

Business Account Due Diligence Questionnaire



Important Information about Procedures for Opening a New Account

NASA Federal Credit Union, like all financial institutions, is required by federal law to obtain, verify and record information that identifies each applicant that opens or is authorized to act on an account. We will ask for the legal name of the business, the fictitious or DBA name of the business, the street address, tax identification number, other identifying information and due diligence questions. We may ask for copies of business licenses or other documents evidencing the existence and good standing of the entity. Individuals associated with the business must also provide personal identifying information (name, date of birth, tax identification number, address, etc.) and provide identification. The questionnaire below is designed to help the Credit Union understand the type, size, frequency, and purpose of transactions. Your responses will help us understand what is normal and expected for the account, whether we can serve the business, or if additional due diligence is required. If an account is opened, it will also allow us to make recommendations that align with the business' financial goals and objectives. Failure to respond may result in the suspension of accounts and services.

All questions must be answered in their entirety or the application will be considered incomplete

Type of Business

- Sole Proprietor Sole Member LLC LLC PC/LLP Partnership
 Corporation Unregistered Non-Profit Publicly Traded Corp Corporate Non-Profit

Registered Business Name

Fictitious or DBA Name (if any)

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Account Number

Form Completed by

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Contact Number

Number of Employees (Full and Part Time)

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Where do you conduct most of your business? (i.e., MD, DC, VA, Globally, Online...)

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Please List the State(s) Where the Business is Registered:

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Industry: (i.e., food/beverages, car sales, legal services, consulting, real estate, transportation...) and provide a brief description of the business

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Business Location Type: (i.e., home office, store front, office bldg., office suite...)

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How Long Have You Been in Business?

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Where Else Did/Do You Hold an Account for this Business? If the account was closed, what was the reason?

Is the business owned by or affiliated with any other businesses, groups, or government agencies? If yes, list and explain:

Is the Business Seasonal? Yes No (If yes, please indicate busy season)

Website Address

Social Media Platform: Check All that apply and provide your organization's handle for each social media

<input type="checkbox"/> Facebook	<input type="checkbox"/> Instagram	<input type="checkbox"/> Twitter	<input type="checkbox"/> LinkedIn
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Main Purpose of this Account. Check All that Apply:

- | | | |
|-------------------------------------------------------|--------------------------------------------|------------------------------------------|
| <input type="checkbox"/> Payroll Account | <input type="checkbox"/> Operating Account | <input type="checkbox"/> Expense Account |
| <input type="checkbox"/> Business Loan/Line of Credit | <input type="checkbox"/> Savings Only | <input type="checkbox"/> Other: _____ |

Transaction Information

Business Activities/Services. Check All that Apply:

- | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| <input type="checkbox"/> Money Services Business (MSB) activities (i.e., check cashing, sale/issuance of money orders, travelers checks, gift cards, wires or the transmission of funds, dealings in foreign exchange) | | |
| <input type="checkbox"/> Finance/Lending | <input type="checkbox"/> Internet Gambling | <input type="checkbox"/> Act as a Third-Party Payment Processor |
| <input type="checkbox"/> Deal in Virtual Currencies | <input type="checkbox"/> Lottery Ticket Sales | <input type="checkbox"/> Privately Owned ATM (ATM on Premises) |
| <input type="checkbox"/> Hold Client Funds (i.e., Escrow, Investments...) | <input type="checkbox"/> Import from or Export to Any Foreign Countries | <input type="checkbox"/> Use of a Courier or Armored Car Service for Cash Transactions |
| <input type="checkbox"/> Marijuana or Related Services | <input type="checkbox"/> None of the Above | |

Expected transaction types (ACH, checks, cash, wire, check card...) Check all that apply:

- | | | |
|---------------------------------------------------------------------------------|-----------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Automated Clearing House (ACH) Electronic Debit/Credit | <input type="checkbox"/> Purchase of Monetary Instruments | <input type="checkbox"/> Cash - Currency (Paper/Coin) |
| <input type="checkbox"/> Wires - Domestic (within U.S.) | <input type="checkbox"/> Checks/Drafts | <input type="checkbox"/> Merchant Services Transactions |
| <input type="checkbox"/> Wires - International | <input type="checkbox"/> Check Card | <input type="checkbox"/> Other Electronic Transactions (Square/Cash App, Venmo, PayPal, Apple Pay, Google Pay, Zelle...) |

Expected number of transactions (ACH, checks, cash, wire, check card...) per month:

Deposits # _____

Withdrawals # _____

Expected Electronic Payments (Square/Cash App, Venmo, PayPal, Apply Pay, Google Pay, Zelle...)

Do You Anticipate Sending or Receiving Payments Electronically to or from Individuals, Businesses or Organizations?

If Yes, please provide additional details regarding the purpose, source of funds, anticipated amounts, frequency and relationship:

Expected Cash Deposits (i.e., currency, tangible paper, coin) \$ _____ (amount or range) Frequency: Weekly Monthly

Source and Purpose for Deposits

Expected Cash Withdrawals (i.e., currency, tangible paper, coin) \$ _____ (amount or range) Frequency: Weekly Monthly

Purpose of Withdrawals

Do You Anticipate International Wires? Yes No

a. Purpose, Country(ies), Anticipated Amount & Frequency

b. Relationship to Senders/Receivers

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Do You Anticipate Domestic Wires? Yes No

a. Purpose, Anticipated Amount & Frequency

b. Relationship to Senders/Receivers

_____	_____
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How many miles is the business from one of the NASA Federal Credit Union branch offices located in MD, DC, or VA?
Select the appropriate range:

- 1-10 miles 11-25 miles 26-50 miles Over 50 miles

Which branch do you use most often?

We Welcome Any Comments You May Have (Expand on answers from the sections above or use for additional comments. Has your overall experience with the credit union been good? Are you willing to have open communication as your transactions change?)

By signing below, I certify that the information provided above is true and correct, and I understand that the Credit Union may require additional due diligence regarding this account or others, as the activity or transactions change.

Signature

Date