

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 an 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 non-U.S. 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) Everyone, if any, who owns, directly or indirectly, 25% or more of the equity interests of the legal entity customer (e.g. each natural person who owns 25% or more of the shares of the corporation; and
- (ii) An individual with significant responsibility for managing the legal entity customer (e.g. 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 may be identified in 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% 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.

Individual certifying this form on behalf of the legal entity must provide the following information:

A. Person Certifying Form

Name	Date of Birth	Relationship to Legal Entity
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B. Legal Entity Information

Full Business Name	Company EIN / Tax ID
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Physical Address	Legal Entity Type	Legal Entity Identifier
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C. Entity Type

If the account is being opened for any of the following entity types please select all applicable boxes:

- | | | | |
|---|---|---|--|
| ☐ Sole Proprietorship | ☐ Registered with SEC | ☐ public accounting firm registered under Section 102 of the Sarbanes-Oxley Act | ☐ Trust (Not formed by a state filing) |
| ☐ Registered public accounting firm | ☐ Account is being opened to finance the purchase or lease of equipment and for which payments are remitted directly by the financial institution to the vendor or lessor of the equipment | ☐ organized under the laws of the U.S. or any State at least 51% of whose common stock or analogous equity interests are held in a listed entity | ☐ A foreign financial institution established in a jurisdiction where the regulator of such institution maintains beneficial ownership information regarding such institution |
| ☐ Department or agency of the U.S., of any State, or of any political subdivision of a State | ☐ Federal or state Regulated Financial Institution | ☐ entity (other than a bank) whose common stock or analogous equity interests are listed on the New York, American or NASDAQ stock exchanges | ☐ An Estate, which exists without filing with the Secretary of State or equivalent office |
| ☐ Registered with the FTC | ☐ State regulated Insurance Company | ☐ Unincorporated Association (e.g. scout troop, youth sports league) | ☐ U.S. & U.S. state government entity |

1. Are any of the boxes above selected:

- ☐ Yes, proceed, Yes, proceed to the Certification & Agreement Section
- ☐ No, see question below

2. Is the account being opened for an established nonprofit corporation or similar organization that has filed its organizational documents with the appropriate Secretary of State?

- ☐ Yes, proceed to the controlling person section.
- ☐ No, each section below must be completed, including addendum(s) if applicable.

D. Beneficial Owners

I. OWNERSHIP

Please provide the following information for **each** natural person, if any, who directly or indirectly, through any contract, arrangement, understanding, relationship or otherwise, **owns 25% or more** in the equity interests of the legal entity listed above.

* For US Persons: Provide SSN; For Foreign Person(s): Provide Tax Identification number if available

** For U.S. Persons: Driver's License or other government-issued identification documentation. For Foreign Persons: Passport Number and Country of Issuance, or other similar identification number. In lieu of a passport number, foreign persons may also provide an 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 other safeguard.

If there is a legal entity that owns 25% or more of this legal entity customer, please complete the Beneficial Ownership Addendum located on Page 4.

Individual's Full Name	Ownership Percent	Social Security No. / Tax ID No.	Birth Date	Physical Address	Identification: Primary Type, Number, Issuer, date of Issuance & expiration (A copy of the ID must be provided with this form)

☐ Not one natural person directly or indirectly, through any contract, arrangement, understanding; relationship or otherwise, owns 25% or more in the equity interests of the legal entity listed above.

II. Controlling Person

☐ An executive officer or senior manager (e.g. Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President or Treasurer); OR

☐ Any other individual who regularly performs similar functions.

* For US Persons: Provide SSN; For Foreign Person(s): Provide Tax Identification number if available

** For U.S. Persons: Driver's License or other government-issued identification documentation. For Foreign Persons: Passport Number and Country of Issuance, or other similar identification number. In lieu of a passport number, foreign persons may also provide an 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 other safeguard.

Individual's Full Name	Social Security No. / Tax ID No.	Birth Date	Physical Address	Identification: Primary Type, Number, Issuer, date of Issuance & expiration (A copy of the ID must be provided with this form)

E. CERTIFICATION & AGREEMENT TO NOTIFY

I, _____, hereby certify, to the best of my knowledge, that the information provided herein is complete and correct. I also agree to notify Evolve Bank & Trust of any change in the information provided within this Certification.

Signature

Date

Office Use Only

This certification was completed on EB&T account number: _____

Bank product (DDA, CD, etc.): _____

A photo copy of all individuals listed identification on this certification form has been received:

☐ Yes ☐ No

(If No account shouldn't be opened without all documentation collected) Account Representative the certification was collected by: _____ Date: _____

This addendum should be used when there is legal entity or entities that owns 25% or more of the legal entity customer opening this account. If this applies to multiple entities complete a separate addendum for each entity.

Legal Entity Name ¹	
Percent of Ownership in Customer Opening the Account	

Please provide the following information for **each** person or entity, who **owns 25% or more** in the equity interests of the legal entity listed above.

Full Name	Ownership Percent

Are there any individuals listed above? ☐ Yes ☐ No

If you selected "Yes" above, please provide the following information for each natural individual, who directly or indirectly, through any contract, arrangement, understanding, relationship or otherwise, owns 25% or more in the equity interests of the legal entity seeking to open this account².

Individual's Full Name	Ownership Percent	Social Security No. / Tax ID No.	Birth Date	Physical Address	Identification: Primary Type, Number, Issuer, date of Issuance & expiration (A copy of the ID must be provided with this form)

*For US Persons: Provide SSN; For Foreign Person(s): Provide Tax Identification number if available.

** For U.S. Persons: Driver's License or other government-issued identification documentation. For Foreign Persons: Passport Number and Country of Issuance, or other similar identification number. In lieu of a passport number, foreign persons may also provide an 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 other safeguard.

1 Name of the legal entity that has ownership in the legal entity seeking to open the account.

2 Aggregate ownership between the entities to determine total ownership of the legal entity customer seeking to open the account.