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| **QUESTIONNAIRE FOR AUTHORIZED REPRESENTATIVE - NATURAL PERSON** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Depositor:** | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Document confirming the powers:** | | | | | | | | | | | | Document name | | | | | | | | | |  | | | | | | | | | |
| Document number | | | | | | | |  | | | | | | | | | | | |
| Date of issue | | | | | | | |  | | | | | | | | | | | |
| Validity period | | | | | | | |  | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Surname, name, patronymic** *(if patronymic available)* | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
| **Nationality/stateless** | | | | | | | | | | | | | | | |  | | | | | | | | **Taxpayer Identification Number (TIN)** (if available) | | |  | | | | |
| **Place of birth** | | | | | | | |  | | | | | | | | | | | | | | | | **Date of birth** | | |  | | | | |
| **Identification document** | | | | | | | | | | | | | Document type, series (if available), number | | | | | | | | | | |  | | | | | | | |
| Document issuer, subdivision code (if available) | | | | | | | | | | |  | | | | | | | |
| Date of issue | | | | | | | | | | |  | | | | | | | |
| **Migration card/a document confirming the right to stay (accommodation) in Russia** | | | | | | | | | | | | | Series (if available) and number | | | | | | | | | | | | | | |  | | | |
| Start date of the period of stay/the term of the stay authorization | | | | | | | | | | | | | | |  | | | |
| End date of the period of stay/the term of the stay authorization | | | | | | | | | | | | | | |  | | | |
| **Address of the place of residence:** | | | | | | | | | | | | |  | |  | | | | | |  | | | | | | | | | | |
| *Postal code* | | | | | |  | | *Address* | | | | | | | | | | |
| **Address of residence/stay** | | | | | | | | | | | | |  | | | | | |  | |  | | | | | | | | | | |
| *Postal code* | | | | | |  | | *Address* | | | | | | | | | | |
| **Phone number(s), fax number** (if available) | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| **E-mail address** | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Unit 1** | | | | | **INFORMATION ON NATURAL PERSONS BEING FOREIGN PUBLIC OFFICIALS (FPO) (THEIR SPOUSES AND CLOSE RELATIVES), PUBLIC INTERNATIONAL ORGANIZATION OFFICIALS (PIOO), RUSSIAN PUBLIC OFFICIALS (RPO)** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Foreign public official (FPO)** is any person to be appointed or elected and holding this position in a legislative, executive, administrative or judicial authority of a foreign state, and any person who performs a public function for a foreign state, including for a public agency or a public enterprise. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Public international organization official (PIOO)** isan international civil officer or a natural person - official who performs a public function for a foreign public authority or a government-owned enterprise on their behalf. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Russian public official (RPO)** isaperson filling (holding) a public office of the Russian Federation, a position of the member of the Board of Directors of the Central Bank of the Russian Federation, a position in the federal state service appointment to and dismissal from which is carried out by the President of the Russian Federation or the Government of the Russian Federation, a position in the Central Bank of the Russian Federation, in the state corporation and other organization established by the Russian Federation on the basis of federal laws, and included in the list of positions which list is subject to determination by the President of the Russian Federation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | **Specify relevance of the specified person to FPOs holding the positions listed below:** | | | | | | | | | | | | | | | | | | | | | | | | | | **YES** | **NO** | |
| **If YES:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1.1. Tick the appropriate fields:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Senior military officials | | | | | | | | | | | | | | | | | | | | | |  | | Heads and members of the Boards of Directors of national banks | | | | | |
|  | | Ministers, their alternates and assistants | | | | | | | | | | | | | | | | | | | | | |  | | Heads of state corporations | | | | | |
|  | | Officials holding positions in judicial authorities, final judicial authorities (Supreme Court, Constitutional Court) | | | | | | | | | | | | | | | | | | | | | |  | | Leaders of legally registered political parties, movements, and their alternates | | | | | |
|  | | Senior government officials | | | | | | | | | | | | | | | | | | | | | |  | | Ambassadors | | | | | |
|  | | Public Prosecutor and his/her deputies | | | | | | | | | | | | | | | | | | | | | |  | | Heads of religious organizations (performing governmental administrative functions) and their alternates | | | | | |
|  | | Other (specify the position / title / rank / office) | | | | | | | | | | | | | | | | | | | | | |  | | Heads of the states or governments (regardless of the form of government) | | | | | |
| **Position** | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| **Name of the employer** | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| **Address of the employer** | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1.2. Specify the main sources of income of the person related to FPO:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Income from the primary place of employment, including income from secondary employment | | | | | | | | | | | | | | | | | | | | | |  | | Income from securities and participating interests in commercial organizations | | | | | |
