Account Opening Booklet

Hong Kong Branch



Welcome to EFG Bank AG

Thank you for choosing EFG Bank AG, Hong Kong branch (the "**Bank**", which expression shall include its permitted successors, assigns, transferees and persons deriving title under any of them). References to "we", "our" or "us" shall be construed accordingly.

To open an account with the Bank, please complete, sign and deliver to the Bank the Account Opening Booklet and provide any other information and documentation that the Bank may request.

By signing this Account Opening Booklet, you accept the terms of this Account Opening Booklet and the General Conditions and Risk Disclosure Statements ("General Conditions") of the Bank as well as such other additional terms and conditions as may be required by the Bank (as applicable and as may be amended, supplemented, restated or novated from time to time) (collectively, the "Agreement"). Upon our confirmation that your application for an account with Bank has been accepted, the terms and conditions of the Agreement shall govern our relationship with you and the services made or to be made available by the Bank to you. All terms and references used in this Account Opening Booklet shall have the same meaning as used in the General Conditions, unless otherwise defined.

Please read the terms and conditions of the Agreement carefully, in particular the Risk Disclosure Statements set out in the General Conditions. The Agreement is binding on you. Please consider taking independent legal or other professional advice before entering into the Agreement with us if you consider appropriate.

The Bank highly values your comments. You may provide comments and opinions on our services through the following channels:

- talk to us in person; or
- e-mail to "A.HKCPL@efgbank.com"; or
- direct call to the Compliance Department at (852) 2298-3283; or
- send us a letter.

The Bank is a licensed bank under the Banking Ordinance (Cap. 155 of the Laws of Hong Kong). The Bank is also a registered institution under the Securities and Futures Ordinance (Cap. 571 of the Laws of Hong Kong) in respect of Type 1 (dealing in securities), Type 4 (advising on securities) and Type 9 (asset management) regulated activities under CE Number AFV863.

We look forward to bringing you our high quality services.

INDEX

Section 1	Account Mandate and Client	P.4 - 6
Section 2	Declarations Client Information	P.7 - 39
	(A) Individual / Joint Account (including Sole Proprietorships / Partnerships) (B) Corporate Account (C) Trustee Account	P.7 - 15 P.16 - 24 P.25 - 39
Section 3	eBanking Services and Reference Currency	P.40
Section 4	Signature Card	P.41
Section 5	Hong Kong Deposit Protection Scheme- Information Disclosure	P.42
Schedule 1 -	Notice Terms of General Authority	P.43
Schedule 2 -	Terms of General Authority (except to create any security interest or encumbrance over any assets)	P.44
Schedule 3 -	Terms of Limited Authority	P.45 - 46

APPENDIX

Appendix 1 -	Declaration of Identity of the Beneficial Owner (Form A)	P.47
Appendix 2 -	Establishing of the Beneficial Owner's Identity in the case of Collective Investments or Investment Companies (Form C)	P.48 - 49
Appendix 3 -	Information on Life Insurance Policies with Separately Managed Accounts/Securities Accounts (Form I)	P.50
Appendix 4 -	Establishing of the Controlling Person of Operating Legal Entities and Partnerships Both Not Quoted on the Stock Exchange (Form K)	P.51
Appendix 5 -	Foundations and Underlying Companies of Foundations (Form S)	P.52 - 54
Appendix 6 -	Declaration for Trusts and Underlying Companies of Trust (Form T)	P.55 - 57
Appendix 7 -	Declaration of U.S. Tax Status and Confirmation of Residence for Tax Purposes (Controlling Person)	P.58 - 63
Appendix 8 -	Self-Certification Form for Individuals for Tax Purposes	P.64 - 69
Appendix 9 -	Confirmation of Residence for Tax Purposes and AEOI / CRS Status (Entity)	P.70 - 76

Section 1 ACCOUNT MANDATE AND CLIENT DECLARATIONS

- 1. I/We hereby request and authorise the Bank, at its absolute discretion, to open or continue (as the case may be) one or more Accounts or any further Accounts upon my/our Instructions from time to time on the terms of the Agreement.
- 2. I/We irrevocably agree and confirm that all Services of the Bank to me/us and all my/our Accounts with the Bank from time to time shall be subject to the Agreement, and the Agreement shall be legally binding on me/us. I/We understand that the Bank may at any time and from time to time amend, supplement, restate or novate the Agreement in accordance with the terms of the Agreement, and such amendment, supplement, restatement or novation shall also be legally binding on me/us.
- 3. Without limiting the Bank's rights under the Agreement:
 - a. I/We hereby authorise the Bank to act on any Instructions given by me/us in accordance with the authority set out in the Account Opening Booklet or other Account Mandate (as the same may be amended, supplemented or replaced by me/us from time to time in the manner required by the Bank).
 - b. I/We confirm that all the information, documents and representations, provided to the Bank in respect of any Accounts and Services (including for account opening purposes) are truthful, correct and complete, and that the Bank shall be authorised to confirm the same from any sources it may choose. The Bank is entitled to rely fully on such information, documents and representations for all purposes.
 - c. I/We undertake to promptly inform the Bank in writing of any change of the information provided to the Bank in the Account Opening Booklet, and immediately upon occurrence of such changes to supply the Bank with certified copies or other form of such documents as the Bank may require for the purpose of opening or maintaining the Account(s) with the Bank.
 - d. I/We acknowledge that the Bank reserves the right not to open or maintain any Account or provide any Services to me/us if I/we fail to provide any information or document which the Bank may reasonably require from time to time.
- 4. I/We hereby confirm that, unless specifically stated in the Account Opening Booklet or otherwise notified to the Bank in writing:
 - a. I/We am/are the sole beneficial owner(s) of all assets and funds in the Account(s), free and clear of all liens, encumbrances and charges whatsoever other than those in favour of the Bank;
 - b. I/We am/are transacting on my/our own account as principal and am/are not trading on behalf of or as a trustee or nominee for any other person; and
 - c. I/We am/are the person(s) ultimately responsible for originating the Instructions in relation to any Transactions and no other person stands to gain commercial or economic benefits from the Transactions and/or to bear their commercial or economic risks.
- 5. I/We authorise the Bank to send all mail correspondence including but not limited to statements, advices, contract notes, receipts and confirmations to me/us at (in respect Personal / Joint Accounts) the residential address of the Client in (A1) of Section 2A; (in respect of Corporate Accounts) the registered office address of the Client in Section 2B; and (in respect of Trustee Accounts) registered office address of the corporate trustee or the residential address of the first-named individual trustee in Section 2C (as applicable), unless otherwise indicated below or through specific Instructions to the Bank:

Communications from the Bank to the Client by mail shall be sent to the following address(es):

6. I/We authorise the Bank to send to me/us and I/we consent to receive information by email or other electronic messages using the email address(es) stated in Section 2 below or at such other email address(es) that are indicated below or as may be notified to the Bank in writing by me/ us from time to time.

Electronic communications from the Bank to the Client shall be sent to the following email address(es):

7. I/We authorise the Bank to send to me/us and I/we consent to receive information by SMS and other electronic messages using the mobile phone number(s) stated in Section 2 below or at such other mobile phone number(s) that are indicated below or as may be notified to the Bank in writing by me/us from time to time.

Electronic communications from the Bank to the Client shall be sent to the following mobile phone number(s):

- 8. I/We authorise the Bank to accept and act on, subject to the Agreement, phone Instructions given or purported to be given by me/us or any of my/our Authorised Person(s), if appointed, in accordance with the relevant authorisation even if the signing conditions require more than one person to sign.
- 9. I/We authorise the Bank to accept and act on, subject to the Agreement, fax Instructions given or purported to be given by me/us or any of my/our Authorised Person(s), if appointed, in accordance with the relevant authorisation.
- 10. I/We authorise the Bank to accept and act on, subject to the Agreement, email or other electronic Instructions given or purported to be given by me/us or any of my/our Authorised Person(s), if appointed, in accordance with the relevant authorisation even if the signing conditions require more than one person to sign.
- 11. I/We acknowledge receipt of a copy of the General Conditions (including the Risk Disclosure Statements in Part F of the General Conditions) which was provided to me/us in a language of my/our choice, that I/we were invited to read the General Conditions (including the Risk Disclosure Statements) as well as this Account Opening Booklet (including the Hong Kong Deposit Protection Scheme Information Disclosure Notice), the Personal Information Collection Statement, to ask questions and take independent advice if I/we wish.
- 12. I/We acknowledge receipt of a copy of the Bank's Personal Information Collection Statement. I/We agree that the Bank may disclose and use my/our personal information in accordance with the Bank's Personal Information Collection Statement and the General Conditions, in particular the provisions of Clause 16 of section 1 of Part B of the General Conditions.
- 13. I/We further agree that the Bank may use my/our personal data in section 7(i) of the Bank's Personal Information Collection Statement to contact me/us about the classes of services, products and subjects listed in section 7(ii) of the Bank's Personal Information Collection Statement. I/We understand that the Bank requires my/our consent to do so. The Bank may also disclose my/our personal data to the parties listed in section 7(iii) of the Bank's Personal Information Collection Statement to enable them to market their products and services to me/us within the classes of services, products and subjects listed in the Bank's Personal Information Collection Statement. I/We understand that the Bank requires my/our written consent to do so. I/We agree that the Bank and other EFG Bank Group Members may send marketing information to me/us by such means as the Bank may prescribe. I/ We understand that the Bank may not receive money or other property in return (except photocopying charges) for providing my/our personal data to the other persons listed in the Bank's Personal Information Collection Statement.
- □ Please tick this if you do not wish your personal data to be used for direct marketing activities stated in paragraph 13 above.

- 14. I/We acknowledge and agree that the Bank may collect, store, process, use, disclose and transfer personal data relating to me/us (including my/our CID and BCAN(s)) as required for the Bank to provide services to me/us in relation to securities listed or traded on the Stock Exchange of Hong Kong (SEHK) and for complying with the rules and requirements of SEHK and the Securities and Futures Commission (SFC) in effect from time to time. Without limiting the foregoing, this includes:
 - a. disclosing and transferring my/our personal data (including CID and BCAN(s)) to SEHK and/ or the SFC in accordance with the rules and requirements of SEHK and the SFC in effect from time to time;
 - b. allowing SEHK to: (i) collect, store, process and use my/our personal data (including CID and BCAN(s)) for market surveillance and monitoring purposes and enforcement of the Rules of the Exchange of SEHK; and
 (ii) disclose and transfer such information to the relevant regulators and law enforcement agencies in Hong Kong (including, but not limited to, the SFC) so as to facilitate the performance of their statutory functions with respect to the Hong Kong financial markets; and (iii) use such information for conducting analysis for the purposes of market oversight; and
 - c. allowing the SFC to: (i) collect, store, process and use my/our personal data (including CID and BCAN(s)) for the performance of its statutory functions including monitoring, surveillance and enforcement functions with respect to the Hong Kong financial markets; and (ii) disclose and transfer such information to relevant regulators and law enforcement agencies in Hong Kong in accordance with applicable laws or regulatory requirements.

I/We also agree that despite any subsequent purported withdrawal of consent by me/us, my/our personal data may continue to be stored, processed, used, disclosed or transferred for the above purposes after such purported withdrawal of consent.

Failure to provide the Bank with my/our personal data or consent as described above may mean that the Bank will not, or will no longer be able to, as the case may be, carry out my/our trading instructions or provide me/us with securities related services (other than to sell, transfer out or withdraw your existing holdings of securities, if any).*

*Note: The following terms used in this declaration shall bear the meanings as defined in paragraph 5.6 of the Code of Conduct which are as follows:

- (a) "BCAN" means a "Broker-to-Client Assigned Number", being a unique identification code in the format prescribed by SEHK, generated by a relevant licensed or registered person in accordance with SEHK's requirements;
- (b) "BCAN-CID Mapping File" means the data file containing a client's the BCAN and CID of all clients of a relevant licensed or registered person in the format prescribed by the SEHK from time to time; and
- (c) "CID" means the client identification data, which is the following information in relation to a client to whom a BCAN is assigned:
 - the full name of the client as shown in the client's identity document; ->
 - the issuing country or jurisdiction of the identity document;
 - the identity document type; and
 - the identity document number.

Section 2 Client Information

Type of Account:

l	
Ī	•

Personal / Joint Account (including Sole Proprietorships / Partnerships) - Please complete Section 2A. Corporate Account - Please complete Section 2B. Trustee Account - Please complete Section 2C.

Section 2A PERSONAL / JOINT ACCOUNT (INCLUDING SOLE PROPRIETORSHIPS / PARTNERSHIPS)

ACCOUNT NAME:

(A) CLIENT DETAILS:

Please complete the following in respect of each account holder / each sole proprietor / each partner of a partnership.

(A1)	First Name(s):	Last Name:
	Chinese Name (if applicable): Nationality:	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.)
	Date of Birth:	Occupation:
		Telephone: (Home) (Office) (Mobile) Fax: Email:
	(if different)	
(A2)	First Name(s):	Last Name:
	Chinese Name (if applicable):	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be
	Nationality:	provided.)
	Date of Birth:	Occupation:
	Residential Address:	Telephone: (Home) (Office) (Mobile)
		Fax:
	Permanent Address: (if different)	Email:

(A3)	First Name(s):	Last Name:
	Chinese Name (if applicable):	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.)
	Date of Birth:	Occupation:
	Residential Address: Permanent Address: (if different)	Telephone: (Home) (Office) (Mobile) Fax: Email:
(A4)	First Name(s):	Last Name:
		Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.)
	Nationality: Date of Birth:	Occupation:
		Telephone: (Home) (Office) (Mobile) Fax:
	Permanent Address:	Email:
For	sole proprietorships / partnerships,	
(A5)	Full Name:	Business Registration No. and Business Commencement Date:
	Telephone:	Fax: Email:

(B) AUTHORISED SIGNATORY(IES) (OTHER THAN CLIENT(S)) WITH GENERAL AUTHORITY (IN ACCORDANCE WITH THE TERMS OF GENERAL AUTHORITY SET OUT IN SCHEDULE 2 HEREOF):

(B1)	First Name(s):	Last Name:	
	Chinese Name (if applicable):	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must	
	Nationality:	be provided.)	
	Date of Birth:	Occupation:	
	Residential Address:	Telephone: (Home) (Office) (Mobile) Fax:	
	Permanent Address: (if different)	Email: Transaction Limit (if any):	
	-		
(B2)	First Name(s):	Last Name:	
	Chinese Name (if applicable) -	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must	
	Nationality:	be provided.)	
	Date of Birth:	Occupation:	
	Residential Address:	Telephone: (Home) (Office) (Mobile)	
	Permanent Address:	Fax:	
	(if different)	Transaction Limit (if any):	
(B3)	First Name(s):	Last Name:	
	Chinese Name (if applicable)		
	Nationality:	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.)	
	Date of Birth:	Occupation:	
	Residential Address:	Telephone: (Home) (Office) (Mobile) Fax:	
	Permanent Address: (if different)	Email: Transaction Limit (if any):	
	-		

(B4)	First Name(s):	Last Name:
	Chinese Name (if applicable):	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.)
	Date of Birth:	Occupation: Telephone: (Home) (Office) (Mobile)
	Permanent Address: (if different)	Fax: Email: Transaction Limit (if any):

(C) AUTHORISED REPRESENTATIVE(S) WITH LIMITED AUTHORITY (IN ACCORDANCE WITH THE TERMS OF LIMITED AUTHORITY SET OUT IN SCHEDULE 3 HEREOF):

(C1)	First Name(s):	Last Name:
	Chinese Name (if applicable):	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.)
	Nationality: Date of Birth: Residential Address:	Occupation: Telephone: (Home) (Office) (Mobile) Fax:
	Permanent Address: (if different)	Email: Transaction Limit (if any):
(C2)	First Name(s):	Last Name:
	Chinese Name (if applicable):	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.)
	Nationality: Date of Birth:	Occupation:
	Residential Address:	Telephone: (Home) (Office) (Mobile)
	Permanent Address: (if different)	Fax: Email: Transaction Limit (if any <u>):</u>

(D) SIGNING CONDITIONS

FOR JOINT ACCOUNT CLIENTS / PARTNERSHIP CLIENTS: (please initial box)

Unless otherwise indicated in the signing conditions below and the Terms of General Authority set out in Schedule 1 hereof (if applicable), the Bank shall be entitled to accept Instructions given by and documents signed by any one Joint Holder / partner (whose specimen signatures are provided to the Bank on the Signature Card or in other manner acceptable to the Bank), unless and until the Bank receives a written signed notice from the Client to amend the signing conditions and Terms of General Authority (if applicable) and the Bank accepts such amendment.

