

"To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

What this means for you: When you open an account, we will ask for your name, address, Tax Identification Number, and possibly other information that will allow us to identify you."

To comply with the Patriot Act as well as bank legal standards, we are required to obtain documentation that identifies the business. The Patriot Act requires current documentation (less than one year old) that is generally the result of your business registration with local or state offices which produces the certificate or license for your business operation. To satisfy bank legal standards, we are also required to obtain the legal foundational documents to identify who the owners/members are to ensure the appropriate people are acting on behalf of the corporation with regard to banking activities. The Legal and Patriot Act requirements may not always be the same document.

Today's Date: _____

Customer Account Name: _____ Tax ID #: _____

Legal Designation, select one:

| | | | | |
|-------------------------------|----------------------------|--------------------------|---------------------------|--|
| Corporation | General Partnership | Joint Venture | Limited Liability Company | |
| Limited Liability Partnership | Limited Partnership | Professional Corporation | Public Funds Entity | |
| Sole Proprietorship | Unincorporated Association | | | |

State of Legal Formation: _____ Country of Principal Office: _____

Office Phone #: _____ Country of Legal Formation: _____

Physical Street Address: _____

City, State, Zip: _____

Business Industry or NAICS Code: _____

| | | | | |
|---|----------|----------|------|--|
| Is Your Business an ATM Owner or Operator: | Yes | No | | |
| Does Your Business Process Payments for Other Businesses: | Yes | No | | |
| Does Your Business Offer Money Services Business ² Transactions: | Yes | No | | |
| Does Your Business Issue Virtual Currency ¹ : | Yes | No | | |
| Does Your Business Accept or Exchange Virtual Currency ¹ : | Yes | No | | |
| Does Your Business Engage in Trade Finance (Import/Export): | Yes | No | | |
| What is Your Customer Base: | Consumer | Business | Both | |

Average Annual Sales/Revenue, select one:

| | | | |
|---------------------|---------------------|-----------------------|--------------------------|
| Less than \$100,000 | \$100,000-\$500,000 | \$500,000-\$1,000,000 | Greater than \$1,000,000 |
|---------------------|---------------------|-----------------------|--------------------------|

US Primary Trade Area, select all that apply:

| | | | | | | |
|-------|-----------|-----------|------|---------|-----------|-----------|
| South | Southeast | Southwest | West | Midwest | Northeast | Northwest |
|-------|-----------|-----------|------|---------|-----------|-----------|

If outside the US, name countries: _____

Number of Locations: _____ Year Established: _____

Number of Employees: _____ Website: _____

ID Document, select all that apply:

| | | |
|---|--------------------------------------|---|
| Articles of Incorporation | Articles of Organization | Certificate of Formation |
| Certificate of Good Standing | Certificate of Incorporation | Cert of Registration of Partnership LP/LLP/LLLP |
| Federal/State/City Business License | Gen Partnership Agreement | Limited Liability Corporation Agreement |
| Limited Liability Partnership Agreement | Limited Partnership Agreement | Joint Venture Agreement |
| IRS EIN Assignment Letter | Other Entity Types i.e. Professional | Statement Application of Qualification LLP/LLLP |

Additional Documentation, select all that apply:

| | | | |
|---------------------|---|---------------------|------|
| Borrowing Authority | Corporate By-Laws/Board Meeting Minutes | Operating Agreement | None |
|---------------------|---|---------------------|------|

DISCLOSURE APPENDIX A to § 1010.230 — CERTIFICATION REGARDING BENEFICIAL OWNERS OF LEGAL ENTITY CUSTOMERS

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** customer does not include a natural persons opening accounts on their own behalf or any of the legal entity types below. If your company meets one of these exemptions, please check.

- | | |
|--|---|
| <input type="checkbox"/> Entity on American Stock Exchange | <input type="checkbox"/> Trust-Non Statutory Trust |
| <input type="checkbox"/> Entity on NASDAQ Stock Market | <input type="checkbox"/> Unincorporated Association |
| <input type="checkbox"/> Entity on NY Stock Exchange | <input type="checkbox"/> CFTC Registered Entity * |
| <input type="checkbox"/> Financial Institution (Federal/State Regulated) | <input type="checkbox"/> FSOC-Financial Market Utility * |
| <input type="checkbox"/> Bank Holding Company | <input type="checkbox"/> Foreign Government Monitored Financial Institution * |
| <input type="checkbox"/> Savings Loan Holding Company | <input type="checkbox"/> Foreign Government-No Commercial Activity * |
| <input type="checkbox"/> Governmental Entity | <input type="checkbox"/> SOX Reg Public Accounting * |
| <input type="checkbox"/> Insurance Company (State Regulated) | <input type="checkbox"/> ≥51% Sub - NY Stock Exchange * |
| <input type="checkbox"/> SEC Registered Investment Advisor | <input type="checkbox"/> ≥51% Sub - American Stock Exchange * |
| <input type="checkbox"/> SEC Registered Investment Entity | |
| <input type="checkbox"/> Sole Proprietorship | |

The following Legal Entity customers are only required to provide the Person of Significant Control information on the Certification form. No Beneficial Owner information required. If your company meets one of these exemptions, please check.

- No Owner with 25% Equity Financial Institution Pooled Investment Vehicle * Non-Profit Organizations

* Requires documentary evidence

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 (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.

INTERNAL USE

RM #

ACCOUNT #

COMPANY

TIN

CERTIFICATION OF BENEFICIAL OWNER(S)

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

a. Name and Title of Natural Person Opening Account: _____

 b. Name, Legal Designation, and Address of Legal Entity for Which the Account is Being Opened: _____

c. Entity Tax ID: _____

 d. The following information 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 no individual meets this definition, write "Not Applicable"):

| Name | Date of Birth | Residential or Home Address (Street Address (No PO Box), City, State, Zip, Country) | US Person: SSN Non-US Person: ITIN, Passport # and Issuing Country, or other identification number ¹ |
|------|---------------|---|--|
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 e. 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); Any other individual who regularly performs similar functions. (If appropriate, an individual listed under section (d) above may also be listed in this section (e)).

| Name | Title | Date of Birth | Residential or Home Address (Street Address (No PO Box), City, State, Zip, Country) | US Person: SSN Non-US Person: ITIN, Passport # and Issuing Country, or other identification number ¹ |
|------|-------|---------------|---|--|
| | | | | |

I, _____, hereby certify, to the best of my knowledge, that the information provided above is complete and correct. I also agree to notify the financial institution of any change in such information.

Signature: _____ Date: _____

Phone number: _____

¹In lieu of a passport number, Non-U.S. Persons may also provide an ITIN, 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.