

BENEFICIAL OWNER INFORMATION

FILL IN USING BLOCK CAPITALS!

1. Client information

1.1. Surname, name _____ 1.2. Identity code _____

2. Declaration on the beneficial owners*

2.1. Surname, name			
2.2. Identity code			
2.3. For international clients:			
Date of birth			
Identity document series and No.			
Date of issue			
Issuing authority			
Issuing country			
Valid till:			
2.4. Citizenship			
2.5. Tax residence country, taxpayer No.			
2.6. Reason for relation to the tax residence country			
2.7. Is the beneficial owner a U.S. person***? (if so, please fill out the U.S. taxpayer identification form)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.8. Is the beneficial owner a politically exposed person (PEP)***?	<input type="checkbox"/> No <input type="checkbox"/> PEP family member <input type="checkbox"/> Yes, PEP <input type="checkbox"/> Close associate of a PEP	<input type="checkbox"/> No <input type="checkbox"/> PEP family member <input type="checkbox"/> Yes, PEP <input type="checkbox"/> Close associate of a PEP	<input type="checkbox"/> No <input type="checkbox"/> PEP family member <input type="checkbox"/> Yes, PEP <input type="checkbox"/> Close associate of a PEP

 The Client's accounts have more than 3 (three) beneficial owners. Please fill out Annex No. 1 "Beneficial Owner Information".

3. Confirmation

I confirm acquaintance with the following definitions and clarifications:

* **Beneficial owner** – an individual controlling the client or for whose benefit, in whose interest the business relations are being established.

** **United States person** – any person meeting at least one of the following criteria: 1) The individual has citizenship or a valid residence permit (Green Card) in the U.S.; 2) The individual's tax residence country is the U.S.; 3) The individual was born in the U.S.; 4) The legal entity has a phone number with a U.S. country code; 5) The legal entity is registered in the U.S.; 6) The residential or correspondence address of the individual is in the U.S. (including a P.O. Box in the U.S.); 7) A Power of Attorney has been issued to an individual/legal entity with an address in the U.S.

*** **Politically exposed person (PEP):**

- 1) **A person** currently or formerly employed in major public office, including a supreme official of state government, head of a state administrative unit (municipal government), head of government, minister (deputy minister or deputy to the deputy minister, if the relevant country has such a position), state secretary, or other high-level official in government or a state administrative unit (municipal government), parliament deputy or member of an equivalent legislative body, member of the management body (board) of a political party, judge (member of a court institution) in a constitutional court, supreme court or other court instance, member of the board or council of a supreme audit institution, member of the board or council of a central bank, ambassador, charge d'affaires, senior officer of the armed forces, member of the board or council of a state corporation, executive (director, deputy director) or member of the board of an international organisation, or any person holding an equivalent position in such an organisation, within the Republic of Latvia, a member state or third country.
- 2) **A PEP family member:**
 - a) Spouse or equivalent. A person is considered an equivalent of a spouse only if the laws of the relevant state provide for such status;
 - b) Child, child of a spouse or equivalent, or their spouse or equivalent;
 - c) Parent, grandparent or grandchild;
 - d) Brother or sister.
- 3) **A close associate of a PEP** – an individual known to have business or other close ties to one of the aforementioned, to be a stockholder or shareholder in the same corporation as one of the aforementioned, or an individual that is the sole owner of a legal entity known to have been established for the actual benefit of one of the aforementioned.

**Questionnaire for a domestic individual
Annex No. 1**

I am informed that the Bank processes personal data in accordance with applicable personal data protection laws and regulations of the Republic of Latvia and European Union, and the General Terms of Business, and Personal data processing policy. The purpose of data processing: clarification of the beneficial owner. More information about the Personal data processing policy of the Bank is available here: <https://www.blueorangebank.com/en/information-on-processing-of-personal-data>.

4. Questionnaire filled in by

4.1. Surname, name of the Client _____ 4.2. Signature _____

4.3. Filled out in _____ Date

d	m	y	y

(country, city)**Representative of the Bank**

Surname, name _____ Signature _____

Date

d	m	y	y