

REFERENCE INFORMATION

About the Individual Acquiring a Significant Participation in the Statutory Capital of the Entity Responsible for Managing a Non-Public Fund

To be completed by the individual who has acquired a significant participation in the statutory capital of the entity responsible for managing a non-public fund

Attach your
photo here

1. Information about the individual

1) Name, surname, father's name _____

2) Sex: _____

3) Date of birth _____
day/month/year

4) Place of birth _____

5) Citizenship _____

(If you hold citizenship of another country, please indicate all countries of citizenship)

6) Residency _____

(If you are a resident of another country, please indicate all countries of residency)

7) Passport details _____

8) Public services number _____

9) Place of residence: _____

Address of registration _____

Address of actual place of residence _____

10) Phone number _____

11) E-mail address _____

12) Indicate all the names, surnames, father's names you carried previously, and within which time period:

Name, surname, father's name	Time period within which you bore that name	
	from (day/month/year)	to (day/month/year)

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2. Education, qualification, work experience

1) Name of the higher education institution; title of the international qualification	Place/address of the higher education institution	Time period of education at the higher education institution (from year/to year)	Profession	Academic degree	Place/address of the higher education institution

2) What languages do you speak?

- ☐ Armenian
- ☐ English
- ☐ Russian
- ☐ Other (please specify)

3) Indicate the following information on the work experience for at least the last 10 years (information on actual work experience should be indicated irrespective of whether it has been mentioned in the employment history or not)

Periods of employment: dates of admission and dismissal	Name of the organization	Area of activity of the organization	Place/location	Phone number	Position, role/main responsibilities	Grounds for dismissal	Check the box, if data is not mentioned in your employment history

4) Indicate information about persons who know you personally, who work or have worked in the financial system and who, if necessary, can provide recommendation for you

Name, surname	Workplace and its location	Position	Years of working in the financial system	Phone number, e-mail address

☐ Not applicable, if there are no persons as required under this point

3. Shares (units) acquired

	Amount	%
1) Total number of shares (units)		

of which, with a voting right	Amount	%
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2) Price at which each share (unit) is acquired _____

4. Terms and conditions for acquiring the participation; sources of investment (own, borrowed)

1) Specify the terms and conditions for acquiring the participation

2) Specify the sources of investment (own, borrowed)

If investment has been financed by a loan or borrowed funds, please complete point 4.3

3) For investment financed by a loan or borrowed funds, please indicate:

a. Name of the lender _____

b. Location/residency address _____

c. Amount of loan/borrowing

d. Item of collateral _____

e. Terms and conditions for receiving the loan/borrowing _____

f. Sources the loan/borrowing will be repaid from _____

4) If the significant participation has been acquired from another participant directly (other than through the regulated market), please indicate the following:

Name of the seller/transferor	Number of shares to be sold/transferred	Amount of shares/participation to be sold/transferred (%)

5. Sufficient and complete explanations regarding the legality of the origin of the invested funds (*the Central Bank of Armenia may additionally request relevant documents, information, deliverables, etc.*)

6. Information on participations in the statutory capital of other parties

1) For participation when it involves 10 percent or more of the voting shares:

Name of the organization	Place/location	Amount of participation (in AMD)		Size of participation (%)
1.				

2.			
3.			

2) Other participation in the capital of unlisted companies

Name of the organization	Place/location	Amount of participation (in AMD)	Size of participation (%)
1.			
2.			
3.			

7. Information about the affiliated parties

(Affiliation should be construed pursuant to Article 3(36) of the Republic of Armenia Law “On the Securities Market”)

For the persons mentioned in this point, please complete Appendix 12 to Regulation 10/41 as well.

Name of the organization, person’s name, surname, passport details, social services number	Place/location (place of residence)	Form of affiliation

8. Other information

1) Do you (or the parties affiliated with you) have any outstanding liabilities that are 30 days or more overdue?

- ☐ Yes (please provide details: amount, term, etc.)
☐ No

2) Have you been declared disabled or determined to have limited capacity as established by the legislation of the Republic of Armenia or other states?

- ☐ Yes (please provide details: date, legal grounds)
☐ No

3) Have you ever been convicted of committing an intentional crime?

- ☐ Yes (please provide details, including the circumstance where the conviction has been removed or expunged in accordance with the law)
☐ No

- 4) Are you included in the lists of persons related to terrorism or proliferation of weapons of mass destruction published under or in accordance with the United Nations Security Council resolutions?
- ☐ Yes (please provide details: date, legal grounds)
☐ No
- 5) Are you deprived of the right to run positions in financial, tax, customs, commercial, economic or legal fields by a court award?
- ☐ Yes (please provide details: date, legal grounds)
☐ No
- 6) Have you ever been declared bankrupt, or do you have outstanding (unforgiven) liabilities, or do you have a bankruptcy application accepted by the court for proceedings?
- ☐ Yes (please provide details: date, legal grounds)
☐ No
- 7) Are you (or have you ever been) put into the dock by the Republic of Armenia's or another country's law machinery as a criminal suspect, defendant, or accused?
- ☐ Yes (please provide details)
☐ No
- 8) Have you ever been subject to criminal liability for committing a crime as prescribed by the Criminal Law of the Republic of Armenia or criminal law of other countries?
- ☐ Yes (please provide details: date, legal grounds)
☐ No
- 9) Have you ever been subject to administrative liability in the tax, customs, or financial field in the last 5 years?
- ☐ Yes (please provide details: date, legal grounds)
☐ No
- 10) Has the organization ever been declared insolvent or bankrupt in the course of your term or activity in the office (whether in the Republic of Armenia or abroad)?
- ☐ Yes (please provide details: date, legal grounds)
☐ No

11) Has the organization experienced cases of registration, licensing, or permit rejections, or been subject to any regulatory measure in the course of your term or activity in the office (whether in the Republic of Armenia or abroad)?

☐ Yes (please provide details: date, legal grounds, name of the authority that has rejected or applied a regulatory measure)

☐ No

12) Do you (or any persons affiliated with you) have any monetary or other obligations to the entity engaged in management, in the statutory capital of which you intend to acquire a significant participation?

☐ Yes (please provide details: amount, term, etc.)

☐ No

13) Do the grounds, as outlined in Article 55(1) of the Republic of Armenia Law “On the Securities Market” and the related regulatory acts adopted pursuant thereto, lack?

☐ Yes (please provide details)

☐ No

14) Other information which you think is important

9. I assure that the information contained in this document is true and complete. I understand that any false presentation of documents or information shall lead to criminal and administrative liability as prescribed by law.

I declare that my participation does not result in any other entity acquiring the status of a party with indirect significant participation in the entity responsible for managing a non-public fund; otherwise, I undertake to provide the information and documents required by regulatory acts concerning parties acquiring indirect significant participation through me.

I agree:

a) to notify the Central Bank of Armenia of any change in the aforementioned information provided by me; and

b) that the Central Bank of Armenia contact the relevant competent authorities to verify the authenticity of the information provided herewith, while providing my personal data and adhering to the rules of confidentiality of information.

Name, surname _____

Signature _____ Date _____

day/month/year