

DREYFUS MONEY MARKET DIRECT ACCOUNT APPLICATION

This account application is for use by corporations, trusts, partnerships or other entities. If you need assistance completing this application, please call us toll free at 1-800-346-3621 option 1.

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.

■ 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 certain 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 Dreyfus money market 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.

If you are completing this application electronically, all items except the signature may be filled in electronically. Signatures must be hand-written in blue or black ink and the signed application can be emailed or mailed to the addresses below:

By email: Dreyfusserv@bnymellon.com

By First Class Mail, please mail this form and all enclosures to:

BNY Mellon Institutional Department P.O. Box 534442 Pittsburgh, PA 15253-4442

By Registered, Certified or Overnight Mail please mail this form and all enclosures to:

BNY Mellon Institutional Department Attention: 534442 500 Ross Street, 154-0520 Pittsburgh, PA 15262



DREYFUS MONEY MARKET DIRECT ACCOUNT APPLICATION

If you need assistance completing this application, please call us toll free at 1-800-346-3621 option 1.

1. How would you like to register	your account?	
Corporation – please complete Section You will need to provide		
 A copy of certified articles of incorp incorporation, issued within the last A corporate resolution or Appendix 	six months	of good standing from the state of
 Partnership – please complete Sectio You will need to provide A copy of general partnership agree 		d C*
 Trust - please complete Sections 1B to You will need to provide A copy of the pages of the trust agree of all trustees 		f the trust, the trust date, and a listing
Other (such as Non-Profit Organization, Relig complete Sections 1A, 2 through 8, Ap		please specify on the line below) - please
*Please note: If you are a non-publicly tra or general), Non-Profit Organization (pro- complete Appendix C.		
A. Corporation, Partnership, or Other E	intity (except Trust)	
Full Legal Name		
Taxpayer ID Number:	Tax Residence: 🗌 U.S.	☐ Other (please specify)
Corporate Accounts: S-Corporation	C-Corporation (If the status of the co account to S-Corpora	
State/Country of Organization		
If publicly traded: Ticker symbol	Exchange	
Line of Business		
Please specify if type of business is:		
Casino or Gaming Establishment: \square	Cannabis Industry: \square	Money Service Business: \square
B. Trust		
Name of Trust	Taxpayer ID Number	Date of Trust Instrument
For the Benefit of	Type of Trust	
Name of Grantor		
Country where Trust established:	☐ U.S. ☐ Other (please sp	ecify)
Tax Residence: \(\subseteq U.S. \) \(\subseteq 0\) ther (pleas)		

2. Please provide your address information.

Mailing Address			City	State	Zip Code
			011		=: 0 .
Physical Address (if different from	mailing address)	(no P.O. boxes)	City	State	Zip Code
Email Address					
Phone Number			Cell Phone Nu	umber	
3. Please provide Aut	horized Par	ties (must be sa	ame name as p	rovided in Appen	dix A or B).
If there are more than four have the new page initialed					
A. Authorized Person (chec	ck all that app	oly) 🗌 Signer 🔲 Ti	rader \square Inquiry		
(Full Legal Name) First Name	Initial	Last Name			Date of Birth
Title		Phone Number		Email Address	
City and State of Residence		Specimen Signat	ture (if not provided o	on Appendix A or B or the	Corporate Resolution
Additional Authorized Person	on (check all t	hat apply) \square Signe	er 🗌 Trader 🔲 Ind	quiry	
(Full Legal Name) First Name	Initial	Last Name			Date of Birth
Title		Phone Number		Email Address	
City and State of Residence		Specimen Signal	ture (if not provided o	on Appendix A or B or the	Corporate Resolution
Additional Authorized Person	on (check all t	hat apply) \square Signe	er 🗌 Trader 🔲 Ind	quiry	
(Full Legal Name) First Name	Initial	Last Name			Date of Birth
Title		Phone Number		Email Address	
City and State of Residence		Specimen Signat	ture (if not provided o	on Appendix A or B or the	Corporate Resolution
Additional Authorized Perso	on (check all t	hat apply) \square Signe	er 🗌 Trader 🗌 Ind	quiry	
(Full Legal Name) First Name	Initial	Last Name			Date of Birth
Title		Phone Number		Email Address	
City and State of Residence		Specimen Signal	ture (if not provided o	on Appendix A or B or the	Corporate Resolution
B. Political/Military Officia	als				
Please indicate if any relate other country or jurisdiction official (including spouse, particular). Yes	d party* is eit n, or is closely	associated with suc	ch official or an ir		
If Yes, please provide name	of official, offi	ice held, and countr	·V		
*A related party includes a true Authorized Person listed in Sec	stee or beneficia		•	ial owner, partner or	

