

DECLARATION OF

pathward Beneficial Owner

COMPANY NAME:

BENEFICIAL OWNER (Beneficial Ow	ners of 25% or more equity interest.)			
NAME (full legal):		Title:	% Ownership:	
Home Address:		City:	State:	Zip Code:
Phone:	Mobile:	County:		
Date of Birth:	Social Security #:	Email Address:		
Valid Drivers License Number and State, or Valid Passport Number:		United States Citizen?: 🗌 Yes 🗌 No		bies of your Passport; and also nt Resident Card (Form I-551)
Do you have an interest in any other busi	nesses? Yes No If yes, please	explain:		
	NAT (6.11)D		~~~~~	
		Title:	% Ownership:	
Home Address:		City:	State:	Zip Code:
Phone:	Mobile:	County:		
Date of Birth:	Social Security #:	Email Address:		
Valid Drivers License Number and State, or Valid Passport Number:		United States Citizen?: United States Citizen?:	If not, provide Photocop Work VISA or Permaner	bies of your Passport; and also nt Resident Card (Form I-551)
Do you have an interest in any other busi	nesses?	explain:		
NAME (full legal):		Title:	% Ownership:	
Home Address:		City:	State:	Zip Code:
Phone:	Mobile:	County:		
Date of Birth:	Social Security #:	Email Address:		
Valid Drivers License Number and State, or Valid Passport Number:		United States Citizen?: Yes No	If not, provide Photocop Work VISA or Permaner	bies of your Passport; and also ht Resident Card (Form I-551)
Do you have an interest in any other busi	nesses? 🗌 Yes 🗌 No 🛛 <i>If yes, please</i>	explain:		
NAME (full legal):		Title:	% Ownership:	
Home Address:		City:	State:	Zip Code:
Phone:	Mobile:	County:		
Date of Birth:	Social Security #:	Email Address:		
Valid Drivers License Number and State, or Valid Passport Number:		United States Citizen?: 🗌 Yes 🗌 No		bies of your Passport; and also It Resident Card (Form I-551)
Do you have an interest in any other busi	nesses? Yes No If yes, please	explain:		
	idual with significant responsibility for manag	rement and control of logal antity)		
			If ves, and the informa	tion has already been entered
Is this person a Principal/Shareholder?:	☐ Yes ☐ No Is this person listed in c	one of the four entries above?: U Yes U N	lo above, please provide	the NAME only.
NAME (full legal):		Title:	% Owne	rship:
Home Address:		City:	State:	Zip Code:
Phone:	Mobile:	County:		
Date of Birth:	Social Security #:	Email Address:		
Valid Drivers License Number and State, or Valid Passport Number:		United States Citizen?: 🗌 Yes 🗌 No	If not, provide Photocop Work VISA or Permaner	bies of your Passport; and also ht Resident Card (Form I-551)
Do you have an interest in any other busi	nesses? 🗌 Yes 🗌 No If yes, please	explain:		

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

pathward Certification Regarding Beneficial Owners of Legal Entity Customers

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. Collection of this information is mandatory for Pathward, National Association and all other federally regulated financial institutions. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforce-ment 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**):

- (i) 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
- (ii) 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 (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 might be identified under both sections (e.g., the President of Acme, Inc. who also holds a 30 percent 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 percent 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.