Renaissance Capital

RENAISSANCE SECURITIES (CYPRUS) LIMITED

CUSTOMER DOCUMENT PACK: ACCOUNT OPENING PACK (FATCA/CRS QUESTIONNAIRE – INDIVIDUAL)

FOR PROFESSIONAL CLIENTS AND ELIGIBLE COUNTERPARTIES

CUSTOMER WARNING

RENAISSANCE SECURITIES (CYPRUS) LIMITED DOES NOT OFFER SERVICES OR CARRY OUT ANY BUSINESS WITH CUSTOMERS CATEGORISED AS RETAIL CLIENTS. YOU CAN ONLY FILL IN, SIGN AND DELIVER THIS QUESTIONNAIRE, IF YOU ARE CLASSIFIED AS A PROFESSIONAL CLIENT OR AN ELIGIBLE COUNTERPARTY. WHERE YOU ARE CLASSIFIED AS A PROFESSIONAL CLIENT OR AN ELIGIBLE COUNTERPARTY. WHERE YOU ARE CLASSIFIED AS A PROFESSIONAL CLIENT OR AN ELIGIBLE COUNTERPARTY YOU SHALL NOT BENEFIT FROM CERTAIN INVESTOR PROTECTIONS WHICH ARE AVAILABLE TO RETAIL CLIENTS UNDER THE APPLICABLE LAWS AND REGULATIONS. WE ARE ENTITLED TO ASSUME THAT AS A PROFESSIONAL CLIENT YOU HAVE THE NECESSARY EXPERIENCE AND KNOWLEDGE TO UNDERSTAND THE RELEVANT RISKS INVOLVED IN THE PRODUCTS OR INVESTMENT SERVICES OFFERED OR DEMANDED UNDER THE INVESTMENT SERVICES AGREEMENT ENTERED OR TO BE ENTERED INTO BETWEEN YOU AND RENAISSANCE SECURITIES (CYPRUS) LIMITED AND, THEREFORE, OUR OBLIGATION TO ASSESS THE APPROPRIATENESS THEREOF SHALL BE DEEMED FULFILLED. WE ARE UNDER NO OBLIGATION TO ASSESS THE APPROPRIATENESS OF SERVICES AND FINANCIAL INSTRUMENTS OFFERED TO OR DEMANDED BY ELIGIBLE COUNTERPARTIES. WE DO NOT OFFER INVESTMENT ADVICE.

Dear Customer,

Please fill in the below FATCA/CRS Questionnaire ("Questionnaire"), sign and return it to ClientManagement@rencap.com.

This Questionnaire constitutes an integral part of the Account Opening Pack. Should any of the details specified below change, please notify us immediately and arrange for the new Questionnaire to be provided to us as soon as possible. Unless otherwise defined in Appendix, any capitalised terms used herein shall have the meaning ascribed to them in the Investment Services Agreement entered or about to be entered into between you and Renaissance Securities (Cyprus) Limited ("**Renaissance**").

INSTRUCTIONS

Please read these instructions before completing the Questionnaire.

CRS and FATCA require Renaissance to collect and report certain information about an Account Holder's tax residence.

If the Account Holder's tax residence is located outside **the Republic of Cyprus**, we may be legally obliged to pass on the information in this Questionnaire and other financial information with respect to your financial accounts (i) **to the Cypriot Tax Department** and they may exchange this information with tax authorities of another jurisdiction or jurisdictions pursuant to intergovernmental agreements to exchange financial account information, and/or (ii) **to the U.S. tax authorities**.

This Questionnaire will remain valid unless there is a change in your circumstances, such as a change of the Account Holder's tax status. In that case you must promptly notify us and provide an updated Questionnaire.

If the Account Holder is a U.S. citizen or tax resident under U.S. law, you should indicate that you are a U.S. tax resident on this Questionnaire and you may also need to fill in and provide to Renaissance an IRS W-9 form.

We do not give tax advice. For more information, please consult your tax adviser or the OECD automatic exchange of information portal at https://www.oecd.org/tax/automatic-exchange/. Your domestic tax authority can provide guidance regarding how to determine your tax status.

Where you need to self-certify on behalf of an entity Account Holder, do not use this Questionnaire. Instead, you will need a "FATCA/CRS Questionnaire – Legal Entity". Similarly, if you are a controlling person of an entity, please fill in a "Controlling Person Tax Residency Self-Certification Questionnaire" instead of this Questionnaire.

