



Name of Business \_\_\_\_\_ Account: \_\_\_\_\_

**Does the business perform any of the following transactions?**

No Yes

- Check cashing services or other monetary instruments
- Issue or Sell Travelers Checks
- Issue or Sell Money Orders
- Issue, Sell or Redeem Stored Value Cards (excluding gift cards from own establishment)
- Deal in Foreign Exchange
- Money Transmission (i.e. Western Union Wire Transfers, Express Money Transfers)
- Operates as a Convenience Store

**Are any of the business activities related to Bitcoin, Cryptocurrency or Digital Currency?**

- Yes
- No

**Does your business process any of the following transactions on behalf of your merchant clients? (Third Party Payment Processor)**

No Yes

- Remotely Created Checks (RCC)
- Credit Card Payments
- Automated clearing house (ACH) transactions
- Debit and prepaid card transactions

**Is the business affiliated, in any way, with marijuana manufacturing/distribution/retail sales of tetrahydrocannabinols (THC), cannabiniols (CBN), cannabidiols/cannabinoids (CBD), or Hemp; OR does business with any company directly or indirectly related with these products or activities?**

- Yes
- No

**Is the purpose of the business to import or export products on behalf of other customers?**

- Yes
- No

**Is the business registered OR headquartered OUTSIDE of the United States?**

- Yes
- No

**Are any owners of the business not a U.S. Citizen or U.S. Permanent Resident?**

- Yes
- No

**STOP: If you answered YES to any of the questions above, the business account CANNOT be opened.**

Is this a full-time business venture?

- Yes
- No

How many people are employed by the business? \_\_\_\_\_

Please provide a list of all parties who have less than 20% ownership interest in the business. Include Full Name & Occupation. *(Not applicable if the business is a Sole Proprietorship, Organization, or Non-Profit)*

How many owners own less than 20%? \_\_\_\_\_

First Name	M.I.	Last Name	Primary Occupation

A Politically Exposed Person is an individual who is entrusted with prominent public functions such as heads of state government or other public offices, politicians, judicial or military officials.

Are any owners considered a Politically Exposed Person (PEP) or has any business or personal relation to a PEP, foreign or domestic?

- Yes (If yes, complete the following Name of Owner(s).)
- No

Name of Owner(s) \_\_\_\_\_

How many business locations do you have (including headquarters/home office/rental property) and provide physical address(s) for each? If there is only one location, and it will be listed as the physical address of the business, simply enter "same as on application". Number of Locations: \_\_\_\_\_

Location #	Address

**Is your business a non-profit Organization, Corporation or LLC? (*If the business is a Sole Proprietorship, Corporation (for profit) or LLC (for profit) – check “No”*)**

- Yes (If yes, the following 4 questions need to be completed.)
- No

**Provide a description of who is served by the non-profit organization.**

**What is the source of funding for the account (i.e. donor base)? Include a description.**

**Provide a description of the beneficiaries who receive the funds from the organization?**

**Does your organization have any affiliations with other organizations, governments or groups? If yes, please provide names of organizations.**

**Provide a detailed description of your business to include the products and services you offer.**

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**Does your business sell products & services via the internet or social media?**

- Yes
- No

**Please provide the website, storefront, username or social media URL: \_\_\_\_\_**

**Does your business or non-profit have a website or social media page?**

- Yes (If yes, please provide the address below.)
- No

**Please provide the website or social media URL: \_\_\_\_\_**

**Where are the business' customers primarily located?**

- Pennsylvania
- National (across United States)
- International
- All of the above

**Is more than 50% of business' income derived from cash sales/provided services?**

- Yes
- No

**Is the business registered in any State to operate small games of chance?**

- Yes
- No

**Please provide your 6-digit NAICS/Industry Code, if known. \_\_\_\_\_**

**Does the business intend to conduct any international transactions?**

- Yes (If yes, the following questions need to be completed.)
- No

**What countries will be involved in these transactions?**

**What is the purpose of the international activity?**

**Does the business own, lease or maintain any ATMs?**

- Yes (If yes, the following questions need to be completed.)
- No

**Who is the owner of the ATM(s)?**

- Business
- Leased from Third Party (please provide name) \_\_\_\_\_
- Other (please provide name) \_\_\_\_\_

