

Certification of Beneficial Owners of Legal Entities 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 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 foreign persons) for the following individuals (i.e., the beneficial owners):

- A. 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
- B. 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 A, 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 A, you must provide the identifying information of one individual under section B. 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 B), and up to five individuals (i.e., one individual under section B and four 25 percent equity holders under section A).

Scale Bank will also ask to see a copy of a driver's license or other identifying document for each beneficial owner listed on this form to comply with Customer Identification Program (CIP) requirements.

Please note:

Scale Bank may not open any type of account without obtaining this information.



SCALE Certification of Beneficial Owners of Legal Entities BANK

				,
Legal Entity Name		Tax ID #	!	
Business Type: Corporation Partne	rship LLC Other:	Portfolio #		
DBA Name (if applicable)		Account #		
Street Address	c	City Sta	nte	Zip
Please provide the following information f driver's license (or other identification if driver's license)		w in sections A and B, sign the	form, and retu	ırn with copies of
A. Ownership: Each individual, if any, who or natural person that owns 25% or more of the the circumstances up to four, but as few as	e shares of a corporation). The number of		-	-
First and Last Name	Street Address, City, State, Zip (Residential or Busi	iness)	Date of Birth	Social Security Number
First and Last Name	Street Address, City, State, Zip (Residential or Busi	iness)	Date of Birth	Social Security Number
First and Last Name	Street Address, City, State, Zip (Residential or Busi	iness)	Date of Birth	Social Security Number
First and Last Name	Street Address, City, State, Zip (Residential or Busi	iness)	Date of Birth	Social Security Number
☐ If checked, Beneficial Owner listing rec☐ No individual owns 25% or more☐ Legal entity is a non-profit or charit	quirement is NOT applicable. If checked, in	ndicate reason below.		
B. Control: One individual with significant responsibility for managing the legal entity customer (e.g. a CEO, CFO, COO, Managing Member, General Partner, President, VP, or Treasurer) must be identified. It is possible the same individual might also be identified in Section A above.				
First and Last Name	Street Address, City, State, Zip (Residential or Busi	iness)	Date of Birth	Social Security Number
Title			<u> </u>	
Name of Natural Person opening this accou				
First and Last Name		Title		
I,, hereby certify, to the best of my knowledge, that the information provided above is complete and correct. I also agree to notify Scale Bank of any changes in Beneficial Owners.				
Signature			Date	