Any One Signature	Any Two Signatures
Any (Specify No.) Signatures	All Signatures
With Chop (if applicable)	Other Manner (please specify):

FOR AUTHORISED SIGNATORY(IES) (OTHER THAN CLIENT(S)) WITH GENERAL AUTHORITY (IN ACCORDANCE WITH THE TERMS OF GENERAL AUTHORITY SET OUT IN SCHEDULE 2 HEREOF): (please initial box)

The Bank shall be entitled to accept Instructions given by and documents signed by the Authorised Signatory(ies) (if any) (whose specimen signatures are provided to the Bank on the Signature Card or in other manner acceptable to the Bank) subject to the Terms of General Authority set out in Schedule 2 hereof and the signing conditions below, unless and until the Bank receives a written signed notice from the Client to amend the Terms of General Authority and signing conditions and the Bank accepts such amendment.

Any One Signature	Any Two Signatures
Any (Specify No.) Signatures	All Signatures
With Chop (if applicable)	Other Manner (please specify):

FOR AUTHORISED REPRESENTATIVE(S) WITH LIMITED AUTHORITY (IN ACCORDANCE WITH THE TERMS OF LIMITED AUTHORITY SET OUT IN SCHEDULE 3 HEREOF): (please initial box)

The Bank shall be entitled to accept Instructions given by and documents signed by the Authorised Representative(s) (if any) (whose specimen signatures are provided to the Bank on the Signature Card or in other manner acceptable to the Bank) subject to the Terms of Limited Authority set out in Schedule 3 hereof and the signing conditions below, unless and until the Bank receives a written signed notice from the Client to amend the Terms of Limited Authority and signing conditions and the Bank accepts such amendment.

Any One Signature	Any Two Signatures
Any (Specify No.) Signatures	All Signatures
With Chop (if applicable)	Other Manner (please specify):

By signing below, I/we agree and confirm all the matters set out in the Account Mandate and Client Declarations (including whether to receive direct marketing as indicated in paragraph 13 thereof) as well as the Account Opening Booklet:

★Name of Client / *Authorised Signatory/ *Authorised Representative (A1)	↑ Signature
♠Name of Client / *Authorised Signatory/ *Authorised Representative (A2)	● Signature
★Name of Client / *Authorised Signatory/ *Authorised Representative (A3)	
★Name of Client / *Authorised Signatory/ *Authorised Representative (A4)	
Date:	
Witnessed by:	

Name : Designation / Position:

Date: _____

A.

Account No: _____

WE HEREBY CERTIFY THAT:

The following resolutions were agreed on ______ by each of the partners of the Partnership at a meeting duly held and convened in accordance with the constitutional documents of the Partnership, having confirmed that each partner, Authorised Signatory and Authorised Representative had received and reviewed copies of the Account Opening Booklet (including the Hong Kong Deposit Protection Scheme –Information Disclosure Notice), the Personal Information Collection Statement, General Conditions (including the Risk Disclosure Statements) and all other relevant documentation provided by EFG Bank AG, Hong Kong Branch (the "Bank") and each partner having disclosed all his interests in the subject-matter of the meeting. Unless the context otherwise requires, terms defined herein shall have the same meanings as in the General Conditions of the Bank.

* Delete as appropriate

IT WAS RESOLVED THAT:

- Account(s) be opened with the Bank and Services be utilised by the Partnership on the terms and conditions specified in the Account Opening Booklet, General Conditions as well as such other additional terms and conditions as may be required by the Bank (as applicable and as may be amended, supplemented, restated or novated from time to time) (collectively, the "Agreement"), and that this Partnership Certificate be duly signed by all partners, or by such other person(s) as the Bank may accept, and duly delivered to the Bank.
- 2. The granting of the following power(s) of attorney (in the form circulated to all the partners of the Partnership) (collectively, the "Power(s) of Attorney", and each a "Power of Attorney") by the Partnership and their execution (under seal) and delivery by the below-mentioned individual(s) for and on behalf of the Partnership in accordance with the Partnership's constitutional documents be and is hereby approved:
 - *General Power of Attorney appointing the following individual(s) as Authorised Signatory(ies) (who are Client(s)) (with general authority):

Name(s) of Authorised Signatory(ies):

- (a) _____
- (d) _____
- (e)
- (f)

To be executed (under seal) and delivered for and on behalf of the Partnership by any *one / *two / *____of the following individual(s):

(a)	
(b)	
(c)	
(d)	
(e)	
(f)	

- (2) *General Power of Attorney appointing the following individual(s) as Authorised Signatory(ies) (with general authority (except to create any security interest or encumbrance over any assets)): Name(s) of Authorised Signatory(ies):
 - (a) _____

 - (d) ______
 - (e) _____
 - (f)

To be executed (under seal) and delivered for and on behalf of the Partnership by any *one / *two / *____of the following individual(s):

- (a) _____
- (b) ______ (c) _____
- (d) _____
- (d) _____
- (e) ______(f)

(3) *Limited Power of Attorney appointing the following individual(s) as Authorised Representative(s) (with limited authority):

Name(s) of Authorised Representative(s):

To be executed (under seal) and delivered for and on behalf of the Partnership by any *one / *two / *____of the following individual(s):

- 3. Each partner, Authorised Signatory and Authorised Representative having confirmed that he had read and fully understood the Agreement, the same be approved.
- 4. The Account Opening Booklet shall be signed for and on behalf of the Partnership by any *one / *two / *____ of the following individual(s):
 - (1) _____(Name)
 - (2) _____ (Name)
 - (3) _____(Name)
 - (4) _____ (Name)

and the Client, Authorised Representative(s) and Authorised Signatory(ies) named in the Account Opening Booklet be and they are hereby duly authorised, within the limits specified in the Account Opening Booklet and the Power(s) of Attorney, to open any and all Accounts of, to utilise all or any Services made available to, the Partnership (including without limitation, credit facilities whether on a secured or unsecured basis, foreign exchange trading services including on a margin basis, treasury and derivative services, non-discretionary and discretionary investment services), to approve (with or without amendment), sign, (if required, seal) or execute in accordance with the Partnership's constitutional documents and the Power(s) of Attorney all relevant documentation in respect thereof, including without limitation to, any documentation required by the Bank from time to time including documentation relating to any Collateral or any amendments and variations to the Agreement or annexures or supplementals to the Agreement, to give Instructions to the Bank in respect of any and all Accounts and Services, to receive, examine and verify statements of accounts and other documents or instruments and to give and receive good and valid receipts and discharges for all sums received or paid in connection with any of the above, and generally to do all such other acts and things and take all such other steps and exercise such discretion as they may consider expedient or desirable for the purpose of or in connection with all or any of the above matters.

- 5. The assets of the Partnership held by the Bank from time to time and any other security required by the Bank from time to time shall be held as Collateral in accordance with the terms of the General Conditions to secure all liabilities of the Partnership from time to time to the Bank.
- 6. These Resolutions and the Power(s) of Attorney shall continue in full force and effect and the Bank shall be entitled to rely upon and act pursuant to the same until such time as the Bank shall have received actual notice that they have been revoked, superseded, amended or varied.
- B. All the partners have signed the above Resolutions in accordance with the Partnership's constitutional documents. The above Resolutions and the Power(s) of Attorney have not been revoked, superseded, amended or varied in any manner and are in full force and effect as of the date hereof.
- C. The Account Opening Booklet contains a true, complete and correct list of all the partners, Authorised Signatories and Authorised Representatives of the Partnership as at the date hereof.
- D. The specimen signatures set out in the Signature Card attached are the authentic signatures of the persons named therein, and the specimen chop (if any) attached to such Signature Card is the duly authorised chop of the Partnership.
- E. Attached to the Account Opening Booklet are true and complete copies of the Partnership's constitutional documents as at the date hereof.
- F. The representations and warranties set out in the Agreement are true, correct and not misleading in any material particular.

Remark: Client's own mandate (if any) is not required upon completion of this partnership certificate.

Certified by:

≜Signature

Name: Position: Partner

Date: _____

≜Signature

Name: Position: Partner

Date: _____

Section 2B CORPORATE ACCOUNT

ACCOUNT NAME:

(A) CLIENT DI	ETAILS:				
Name of Corporat	ion:		Incorporation Registration N	/ lo.:	
Country of Incorporation / Registration:			Date of Incorporation Registration:		
Registered Office	Addres <u>s:</u>				
Business Address (if different):					
Nature of Busines					
Telephone:		Fax:	Em	ail:	
Individual Director(s):	<u>Name</u>	<u>Residential Address (and F</u>	Permanent Add	lress if different)	<u>Passport/HKID No.*:</u> (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.)
(1)					
(2)					
(3)					
(4)					
<u>Corporate</u> Director(s):	Name of Corporation	Registered Office Address (a <u>Address</u> if different)	and Business	Country of Incorporation/ Registration and Incorporation/ Registration No.	<u>Name and</u> Passport/ HKID No. of Director(s)
(1)					
(2)					
<u>Secretary:</u>	<u>Name</u>	<u>Residential Address (and Po</u>	ermanent Addr	<u>ess if different)</u>	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No.
(1)					must be provided.)

(B) AUTHORISED SIGNATORY(IES) (who are Directors) WITH GENERAL AUTHORITY (IN ACCORDANCE WITH THE TERMS OF GENERAL AUTHORITY SET OUT IN SCHEDULE 1 HEREOF):

(B1)	First Name(s):	Last Name:
	Chinese Name (if applicable):	
	Nationality:	
	Date of Birth:	Occupation:
	Telephone:	
	(Office) (Mobile)	Fax:
	Email:	Transaction Limit (if any):
(B2)	First Name(s):	Last Name:
	Chinese Name (if applicable):	
	Nationality:	
	Date of Birth:	Occupation:
	Telephone:	
	(Home) (Office)	Fax:
	(Mobile)	Transaction Limit (if any):
	Email:	
(B3)	First Name(s):	Last Name:
	Chinese Name (if applicable):	
	Nationality:	
	Date of Birth:	Occupation:
	Telephone: (Home)	
	(Office) (Mobile)	
		Fax:
	Email:	Transaction Limit (if any):
(B4)	First Name(s):	Last Name:
	Chinese Name (if applicable):	
	Chinese Name (if applicable): Nationality:	
		Occupation:
	Nationality: Date of Birth: Telephone: (Home)	
	Nationality: Date of Birth: Telephone:	Occupation:
	Nationality: Date of Birth: Telephone: (Home) (Office)	

(C) AUTHORISED SIGNATORY(IES) (who are not Directors) WITH GENERAL AUTHORITY (IN ACCORDANCE WITH THE TERMS OF GENERAL AUTHORITY SET OUT IN SCHEDULE 2 HEREOF):

(C1)	First Name(s):	Last Name:
	Chinese Name (if applicable):	Passport/HKID No.*: (*Delete as appropriate -
	Nationality:	For HK permanent residents, HKID No. must be provided.)
	Date of Birth:	Occupation: Telephone:
	Residential Address:	(Home) (Office) (Mobile)
		Fax:
	Permanent Address:	Email:
	(if different)	Transaction Limit (if any):
(C2)	First Name(s):	Last Name:
	Chinese Name (if applicable):	Passport/HKID No.*:
		(*Delete as appropriate -
		For HK permanent residents,
	Nationality:	HKID No. must be provided.)
	Date of Birth:	Occupation:
		Telephone: (Home)
	Residential Address:	(Office) (Mobile)
		Fax:
	Permanent Address:	Email:
(if different)		Transaction Limit (if any):
(C3)	First Name(s):	Last Name:
	Chinese Name (if applicable):	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.)
	Nationality:	
	Date of Birth:	Occupation:
	Residential Address:	Telephone: (Home) (Office) (Mobile)
		Fax:
	Permanent Address:	Email:
	(if different)	Transaction Limit (if any):

(C4)	First Name(s):	Last Name:
	Chinese Name (if applicab	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be
Natio	Nationality:	provided.)
	Date of Birth:	Occupation:
	Residential Address:	Telephone: (Home) (Office) (Mobile)
		Fax:
	Permanent Address:	Email:
	(if different)	Transaction Limit (if any):

(D) AUTHORISED REPRESENTATIVE(S) WITH LIMITED AUTHORITY (IN ACCORDANCE WITH THE TERMS OF LIMITED AUTHORITY SET OUT IN SCHEDULE 3 HEREOF):

(D1)	First Name(s):	Last Name:
	Chinese Name (if applicable):	
		Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.)
	Nationality:	
	Date of Birth:	Occupation:
	Residential Address:	Telephone: (Home) (Office) (Mobile)
		Fax:
	Permanent Address:	Email:
	(if different)	Transaction Limit (if any):
(D2)	First Name(s):	Last Name:
	Chinese Name (if applicable):	
		Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.)
	Nationality:	No. must be provided.)
	Date of Birth:	Occupation:
	Residential Address:	Telephone: (Home) (Office) (Mobile)
		Fax:
	Permanent Address:	Email:
	(if different)	Transaction Limit (if any):

(E) SIGNING CONDITIONS

FOR AUTHORISED SIGNATORY(IES) (who are Directors) (IN ACCORDANCE WITH THE TERMS OF GENERAL **AUTHORITY SET OUT IN SCHEDULE 1 HEREOF):** (please initial box)

The Bank shall be entitled to accept Instructions given by and documents signed by the Authorised Signatory(ies) (who are Directors) (if any) (whose specimen signatures are provided to the Bank on the Signature Card or in other manner acceptable to the Bank) subject to the Terms of General Authority set out in Schedule 1 hereof and the signing conditions below, unless and until the Bank receives a written signed notice from the Client to amend the Terms of General Authority and signing conditions and the Bank accepts such amendment.

Any One Signature

Any Two Signatures

All Signatures

Any _____ (Specify No.) Signatures

With Chop (if applicable)

Other Manner (please specify):_____

FOR AUTHORISED SIGNATORY(IES) WITH GENERAL AUTHORITY (who are not Directors) (IN ACCORDANCE WITH THE TERMS OF GENERAL AUTHORITY SET OUT IN SCHEDULE 2 HEREOF): (please initial box)

The Bank shall be entitled to accept Instructions given by and documents signed by the Authorised Signatory(ies) (who are not Directors) (if any) (whose specimen signatures are provided to the Bank on the Signature Card or in other manner acceptable to the Bank) subject to the Terms of General Authority set out in Schedule 2 hereof and the signing conditions below, unless and until the Bank receives a written signed notice from the Client to amend the Terms of General Authority and signing conditions and the Bank accepts such amendment.

Any One Signature

Any Two Signatures

(Specify No.) Signatures All Signatures Any

With Chop (if applicable)

Other Manner (please specify):_____

FOR AUTHORISED REPRESENTATIVE(S) WITH LIMITED AUTHORITY (IN ACCORDANCE WITH THE TERMS OF **LIMITED AUTHORITY SET OUT IN SCHEDULE 3 HEREOF):** (please initial box)

The Bank shall be entitled to accept Instructions given by and documents signed by the Authorised Representative(s) (if any) (whose specimen signatures are provided to the Bank on the Signature Card or in other manner acceptable to the Bank) subject to the Terms of Limited Authority set out in Schedule 3 hereof and the signing conditions below, unless and until the Bank receives a written signed notice from the Client to amend the Terms of Limited Authority and signing conditions and the Bank accepts such amendment.

