

Beneficial Ownership of Funds Statement

In accordance with Luxembourg laws and regulations related to the fight against money laundering and financing of terrorism, the undersigned declare(s) being the final economic beneficiary(ies) of the account, and undertake to notify the Bank without delay of any change in this respect.

Portfolio Number		•	
Customer Name			
Title		First nam	1е
Last name		Date of bir	th
City of birth	C	ountry of bir	th
Civil status		National	ity
Second nationality (in case of	of dual citizenship)		
Permanent address (not an	office or P.O. box)		
Postal code		City	
Country			
If country of tax residence is	different from permanent a	ddress, plea	ise specify.
Tax ID number			
Phone	Mot	oile phone	
Work phone		Fax	
E-mail			
Profession/Job title (if retired	d please indicate former pro	fession)	
Ownership percentage (in ca	ase of joint ownership)		
Additional personal information:			
Do you qualify as a "US perso	n"? (please check at least	one box)	
🗌 No, I don't qualify as "US	person"		
US citizen	US resident		US birthplace
🗌 US person, due to dual ci	tizenship		
US tax payer for any othe	er reason (e.g. substantial p	resence test	:) - green card holder.
US Tin ID number or Social	Security Number		
Politically exposed person (PE	•		
Do you have, or have you had, a	a senior political mandate or	a senior po	sition in the public sector?
Yes No			
If yes, please specify which country and position:			
Do any close family members has sector?	ave or have had a senior po	litical manda	ate or a senior position in the public
○ Yes ○ No			
If yes, please specify which country and position:			

Do you have access to privileged financial information (inside information), e.g. due to your profession or relationships, or are you subject to any investment restrictions?

○ Yes ○ No		
If yes, please specify the name(s) of the company (companies) and your position:		
Additional beneficial owner (2)		
Title	First nar	me
Last name	Date of bi	irth
City of birth	Country of bi	irth
Civil status	Nationa	lity
Second nationality (in case of dual	citizenship)	
Permanent address (not an office of	or P.O. box)	
Postal code	City	
Country		
If country of tax residence is differe	ent from permanent address, ple	ase specify.
Tax ID number		
Phone	Mobile phone	
Work phone	Fax	
E-mail		
Profession/Job title (if retired pleas	e indicate former profession)	
Ownership percentage (in case of j	joint ownership)	
Additional personal information:		
Do you qualify as a "US person"? (p	lease check at least one hov)	
☐ No, I don't qualify as "US persor		
US citizen	US resident	US birthplace
US person, due to dual citizensh	•	
US tax payer for any other reaso		st) - green card holder.
US Tin ID number or Social Securit	ty Number	
Politically exposed person (PEP) Do you have, or have you had, a senior	r political mandate or a senior po	osition in the public sector?
○ Yes ○ No		
If yes, please specify which country and position:		
Do any close family members have or l sector?	nave had a senior political mand	late or a senior position in the public
○ Yes ○ No		

If yes, please specify which	
country and position:	

country and position:

Do you have access to privileged financial information (inside information), e.g. due to your profession or relationships, or are you subject to any investment restrictions?

⊖ Yes ⊖ No			
If yes, please specif name(s) of the com (companies) and yo position:	pany		
Additional beneficial o	owner (3)		
Title		First nar	me
Last name		Date of bi	rth
City of birth		Country of bi	rth
Civil status		Nationa	lity
Second nationality ((in case of dual citizer	nship)	
Permanent address	s (not an office or P.O	. box)	
Postal code		City	
Country			
If country of tax resi	idence is different fror	m permanent address, plea	ase specify.
Tax ID number			
Phone		Mobile phone	
Work phone		Fax	
E-mail			
Profession/Job title	(if retired please indic	cate former profession)	
Ownership percenta	age (in case of joint o	wnership)	
Additional paragonal info	rmation:		
Additional personal info	imauon.		
Do you qualify as a "U	IS person"? (please	check at least one box)	
🗌 No, I don't qualif	y as "US person"		
US citizen	🗌 L	JS resident	US birthplace
🗌 US person, due f	to dual citizenship		
US tax payer for	any other reason (e.g	g. substantial presence tes	t) - green card holder.
US Tin ID number of	or Social Security Nun	nber	
Politically exposed per Do you have, or have you Yes No	· · ·	cal mandate or a senior po	osition in the public sector?
If yes, please specit country and positior	•		
Do any close family men sector?	mbers have or have h	ad a senior political mand	ate or a senior position in the public
⊖ Yes ⊖ No			
If yes, please specit	fy which		

Do you have access to privileged financial information (inside information), e.g. due to your profession or relationships, or are you subject to any investment restrictions?

⊖ Yes ⊖	No				
If yes, please s name(s) of the (companies) ar position:	company				
Additional benefic	ial owner (4)	(if more, fill additional	forms)		
Title			First nar	me	
Last name			Date of bi	irth	
City of birth			Country of bi	irth	
Civil status			Nationa	ality	
Second nationa	ality (in case o	f dual citizenship)			
Permanent add	dress <i>(not an c</i>	office or P.O. box)			
Postal code			City		
Country					
If country of tax	k residence is	different from permane	ent address, ple	ase specify.	
Tax ID number					
Phone			Mobile phone		
Work phone			Fax		
E-mail					
Profession/Job	title (if retired	please indicate forme	r profession)		
Ownership per	centage (in ca	se of joint ownership)			
Additional persona	l information.				
Do you qualify as	a "US persor	ר"? (please check at le	east one box)		
🗌 No, I don't q	ualify as "US	person"			
🗌 US citizen		🗌 US resider	nt	🗌 US bir	thplace
🗌 US person,	due to dual cit	izenship			
🗌 US tax paye	er for any other	reason (e.g. substant	tial presence tes	st) - green card h	older.
US Tin ID num	ber or Social S	Security Number			
•	ive you had, a	P) senior political manda	ite or a senior po	osition in the put	lic sector?
	No				
If yes, please s country and po					
Do any close family sector?	y members ha	ve or have had a senio	or political mand	late or a senior p	osition in the public
⊖ Yes ⊖	No				

If yes, please specify which	
country and position:	

Do you have access to privileged financial information (inside information), e.g. due to your profession or relationships, or are you subject to any investment restrictions?

 \bigcirc Yes \bigcirc No

I/we hereby confirm being the actual beneficial owner(s) of the account, and that consequently all funds deposited in the account are mine/ours. I/we confirm, declare and certify that the funds do not and will not originate, directly, or indirectly, from any criminal offence activity.

What is the "economical" source of the assets to be transferred to the Bank? (How did you originally accumulate these funds?

Please check applicable boxes and enter further explanations on the origin of the assets (*please check at least one box*).

☐ Savings☐ Insurance☐ Other	 Inheritance Commissions 	 Sale of real estate Salary / Employment income 	
Please specify			
What is the "geograp transferred?)	bhic" source of those as	ssets? (From which bank and country will they be	
Cash		Securities	
What will be the amo EUR?	ount and "format" (cash	n and/or securities) of the initial transfer to the	account in
Cash		Securities	
What is the expected	total size of assets to I	be invested through the account in <u>EUR</u> ?	
Date		Place	
Beneficial owner Name (please prir	nt)	Signature	

2nd Beneficial owner

Name (please print)

3rd Beneficial owner Name (please print)

4th Beneficial owner Name (please print)

Signature

Signature

Signature

(If more, fill additional forms).