

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 individuals associated with a legal entity with any of the following financial institutions: 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.

What information do I have to provide?

This form requires you to provide your name, address, date of birth and Social Security number (or passport number or other similar information, in the case of foreign persons) if you meet the following criteria for individuals (i.e., the beneficial owners):

You have 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) and

You own, directly or indirectly, 10 percent or more of the equity interests of the legal entity customer (e.g., each natural person that owns 10 percent or more of the shares of a corporation)

The number of individuals that satisfy this definition of “beneficial owner” may vary. Depending on the factual circumstances, up to ten individuals (but as few as zero) may need to be identified. Regardless of the number of individuals identified as beneficial owners, the legal entity applying for a new account must provide the identifying information of one individual with significant responsibility for managing the legal entity. 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 percent equity interest).

OWNER IDENTIFICATION SUPPLEMENT

(See National Futures Association Interpretive Notice 9045 - NFA COMPLIANCE RULE 2-9: FCM AND IB ANTI-MONEY LAUNDERING PROGRAM)

Corporation Limited Liability Corporation Trust Partnership Other _____

Account Name: _____

Account Address: _____

Enter the following information for one individual with significant responsibility for managing the legal entity listed above, such as an 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		Job Title		Ownership % (if any)
Address				Does this person control trading for this account?
				Yes <input type="checkbox"/> No <input type="checkbox"/>
Phone			Email	
Social Security Number		If Non-US, then: Foreign Passport # and Country		

Enter the following information for each person and legal entity that **directly or indirectly owns 10% of the account holder**. Attach additional sheets if necessary. Check here if no person or legal entity meets this definition.

Name				
Date of Birth		Job Title		Ownership %
Address				Does this person control trading for this account?
				Yes <input type="checkbox"/> No <input type="checkbox"/>
Phone			Email	
Social Security Number		If Non-US, then: Foreign Passport # and Country		

Name				
Date of Birth		Job Title		Ownership %
Address				Does this person control trading for this account?
				Yes <input type="checkbox"/> No <input type="checkbox"/>
Phone			Email	
Social Security Number		If Non-US, then: Foreign Passport # and Country		

If any other persons and/or entities control the trading of this account, please also complete the Controller Identification Supplement form.

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

X _____
Signature Title Date