Any One Signature

Any Two Signatures

All Signatures

Any (Specify No.) Signatures

With Chop (if applicable)

Other Manner (please specify):_____

By signing below, I/we agree and confirm all the matters set out in the Account Mandate and Client Declarations (including whether to receive direct marketing as indicated in paragraph 13 thereof) as well as the Account Opening Booklet:

↑Name of *Director / *Authorised Signatory/ *Authorised Representative (A1)	≜ Signature
▲Name of *Director / *Authorised Signatory/ *Authorised Representative (A2)	∱Signature
♠Name of *Director / *Authorised Signatory/ *Authorised Representative (A3)	≜ Signature
▲Name of *Director / *Authorised Signatory/ *Authorised Representative (A4)	★ Signature
Date:	
* Delete as appropriate	
Witnessed by:	
Name : Designation / Position:	
Date:	

Account No: _____

WE HEREBY CERTIFY THAT:

The following resolutions were duly passed on ______by the Board of Directors of the Company *at a meeting duly held and convened (during which a quorum was present and acting throughout) / by written resolutions of all the Directors in A. accordance with the constitutional documents of the Company, having confirmed that each Director, Authorised Signatory and Authorised Representative had received and reviewed copies of the Account Opening Booklet (including the Hong Kong Deposit Protection Scheme -Information Disclosure Notice), the Personal Information Collection Statement, General Conditions (including the Risk Disclosure Statements) and all other relevant documentation provided by EFG Bank AG, Hong Kong Branch (the "Bank") and each Director having disclosed all his interests in the subject-matter of the *meeting /resolutions. Unless the context otherwise requires, terms defined herein shall have the same meanings as in the General Conditions of the Bank.

* Delete as appropriate

IT WAS RESOLVED THAT:

- Account(s) be opened with the Bank and Services be utilised by the Company on the terms and conditions specified in the 1. Account Opening Booklet, General Conditions as well as such additional terms and conditions as may be required by the Bank (as applicable and as may be amended, supplemented, restated or novated from time to time) (collectively, the "Agreement"), and that this Corporate Certificate be duly signed by any two Directors or one Director and the secretary, or by such other person(s) as the Bank may accept, and duly delivered to the Bank.
- The granting of the following power(s) of attorney (in the form circulated to the *meeting / all the Directors of the Company) 2. (collectively, the "Power(s) of Attorney", and each a "Power of Attorney") by the Company and their execution (under the Company's common seal) and delivery by the below-mentioned individual(s) for and on behalf of the Company in accordance with the Company's constitutional documents be and is hereby approved:
 - (1) *General Power of Attorney appointing the following individual(s) as Authorised Signatory(ies) (who are Directors) (with general authority):

Name(s) of Authorised Signatory(ies):

- (a) (b) _____
- (c) -
- (d) _ (e)
- (f)

To be executed (under the Company's common seal) and delivered for and on behalf of the Company by any *one / *two / *__ of the following individual(s):

- (a) (h) -(c) (d) (e) (f)
- (2) *General Power of Attorney appointing the following individual(s) as Authorised Signatory(ies) (who are not Directors) (with general authority (except to create any security interest or encumbrance over any assets)):

Name(s) of Authorised Signatory(ies):

(a) — (b) — (c) -(d) (e) (f)

To be executed (under the Company's common seal) and delivered for and on behalf of the Company by any *one / *two / *__ of the following individual(s):

- (f)

(3) *Limited Power of Attorney appointing the following individual(s) as Authorised Representative(s) (with limited authority):

Name(s) of Authorised Representative(s):

- (a) _____
- (b) _____
- (b) _____
- (e) _____
- (f)

To be executed (under the Company's common seal) and delivered for and on behalf of the Company by any *one / *two / $*_$ of the following individual(s):

- 3. Each Director, Authorised Signatory and Authorised Representative having confirmed that he had read and fully understood the Agreement, the same be approved.
- 4. The Account Opening Booklet shall be signed for and on behalf of the Company by any *one / *two / *__ of the following individuals:
 - (1) _____(Name)
 - (2) _____ (Name)
 - (3) _____(Name)
 - (4) _____(Name)

and the Client, Authorised Representative(s) and Authorised Signatory(ies) named in the Account Opening Booklet be and they are hereby duly authorised, within the limits specified in the Account Opening Booklet and the Power(s) of Attorney, to open any and all Accounts of, to utilise all or any Services made available to, the Company (including without limitation, credit facilities whether on a secured or unsecured basis, foreign exchange trading services including on a margin basis, treasury and derivative services, non-discretionary and discretionary investment services), to approve (with or without amendment), sign, (if required, seal) or execute in accordance with the Company's constitutional documents and the Power(s) of Attorney all relevant documentation in respect thereof, including without limitation to, any documentation required by the Bank from time to time including documentation relating to any Collateral or any amendments and variations to the Agreement or annexures or supplementals to the Agreement, to give Instructions to the Bank in respect of any and all Accounts and Services, to receive, examine and verify statements of accounts and other documents or instruments and to give and receive good and valid receipts and discharges for all sums received or paid in connection with any of the above, and generally to do all such other acts and things and take all such other steps and exercise such discretion as they may consider expedient or desirable for the purpose of or in connection with all or any of the above matters.

- 5. The assets of the Company held by the Bank from time to time and any other security required by the Bank from time to time shall be held as Collateral in accordance with the terms of the General Conditions to secure all liabilities of the Company from time to time to the Bank.
- 6. These Resolutions and the Power(s) of Attorney shall continue in full force and effect and the Bank shall be entitled to rely upon and act pursuant to the same until such time as the Bank shall have received actual notice that they have been revoked, superseded, amended or varied.
- B. All the Directors have signed the above Resolutions in accordance with the Company's constitutional documents. The above Resolutions and the Power(s) of Attorney have not been revoked, superseded, amended or varied in any manner and are in full force and effect as of the date hereof.
- C. The Account Opening Booklet contains a true, complete and correct list of all Directors, Authorised Signatories and Authorised Representatives of the Company as at the date hereof.

- D. The specimen signatures set out in the Signature Card attached are the authentic signatures of the persons named therein, and the specimen chop (if any) attached to such Signature Card is the duly authorised chop of the Company.
- E. Attached to the Account Opening Booklet are true and complete copies of the Company's constitutional documents as at the date hereof.
- F. The representations and warranties set out in the Agreement are true, correct and not misleading in any material particular.

Remark: Client's own Board Resolution is not required upon completion of this corporate certificate.

Certified by:

≜Signature

Name: Position: Director ▲Signature

Name: Position: Director/ Secretary*

Date: _____

Date: _____

Section 2C TRUSTEE ACCOUNT

ACCOUNT NAME:

TRUST DETAILS:	
Name of Trust:	Governing Law:
Identification Number (if a any applicable official bod identification number or re charity or non-profit organ number):	lies (e.g. tax egistered
Type of Trust	Revocable Irrevocable Date Established:

consequence, specific beneficial owner(s) cannot be designated due to the existing legal structure.

CLIENT DETAILS:

(A) <u>Where the Client is a Corporate Trustee:</u>

Name of Corporation:			Incorporation / Registration No.: Date of		
Country of Incorporation / Registration:			Incorporation / Registration:		
Registered Office Address:					
Business Address (if different):					
Nature of Business:		Fax:	Email:		
Telephone:					
Individual <u>Na</u> Director(s):	<u>me</u>	<u>Residential Address (a</u>	and Permanent Address if different)	(*De For resi	sport/HKID No.*: elete as appropriate - HK permanent dents, HKID No. must provided.)
(1)					
(2)					
(3)					
(4)					

<u>Corporate</u> <u>Director(s):</u>	Name of Corporation	<u>Registered Office Address (and Business</u> <u>Address if different)</u>	Country of Incorporation/ Registration and	<u>Name and</u> Passport/ HKID No. of Director(s)
(1)			Incorporation/ Registration No.	
(2)				
<u>Secretary:</u>	<u>Name</u>	<u>Residential Address (and Permanent Addr</u>	ess if different)	<u>Passport/HKID No.*:</u> (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.)
(1)				

(B) <u>Where the Client(s) is(are) Individual Trustee(s)</u>:

(B1) TRUSTEE (1)		
First Name(s):	Last Name:	
Chinese Name (if applicable):		
	Passport/HKID No.*: (*Delete as appropriate - For HK	
Nationality:	permanent residents, HKID No. must be provided.)	
Date of Birth:	Occupation:	
Residential Address:	Telephone: (Home)	
	(Office) (Mobile) (Mobile)	
Permanent Address: (if different)	Fax:	
	Email:	
(B2) TRUSTEE (2)		

First Name(s):	Last Name:
Chinese Name (if applicable):	Passport/HKID No.*: (*Delete as appropriate - For HK permanent
Nationality:	residents, HKID No. must be provided.)
	Occupation:
Residential Address:	Telephone: (Home) (Office) (Mobile)
Permanent Address:	Fax:
	Email:

(B3) TRUSTEE (3)

First Name(s):	Last Name:
Chinese Name (if applicable):	
	Passport/HKID No.*: (*Delete as appropriate - For HK permanent
Nationality:	residents, HKID No. — must be provided.)
Date of Birth:	Occupation:
	Telephone: (Home)
Residential Address:	(Office) (Mobile)
Permanent Address:	Fax:
(if different)	Email:
(B4) TRUSTEE (4)	
First Name(s)	
	Last Name:
First Name(s):	Passport/HKID No.*: (*Delete as
First Name(s):	Passport/HKID No.*: (*Delete as appropriate - For HK permanent
First Name(s): Chinese Name (if applicable):	Passport/HKID No.*: (*Delete as appropriate - For HK
First Name(s): Chinese Name (if applicable): Nationality:	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.) Occupation:
First Name(s): Chinese Name (if applicable): Nationality: Date of Birth: Residential Address:	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.)
First Name(s): Chinese Name (if applicable): Nationality: Date of Birth:	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.) Occupation: Telephone: (Home) (Office)

(C) AUTHORISED SIGNATORY(IES) (who are Trustees) (note: details of the Trustees should be provided above) WITH GENERAL AUTHORITY (IN ACCORDANCE WITH THE TERMS OF GENERAL AUTHORITY SET OUT IN SCHEDULE 1 HEREOF):

(C1)	Name:	
(C2)	Name:	
(C3)	Name:	
(C4)	Name:	

(D) AUTHORISED SIGNATORY(IES) (who are not Trustees) WITH GENERAL AUTHORITY (IN ACCORDANCE WITH THE TERMS OF GENERAL AUTHORITY SET OUT IN SCHEDULE 2 HEREOF):

(D1)	First Name(s):	Last Name:
	Chinese Name (if applicable):	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.)
	Nationality:	
	Date of Birth:	Occupation:
	Residential Address:	Telephone: (Home) (Office) (Mobile)
		Fax:
	Permanent Address:	Email:
	(if different)	Transaction Limit (if any):
(D2)	First Name(s):	Last Name:
	Chinese Name (if applicable):	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.)
		Occupation:
	Date of Birth: Residential Address:	Telephone: (Home) (Office) (Mobile)
		Fax:
	Permanent Address:	Email:
	(if different)	Transaction Limit (if any):
(D3)	First Name(s):	Last Name:
	Chinese Name (if applicable):	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents,
	Nationality:	HKID No. must be provided.)
	Date of Birth:	Occupation:
	Residential Address:	Telephone: (Home) (Office) (Mobile)
		Fax:
	Permanent Address: (if different)	Email:
		Transaction Limit (if any):

(D4)	First Name(s):	Last Name:
Chinese Name (if applicable):		Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.)
	Nationality:	<u> </u>
	Date of Birth:	Occupation:
	Residential Address:	Telephone: (Home) (Office) (Mobile)
		Fax:
	Permanent Address:	Email:
(if different)		Transaction Limit (if any):

(E) AUTHORISED REPRESENTATIVE(S) WITH LIMITED AUTHORITY (IN ACCORDANCE WITH THE TERMS OF LIMITED AUTHORITY SET OUT IN SCHEDULE 3 HEREOF):

(E1)	First Name(s):	Last Name:	
	Chinese Name (if applicable):	Passport/HKID No.*: (*Delete as appropriate - For	
	Nationality:	HKID No. must be provided.)	
	Date of Birth:	Occupation:	
	Residential Address:	Telephone: (Home) (Office) (Mobile)	
	Permanent Address: (if different)	Fax: Fax:	
		Transaction Limit (if any):	
(E2)	First Name(s): Chinese Name (if applicable):	Last Name:	
		Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents,	
	Nationality:	HKID No. must be provided.)	
	Date of Birth:	Occupation:	
	Residential Address:	Telephone: (Home) (Office) (Mobile)	
		Fax:	
	Permanent Address:	Email:	
	(if different)	Transaction Limit (if any):	

(E3)	First Name(s):	Last Name:	
	Chinese Name (if applicab <u>le):</u>	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.)	
	Nationality:		
	Date of Birth:	Occupation:	
	Residential Address:	Telephone: (Home) (Office) (Mobile)	
		Fax:	
	Permanent Address: (if different)	Email:	
(ii diilerent)		Transaction Limit (if any):	
(E4)	First Name(s):	Last Name:	
	Chinese Name (if applicab <u>le):</u>	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.)	
	Nationality:	Occupation:	
	Date of Birth:	·	
	Residential Address:	Telephone: (Home) (Office) (Mobile)	
		Fax:	
	Permanent Address:	Email:	
	(if different)	Transaction Limit (if any):	

(F) SIGNING CONDITIONS

FOR AUTHORISED SIGNATORY(IES) (who are Trustees) WITH GENERAL AUTHORITY (IN ACCORDANCE WITH THE TERMS OF GENERAL AUTHORITY SET OUT IN SCHEDULE 1 HEREOF): (please initial box)

The Bank shall be entitled to accept Instructions given by and documents signed by the Authorised Signatory(ies) (who are Trustees) (if any) (whose specimen signatures are provided to the Bank on the Signature Card or in other manner acceptable to the Bank) subject to the Terms of General Authority set out in Schedule 1 hereof and the signing conditions below, unless and until the Bank receives a written signed notice from the Client to amend the Terms of General Authority and signing conditions and the Bank accepts such amendment.

Any One Signature		Any Two Signatures
Any	(Specify No.) Signatures	All Signatures

With Chop (if applicable)

Other Manner (please specify):

FOR AUTHORISED SIGNATORY(IES) (who are not Trustees) WITH GENERAL AUTHORITY (IN ACCORDANCE WITH THE TERMS OF GENERAL AUTHORITY SET OUT IN SCHEDULE 2 HEREOF): (please initial box)

The Bank shall be entitled to accept Instructions given by and documents signed by the Authorised Signatory(ies) (if any) (whose specimen signatures are provided to the Bank on the Signature Card or in other manner acceptable to the Bank) subject to the Terms of General Authority set out in Schedule 2 hereof and the signing conditions below, unless and until the Bank receives a written signed notice from the Client to amend the Terms of General Authority and signing conditions and the Bank accepts such amendment.

Any One Signature

Any Two Signatures

Any _____ (Specify No.) Signatures

With Chop (if applicable)

Other Manner (please specify):

All Signatures

FOR AUTHORISED REPRESENTATIVE(S) WITH LIMITED AUTHORITY (IN ACCORDANCE WITH THE TERMS OF **LIMITED AUTHORITY SET OUT IN SCHEDULE 3 HEREOF):** (please initial box)

The Bank shall be entitled to accept Instructions given by and documents signed by the Authorised Representative(s) (if any) (whose specimen signatures are provided to the Bank on the Signature Card or in other manner acceptable to the Bank) subject to the Terms of Limited Authority set out in Schedule 3 hereof and the signing conditions below, unless and until the Bank receives a written signed notice from the Client to amend the Terms of Limited Authority and signing conditions and the Bank accepts such amendment.

