



## DUE DILIGENCE QUESTIONNAIRE – natural persons with registered business activity

Raiffeisenbank Austria d.d. (hereinafter: the Bank) collects and processes the data provided in this Questionnaire, including personal data, for the purpose of complying with its legal obligations as the processing party in order to perform client due diligence and fulfil the obligations which arise from the regulations specified below, and all to the effect of establishing and maintaining the client's business relationship with the Bank.

The data from this Questionnaire, including personal data, are collected and processed pursuant to:

- The Anti-Money Laundering and Terrorist Financing Act and related implementing regulations,
- The Act on International Restrictive Measures and the resolutions of the European Union on the implementation of international restrictive measures and related implementing regulations,
- The Act on Administrative Cooperation in the Field of Taxation and/or other tax regulations

Collecting data contained in this Questionnaire is mandatory. If the Client refuses to disclose a required piece of data or provides incorrect information, the Bank may reject to establish a business relationship or terminate an already established business relationship with the Client.

### 1. CLIENT'S IDENTIFICATION DATA

Name

OIB (PIN)                      VAT ID   
(filled by Client registered in an EU member state, except RH)

Date of Establishment  Country of Establishment

### SEAT ADDRESS

Street and No.

Place  Country

### DATA OF AUTHORISED REPRESENTATIVES

Please enter information on authorised representatives according to the decision on entry into competent register or extract from the craft register or other extract/document issued by competent authority.

1. Name and Surname  Date of birth

OIB<sup>1</sup>/Identification No.                      Country of Residence

2. Name and Surname  Date of birth

OIB<sup>1</sup>/Identification No.                      Country of Residence

### 2. BUSINESS ACTIVITY (if business entity has been founded within 6 months, required data refer to the planned business activity)

Business Entity Economic Activity Code (NKD)<sup>2</sup>  Description

Business activity from which the Client realizes or will realize the highest income  Description

<sup>1</sup> Fill if assigned to a person authorised for client representation

<sup>2</sup> Please state NKD (National Classification of Activities) code according to the official extract from the Crafts Register or extract/document issued by other relevant body.

**Details of business activity** (describe business activities performed or planned to be performed by the Client in the next 3 years in Croatia and/or abroad, volume to be executed through RBA, indicate products/services offered by the Client, business partners or potential business partners in Croatia and/or abroad, describe cash flow/business plan and supply chain)

Number of employees

Client is registered or performs activities related to:	gambling	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	military business activities	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	nuclear power	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Client has business activity or other nexus to sanctioned countries and regions like Iran, Syria, North Korea, Crimea, Afganistan, Russia, Belarus, Eastern Ukraine - Donetsk and Luhansk Oblasts	<b>Presence</b> <small>(subsidiary, rep. office, joint venture)</small>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<b>Business partners</b> <small>(buyers, suppliers, customers)</small>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<b>Selling products/offering services</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<b>Ownership / Authorised representatives</b> <small>(owned by sanctioned entities, individuals)</small>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If any of the answers is YES, please explain in detail:

The Client does not execute and will not execute transactions prohibited by applicable sanctions<sup>3</sup> which involve the Bank in any way.

Confirmed  Not confirmed

### 3. PURPOSE OF BUSINESS RELATIONSHIP

Select the purpose of business relationship with the Bank

- |                                                 |                                                                    |
|-------------------------------------------------|--------------------------------------------------------------------|
| <input type="checkbox"/> Transaction Account    | <input type="checkbox"/> Trading in Financial Instruments by Order |
| <input type="checkbox"/> Loans                  | <input type="checkbox"/> Custody Business and Portfolio Management |
| <input type="checkbox"/> Documentary Agreements | <input type="checkbox"/> Factoring                                 |
| <input type="checkbox"/> Treasury Transactions  | <input type="checkbox"/> Other <small>(state)</small>              |

The Client is opening/maintaining a Transaction Account or establishing/maintaining another business relationship for

