



## BENEFICIAL OWNERSHIP CERTIFICATION FORM

### CERTIFICATION REGARDING BENEFICIAL OWNERS OF LEGAL ENTITY MEMBERS

#### 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 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 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 a person who is named on the form, a signer on the account, or an individual that is in a position to have this required information on behalf of the legal entity when establishing an account 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.

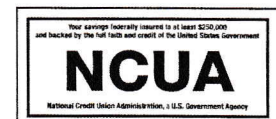
##### What information do I have to provide?

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. **OWNERSHIP:** 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. **CONTROL:** 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 (i)).

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 Owners

Business/Legal Entity Name:	EIN:
Entity Type: <input type="checkbox"/> Corporation (Including Nonprofit) <input type="checkbox"/> General Partnership <input type="checkbox"/> LLC (Limited Liability Company) <input type="checkbox"/> LP (Limited Partnership) or LLP (Limited Liability Partnership) <input type="checkbox"/> Additional Business Type	
Business/Legal Entity Address:	
Account Number(s):	

### Re-Certification: (CREDIT UNION USE ONLY)

☐ By checking this box, you agree that the Beneficial Owner(s) and Control Person have been fully documented within the past 12 months on BSA-001 form dated \_\_\_\_\_, the customer has verified the Beneficial Owner(s) and Control Person have not changed, and the ID Information documented on the referenced BSA-001 is still current and not expired. Skip to the Certification signature box.

**Control Person:** Provide the following information for one individual with significant responsibility for managing the entity, such as: an executive officer or senior manager (i.e. CEO, CFO, COO, President, Vice-President, Treasurer or Corporate Secretary, General Partner or Manager or Managing Member, or, any other individual who regularly performs similar functions). *If appropriate, an individual listed under the Ownership section above may also be listed in this section.*

Name	Date of Birth	Address (Residential or Business Street Address) (City, State and Zip Code)	SSN, ITIN or Passport Number for Non-US Person*	(CREDIT UNION USE ONLY) ID Type ID Number Place of Issuance	(CREDIT UNION USE ONLY) Issue & Expiration Dates Month/Day/Year

*\*In lieu of a passport number, non U.S. Persons may also provide a SSN, and 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.*

**Ownership - Beneficial Owner:** 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 entity.

**BENEFICIAL OWNER NOT APPLICABLE** because (select one): ☐ No Individual owns 25% or more ☐ This is a Nonprofit Entity

Name	Date of Birth	Address (Residential or Business Street Address) (City, State and Zip Code)	SSN, ITIN or Passport Number for Non-US Person*	(CREDIT UNION USE ONLY) ID Type ID Number Place of Issuance	(CREDIT UNION USE ONLY) Issue & Expiration Dates Month/Day/Year

### Certification:

I, \_\_\_\_\_ hereby certify, to the best of my knowledge, that the information provided above is complete and correct. I further agree to notify the financial institution of any change in ownership or control information during the period in which the account is open.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title/Position: \_\_\_\_\_

### (CREDIT UNION USE ONLY) Notes:

Branch Name: \_\_\_\_\_ MSR Name: \_\_\_\_\_