

STEP BY STEP GUIDE TO THE BENEFICIAL OWNERSHIP FORM

STEP ONE

- » Enter Firsttrust’s address: 15 E. Ridge Pike, Conshohocken, PA 19428
- » Enter your business address as the Physical Address of Legal Entity
- » Enter your Banker’s name and phone number
- » Enter the TIN/EIN Number
- » Enter the name of your business in the Name of the Legal Entity for Which the Account is Being Opened
- » If your business is exempt from Beneficial Ownership, check this box. Enter the reason for the exemption

Certification of Beneficial Owners of Legal Entities

Financial Institution Location: 15 E. Ridge Pike Conshohocken, PA	Financial Institution Contact Person: Enter your Banker’s Information	Contact Phone Number: Enter your Banker’s Information
Name of Legal Entity for Which the Account is Being Opened: Enter your legal business name		Physical Address of Legal Entity: Enter your business address
Account Number: N/A	CIF Number: N/A	TIN/EIN Number: Enter your TIN/EIN

If checked, business customer is exempt from Beneficial Ownership requirement.
Reason: _____

STEP TWO

- » For all persons owning 25% or more of the business enter the following:
 - First and last name
 - Title
 - Date of birth
 - Social Security Number (SSN#)
 - Foreign persons: Passport number and Counter of Issuance
 - % of ownership
- » If no one has 25% or more ownership, check the box stating Beneficial Ownership listing requirements is Not Applicable

Name	Date of Birth	Address (Residential or Business Street Address)	For U.S. Persons: Social Security Number	For Foreign Persons: Passport Number and country of issuance, or other similar identification number	% Of Ownership
First John	01/01/0000	Street 123 Street	123-45-6789	Number 12345456	100%
Last Smith		City Anytown		Country of Issuance United States	
Title CEO		State & Zip PA, 12345			

If checked, Beneficial Owner listing requirement is Not Applicable.
Note: Even if no individual owns 25% or more of the legal entity the next section must be completed.

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STEP THREE

- » Enter the following information for the **Control Person**:
- First and last name and title
 - Date of birth
 - Address (residential or business)
 - Social Security Number (SSN#)
 - Foreign persons: Passport Number and Counter of Issuance

- » Enter information for the **Person Opening the Account**:
- First and last name
 - Title
 - Enter the name of the person opening the account in the certification statement
 - Person opening the account must sign and date the certification form

Name/Title	Date of Birth	Address (Residential or Business Street Address)	For U.S. Persons: Social Security Number	For Foreign Persons: Passport Number and country of issuance, or other similar identification number
First John Last Smith Title CEO	01/01/0000	Street 123 Street City Anytown State & Zip PA, 12345	123-45-6789	Number 12345456 Country of Issuance United States

Name of Natural Person Opening Account: Linda Smith
Title of Natural Person Opening Account: President

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

I also agree that, if there is a change in the information provided above about the ownership or control of the legal entity, that I will promptly notify Firsttrust Bank of such change.

Signature: _____ Date: _____

STEP FOUR

- » For all persons owning 25% or more of the business, enter the following:
- Drivers License information or
 - Passport or other form of Legal Identification

	Type of Document	Document ID Number	Place of Issuance	Date of Issuance	Expiration Date
Owner 1	<input type="checkbox"/> Driver's License or <input type="checkbox"/> _____	_____	_____	_____	_____
Owner 2	<input type="checkbox"/> Driver's License or <input type="checkbox"/> _____	_____	_____	_____	_____
Owner 3	<input type="checkbox"/> Driver's License or <input type="checkbox"/> _____	_____	_____	_____	_____
Owner 4	<input type="checkbox"/> Driver's License or <input type="checkbox"/> _____	_____	_____	_____	_____
Control	<input type="checkbox"/> Driver's License or <input type="checkbox"/> _____	_____	_____	_____	_____