

BMO FUNDS CHANGE OF BENEFICIAL OWNERS FOR A LEGAL ENTITY FORM

IMPORTANT NOTICE – 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 to you: When you open an account or make changes to 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 or making changes to an 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, 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).

For help with this form, or for more information, call us toll-free at 1-800-236-FUND(3863) or 414-287-8555.

IMPORTANT: Use this form to provide beneficial owner information on a new account you are opening OR to change information we currently have on your account OR to add Beneficial Owners to an inherited IRA – be sure to complete ALL Pages.

1. Account Information

Name of Legal Entity

Name and Title of Natural Person Making Changes to Beneficial Owners or Control Persons

List the account number(s) you wish to make changes on:

2. Change to be Made

- Add a Beneficial Owner Remove a Beneficial Owner or Control Person
- 25% owner 25% owner
- Control Person Control Person
- Both Both

3. 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	Citizenship (If not United States of America provide your passport number and country of origin here and attach a copy of your passport.)	Add	Remove
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>

4. 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 (3) above may also be listed in this section (4)).

Name/Title	Date of Birth (mm/dd/yyyy)	Address (residential or business street address)	Social Security Number	Citizenship (If not United States of America provide your passport number and country of origin here and attach a copy of your passport.)	Add	Remove
					<input type="checkbox"/>	<input type="checkbox"/>

5. Certification

I, _____ (name of the natural person opening account or making changes to the account), hereby certify, to the best of my knowledge that the information provided in this form is complete and correct.

Signature

Date (mm/dd/yyyy)

Title

6. Mailing Information

Regular Mail:

BMO Funds—U.S. Services
P.O. Box 219006
Kansas City, MO 64121-9006

Overnight Mail:

BMO Funds—U.S. Services
430 W 7th Street Suite 219006
Kansas City, MO 64105-1407