

State Street Institutional Investment Trust Application

For additional information please call: **(877) 521-4083**

Please mail original application to: **State Street Institutional Investment Trust
PO Box 219737
Kansas City, MO 64121-9737**

Email the application to: **USCashClientService@ssga.com**

Important Information About Opening a New Account

To help the government fight the funding of terrorism and money laundering activities, federal law requires State Street Institutional Investment Trust (the "Trust"), on behalf of its series (the "Funds"), to obtain, verify and retain information that identifies each person who opens an account. In some cases federal law also requires us to identify and record information that identifies natural persons who control and beneficially own a legal entity that opens an account. What this means for you — when you open an account, we will require your name, address, date of birth, and Social Security number (or other government issued identification number), and we ask for other information that will allow us to verify your identity and, in the case of certain legal entities, the identities of natural persons who control and beneficially own the legal entity. In certain circumstances, we may obtain and verify this information with respect to any person(s) authorized to affect transactions in an account. In case of entities such as trusts, estates, corporations, partnerships or other organizations, we may require identifying documentation. If we are not able to verify your identity, the Trust reserves the right to restrict and/or close your account. The Trust will not be responsible for any losses or damages from any failure to provide this information, or from any restriction placed upon, or closing of, your account.

1. Investor Information (Select One)

U.S. Entity		Non-U.S. Entity (IRS form W-8 required)	
C Corporation	Partnership	Limited Liability Company	
S Corporation	Other Entity		
Name of Corporation/Partnership and State of Organization			
Tax/EIN Number			
Name of Authorized Signer(s)			
Government Entity or affiliated with a government entity		Jurisdiction	
Exempt Organization			
Is this a publicly traded company?		Yes	No
If yes, please provide Ticker symbol			

You must supply documentation to substantiate the existence of your organization. (e.g., Articles of Incorporation/Formation/Organization, Partnership Agreement, or other official documents.) Remember to include a separate sheet detailing the full name, date of birth, Social Security number, and permanent street address for all authorized individuals.

**2. Permanent
Street Address**

Residential Address or Principal Place of Business — Foreign address and P.O. Boxes are not allowed.

Street		APT/Suite	
City			
State		Zip Code	
Daytime Phone Number			
Evening Phone Number			
Email Address			

Mailing Address* (if different from Permanent Address)

If completed, this address will be used as the Address of Record for all statements, checks and required mailings. Foreign addresses are allowed.

Street	APT/Suite
City	
State	Zip Code

* A P.O. Box may be used as the mailing address.

Duplicate Statement #1

Complete only if you wish someone other than the account owner(s) to receive duplicate statements.

Company Name	
Name	
Street	APT/Suite
City	
State	Zip Code

**3. Investment Advisor
(If Applicable)**

Firm Name

NSCC Dealer Number

Representative Name

Representative Phone Number

4. Fund Selection(s)

Initial Investment Amount

Premier Class	\$250,000,000	Investor Class	\$ 10,000,000
Institutional Class	\$ 25,000,000	Administration Class	\$ 1,000
Opportunity Class	\$ 25,000,000	Investment Class	\$ 250

	Fund Class	CUSIP	Ticker	Amount Investing	Estimated Funding Date
Institutional Liquid Reserves Fund	Premier Class	85749P101	SSIXX		
	Institutional Class	85749R487	SSHXX		
	Investment Class	85749P200	SSVXX		
	Investor Class	85749R461	SSZXX		
	Administration Class	85749R479	SSYXX		
	Opportunity Class	85749T541	OPIXX		
U.S. Government Money Market Fund	Premier Class	857492706	GVMXX		
	Institutional Class	857492573	SAHXX		
	Investment Class	857492805	GVVXX		
	Investor Class	857492649	SAMXX		
	Administration Class	857492656	SALXX		
	Opportunity Class	85749T517	OPGXX		
Treasury Money Market Fund	Premier Class	857492888	TRIXX		
	Institutional Class	857492565	SSJXX		
	Investment Class	857492870	TRVXX		
	Investor Class	857492623	SSNXX		
	Administration Class	857492631	SSKXX		
	Opportunity Class	85749T533	OPRXX		
Treasury Plus Money Market Fund	Premier Class	857492862	TPIXX		
	Institutional Class	857492557	SAJXX		
	Investment Class	857492854	TPVXX		
	Investor Class	857492599	SAEXX		
	Administration Class	857492615	SSQXX		
	Opportunity Class	85749T525	OPTXX		

