

Member Number \_\_\_\_\_

**Documents required from Beneficial Owners:**

- Copy of US passport
- Copy of proof of address

In lieu of a passport, non-US persons may also provide:

- A copy of a Social Security card in combination with an alien identification card or other government-issued document evidencing nationality or residence and bearing a photograph or similar safeguard.
- Two different government-issued documents evidencing nationality or residence and bearing a photograph.

**Part I: All persons opening an account on behalf of a legal entity must provide the following information.**

Last Name and Title \_\_\_\_\_

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Name and type of Legal Entity for Which the Account is Being Opened \_\_\_\_\_

Legal Entity Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Please check the following boxes that apply to the individual above:

- ☐ This individual owns 20% or more of equity interests of the legal entity listed named above
- ☐ This individual has significant responsibility for managing or directing the entity named above

**Part II. Please complete the requested information below for any individual(s) who either a) own 20% or more of equity interests, b) have significant responsibility for managing or directing the entity, or c) both.**

Last Name \_\_\_\_\_

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_ DOB \_\_\_\_\_

SSN \_\_\_\_\_ For Non-US persons: SSN, Passport # or other similar identification number \_\_\_\_\_

Please check the following boxes that apply to the individual above:

- ☐ This individual owns 20% or more of equity interests of the legal entity listed above
- ☐ This individual has significant responsibility for managing or directing the entity

Last Name \_\_\_\_\_

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_ DOB \_\_\_\_\_

SSN \_\_\_\_\_ For Non-US persons (SSN, Passport # or other similar identification number \_\_\_\_\_

Please check the following boxes that apply to the individual above:

- ☐ This individual owns 20% or more of equity interests of the legal entity listed above
- ☐ This individual has significant responsibility for managing or directing the entity

I, \_\_\_\_\_ (*name of person opening account*), hereby  
certify, to the best of my knowledge, that the information provided above is complete and correct.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Part II. Please complete the requested information below for any individual(s) who either a) own 20% or more of equity interests, b) have significant responsibility for managing or directing the entity, or c) both.**

Last Name \_\_\_\_\_

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_ DOB \_\_\_\_\_

SSN \_\_\_\_\_ For Non-US persons (SSN, Passport # or other similar identification number \_\_\_\_\_)

Please check the following boxes that apply to the individual above:

- ☐ This individual owns 20% or more of equity interests of the legal entity listed above.
- ☐ This individual has significant responsibility for managing or directing the entity

Last Name \_\_\_\_\_

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_ DOB \_\_\_\_\_

SSN \_\_\_\_\_ For Non-US persons (SSN, Passport # or other similar identification number \_\_\_\_\_)

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Last Name \_\_\_\_\_

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_ DOB \_\_\_\_\_

SSN \_\_\_\_\_ For Non-US persons (SSN, Passport # or other similar identification number \_\_\_\_\_)

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