

**Information about the Customer that is a non-resident legal entity / a foreign non-incorporated structure**

Part 1 – Identification Information					
1.	Full name				
2.	Form of incorporation				
3.	Foreign organization code / or TIN				
4.	Registration number/numbers (if any) assigned in the state (on the territory) of its registration				
5.	Contact details	Phone/Fax number	e-mail	Postal address (if any)	
6.	Core activities according to the statutory (registration) documents registered in the country of incorporation (if any)				
7.	Data on licenses for the activity subject to licensing		<input type="checkbox"/> yes <input type="checkbox"/> no		
7.1. If yes	Type	Number	Date of issue and validity period	Authority that issued the license (permit)	List of types of licensed activities
8.	Location address (address according to registration documents)		Indicate the form of ownership of the premises at the specified address: <a href="#">Select an element.</a>		
9.	Address of actual location		Indicate the form of ownership of the premises at the specified address: <a href="#">Select an element.</a>		
10.	Information about the actual location of the standing management body, other body or person entitled to act on behalf of a legal entity without a power of attorney		Select an element.		
11.	Is the Customer a member of a group (holding)?		<input type="checkbox"/> yes <input type="checkbox"/> no  *If YES, please indicate the name of the holding: _____ _____		
12.	Domain name, index of the website page on the Internet, which the legal entity uses to render the services (if any)		<input type="checkbox"/> yes <input type="checkbox"/> no  * If YES, please indicate the name of the website: _____		

13.	The entity has stand-alone business units: branches, representative offices, subsidiaries and affiliates	<input type="checkbox"/> yes <input type="checkbox"/> no  *If YES, please indicate the names and addresses of the units: _____		
14.	Number of employees of the entity	According to the staffing chart	Actual	
15.	Does the entity have its own or leased fixed assets necessary to carry out its activities?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
15.1. If yes	If it has fixed assets, please provide the following information: - type of fixed assets: <u>Select an element.</u> - form of ownership: <u>Select an element.</u> - if there are warehouse premises, indicate the address of the premises and area: _____			
15.1. If no	In the absence of fixed assets, explain the reason (for entities conducting trading and procurement activities): _____			
<b>Part 2: Structure and Personnel Composition of Legal Entity's Management Bodies</b>				
16.	Information on the main (interest in the authorized capital of at least 5%) founders/members/shareholders			
for an individual the following shall be indicated:		for a legal entity the following shall be indicated:		
Name, patronymic, surname	Interest (%)	Name	TIN	Interest (%)
17.	Information about the management bodies of the legal entity			
Structure		Members		
<b>Part 3. Information about the Purposes of Business Activities, Financial Standing, Business Reputation</b>				
18.	Information on the purposes of business activities	<input type="checkbox"/> Business activity aimed at generating profit <input type="checkbox"/> Implementation of public projects <input type="checkbox"/> Non-profit - <u>Select an element.</u> <input type="checkbox"/> Other*  *If OTHER, please indicate: _____		
19.	Details on the purposes of establishment and intended	<input type="checkbox"/> performing one-time transactions; <input type="checkbox"/> long-term relations and receiving comprehensive services; <input type="checkbox"/> cash management services; <input type="checkbox"/> salary project;		