If you are filling in this Questionnaire on behalf of someone else, please tell us in what capacity you are signing in part "DECLARATIONS AND SIGNATURE". For example, you may be a custodian or a nominee of an Account, or you may be signing this Questionnaire under a power of attorney. If signing under a power of attorney, please also attach a certified copy of a power of attorney.

GENERAL INFORMATION ABOUT ACCOUNT HOLDER

1	Title	
	Family Name or Surname	
	First or Given Name	
	Middle Name(s)	
2	Date of birth	

(DD/MM/YYYY)

3 Place of birth

	Town or City		
	Country		
4	Citizenship(s) (please indicate all of them)		
5	Current residence address		
	House/Apt/Suite		
	Building		
	Street		
	City/Town		
	State/Province		
	Country	ZIP/Post code	
6	Mailing address (please only complete if differen	nt from the address in point 5)	
	House/Apt/Suite		
	Building		
	Street		
	City/Town		
	State/Province		
	Country	ZIP/Post code	

7 **Tax residence*:** please indicate the country where you are tax resident at the time of completion of this questionnaire

Jurisdiction of tax residence**		TIN (equivalent)	Reason for TIN absence - please reference A, B or C as explained below
1			
2			
3			

If there is no TIN, please indicate one of the following reasons in the "Reason for TIN absence" field:

- A The Jurisdiction of tax residence does not assign TIN
- B The Account Holder is otherwise unable to obtain a TIN or equivalent number
- **C** No TIN is required (*Note: only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction*)

If you have referenced Reason **B** above, please specify for each case why you are unable to obtain a TIN.

* If there are several jurisdictions of tax residence, please specify all of them ** If the U.S. is indicated, please provide form W-9.

8 Is your country of tax residency on the list of countries providing "citizenship/residency by investment" program¹ ("CBI/RBI program")?

Yes	Provide answers to the following questions:		
	 Do you hold residence rights in any other jurisdiction(s) 	□ Yes	
		Specify country:	
		□ No	
	2. Have you spent more than 90 days during the previous year in a country other than the country providing CBI/RBI program?	□ Yes	
		Specify country:	
		🗆 No	

¹ The list of countries providing "citizenship/residency by investment" program includes: United Arab Emirates, Antigua and Barbuda, Bahamas, Barbados, Bahrain, Cyprus, Dominica, Grenada, Montenegro, Malta, Saint Kitts and Nevis, Saint Lucia, Panama, Seychelles, Turks and Caicos Islands, Vanuatu (for more information please follow the link <u>https://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/residencecitizenship-by-investment/</u>)

		3. Have you filed personal income tax returns during the previous year in any jurisdiction other than the jurisdiction on the list of CBI/RBI program?	🗆 Yes		
			Specify count	ry:	
			🗆 No		
	🗆 No				
9	If you identifie U.S. citizen?	ed the U.S. as your country of birth, did you renounce	U.S. citizenship or	have c	other grounds for being a non-
	🗆 Yes	Please provide one of the following documents:			
		□ certificate of loss of citizenship			
		or written explanation of being a non-U.S. citize	n		
	🗆 No				
	Not appl	licable (if a country of birth other than the U.S. is sp	ecified)		
10		of actual residence does not correspond to the count vide an explanation/confirmation of this discrepancy			
11	Are you a U.S.	permanent resident (Green card holder)?			Yes
					No
12	Do you match	the criteria of long-term stay in U.S.? ²			Yes
					Νο
13	Do you have a	U.S. ITIN number and a Social Security Number (SSN)?		
	□ Yes	Please indicate:			
		ITIN			
		Social Security Number (SSN)			
	□ No				

² Being in the USA for at least 31 days in a current calendar year and at least 183 days over the period of 3 years, including the current year and the two years immediately preceding it. The cumulative number of days, during which an individual stayed in the USA in the current year and the two preceding years is multiplied by the specified ratio: the current year ratio is 1 (i.e. all days spent in the USA in the current year are counted); the previous year ratio is 1/3; the year before last ratio is 1/6.

