

Legal Entity Beneficial Ownership Certification Form

THE USA PATRIOT ACT

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. In some cases, Federal law also requires us to verify and record information that identifies the natural persons who control and beneficially own a legal entity that opens an account.

What this means for you: When you open an account, we will ask for names, addresses, dates of birth and other information that will allow us to identify you and certain other natural persons associated with the account. This information will be verified to ensure the identity of all such natural persons.

Purpose

This form must be completed by the person opening a new account on behalf of a legal entity. For the purposes of this form, a legal entity includes a corporation, a limited liability company, a general partnership, statutory trust, a non-profit and any similar business entity formed in the United States.

Important Notes

This form requires you to provide the name, address, date of birth and Social Security number for the following individuals:

- 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).

Section A - Account Information

Persons opening an account on behalf of a legal entity must provide the following information:

- a. Name and Title of Natural Person Opening Account:

- b. Name and Address of Legal Entity for Which the Account is Being Opened:

Section B - Control Person

The following information for one individual with significant responsibility for managing the legal entity listed above, such as: An executive officer or senior manager (e.g., Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, Treasurer); or any other individual who regularly performs similar functions. (If appropriate, an individual listed under section (b) may also be listed in this section (c)).

Name/Title	Date of Birth (mm/dd/yyyy)	Address (residential or business street address)	Social Security Number

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Section C - Beneficial Owner(s)

The following information for each individual, if any, who, directly or indirectly, through any contract, arrangement, understanding, relationship, or otherwise, owns 25 percent or more of the equity interests of the legal entity listed above:

Note: Non-profits do not have to complete this section.

Name/Title	Date of Birth (mm/dd/yyyy)	Address (residential or business street address)	Social Security Number

Section D - Certification

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

Signature: _____ Date (mm/dd/yyyy): _____

I, _____ (name and title of Authorized Person), hereby certify, to the best of my knowledge that the information provided above is complete and correct.

Signature: _____ Date (mm/dd/yyyy): _____

For any questions please contact your financial advisor or call 1 (800) 437-9912

For standard mail delivery, please mail this form to:

DST Asset Manager Solutions Inc.
Attention: Cohen & Steers
PO Box 219953
Kansas City, MO 64121-9953

For private express mail, please mail this form to:

DST Asset Manager Solutions Inc.
Attention: Cohen and Steers
STE 219953
430 W 7th Street
Kansas City, MO 64105-1407