

Texas  
**CLASS**<sup>®</sup>



**Registration Packet**



## Welcome to Texas CLASS

Thank you for choosing Texas CLASS!

This packet contains all the materials necessary to set up your Texas CLASS account(s). If you have any questions about the registration process or about your Texas CLASS account(s), please do not hesitate to contact us. The Texas CLASS Client Service team can be reached any business day from 8:30 a.m. to 4:30 p.m. CT by phone at (800) 707-6242 or by email at [clientservices@texasclass.com](mailto:clientservices@texasclass.com).

Texas CLASS is not a bank. An investment in Texas CLASS is not insured or guaranteed by the Federal Deposit Insurance Corporation or any other government agency. Although Texas CLASS Prime and Texas CLASS Government seek to preserve the value of your investment at \$1.00 per share, they cannot guarantee they will do so. Please read the applicable Texas CLASS 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 Texas CLASS, please complete the following:**

- 1) Read the Trust Agreement (A copy can be found on [www.texasclass.com](http://www.texasclass.com)).
- 2) Pass the resolution authorizing participation in Texas CLASS (page 3 and 4).
- 3) Adopt the Trust Agreement by signing Exhibit D (page 5).
- 4) Complete the Entity Registration (page 6).
- 5) Complete the Authorized Contacts Form (page 7/8).
- 6) Complete the Accounts to be Established Form; you may open as many accounts as you wish (page 9).
- 7) Keep the original forms for your records, and send the completed packet to the Texas CLASS Client Service team by fax (855) 848-9910 or by email [clientservices@texasclass.com](mailto:clientservices@texasclass.com).

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

Texas CLASS Client Service Team  
T (800) 707-6242  
[clientservices@texasclass.com](mailto:clientservices@texasclass.com)

## Resolution to Participate

WHEREAS, the Public Funds Investment Act, Texas Government Code, Section 2256.001 et seq. (the Act) requires the governing body of each local government in this state to adopt investment policies in accordance with the terms of the Act; and

WHEREAS, pursuant to the requirements of the Act, the Board of Trustees (the Governing Body) of the \_\_\_\_\_ (the Local Government) has previously reviewed and adopted an investment policy (the Policy) that provides in part that the funds of the local government will be invested in investments permitted by the Act in order to: (i) invest only in investments legally permitted under Texas law; (ii) minimize risk by managing portfolio investments so as to preserve principal and maintain a stable net asset value; (iii) manage portfolio investments to ensure that cash will be available as required to finance operations; and (iv) maximize current income to the degree consistent with legality, safety, and liquidity; and

WHEREAS, pursuant to the Policy and the Act, the Local Government has appointed \_\_\_\_\_ (the Investment Officer) to act as the investment officer of the Local Government; and

WHEREAS, the Act provides that funds under the control of a Local Government may be invested through investment pools meeting the standards of Section 2256.016 of the Act; and

WHEREAS, the Local Government has received and reviewed the Information Statement, dated April 2021 (the Information Statement), of Texas Cooperative Liquid Assets Securities System Trust (the Program), an investment pool administered by Public Trust Advisors, LLC that sets forth the information required by Section 2256.016(b) of the Act; and

WHEREAS, the Local Government has determined that the investments proposed to be acquired by the Program are of a type that are permitted by the Act and are consistent with the Policy; and

WHEREAS, the Local Government has determined that an investment in the Program will assist the Local Government in achieving the goals set forth in the Policy and will tend to preclude imprudent investment activities arising out of investment transactions conducted between the Local Government and the Program; and

WHEREAS, the Local Government understands that the Program operates through the Ninth Amended and Restated Trust Agreement dated as of February 25, 2021 (the Trust Agreement), that provides the terms on which the Program will operate and the rights of the Participants in the Program and sets forth the responsibilities of Public Trust Advisors, LLC as the administrator of the Program (the Administrator) and of UMB Bank as custodian (the Custodian);

NOW THEREFORE, BE IT RESOLVED BY THE GOVERNING BODY OF THE LOCAL GOVERNMENT:

That the form, terms, and provisions of the Trust Agreement, a draft of which was presented and reviewed at this meeting, providing for the creation of the Program and for the rights of the Program Participants and the duties and responsibilities of the Administrator be and the same are hereby approved and adopted; and that the Investment Officer be and he or she is hereby authorized and directed to execute and deliver to the Administrator and the Custodian in the name and on behalf of the Local Government a participation certificate evidencing the agreement of the Local Government to be bound by the Trust Agreement substantially in the form of the Trust Agreement reviewed and approved at this meeting, together with such changes therein as may be approved by the said officer, such approval to be conclusively evidenced by the execution thereof; and be it further

Resolved that the investment program established by the Trust Agreement is hereby found and determined to be consistent with the Policy and to preclude imprudent investment activities arising out of investment transactions conducted between the Local Government and the Program; and be it further

Resolved that the Governing Body hereby officially finds and determines that the facts and recitations contained in the preamble of this Resolution are true and correct; and be it further

