

NYUTMA ACCOUNT SIGNATURE CARD INSTRUCTIONS

Important requirements:

In order to process your application, you must provide one piece of acceptable documentation to verify your identity.

Acceptable documents include:

- An unexpired driver's license, with photo, issued by a state within the United States
- An unexpired non-driver photo identification, issued by a state within the United States
- An unexpired U.S. passport
- An unexpired foreign passport, with photo, that evidences country of issuance, nationality and U.S. residency Visa
- Any unexpired, foreign government-issued form of identification, with photo, evidencing nationality and residence
- United States Armed Forces military identification
- Any unexpired, U.S. government-issued form of identification, with photo, evidencing nationality and residence

If you have any questions regarding the identification requirements or this application, please call us at 800-628-7070.

- SECTION #1** Check the appropriate box to indicate if you are filling out this application to open a new account, or to update existing information. Changes supersede all previous designations.
- SECTION #2** Check the box(es) for the type of product(s) that you are opening or updating. For a new account, leave the "Account Number" spaces blank. The account number(s) will be completed by Bethpage. Check as many boxes that apply. For Certificate terms, please refer to our current rate sheet, or visit lovebethpage.com.
- SECTION #3** Fill in the information of the minor for whom you are the custodian of.
- SECTION #4** The Custodian on the account needs to fill out the appropriate information as listed. Under "Identification Type," list the Identification No. and Place of Issuance from one of the acceptable forms of identification indicated in the box at the top of this instruction page.
- SECTION #5** If you wish to designate a successor custodian, you need to fill in this section completely.
- SECTION #6** The custodian listed in Section #4 needs to read the affirmation and sign in the appropriate box.
- SECTION #7** Do not write in this section. This is for internal use only.

NEW YORK UNIFORM TRANSFERS TO MINORS ACT (“NYUTMA”) ACCOUNT SIGNATURE CARD

IMPORTANT INFORMATION.

A NYUTMA account is a child’s (minor) account, opened by an adult (custodian), for the benefit of the minor until the minor reaches the age of majority and is governed by the New York Uniform Transfer to Minors Act. These funds are an irrevocable monetary gift that the custodian may use for the minor’s benefit, support, maintenance and education. The custodian shall manage and invest these funds with discretion and intelligence as if they were his/her own. The custodian should keep records of transactions and make them available for inspection by, among others, an adult member of the minor’s family, a legal representative or the minor once he/she reaches 14 years of age. It is the custodian’s responsibility to, among other things, transfer the funds to the minor upon the minor reaching the age of majority. For NYUTMA accounts, the minor’s SSN/TIN is used for the Certification of Tax Identification Number (Substitute IRS Form W-9).

1 ACCOUNT DESIGNATION.

For a new account, please indicate if this is a: NYUTMA account Child Performer Trust account
For a change to an existing account, please indicate if this is an/a: Appointment of new Custodian Change of designated Successor Custodian

2 PRODUCT TYPE.

Please indicate the type of account that you are opening or updating. Check all that apply.

Youth Savings Young Adult Savings Money Market Certificate
 Term: _____ Months

ACCOUNT NUMBER(S).

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3 MINOR’S INFORMATION (ACCOUNT OWNER).

| | | | | | | | | |
|----------------------------|--|------------|------|-------|---------------|-----------------------------------|-----------------------------------|---------------------------|
| Member/Taxpayer: Last Name | | First Name | | MI | Date of Birth | | Social Security/Tax ID No. | |
| Home Street Address | | | City | State | Zip Code | Phone No. | | Relationship to Custodian |
| | | | | | | <input type="checkbox"/> Landline | <input type="checkbox"/> Wireless | |

4 CUSTODIAN’S INFORMATION.

| | | | | | | | | |
|---|--|-----------------|------|--------------------|------------|--------------------|----------------------------|---|
| Custodian: Last Name | | First Name | | MI | Occupation | | Social Security/Tax ID No. | |
| Home Street Address | | | City | State | Zip Code | Email Address | | Date of Birth |
| Identification Type: <input type="checkbox"/> Driver’s License <input type="checkbox"/> Other ID | | Expiration Date | | Landline Phone No. | | Wireless Phone No. | | Work Phone No. |
| Identification No. and Place of Issuance: | | | | | | | | <input type="checkbox"/> Landline <input type="checkbox"/> Wireless |
| Are you aware of being on a government watch list? (i.e. PEP or OFAC) <input type="checkbox"/> No <input type="checkbox"/> Yes Details: | | | | | | | | |

5 DESIGNATION OF SUCCESSOR CUSTODIAN.

(Complete this section if you wish to designate a Successor Custodian. We strongly recommend that this section be completed.)

