

Business Account Opening Information Sheet

IMPORTANT ACCOUNT OPENING INFORMATION: Federal law requires us to obtain sufficient information to verify the identity of all authorized signers and the nature of the business. You may be asked several questions and to provide one or more forms of identification to fulfill this requirement. In some instances, we may use outside sources to confirm the information. The information you provide is protected by our privacy policy and federal law.

*****ALL FIELDS IN RED ARE REQUIRED TO BE COMPLETED BEFORE AN ACCOUNT CAN BE OPENED*****

Account #: _____ Officer: _____

Non-Individual Entity Information			
Name (as shown on your income tax return)			
Business name/disregarded entity name (if different from above)		Subtitle (if needed)	
Legal Entity Type	<input type="checkbox"/> Corp <input type="checkbox"/> LLC <input type="checkbox"/> LLP <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Ownership <input type="checkbox"/> PC <input type="checkbox"/> IOLTA <input type="checkbox"/> Other: _____		
Physical Address			
Mailing Address (if different)		Non-Profit Organization?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Phone #(s)		Money Service Business?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, approval is required.
Tax ID		Website URL	
Business Description		NAICS Code	

- ***REQUESTED DOCUMENTATION (select all provided)*****
- **Corporation:** a copy of Articles of Incorporation, Minutes, **and** Bylaws (if applicable)
 - **LLC:** Articles of Organization **and** Operating Agreement ****(IF no Operating Agreement, list Members/Manager:)** _____
 - **LLP:** A copy of the Partnership Agreement
 - **Sole Proprietor:** If applicable, a copy of the Business License, Fictitious Name Statement, or Assumed Name Statement
 - **Unincorporated Organization:** Minutes signed by an officer that includes the discussion concerning account signers
 - *****MUST COMPLETE CERTIFICATION OF BENEFICIAL OWNERSHIP FORM, IF APPLICABLE*****
 - ****Foreign Businesses, Hemp/CBD-Related Businesses, & Money Service Businesses: Notify BSA Officer before opening. Requires APPROVAL and documentation.**

Signer Information 1		Signer Information 2	
Name			
Physical Home Address (not business)			
Cell Phone			
Work Phone			
Home Phone			
BEST E-Mail Address			
SSN / TIN			
Driver's License (or other ID) Number, State, Issue Date, Exp. Date	Number: _____ State: _____ Issue Date: _____ Expiration Date: _____	Number: _____ State: _____ Issue Date: _____ Expiration Date: _____	
Date of Birth			
Occupation (if retired, list previous)			
Employer (if retired, list previous)			
Politically Exposed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
US Citizen? <small>*Non-resident aliens, please complete a W-8BEN form.</small>	<input type="checkbox"/> Yes <input type="checkbox"/> No <small>*If no, list country of citizenship: _____</small>	<input type="checkbox"/> Yes <input type="checkbox"/> No <small>*If no, list country of citizenship: _____</small>	

Signer Information 3		Signer Information 4	
Name			
Physical Home Address (not business)			
Cell Phone			
Work Phone			
Home Phone			
BEST E-Mail Address			
SSN / TIN			
Driver's License (or other ID) Number, State, Issue Date, Exp. Date	Number: _____ State: _____ Issue Date: _____ Expiration Date: _____	Number: _____ State: _____ Issue Date: _____ Expiration Date: _____	
Date of Birth			
Occupation (if retired, list previous)			
Employer (if retired, list previous)			
Politically Exposed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
US Citizen? <small>*Non-resident aliens, please complete a W-8BEN form.</small>	<input type="checkbox"/> Yes <input type="checkbox"/> No <small>*If no, list country of citizenship: _____</small>	<input type="checkbox"/> Yes <input type="checkbox"/> No <small>*If no, list country of citizenship: _____</small>	

- ***Please select all signers who want the following:*****
- ❖ **ATM Card:** Signer 1 Signer 2 Signer 3 Signer 4
 - ❖ **Online Banking:** Signer 1 Signer 2 Signer 3 Signer 4
 - ❖ **Checks:** Signer 1 Signer 2 Signer 3 Signer 4