	<b>nature of business relations with the NBCO</b>	<input type="checkbox"/> Internet banking; <input type="checkbox"/> other: <hr/>		
<b>20.</b>	<b>Actual activity</b>	<b>Activity type</b> <hr/> <hr/> <hr/> <b>Including the licensed activity</b> Select an element.  <b>Date of commencement of actual activities:</b> <hr/>		
<b>21.</b>	<b>Company business model</b> <i>(describe in detail the company's activities, information about development plans, information about goods/work (services) provided, manufacturers of goods, carriers, places of storage of goods/performance of work (provision of services), markets for the sale of goods/performance of work (provision of services), methods of advertising and etc.)</i>			
<b>22.</b>	<b>Presence/absence of the following activities</b>	Select an element.		
<b>23.</b>	<b>Information about planned non-cash transactions on the account in rubles,</b>			
	<b>period</b>	<b>number of transactions</b>	<b>transaction amount</b>	
	week	up to (specify):	no more than (specify):	RUB
	month	up to (specify):	no more than (specify):	RUB
	quarter	up to (specify):	no more than (specify):	RUB
	year	up to (specify):	no more than (specify):	RUB
<b>24.</b>	<b>Are there plans to carry out settlements with Russian counterparties only in rubles within the Russian Federation?</b>	<input type="checkbox"/> yes <input type="checkbox"/> no		
<b>25.</b>	<b>Information about the main counterparties</b>			
<b>25.1.</b>	<b>Counterparties for debiting of funds</b>			
	<b>Name</b>	<b>TIN/Reg. Number</b>	<b>Country of registration</b>	<b>Volume (per month) and nature of transactions</b>
<b>25.2.</b>	<b>Counterparties for crediting of funds</b>			
	<b>Name</b>	<b>TIN/Reg. Number</b>	<b>Country of registration</b>	<b>Volume (per month) and nature of transactions</b>
<b>26.</b>	<b>Do you plan to carry out foreign economic activities?</b>	<input type="checkbox"/> yes <input type="checkbox"/> no		
<b>26.1</b> <b>If yes</b>	<b>Information on the planned transactions pertaining to the transfer of funds in the framework of foreign economic activities (in the case of settlements in foreign currency, amounts equivalent to Russian rubles shall be indicated):</b>			
	<b>period</b>	<b>number of transactions</b>	<b>transaction amount</b>	
	week	up to (specify):	no more than (specify):	RUB
	month	up to (specify):	no more than (specify):	RUB

quarter	up to (specify):	no more than (specify):	RUB
year	up to (specify):	no more than (specify):	RUB
<b>26.2.</b> If yes	<b>Information on foreign economic contracts</b>		
	<b>Types of contracts:</b> <input type="checkbox"/> purchase / sale of goods <input type="checkbox"/> payment for work / services / intellectual activity <input type="checkbox"/> purchase / sale of securities <input type="checkbox"/> financial lease (leasing) <input type="checkbox"/> loan agreement <input type="checkbox"/> freight <input type="checkbox"/> warehouse storage lease <input type="checkbox"/> other: <hr/>	<b>Contract currency:</b> <input type="checkbox"/> dirhams <input type="checkbox"/> tenge <input type="checkbox"/> Chinese yuan <input type="checkbox"/> other: <hr/>	
<b>26.3.</b> If yes	<b>Indicate the codes of commodity items for foreign economic activity (TN VED Code/HS Code)</b>		
	<b>Imported goods (if applicable)</b>	<b>Exported goods (if applicable)</b>	
<b>27.</b>	<b>It is planned to transfer funds in the form of advance payment in favor of non-residents within the framework of foreign trade contracts providing for the import of agricultural products, raw materials and food banned for the import during the period of the ban imposed by Decree of the President of the Russian Federation No. 560 "On the Application of Special Economic Measures to Ensure the Security of the Russian Federation" dated 06.08.2014</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>28.</b>	<b>Sources of origin of funds and/or other property</b>	<input type="checkbox"/> borrowed funds, loans <input type="checkbox"/> retained earnings from previous years <input type="checkbox"/> funds of shareholders/members/investors <input type="checkbox"/> working capital <input type="checkbox"/> other sources, specify: <hr/>	
<b>29.</b>	<b>Do you plan to pay taxes and other mandatory payments to the budget system of the Russian Federation through an account opened with the NBCO?</b>	<input type="checkbox"/> yes <input type="checkbox"/> no	
<b>30.</b>	<b>Availability of accounting statements with zero indicators for the last reporting period</b>	<input type="checkbox"/> yes <input type="checkbox"/> no	
<b>31.</b>	<b>A foreign credit institution with which there is or has been a civil law relationship arising from a bank account agreement</b>	<input type="checkbox"/> yes <input type="checkbox"/> no	
<b>31.1.</b> If yes	<b>Name</b>	<b>Location</b>	<b>Duration of the relationship</b>
<b>32.</b>	<b>Information on the obligation to submit financial statements to the competent (authorized) state institutions at the place of registration or conduct of business</b>	<input type="checkbox"/> financial statements are provided <input type="checkbox"/> there is no obligation to provide financial statements	
<b>32.1.</b> If not provided	<b>Explain the reasons why financial statements are not provided</b>	  	
<b>32.2.</b> if provided	<b>Name of the government agency to which financial statements are provided</b>	  	

