

Persons opening an account on behalf of a Legal Entity must provide the following information:

a. Name and Title of Natural Pers	on opening account:
-----------------------------------	---------------------

Account #:

b. Name, Type, and Address of Legal Entity for which the account is being opened:

c. The following information for <u>each</u> individual*, if any, who directly or indirectly, through any contract, arrangement, understanding, relationship, or otherwise, **owns 25% or more** of the equity interests of the Legal Entity listed above:

	Name	Date of Birth	Address (Residential or Business Street Address)	For U.S. Persons: Social Security Number	For Non-U.S. Persons: Social Security Number, Passport Number and Country of Issuance, or other similar identification number ¹	% of Ownership
1						
2						
3						
4						

*If no individual meets this definition, please enter "Not Applicable" above and **explain below** (i.e. All <25%; Charity/Non-Profit; etc.):

Beneficial Owner Detail: As applicable, explain any layers of Beneficial Ownership, etc. (For example, ABC Co. is 50% owned by 123 Corp. 123 Corp. is 50% owned by John Doe; therefore, John is a 25% Beneficial Owner of ABC Co.)

d. The following information for <u>one</u> individual with significant responsibility for managing the Legal Entity listed above:

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. (If appropriate, an individual listed under section (c) above may also be listed in this section (d)).

Name/Title	Date of Birth	Address (Residential or Business Street Address)	For U.S. Persons: Social Security Number	For Non-U.S. Persons: Social Security Number, Passport Number and Country of Issuance, or other similar identification number ¹

¹ In lieu of a passport number, Non-U.S. persons may also provide a Social Security Number, 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 similar safeguard.



I, _____ (name of natural person opening account), hereby certify, to the best of my knowledge, that the information above is complete and correct.

SIGNATURE:

DATE: Legal Entity Identifier (Optional):

CERTIFICATION OF BENEFICIAL OWNER(S)

BENEFICIAL OWNER IDENTITY VERIFICATION:

Beneficial Owner #1:
Driver's License Number, or Other Identifying Document:
State (or Country) of Issue:
Issue Date:
Expire Date:
Secondary Form of Identification:
OFAC Check
COMMENTS:

Beneficial Owner #2:
Driver's License Number, or Other Identifying Document:
State (or Country) of Issue:
Issue Date:
Expire Date:
Secondary Form of Identification:
OFAC Check
COMMENTS:

Beneficial Owner #3:
Driver's License Number, or Other Identifying Document:
State (or Country) of Issue:
Issue Date:
Expire Date:
Secondary Form of Identification:
OFAC Check
COMMENTS:



Beneficial Owner #4:

Driver's License Number, or Other Identifying Document:

State (or Country) of Issue:

Issue Date:

Expire Date:

Secondary Form of Identification:

OFAC Check

COMMENTS:

Individual with Control:	
Driver's License Number, or Other Identifying Document:	
State (or Country) of Issue:	
Issue Date:	
Expire Date:	
Secondary Form of Identification:	
OFAC Check	
COMMENTS:	



Business Account Duty to Inform

As a condition to account opening / retention, the account is being required to:

• Proactively notify the credit union in writing within 30 days of reportable events

Regardless of whether also communicated to the credit union in conversation or by other means, notice to the credit union must be given in writing with physical copy delivered to:

Platinum Federal Credit Union Attention: Member Services 2035 Sugarloaf Circle Duluth, GA 30097

While not intended to be exhaustive, "Reportable Events" include:

- ✓ Indictment and/or prosecution against the Company, any Director or Officer.
- ✓ Regulatory disciplinary action against the Company, any Director or Officer.
- \checkmark Change of control or ownership.
- ✓ Change in the manner / purpose with which credit union account(s) / relationship will be used.

Any event that may reasonably impact potential risk to the credit union in serving the business is expected to be proactively disclosed; the credit union's member has a duty to inform as condition of account opening / maintenance. While the occurrences of a reportable event will not in and of itself result in action to close an account relationship, each account is expected to take prompt, appropriate corrective action to mitigate its risks. If issues are not addressed promptly to the credit union's satisfaction, action may be taken to sever the relationship.

ATTESTATION

By signing below, I hereby certify that the Business will (or the undersigned will cause the business to) provide notice promptly in the manner instructed. I understand the Credit Union is under no obligation to establish and/or maintain a relationship and may, in its sole discretion, choose whether to permit the establishment and ongoing maintenance of an account relationship. While providing the required written notices does not guarantee the retention of any account(s) and/or service(s) relationship for the Business, failure to provide timely, accurate notification may result in disciplinary action such as increased oversight, imposition of higher fees or termination of the account relationship.

- □ *Initial attestation* upon requesting establishment of account relationship.
- □ Recertification of attestation.
 - □ NO reportable events have occurred during the prior attestation period.
 - □ YES; reportable events occurred but were not previously reported (details attached).
 - □ YES; reportable events occurred and were properly reported in writing (copy attached).

Legal Name of Business:		
Printed Name:	Title:	
Signature:	Date:	