

BSA / CDD PROFILE FORM

Bank Secrecy Act — Customer Due Diligence
FinCEN Beneficial Ownership Requirements | 31 CFR 1010.230

SECTION 1: LEGAL ENTITY INFORMATION

Legal Entity Name: Doe Industries LLC

Entity Type: Limited Liability Company (LLC)

State of Organization: Delaware

Date of Establishment: 03/15/2018

Tax Identification Number (EIN): 82-1234567

Secretary of State Number: DE-7891234

NAICS Code: 541511 - Custom Computer Programming Services

Principal Place of Business:

Street Address: 1234 Innovation Drive, Suite 500

City: Austin

State: TX

ZIP Code: 78701

Country: United States

Mailing Address (if different):

Street Address: P.O. Box 5678

City: Austin

State: TX

ZIP Code: 78701

Business Phone: (512) 555-0142

Business Email: compliance@doeindustries.com

Website: www.doeindustries.com

SECTION 2: RISK ASSESSMENT

Customer Risk Rating:

Risk Level	Selected
LOW	
MEDIUM	[X]
HIGH	

Industry Classification: Technology / Software Development

Risk Factors Assessment:

Risk Factor	Applicable
Cash-intensive business	[]
Foreign transactions or connections	[]
High-volume wire transfers	[X]
Politically Exposed Person (PEP)	[]
OFAC / Sanctions list match	[]
Prior suspicious activity reports (SAR)	[]
Complex ownership structure	[X]

Non-profit or charity	<input type="checkbox"/>
Money Services Business (MSB)	<input type="checkbox"/>
Marijuana-related business	<input type="checkbox"/>

Business Activities Description: Custom software development, cloud infrastructure consulting, and SaaS platform licensing for enterprise clients.

SECTION 3: BENEFICIAL OWNERSHIP DECLARATION

List all individuals who own 25% or more of the legal entity, and one individual with significant management responsibility (Control Person).

Beneficial Owner 1 (Control Person)

Full Legal Name: John Michael Doe

Date of Birth: 07/22/1985

Social Security Number: 123-45-6789

Ownership Percentage: 60%

Ownership Type: Direct

Title / Role: Managing Member / CEO

Residential Address:

Street: 5678 Maple Avenue

City: Austin

State: TX

ZIP: 78702

Government-Issued ID:

ID Type: Driver's License

ID Number: DL-98765432

Issuing State/Country: Texas

Expiration Date: 11/22/2028

Beneficial Owner 2

Full Legal Name: Jane Elizabeth Doe

Date of Birth: 03/14/1988

Social Security Number: 987-65-4321

Ownership Percentage: 40%

Ownership Type: Direct

Title / Role: Chief Financial Officer

Residential Address:

Street: 5678 Maple Avenue

City: Austin

State: TX

ZIP: 78702

Government-Issued ID:

ID Type: US Passport

ID Number: P-567891234

Issuing Country: United States

Expiration Date: 06/30/2030

SECTION 4: CERTIFICATION AND SIGNATURE

I hereby certify, to the best of my knowledge, that the information provided above is complete and correct. I understand that the information provided will be used to verify the identity of the above-named legal entity and its beneficial owners in accordance with the Bank Secrecy Act and FinCEN's Customer Due Diligence Rule (31 CFR 1010.230).

I acknowledge that providing false or misleading information may constitute a federal criminal offense under 18 U.S.C. § 1001.

Authorized Representative Name: John Michael Doe

Title: Managing Member / CEO

Signature: _____ John M. Doe _____

Date Signed: 01/15/2026

Bank Officer Certification:

Certifier Name: Sarah K. Williams

Title: VP, BSA/AML Compliance Officer

Attestation Date: 01/15/2026

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