

1 INFORMATION ABOUT THE CLIENT

Hereby I confirm the correctness of the provided data

UAB NANDI FINANCE

Questionnaire for identifying Client (Legal person) and Beneficial Owner

Questionnaire has been prepared in the light of Law on the Prevention of Money Laundering and Terrorist Financing of the Republic of Lithuania and other provisions of legal acts which are aimed at preventing Money laundering and (or) Terrorist Financing, also, in accordance to the principle "Know your customer". We ensure that the information provided is deemed to be confidential and will be protected as required by the Law of the Republic of Lithuania on Legal Protection of Personal Data.

	Full title of the legal person:	
	Trading name:	
	Old names	
	Legal form:	
	Legal entity's code:	
	Registration address:	
	Address of an actual place of business:	
	Country of residence for tax purposes:	
	Taxpayer identification number (TIN):	
	Declared place (country) where the management bodies of the legal person are located:	
	E-mail address:	
	Website:	
	Phone number:	
	Date of registration:	
2	Legal person engaged in or are related to these activities Financial services Gambling, betting and lotteries Trade in petroleum products Trade in vehicles (all kinds) Audit, accounting services Organizing and arrangement of auctions Other (specify):	Wholesale trade in alcoholic beverages and other alcoholic products, tobacco products Real estate related activities (including construction) Activities related to ferrous, non-ferrous or precious (rare) metals, precious stones, jewelry, works of art
	Detailed description of main business activity: Whether the legal person's activity requires any license? If yes, please name the activity and indicate the license number: Main business countries: Does legal person have activities in offshore jurisdictions? If yes, please name the jurisdictions and activities:	



3

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Main business partners (name, country):				
Number of employees:				
Please indicate public sources where it would be possible to verify the information about the Client:				
INFORMATION ABOUT SOF AND SOW				
Please choose company's main SOF from the provided l	ist:			
Operating income	Retained earnings		Loans/credits	
Other income (specify):				
Please choose company's main SOW from the provided	list:			
Shareholders funds	Dividends		Investments	
Sale of shares	Donations			
Other income (specify):				
Planned yearly operating turnover (EUR):				
Average yearly operating income (EUR):				
Funds of the shareholders in Company's capital/assets (EUR):			
INFORMATION ON ACCOUNT AND FINANCIAL	ACTIVITY			
Planned monthly outgoing transactions (equivalent in e	uros):			
Planned monthly outgoing transactions (number of trans	sactions):			
Planned monthly incoming transactions (equivalent in e	euros):			
Planned monthly incoming transactions (number of transactions)	nsactions):			
Average size of outgoing transfer (equivalent in euros):				
Average size of incoming transfer (equivalent in euros):				
Part of cash money in turnover (%):				
Outgoing transfers go to these countries:				
Incoming transfers come from these countries:				
Bank and (or) other type of payment accounts were accounted to the contract of the contract	vith FI (FI name and cour	ntry of registration):		
Services the client plans to use:	IBAN account	SEPA payments	SWIFT payments	Currency exchange
Intended purpose of business relationship	Day-to-day Banking	Operational activities	Other income (specify):	
	Investment activities			

(signature of the Client (or Client's representative))



Reason for account opening in Lithuania:

Registered in Lithuania Real estate in Lithuania Shareholder or UBO is a resident of Lithuania

Main business partners in Lithuania Business activities in Lithuania

Other (please indicate):

 $Please\ indicate\ and\ attach\ to\ this\ question naire\ documents\ proving\ business\ relationship\ with\ Lithuania:$

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INFORMATION ABOUT THE CLIENT'S REPRESENTA	ΓΙVE		
Name, surname:			
Personal code or date of birth (applicable only for non-citizer	ns of the Republic of Lithuania):		
Personal code:	Date of birth (YYYY	MM DD):	
Citizenship:			
Address of residency:			
Representative holds a position in the company (please indicate	e): YES		
Representative phone number:			
Representative email address:			
Representative has links with other companies (company name; country; link):			
■ Is the representative of the company, their family mem	nber, or a close associate a PEP	*?	
YES NO			
Name, surname:			
Country, institution, position, year:			
Relation of the Client's Representative with the apmentioned person:	person himself/herself	immediate family member*	close associate**