Any One Signature

Any (Specify No.) Signatures

With Chop (if applicable)

Any Two Signatures

All Signatures

Other Manner (please specify):

(G) BENEFICIAL OWNER(S)

SETTL	OR: Individual Settlor		
(G1)	First Name(s):	Last Name:	
	Chinese Name (if applicable): Nationality: Date of Birth: Telephone: (Home) (Office) (Mobile) Residential Address:	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.) Occupation: Fax:	
	Permanent Address: (if different)	Email:	

(G2) Full Name: Date of Incorporation/ Registration: Country of Incorporation/ Incorporation/ Registration: **Registration No.: Business Address** Registered Office Address: (if different) Name and Passport/ HKID No. of Director(s) IDENTITY AND DOMICILE OF PROTECTOR OR ENFORCER, if any: Individual Enforcer G3) First Name(s): Last Name: Chinese Name (if applicable): Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. Nationality: must be provided.) Date of Birth: Occupation: Telephone: (Home) (Office) Fax: (Mobile) **Residential Address:** Permanent Address: Email: (if different) (G4) First Name(s): Last Name: Chinese Name (if applicable): Passport/HKID No.*: (*Delete as appropriate - For HK permanent Nationality: residents, HKID No. must be provided.) Date of Birth: Occupation: Telephone: (Home) (Office) Fax: (Mobile) **Residential Address:** Permanent Address: Email: (if different) Corporate Enforcer (G5) Date of Incorporation/ First Name(s): Registration: Country of Incorporation/ Incorporation/ Registration: Registration No.: **Business Address** Registered Office Address: _____ (if different): Name and Passport/ HKID No. of Director(s):

Corporate Settlor

IDENTITY AND DOMICILE OF OTHER PERSONS WHO ARE BENEFICIARIES :

(G6)	First Name(s):	Last Name:
	Chinese Name (if applicab <u>le):</u>	
		Passport/HKID No.*: (*Delete as
		appropriate - For HK permanent
	Nationality:	residents, HKID No. must be provided.)
	Date of Birth:	Occupation:
		Telephone:
	Residential Address:	(Home)
	Permanent Address:	
	Permanent Address: (if different)	Email:
		-
(G7)	First Name(s):	Last Name:
	Chinese Name (if applicable):	Passport/HKID No.*:
		(*Delete as appropriate - For HK
	Nationality:	permanent residents, HKID No.
		must be provided.)
	Date of Birth:	- Occupation:
	Residential Address:	Telephone: — (Home)
		(Office)
		— Fax:
	Permanent Address:	— Email:
	(if different)	
(G8)	First Name(s):	Last Name:
(00)	Chinese Name (if applicable):	Passport/HKID No.*:
		(*Delete as appropriate - For HK
		permanent residents, HKID No. must be provided.)
	Nationality:	
	Date of Birth:	Occupation:
	Residential Address:	Telephone: (Home)
		(Office) (Mobile)
	Permanent Address:	Fax: Email:
	(if different)	

(G9)	First Name(s):	Last Name:
	Chinese Name (if applicable):	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.) Occupation: Telephone: (Home) (Office) (Mobile) Fax: Email:
	TY AND DOMICILE OF PERSONS (OR CATEGORIES OF PERSONS) LIK	
(G10)	First Name(s):	Last Name:
	Chinese Name (if applicable): Nationality: Date of Birth: Residential Address: Permanent Address: (if different)	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.) Occupation: Telephone: (Home) (Office) (Mobile) Fax: Email:
(G11)	First Name(s):	_ Last Name:
	Chinese Name (if applicable): Nationality: Date of Birth:	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.) Occupation:
		Telephone:
	Residential Address:	(Home) (Office) (Mobile)
	Permanent Address: (if different)	- Email:

(G12)	First Name(s):	Last Name:
	Chinese Name (if applicab <u>le):</u> Nationality: Date of Birth:	Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.) Occupation:
	Residential Address:	Telephone: (Home) (Office) (Mobile) Fax: Email:
(G13)	First Name(s): Chinese Name (if applicable): Nationality:	Last Name: Passport/HKID No.*: (*Delete as appropriate - For HK permanent residents, HKID No. must be provided.) Occupation:
	Date of Birth:	Telephone: - (Home) (Office) - (Mobile) Fax:
	Permanent Address:	Email:
	Permanent Address: (if different)	- Email:

By signing below, I/we agree and confirm all the matters set out in the Account Mandate and Client Declarations (including whether to receive direct marketing as indicated in paragraph 13 thereof) as well as the Account Opening Booklet:

Date	<u>Name</u>	Signature
Witnessed by:		
▲ Name : Designation / Position:		
Date:		

Account No:

WE HEREBY CERTIFY THAT:

А same meanings as in the General Conditions of the Bank.

Delete as appropriate

IT WAS RESOLVED THAT:

- Account(s) for the Trust be opened with the Bank and Services be utilised by the Trustee(s) in such capacity, on 1. the terms and conditions specified in the Account Opening Booklet, General Conditions as well as such additional terms and conditions as may be required by the Bank (as applicable and as may be amended, supplemented, restated or novated from time to time) (collectively, the "Agreement") and that this Trustee Certificate be duly signed by each Trustee, or by such other person(s) as the Bank may accept, and duly delivered to the Bank.
- The granting of the following power(s) of attorney (in the form circulated to the *meeting/all the Trustees 2. of the Trust) (collectively, the "Power(s) of Attorney", and each a "Power of Attorney") by the Trustee(s) and their execution (under the seal of the Trustee(s) or common seal of the Trustee (in the case of a corporate Trustee)) and delivery by the below-mentioned individual(s) for and on behalf of the Trust in accordance with the documents establishing and governing the Trust and the powers of the Trustee(s) be and is hereby approved:
 - *General Power of Attorney appointing the following individual(s) as Authorised Signatory(ies) (who (1)are Trustees) (with general authority):

Name(s) of Authorised Signatory(ies):

- (a) _____ (b) —
- _____ (c)
- (d)
- (e)
- (f)
- (2) To be executed and delivered (under the seal of the Trustee(s) or common seal of the Trustee (in the case of a corporate Trustee)) for and on behalf of the Trustee(s) by any *one / *two / * of the following individual(s):
 - (a) (b) (c) (d) (e) (f)
- (3) *General Power of Attorney appointing the following individual(s) as Authorised Signatory(ies) (who are not Trustees) (with general authority (except to create any security interest or encumbrance on any assets)): Name(s) of Authorised Signatory(ies):
 - (a) —
 - (b) –
 - (c) (d) _
 - (e)
 - (f)

To be executed and delivered (under the seal of the Trustee(s) or common seal of the Trustee (in the case of a corporate Trustee)) for and on behalf of the Trustee(s) by any *one / *two / * $_$ of the following individual(s):

(3) *Limited Power of Attorney appointing the following individual(s) as Authorised Representative(s) (with limited authority):

Names of Authorised Representative(s):(a)

- (c) _____
- (f)

To be executed (under the seal of the Trustee(s) or common seal of the Trustee (in the case of a corporate Trustee)) and delivered for and on behalf of the Trustee(s) by any *one / *two / * __ of the following individual(s):

- (d) _____
- 3. Each Trustee, each director of the Trustee (in the case of a corporate Trustee), each Authorised Signatory and Authorised Representative having confirmed that he had read and fully understood the Agreement, the same be approved.
- 4. The Account Opening Booklet shall be signed for and on behalf of the Trust by any *one / *two / * __ of the following individuals:
 - (1) _____(Name)
 - (2) _____ (Name)
 - (3) _____(Name)
 - (4) _____(Name)

and the Trustee(s), Authorised Representative(s) and Authorised Signatory(ies) named in the Account Opening Booklet be and they are hereby duly authorised, within the limits specified in the Account Opening Booklet and the Power(s) of Attorney, to open any and all Accounts of, to utilise all or any Services made available to, the Trust and the Trustee(s) (including without limitation, credit facilities whether on a secured or unsecured basis, foreign exchange trading services including on a margin basis, treasury and derivative services, non-discretionary and discretionary investment services), to approve (with or without amendment), sign, (if required, seal) or execute in accordance with the documents establishing and governing the Trust, the powers of the Trustee(s), the constitutional documents of the Trustee(s), and the Power(s) of Attorney all relevant documentation in respect thereof, including without limitation to, any documentation required by the Bank from time to time including documentation relating to any Collateral or any amendments and variations to the Agreement or annexures or supplementals to the Agreement, to give Instructions to the Bank in respect of any and all Accounts and Services, to receive, examine and verify statements of accounts and other documents or instruments and to give and receive good and valid receipts and discharges for all sums received or paid in connection with any of the above, and generally to do all such other acts and things and take all such other steps and exercise such discretion as they may consider expedient or desirable for the purpose of or in connection with all or any of the above matters.

- 5. The assets of the Trust held by the Bank from time to time and any other security required by the Bank from time to time shall be held as Collateral in accordance with the terms of the General Conditions to secure all liabilities of the Trust from time to time to the Bank.
- 6. These Resolutions and the Power(s) of Attorney shall continue in full force and effect and the Bank shall be entitled to rely upon and act pursuant to the same until such time as the Bank shall have received actual notice that they have been revoked, superseded, amended or varied.
- B. All the Trustees have signed the above Resolutions in accordance with the Trust's constitutional documents and the Trustee's constitutional documents. The above Resolutions and Power(s) of Attorney have not been revoked, superseded, amended or varied in any manner and are in full force and effect as of the date hereof.
- C. The Account Opening Booklet contains a true, complete and correct list of all Trustees, all Authorised Signatories and Authorised Representatives of the Trust and (in the case of a corporate Trustee) all its directors as at the date hereof.
- D. The specimen signatures set out in the Signature Card attached are the authentic signatures of the persons named therein, and the specimen chop (if any) attached to such Signature Card is the duly authorised chop of the Trustee or the Trust.

- E. The Trustee(s) have full power under the Trust Deed to for and on behalf of the Trust open any Account with the Bank and full discretion to utilise any Service and enter into any type of Transaction, including without limitation credit transactions, foreign exchange, precious metals, trading transactions and to sell, exchange, mortgage, charge, pledge or otherwise dispose of the Trust assets (including any kind of derivative products) without any restriction.
- F. Attached to the Account Opening Booklet are true and complete copies of the Trust Deed or other documents establishing and governing the Trust and the powers of the Trustee(s) and the Trustee's constitutional documents as at the date hereof.
- G. The representations and warranties set out in the Agreement are true, correct and not misleading in any material particular.

Remark: Client's own mandate (if any) is not required upon completion of this certificate.

Certified by:

≜Signature

≜Signature

Name:

Position:

Position:

Name:

Date: _____

Date: _____

Section 3 eBanking Services and Reference Currency

(A) EBANKING AND PAPERLESS CORRESPONDENCE SERVICES:

The Bank will offer eBanking services which includes online transfer services, e-payment services, internet securities trading services, secure messaging services, account aggregation services and paperless correspondence services. The client can access his/her monthly statement of accounts, portfolios valuations and contract notes/advices via EFG eBanking platform. The Bank will send email and/or SMS notifications to the Client's email address and/or mobile phone number in the Bank's records when the monthly statement of accounts, portfolio valuations and contract notes/ advices are available for reviewing in eBanking. Paperless service will be terminated if you do not login at least once within a specified period of time that will be notified to you by the Bank, in which case the mailing of paper statement will be accorded. The Paper Statement Fee will apply when the Paperless service is terminated.

OPT OUT

Please tick the box if you **<u>do not</u>** wish to subscribe the services below:

- I/We do not wish to subscribe to the eBanking and Paperless Correspondence services stated in paragraph above.
- Please note a *monthly Paper Statement Fee will be charged* if you opt-out of the eBanking and Paperless Correspondence Services (Please refer to the Scale of Charges).

I/We <u>do not</u> wish to subscribe to the Paperless Correspondence services stated in paragraph above.

• Please note a *monthly Paper Statement Fee will be charged* if you opt-out of the Paperless Correspondence Services (Please refer to the Scale of Charges).

I/We **<u>do not</u>** wish to subscribe to the account aggregation services.

(B) REFERENCE CURRENCY (Please indicate your preferred reference currency): _____

Failing express designation of a different currency, the currency of reference will be the US Dollar.

Section 4 SIGNATURE CARD

Accour	nt Name:		
Accour	nt No:	Date:	
The spe	cimen signature(s) of the Client(s)/ Authorise	ed Signatory(ies)/ Authorised Rep	resentative(s) are as follows:
	Name	Specimen Signature	Transaction Limit (if any)
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
	Any One Signature	Any Two Signatures	
	Any (Specify No.) Signatures	All Signatures	
	With Chop (if applicable)	Other Manner (please s	specify):

Specimen of Chop (if applicable) N.B. If a specimen chop is provided then all documents must be similarly chopped

Section 5 HONG KONG DEPOSIT PROTECTION SCHEME- INFORMATION DISCLOSURE NOTICE

Please read the following notice carefully and address any enquiry to your Client Relationship Officer.

EFG Bank AG, acting through its Hong Kong branch ("Bank") is a member of the Hong Kong Deposit Protection Scheme (the "**Scheme**"). Eligible deposits held with the Bank are protected by the Scheme up to an aggregate limit of HK\$500,000 per depositor.

The following types of deposit held with the Bank in Hong Kong (whether in Hong Kong Dollars or any foreign currency) is/ are deposit(s) qualified for protection by the Scheme:

- Time deposits with a term of up to five years
- Current account deposits
- Secured deposits (such as deposits mortgaged or charged as collateral to the Bank)

Please note that the following types of deposit and product are not subject to protection by the Scheme:

- Time deposits with a current term exceeding five years
- Structured deposits such as currency linked deposits or equity linked deposits
- Deposits the repayment of which is secured (in whole or in part) on the Bank's assets
- Bearer instruments such as bearer certificates
- Offshore deposits placed with any office of the Bank outside Hong Kong
- Deposits held for the account of the Exchange Fund established under the Exchange Fund Ordinance
- Deposits held by an excluded person* in his own right
- Deposits held by a depositor as a bare trustee, or held in a depositor's client account, for an excluded person*
- Deposits held by a depositor as trustee of a trust (other than a bare trust) for an excluded person*
- Financial products other than deposits (as defined in the Deposit Protection Scheme Ordinance).

*"Excluded person" is defined under the Deposit Protection Scheme Ordinance to include the following persons:

- a related company of the Scheme member
- a multilateral development bank as defined in section 2(1) of the Banking Ordinance
- an authorised institution ("AI") as defined in section 2(1) of the Banking Ordinance (i.e. licensed banks, restricted license banks and deposit-taking companies)
- a foreign bank which is not an Al in Hong Kong
- the senior management, controllers and directors of the Scheme member and its related companies.

Terms of General Authority

The person(s) stated under Section(s) 2A(A) (for partnerships, if applicable)*/ 2B(B)*/ 2C(C)* (*Delete as appropriate) is(are) granted with full power without right of substitution to act as my/our Authorised Signatory(ies) and in particular to deal with any and all assets deposited or held in my/our name with the Bank and to take actions and incur liabilities in the same capacity as myself/ourselves, subject to the terms herein and the conditions (including the signing conditions) (if any) set out in the Account Opening Booklet.

In particular, the Authorised Signatory(ies) shall be empowered to deposit, buy, sell, mortgage/charge/pledge or encumber, convert and withdraw any and all of my/our assets in my/our Accounts (including execute any facility letters, facility agreements or guarantees, to charge, mortgage, pledge or otherwise create any security interest or encumbrance whatsoever over any of my/our assets (whether in my/our Accounts or otherwise) as security for the obligations of myself/ourselves, the Authorised Signatory(ies) or any third party), to lodge or withdraw funds in any manner whatsoever, be it by cheque or otherwise, to sign all settlements of account, receipts, discharges, transfers and assignments, to issue, accept, endorse or give discharges on bills of exchange, cheques, orders or similar instruments of every kind, to receive communications, statements of account/custody account and all other statements, to utilise electronic services provided by the Bank, to elect a place of jurisdiction and generally to do everything he/she/they may deem expedient or necessary, subject to the terms herein and the conditions (if any) set out in the Account Opening Booklet. The Authorised Signatory(ies) shall be empowered to give legally binding Instructions to the Bank for and on my/our behalf and (for Corporate Accounts only) to close the Accounts. It is the responsibility of the Authorised Signatory(ies), and not the responsibility of the Bank, to inform me/us of such actions.

I/We ratify and confirm and agree to ratify and confirm all and whatsoever the Authorised Signatory(ies) shall do or purport to do by virtue of this authorisation including anything which shall be done between the revocation of this authorisation and notice of such revocation actually received by the Bank. I/We hereby confirm that the Bank is under no obligation to ascertain or to inquire into the purpose for which any of the above powers are exercised from time to time.