4. Please indicate the Fund(s) for your investment.

Write the entire name of the Fund(s) <u>and</u> in Symbol or Fund Code you are selecting			Dividend distribution options
investment.)		·	Check one box only. If no box is checked, all dividends will be reinvested.
	CLASS OF SHARES	CUSIP, NASDAQ SYMBOL OR FUND CODE	Reinvest all dividends
FUND NAME(S)	(see Prospectus)	(specify one)	Pay all dividends by wire
5. Banking Information.			
A. Redemption Instructions			
Name of Bank		ABA#	
Address of Bank			
Account or Nominee Name		Account #	
For Further Credit Account Name		For Further Credit Account #	
B. Dividend Instructions \square Same a	s above		
Name of Bank		ABA#	
Address of Bank			
Account or Nominee Name		Account #	
For Further Credit Account Name		For Further Credit Account #	
6. Who is Your Financial Rep	esentative?		
If shares are being purchased through a section.	inancial intermediary, t	hen the name of your financial	intermediary must appear in this
I/we represent and warrant that the firm	named below is author	ized to purchase and redeem F	und shares on my/our behalf.
Firm Name		Dealer	Code Branch Code
Branch Address			
City	State	2	Zip Code
Name of Representative (Salesperson) and Nur	nber, if any	Phone N	 Number

7. Institutional Suitability Certificate.

BNY Mellon Securities Corporation ("BNYMSC"), the distributor of the Funds, is a registered broker-dealer and a member of the Financial Industry Regulatory Authority ("FINRA"). As a FINRA member firm, BNYMSC is required to comply with all applicable FINRA rules, including FINRA Rule 2111 regarding suitability. Details of the Rule are available at http://www.finra.org/Industry/Regulation/FINRARules/. By the execution of this account application, you certify you will assist BNYMSC in meeting its obligations under Rule 211.

Certificate

In connection with any transaction or investment strategy recommended by BNYMSC, the undersigned certifies on behalf of the applicant (the "Institution") that:

- 1) The Institution is establishing an Institutional Account as defined in FINRA Rule 4512(c)²;
- 2) The Institution (i) is capable of evaluating investment risks independently, both in general and with regard to all transactions and investment strategies involving a security or securities; and (ii) will exercise independent judgment in evaluating the recommendations of BNYMSC or its associated persons, unless it has otherwise notified BNYMSC in writing;
- 3) The Institution will notify BNYMSC if anything in this certificate ceases to be true; and
- 4) The information contained herein may be shared with BNYMSC's affiliates, or with FINRA or other regulatory agencies as required.

By certifying this information, the Institution affirms that the above statements are accurate but does not waive any rights afforded under U.S. federal or state securities laws, including without limitation, any rights under Section 10(b) of the Securities Exchange Act of 1934, as amended, and the rules and regulation promulgated thereunder.

NOTE: The certificate set forth above shall apply with respect to all recommended transactions and investment strategies involving securities that are entered into by the Institution whether for the account of such Institution or for the account of any beneficial owner that has delegated decision making authority to such Institution.

¹ As used in Rule 2111 and interpreted by FINRA.

² The term "Institutional Account" means the account of (1) a bank, savings and loan association, insurance company or registered investment company; (2) an investment adviser registered either with the Securities and Exchange Commission under Section 203 of the Investment Advisers Act or with a state securities commission (or any agency or office performing like functions); or (3) any other person (whether a natural person, corporation, partnership, trust or otherwise) with total assets of at least \$50 million as of the date of this application (whether such assets are invested for such person's own account or under management for the account of others).

8. Please read carefully and sign.

By the execution of this account application, the Institution: (i) represents and warrants that it has full right, power and authority to make the investment(s) applied for pursuant to this application; (ii) agrees that each of the abovenamed Funds, the Transfer Agent, BNY Mellon Investment Adviser, Inc. (the Adviser), BNYMSC 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 Institution 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 prospectus of the named Fund(s).

The undersigned (i) authorizes the Transfer Agent and the Fund in which it is investing or shall invest to act on telephone instructions from any ONE person representing himself or herself to be an Authorized Person of the undersigned as set forth in Appendix A or B of this Application, a corporate resolution or the Certificate last received and processed by the Transfer Agent and reasonably believed by the Transfer Agent or Fund (as applicable) to be genuine and (ii) understands that it may be responsible for any fraudulent telephone order as long as the Transfer Agent or Fund (as applicable) takes reasonable measures to confirm that instructions are genuine.

The Institution acknowledges 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.