Resolved that the Governing Body hereby finds and declares that written notice of the date, hour, place, and subject of the meeting at which this Resolution was adopted was posted for the time required by law preceding this meeting and that such meeting was open to the public as required by law at all times during which this Resolution and the subject matter thereof were discussed, considered, and formally acted upon all as required by the Open Meetings Act, Chapter 551, Texas Government Code, as amended, and the Act; and be it further

Resolved that the officers of the Local Government, and each of them, shall be and each is expressly authorized, empowered, and directed from time-to-time to do and perform all acts and things and to execute, acknowledge, and deliver in the name and under the corporate seal and on behalf of the Local Government all certificates, instruments, and other papers, whether or not herein mentioned, as they may determine to be necessary or desirable in order to carry out the terms and provisions of this Resolution and of the Trust Agreement hereby authorized and approved, such determination to be conclusively evidenced by the performance of such acts and things and the execution of any such certificate, financing statement, instrument, or other paper; and be it further

Resolved that this Resolution shall take effect and be in full force upon and after its passage.

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

## Exhibit D – Participation Certificate

The undersigned \_\_\_\_\_ (the Local Government) does hereby request that it be admitted as a Participant pursuant to Section 2.3 of the Ninth Amended and Restated Trust Agreement (the Agreement) dated as of February 25, 2021, by and between the Participants, UMB Bank as Custodian, and Public Trust Advisors, LLC. By executing this Participation Certificate, the undersigned agrees that, upon the execution hereof by the Program Administrator, it will become subject to the same obligations and shall have the same rights as if it had executed the Agreement.

The undersigned hereby certifies that \_\_\_\_\_ (the Investment Officer) is the duly designated Representative of the undersigned as required by the Agreement.

The undersigned hereby certifies that its governing body has taken all actions required by Section 2256.016 of the Public Funds Investment Act, Texas Government Code, for it to participate in the Trust created by the Agreement.

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Entity Name

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Signature

Date

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Title

Accepted by Administrator (to be completed by Texas CLASS):

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Signature

Date

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Title



### Trust Registration

**Entity Information**

Entity Name (Participant) \_\_\_\_\_

Entity Type:      City/Town                      County                      School District                      Special District  
Other (Specify) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Physical Address (if different than above) \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Tax ID \_\_\_\_\_ Fiscal Year End Date (Month/Day) \_\_\_\_\_

The \_\_\_\_\_ (the Local Government) hereby wishes to invest in the following portfolio:

Texas CLASS      Texas CLASS Government      Both

I authorize Texas CLASS and its transfer agent and administrator to act on any instructions believed to be genuine for any service authorized on this form. I agree that Texas CLASS, 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 I agree 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 changed by written instructions. Each local government is responsible for notifying the Trust of any changes to its account(s).

Wires will be distributed every hour with the final distribution ending at 4:00 p.m. CT; distribution times are subject to change as needed by the Texas CLASS Administrator. Additionally, Texas CLASS must be notified of any contributions by 4:00 p.m. CT to receive same day credit. **If funds are not received by 4:00 pm CT, 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 Information (Optional)**

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 Texas CLASS account, bank contact must be provided to verify bank account information



### Authorized Contacts

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 transaction confirmations
Process transactions	
Receive account updates	

#### Representative and Authorized Signer

Print First and Last Name

Title

**Signature Required**

Phone (Required)

Email (Required)

Fax

#### Additional Contact (Optional) Note – Texas CLASS strongly advises each participant to have multiple authorized signers to help prevent fraud

Print First and Last Name

Title

**\*(Signature Required if Authorized Signer)**

Phone (Required)

Email (Required)

Fax

#### 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)

Email (Required)

Fax

#### Permissions (check only one)

- Authorized Signer to Move Funds\*
- Read-Only Access





## Authorized Contacts (cont.)

### Additional Contact (Optional)

Print First and Last Name

Title

**\*(Signature Required if Authorized Signer)**

Phone (Required)

Email (Required)

Fax

**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)

Email (Required)

Fax

**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)

Email (Required)

Fax

**Permissions** (check only one)

- Authorized Signer to Move Funds\*
- Read-Only Access



## Accounts to be Established

Entity Name: \_\_\_\_\_

**Texas CLASS Accounts**

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

(To be completed by Participant)

**Texas CLASS Government Accounts**

Desired Subaccount Name(s)\*:

(To be completed by Participant)

**Note: At least one Subaccount is required for each pool the entity would like to invest in**

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\*Name must be limited to 35 characters.

Once your Texas CLASS account has been established, you will receive a confirmation email with your login credentials from [no-reply@texasclass.com](mailto:no-reply@texasclass.com). 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 Texas CLASS Client Service team.

## Dual Authorization Form

Entity Name: \_\_\_\_\_

Please utilize this form to request dual authorization capabilities on your Texas CLASS account. Dual authorization ensures that any transaction entered via the Texas CLASS 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 4:00 p.m. CT 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