**5. Primary Redemption
Wire Instructions**

Bank Name

ABA/Bank Routing Number

Bank Account Number

Name on Your Account

City

State

Zip

**6. Secondary
Redemption Wire
Instructions**

Bank Name

ABA/Bank Routing Number

Bank Account Number

Name on Your Account

City

State

Zip

**7. Dividend &
Capital Gain
Distribution Options**

All Dividends & Capital Gains will be automatically reinvested unless you elect to receive such distributions in cash using the options below. If you elect to have all Dividends and Capital Gains automatically reinvested, no wire instructions are necessary.

Dividends	Cash	Reinvest	Capital Gains	Cash	Reinvest
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Bank Name

ABA/Bank Routing Number

Bank Account Number

Name on Your Account

City

State

Zip

8. Authorized Individuals

If there are additional authorized traders to list, please attach additional page.

Individual 1	Name	Authorized	Trader	Signer
	Email	Phone Number		
Individual 2	Name	Authorized	Trader	Signer
	Email	Phone Number		
Individual 3	Name	Authorized	Trader	Signer
	Email	Phone Number		
Individual 4	Name	Authorized	Trader	Signer
	Email	Phone Number		

9. Required Signature(s)

By Signing this Application You

1. Verify that you have read the prospectus for each fund in which you are investing.
2. Certify that you have authority and legal capacity to purchase mutual funds shares and are of legal age in your state.
3. Authorize the Funds or their transfer agent to act on telephone instructions believed to be authentic for any service authorized on this form. Provided the Trust employs reasonable procedures to confirm that telephone/Internet Instructions are genuine, you agree that the Funds, their transfer agent, their respective officers, directors, affiliates and agents will not be liable for any losses, claims, expenses and liabilities that result from accepting such instructions.
4. Understand that mutual funds are not obligations of, or guaranteed by, any bank or insured by the FDIC. You understand that since a mutual fund investment involves risk, including possible loss of principal, the value of an investment, when sold, may be greater or less than the amount originally invested.
5. For corporations, partnerships and other business entities: I/We certify that each person signing below has been elected and is now legally holding the office shown with his or her name, and is authorized to sell, assign, transfer and/or deliver any and all stocks, bonds, and/or other securities registered in the name of this corporation, partnership, or business entity. I/We agree that the Funds or their transfer agent may rely upon this authorization until I/We notify the Funds or their Transfer Agent of any changes by submitting a corporate resolution that is certified within 6 months or a certificate of incumbency that is certified within 60 days of presentation.
6. Understand that the IRS does not require your consent to any provision of this document other than the certification required to avoid backup withholding.
7. Certify that, to the best of your knowledge, the information provided herein is complete and correct.

Important

Tax Certification (Substitute W-9)

Exemptions (see instructions)

Exempt payee code (if any)
code (if any)

Exemption from FATCA reporting

. I understand that federal law requires financial institutions to obtain, verify and record information that identifies each person or entity that opens a new account. Account owners are asked to provide their names, addresses, dates of birth (if applicable) and other information, which may include driver's license numbers or other identification numbers, so that the institution can accurately verify their identity. If the Trust is unable to verify a client's identity within a reasonable time after the account opening, the Trust may restrict or close the account.

Under Penalties of Perjury By Signing Below You Certify that (check all that apply):

<p>1. The number shown on this form is your correct taxpayer identification number (or you are waiting for a number to be issued and will provide the number to the fund as soon as it is issued), and certify that you have authority and legal capacity to purchase mutual funds shares and are of legal age in your state, and</p>	<p>4. The FATCA code(s) entered on this form (if any) indicating that you are exempt from FATCA reporting is correct. Certification Instructions: Do not check item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.</p>
<p>2. You are not subject to backup withholding because: (a) You're exempt from backup withholding, or (b) You have not been notified by the Internal Revenue Service (IRS) that you are subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified you and you are no longer subject to backup withholding, and</p>	<p>5. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. If you are subject to backup withholding, check the box in front of the following statement.</p>
<p>3. You are a U.S. person (including a U.S. resident alien).</p>	<p>6. You have been notified by the IRS that you are subject to backup withholding.</p>

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

Shares of the Funds offered by State Street Institutional Investment Trust are not insured by the FDIC or by any other governmental agency; they are not obligations of the FDIC nor are they deposits nor obligations guaranteed by State Street Bank and Trust Company or any of its affiliates. The Funds pay State Street Bank and Trust Company for its services as custodian and pay SSGA Funds Management, Inc. an affiliate of State Street Bank and Trust Company, for investment advisory and administrative services.

