com/us, you will need a user ID and password. For account access via Express, you will need your Social Security Number and a personal identification number (PIN). You can create or reset your user ID and password by going on to www.bnymellonim.com/us, or your PIN by calling Express. We urge you to take a moment today to make sure that you are able to access your account through www.bnymellonim.com/us and/or Express. This will help to ensure that you have access to your account in the unlikely event of a business disruption.

Regardless of all the effort put into our business continuity plan, we acknowledge that no plan for disaster recovery is infallible. Every emergency situation poses unique challenges, and the unpredictable nature and severity of disasters make it impossible to predict every scenario that could cause a disruption, thus precluding absolute preparedness in all circumstances. While our business continuity plan is tested periodically, such testing may not be able to replicate actual emergency conditions. **Depending upon the emergency, we cannot guarantee that we will follow our plan's stated course of action, and our business recovery plan is subject to modification without notice as conditions require.** Also, certain situations may arise that affect the securities markets and/or the external service providers upon which we rely, and your transactions or requests for funds could be delayed during such a disruption.

Please be assured that, in the event of a disaster, we will work as quickly as possible to provide you with the access to the excellent customer service that you have come to expect.
DISCLOSURE

BNY Mellon Advisor Services and BNY Mellon Retail Services are divisions of BNY Mellon Securities Corporation (“BNYMSC”), selling a variety of investments, including mutual funds and annuities. Brokerage services are available through BNY Mellon Brokerage Services, also a division of BNYMSC.

All brokerage services and investments are offered solely by BNYMSC and not by any bank including any affiliates of BNYMSC.

It is important for you to know that these investments and brokerage services:

• Are not insured by the FDIC or any other agency of the United States, BNY Mellon, N.A., any affiliate of BNY Mellon, N.A. or any other bank;

• Are not deposits or other obligations of the FDIC or any other agency of the United States, BNY Mellon, N.A., any affiliate of BNY Mellon, N.A. or any other bank;

• Are not endorsed or guaranteed by BNY Mellon, N.A., any affiliate of BNY Mellon, N.A. or any other bank;

• Are subject to investment risks, including possible loss of the principal amount invested; and

• May fluctuate in value, so that they may be worth more or less than when they were purchased

Securities are offered by BNYMSC, a registered broker dealer and FINRA member. Variable annuities are sold through BNYMSC and BNY Mellon Insurance Agency, Inc., a licensed insurance agency. Fixed annuities are sold through BNY Mellon Insurance Agency, Inc. BNYMSC, BNY Mellon Insurance Agency, Inc. and BNY Mellon, N.A. are wholly owned subsidiaries of The Bank of New York Mellon Corporation. BNYMSC is solely liable for its contractual obligations and commitments. BNYMSC is not a bank, and BNY Mellon, N.A. is not a broker dealer.

BNY Mellon Investment Management is one of the world’s leading investment management organizations and one of the top U.S. wealth managers, encompassing BNY Mellon’s affiliated investment management firms, wealth management organization and global distribution companies.