14	Do you have a residential address and/or mailing address in the U.S.?	Yes
		No
15	Do you have a contact phone/fax number in the U.S.?	Yes
		No
16	Did you grant power of attorney to a person with U.S. address (residential /actual/ mailing address (including a U.S. post box))	Yes
		No

Declarations and signature

I understand that the Customer Document Pack, including the Investment Services Agreement, governs my relationship with Renaissance and specifies how Renaissance may use and share the information supplied by me.

I acknowledge that Renaissance may disclose and transfer any information supplied by me to Renaissance's parent companies, branches, subsidiaries, affiliates, representative offices, or third party service providers located anywhere in the world (in or outside the country or jurisdiction in which I reside, in which my relationship with Renaissance is maintained, or in which the transaction in relation to the Account Holder and/or any Reportable Account(s) is undertaken) when considered necessary by you for your business purposes or in connection with, to comply with, or to facilitate compliance with, any law, regulation, court order or requirement (including under any code, guideline, standard, policy, circular or notice) of a governmental, regulatory, supervisory, law enforcement, prosecuting, tax or similar authority or industry body in any jurisdiction existing currently or in the future, or for the purposes of ongoing cooperation with such governmental, regulatory and/or statutory authority, or to comply with any agreement or arrangement with such authority or between such authorities in any jurisdiction existing currently or in the future. I consent, instruct and authorise Renaissance to make such disclosures and transfers. I expressly waive any protection or right under data protection, confidentiality, or any other applicable law, to the extent necessary for such disclosures and transfers.

I acknowledge that the information contained in this Questionnaire and information regarding the Account Holder and any Reportable Account(s) may be provided to the tax authorities of the country/jurisdiction in which the Reportable Account(s) is/are maintained and exchanged with tax authorities of another country/jurisdiction or countries/jurisdictions in which the Account Holder may be tax resident pursuant to intergovernmental agreements to exchange financial account information or other legal requirements.

I certify that I am the Account Holder (or I am/We are authorised to signed for the Account Holder) of all the Account(s) to which this Questionnaire relates.

I declare that all statements made in this declaration are correct and complete.

I undertake to advise Renaissance within 30 calendar days of any change in circumstances which affects the tax residency status of the Account Holder identified in this Questionnaire or causes the information contained herein to become incorrect or incomplete, and to provide Renaissance with a suitably updated self-certification and declaration within 30 calendar days of such change in circumstances.

Signature

Print name

Date

Note: If you are not the Account Holder please indicate the capacity in which you are signing the Questionnaire. If signing under a power of attorney please also attach a certified copy of the power of attorney.

Capacity

Appendix

Glossary

Note: These are selected summaries of defined terms provided to assist you with the completion of this Questionnaire.

The terms referring to FATCA is defined in accordance with the U.S. Internal Revenue Code.

The terms referring to CRS is defined in accordance with the OECD's Common Reporting Standard.

The terms without a reference to particular regulation have the same meaning in both FATCA and CRS.

Capitalised terms not defined in this Appendix, shall have the meaning ascribed to them in CRS or applicable intergovernmental agreement.

Further details can be found within the CRS, the associated Commentary to the CRS, intergovernmental agreements and domestic guidance.

If you have any questions then please contact your tax adviser or domestic tax authority.

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/CRS, and such other person is treated as holding the account.
FATCA	means the Foreign Account Tax Compliance provisions, which were enacted into U.S. law as part of the Hiring Incentives to Restore Employment (HIRE) Act on March 18, 2010. FATCA creates a new information reporting and withholding regime for payments made to certain non-U.S. financial institutions and other non-U.S. entities.
Financial Account	means an account maintained by a Financial Institution and includes: Depository Accounts; Custodial Accounts; Equity and debt interest in certain Investment Entities; Cash Value Insurance Contracts; and Annuity Contracts.
Reportable Account (CRS)	means an account held by one or more Reportable Persons or by a Passive NFE with one or more Controlling Persons that is a Reportable Person, provided it has been identified as such, pursuant to the due diligence procedures.
U.S. Reportable Account (FATCA)	means a U.S. Reportable Account. The term "U.S. Reportable Account" means a Financial Account maintained by a Reporting Cyprus Financial Institution and held by one or more Specified U.S. Persons or by a Non-U.S. Entity with one or more Controlling Persons that is a Specified U.S. Person.
TIN	means Taxpayer Identification Number (or functional equivalent in the absence of a Taxpayer Identification Number).