**How many ATM locations?** \_\_\_\_\_

**What is the source of cash used to replenish the ATM(s)?**

- Another Financial Institution (please provide name) \_\_\_\_\_
- Armored Car Service (please provide name) \_\_\_\_\_
- Other \_\_\_\_\_

**Members 1st will ask the business owner to complete a Privately-Owned Automated Teller Machine (ATM)**

**Questionnaire for each ATM location and provide documentation for their ATM within 15 days from account opening to include but not limited to the following:**

- ISO Agreement
- Purchase or Sales Agreements
- Lease Agreements
- Third Party Service Agreements
- ATM Provider Contract
- ATM Servicer Contracts (i.e. Armored Car Agreement)
- Prior Bank Statements showing activity

## Business Account Profile - Instructions

Answers to the questions on the Business Account Profile Form are required to assist the credit union in complying with both The Bank Secrecy Act and The USA PATRIOT Act. Explain to the business member that if they provide information later determined to be inaccurate, Members 1st FCU reserves the right to take action that may include account suspension or termination.

### Does the business perform any of the following transactions?

- Check cashing services or other monetary instruments
- Issue or Sell Travelers Checks
- Issue or Sell Money Orders
- Issue, Sell or Redeem Stored Value Cards (excluding gift cards from own establishment)
- Deal in Foreign Exchange
- Money Transmission (Western Union Wire Transfers, Express Money Transfers)
- Operates as a Convenience Stores (A small store that stocks a range of everyday items such as groceries, snack foods, candy, toiletries, soft drinks, tobacco products, and newspapers.)

Businesses that perform the above transactions/services are **not** eligible for membership in accordance with Members 1st Board Policy.

### Are any of the business activities related to Bitcoin, Cryptocurrency or Digital Currency?

Businesses whose activities are related to Bitcoin, Cryptocurrency or Digital Currency are **not** eligible in accordance with Members 1st Board Policy. Virtual/Digital currency is an internet based medium of exchange i.e. wallet providers, bitcoin exchange, payment service providers, venture capital, mining pools, cloud mining, peer to peer lending, exchange-traded funds, over the counter trading, gambling, micro-payments, affiliates and prediction markets. It is distinct from physical currency such as banknotes and coins and is not backed by any country's central bank or government. It can be traded for goods or services with vendors who accept virtual/digital as payment.

### Does your business process any of the following transactions on behalf of your merchant clients? (Third Party Payment Processor)

Third party payment processors often use their bank accounts to conduct payment processing for their merchant clients. The credit union does not have a direct relationship with the merchant. Third-Party Processors are not eligible for membership in accordance with Members 1st Board Policy.

### Is the business affiliated, in any way, with marijuana manufacturing/distribution/retail sales of tetrahydrocannabinols (THC), cannabinols (CBN), cannabidiols/cannabinoids (CBD), or Hemp; OR does business with any company directly or indirectly related with the products or activities?

Businesses affiliated, in any way, with marijuana, tetrahydrocannabinols (THC), cannabinols (CBN), cannabidiols/cannabinoids (CBD) or Hemp manufacturing/distribution/retail sales are **not** eligible for membership in accordance with Members 1st Board Policy. This includes but is not limited to: Growing, Transporting, Distributing, Retail Sales.

### Is the purpose of the business to import or export products on behalf of other customers?

Businesses that exist to provide import/export services are **not** eligible for membership in accordance with Members 1st Board Policy. This does not include businesses that may periodically import or export products for their own retail sales.

### Is the business registered OR headquartered OUTSIDE of the United States?

Businesses registered or headquartered outside of the United States are **not** eligible for membership in accordance with Members 1st Board Policy.

### Are any owners of the business **not** a U.S. Citizen or U.S. Permanent Resident?

Businesses whose ownership includes a non-U.S. Citizen or non-U.S. Permanent Resident are **not** eligible for membership in accordance with Members 1st Board Policy.