PLEASE SIGN HERE:

Ву:		Ву:	
Trustee/Corporate Officer/Partner, etc.		Second Trustee/Corporate Officer/Partner, etc. (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	

Appendix A

Print Name



Must	t be completed if Corporate Resolution and/or specimen signatures have not been provid	ed			
	undersigned, [insert title of Certifying Official*] of	cu.			
finser	ert name of registered owner] (the "Corporation" or "Registered Owner"), hereby certifie	s that:			
I. The Corporation's Board of Directors duly adopted the following resolutions on					
a.	 RESOLVED, that the Corporation shall establish one or more accounts in the name of in mutual funds managed or administered by the Adviser (each, a "Fund"), as set for application or designated by the Authorized Person(s) named below; 				
b.	b. RESOLVED, that the following named persons:				
	[Insert name(s) of Authorized Persons and have each provide his/her specimen signathan four Authorized Persons, please provide the additional information on a copy of it into this Certificate before it is signed by the Certifying Official.]				
	Name of Authorized Person Specimen Signature				
	and redeem shares of the Fund(s) for the Corporation, to otherwise provide instruction account(s), and to execute and deliver any instrument necessary to effectuate the acconferred; and	thority hereby			
	any ONE of them acting by telephone or on-line through websites designated by the agent or distributor, is authorized to act with full power to purchase and redeem sha the Corporation, to direct the payment of redemption proceeds as described below, a provide instructions with respect to the account(s);	res of the Fund(s) for			
C.		es of each of the corporation from and			
I.b. of th	Certifying Official must be the Corporation's Secretary or Assistant Secretary, unless such person is an Author this Certificate, in which case the Certifying Official must be another officer authorized to certify. The Certifyion II below.				
	The signature set forth above, opposite the name of each Authorized Person, is the genui Authorized Person.	ne signature of such			
W	Witness my hand on behalf of the Registered Owner this day of, 2	20			
Siç	Signature of Certifying Official				
Pri	Print Name				
Siç	Signature of Second Certifying Official (required for all non-corporate entities)				

Appendix B



Th	e un	dersigned,			[insert ti	tles/capacities of Cer	tifying Officials*]
	coby	certify that:		[insert	name of registe	red owner] (the "Reg	istered Owner"),
l.		The Registered Owner r or administered by the the Authorized Person(Adviser (each, a '				
	b.	The following named pe	ersons:				
		[Insert name(s) of Authorized Perinto this Certificate before	ersons, please pro	ovide the addi	tional informati		
		Name of Authorized Pe	<u>rson</u>		Specimen Sig	<u>ınature</u>	
		,					
							
		any [insert req and redeem shares of th the account(s), and to ex ferred; and	e Fund(s) for the	Registered Ov	wner, to otherwis	se provide instruction	s with respect to
		any ONE of them acting agent or distributor, is a the Registered Owner, t provide instructions wit	authorized to act o direct the payr	with full pow ment of reden	er to purchase a	and redeem shares of	the Fund(s) for
	C.	Each Fund, the Funds' t and the respective offic liable for, and shall be in damage, expense, or co inquiries believed genui	ers, directors, trondemnified and host (including but	ustees, emplo neld harmless	yees and agents by the Register	s of each of the foreg ed Owner from and a	oing, shall not be gainst any loss,
Cer	tificat	ered Owner is a trust, the Cer ee. If Registered Owner is an e ed Persons listed in Section 1.b	ntity other than a tru	ıst, the Certifying	Officials must be p	ersons authorized to certi	
II.		e signature set forth abo chorized Person.	ve, opposite the 1	name of each	Authorized Pers	son, is the genuine sig	gnature of such
	Wit	ness my hand on behalf	of the Registered	d Owner this _	day of	, 20	_•
	Sigr	nature of Certifying Official					
	Prin	t Name					
	Sigr	nature of Second Certifying Off	icial (required for all	non-corporate er	etities)		
	Prin	t Name					



Appendix C - If you are a corporation, partnership, or other legal entity subject to FinCen Customer Due Diligence Requirements, please complete this Appendix

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, 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:

а.	. 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!

% Ownership of Equity Interests	Name	Date of Birth	Address (Residential or Business Street Address)	For U.S. Persons: Social Security Number	For non-U.S. Persons: Passport Number and Country of Issuance, or other similar identification number ²

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

²In 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.

Sigr	nature:		Date:		
			provided above is com		,,,
othe	r government-issued doc	ument evidencing nationali	ty or residence and bearing a p	photograph or similar safegua	ard.
¹In lie	eu of a passport number	non-US persons may also	provide an alien identification	card number or number an	d country of issuance of any
	Name/Title	Date of Birth	Address (Residential or Business Street Address)	For U.S. Persons: Social Security Number	For non-U.S. Persons: Passport Number and Country of Issuance, or other similar identification number
	(If appropriat	e, an individual listed (under section (c) above n	nay also be listed in this	s section (d)).
	Any other individ	ual who regularly pert	orms similar functions.		
		_	r (e.g., Chief Executive C ner, President, Vice Presi		Officer, Chief Operating
	such as:	<u></u>	l with significant responsi	,	oga: o:::::;o:oa azo: o,



WHAT DOES BNY MELLON INVESTMENT MANAGEMENT DO WITH YOUR PERSONAL INFORMATION?