This authorisation shall continue in force until the Bank shall have actually received a notice of revocation in writing. The authorisation of the Authorised Signatory(ies) shall terminate immediately upon my/our death or incapacity to act and it is the duty of the Authorised Signatory(ies) to inform the Bank immediately of such death or incapacity to act. In the event of my/our death or incapacity to act, I/we agree and acknowledge that the Bank shall not be liable or responsible in any way for executing or acting on the instructions of the Authorised Signatory(ies) prior to receipt by the Bank of written notice of such death or incapacity to act. Without prejudice to the generality of the foregoing, the Bank shall not be liable for any net debit balance or loss in said accounts or any other claim whatsoever and howsoever arising as a result of or in connection with transactions initiated, consummated or completed by the Bank prior to receipt by the Bank of written notice from the Authorised Signatory(ies) of my/our death or incapacity to act.

I/We agree to indemnify the Bank against all actions, proceedings, liabilities, claims, damages, costs and expenses arising from or in connection with the exercise or purported exercise by the Authorised Signatory(ies) of any of the powers conferred, except where and to the extent any loss or liability is caused directly by the fraud, negligence or wilful default of the Bank or its employees, agents or servants.

Schedule 2

Terms of General Authority (except to create any security interest or encumbrance over any assets)

The person(s) stated under Section(s) 2A(B)*/ 2B(C)*/ 2C(D)* (*Delete as appropriate) is(are) granted with full power without right of substitution to act as my/our Authorised Signatory(ies) and in particular to deal with any and all assets deposited or held in my/our name with the Bank and to take actions and incur liabilities in the same capacity as myself/ourselves, subject to the terms herein and the conditions (including the signing conditions) (if any) set out in the Account Opening Booklet.

In particular, the Authorised Signatory(ies) shall be empowered to deposit, buy, sell, convert and withdraw any and all of my/our assets in my/our Accounts, to lodge or withdraw funds in any manner whatsoever, be it by cheque or otherwise, to sign all settlements of account, receipts, discharges, transfers and assignments, to issue, accept, endorse or give discharges on bills of exchange, cheques, orders or similar instruments of every kind, to receive communications, statements of account/custody account and all other statements, to utilise electronic services provided by the Bank, to elect a place of jurisdiction and generally to do everything he/she/ they may deem expedient or necessary, subject to the terms herein and the conditions (if any) set out in the Account Opening Booklet. The Authorised Signatory(ies) shall be empowered to give legally binding Instructions to the Bank for and on my/our behalf and (for Corporate Accounts only) to close the Accounts. It is the responsibility of the Authorised Signatory(ies), and not the responsibility of the Bank, to inform me/us of such actions.

The Authorised Signatory(ies) shall have no power to execute any facility letters, facility agreements or guarantees, to charge, mortgage, pledge or otherwise create any security interest or encumbrance whatsoever over any of my/our assets (whether in my/our Accounts or otherwise) as security for the obligations of myself/ourselves, the Authorised Signatory(ies) or any third party.

I/We ratify and confirm and agree to ratify and confirm all and whatsoever the Authorised Signatory(ies) shall do or purport to do by virtue of this authorisation including anything which shall be done between the revocation of this authorisation and notice of such revocation actually received by the Bank. I/We hereby confirm that the Bank is under no obligation to ascertain or to inquire into the purpose for which any of the above powers are exercised from time to time.

This authorisation shall continue in force until the Bank shall have actually received a notice of revocation in writing. The authorisation of the Authorised Signatory(ies) shall terminate immediately upon my/our death or incapacity to act and it is the duty of the Authorised Signatory(ies) to inform the Bank immediately of such death or incapacity to act. In the event of my/our death or incapacity to act, I/we agree and acknowledge that the Bank shall not be liable or responsible in any way for executing or acting on the instructions of the Authorised Signatory(ies) prior to receipt by the Bank of written notice of such death or incapacity to act. Without prejudice to the generality of the foregoing, the Bank shall not be liable for any net debit balance or loss in said accounts or any other claim whatsoever and howsoever arising as a result of or in connection with transactions initiated, consummated or completed by the Bank prior to receipt by the Bank of written notice from the Authorised Signatory(ies) of my/our death or incapacity to act.

I/We agree to indemnify the Bank against all actions, proceedings, liabilities, claims, damages, costs and expenses arising from or in connection with the exercise or purported exercise by the Authorised Signatory(ies) of any of the powers conferred, except where and to the extent any loss or liability is caused directly by the fraud, negligence or wilful default of the Bank or its employees, agents or servants.

Schedule 3

Terms of Limited Authority

The person(s) stated under Section(s) $2A(C)^*/2B(D)^*/2C(E)^*$ (*Delete as appropriate) is(are) granted with limited power without right of substitution to act as my/our Authorised Representative(s) and in particular to manage any and all assets deposited or held in my/our name with the Bank, subject to the terms herein and the conditions (including the signing conditions) (if any) set out in the Account Opening Booklet.

In particular, the Authorised Representative(s) shall be empowered to issue Instructions for the purchase, sale or other dealings of Securities, structured investment products, foreign exchange, Precious Metals and other Traded Assets, to enter into derivatives transactions and other Traded Asset Transactions, to convert and exchange Securities, to engage in arbitrage operations and subscriptions and to exercise or sell subscriptions rights, to carry out investments on a fiduciary basis in the Bank's own name but at my/our expense and risk, to utilise electronic services provided by the Bank, as well as to take all other measures which he/she/they may deem appropriate in connection with the management of my/our assets with the Bank. The Authorised Representative(s) shall be empowered to give legally binding Instructions to the Bank for and on my/our behalf for the management of my/our assets with the Bank. It is the responsibility of the Bank, to inform me/us of such actions.

The Authorised Representative(s) shall have no power to withdraw or transfer all or part of the assets in my/our Accounts (except where such withdrawal or transfer is for the purpose of making any payment for settlement of the Transactions for and on my/our behalf under this authorisation or to transfer to my/our other Accounts or to settle sums due to the Bank or any EFG Group Member) or to execute any facility letters, facility agreements or guarantees, to charge, mortgage, pledge or otherwise create any security interest or encumbrance whatsoever over any of my/our assets (whether in my/our Accounts or otherwise) as security for the obligations of myself/ourselves, the Authorised Representative(s) or any third party.

I/We ratify and confirm and agree to ratify and confirm all and whatsoever the Authorised Representative(s) shall do or purport to do by virtue of this authorisation including anything which shall be done between the revocation of this authorisation and notice of such revocation actually received by the Bank. I/We hereby confirm that the Bank is under no obligation to ascertain or to inquire into the purpose for which any of the above powers are exercised from time to time.

This authorisation shall continue in force until the Bank shall have actually received a notice of revocation in writing. The authorisation of the Authorised Representative(s) shall terminate immediately upon my/our death or incapacity to act and it is the duty of the Authorised Representative(s) to inform the Bank immediately of such death or incapacity to act. In the event of my/our death or incapacity to act, I/we agree and acknowledge that the Bank shall not be liable or responsible in any way for executing or acting on the instructions of the Authorised Representative(s) prior to receipt by the Bank of written notice of such death or incapacity to act. Without prejudice to the generality of the foregoing, the Bank shall not be liable for any net debit balance or loss in said accounts or any other claim whatsoever and howsoever arising as a result of or in connection with transactions initiated, consummated or completed by the Bank prior to receipt by the Bank of written notice from the Authorised Representative(s) of my/our death or incapacity to act.

I/We agree to indemnify the Bank against all actions, proceedings, liabilities, claims, damages, costs and expenses arising from or in connection with the exercise or purported exercise by the Authorised Representative(s) of any of the powers conferred, except where and to the extent any loss or liability is caused directly by the fraud, negligence or wilful default of the Bank or its employees, agents or servants.

For Ba	nk Use Only		
DECLA	RATION		
	(BLOCK LETTERS) : eclares as follows:	(HKMA Registration No.:)
	A copy of the General Conditions (including specific language of the Client's choice) has been provided t		ish (being a
	The Client has been invited to read the General Co Statements), to ask questions and to take independ		sclosure
Signat	ure : Date	:	

Appendix 1

DECLARATION OF IDENTITY OF THE BENEFICIAL OWNER

The contracting partner hereby declares that the person(s) listed below is/are the beneficial owner(s) of the assets deposited under the above relationship. If the contracting partner is also the sole beneficial owner of the assets, the contracting partner's details must be set out below:

Account No.:	Contracting partner:
Last name(s) First name(s) (ontitue	
Date(s) of birth:	
Nationality(ies):	
Last name(s), First name(s)/entity:	
Date(s) of birth:	
Nationality(ies):	
Actual address of domicile/registered office:	
Last name(s), First name(s)/entity:	
Date(s) of birth:	
Nationality(ies):	

The contracting partner hereby undertakes to automatically inform the bank of any changes.

Signature(s) of the contracting partner(s) (Account Holder(s))

Date:

ESTABLISHMENT OF THE BENEFICIAL OWNER'S IDENTITY IN THE CASE OF COLLECTIVE INVESTMENTS OR INVESTMENT COMPANIES

Account No.:

Contracting partner:

The contracting partner hereby declares: (mark only one option with a cross where applicable)

"up to 20 investors"

that the number of investors (beneficial owners) of the assets deposited with the Bank is less or equal to twenty (20) and that the full name, date of birth, nationality, address and country (or firm's name and business address if the party is a legal entity or a company) of **all of them** is disclosed in the table below (all details for each investor).

or

"more than 20 investors"

that the numbers of investors (beneficial owners) of the assets deposited with the Bank is more than twenty (20).

Nr.	Full name¹	Date of birth ²	Nationality(ies)	Address⁴	Country⁵
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

¹ or full company name for companies

² required for individuals only

³ required for individuals only

⁴ domicile or primary residence, or registered office for companies

⁵ or State or country of registered office for companies

Nr.	Full name ¹	Date of birth ²	Nationality(ies)	Address⁴	Country⁵
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

The contracting partner undertakes to inform the Bank, of his own accord, about any changes.

Signature of the contracting partner (Account Holder):

Date of signature:

INFORMATION ON LIFE INSURANCE POLICIES WITH SEPARATELY MANAGED ACCOUNTS/SECURITIES ACCOUNTS (SO-CALLED INSURANCE WRAPPERS)

Account Nr.:

Contracting partner (Account Holder/s):

Insurance Policy Number:

Information on life insurance policies with separately managed accounts/securities accounts (so-called insurance wrappers)

The contracting partner hereby declares that the above Insurance Policy refers to the following persons. The contracting partner will also provide certified true copies of each person's official identification document:

1. Policy Holder(s)

Full name :	Full name :
Date of Birth :	Date of Birth :
Nationality (ies) :	Nationality (ies) :
Address/Domicile/Primary Residence :	Address/Domicile/Primary Residence :
Country :	Country :

2. Premium Payer(s) (if different from 1 above)

Full name :
Date of Birth :
Nationality (ies) :
Address/Domicile/Primary Residence :
Country :

The contracting partner undertakes to inform the bank, of its own accord, about any changes. Moreover, the contracting partner confirms having the above mentioned authorization to disclose such information to the bank.

Date of signature:_____

Signature of contracting partner (Account Holder/s):

ESTABLISHING OF THE CONTROLLING PERSON OF OPERATING LEGAL ENTITIES AND PARTNERSHIPS BOTH NOT QUOTED ON THE STOCK EXCHANGE

(for operating legal entities and partnerships that are contracting partner as well as analogously for operating legal entities and partnerships that are beneficial owners)

Account/securities	account	number:
--------------------	---------	---------

Contracting partner (Account Holder) :

The contracting partne	r hereby declares tha	t (tick the appropriate box):
------------------------	-----------------------	-------------------------------

the person(s) listed below is/are holding 25% or more of the contracting partner's shares (capital shares or voting rights); or
 if the capital shares or voting rights cannot be determined or in case there are no capital shares or voting rights of 25% or more, the contracting partner hereby declares that the person(s) listed below is/are controlling the contracting partner in other ways; or
 in case this/these person(s) cannot be determined or this/these person(s) does/do not exist, the contracting partner hereby declares that the person(s) listed below is/are the managing director(s).

Last name(s)/entity:	
First name(s):	
Actual address of domicile/registered office :	
Last name(s)/entity:	
First name(s):	
Actual address of domicile/registered office :	
Last name(s)/entity:	
First name(s):	
Actual address of domicile/registered office :	
Last name(s)/entity:	
First name(s):	
Actual address of domicile/registered office :	
Fiduciary holding of assets:	
Is a third person the beneficial owner of the assets held in the account/securities account ? No. Yes. > The relevant information regarding the beneficial owner has to be obtained by filling in a separate form A.	

The contracting partner hereby undertakes to automatically inform the bank of any changes to the information contained herein.

Date

Signature(s) of contracting partner (Account Holder)

FOUNDATIONS AND UNDERLYING COMPANIES OF FOUNDATIONS

Account/securities ac	count number :	Contracting partner (Account Holder):		
	reby declare(s) being a board member of f a foundation, known as:	The foundation, or of the highest supervisor	y body of an	
		nowledge the following information to the	bank:	
1. Name and informati	on pertaining to the foundation (tick th	e two boxes applicable):		
Governing Law/Jurisd	iction			
Type of foundation : and	Discretionary foundation or	□ Non-discretionary foundation		
Revocability:	□ Revocable foundation or	□ Irrevocable foundation		
Last name(s), first n	ame(s)/entity	iary) founder (individual(s) or entity/-ies):		
· · · · · ·				
Nationality(ies)				
Date of death (if dec In case of a revocabl	eased) e foundation: does the founder have th	e right to revoke the foundation?	🗌 Yes 🗌 No	
Last name(s), first r	name(s)/entity			
Actual address of d	omicile/registered office			
Country				
Date(s) of birth				
Nationality(ies) — Date of death (if de				
In case of a revocal	ole foundation: does the founder have th		🗆 Yes 🗌 No	

3. If the foundation results from the restructuring of a pre-existing foundation (re-settlement) or the merger of pre-existing foundations, the following information pertaining to the (actual) founder(s) of the pre-existing foundation(s) has to be given:

Last name(s), first name(s)/entity
Actual ddress of domicile/registered office
Country
Date(s) of birth
Nationality(ies)
Date of death (if deceased)
Last name(s), first name(s)/entity
Actual address of domicile/registered office
Country
Date(s) of birth
Nationality(ies)
Date of death (if deceased)
 4. Information a) pertaining to the beneficiary/-ies at the time of the signing of this form Last name(s), first name(s)/entity
Actual address of domicile/registered office
Country
Date(s) of birth
Nationality(ies)
Has/Have the beneficiary/-ies an actual right to claim a distribution ?
Last name(s), first name(s)/entity
Actual address of domicile/registered office
Country
Date(s) of birth
Nationality(ies)
Has/Have the beneficiary/-ies an actual right to claim a distribution ?

Last name(s), first name(s)/entity
Last name(s), first name(s)/entity Actual address of domicile/registered office
Country
Date(s) of birth
Nationality(ies)
Has/Have the beneficiary/-ies an actual right to claim a distribution ? Yes No
b) and in addition to certain beneficiaries or if there is/are no defined beneficiary/-ies pertaining to (a) group(s) of beneficiaries (e.g. descendants of the founder) known at the time of the signing of this form :
5. Information pertaining to (a) further person(s) having the right to determine or nominate representatives (e.g. members of the foundation board), if these representatives may dispose over the assets or have the right to change the distribution of the assets or the nomination of beneficiaries Last name(s), first name(s)/entity
Actual address of domicile/registered office
Country
Date(s) of birth
Nationality(ies)
In case of a revocable foundation: is/are there (a) further person(s) with the right to revoke the foundation? 🗌 Yes 🗌 No
Last name(s), first name(s)/entity
Actual address of domicile/registered office
Country
Date(s) of birth
Nationality(ies)
In case of a revocable foundation: is/are there (a) further person(s) with the right to revoke the foundation? □ Yes □ No

S

The contracting partner(s) hereby undertake(s) to automatically inform the bank of any changes to the information contained herein.

