

New York Life Investments Funds Dividends and Capital Gains Option Form

1 Current Account Information			
Name of Individual, Custodian, Corporation or Trust (Exactly as it ap	pears on your statemer	t)	
Name of Joint Tenants, Minor, Corporate Officer(s), Trustee(s) (E	exactly as it appears on	your statement)	
Fund Name(s)	Class	Account Number(s)	
Tulia Name(s)	Class	Account Number(s)	
Fund Name(s)	Class	Account Number(s)	
2 Dividends/Capital Gains Option Change			
All distributions will be reinvested in additional shares of the same otherwise specified below. Make a selection for each: Dividends a			
Dividends (Choose one.)	Capital Gains (Choose one.)		
\square Reinvest dividends in additional shares of same Fund/Class.	Reinvest capital gains in additional shares of same Fund/Class.		
☐ Send dollar amount of dividends to my bank. Dividends will be sent via ACH to ensure timely receipt, if the banking institution is ACH-compatible. If your bank account is not already on record, please provide bank information in Section 3. (Medallion Signature Guarantee may be required.)	☐ Send dollar amount of capital gains to my bank. Capital gains will be sent via ACH to ensure timely receipt, if the banking institution is ACH-compatible. If your bank account is not already on record, please provide bank information in Section 3. (Medallion Signature Guarantee may be required.)		
☐ Invest % or \$ of my dividends in: (Reinvest any remainder in the same Fund/class)	☐ Invest ☐ % or \$ ☐ of my capital gains in: (Reinvest any remainder in the same Fund/class)		
NYLI Fund Name/Class (Must be the same class as dividends)	NYLI Fund Name/Class (Must be the same class as capital gains)		
The state of the s	The first term of the second o		
Account Number	Account Number		
☐ Pay dividends in cash to a Third-Party Payee. (Medallion Signature Guarantee required.)	Pay capital gains in cash to a Third-Party Payee. (Medallion Signature Guarantee required.)		
Third-Party Payee and Address	Third-Party Payee and Address		
☐ Pay% or \$ of my dividends in cash and reinvest the remainder in shares of the same Fund.	□ Pay% cash and reinvest	or \$ of my capital gains in the remainder in shares of the same Fund.	
☐ Pay dividends in cash to the address of record.	Pay capital gains in cash to the address of record.		

- 1. New account minimums apply to any Fund that the dividend or capital gain move is being used to purchase.
- 2. Dividends and capital gains must move to the same Fund.

3 Bank Information				
Please indicate below which one of the documents you will be providing with your form.		John A. Sample 123 Same Street Anywhere, USA 12345	0001 0001 0001 0001 0001	
☐ Pre-printed voided check ☐ Letter on bank letterhead signed by a bank officer ☐ Recent bank statement		John A. Sample 123 Same Street Anywhere, USA 12345 PAY TO THE ORDER OF Attach your pre-preprinted voided check or pre-printed savings Attach your pre-preprinted voided check or pre-preprinted your pre-p		
IMPORTANT: You must attach a copy of a recent bank statement check, or letter on bank letterhead signed by a bank officer that full bank account registration, bank account number, and bank the form, we cannot link your bank account and your New York be accepted.	displays yoเ routing num	1:23456789:0123456789012 0001 JIF ber. If one of these th	ree items is not received with	
Name of Bank or Financial Institution				
Your Name(s) (As it appears on the bank account)	Joint Bank Account Holder's Name(s) (As it appears on the bank account)			
Bank Routing Number (Please contact your financial institution to verify the routing number.)	Account Number ☐ Checking ☐ Savings			
4 Signature(s)				
Signature of Shareholder (Exactly as registered) X	Daytime Phone Number		Date (MM/DD/YYYY)	
Signature of Shareholder (Exactly as registered) X	Daytime Phone Number		Date (MM/DD/YYYY)	
 Medallion Signature Guarantee required for: 1. ACH For a New York Life Investments account registration that has Shareholder's name does not appear in the Bank account registration that ha York Life Investments account registration that ha York Life Investments account registration does not match th 2. Dividends or Capital Gains that are being sent to a Third-Party P The signature(s) must be Medallion Signature Guaranteed by an Exchange Act to include generally: a bank, broker dealer, municipal 	gistration. s more than e Bank acco ayee. eligible guara securities de	one owner (e.g., Join unt registration exact antor institution as def ealer or broker, credit	t Tenant account)—if the New ly. ined under the Securities union, national securities	
exchange, registered securities association, clearing agency, or say guarantor institutions provide Medallion Signature Guarantees that responsibility to ensure the Medallion Signature Guarantee that you If the surety bond amount is not sufficient to cover the requested trace Medallion Signature Guarantee(s) in the space below.	are covered l acquire is su	by surety bonds in var officient to cover the to	ious amounts. It is your tal value of your transaction(s).	

newyorklifeinvestments.com

For Assistance:

Call your investment professional or call toll-free 800-624-6782/option 2

Mailing Address:

New York Life Investments Funds P.O. Box 219003 Kansas City, MO 64121-9000

Overnight Express Address:

New York Life Investments Funds 430 West 7th Street, Suite 219003 Kansas City, MO 64105-1407

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