Why?	Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.			
What?	The types of personal information we collect and share depend on the product or service you have with us. This information can include: Social Security Number Account balances and transaction history Payment history			
How?	All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons BNY Mellon Investment Management chooses to share; and whether you can limit this sharing.			

Reasons we can share your personal information	Does BNY Mellon Investment Management share?	Can you limit this sharing?
For our everyday business purposes— such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
For our marketing purposes— to offer our products and services to you	Yes	No
For joint marketing with other financial companies	No	We don't share
For our affiliates' everyday business purposes—information about your transactions and experiences	Yes	No
For our affiliates' everyday business purposes—information about your creditworthiness	No	We don't share
For our affiliates to market to you	Yes	Yes
For nonaffiliates to market to you	No	We don't share

To limit our sharing

Call 1-866-206-5660. Our menu will prompt you through the process.

When you call, you will need to provide:

- The last 4 digits of your Social Security number
- Your zip code
- The first 5 letters of your last name (Provide all letters if your last name is less than 5 letters.)

Please note: If you have previously called or submitted a written request instructing us to limit our sharing of personal information with our affiliates to market to you, your request will apply until you tell us to change your request or for 5 years from when you made the request, whichever is sooner. After that period expires but before any of our affiliates market to you, you will receive a renewal notice that will allow you to continue to limit marketing offers from our affiliates for at least another 5 years.

If you invest in any of the funds providing this notice through a non-affiliated third party, such as a bank, broker-dealer or financial adviser, you will automatically be excluded from personal information sharing with affiliates to market to you. There is no need for you to notify us.

If you are a new customer, we may begin sharing your information 30 days from the date we deliver this notice to you. When you are no longer our customer, we may continue to share your information as described in this notice. However, you can contact us at any time to limit our sharing.

Questions?

Call **1-800-847-3560** or visit our website via the following link:

https://im.bnymellon.com/us/en/individual/policies/online-privacy-policy.html

Page 2 Who we are					
Who is providing this notice?	This notice is provided by the BNY Mellon Family of Funds (including Dreyfus money market funds), BNY Mellon Funds Trust, BNY Mellon Investment Adviser, Inc., BNY Mellon Securities Corporation, BNY Mellon Transfer, Inc., BNY Mellon Insurance Agency, Inc. and The Bank of New York Mellon as Custodian for retirement plan accounts sponsored by BNY Mellon Investment Adviser, Inc. Any BNY Mellon Investment Management entities or businesses not listed here				

may provide their own notice.

What we do			
How does BNY Mellon Investment Management protect my personal information?	To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.		
How does BNY Mellon Investment Management collect my personal information?	 We collect your personal information, for example, when you open an account or deposit money give us your income information tell us about your investment or retirement portfolio direct us to buy securities 		
	We also collect your personal information from others, such as credit bureaus, affiliates, or other companies.		
Why can't I limit all sharing?	Federal law gives you the right to limit some but not all sharing related to:		
	 affiliates' everyday business purposes-information about your creditworthiness affiliates from using your information to market to you nonaffiliates to market to you 		
	State laws and individual companies may give you additional rights to limit sharing. See below for more on your rights under state law.		
What happens when I limit sharing for an account I hold jointly with someone else?	Your choices will apply to everyone on your account.		

Definitions			
Affiliates	Companies related by common ownership or control. They can be financial and nonfinancial companies.		
	 Our affiliates include banks and companies whose names include "The Bank of New York," "BNY," "Mellon," "Insight," or "Newton," and other financial companies such as Pershing LLC, and Walter Scott & Partners Limited. 		
	Your opt-out will also apply to banks or other companies that may become our affiliates in the future.		
Nonaffiliates	Companies not related by common ownership or control. They can be financial and nonfinancial companies.		
	BNY Mellon Investment Management does not share information with nonaffiliates so they can market to you.		
Joint marketing	A formal agreement between nonaffiliated financial companies that together market financial products or services to you.		
	BNY Mellon Investment Management doesn't jointly market.		

Other important information

STATE LAWS: We follow state law where state law provides you with additional privacy protections.

FOR RESIDENTS OF VERMONT If our account records show that you live in Vermont, we will not disclose nonpublic personal information about you to our affiliates for the purpose of enabling them to market their products and services to you. There is no need for you to call to opt out.

