Non-Profit Account Enhanced Due Diligence Questionnaire



This questionnaire is designed to help the Credit Union identify the needs of our members and to understand the type, size, and frequency of transactions. Some transactions carry a higher degree of risk, which requires enhanced due diligence. We appreciate your cooperation. Please answer all questions in their entirety. Failure to respond may result in the suspension of accounts and services.

Member Information				
Registered Non-Profit Name		Account Number		
Fictitious or DBA Name (if any)		Form Completed by		
List the State(s) Where the Non-Profit is	registered:			
Telephone Numbers: Non-Profit Office:	Authorized Signer Cell:		Alternative:	
Provide your Organizations Website Address and Social Media Platform handle(s)				
Description of the Organization				
Purpose of this account				
Non-Profit Location Type: (i.e., home office, office bldg., office suite)				
Where Else Did/Do You Hold an Accoun	t for this Non-Profit? If the account wa	is closed, what w	vas the reason?	
Activities: (i.e., youth group, educational, religious, animal welfare) and provide a brief description of the non-profit				

Structure: (i.e., board of directors, comm	nittees, trustees, executives)	1
Recordkeeping Requirements: (i.e., the	types of records kept, timeframe the records a	are kept and where)
Number of Volunteers:	Number of paid personnel: (i.e., f	ounders, directors, officers, staff)
Are donations tax exempt?	No (Please attach a copy of the IRS letter or	explain whether you plan to apply to the IRS)
Donor base: (i.e., individuals, corporate	, foundations)	
How does the organization solicit dona	ations? (i.e., online-GoFundMe, Mobile-text-to-give	e QR codes, direct mail, phone, fundraisers, events)
How does the organization advertise?	(i.e., website, publications, social media, blog,	merchandise)
Transaction Information		
Please Select All Activities that Apply	to Your Business:	
Money Services Business (MSB) act the transmission of funds, dealings		oney orders, travelers checks, gift cards, wires o
☐ Finance/Lending	☐ Lottery Ticket Sales	☐ Use of a Courier or Armored Car Service
☐ Deal in Virtual Currencies	Import from or Export to Any Foreign Countries	☐ Cash Intensive Business
☐ Hold Client Funds (i.e., Escrow, Investments)	☐ Vehicle Sales	☐ Safe Deposit Box Rental
Marijuana or Related Services	Act as a Third-Party Payment Processor	☐ None of the Above
☐ Internet Gambling	Privately Owned ATM (ATM on Premises)	
Expected Transaction Types (ACH, ch	ecks, cash, wire, check card) Check all that	apply:
Automated Clearing House (ACH) Electronic Debit/Credit	☐ Purchase of Monetary Instruments	Cash - Currency (Paper/Coin)
☐ Wires - Domestic (within U.S.)	Checks/Drafts	☐ Merchant Services Transactions
Wires - International	☐ Check Card	Other Electronic Transactions (Square/Cash App, Venmo, PayPal, Apple Pay, Google Pay, Zelle)
Expected Number of Transactions (ACH, checks, cash, wire, check card) per m	nonth:
Deposits #	Withdrawals #	

\$0-\$1,000 One-time a. Purpose of Wire?	onic Transactions (Cash App, Venmo, Payl \$1,000-\$3,000 \$3,000-\$5,000 Multiple times/month Monthly	\$5,000-\$10,000 \$10,000 and above Quarterly Bi-Annually Annually b. What Is Your Relationship To Sender and/or Receiver?
Expected Cash I \$0-\$1,000 One-time Source and Purpose	Deposits (i.e., currency, tangible paper, dollars/coins) ☐ \$1,000-\$3,000 ☐ \$3,000-\$5,000 ☐ Multiple times/month ☐ Monthly of Deposits	\$5,000-\$10,000 \$10,000 and above Quarterly Bi-Annually Annually
Expected Cash V \$\times \\$0-\\$1,000\$ One-time Purpose of Withdrav	Withdrawals (i.e., currency, tangible paper, dollars/coins) ☐ \$1,000-\$3,000 ☐ \$3,000-\$5,000 ☐ Multiple times/month ☐ Monthly wals	\$5,000-\$10,000 \$10,000 and above Quarterly Bi-Annually Annually
Expected Intern	ational Wires	tgoing
One-time a. Source/Purpose?	☐ Multiple times/month ☐ Monthly	Quarterly Bi-Annually Annually b. To/From Which Countries Do you Anticipates Sending or Receivi
c. What Is Your Relat	ionship To Sender and/or Receiver?	
Expected Dome \$0-\$1,000 One-time a. Source/Purpose?	stic Wires	ing Both None \$5,000-\$10,000 \$10,000 and above Quarterly Bi-Annually Annually b. What Is Your Relationship To Sender and/or Receiver?
How many miles Select the approp		al Credit Union branch offices located in MD, DC, or VA?
☐ 1-10 miles	☐ 11-25 miles	☐ 26-50 miles ☐ Over 50 miles
additional inf	ORMATION AND COMMENTS	
	l certify that the information provided above due diligence regarding this account or oth	e is true and correct, and I understand that the Credit Union may ers, as the activity or transactions change.

Date

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Signature