

Certification of Beneficial Ownership



I. General Instructions

Account Number _____

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 members. 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 ultimately 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. This form must also be completed from time-to-time as part of our on-going due diligence and account monitoring responsibilities.

For the purposes of this form, a legal entity includes a corporation, limited liability company, partnership, and any other similar business entity formed in the United States.

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 foreign persons) for the following individuals (i.e., the beneficial owners):

- (i) **Beneficial Owner** – 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) **Controlling Person** – An individual with significant responsibility for managing the legal entity (e.g., a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President or Treasurer).

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)

Persons opening or maintaining a business account relationship on behalf of a legal entity must provide the following information:

A. Name and Title of Individual Opening or Maintaining the Business Account Relationship

B. Name of Business for Which the Account is Being Opened or Maintained

C. Please provide the following information for each individual, if any, who, directly or indirectly, through any contract, arrangement, understanding, relationship or otherwise, owns 25% or more of the equity interests of the legal entity listed above. If no individual meets this definition, please check "Beneficial Owner Not Applicable" below and skip this section.

- Beneficial Owner Not Applicable Another Legal Entity Owns 25% or More of the Business Above

Beneficial Owner 1 Information: _____ % of ownership

Name		Date of Birth (MM/DD/YY)	
Residential Street Address		Address Line 2	
City	State	Zip/Postal Code	Country
For U.S. Persons: Social Security Number		For Non-U.S. Persons: Social Security Number, Passport Number, and Country of Issuance, or other similar identification number.*	

Beneficial Owner 2 Information: _____ % of ownership

Name		Date of Birth (MM/DD/YY)	
Residential Street Address		Address Line 2	
City	State	Zip/Postal Code	Country
For U.S. Persons: Social Security Number		For Non-U.S. Persons: Social Security Number, Passport Number, and Country of Issuance, or other similar identification number.*	

Beneficial Owner 3 Information: _____ % of ownership

Name		Date of Birth (MM/DD/YY)	
Residential Street Address		Address Line 2	
City	State	Zip/Postal Code	Country
For U.S. Persons: Social Security Number		For Non-U.S. Persons: Social Security Number, Passport Number, and Country of Issuance, or other similar identification number.*	

Beneficial Owner 4 Information: _____ % of ownership

Name		Date of Birth (MM/DD/YY)	
Residential Street Address		Address Line 2	
City	State	Zip/Postal Code	Country
For U.S. Persons: Social Security Number		For Non-U.S. Persons: Social Security Number, Passport Number, and Country of Issuance, or other similar identification number.*	

D. The following 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 (C) above may also be listed in this section (D).

Individual with Control Information

Name		Date of Birth (MM/DD/YY)	
Residential Street Address		Address Line 2	
City	State	Zip/Postal Code	Country
For U.S. Persons: Social Security Number		For Non-U.S. Persons: Social Security Number, Passport Number, and Country of Issuance, or other similar identification number.*	

I, _____
(print name of natural person opening account)

hereby certify, to the best of my knowledge, that the information provided above is complete and correct. Furthermore, I agree to notify the Credit Union of any changes in beneficial ownership or to certify beneficial ownership as requested from time to time.

Signature	Date (MM/DD/YY)
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*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 any other government-issued document evidencing nationality or residence and bearing a photograph or similar safeguard.