Although the funds seek to preserve the value of your investment at \$1.00 per share, it is possible to lose money by investing in the fund.

This application must be accompanied or preceded by a prospectus. Read it carefully before you invest.

Individual 1

Authorized Signature

Date

Name (Print)

Title

Individual 2

Authorized Signature

Date

Name (Print)

Title

Appendix

1. Claims of Exclusion from Beneficial Owner Information Requirements

In accordance with Federal regulation, subject to certain exceptions, Section 2 of this application requires investors which are **legal entities** (as defined below) to provide information about the key individuals who own or control the legal entity. For the purposes of this application, 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.

Investors which are not legal entities may skip Section 2 of this application. Investors which are legal entities must complete all of Section 2 of this application unless they qualify for an exclusion and indicate the application exclusion(s) in the tables below. Legal entities should refer to the instructions immediately below to identify what information they are required to provide under Section 2 of this application. Claims of exclusion are subject to verification.

A. If a legal entity for which an account is being opened is described in the table below, please mark the appropriate box(es) in the table which describe the legal entity. The Trust does not require that any legal entities described in the table below complete Section 2 of this application.

i. ERISA PLANS (U.S.) Only	ii. A U.S. insurance company regulated by a State
iii. A foreign financial institution established in a jurisdiction where the regulator of such institution maintains beneficial ownership information regarding such institution	iv. Any subsidiary, other than a bank, of any entity described in [viii] of this table (a "listed entity") that is organized under the laws of the United States or of any State and at least 51 percent of whose common stock or analogous equity interest is owned by the listed entity, provided that, for purposes of this exclusion, a person that is a financial institution, other than a bank, is an exempt person only to the extent of its domestic operations
v. A pooled investment vehicle that is operated or advised by a financial institution excluded from the definition of legal entity customer under paragraph (e)(2) of 31 CFR § 1010.230	vi. Entities registered with the SEC under the Securities and Exchange Act of 1934
vii. Financial institutions regulated by a Federal functional regulator or a bank regulated by a State bank regulator	viii. Any entity, other than a bank, whose common stock or analogous equity interests are listed on the New York Stock Exchange or the American Stock Exchange or whose common stock or analogous equity interests have been designated as a NASDAQ National Market Security listed on the NASDAQ Stock Market (except stock or interests listed under the separate "NASDAQ Capital Markets Companies" heading), provided that, for purposes of this exclusion, a person that is a financial institution, other than a bank, is an exempt person only to the extent of its domestic operations
ix. Any entity established under the laws of the United States, of any State, or of any political subdivision of any State, or under an interstate compact between two or more States, that exercises governmental authority on behalf of the United States or any such State or political subdivision	x. Issuers of securities registered under Section 12 of the Securities Exchange Act of 1934 or that are required to file reports under 15(d) of that 1934 Act
xi. Departments or agency of the United States, of any State, or of any political subdivision of a State	xii. An exchange or clearing agency, as defined in Section 3 of the Securities and Exchange Act of 1934, registered under Section 6 or 17A of that Act
xiii. An investment adviser, as defined in section 202(a)(11) of the Investment Advisers Act of 1940, that is registered with the U.S. Securities and Exchange Commission under that Act	xiv. A registered entity, commodity pool operator, commodity trading advisor, retail foreign exchange dealer, swap dealer or major swap participant, defined in Section 1a of the Commodity Exchange Act, registered with the Commodity Futures Trading Commission
xvii. A bank holding company, as defined in Section 2 of the Bank Holding Company Act of 1956 (12U.S.C. 1841) or savings and loan holding company, as defined in Section 10(n) of the Home Owners' Loan Act (12 U.S.C. 1467a(n))	xviii. A financial market utility designated by the Financial Stability Oversight Council under Title VIII of the Dodd-Frank Wall Street Reform and Consumer Protection Act of 2010

