



A19ABN04181

Beneficial Ownership Form

Section 1 All applicants complete Section 1 - then Go to Section 2 or 3 as applicable

<input type="checkbox"/> New Customer	Full Legal Business Entity Name:	TIN:
<input type="checkbox"/> Existing Customer		

Section 2**Section 2a: If an Exempt Business Type box is checked - Complete Section #5**

Are You One of these Exempt Business Types?		<input type="checkbox"/> Not Exempt
<input type="checkbox"/> US Publicly Traded Company	<input type="checkbox"/> SEC Registered Issuers of Securities	
<input type="checkbox"/> Subsidiary (51% owned by US Publicly Traded Company)	<input type="checkbox"/> SEC Registered Investment Company	
<input type="checkbox"/> US Regulated Financial Institution	<input type="checkbox"/> SEC Registered Investment Adviser	
<input type="checkbox"/> Individual/Family Trust	<input type="checkbox"/> SEC Registered Exchange or Clearing Agency	
<input type="checkbox"/> Municipality/US Government	<input type="checkbox"/> US State Regulated Insurance Company	
<input type="checkbox"/> Sole Proprietorships	<input type="checkbox"/> Foreign Financial Inst. - Beneficial Owners Registered	
<input type="checkbox"/> Unincorporated Associations	<input type="checkbox"/> Foreign - Non-US Governmental Department	
<input type="checkbox"/> Registered Entity with the Commodity Futures Trading Commission		

Section 2b: If This Box Is Checked - Complete Sections 4 and 5

<input type="checkbox"/> There are No Individual Beneficial Owners With 25% or More Ownership

If Sections 2a and 2b were not applicable to the Legal Entity - Complete Sections 3, 4, and 5**Section 3** Provide information for each individual who directly or indirectly owns 25% or more of the Equity Interests of the Legal Entity listed above

Name:		Date of Birth:
Residential Address:		PO Box:
City:	State/Province:	Postal Code:
U.S. Person SSN #:	*Non-US: Passport#/Can DL#:	Country of Issuance:
Name:		Date of Birth:
Residential Address:		PO Box:
City:	State/Province:	Postal Code:
U.S. Person SSN #:	*Non-US: Passport#/Can DL#:	Country of Issuance:
Name:		Date of Birth:
Residential Address:		PO Box:
City:	State/Province:	Postal Code:
U.S. Person SSN #:	*Non-US: Passport#/Can DL#:	Country of Issuance:
Name:		Date of Birth:
Residential Address:		PO Box:
City:	State/Province:	Postal Code:
U.S. Person SSN #:	*Non-US: Passport#/Can DL#:	Country of Issuance:

*In Lieu of passport number, foreign persons may also provide 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.

Section 4 Provide information for one individual with significant responsibility for managing the Legal Entity (Executive Officer or Senior Manager; or other individual who regularly performs similar functions)

Name:		Date of Birth:
Residential Address:		PO Box:
City:	State/Province:	Postal Code:
U.S. Person SSN #:	*Non-US: Passport#/Can DL#:	Country of Issuance:
Title/Position:		

*In Lieu of passport number, foreign persons may also provide 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.

Section 5 Completed and Certified by the Individual (customer) Opening the New Account on Behalf of the Legal Entity

Individual's Name (Business Customer):

Individual's Title:
(TTEE/CEO/Agent, etc.)

Certification:

I _____,
(Printed name of natural person opening account)

hereby certify, to the best of my knowledge, that the information provided above is complete and correct. In addition, I agree to notify Comerica and/or its appropriate subsidiary at the time of any change in beneficial ownership or change of individual with significant responsibility for managing this entity.

It is agreed that this certification may be executed by electronic signatures and such electronic signature shall be as valid as an original manually executed signature. For purposes hereof, "electronic signature" means a manually-signed original signature that is then transmitted by electronic means or a signature through an electronic signature technology platform. It is further hereby agreed that Comerica shall not have any liability of any nature or kind to any person in connection with the acceptance of electronic signatures in connection with this certification. Notwithstanding the foregoing, Comerica may require original manually executed signatures of this certification at any time in its sole discretion.

Signature: _____

Date: _____

For Internal Use ONLY

Verified beneficial ownership information was unchanged:
Banker's Printed Name:

Banker's Signature:

Date: