



## QUESTIONNAIRE FOR THE INVESTOR - INSTITUTIONAL INVESTORS

### I. GENERAL DATA

#### BASIC DATA

Full company legal name: \_\_\_\_\_ Registration/Inc. Number: \_\_\_\_\_

Tax ID Number: \_\_\_\_\_ Date of Incorporation : \_\_\_\_\_

Registered Address: \_\_\_\_\_

Postal Number and City: \_\_\_\_\_ Country: \_\_\_\_\_

Address for correspondence: \_\_\_\_\_

Postal Number and City: \_\_\_\_\_ Country: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Mob/tel: \_\_\_\_\_ E-mail: \_\_\_\_\_

Bank/Business account: \_\_\_\_\_

IBAN: \_\_\_\_\_

SWIFT/BIC: \_\_\_\_\_

#### Notes:

Provide information from the bank statement to be submitted

Payment of funds to the Fund's account will be possible only from this bank account

### II. PLANNED INVESTMENT DATA

1. What is the minimum amount of planned investment?

(note: the minimum investment must be above 55.000EUR, 65.000USD, 400.000 HRK or equivalent)

\_\_\_\_\_

2. What is the planned duration of holding fund shares (in years)?

\_\_\_\_\_

3. What type of payment do you want to make the initial entry of investment funds?

(options: cash/assets which is the fund's investment strategy)

\_\_\_\_\_

4. Additional information on intended investment (not mandatory)

\_\_\_\_\_

### III. DATA NEEDED FOR ASSESSING THE LEGAL ENTITY'S ABILITY TO MAKE INVESTMENT DECISIONS AND ASSESSMENT THE INVESTMENT RISKS CORRECTLY

1. Legal entity/company falls into one of the following categories (you can choose just the correct answers):

a) Investment company	<input type="checkbox"/> YES	<input type="checkbox"/> NO
b) Credit institution	<input type="checkbox"/> YES	<input type="checkbox"/> NO
c) Other financial institution with a work permit issued by a competent authority or regulated by special regulation	<input type="checkbox"/> YES	<input type="checkbox"/> NO
d) Insurance Company	<input type="checkbox"/> YES	<input type="checkbox"/> NO
e) The joint investment entity or its management company	<input type="checkbox"/> YES	<input type="checkbox"/> NO
f) Pension fund management company or pension fund	<input type="checkbox"/> YES	<input type="checkbox"/> NO
g) Pension insurance company	<input type="checkbox"/> YES	<input type="checkbox"/> NO
h) Merchant of goods or commodity derivatives	<input type="checkbox"/> YES	<input type="checkbox"/> NO
i) Local entities	<input type="checkbox"/> YES	<input type="checkbox"/> NO
j) Other institutional investor whose main activity is not covered by under sub-items from a) to i) of this paragraph, but is a subject to the obligation of the approval or supervision for operating at financial markets	<input type="checkbox"/> YES	<input type="checkbox"/> NO

2. A legal entity meets one of the following conditions (in order to acquire the status of a professional investor it is necessary to meet at least 2 of the following 3 criteria under a), b) and c))

a) Has total assets in the value of at least 20mil € (23mil \$ or 150mil HRK)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
b) Has revenues of at least 40mil € (46mil \$ or 300mil HRK)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
c) Has equity exceeding 2mil € (2,3mil \$ or 15mil HRK)	<input type="checkbox"/> YES	<input type="checkbox"/> NO

3. A legal entity is one of the following: a national or regional government, a public debt management body, a central bank, an international and supranational institution such as the World Bank, the International Monetary Fund, the European Central Bank, the European Investment Bank and similar international organizations?

<input type="checkbox"/> YES	<input type="checkbox"/> NO
------------------------------	-----------------------------

4. Other institutional investor whose main activity is investing in financial instruments, including entities engaged in asset securitization or other financing transactions

<input type="checkbox"/> YES	<input type="checkbox"/> NO
------------------------------	-----------------------------

**Note:**

In order to be considered as professional investor and permitted to invest, the legal entity must meet at least 1 of the previous 4 criteria (under 1 to 4) In such a case, the legal entity may apply for Professional Investor status upon request.

## IV. LEGAL REPRESENTATIVES

### REPRESENTATIVE 1

Name and Surname : \_\_\_\_\_ Role within the Company/Entity: \_\_\_\_\_

Citizenship: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Contact Details: \_\_\_\_\_

Postal Number: \_\_\_\_\_ Postal Number and City: \_\_\_\_\_

Country: \_\_\_\_\_ PIN: \_\_\_\_\_

ID Document Type: \_\_\_\_\_ ID Document Number: \_\_\_\_\_

City of Issuance of ID: \_\_\_\_\_ Country of Issuance of ID: \_\_\_\_\_

Date of ID Issuance: \_\_\_\_\_ ID Document Expiration date: \_\_\_\_\_

Is the representative a politically exposed person (PEP) acting or having acted in a prominent public office in the last year, including immediate family members or close associates?

<input type="checkbox"/> YES	<input type="checkbox"/> NO
------------------------------	-----------------------------

If YES, please fill the Politically Exposed Persons (PEP)

### REPRESENTATIVE 2

Name and Surname : \_\_\_\_\_ Role within the Company/Entity: \_\_\_\_\_

Citizenship: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Contact Details: \_\_\_\_\_

Postal Number: \_\_\_\_\_ Postal Number and City: \_\_\_\_\_

Country: \_\_\_\_\_ PIN: \_\_\_\_\_

ID Document Type: \_\_\_\_\_ ID Document Number: \_\_\_\_\_

City of Issuance of ID: \_\_\_\_\_ Country of Issuance of ID: \_\_\_\_\_

Date of ID Issuance: \_\_\_\_\_ ID Document Expiration date: \_\_\_\_\_

Is the representative a politically exposed person (PEP) acting or having acted in a prominent public office in the last year, including immediate family members or close associates?

<input type="checkbox"/> YES	<input type="checkbox"/> NO
------------------------------	-----------------------------

If YES, please fill the Politically Exposed Persons (PEP)

### REPRESENTATIVE 3

Name and Surname : \_\_\_\_\_ Role within the Company/Entity: \_\_\_\_\_

Citizenship: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Contact Details: \_\_\_\_\_

Postal Number: \_\_\_\_\_ Postal Number and City: \_\_\_\_\_

Country: \_\_\_\_\_ PIN: \_\_\_\_\_

ID Document Type: \_\_\_\_\_ ID Document Number: \_\_\_\_\_

City of Issuance of ID: \_\_\_\_\_ Country of Issuance of ID: \_\_\_\_\_

Date of ID Issuance: \_\_\_\_\_ ID Document Expiration date: \_\_\_\_\_

Is the representative a politically exposed person (PEP) acting or having acted in a prominent public office in the last year, including immediate family members or close associates?

<input type="checkbox"/> YES	<input type="checkbox"/> NO
------------------------------	-----------------------------

If YES, please fill the Politically Exposed Persons (PEP)

### REPRESENTATIVE 4

Name and Surname: \_\_\_\_\_ Role within the Company/Entity: \_\_\_\_\_

Citizenship: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Contact Details: \_\_\_\_\_

Postal Number: \_\_\_\_\_ Postal Number and City: \_\_\_\_\_

Country: \_\_\_\_\_ PIN: \_\_\_\_\_

ID Document Type: \_\_\_\_\_ ID Document Number: \_\_\_\_\_

City of Issuance of ID: \_\_\_\_\_ Country of Issuance of ID: \_\_\_\_\_

Date of ID Issuance: \_\_\_\_\_ ID Document Expiration date: \_\_\_\_\_

Is the representative a politically exposed person (PEP) acting or having acted in a prominent public office in the last year, including immediate family members or close associates?

<input type="checkbox"/> YES	<input type="checkbox"/> NO
------------------------------	-----------------------------

If YES, please fill the Politically Exposed Persons (PEP)

## V. DATA ON ULTIMATE BENEFICIAL OWNERS (UBO)

### UBO (ULTIMATE BENEFICIAL OWNER) 1

Name and Surname: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Citizenship: \_\_\_\_\_ Country of residence: \_\_\_\_\_

Activity of UBO: \_\_\_\_\_

ID Document Type: \_\_\_\_\_ ID Document Number: \_\_\_\_\_

City of Issuance of ID: \_\_\_\_\_ Country of Issuance of ID: \_\_\_\_\_

Date of ID Issuance: \_\_\_\_\_ ID Document Expiration date: \_\_\_\_\_

#### PERCENTAGE OF REAL OWNERSHIP

(to be filled in for each UBO who directly or indirectly owns 25% or more of shares or voting rights or control position)

#### PROPERTY MANAGEMENT METHOD (choose only 1 answer)

A person who directly owns more than 25% of shares, more than 25% of shares or more than 25% of voting rights	<input type="checkbox"/>
A person who has a controlling position in the management of the property of a legal entity through other means. The control position in the management of a legal entity's assets through other means may also relate to the control criteria used in the preparation of consolidated financial statements, such as shareholder agreements, by exercising dominant influence and the authority to appoint senior management.	<input type="checkbox"/>

Is the beneficial owner a politically exposed person (PEP) acting or having acted in a prominent public office in the past year, including immediate family members or close associates?

<input type="checkbox"/> YES	<input type="checkbox"/> NO
------------------------------	-----------------------------

*If the answer is YES, it is necessary to fill in the Questionnaire for politically exposed persons.*

### UBO (ULTIMATE BENEFICIAL OWNER) 2

Name and Surname: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Citizenship: \_\_\_\_\_ Country of residence: \_\_\_\_\_

Activity of UBO: \_\_\_\_\_

ID Document Type: \_\_\_\_\_ ID Document Number: \_\_\_\_\_

City of Issuance of ID: \_\_\_\_\_ Country of Issuance of ID: \_\_\_\_\_

Date of ID Issuance: \_\_\_\_\_ ID Document Expiration date: \_\_\_\_\_

#### PERCENTAGE OF REAL OWNERSHIP

(to be filled in for each UBO who directly or indirectly owns 25% or more of shares or voting rights or control position)

**PROPERTY MANAGEMENT METHOD** (choose only 1 answer)

A person who directly owns more than 25% of shares, more than 25% of shares or more than 25% of voting rights	<input type="checkbox"/>
A person who has a controlling position in the management of the property of a legal entity through other means. The control position in the management of a legal entity's assets through other means may also relate to the control criteria used in the preparation of consolidated financial statements, such as shareholder agreements, by exercising dominant influence and the authority to appoint senior management.	<input type="checkbox"/>

Is the beneficial owner a politically exposed person (PEP) acting or having acted in a prominent public office in the past year, including immediate family members or close associates?

<input type="checkbox"/> YES	<input type="checkbox"/> NO
------------------------------	-----------------------------

*If the answer is YES, it is necessary to fill in the Questionnaire for politically exposed persons.*

**UBO (ULTIMATE BENEFICIAL OWNER) 3**

Name and Surname: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Citizenship: \_\_\_\_\_ Country of residence: \_\_\_\_\_

Activity of UBO: \_\_\_\_\_

ID Document Type: \_\_\_\_\_ ID Document Number: \_\_\_\_\_

City of Issuance of ID: \_\_\_\_\_ Country of Issuance of ID: \_\_\_\_\_

Date of ID Issuance: \_\_\_\_\_ ID Document Expiration date: \_\_\_\_\_

**PERCENTAGE OF REAL OWNERSHIP**

(to be filled in for each UBO who directly or indirectly owns 25% or more of shares or voting rights or control position)

**PROPERTY MANAGEMENT METHOD** (choose only 1 answer)

A person who directly owns more than 25% of shares, more than 25% of shares or more than 25% of voting rights	<input type="checkbox"/>
A person who has a controlling position in the management of the property of a legal entity through other means. The control position in the management of a legal entity's assets through other means may also relate to the control criteria used in the preparation of consolidated financial statements, such as shareholder agreements, by exercising dominant influence and the authority to appoint senior management.	<input type="checkbox"/>

Is the beneficial owner a politically exposed person (PEP) acting or having acted in a prominent public office in the past year, including immediate family members or close associates?