DECLARATION FOR TRUSTS AND UNDERLYING COMPANIES OF TRUST

Account/securities account number :

Contracting partner (Account Holder):

1. The undersigned hereby declare(s) that they are a trustee or a member of the highest supervisory body of an underlying company and, in such capacity, provide(s) to the best of his/her/their knowledge the following information to the bank :

a)		Trustee	Trustee
Last name, first name/entity			
Address			
b) Name and inform	nation pertaining to the	trust (tick the two boxes applica	ble), (Name <u>):</u>
Governing Law/Juri	sdiction:	Date Est	tablished :
Type of trust : [Discretionary Trust	or 🗌 Non-discretio	nary Trust
and			
Revocability:	Revocable Trust	or 🗌 Irrevocable Trust	t
Actual address o	of domicile/registered of	ffice	
Country			
Date(s) of birth			
Nationality(ies)			
Date of death (if	f deceased)		
In case of a revocal	ole trust: does the settlor	^r have the right to revoke the tru	ıst ? □Yes □No
Last name(s), fi	rst name(s)/entity		
Actual address o	of domicile/registered of		
Country			
Date(s) of birth			
Nationality(ies)			
Date of death (if	C		
In case of a revocal	ble trust: does the settlo	r have the right to revoke the tru	ust ? 🗆 Yes 🔲 No

3. If the trust results from a restructuring of a pre-existing trust (re-settlement) or a merger of pre-existing trusts, the following information pertaining to the (actual) settlor of the pre-existing trust(s) has to be given :

Т

b) and in addition to certain beneficiaries or if no beneficiary/-ies has/have been determined, pertaining to (a) group(s) of	٥f
beneficiaries (e.g. descendants of the settlor) known at the time of the signing of this form :	

5. Information pertaining to the protector(s) as well as (a) further person(s) having a right to revoke the trust (in case of revocable trusts) or to appoint the trustee of a trust:

a) Information pertaining to the protector(s) Last name(s), first name(s)/entity
Actual address of domicile/registered office
Country
Date(s) of birth
Nationality(ies)
In case of a revocable trust: does the protector have the right to revoke the trust ?
Actual address of domicile/registered office
Country
Date(s) of birth
Nationality(ies)
In case of a revocable trust: does the protector have the right to revoke the trust ?
b) Information pertaining to (a) further person(s)
Last name(s), first name(s)/entity
Actual address of domicile/registered office
Country
Date(s) of birth
Nationality(ies)
I case of a revocable trust: Has/have this/these further person(s) the right to revoke the trust ? Yes No
The contracting partner(s) hereby declare(s) to be entitled to open a bank account for the trust above.
The contracting partner(s) hereby undertake(s) to automatically inform the bank of any changes to the information contained herein

Signature(s) of Trustee(s)

DECLARATION OF U.S. TAX STATUS AND CONFIRMATION OF RESIDENCE FOR TAX PURPOSES (CONTROLLING PERSON)

The regulations which implement in Hong Kong the OECD's common reporting standard on the automatic exchange of tax information and the Foreign Account Tax Compliance Act (FATCA) require EFG Bank AG, Hong Kong Branch (hereinafter "Bank") to collect information relating to a Controlling Person's residence for tax purposes.

Information about Controlling Persons is only required if the Account Holder (entity) is:

- A **passive NFFE** for FATCA purposes;
- A **passive NFE** for AEOI / CRS purposes; or
- A Professionally Managed Investment Entity (PMIE) in a Non-Participating Jurisdiction for AEOI / CRS purposes.

Key terms are defined in the Glossary. Neither this document nor any related written or oral explanations constitute tax advice. The Bank recommends contacting a qualified tax advisor or the relevant tax authorities, if required.

PART 1 - Identification Of Account Holder (Entity)¹

Name of the entity

The Account Holder (entity) submitted the appropriate / relevant forms to declare its status to the Bank. The certification at hand is only intending to determine the U.S. Tax Status and the Country(ies) / Jurisdiction(s) of residence for tax purposes of each of its Controlling Persons.

PART 2 - Identification Of Controlling Person (Individual / Natural Person)

(a separate form must be completed for each Controlling Person)

Last r	name		me		
Resid	ence address (street, house or building no. etc.) - Please do	not use any P.O. box or in-care-of address			
Town	/ city, state or province	 Postal code	Country		
Date	of birth (DD-MM-YYYY)				
	T 3 - U.S. Tax Status Declaration Of Cont ase tick the appropriate boxes with regar	-	-	ount Holder (er	ntity) :
a)	Is the Controlling Person a U.S. citizen? (If the Controlling Person holds multiple (aa) Is the Controlling Person born in t	e citizenships, tick "Yes" if one he U.S. (or a U.S. territory)?		Yes 🗌 Yes 🗌	No 🗌 No 🗌
b)	Is the Controlling Person a resident of (ba) He/she is in possession of a U.S. G (bb) He/she meets the substantial pres If he/she meets the substantial pres	reen Card (irrespective of exp sence test? sence test, but he/she left the	piry date)? e U.S. during this calendar <u>y</u>	Yes 🗌 Yes 🗌 year,	No 🗌 No 🗌
c)	is the residence of the Controlling F Is the Controlling Person a U.S. person If yes, please state the reason:		-	Yes 🗌 Yes 🗌	No 🗌 No 🗌

¹ The singular form includes the plural, and all masculine terms referring to persons refer to both genders.

² If the answer is "No", a current certificate of residence issued by an authorized government body (for example, a government, an agency thereof, or a municipality) of the Country in which the Controlling Person claims to be a tax resident or an IRS Form W-8BEN is required.

I hereby certify that:

- The Controlling Person identified on this form is not a U.S. person for U.S. tax purposes
- The Controlling Person identified on this form is a U.S. person for U.S. tax purposes and will provide an IRS Form W-9, a US waiver and a U.S tax identification number (SSN or ITIN)

PART 4 - Country(les) / Jurisdiction(S) Of Residence For Tax Purposes3 And Related Taxpayer Identification Numbers Or Functional Equivalents (TINS)

Please complete the following table indicating:

- All Countries / Jurisdictions where the Controlling Person is resident for tax purposes (other than the U.S.); and
- $\cdot\,$ The Controlling Person's TIN for each Country / Jurisdiction indicated.

Each Country / Jurisdiction has its own rules for defining tax residence and Countries / Jurisdictions provided information on how to determine whether an individual is resident for tax purposes in the Jurisdiction for inclusion on the local AEOI Portal (https://www.ird.gov.hk).

If the Controlling Person is unable to provide a TIN for a specific Country / Jurisdiction of residence for tax purposes, please include the appropriate reason **A**, **B**, **C**, **D**, **E** or **F** in the right column of the table below:

- Reason A The Controlling Person's Country / Jurisdiction of residence for tax purposes does not assign TINs to its residents.
- **Reason B** The Controlling Person is a new resident and his/her TIN is not issued yet (please note that the TIN must be submitted within 90 days).
- **Reason C** Despite the Country / Jurisdiction of residence for tax purposes generally issuing TINs, the Controlling Person is not required to obtain a TIN.
- Reason D The Country / Jurisdiction of residence for tax purposes stated above is Hong Kong.
- Reason E The Country / Jurisdiction of residence for tax purposes stated above is not a Reportable Jurisdiction.
- Reason F The Controlling Person is otherwise unable to provide a TIN. Please specify the reason below:

	Country / Jurisdiction of residence for tax purposes ³	TIN	If no TIN available enter reason A, B, C, D, E or F
1			
2			
3			

³ Country / Jurisdiction of residence for tax purposes (for AEOI / CRS purposes only)

Generally, an individual is resident for tax purposes in a Country / Jurisdiction if, under the laws of that Country / Jurisdiction (including tax conventions), he/she pays or should be paying tax therein by reason of his/her domicile, residence, or any other criterion of a similar nature (i.e. full tax liability), and not only from sources in that Jurisdiction. Dual resident individuals may rely on the tiebreaker rules contained in tax conventions (if applicable) to solve cases of double residence for determining their residence for tax purposes.

PART 5 - Type of Controlling Person

Please tick the appropriate box to indicate the type of Controlling Person.

- Controlling Person of a legal person control by ownership
- Controlling Person of a legal person control by other means
- Controlling Person of a legal person senior managing official
- Controlling Person of a trust settlor
- Controlling Person of a trust trustee
- Controlling Person of a trust protector
- Controlling Person of a trust beneficiary
- Controlling Person of a trust other
- Controlling Person of a legal arrangement (non-trust)⁴ settlor-equivalent
- Controlling Person of a legal arrangement (non-trust)⁴ trustee-equivalent
- Controlling Person of a legal arrangement (non-trust)⁴ protector-equivalent
- Controlling Person of a legal arrangement (non-trust)⁴ beneficiary-equivalent
- Controlling Person of a legal arrangement (non-trust)⁴ other-equivalent

PART 6 - Change In Circumstances

For the duration of the contractual relationship with the Bank, I hereby confirm that I undertake to notify the Bank within 30 days on my own initiative, if the Controlling Person's status for U.S. tax purposes and/or his/her Country(ies) / Jurisdiction(s) of residence for tax purposes changes. If any certification made on this form becomes incorrect, I agree that I will submit a new form and/or further necessary forms and documentation within 90 days after such change in circumstances.

In case of any change in circumstances, I further affirm that I am aware that the above mentioned relationship with the Bank may be terminated, if one of the Controlling Persons fails to comply with the obligation to submit the relevant documentation required to determine whether the account is a U.S. or non-U.S. account for U.S. tax purposes and/or his/her Country(ies) / Jurisdiction(s) of residence for tax purposes.

PART 7 - Declaration And Signature

By signing this form below, I declare that all statements made in this form are, to the best of my knowledge and belief, true, correct and complete.

If you are not the Controlling Person identified in the relevant part of this form but you file this form as an authorized signatory of the Account Holder, by signing this form you hereby confirm that the Controlling Person identified in this form has been informed about the content of this form and the Bank's obligation to exchange information with the relevant tax authorities as explained in this form and agrees with the content of this form.

By signing this form, I confirm that I have declared all countries in which I am tax resident and I am aware that willfully providing incorrect information on a self-certification, not notifying the Bank about any change in circumstances or providing incorrect information about any change in circumstances is subject to penalty.

Print Name

Signature of the Account Holder or Controlling Person

⁴ Other legal arrangements that are not trusts include, for example, a foundation or fideicomiso.

Date

PART 8 - Glossary

Account Holder (FATCA and AEOI / CRS)

The term Account Holder means the person listed or identified as the holder of a Financial Account by the Financial Institution that maintains the account. A person, other than a Financial Institution, holding a Financial Account for the benefit or account of another person as agent, custodian, nominee, signatory, investment advisor, or intermediary, is not treated as holding the account for purposes of FATCA and AEOI / CRS, and such other person is treated as holding the account. In the case of a banking relationship of a trust, the trust is the Account Holder for FATCA and AEOI / CRS purposes and not the trustee.

Active NFE / NFFE (FATCA and AEOI / CRS)

An NFE is an Active NFE for purposes of AEOI / CRS if it meets the criteria for any of the sub-categories listed below (the requirements are applied analogously to Active NFFEs under FATCA):

· Active NFE by reason of income and assets:

Less than 50% of the NFE's gross income for the preceding calendar year or other appropriate reporting period is passive income (e.g. dividends, interest, rents, royalties, annuities) and less than 50% of the assets held by the NFE during the preceding calendar year or other appropriate reporting period are assets that produce or are held for the production of passive income.

• Publicly traded NFE:

The interests in the NFE are regularly traded on an established securities market.

- $\cdot\,$ Related Entity of a publicly traded entity:
- The NFE is a Related Entity of an entity the interests in which are regularly traded on an established securities market. • Governmental Entity, International Organisation, or Central Bank:
- The NFE is a Governmental Entity, an International Organisation, a Central Bank, or an entity wholly owned by one or more of the foregoing.
- Holding NFE that is a member of a nonfinancial group:

Substantially all of the activities of the NFE consist of holding (in whole or in part) the outstanding stock of, or providing financing and services to, one or more subsidiaries that engage in trades or businesses other than the business of a Financial Institution, except that an entity does not qualify for this status if the entity functions (or holds itself out) as an investment fund, such as a private equity fund, venture capital fund, leveraged buyout fund, or any investment vehicle whose purpose is to acquire or fund companies and then hold interests in those companies as capital assets for investment purposes.

· Start-up NFE:

The NFE is not yet operating a business and has no prior operating history, but is investing capital into assets with the intent to operate a business other than that of a Financial Institution, provided that the NFE does not qualify for this exception after the date that is 24 months after the date of the initial organisation of the NFE.

• NFE that is liquidating or emerging from bankruptcy:

The NFE was not a Financial Institution in the past five years, and is in the process of liquidating its assets or is reorganising with the intent to continue or recommence operations in a business other than that of a Financial Institution.

• Treasury center that is a member of a nonfinancial group:

The NFE primarily engages in financing and hedging transactions with, or for, Related Entities that are not Financial Institutions, and does not provide financing or hedging services to any entity that is not a Related Entity, provided that the group of any such Related Entities is primarily engaged in a business other than that of a Financial Institution.

• Non-profit NFEs:

The NFE meets all the following requirements:

- It is established and operated in its Jurisdiction of residence exclusively for religious, charitable, scientific, artistic, cultural, athletic, or educational purposes; or it is established and operated in its Jurisdiction of residence and it is a professional organisation, business league, chamber of commerce, labour organisation, agricultural or horticultural organisation, civic league or an organisation operated exclusively for the promotion of social welfare;
- It is exempt from income tax in its Jurisdiction of residence;
- \cdot It has no shareholders or members who have a proprietary or beneficial interest in its income or assets;
- The applicable laws of the NFE's Jurisdiction of residence or the NFE's formation documents do not permit any income or assets of the NFE to be distributed to, or applied for the benefit of, a private person or non-charitable entity other than pursuant to the conduct of the NFE's charitable activities, or as payment of reasonable compensation for services rendered, or as payment representing the fair market value of property which the NFE has purchased; and
- The applicable laws of the NFE's Jurisdiction of residence or the NFE's formation documents require that, upon the NFE's liquidation or dissolution, all of its assets be distributed to a Governmental Entity or other non-profit organisation, or escheat to the government of the NFE's Jurisdiction of residence or any political subdivision.

Any other reason (for being a resident of the U.S. for U.S. tax purposes) (for FATCA purposes only)

Other reasons for being treated as a U.S. resident for U.S. tax purposes are e.g. dual residency, being a non-U.S. spouse filing jointly a U.S. tax return with a U.S. spouse or relinquishing U.S. citizenship or long-term permanent residency in the U.S. Please note that owning real estate in the U.S. or equity and debt interest in U.S. entities (e.g. in a U.S. partnership) does not by itself result in being a resident of the U.S.

Controlling Persons (for FATCA and AEOI / CRS purposes)

The term Controlling Persons means the natural persons who exercise control over an entity. In the case of a trust, such term means the settlor(s), the trustee(s), the protector(s) (if any), the beneficiary(ies) or class(es) of beneficiaries, and any other natural person(s) exercising ultimate effective control over the trust, and in the case of a legal arrangement other than a trust, such term means persons in equivalent or similar positions.

Country / Jurisdiction of residence for tax purposes (for AEOI / CRS purposes only)

Generally, an individual is resident for tax purposes in a Country / Jurisdiction if, under the laws of that Country / Jurisdiction (including tax conventions), he/she pays or should be paying tax therein by reason of his/her domicile, residence, or any other criterion of a similar nature (i.e. full tax liability), and not only from sources in that Jurisdiction. Dual resident individuals may rely on the tiebreaker rules contained in tax conventions (if applicable) to solve cases of double residence for determining their residence for tax purposes.

Passive NFE / NFFE (FATCA and AEOI / CRS)

The term Passive NFE / NFFE means any NFE / NFFE that is not an Active NFE / NFFE.