xix. Trusts (other than a statutory) (U.S./Non-U.S.)	xx. A non-U.S. governmental department, agency or political subdivision that engages only in governmental rather than commercial activities
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B. If a legal entity for which an account is being opened is described in the below table, please mark the appropriate box(es) in the table which describe the legal entity. The Trust does not require that any legal entities described in the table below complete Part B of Section 2 of this application, but the legal entity must complete the other parts of Section 2.

i. A pooled investment vehicle operated or advised by a financial institution not described in the table provided in Section 1 of this Section	ii. A legal entity established as a nonprofit corporation or similar entity that has filed its organizational documents with the appropriate State authority as necessary
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2. Legal Entity Beneficial Owner Certification

General Instructions

To help the government fight financial crime, Federal regulation requires the Trust, on behalf of the Funds, to obtain, verify, and record information about the beneficial owners of legal entity customers. Legal entities can be used 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 Section 2?

Section 2 must be completed by the person opening an account with a Fund on behalf of a legal entity (as defined in Section 1) that has not indicated in Section 1 of this application that it qualifies for an exclusion from the requirement to complete the information requested in this section.

What information do I have to provide?

You are required to provide the name, address, date of birth and Social Security number (or passport number or other similar information, in the case of foreign persons) for the following individuals (i.e., the **beneficial owners**):

- (i) Each individual, if any, who owns, directly or indirectly, 25 percent or more of the equity interests of the legal entity customer (e.g., each natural person that owns 25 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 (B), depending on the factual circumstances, up to four individuals (but as few as zero) may need to be identified. Regardless of the number of individuals identified under section (B), you must provide the identifying information of one individual under section (C). It is possible that in some circumstances the same individual might be identified under both sections (e.g., the President of a company who also holds a 30% equity interest). Thus, a completed Section 2 will contain the identifying information of at least one individual (under section (C)), and up to five individuals (i.e., one individual under section (C) and four 25 percent equity holders under section (B)).

The Trust may also ask to see a copy of a driver’s license or other identifying document for each beneficial owner listed in Section 2.

A. Account Information

Persons opening an account on behalf of a legal entity must provide the following information:

Name and Title of the Natural Person Opening Account

Name

Title

Name and Address of Legal Entity for Which the Account is Being Opened

Name

Address

B. Beneficial Owner(s) Information

Please complete the table below for each individual, if any, who, directly or indirectly, through any contract, arrangement, understanding, relationship or otherwise, owns 25 percent or more of the equity interests of the legal entity listed above:

(If the legal entity is owned by another legal entity, only natural persons should be listed within the table (e.g., if ABC Corp. is 50% owned by 123 Corp. and 123 Corp. is 50% owned by John Doe, John Doe should be listed as he is a 25% Beneficial Owner of ABC Corp))

	Name	Date of Birth (mm/dd/yy)	Address (Residential or Business Street)	For U.S. Persons: Social Security Number	For Non-U.S. Persons: Social Security Number, Passport Number & Country of Issuance, or Other Similar Identification Number ¹
1					
2					
3					
4					

(If no individual meets this definition, please write "Not Applicable")

¹ In lieu of a passport number, foreign persons may also provide an alien identification card number, or number and country of issuance of any other government-issued document must be included with the form.

C. Controller Information

Please complete the table below with the requested 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 (B) above may also be listed in this section (C)).

	Name	Date of Birth (mm/dd/yy)	Address (Residential or Business Street)	For U.S. Persons: Social Security Number	For Non-U.S. Persons: Social Security Number, Passport Number & Country of Issuance, or Other Similar Identification Number ¹
1					
2					

(If no individual meets this definition, please write "Not Applicable")

I, _____ (name of natural person opening account), hereby certify, to the best of my knowledge, that the information provided in Section 2 is complete and correct.

Signature

Date (mm/dd/yyyy)

Legal Entity Identifier (if applicable)

¹ In lieu of a passport number, foreign persons may also provide an alien identification card number, or number and country of issuance of any other government-issued document must be included with the form.