

# Meeder Funds

## Certification of Beneficial Owner Form

### GENERAL INSTRUCTIONS

#### Who has to complete this form?

Federal regulation requires this form to be completed by a representative of a legal entity when a new account is opened or changes are made to an existing account. For the purposes of this form, a legal entity includes a corporation, limited liability company, partnership, and any other similar business entity formed in the United States or a foreign country that is privately held. Legal entity does not include sole proprietorships, unincorporated associations, or individuals opening account on their own behalf. In addition, the legal entity generally does not include trusts unless the trust is a statutory trust that usually files with the state.

#### What information do I have to provide?

This form requires you to provide the name, address, date of birth and social security number (or passport number or other similar information, in the case of foreign persons) for the following individuals (i.e., the beneficial owners):

- (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);
- (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).

The number of individuals that satisfy this definition of “beneficial owner” may vary. Under section (i), depending on the factual circumstances, up to four individuals (but as few as zero) may need to be identified. Regardless of the number of individuals identified in section (i), you must provide the identifying information of at least one individual under section (ii). It is possible that in some circumstances the same individual might be identified under both sections (e.g., the President may also hold a 30 percent equity interest). Therefore, a completed form will contain the identifying information of one individual (as the controlling party under section ii) and may contain up to four individuals who are 25 percent equity holders under section (i), but will not exceed five individuals in total for the two sections. Meeder requires a copy of a driver's license or other identifying document for each beneficial owner listed on this form.

#### Who can sign the form?

An individual who meets one or more of the criteria below is authorized to sign the form:

- (i) An individual who is authorized to open an account on the behalf of the legal entity;
- (ii) An individual who actively maintains a position within the legal entity's C-Suite (large scale entity structures); or
- (iii) An individual who is the Owner, President or Vice President (small scale entity structures).

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COMPLETE THE CUSTOMER INFORMATION, BENEFICIAL OWNER(S), CONTROLLING PARTY, AND THE ACKNOWLEDGEMENT SECTIONS.

## CUSTOMER INFORMATION

BUSINESS NAME

BUSINESS ADDRESS

CITY

STATE

ZIP CODE

U.S. TAX IDENTIFICATION NUMBER (EIN)

Please provide the following information for all individuals who directly or indirectly own 25 percent or more equity in the above named business. If percentage of ownership is less than 25 percent, please check the box below.

NO INDIVIDUALS OWN 25% OR MORE EQUITY IN THE ABOVE NAMED BUSINESS

IS THE INDIVIDUAL A U.S. CITIZEN?

## BENEFICIAL OWNER(S)

1. FULL LEGAL NAME

STREET ADDRESS  
(CURRENT RESIDENTIAL ADDRESS)

CITY

STATE

ZIP CODE

SSN/I-TIN

DATE OF BIRTH

PERCENTAGE OF OWNERSHIP

FOR FOREIGN PERSONS:  
PASSPORT NUMBER

COUNTRY OF ISSUANCE

If the above named individual indirectly maintains ownership of the business, please disclose the business in which the individual maintains direct ownership of:

2. (if applicable)

FULL LEGAL NAME

STREET ADDRESS  
(CURRENT RESIDENTIAL ADDRESS)

CITY

STATE

ZIP CODE

SSN/I-TIN

DATE OF BIRTH

PERCENTAGE OF OWNERSHIP

FOR FOREIGN PERSONS:  
PASSPORT NUMBER

COUNTRY OF ISSUANCE

If the above named individual indirectly maintains ownership of the business, please disclose the business in which the individual maintains direct ownership of:

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### CONTROLLING PARTY

Please provide the following information for one individual who has significant responsibility for managing the above named business, such as the Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, President, Vice President, Treasurer or an individual who regularly performs similar functions. Note, an individual listed in the first section may also be listed in this section.

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IS THE INDIVIDUAL A U.S. CITIZEN?

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FULL LEGAL NAME

TITLE OR POSITION

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STREET ADDRESS  
(CURRENT RESIDENTIAL ADDRESS)

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CITY

STATE

ZIP CODE

---

SSN/I-TIN

DATE OF BIRTH

PERCENTAGE OF OWNERSHIP

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FOR FOREIGN PERSONS:  
PASSPORT NUMBER

COUNTRY OF ISSUANCE

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## CUSTOMER ACKNOWLEDGEMENT

I \_\_\_\_\_ (name of person completing this form), hereby certify to the best of my knowledge that the information provided is correct and complete.

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TITLE OR POSITION

DATE

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SIGNATURE

The legal entity agrees to notify Meeder if any information in this form changes and provide us with other documents we request supporting that change.