**Is this a full-time business venture?**

Does the business owner operate this business as a full-time endeavor?

**How many people are employed by the business?**

What is the total number of people the business employs?

**Please provide a list of all parties who own less than 20% ownership interest in the business. Include Full Name & Occupation. How many owners own less than 20%?**

Indicate the number of parties who have an ownership interest in the business less than 20%, ownership interest 20% or greater will be shown on the *Certificate of Beneficial Owner*. List all persons who have a legal claim in the company, regardless of the percentage of ownership or the extent of their involvement in the business (i.e., silent partner). Provide their full legal name and primary occupation. Please be aware that an owner may have a different primary occupation than that related to their association with the business. (Example: *Mary Smith owns 20% of Beach Rentals LLC; however, her full-time job is a stockbroker*). There will be no owners for Non-Profit Corporations, Organizations or Public Fund Accounts.

**Are any owners considered a Politically Exposed Person (PEP) or has any business or personal relationship to a PEP, foreign or domestic?**

A Politically Exposed Person is an individual who is entrusted with a prominent public function such as heads of state government or other public offices, politicians, judicial or military officials. List the full name of the owner(s) who is a PEP.

**How many business locations do you have (including headquarters/home office/rental property) and provide physical address(s) for each? If there is only one location, and it will be listed as the physical address of the business, simply enter "same as on application".**

List the physical address for each location, including any subsidiary locations or rental properties.

**Is your business a non-profit Organization, Corporation or LLC? (if the business is a Sole Proprietorship, Corporation (for profit) or LLC (for profit) – check "No"**

If the business is a non-profit organization the following questions need to be completed:

**Provide a description of who is served by the non-profit organization.**

**What is the source of funding for the account (i.e. donor base)? Include a description.**

**Provide a description of the beneficiaries who receive the funds from the organization.**

**Does your organization have any affiliations with other organizations, governments or groups?**

**Provide a detailed description of your business to include products and services your business offers.**

Provide a detailed description of the business. The description must include the products or services provided by the business; the individuals or entities who use the products or services; how the products or services are sold or provided.

**Does your business sell products & services via the internet or social media?**

Selling products and services via the internet includes listing them on the business' site or any third-party site such as Amazon, eBay, etc.

**Please provide the website URL**

Provide the business' website or social media address.

**Does your business or non-profit have a website or social media page?**

**Please provide the website URL**

Provide the business' website or social media address.

**Where are the business' customers primarily located?**

Please select from the choices provided.

**Is more than 50% of business' income derived from cash sales/provided services?**

The business's primary means of income is from cash transactions with their customers.

**Is the business registered in any State to operate small games of chance?**

Is the business registered in any state to operate small games of chance, such games include pull-tab games, punchboards, raffles, daily drawings, weekly drawings, race night games, pools (excluding sports pools) or 50/50 drawings.

**Please provide your 6-digit NAICS/Industry Code, if known.**

This is a six-number code which identifies the business type.

**Does the business intend to conduct any international transactions?**

Will the business conduct any international transactions? Wire transfers and automated clearing house (ACH) transactions are the most common types. If they answer yes, answer the following questions.

**What countries will be involved in these transactions?**

List all countries expected to be involved in the international activity.

**What is the purpose of the international activity?**

Explain the reason for the international transactions

**Does the business own, lease or maintain any ATMs?**

Does the business own, lease, house or maintain any ATMs. If the answer is yes, answer the following questions.

**Who is the owner of the ATM(s)?**

Please select from the list. If "Leased" or "Other" is selected, provide the name of the owner or company leased from. (i.e., Owned and maintained by Members 1st FCU, Owned by ABC Company and maintained by Dunbar)

**How many ATM locations?**

How many locations the business owns, leases or maintains ATMs.

**What is the source of cash used to replenish the ATM(s)?**

Select from the choices and provide further clarification in the spaces provided.

Please be aware that, as a service, Members 1st does not provide cash for businesses to maintain their ATM(s).