I, _____, am acting as custodian for _____,
 Name of Custodian Name of Minor

under the New York Uniform Transfers to Minors Act. That act permits me to designate a successor custodian to act upon my death, resignation, or legal incapacity.

I do hereby designate _____ residing at, _____
 Name of designated person Address

to be such successor custodian for said minor for all accounts opened under NYUTMA Account Number(s) appearing above.

I understand that even after my death, resignation or legal incapacity, such successor custodian's appointment will not become effective until the requirements of the New York Uniform Transfers to Minors Act are complied with.

 Signature of Custodian Date Witness (other than Successor Custodian) Date

6 MEMBERSHIP AGREEMENTS AND SIGNATURES.

Agreement to Terms and Conditions

By signing below, I, the Custodian, acknowledge and agree that: (1) the information provided in this Bethpage Federal Credit Union ("Bethpage") New York Uniform Transfers to Minors Act Account Signature Card is true and correct to the best of my knowledge; (2) I am applying for a Bethpage membership; (3) I have received Bethpage's Consumer Member Account Agreement, Bethpage's Fee Schedule, Bethpage's Consumer Member Privacy Notice and any additional required disclosures applicable to this/these Bethpage account(s); (4) I agree to be bound by all the terms and conditions applicable to this/these Bethpage account(s) and related Bethpage services, including as each may be amended from time to time; (5) this/these Bethpage account(s) is/are opened pursuant to and governed by the provisions of the New York Uniform Transfers to Minors Act; (6) I authorize Bethpage to verify any information provided on this application, to inquire of references and other account relationships, and to obtain business and consumer reports from credit reporting agencies on me; (7) I authorize Bethpage to check my credit and employment history; (8) Bethpage may obtain a credit report on me and if the application is approved, Bethpage may also obtain additional consumer reports for all legitimate purposes in connection with updating, renewing, modifying, taking collection action on my Bethpage account(s) and to evaluate me for other Bethpage products and/or services; (9) I agree that Bethpage may report information about my Bethpage account(s) to credit bureaus and/or check verification systems and to answer questions or requests from others seeking credit experience about my Bethpage account(s); (10) if I choose to have access to Bethpage's Online and Mobile Banking, I may have simultaneous access to my Bethpage personal accounts and this/these Bethpage account(s) on which I am Custodian, and Bethpage shall have no liability for any transactions resulting in the commingling of funds; and (11) I am not a foreign (non-US) government official or political officeholder, nor am I a close associate or family member of a foreign government official or political officeholder.

By signing below, under penalty of perjury, I, as Custodian for the minor, certify that: (1) the number on this form is the minor's correct Taxpayer Identification Number; and (2) the minor is not subject to backup withholding because: (a) the minor is exempt from backup withholding, or (b) the minor has not been notified by the Internal Revenue Service (IRS) that the minor is subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified the minor that the minor is no longer subject to backup withholding; and (3) the minor is a U.S. citizen or other U.S. person (including a U.S. resident alien), as defined in the IRS W-9 instructions.

The FATCA code is not applicable; Bethpage Federal Credit Union is not a foreign financial institution.

Certification Instructions: You, the Custodian, must cross out Item 2 if the minor has been notified by the IRS that the minor is currently subject to backup withholding because the minor failed to report all interest and dividends on their tax return.

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

 Signature of Custodian Date

7 FOR INTERNAL USE ONLY.

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|-----------------------------------|---------|-----------------|
| Account Number(s) Opened/Updated: | | |
| Date: | Branch: | Representative: |