



Certification of Beneficial Owners

Business Formation Type:

<ul style="list-style-type: none"> ➤ Corporation ➤ LLC ➤ Partnership ➤ Secretary of State registered trust (rare) 	<ul style="list-style-type: none"> ➤ Non- Profit ➤ Campaign Account ➤ IOLTA ➤ Condo/Homeowner Association 	<ul style="list-style-type: none"> ➤ Sole Proprietorship/DBA ➤ Non- Incorporated Association ➤ Trust not registered with Secretary of State (common) ➤ Landlord/Tenant Security
Complete Sections 1, 2, 3 & 4	Complete Sections 1, 2 & 4	STOP → Form is not required

Section 1- Entity Information

Name of Entity:
Address:

Section 2- Controlling Individual

Provide the following information for **one individual** with significant responsibility for managing the legal entity listed above, such as:

- 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.

Name	Date of Birth	Physical Address	For U.S. Persons: Social Security Number	For non-US persons: Passport Number and Country of Issuance
				Number: Country of Issuance:

- Corporation, LLC, Partnership and Trust (filed with state) clients **Go to Section 3**
- Non Profit, Campaign, IOLTA and Condo/Homeowner Association clients **Go to Section 4**

Section 3 - Beneficial Owner

Does any individual directly, through and contract, arrangement, understanding, relationship or otherwise, own 25% or more of the equity interests of the entity listed above?

- NO-** Beneficial Owner information is not applicable- **Go to Section 4**
- YES-** Provide the information below for each individual. If appropriate, an individual listed in the Controlling Individual section above may be listed in the Beneficial Owner grid below.

If checked, Owner #1 is the Controlling Individual listed in Section 2, complete name and percentage ownership in grid for Owner #1

	Name	Date of Birth	Physical Address	For U.S. Persons: Social Security Number	For non-US persons:: Passport Number and Country of Issuance	Percentage of Ownership Interest
Owner #1					Number: Country of Issuance:	
Owner #2					Number: Country of Issuance:	
Owner #3					Number: Country of Issuance:	
Owner #4					Number: Country of Issuance:	

Section 4- Certification

By signing below, I certify to the best of my knowledge that the information provided above is complete and correct.

- > I also understand that it is my responsibility to update the bank on any changes to the information provided
- > I am authorized to provide this information on behalf of the legal entity listed above, and I affirm that I am authorized to make the representations made herein.

Printed Name of Individual Opening Account:	Title
Signature:	Date:

For Bank Use

Account number(s): _____
<input type="checkbox"/> Verbally confirmed Beneficial Ownership information on file is accurate - client's signature not required/only complete Section 1 Date: _____