32.3. if provid ed	<b>Information about the publicly available source of information (if any) containing the financial statement</b>	
33.	<b>Specify the types of financial statements and certificates that you are ready to submit to the NBCO and the reasons why these documents cannot be submitted</b>	<input type="checkbox"/> financial statements <input type="checkbox"/> copy of the annual tax return <input type="checkbox"/> a copy of the auditor's report on the annual report for the past year <input type="checkbox"/> annual report on the activities of the foreign organization <input type="checkbox"/> certificate of fulfillment by the taxpayer (levy payer, tax agent) of its obligation on the payment of taxes, fines issued by the tax authority <input type="checkbox"/> other forms of reporting (under the terms of the legislation of the country of registration (incorporation) of a legal entity that is a non-resident, a foreign non-incorporated structure) <input type="checkbox"/> not available. The reasons are as follows: <hr/>
34.	<b>Are you acting in favor of the Beneficiary?</b> <i>(a person who/which is not directly involved in the transaction and for whose benefit the Customer acts when carrying out transactions with monetary funds and other assets, inter alia, under agency agreements, contracts of agency, commission agreements and trust management agreements)</i>	<input type="checkbox"/> yes <input type="checkbox"/> no
35.	<b>This form shall be filled in additionally by a non-incorporated foreign entity</b>	
35.1.	<b>Registration number/numbers (if any) assigned in the state (on the territory) of its registration (incorporation) upon registration (incorporation)</b>	
35.2.	<b>Code/codes (if any) in the state (on the territory) of its registration (incorporation) as a taxpayer (or their equivalents)</b>	
35.3.	<b>Principal place of business</b>	
35.4.	<b>Composition of property managed</b>	
35.5.	<b>Composition of property owned</b>	
35.6.	<b>Information about the founders (members)</b>	
	<b>Surname, name, patronymic (if any)</b>	<b>Residence address</b>
	<b>Name of the company</b>	<b>Location address</b>
35.7.	<b>Information about the trustee (manager)</b>	
	<b>Surname, name, patronymic (if any)</b>	<b>Residence address</b>
	<b>Name of the company</b>	<b>Location address</b>
35.8.	<b>Tread information (if any)</b>	
	<b>Surname, name, patronymic (if any)</b>	<b>Residence address</b>
35.9.	<b>The entity is a (an):</b>	<input type="checkbox"/> foundation <input type="checkbox"/> association

		<input type="checkbox"/> partnership <input type="checkbox"/> trust <input type="checkbox"/> other form of collective investments and/or trust management. Specify another form: _____
35.10	Carries out activities in the interests of	<input type="checkbox"/> members <input type="checkbox"/> shareholders <input type="checkbox"/> principals <input type="checkbox"/> beneficiaries <input type="checkbox"/> other persons. Specify other persons: _____
I certify that all the information provided is true and specified in full.		
<p style="text-align: center;"> _____  <i>(Signature)</i> </p> <p style="text-align: center;"> L.S. </p> <p style="text-align: center;"> _____  <i>(Position, printed name)</i> </p> <p style="text-align: center;"> Date of filling ____ _____ 20 ____ </p>		