<input type="checkbox"/> YES	<input type="checkbox"/> NO
------------------------------	-----------------------------

*If the answer is YES, it is necessary to fill in the Questionnaire for politically exposed persons.*

**UBO (ULTIMATE BENEFICIAL OWNER) 4**

Name and Surname: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Citizenship: \_\_\_\_\_ Country of residence: \_\_\_\_\_

Activity of UBO: \_\_\_\_\_

ID Document Type: \_\_\_\_\_ ID Document Number: \_\_\_\_\_

City of Issuance of ID: \_\_\_\_\_ Country of Issuance of ID: \_\_\_\_\_

Date of ID Issuance: \_\_\_\_\_ ID Document Expiration date: \_\_\_\_\_

**PERCENTAGE OF REAL OWNERSHIP**

(to be filled in for each UBO who directly or indirectly owns 25% or more of shares or voting rights or control position)

**PROPERTY MANAGEMENT METHOD (choose only 1 answer)**

A person who directly owns more than 25% of shares, more than 25% of shares or more than 25% of voting rights	<input type="checkbox"/>
A person who has a controlling position in the management of the property of a legal entity through other means. The control position in the management of a legal entity's assets through other means may also relate to the control criteria used in the preparation of consolidated financial statements, such as shareholder agreements, by exercising dominant influence and the authority to appoint senior management.	<input type="checkbox"/>

Is the beneficial owner a politically exposed person (PEP) acting or having acted in a prominent public office in the past year, including immediate family members or close associates?

<input type="checkbox"/> YES	<input type="checkbox"/> NO
------------------------------	-----------------------------

If the answer is YES, it is necessary to fill in the Questionnaire for politically exposed persons.

## VI. TAX STATUS INFORMATION AND INFORMATION REGARDING THE APPLICATION OF THE FATCA AND CRS REGULATIONS

Please answer the following questions.

Is a legal entity a United States taxpayer?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
---	------------------------------	-----------------------------

If YES, please provide a U.S. corporate tax code (TIN/SSN): \_\_\_\_\_

Is the legal entity a tax resident in the Republic of Croatia?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
--	------------------------------	-----------------------------

If NO, state the country and tax code of the business entity?

State of tax residence of a legal entity: \_\_\_\_\_ Tax number (TIN/SSN) \_\_\_\_\_

**Notes:**

The FATCA (Foreign Account Tax Compliance Act) is an agreement between the U.S. Government and other Governments (FATCA Partners) that entered into force on December 27, 2016 to improve international tax compliance and FATCA enforcement. The Republic of Croatia has transposed the Directive into law in accordance with the provisions of the Administrative Cooperation in the Field of Taxes Act (OJ 115/16, 130/17).

The Common Reporting Standard (CRS) is an integral part of Council Directive 2014/107 / EU of 9th December 2014 amending Directive 2017/16 / EU as regards the mandatory automatic exchange of information in the field of taxation, and is a common standard for the automatic exchange of information on financial accounts for the purpose of taxation of financial assets related to another state with which the Republic of Croatia has concluded an agreement on automatic data exchange. In the Republic of Croatia, the automatic exchange of information on financial accounts is regulated by the Administrative Cooperation in the Field of Taxes Act (OJ 115/16, 130/17).

## VII. INVESTOR STATEMENTS

By signing this Questionnaire, the applicant declares:

- I declare and hereby confirm that the Company (Griffon asset management as AIFM) has given me, in a clear, unambiguous and comprehensible manner, information on the essential characteristics of the AIF in which I intend to invest, that I understand and accept them, and that they are aligned with my investment objectives. I have read the Fund Rules, I understand the investment risks, and the investment strategy is aligned with my investment objectives.
- By signing this Questionnaire, the signatory declares that the data for the purposes of taxation and tax residency filled in this Questionnaire are complete and accurate.
- I give my unequivocal, irrevocable and explicit consent to the Company to take all actions related to the processing and exchange of my personal data stated in this Questionnaire, including data on the identification number of the legal entity / citizens and PIN, as well as the data of the legal entity / Client, which represents the right of the Company to collect, store, record, organize, inspect and transfer personal data for the purpose of performing regular activities of the Company.
- I confirm that all data stated in the Questionnaire are true and I authorize the Company to check all data stated here, and I declare that we will notify the Company of any change in data within 30 days of the change, with the delivery of a credible document proving the change. The Company may refuse to establish a business relationship or terminate a business relationship with a client in the event that the client's legal representative refuses to provide or deny information that is mandatory or disclose such inaccurate information.
- I declare that I agree that the Company may store the data from this form in its databases, that it may exchange them with its contractual partners, and other companies that are connected with the Company.
- The investor is aware of the right to access to information and the obligation of the Company to inform him in a timely and accurate manner about the facts prescribed by the Fund Rules.
- The funds for the investment have not been obtained, in whole or in part, illegally in the country or abroad, and will not be used for the purpose of money laundering and terrorist financing.
- The Investor has voluntarily provided contact information and consents to the Company's use of it in order to fulfill its notification obligations in the fastest and easiest way, as well as to provide any other information and information on rights and obligations.
- The investor is familiar with the manner in which the Company processes data in accordance with the Ordinance on data protection of the Company.