|  | | Pension | | | | | | | | | | | | | | | | | | | | | |  | | Income from entrepreneurial activities | | | | | |
|  | | Income from deposits | | | | | | | | | | | | | | | | | | | | | |  | | Personal savings | | | | | |
|  | | Loans and borrowings | | | | | | | | | | | | | | | | | | | | | |  | | Inherited assets | | | | | |
| **Other income:** | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | **Specify whether there is a kinship with a person holding the positions referred to in Paragraph 1?** | | | | | | | | | | | | | | | | | | | | | | | | | | **YES** | **NO** | |
|  | **If YES, please fill in the following fields:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Surname, name, patronymic of the related person** | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |
| **His/her position** | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| **Name of the employer** | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| **Address of the employer** | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| **Degree of kinship** | | | | | | |  | | Husband / wife | | | | | | | | | | | | | |  | | Grandson / granddaughter | | | | | | |
|  | | Father / mother | | | | | | | | | | | | | |  | | Brother / sister (including half-blood) | | | | | | |
|  | | Son / daughter | | | | | | | | | | | | | |  | | Stepfather / stepmother | | | | | | |
|  | | | | | | |  | | Grandfather / grandmother | | | | | | | | | | | | | |  | | Stepson / stepdaughter | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | **Specify relevance to PIOOs holding the positions listed below:** | | | | | | | | | | | | | | | | | | | | | | | | | | **YES** | | **NO** |
|  | **If YES, please fill in the following fields:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Heads and members of international judicial institutions (the Human Rights Court, the Hague Tribunal, etc.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Heads, Deputy Heads of international organizations (UN, OECD, OPEC, the Olympic Committee, the World Bank, etc.), members of the European Parliament | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Other (specify the position / title / rank / office) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Position** | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **Name of the company where he/she works** | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | **Specify relevance to RPOs holding the positions listed below:** | | | | | | | | | | | | | | | | | | | | | | | | | | **YES** | | **NO** |
|  | **If YES, tick the appropriate fields:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Public offices of the Russian Federation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Positions of members of the Board of Directors of the Central Bank of the Russian Federation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Positions in the federal state service appointment to and dismissal from which is carried out by the President of the Russian Federation and the Government of the Russian Federation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Positions in the Central Bank of the Russian Federation included in the lists of positions that are subject to determination by the President of the Russian Federation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Positions in the state corporations established by the Russian Federation on the basis of federal laws and included in the lists of positions that are subject to determination by the President of the Russian Federation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Positions in other organizations established by the Russian Federation on the basis of federal laws and included in the lists of positions that are subject to determination by the President of the Russian Federation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Other (specify the position / title / rank / office): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Position** | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| **Name of the company where he/she works** | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Unit 2** | | | | | | **I hereby confirm accuracy of all the information specified in this Appendix.**  **I undertake to notify SDC Sirius, LLC on any amendments made to the specified information according to the procedure established by the current legislation of the Russian Federation, as well as to update/confirm the identification information at least once a year.**  **PLEASE NOTE! In case of non-receipt of the information so amended, SDC Sirius, LLC reserves the right to consider that no amendments and supplements have been made to the information and documents previously submitted.** | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Surname, name, patronymic** | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| **Position** | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| **Powers granted by** | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |

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| **Specimen signature of the authorized representative** | | | |  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Signature of the depositor/authorized representative** | | | | | | | | |  | | | | | **Filled in on (date):** | | | | | | | | | | | | | |
|  | |  | | | | | |  |  | | | | | | | | | | | | | | | | | | |
|  | |  |  |  | |  |  |  |  |  | |  |  | | |  | | | | | | | | | |  | |
|  | |  |  |  |  | **L.S.** |  | |  | |  | |  | |  |  |  |  |  |  |  |  |  | | |