Professionally Managed Investment Entity (PMIE) (AEOI / CRS only)

The term PMIE means any entity the gross income of which is primarily attributable to investing, reinvesting, or trading in Financial Assets, if the entity is managed by another entity that is a Depository Institution, a Custodial Institution, a Specified Insurance Company, or a Managing Investment Entity.

An entity's gross income is primarily attributable to investing, reinvesting, or trading in Financial Assets, if the entity's gross income attributable to the relevant activities equals or exceeds 50% of the entity's gross income during the shorter of: (i) the three-year period ending on 31 December of the year preceding the year in which the determination is made; or (ii) the period during which the entity has been in existence. An entity is "managed by" another entity if the managing entity performs, either directly or through another service provider, any of the following activities or operations on behalf of the managed entity:

- Trading in money market instruments (cheques, bills, certificates of deposit, derivatives, etc.); foreign exchange; exchange, interest rate and index instruments; transferable securities; or commodity futures trading;
- Individual and collective portfolio management; or
- Otherwise investing, administering, or managing Financial Assets or money on behalf of other persons.

However, an entity does not manage another entity if it does not have discretionary authority to manage the entity's assets (in whole or in part). Where an entity is managed by a mix of Financial Institutions, NFEs or individuals, the entity is considered to be managed by another entity that is a Financial Institution.

Reportable Account (AEOI / CRS only)

The term Reportable Account means an account held by one or more Reportable Persons or by a Passive NFE (or a Professionally Managed Investment Entity in a Non-Participating Jurisdiction) with one or more Controlling Persons that is a Reportable Person, provided it has been identified as such pursuant to the applicable AEOI / CRS due diligence procedures.

Reportable Person (AEOI / CRS only)

The term Reportable Person means a person that is resident for tax purposes in a Reportable Jurisdiction under the tax laws of such Jurisdiction other than: (i) a corporation the stock of which is regularly traded on one or more established securities markets; (ii) any corporation that is a Related Entity of a corporation described in clause (i); (iii) a Governmental Entity; (iv) an International Organisation; (v) a Central Bank; or (vi) a Financial Institution.

Participating Jurisdiction (also known as Reportable Jurisdiction) (AEOI / CRS only)

The term Participating Jurisdiction means a Country / Jurisdiction that has committed to implement the CRS and is able to enforce reporting by its financial institution.

Substantial presence test (FATCA only)

To meet the substantial presence test, an individual must have been physically present in the U.S. on at least:

- \cdot 31 days during the current year; and
- 183 days during the 3 year period that includes the current year and the 2 years immediately before. To satisfy the 183 days requirement, count:
- All of the days you were present in the current year; and
- · One-third of the days you were present in the first year before the current year; and
- One-sixth of the days you were present in the second year before the current year.

TIN (FATCA and AEOI / CRS)

The term TIN means Taxpayer Identification Number or a functional equivalent in the absence of a TIN. A TIN is a unique combination of letters or numbers assigned by a Jurisdiction to an individual or an entity and used to identify the individual or entity for the purposes of administering the tax laws of such Jurisdiction. Further details of acceptable TINs can be found on the OECD AEOI Portal (<u>http://www.oecd.org/tax/automatic-exchange/</u>).

U.S. territory (FATCA only)

The term U.S. territory includes amongst others the Commonwealth of the Northern Mariana Islands, Guam, the Commonwealth of Puerto Rico, and the U.S. Virgin Islands.

U.S. Green Card (FATCA only)

A U.S. Green Card means a U.S. alien registration card as a lawful permanent resident issued by the U.S. Citizenship and Immigration Service (USCIS). An individual who, at any time during the calendar year, has been admitted to the U.S. as a lawful permanent resident is a resident alien for that year. An individual ceases to be a lawful permanent resident if the status was revoked or determined to have been abandoned.

SELF-CERTIFICATION FORM FOR INDIVIDUALS FOR TAX PURPOSES

Tax Regulations require EFG Bank AG, Hong Kong Branch (hereinafter **"Bank**") to collect and report certain information about Account Holder's tax residency. To enable Bank to comply with its obligations, please fill in this form if you're an individual account holder.

For joint or multiple account holders, please use a separate form for each individual person. Mandatory fields are marked with a "*".

Neither this document nor any related written or oral explanations constitute tax advice. The Bank recommends contacting a qualified tax advisor, if required.

PART 1 - **Identification of Account Holder** (for joint accounts, a separate form must be completed for each Account Holder)¹

Personal details

Last Name:

Date of birth (DD-MM-YYYY):

Place and country of birth:

First Name(s):

Nationality (ies) (Please indicate all your nationalities):

Permanent Residence address (street, house or building no. etc.), not a P.O. box or in-care-of address:

Street, number:

Town / city, state or province:

Postal code:

Country:

Mailing address – (if different from above):

Street, number:

Town / city, state or province:

Postal code:

Country:

PART 2 – Country of Residence for Tax Purposes and related Taxpayer Identification Number or equivalent number ("TIN")*

Please complete the following table indicating where the Account Holder is tax resident (i.e. where he/she is liable to pay tax) and the Account Holder's TIN for each country indicated.

If the Account Holder is tax resident in more than one country, please input each one (and its associated TIN) on a separate line. If a TIN is unavailable please provide the appropriate reason A, B or C as indicated below:

- **Reason A:** The country where the Account Holder is liable to pay tax does not issue TINs to its residents
- **Reason B:** No TIN is required (only select this reason if the authorities of the country of tax residence entered above do not require the TIN to be disclosed)
- **Reason C:** The Account Holder is otherwise unable to obtain a TIN or equivalent number (if you have selected this reason please explain why you are unable to obtain a TIN)

Country of tax residence	TIN	If no TIN available enter reason A, B or C	Reason for missing TIN (only if reason C is selected)

PART 3 - Tax Status for US Tax Purpose

Please tick the appropriate boxes with regard to your above-mentioned account with the Bank:

	Are	vou	а	U.S.	citizen*?
٠		you	u	0.0.	

(If you hold multiple citizenships, tick "Yes" if one of them is U.S.):	Yes	No 🗆
Are you a lawful permanent U.S. resident ("Green card holder" irrespective of the expiry date)*	Yes 🗌	No 🗆
Do you meet the substantial presence tests in the USA ¹ *:	Yes 🗌	No 🗆
If you meet the substantial presence test, but you left the U.S. during this calendar year, is your residence still temporarily or permanently in the U.S.?	Yes 🗆	No ¹ □
Were you born in the U.S. or in a U.S. Territory ³ *:	Yes 🗆	No 🗆
Are you a U.S. person under U.S. tax law for any other reason*:	Yes 🗌	No 🗆

If yes, for what reason⁴:-

¹To meet the substantial presence test, you must have been physically present in the U.S. on at least:

- 31 days during the current year; and
- 183 days during the 3 year period that includes the current year and the 2 years immediately before. To satisfy the 183 days requirement, count:

To satisfy the 183 days requirement, count:

- All of the days you were present in the current year; and
- One-third of the days you were present in the first year before the current year; and
- One-sixth of the days you were present in the second year before the current year.

2 An IRS Form W-8BEN is required.

³American Samoa, the Commonwealth of the Northern Mariana Islands, Guam, the Commonwealth of Puerto Rico or U.S. Virgin Islands. ⁴For example, dual residency, being a non-U.S. spouse filing jointly a U.S. tax return with a U.S. Spouse or relinquishing U.S. citizenship or long-term permanent residency in the U.S.

Please note that owning real estate in the U.S. or equity and debt interest in U.S. entities (e.g. in a U.S. partnership) does not by itself result in being a U.S. person under U.S. tax laws.

If you are a US person for tax purposes, please additionally provide the Bank with a W-9 and an IRS waiver. I

hereby certify that:

The account holder identified on this form is not a U.S. person for U.S. tax purposes.

The account holder identified on this form is a U.S. person for U.S. tax purposes.

PART 4 – Claim of Tax Treaty Benefits with the USA (if any)¹

If you claim the benefit of the income tax treaty between the Unites States and your country of residence, please tick the following box and complete all information required:

PART 5 - Change in Circumstances

I undertake for the duration of the contractual relationship with the Bank to notify the Bank within 30 days on my own initiative, if my status for U.S. tax purposes and/or my Country(ies) / Jurisdiction(s) of residence for tax purposes or any other certification made on this form changes or becomes incorrect. I agree that I will submit a new form and / or further necessary forms and documentation within at most 30 days after such change in circumstances.

In case of any change in circumstances, I further affirm that I am aware that the above mentioned relationship with the Bank may be terminated if I fail to comply with my obligation to submit the relevant documentation required to determine whether the account is a U.S. or non-U.S. account for U.S. tax purposes and / or the Country(ies) / Jurisdiction(s) in which I am resident for tax purposes.

PART 6 - Certification QI(for non-U.S. person only)

Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under penalties of perjury that:

- I am the individual that is the beneficial owner (or am authorized to sign for the individual that is the beneficial owner) of all the income to which this form relates or am using this form to document myself for chapter 4 purposes;
- The person named in part 1 of this form is not a U.S. person;
- The income to which this form relates is:
- (a) not effectively connected with the conduct of a trade or business in the United States;
 (b) effectively connected but is not subject to tax under an applicable income tax treaty; or
 (c) the partner's share of a partnership's effectively connected income;
- The person named in part 1 of this form is a resident of the treaty country listed in part 4 of the form (if any) within the meaning of the income tax treaty between the United States and that country; and
- For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.

Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am the beneficial owner or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner. I agree that I will submit a new form within 30 days if any certification made on this form becomes incorrect.

PART 7 - Declaration and Signature

Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete, and that I am the individual that is the beneficial owner (or am authorized to sign for the individual that is the beneficial owner) of all the income to which this form relates.

If you are a resident in a FATCA partner jurisdiction (that is, a Model 1 IGA jurisdiction with reciprocity), certain tax account information may be provided to the jurisdiction of residence.

I undertake(s) to spontaneously notify the Bank of any changes of the information on this form within at latest 30 days of any such change.

By signing this form, I confirm that I have declared all countries in which I am tax resident and I am aware that willfully providing incorrect information on a self-certification, not notifying the Bank about any change in circumstances or providing incorrect information about any change in circumstances is subject to penalty.

If you are a non-US individual, the Internal Revenue Service does not require your consent to any provisions of this document other than the certifications required to establish your status as a non-U.S. individual and, if applicable, obtain a reduced rate of withholding.

Date(DD-MM-YYYY)

Signature of the Account Holder

Capacity in which acting (if form is not signed by beneficial owner)

PART 8 - Glossary

Account Holder

The term Account Holder means the person listed or identified as the holder of a Financial Account by the Financial Institution that maintains the account. A person, other than a Financial Institution, holding a Financial Account for the benefit or account of another person as agent, custodian, nominee, signatory, investment advisor, or intermediary, is not treated as holding the account for purposes of FATCA and AEOI / CRS, and such other person is treated as holding the account. In the case of a banking relationship of a trust, the trust is the Account Holder for FATCA and AEOI / CRS purposes and not the trustee.

Any other reason (for being a resident of the U.S. for U.S. tax purposes) (FATCA only)

Other reasons for being treated as a U.S. resident for U.S. tax purposes are e.g. dual residency, being a non-U.S. spouse filing jointly a U.S. tax return with a U.S. spouse or relinquishing U.S. citizenship or long-term permanent residency in the U.S. Please note that owning real estate in the U.S. or equity and debt interest in U.S. entities (e.g. in a U.S. partnership) does not by itself result in being a resident of the U.S.

Country / jurisdiction of residence for tax purposes

Generally, an individual is resident for tax purposes in a Country / Jurisdiction if, under the laws of that Country / Jurisdiction (including tax conventions), he/she pays or should be paying tax therein by reason of his/ her domicile, residence, or any other criterion of a similar nature (i.e. full tax liability), and not only from sources in that jurisdiction. Dual resident individuals may rely on the tiebreaker rules contained in tax conventions (if applicable) to solve cases of double residence for determining their residence for tax purposes.

Intergovernmental Agreement ("IGA") (FATCA-relevant only)

The term IGA means an agreement or arrangement between the US and a non-US government governing the implementation of FATCA in such non-US jurisdiction. An IGA modifies the provisions of FATCA in order to eliminate potential conflict of law issues and to reduce the administrative burden.

Participating Jurisdiction (AEOI / CRS only)

The term Participating Jurisdiction means a Country / Jurisdiction that has committed to implement the CRS and is able to enforce reporting by its financial institution.

Partner Jurisdiction (AEOI / CRS only)

The term Partner Jurisdiction means a Country / Jurisdiction that has committed to exchanging CRS information with the booking centre jurisdiction. Please refer to the local legislation of the booking center to know all Partner Jurisdictions with respect to the Country / Jurisdiction of the booking center.

<u>Reportable Account</u> (AEOI / CRS only)

The term Reportable Account means an account held by one or more Reportable Persons provided it has been identified as such pursuant to the applicable AEOI / CRS due diligence procedures.

<u>Reportable Person</u> (AEOI / CRS only)

The term Reportable Person means a person that is resident for tax purposes in a Reportable Jurisdiction under the tax laws of such jurisdiction.

Substantial presence test

To meet the substantial presence test, an individual must have been physically present in the U.S. on at least:

• 31 days during the current year; and

- 183 days during the 3 years period that includes the current year and the 2 years immediately before. To satisfy the 183 days requirement, count:
 - All of the days you were present in the current year; and
 - \cdot One-third of the days you were present in the first year before the current year; and
 - One-sixth of the days you were present in the second year before the current year.

<u>TIN</u>

The term "TIN" means Taxpayer Identification Number or a functional equivalent in the absence of a TIN. A TIN is a unique combination of letters or numbers assigned by a jurisdiction to an individual or an entity and used to identify the individual or entity for the purposes of administering the tax laws of such jurisdiction. Further details of acceptable TINs can be found on the OECD AEOI Portal (http://www.oecd.org/tax/automatic-exchange/).

Some jurisdictions do not issue a TIN. However, these jurisdictions often utilize some other high integrity number with an equivalent level of identification (i.e. social security/insurance number, citizen/personal identification number, resident registration number).

U.S. Green Card (FATCA only)

A U.S. Green Card means a U.S. alien registration card as a lawful permanent resident issued by the U.S. Citizenship and Immigration Service (USCIS). An individual who, at any time during the calendar year, has been admitted to the U.S. as a lawful permanent resident is a resident alien for that year. An individual ceases to be a lawful permanent resident if the status was revoked or determined to have been abandoned.

U.S. Person (FATCA only)

The term U.S. Person means a U.S. citizen or resident.

U.S. Territory (FATCA only)

The term U.S. territory includes amongst others the Commonwealth of the Northern Mariana Islands, Guam, the Commonwealth of Puerto Rico, and the U.S. Virgin Islands.



CONFIRMATION OF RESIDENCE FOR TAX PURPOSES AND AEOI / CRS STATUS (ENTITY)

The regulations which implement in Hong Kong the OECD's common reporting standard on the automatic exchange of tax information require EFG Bank AG, Hong Kong Branch (hereinafter "Bank") to collect information relating to an Account Holder's residence for tax purposes. In accordance with the above-mentioned regulations, the undersigned Account Holder hereby declares and confirms the below certifications to the Bank.

Key terms are defined in the Glossary. Neither this document nor any related written or oral explanations constitute tax advice. The Bank recommends contacting a qualified tax advisor or the relevant tax authorities, if required.

PART 1 - Identification of Account Holder (Entity)¹

Name of the entity		
Residence address (street, house or building no. etc.) Please do not use any P.O. box or in-care-of address unless these are entered as such in the c	ommercial register.	
City or town, state or province. Include postal code where appropriate	Country	
PART 2 - Entity Type		
Please provide the Account Holder's Status by ticking one of the fol	lowing boxes in this PART 2.	
 Professionally managed Investment Entity² a) Investment Entity located in a Participating Jurisdiction and managed b) Investment Entity located in a Non-Participating Jurisdiction and mar 		
2. Financial Institution – Depository Institution, Custodial Institutio	n or Specified Insurance Company or Investment Entity	
3. Active NFE c) Active NFE - Publicly traded corporation Please provide the name of the established securities market on wh	ich the stock of the Account Holder is regularly traded:	
d) Active NFE – Non-financial Corporation that is a Related Entity Please provide the name of the publicly traded corporation of w		
Please provide the name of the established securities market or regularly traded:	on which the stock of the corporation listed above is	
a) Active NEE - Covernmental Entity or Central Dank		

e) Active NFE - Governmental Entity or Central Bank
f) Active NFE - International Organization
g) Active NFE - Other³

4. Passive NFE (please complete PART 4)

¹ In general, the contracting party of a banking relationship is treated as the Account Holder for AEOI / CRS purposes. However, there are exceptions regarding certain intermediaries as well as concerning trusts.