## VIII. LEGAL BASIS AND OBLIGATIONS OF THE MANAGEMENT COMPANY:

- With establishing a business relationship and investing in an alternative investment fund under management, the Company is obliged to collect and process the data of the investor as well as the data on the source of the invested funds.
- The Company collects and processes data on the basis of the Alternative Investment Funds Act (OJ 21/2018, 126/2019, Croatia) and its related Ordinances, the Act on the Prevention of Money Laundering and Terrorist Financing (OJ 108/2017, 30/2019, Croatia) and its implementing regulations, General Tax Law and / or other tax regulations and the Company's reporting obligations to the competent tax authority in accordance with the Agreement between the USA and the Republic of Croatia on improving tax compliance at the international level and implementing FATCA and Directive 2014/107 EU on amending Directive 2011/16 / EU as regards the mandatory automatic exchange of information in the field of taxation (Directive 2014 /107 EU or CRS).
- The collected data is used to establish a business relationship, actions related to the issuance and redemption of shares, in-depth analysis of investors and fulfillment of other obligations arising from the above regulations.
- Data on investors during transactions are shared with the depositary, one of whose tasks is to ensure the issuance, redemption and payment of the fund's shares in accordance with laws, regulations adopted on the basis of law and other applicable regulations and documents of the fund.
- The period of storage of personal data is prescribed by the above laws.
- The Company uses of data in accordance with the Ordinance on Personal Data Protection (which is available on demand, or can be found on the Company's website). The Company reserves the right to seek further clarification from a potential investor.
- The investor may at any time request access to his data and correction of incorrect data in writing or in person at the Company's headquarters. The data collected on the basis of the above laws and their implementing regulations are mandatory in order for the Company to be able to fulfill its legal and regulatory obligations and establish a business relationship with the investor. If the investor does not wish to disclose information that is mandatory or discloses such inaccurate information, the Company may refuse to establish a business relationship with the investor. In the event that certain data are processed for a particular purpose with the consent of the investor, the investor may withdraw from the given consent and notify the Company in writing or in person at the Company's headquarters.
- Contact of the processing manager: zastita.podataka@whitebridge-am.com



Date and place: \_\_\_\_\_ Signature of the investor/legal representative: \_\_\_\_\_

## IX. APPENDICES

If the identification of the investor is performed without the direct arrival of the investor at the Company's premises, in addition to this questionnaire, the Company also submits to the investor Instructions for the submission of completed documentation and attachments – legal entity. Submission of these attachments is mandatory and without them it is not possible to establish a business relationship.

- A. Excerpt from the court register for a legal entity
- B. Statement of incorporation of the legal entity
- C. Any other official document of the legal entity which contains information on:
  - a) Addresses of the legal entity
  - b) Other business address
  - c) Representatives of the legal entity
- D. Excerpt from the register of owners
- E. In case of multiple levels of ownership, a scheme of the ownership structure with a list of all directors and in indirect legal entities
- F. A valid copy of the proof of identity of at least 2 representatives of the legal entity (unless the legal entity is represented only by 1 person)
  - a) Identity card – front
  - b) Identity card – back or
  - c) Passport – the first two pages
- G. VA valid copy of proof of identity of all beneficial owners who hold more than 25% of the legal entity
  - a) Identity card – front
  - b) Identity card – back or
  - c) Passport – the first two pages
- H. Bank statement showing that the planned entity is the owner of the accounts listed under the Bank Accounts section

**Note:**

Payment of funds to the Fund's account will be possible only from this bank account C. Note: If the investment is planned to be made by the assets that are the fund's investment strategy and if it is approved by the Fund's Rules and the Law on Alternative Investment Funds and related Regulations, the Company will provide the investor with more detailed information needed for the investment.