

Name of Legal Entity:

Address of Legal Entity:

Account #:

CIF Key/TIN:

### MY ENTITY IS A(N)... Please check one.

<input type="checkbox"/>	Unlisted corporation – including C and S Corporations	After signing below, you must also complete <b>all sections</b> of the <u>Certification of Beneficial Owners form</u> . Bring forms with you to open your account.
<input type="checkbox"/>	Limited Liability Company	
<input type="checkbox"/>	Professional Limited Liability Company	
<input type="checkbox"/>	Partnership – General, Limited, Limited Liability	
<input type="checkbox"/>	Professional Service Corporation	
<input type="checkbox"/>	Joint Venture (KY only)	
<input type="checkbox"/>	Non-Profit Agency/Corporation	After signing below, you must also complete the <b>Individual with Control</b> section of the <u>Certification of Beneficial Owners form</u> . Bring forms with you to open your account.
<input type="checkbox"/>	Pooled Investment Vehicle not operated or advised by a financial institution	
<input type="checkbox"/>	Sole Proprietorship	After signing below, bring this form with you to open your account. You do not need to complete the <u>Certification of Beneficial Owners form</u> .
<input type="checkbox"/>	Financial Institution	
<input type="checkbox"/>	Government Agency	
<input type="checkbox"/>	Publicly Traded (Listed Company)	
<input type="checkbox"/>	Subsidiary of Listed Company	
<input type="checkbox"/>	SEC registered company	
<input type="checkbox"/>	Registered public accounting firm	
<input type="checkbox"/>	Bank Holding Company	
<input type="checkbox"/>	Pooled Investment Vehicle operated or advised by a financial institution	
<input type="checkbox"/>	State Regulated Insurance Company	
<input type="checkbox"/>	Financial Market Utility	
<input type="checkbox"/>	Foreign Financial Institution	
<input type="checkbox"/>	Estate	
<input type="checkbox"/>	Trust	
<input type="checkbox"/>	Other Fiduciary	
<input type="checkbox"/>	Unincorporated Association	

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