² Entities that are typically treated as PMIEs include private and collective investment vehicles (e.g. private investment companies, trusts, foundations or funds) that are professionally managed, e.g. because they have a discretionary asset management mandate with another Financial Institution in place.

³ The "Active NFE - Other" category covers all Active NFE statuses that are not separately listed above (e.g. Active NFEs by reason of income and assets or Non-profit NFEs).

PART 3 - Country(Ies) / Jurisdiction(S) Of Residence For Tax Purposes And Related Taxpayer Identification Numbers Or Functional Equivalents (Tins)

Please complete the below table indicating:

- All Countries / Jurisdictions where the Account Holder is resident for tax purposes; and
- The Account Holder's TIN for each Country / Jurisdiction indicated.

Each Country/Jurisdiction has its own rules for defining tax residence and Countries/Jurisdictions provided information on how to determine whether an entity is resident for tax purposes in the Jurisdiction for inclusion on the local AEOI Portal (https://www.ird.gov.hk).

If the Account Holder is not resident for tax purposes in any Country / Jurisdiction (e.g., because it is fiscally transparent), please provide its place of effective management or Jurisdiction in which its principal office is located. Trusts are typically resident for AEOI / CRS purposes in the residence of their trustee(s) and branches are tax resident for AEOI / CRS purposes in the Country / Jurisdiction of residence for tax purposes of the headquarter entity of which they are a branch.

If the Account Holder is unable to provide a TIN for a specific Country / Jurisdiction of residence for tax purposes, please include the appropriate reason A, B, C, D, E or F in the right column of the table below:

- Reason A The Account Holder's Country / Jurisdiction of residence for tax purposes does not assign TINs to its residents.
- **Reason B** Despite the Country / Jurisdiction of residence for tax purposes generally issuing TINs, the Account Holder is not required to obtain a TIN.
- Reason C The Country / Jurisdiction of residence for tax purposes stated in the below table is Hong Kong.
- Reason D The Country / Jurisdiction of residence for tax purposes stated in the below table is not a Reportable Jurisdiction.
- **Reason E** The Account Holder's AEOI / CRS Status is: (i) PMIE; (ii) other type of Financial Institution; (iii) publicly traded NFE; (iv) non-financial corporation that is a Related Entity of a publicly traded corporation; (v) Governmental Entity or Central Bank; or (vi) International Organization.
- Reason F The Account Holder is otherwise unable to provide a TIN. Please specify the reason below:

	Country / Jurisdiction of residence for tax purposes	TIN	If no TIN available enter reason A, B, C, D, E or F
1			
2			
3			

PART 4 - Controlling Persons

Please complete this PART 4 if you ticked:

- Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution; or
- Passive NFE

Please indicate the name and date of birth of any Controlling Person(s) of the Account Holder below.

In addition, please complete a Form U.S. Tax Status Declaration and Confirmation of Residence for Tax Purposes (Controlling Person) for each Controlling Person⁴. Please see the definition of the term Controlling Person in the Glossary.

	Name	Date of birth
1		
2		
3		
4		
5		
6		
7		
8		

⁴ If the Account Holder has more than eight Controlling Persons, please attach a separate list.

PART 5 - Change In Circumstances

For the duration of the contractual relationship with the Bank, I hereby confirm that I undertake to notify the Bank within 30 days on my own initiative, if the Account Holder's (or the Controlling Persons', if any) Country(ies) / Jurisdiction(s) of residence for tax purposes changes. If any certification made on this form becomes incorrect (including any changes to the information on Controlling Persons, if any), I agree that I will submit a new form and/or further necessary forms and documentation within 90 days after such change in circumstances.

In case of any change in circumstances, I further affirm that I am aware that the above mentioned relationship with the Bank may be terminated, if the Account Holder (or one of the Controlling Persons, if any) fails to comply with the obligation to submit the relevant documentation re- quired to determine the Country(ies) / Jurisdiction(s) of residence for tax purposes of the Account Holder (or the Controlling Persons, if any).

PART 6 - Declaration And Signature

By signing this form, I confirm that I have declared all countries in which I am tax resident, and I am aware that wilfully providing incorrect information on a self-certification, not notifying the Bank about any change in circumstances or providing incorrect information about any change in circumstances is subject to penalty.

Signature of individual(s) authorised to sign for the Account Holder

Print name

Date (DD/MM/YYYY) of signature

Signature of individual(s) authorised to sign for the Account Holder

Print name

Date (DD/MM/YYYY) of signature

PART 7 - Glossary

Account Holder

The term Account Holder means the person listed or identified as the holder of a Financial Account by the Financial Institution that maintains the account. A person, other than a Financial Institution, holding a Financial Account for the benefit or account of another person as agent, custodian, nominee, signatory, investment advisor, or intermediary, is not treated as holding the account for purposes of AEOI / CRS, and such other person is treated as holding the account. In the case of a banking relationship of a trust, the trust is the Account Holder for AEOI / CRS purposes and not the trustee.

Active NFE

An NFE is an Active NFE if it meets the criteria for any of the sub-categories listed below:

• Active NFE by reason of income and assets:

Less than 50% of the NFE's gross income for the preceding calendar year or other appropriate reporting period is passive income (e.g. dividends, interest, rents, royalties, annuities) and less than 50% of the assets held by the NFE during the preceding calendar year or other appropriate reporting period are assets that produce or are held for the production of passive income.

• Publicly traded NFE:

- The interests in the NFE are regularly traded on an established securities market.
- Related Entity of a publicly traded entity:
- The NFE is a Related Entity of an entity the interests in which are regularly traded on an established securities market. • Governmental Entity, International Organisation, or Central Bank:
- The NFE is a Governmental Entity, an International Organisation, a Central Bank, or an entity wholly owned by one or more of the foregoing.
- $\cdot\,$ Holding NFE that is a member of a nonfinancial group:

Substantially all of the activities of the NFE consist of holding (in whole or in part) the outstanding stock of, or providing financing and services to, one or more subsidiaries that engage in trades or businesses other than the business of a Financial Institution, except that an entity does not qualify for this status if the entity functions (or holds itself out) as an investment fund, such as a private equity fund, venture capital fund, leveraged buyout fund, or any investment vehicle whose purpose is to acquire or fund companies and then hold interests in those companies as capital assets for investment purposes.

• Start-up NFE:

The NFE is not yet operating a business and has no prior operating history but is investing capital into assets with the intent to operate a business other than that of a Financial Institution, provided that the NFE does not qualify for this exception after the date that is 24 months after the date of the initial organisation of the NFE.

• NFE that is liquidating or emerging from bankruptcy:

The NFE was not a Financial Institution in the past five years and is in the process of liquidating its assets or is reorganising with the intent to continue or recommence operations in a business other than that of a Financial Institution.

· Treasury center that is a member of a nonfinancial group:

The NFE primarily engages in financing and hedging transactions with, or for, Related Entities that are not Financial Institutions, and does not provide financing or hedging services to any entity that is not a Related Entity, provided that the group of any such Related Entities is primarily engaged in a business other than that of a Financial Institution.

• Non-profit NFEs:

- The NFE meets all the following requirements:
 - It is established and operated in its Jurisdiction of residence exclusively for religious, charitable, scientific, artistic, cultural, athletic, or educational purposes; or it is established and operated in its Jurisdiction of residence, and it is a professional organisation, business league, chamber of commerce, labour organisation, agricultural or horticultural organisation, civic league or an organisation operated exclusively for the promotion of social welfare;
 - It is exempt from income tax in its Jurisdiction of residence;
 - It has no shareholders or members who have a proprietary or beneficial interest in its income or assets;
 - The applicable laws of the NFE's Jurisdiction of residence or the NFE's formation documents do not permit any income or assets of the NFE to be distributed to, or applied for the benefit of, a private person or non-charitable entity other than pursuant to the conduct of the NFE's charitable activities, or as payment of reasonable compensation for services rendered, or as payment representing the fair market value of property which the NFE has purchased; and
 - The applicable laws of the NFE's Jurisdiction of residence or the NFE's formation documents require that, upon the NFE's liquidation or dissolution, all its assets be distributed to a Governmental Entity or other non-profit organisation, or escheat to the government of the NFE's Jurisdiction of residence or any political subdivision.

Change in Circumstance (CIC)

A "Change in Circumstances" includes any change that results in the addition or change of information relevant to a Person's CRS status (e.g. Jurisdiction(s) of Residence for tax purposes). In addition, a Change in Circumstances includes any change or addition to the Account Holder's account(s).

Control

The control is generally exercised by the natural person(s) who ultimately has a controlling ownership interest (typically on the basis of a certain percentage (e.g., 25%)) in the Entity. Where no natural person(s) exercises control through ownership interests, the Controlling Person(s) of the Entity will be the natural person(s) who exercises control of the Entity through other means. Where no natural person(s) is/are identified as exercising control of the Entity (for example where no underlying person has control of greater than 25% of the entity) then under the CRS the Reportable Person is deemed to be the natural person who holds the position of senior managing official.

Controlling Persons

The term Controlling Persons means the natural persons who exercise control over an entity. In the case of a trust, such term means the settlor(s), the trustee(s), the protector(s) (if any), the beneficiary(ies) or class(es) of beneficiaries, and any other natural person(s) exercising ultimate effective control over the trust, and in the case of a legal arrangement other than a trust, such term means persons in equivalent or similar positions.

Country / Jurisdiction of residence for tax purposes

Generally, an entity is resident for tax purposes in a Country / Jurisdiction if, under the laws of that Country / Jurisdiction (including tax conventions), it pays or should be paying tax therein by reason of its domicile, residence, place of management or incorporation, or any other criterion of a similar nature (i.e. full tax liability), and not only from sources in that Jurisdiction. Dual resident entities may rely on the tiebreaker rules contained in tax conventions (if applicable) to solve cases of double residence for determining their residence for tax purposes.

Custodial Institution

The term Custodial Institution means any entity that holds, as a substantial portion of its business, Financial Assets for the account of others. An entity holds Financial Assets for the account of others as a substantial portion of its business if the entity's gross income attributable to the holding of Financial Assets and related financial services equals or exceeds 20% of the entity's gross income during the shorter of: (i)

(i) the three-year period that ends on 31 December (or the final day of a non-calendar year accounting period) prior to the year in which the determination is being made; or (ii) the period during which the entity has been in existence.

Depository Institution

The term Depository Institution means any entity that accepts deposits in the ordinary course of a banking or similar business.

Financial Asset

A Financial Asset includes a security (for example, a share of stock in a corporation; partnership or beneficial ownership interest in a widely held or publicly traded partnership or trust; note, bond, debenture, or other evidence of indebtedness), partnership interest, commodity, swap (for example, interest rate swaps, currency swaps, basis swaps, interest rate caps, interest rate floors, commodity swaps, equity swaps, equity index swaps, and similar agreements), Insurance Contract or Annuity Contract, or any interest (including a futures or forward contract or option) in a security, partnership interest, commodity, swap, Insurance Contract, or Annuity Contract. The term Financial Asset does not include a non-debt, direct interest in real property.

Financial Institution

The term Financial Institution means a Custodial Institution, a Depository Institution, a Managing or Professionally Managed Investment Entity, or a Specified Insurance Company.

Investment Entity

The term Managing Investment Entity means any entity that primarily conducts as a business one or more of the following activities or operations for or on behalf of a customer:

- Trading in money market instruments (cheques, bills, certificates of deposit, derivatives, etc.); foreign exchange; exchange, interest rate and index instruments; transferable securities; or commodity futures trading;
- Individual and collective portfolio management; or
- Otherwise investing, administering, or managing Financial Assets or money on behalf of other persons;

An entity is treated as primarily conducting as a business one or more of the activities described above, if the entity's gross income attributable to the relevant activities equals or exceeds 50% of the entity's gross income during the shorter of: (i) the three-year period ending on 31 December of the year preceding the year in which the determination is made; or (ii) the period during which the entity has been in existence.

NFE (Non-Financial Entity)

An NFE is any entity that is not a Financial Institution.

Passive NFE

The term Passive NFE means any NFE that is not an Active NFE. Additionally, an Account Holder that is a PMIE located in a Non-Participating Jurisdiction from the perspective of Hong Kong is also treated as a Passive NFE Account Holder for purposes of AEOI / CRS.

Professionally Managed Investment Entity (PMIE)

The term PMIE means any entity the gross income of which is primarily attributable to investing, reinvesting, or trading in Financial Assets, if the entity is managed by another entity that is a Depository Institution, a Custodial Institution, a Specified Insurance Company, or a Managing Investment Entity.

An entity's gross income is primarily attributable to investing, reinvesting, or trading in Financial Assets, if the entity's gross income attributable to the relevant activities equals or exceeds 50% of the entity's gross income during the shorter of: (i) the three-year period ending on 31 December of the year preceding the year in which the determination is made; or (ii) the period during which the entity has been in existence.

An entity is "managed by" another entity if the managing entity performs, either directly or through another service provider, any of the following activities or operations on behalf of the managed entity:

- Trading in money market instruments (cheques, bills, certificates of deposit, derivatives, etc.); foreign exchange;
- exchange, interest rate and index instruments; transferable securities; or commodity futures trading;
- $\boldsymbol{\cdot}$ Individual and collective portfolio management; or
- \cdot Otherwise investing, administering, or managing Financial Assets or money on behalf of other persons.

However, an entity does not manage another entity if it does not have discretionary authority to manage the entity's assets (in whole or in part). Where an entity is managed by a mix of Financial Institutions, NFEs or individuals, the entity is considered to be managed by another entity that is a Financial Institution.

Related Entity

An entity is a Related Entity of another entity if either entity controls the other entity, or the two entities are under common control. For this purpose control includes direct or indirect ownership of more than 50% of the vote and value in an entity.

Reportable Account

The term Reportable Account means an account held by one or more Reportable Persons or by a Passive NFE (or a Professionally Managed Investment Entity in a Non-Participating Jurisdiction) with one or more Controlling Persons that is a Reportable Person, provided it has been identified as such pursuant to the applicable AEOI / CRS due diligence procedures.

Reportable Person

The term Reportable Person means a person that is resident for tax purposes in a Reportable Jurisdiction under the tax laws of such Jurisdiction other than: (i) a corporation the stock of which is regularly traded on one or more established securities markets; (ii) any corporation that is a Related Entity of a corporation described in clause (i); (iii) a Governmental Entity; (iv) an International Organisation; (v) a Central Bank; or (vi) a Financial Institution.

Participating Jurisdiction (or Reportable Jurisdiction)

The term Participating Jurisdiction means a Country / Jurisdiction that has committed to implement the CRS and is able to enforce reporting by its financial institution.

Specified Insurance Company

The term Specified Insurance Company means any entity that is an insurance company (or the holding company of an insurance company) that issues, or is obligated to make payments with respect to, a Cash Value Insurance Contract or an Annuity Contract.

TIN

The term TIN means Taxpayer Identification Number or a functional equivalent in the absence of a TIN. A TIN is a unique combination of letters or numbers assigned by a Jurisdiction to an individual or an entity and used to identify the individual or entity for the purposes of administering the tax laws of such Jurisdiction. Further details of acceptable TINs can be found on the OECD AEOI Portal (http://www.oecd.org/tax/automatic-exchange/).

This page intentionally left blank

This page intentionally left blank

Hong Kong

EFG Bank AG Hong Kong Branch 18th Floor, International Commerce Centre 1 Austin Road West, Kowloon, Hong Kong



Incorporated in Switzerland with limited liability