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6	Information ABOUT THE	HEAD of the COMPANY	(fill if representative and he	ead is not the same person	
	Name, surname:				
	Personal code or date of birth (applicable only for non-citizens of the Republic of Lithuania):				
	Personal code:		Date of birth (YYYY MM DD):	
	Citizenship:				
	Address of residency:				
	Representative phone number	r:			
	Representative email address:				
	Is the head of the compa	any, their family member o	or a close associate a politically	exposed person PEP*?	
	YES NO				
	Please indicate the PEP:				
	Country, institution, positio	n, year:			
	Relation of the Client's head person:	d with the mentioned	a person himself/herself	immediate family member	* close associate**
7	INFORMATION ABOUT U	BOs			
					Dercentage of the charge
	Name, surname		a Citizenship, full address th of the actual residence	TA residence country and tax identification numbe	Percentage of the shares, voting rights or the initial capital held or other relation with the Client
	Please indicate public sources	where it would be possible to	o verify the information about the	UBOs	
	If no UBOs, please indicate the	e reason:			
	Please indicate ISIN, if Shares of	of the client or the company o	controlling the client are traded on	stock exchange of the EU Membe	er States (or the EU-equivalent):



 Is the UBO, his/hers family me 	nber or close associate a PEP?
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YFS

NO

Please indicate the politically exposed person:

Country, institution, position, year:

Relation of the Client's UBO with the mentioned person:

a person himself/herself

immediate family member

close associate

INFORMATION ABOUT THE CLIENT'S OWNERSHIP AND CONTROL structure (INCLUDING ALL SHAREHOLDERS AND (OR) CON-TROLING PERSONS) (please draw the scheme or provide in separate signed and dated document)*:

-shareholding of 10 % plus one share or an ownership interest of more than 10 % in the customer held by an undertaking, which is under the control of a natural person(s), or by multiple undertakings, which are under the control of the same natural person(s), is an indication of indirect ownership must be specified.

DEFINITIONS

- 1. FI financial institution
- Nandi Pay Nandi Finance, UAB,
- PEP (politically exposed person) a natural person who is or was during the past 12 months, entrusted with prominent public functions in the Republic of Lithuania, the European Union, international or foreignstate institutions as well as immediate family members or close associates of such person
 - 1. Head of State, Heads of Government, minister, vice minister and deputy minister, secretary of the State, chancellor of Parliament, Government or Ministry;
 - Member of the Parliament
 - Member of the Supreme Courts, the Constitutional Courts or any other judicial authority, against whose decisions there is no judicial remedy
- 4. Mayor of the municipality, municipality administration director
 5. A member of the management body of the Supreme State Audit and Control Office or the Central Bank Chairman, Deputy Chairman or a member of the Management Board
- 6. an Ambassador, Chargés d'affaires ad interim, The Chief of Defense of the Republic of Lithuania, Commanders of the armed forces and units, Chief of Defense Staff or Senior Officer of Armed Forces of Foreign Countries
- A member of the management or supervisory body of the company managed by the state or municipality
- 8. Leaders or deputies of an international intergovernmental organizations, Member of the Management or Supervisory body (international intergovernmental organizations could be United Nations, Council of Europe, Institution of European Union, Organization for Security and Co-operation in Europe, Organization of American States, NATO and others)
- 9. Head, deputy head or member of the management body of political party immediate family members the spouse, the person with whom partnership has been registered (hereinafter referred to as the "cohabitant"), parents, brothers, sisters, children and children's spouses, children's cohabitants.

 - 1. a natural person who, together with the person who is/was entrusted with the above mentioned prominent public functions, participates in the same legal entity or maintains other business
 - a natural person who is the only owner of the legal entity set up or operating de facto with the aim of acquiring property or another personal benefit for the person who is/was entrusted with the above mentioned prominent public functions.
- SOF means source of funds
- SOW means source of wealth.
- UBO (ultimate beneficial owner) the natural person who owns or manages the Client (legal person) through direct or indirect ownership of a sufficient percentage of the shares or voting rights in that legal person, including through bearer shareholdings, or through control via other means, other than public limited liability companies whose securities are traded on regulated markets that are subject to disclosure requirements consistent with the European Union legislation or subject to equivalent international standards. A shareholding of 25 % plus one share or an ownership interest of more than 25 % in the customer held by a natural person is an indication of direct ownership. A shareholding of 25 % plus one share or an ownership interest of more than 25 % in the customer held by an undertaking, which is under the control of a natural person(s), or by multiple undertakings, which are under the control of the same natural person(s), is an indication of indirect ownership.

Hereby I confirm that I am duly authorised to sign this questionnaire on the behalf of Client, that the provided information is correct, and I undertake to immediately inform about any changes of it. I understand that the information provided in the questionnaire or a part of it may be transferred to the tax administrator or other institution authorised by the Government of the Republic of Lithuania according to the procedure established by them, when such transfer is performed while implementing the international treaties and agreements of the Republic of Lithuania, legal acts of the European Union and the Republic of Lithuania regarding the automated exchange of information about the financial accounts.

By signing this document and below confirming the corectness of provided data the representative of the Client acknowledges that the Nandi Pay process his/ hers personal data according to Nandi Pay's Privacy Policy which can be found at https://www.nandipay.com

Hereby I confirm the correctness of the provided data:

Yes, data is correct