Know Your Customer Questionnaire Business



Name: _____

❖ Please tell us about your business by providing a detailed summary of the business operations below:	
❖ The primary business activity, products, and/or services offered:	
❖ Purpose of the account and how it will be used (e.g., payroll, etc):	
❖ Are the business clients local, national, or international? (Check all that apply): <input type="checkbox"/> Local <input type="checkbox"/> National <input type="checkbox"/> International	
❖ What will be the primary source of deposits for the account? (e.g., rent checks, sale proceeds, etc):	
❖ What is the average (or expected) monthly revenue for the business?:	
❖ Please list the names of the major suppliers/vendors for the business:	
❖ Website URL for the business:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Does the business have locations outside of the Nashville area? Where?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Is this a foreign based business?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Are there any seasonal factors? (e.g., tourist activity in summer/winter, etc) If so, what season(s)?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Is the business a dealer in foreign exchange? (e.g., buys foreign exchange from one party and then sells it to another party)
<input type="checkbox"/> Yes <input type="checkbox"/> No	Is the business an Internet Gambling Business? <i>If yes, notify BSA Officer before proceeding.</i>
<input type="checkbox"/> Yes <input type="checkbox"/> No	Is the business a Third Party Payment Processor or Third Party Sender? <i>If yes, notify BSA Officer before proceeding.</i>
<input type="checkbox"/> Yes <input type="checkbox"/> No	Will the account be a depository account for public funds? (<i>Public Funds</i> are funds generated by the government to provide goods and services to the general public).
<input type="checkbox"/> Yes <input type="checkbox"/> No	Is anyone who owns, operates, or has signatory authority on the account a non-US citizen?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Is anyone who owns, operates, or has signatory authority on the account a Politically Exposed Person (PEP)? (A 'PEP' generally includes a current or former senior foreign political figure, their immediate family, and their close associates).
<input type="checkbox"/> Yes <input type="checkbox"/> No	Is the business a Professional Service Provider that acts as an intermediary between client(s) and the bank? (e.g., performs services for a client, or arranges for services to be performed on the client's behalf, such as settlement of real estate transactions, asset transfers, management of client monies, investment services, and trust arrangements)
<input type="checkbox"/> Yes <input type="checkbox"/> No	Is the business a Non-Profit Organization or Charitable Organization?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Does the business provide any type of services which would classify it as a Money Service Business (MSB), currency dealer or exchanger? Please check all that apply: <input type="checkbox"/> Virtual Currency Administrator <input type="checkbox"/> Issues, sells, or redeems traveler's checks or money orders <input type="checkbox"/> Virtual Currency Exchanger <input type="checkbox"/> Stored value products <input type="checkbox"/> Check Cashing <input type="checkbox"/> Money transmittal services (i.e. MoneyGram) <input type="checkbox"/> Prepaid access devices (provides or sells) <input type="checkbox"/> Payday loans
<input type="checkbox"/> Yes <input type="checkbox"/> No	Does the business provide any type of financial service? Check all that apply: <input type="checkbox"/> Securities Broker/Dealers <input type="checkbox"/> Casino/Card Club <input type="checkbox"/> Insurance Company <input type="checkbox"/> Pawnbroker <input type="checkbox"/> Investment Advisors <input type="checkbox"/> Dealer in precious metals/stones/jewels <input type="checkbox"/> Loan or Finance Company
<input type="checkbox"/> Yes <input type="checkbox"/> No	Does the business own, operate, or service a private ATM on the premises? <i>If yes, an ATM Questionnaire is required.</i>
<input type="checkbox"/> Yes <input type="checkbox"/> No	Is this an Industrial Hemp / CBD- Related Business? <i>(If yes, please complete a separate Industrial Hemp/CBD Business EDD Worksheet and check one of the following):</i> <input type="checkbox"/> Grower <input type="checkbox"/> Processor <input type="checkbox"/> Retailer
<input type="checkbox"/> Yes <input type="checkbox"/> No	Is the Business/Entity affiliated with, or does it own, any other entities? <i>If yes, please list names and affiliations:</i>

Anticipated Transaction Activity



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- For an existing business, activity may be based on previous bank statements.
- For a new business, please estimate activity based on business plan.

Name: _____ Account #: _____ Date: _____

Anticipated Wire Activity

1) Will there be wires sent from or received into the account? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If yes, completion of each section of the table is required)</i>	Incoming/Outgoing <input type="checkbox"/> Incoming <input type="checkbox"/> Outgoing <input type="checkbox"/> Both	Domestic/International <input type="checkbox"/> Domestic <input type="checkbox"/> International <input type="checkbox"/> Both
Please check the Average Monthly Dollar Range of Wires below: <input type="checkbox"/> \$0.00 – \$10,000 <input type="checkbox"/> \$200,000.01 – \$300,000 <input type="checkbox"/> \$600,000.01 – \$700,000 <input type="checkbox"/> \$10,000.01 – \$50,000 <input type="checkbox"/> \$300,000.01 – \$400,000 <input type="checkbox"/> \$700,000.01 – \$1,000,000 <input type="checkbox"/> \$50,000.01 – \$100,000 <input type="checkbox"/> \$400,000.01 – \$500,000 <input type="checkbox"/> \$1,000,000.01+ <input type="checkbox"/> \$100,000.01 – \$200,000 <input type="checkbox"/> \$500,000.01 – \$600,000	Average # in a Month: <input type="checkbox"/> 0 – 5 <input type="checkbox"/> 31 – 50 <input type="checkbox"/> 6 – 10 <input type="checkbox"/> 51 – 99 <input type="checkbox"/> 11 – 30 <input type="checkbox"/> 100+	
❖ <u>Please explain the purpose of wire activity:</u>		
❖ <u>If international, please list the countries they will be to/from:</u>		

