

# Beneficial Ownership

## Legal Entity Ownership by Individuals

BOI

Account Number

Rep ID

**Instructions:** Identify all Beneficial Owner(s) with 25% or more ownership of the Legal Entity opening account. This form must be completed and signed for legal entity accounts opened where the legal entity opening the account is owned by Individuals (i.e. natural persons). The form must be completed, signed and submitted regardless of whether or not there are beneficial owners which meet the 25% threshold as described in Section I below. If no beneficial owners exist, a control person must be provided per Section III below.

### Section I: Legal Entity

#### Name of Legal Entity Opening Account

Exemptions: Legal Entity DOES NOT need to list Beneficial Owners if legal entity opening account is a U.S. publicly traded company (NYSE, AMEX, or NASDAQ) or its parent has at least 51% ownership and is publicly traded, OR a charity or nonprofit legal entity registered under Section 501(c), 527 or 4947(a)(1) of the U.S. Internal Revenue Code that has not been denied tax exempt status.

Question 1: Does the Legal Entity opening account meet the U.S. publicly traded exemption described directly above?

- Yes. (If yes, complete sections IV and V only)  No. (If no, proceed to next Question 2)

Question 2: Does the Legal Entity opening account meet the charity or nonprofit exemption described directly above?

- Yes. (If yes, complete sections III, IV and V only)  No. (If no, proceed to Question 3)

Question 3: Does the Legal Entity opening account have Beneficial Owners with 25% or more ownership?

- Yes. (If yes, complete all remaining sections)  No. (If no, complete sections III, IV and V only)

### Section II: Beneficial Ownership Information

For Legal Entity in Section 1. above, list all individuals (i.e. natural persons) that have an ownership interest of 25% or more of the legal entity.

#### Beneficial Owner 1

Full Legal Name	Date of Birth	Social Security Number	ID Place of Issuance
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Legal Entity Above	Percentage Ownership	ID Type	ID Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Country of Citizenship	Country of Residence	ID Issuance Date	ID Expiration Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Residence Address (no P. O. Boxes)			
<input type="text"/>			

#### Beneficial Owner 2

Full Legal Name	Date of Birth	Social Security Number	ID Place of Issuance
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Legal Entity Above	Percentage Ownership	ID Type	ID Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Country of Citizenship	Country of Residence	ID Issuance Date	ID Expiration Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Residence Address (no P. O. Boxes)			
<input type="text"/>			

#### Beneficial Owner 3

Full Legal Name	Date of Birth	Social Security Number	ID Place of Issuance
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Legal Entity Above	Percentage Ownership	ID Type	ID Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Country of Citizenship	Country of Residence	ID Issuance Date	ID Expiration Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Residence Address (no P. O. Boxes)			
<input type="text"/>			



**Section II: Beneficial Ownership Information (continued)****Beneficial Owner 4**

Full Legal Name	Date of Birth	Social Security Number	ID Place of Issuance
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Legal Entity Above	Percentage Ownership	ID Type	ID Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Country of Citizenship	Country of Residence	ID Issuance Date	ID Expiration Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Residence Address (no P. O. Boxes)			
<input type="text"/>			

**Section III: Complete for all Non-Publicly Traded Legal Entities**

**For the Legal Entity Opening Account in Section 1. above, list one (1) individual with significant responsibility for managing the legal entity, such as:**

- (1) An executive officer or senior manager (e.g, CEO, CFO, COO, Managing Member, General Partner, President, VP or Treasurer; or  
 (2) Any other individual who regularly performs similar functions

Note: If appropriate, an individual listed under section 2 above may also be listed in this section.

**Individual Responsible for Managing Legal Entity**

Full Legal Name	Date of Birth	Social Security Number	ID Place of Issuance
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Legal Entity Above	Percentage Ownership	ID Type	ID Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Country of Citizenship	Country of Residence	ID Issuance Date	ID Expiration Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Residence Address (no P. O. Boxes)			
<input type="text"/>			

**Section IV: Industry / Affiliation Questions**

Are any Beneficial Owners listed above, or Executive Officer, Senior Manager, or Individual with significant responsibility for managing the legal entity: (1) a current or former senior military, government or political official of a non-U.S. country, or (2) an immediate family member or close associate of such an official? If yes, additional information may be required.

Yes  No

Are any Legal Entities or Beneficial Owners listed above, or Executive Officer, Senior Manager, or Individual with significant responsibility for managing the legal entity employed by, have controlling interest or are otherwise affiliated with any of the following activities:

Internet Gambling  Marijuana or Cannabis Business  Embassies, Consulates, and Diplomatic Missions

**Section V: Acknowledgment**

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

\_\_\_\_\_  
 Authorized Person (or Signatory) Signature

\_\_\_\_\_  
 Authorized Person (or Signatory) Name (print)

\_\_\_\_\_  
 Date

