



Beneficial Owner Form

For Use If Customer is an Entity

HIGH RIDGE
— F U T U R E S —

Account Name

Tax ID

Account Address

Please provide the information below for each individual who owns, directly or indirectly, 10% or more of the equity interests of the legal entity customer. Attach additional sheets if necessary.

Name and Title of Natural Person Opening the Account on Behalf of the Legal Entity Customer:

1. _____
Name

_____ Address _____ Date of Birth (mm/dd/yyyy)

_____ Country of Citizenship _____ Percentage Ownership _____ Social Security Number (For Foreign Persons: Passport Number and Country of Issuance)

2. _____
Name

_____ Address _____ Date of Birth (mm/dd/yyyy)

_____ Country of Citizenship _____ Percentage Ownership _____ Social Security Number (For Foreign Persons: Passport Number and Country of Issuance)

3. _____
Name

_____ Address _____ Date of Birth (mm/dd/yyyy)

_____ Country of Citizenship _____ Percentage Ownership _____ Social Security Number (For Foreign Persons: Passport Number and Country of Issuance)

If a beneficial owner of the customer (entity) is one or more entities, please fill in the information below. Complete additional copies of this form, if necessary, until you have reached the individual (personal) owners of all entities along with their percentage ownership at each level.

1. _____
Full Legal Name of Entity Business Purpose

_____ Full Legal Business Address

_____ Percentage Ownership _____ Taxpayer ID Number (U.S. or foreign)

2. _____
 Full Legal Name of Entity Business Purpose

Full Legal Business Address

Percentage Ownership Taxpayer ID Number (U.S. or foreign)

3. _____
 Full Legal Name of Entity Business Purpose

Full Legal Business Address

Percentage Ownership Taxpayer ID Number (U.S. or foreign)

Provide 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.

The individual listed here may also be listed as a beneficial owner above, but this section must still be completed.

Name Date of Birth (mm/dd/yyyy)

Address Country of Citizenship

Social Security Number (For Foreign Persons: Passport Number and Country of Issuance)

Please Sign Below:

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

X _____

Signature Print Name Date