Anticipated ACH Activity

2) Will there be ACH activity on the account? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If yes, completion of each section of the table is required)</i>	Incoming/Outgoing <input type="checkbox"/> Incoming <input type="checkbox"/> Outgoing <input type="checkbox"/> Both	Domestic/International <input type="checkbox"/> Domestic <input type="checkbox"/> International <input type="checkbox"/> Both
Please check the Average Monthly Dollar Range of ACH activity below: <input type="checkbox"/> \$0.00 – \$10,000 <input type="checkbox"/> \$200,000.01 – \$300,000 <input type="checkbox"/> \$600,000.01 – \$700,000 <input type="checkbox"/> \$10,000.01 – \$50,000 <input type="checkbox"/> \$300,000.01 – \$400,000 <input type="checkbox"/> \$700,000.01 – \$1,000,000 <input type="checkbox"/> \$50,000.01 – \$100,000 <input type="checkbox"/> \$400,000.01 – \$500,000 <input type="checkbox"/> \$1,000,000.01+ <input type="checkbox"/> \$100,000.01 – \$200,000 <input type="checkbox"/> \$500,000.01 – \$600,000	Average # in a Month: <input type="checkbox"/> 0 – 5 <input type="checkbox"/> 31 – 50 <input type="checkbox"/> 6 – 10 <input type="checkbox"/> 51 – 99 <input type="checkbox"/> 11 – 30 <input type="checkbox"/> 100+	
❖ <u>Please explain the purpose of ACH activity:</u>		
❖ <u>If international, please list the countries they will be from:</u>		

Anticipated Cash Activity

3) Will there be cash deposits or withdrawals on the account? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If yes, completion of each section of the table is required)</i>		
Please check the Average Monthly Dollar Range of Cash activity: <input type="checkbox"/> \$0.00 – \$10,000 <input type="checkbox"/> \$100,000.01 – \$200,000 <input type="checkbox"/> \$10,000.01 – \$50,000 <input type="checkbox"/> \$200,000.01 – \$300,000 <input type="checkbox"/> \$50,000.01 – \$100,000 <input type="checkbox"/> \$300,000.01+	Average # in a Month: <input type="checkbox"/> 0 – 5 <input type="checkbox"/> 31 – 50 <input type="checkbox"/> 6 – 10 <input type="checkbox"/> 51 – 99 <input type="checkbox"/> 11 – 30 <input type="checkbox"/> 100+	Deposits / Withdrawals: <input type="checkbox"/> Deposits <input type="checkbox"/> Withdrawals <input type="checkbox"/> Both
❖ <u>Please explain the source or purpose of cash transactions:</u>		

Anticipated Official Check Purchase Activity

4) Will there be regular or frequent official check purchases on the account? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If yes, completion of each section of the table is required)</i>		
Please check the Total Average Monthly Dollar Range of Official Checks below: <input type="checkbox"/> \$0.00 – \$10,000 <input type="checkbox"/> \$200,000.01 – \$300,000 <input type="checkbox"/> \$600,000.01 – \$700,000 <input type="checkbox"/> \$10,000.01 – \$50,000 <input type="checkbox"/> \$300,000.01 – \$400,000 <input type="checkbox"/> \$700,000.01 – \$1,000,000 <input type="checkbox"/> \$50,000.01 – \$100,000 <input type="checkbox"/> \$400,000.01 – \$500,000 <input type="checkbox"/> \$1,000,000.01+ <input type="checkbox"/> \$100,000.01 – \$200,000 <input type="checkbox"/> \$500,000.01 – \$600,000	Average # in a Month: <input type="checkbox"/> 0 – 5 <input type="checkbox"/> 31 – 50 <input type="checkbox"/> 6 – 10 <input type="checkbox"/> 51 – 99 <input type="checkbox"/> 11 – 30 <input type="checkbox"/> 100+	
❖ <u>Please explain the purpose of official check activity:</u>		
❖ <u>Please list the individuals or businesses that official checks are expected to be made payable to:</u>		