

CERTIFICATION OF BENEFICIAL OWNERS OF LEGAL ENTITY CUSTOMERS

I. GENERAL INSTRUCTIONS

What is this form?

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 entity customers. 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 form?

This form must be completed by the person opening a new account on behalf of a legal entity with any of the following U.S. financial institutions: (i) a bank or credit union; (ii) a broker or dealer in securities; (iii) a mutual fund; (iv) a futures commission merchant; or (v) an introducing broker in commodities.

For the purposes of this form, 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 form 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, 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 (i), 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 (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 (e.g., the President of Acme, Inc. who also holds a 30% equity interest). Thus, a completed form will contain the identifying information of at least one individual (under section (ii)), and up to five individuals (i.e., one individual under section (ii) and four 25 percent equity holders under section (ii)).

The financial institution may also ask to see a copy of a driver's license or other identifying document for each beneficial owner listed on this form.

II. CERTIFICATION OF BENEFICIAL OWNER(S)

A. Name and Title of Natural Pers	on Opening Account: REQUIRED	
Name:		Title:
B. Name, Type, and Address of Le	egal Entity for Which the Account is	Being Opened: REQUIRED
Name:		
Type of Legal Entity (Example: LLC	C, Partnership):	
Address:		
=	relationship or otherwise, owns 25 p	lirectly or indirectly, through any contra percent or more of the equity interests of t
,	-	
Name:		Date of birth:
		Date of birth:
Name: Address:	State:	Date of birth: Zip:
Name: Address: (Residential or Business Street)	State:	
Name: Address: (Residential or Business Street) City:	State: Number: urity Number, Passport Number	
Name: Address: (Residential or Business Street) City: For U.S. Persons - Social Security For Non-U.S. Persons - Social Security	State: Number: urity Number, Passport Number similar identification number ¹ :	
Name: Address: (Residential or Business Street) City: For U.S. Persons - Social Security For Non-U.S. Persons - Social Security and Country of Issuance, or other	State: Number: urity Number, Passport Number similar identification number ¹ :	
Name: Address: (Residential or Business Street) City: For U.S. Persons - Social Security For Non-U.S. Persons - Social Security and Country of Issuance, or other or more Beneficial Owner 2 (If app	State: Number: urity Number, Passport Number similar identification number ¹ :	Zip:
Name: Address: (Residential or Business Street) City: For U.S. Persons - Social Security For Non-U.S. Persons - Social Security and Country of Issuance, or other or more Beneficial Owner 2 (If app	State: Number: urity Number, Passport Number similar identification number ¹ :	Zip:
Name: Address: (Residential or Business Street) City: For U.S. Persons - Social Security For Non-U.S. Persons – Social Security and Country of Issuance, or other or more Beneficial Owner 2 (If app. Name: Address: (Residential or Business Street)	State: Number: urity Number, Passport Number similar identification number ¹ : blicable) State:	Zip: Date of birth:

¹ In lieu of a passport number, Non-U.S. Persons may also provide a Social Security Number, an alien identification card number, or number and country of issuance of a government-issued document evidencing nationality or residence and bearing a photograph or similar safeguard.

25% or more Beneficial Owner 3 (If applicable)

		Date of birth:	
Address:			
(Residential or Business Street)			
City:	State:	Zip:	
For U.S. Persons - Social Security	y Number:		
	curity Number, Passport Number		
and Country of Issuance, or othe	r similar identification number:		
or more Beneficial Owner 4 (If ap	pplicable)		
Name:		Date of birth:	
Address:			
(Residential or Business Street)			
City:	State:	Zip:	
For U.S. Persons - Social Security	y Number:		
	curity Number, Passport Number		
and Country of Issuance, or othe	r similar identification number:		
	enior manager (e.g., Chief Executive (
Operating Officer, Manag	ging Member, General Partner, Presi	dent, Vice President, Treasurer); or	
	ging Member, General Partner, Presidence of the properties of the		
Any other individual who	· ·	•	d)).
Any other individual who	regularly performs similar functions	•	
Any other individual who (If appropriate, an in Name: Address:	regularly performs similar functions dividual listed under section (c) abov	ve may also be listed in this section (o	
Any other individual who (If appropriate, an in	regularly performs similar functions dividual listed under section (c) abov	ve may also be listed in this section (o	
Any other individual who (If appropriate, an in Name: Address: (Residential or Business Street)	regularly performs similar functions dividual listed under section (c) above Title:	e may also be listed in this section (o	
Any other individual who (If appropriate, an in Name: Address: (Residential or Business Street) City: For U.S. Persons - Social Security	regularly performs similar functions dividual listed under section (c) above Title: State:	e may also be listed in this section (o	
Any other individual who (If appropriate, an in Name: Address: (Residential or Business Street) City: For U.S. Persons - Social Security	regularly performs similar functions dividual listed under section (c) above Title: State: y Number: curity Number, Passport Number	e may also be listed in this section (o	
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Any other individual who (If appropriate, an in Name: Address: (Residential or Business Street) City: For U.S. Persons - Social Security For Non-U.S. Persons - Social Security and Country of Issuance, or othe	regularly performs similar functions dividual listed under section (c) abov Title: State: y Number: curity Number, Passport Number or similar identification number: , hereby copening the account)	Zip:	birtl
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