



## QUESTIONNAIRE FOR THE INVESTOR - INSTITUTIONAL INVESTORS SDA FUND

### I. GENERAL DATA

#### a. 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)

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4. Additional information on intended investment (not mandatory)

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### 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 company equity at least 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
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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
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**Notes:**

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.

**Please choose the correct answers to the following questions:**

**STABLECOIN IS:**

a) electronic bond	
b) cryptocurrency denominated in xy	
c) exchange for money	
d) none of the above	

**STABLECOIN HAS COVERAGE IN:**

a) other stocks	
b) gold	
c) some stable currency	
d) btc mining resources	

**STAKES IN STABLECOIN PROVIDES:**

a) HNB	
b) New York Stock Exchange	
c) European Bank	
d) nobody	

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

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

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

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

## 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	
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.	

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
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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	
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.	

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
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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	
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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
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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	
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.	

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

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

For the purpose of defining whether you are a taxpayer in accordance with FATCA please answer the following questions.

Do you have US citizenship?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Are you a U.S. taxpayer?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Do you have a "green card"?	<input type="checkbox"/> YES	<input type="checkbox"/> NO

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

Are you a tax resident in the Republic of Croatia?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
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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).

## VI. INVESTOR STATEMENTS

By signing this Questionnaire, the applicant declares:

- I declare and hereby confirm that the Company (White Bridge 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.

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

By signing this Questionnaire, the applicant declares:

- I declare and hereby confirm that the Company (White Bridge 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.

## 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

### Notes:

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.