- their own account (not acting in the capacity of a trustee)
- a third party's account (if you ticked this option, filling the Attachment Trusteeship hereto is mandatory)

### 4. BUSINESS TRANSACTIONS THROUGH RBA TRANSACTION ACCOUNT

Reason for opening the account in RH  
(filled by business entity with seat outside RH)

Types of transactions to be executed in the account

- |                                            |                                                                                                                   |                                                 |                                                                                     |
|--------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|-------------------------------------------------------------------------------------|
| <input type="checkbox"/> national payments | <input type="checkbox"/> cross-border payments<br><small>(EEA: EU members, Iceland, Lichtenstein, Norway)</small> | <input type="checkbox"/> international payments | <input type="checkbox"/> payments towards EU high-risk third countries <sup>4</sup> |
|--------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|-------------------------------------------------------------------------------------|

<sup>3</sup> Applicable sanctions: EU <https://sanctionsmap.eu/#/main>; US/OFAC <https://ofac.treasury.gov/sanctions-list-search-tool>; UK <https://sanctionssearchapp.ofsi.hmtreasury.gov.uk/>

<sup>4</sup> Afghanistan, Barbados, Burkina Faso, Cayman Islands, DPR Korea, DR Congo, Gibraltar, Haiti, Iran, Jamaica, Jordan, Mali, Mozambique, Myanmar, Nigeria, Panama, The Philippines, Senegal, South Africa, South Sudan, Syria, Tanzania, Trinidad and Tobago, Uganda, United Arab Emirates, Vanuatu, Yemen.  
EU high-risk third countries <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A02016R1675-20230716>

If the account will be used for international transactions, data for 3 most significant business partners are mandatory

COMPANY NAME / NAME AND SURNAME	CITY, COUNTRY	NATURE OF BUSINESS

Planned account turnover (total inflows and outflows) in the next 12 months

- |                                            |                                              |
|--------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> up to EUR 50.000  | <input type="checkbox"/> up to EUR 1.000.000 |
| <input type="checkbox"/> up to EUR 100.000 | <input type="checkbox"/> up to EUR 2.000.000 |
| <input type="checkbox"/> up to EUR 300.000 | <input type="checkbox"/> over EUR 2.000.000  |

Compared to the planned annual turnover in the account, expected inflow of assets to the account

CURRENCY	AMOUNT	FROM WHICH COUNTRY

Expected annual account turnover increase in next 3 years

- up to 15%<sup>5</sup>
 up to 30%
  up to 50%
  up to 100%
  over 100%

Transaction account will be used for cash transactions primarily

- Yes
  No

Source of funds inflow to the account

- |                                                                    |                                                                                     |
|--------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input type="checkbox"/> assets from regular business              | <input type="checkbox"/> assets from business partners, sponsors, etc. (loan, etc.) |
| <input type="checkbox"/> assets from owner (loan, etc.)            | <input type="checkbox"/> assets from project financing and/or EU funds              |
| <input type="checkbox"/> loans from financial /credit institutions | <input type="checkbox"/> other (state)                                              |

State 3 most important business partners – BUYERS<sup>6</sup>

NAME / COMPANY	CITY, COUNTRY	NATURE OF BUSINESS

State 3 most important business partners – SUPPLIERS<sup>6</sup>

NAME / COMPANY	CITY, COUNTRY	NATURE OF BUSINESS

<sup>5</sup> This selection is also applicable in case that no annual increase in account turnover is expected in the next 3 years.

<sup>6</sup> Significant buyers/suppliers are those that participate in a Client's business in a significant amount (>5%)

Reason for the Client not having any significant suppliers/buyers

- business entity established within 6 months
- activity of the business entity has no significant suppliers
- activity of the business entity has no significant buyers
- other reasons (state)

## 5. TAX RESIDENCY

The information is collected to the effect of determining tax residency and fulfilling the obligations arising from the Act on Administrative Cooperation in the Field of Taxation. It will be used and communicated in keeping with the regulations in effect, taking into consideration the rules and measures for personal data protection, to the effect of implementing the obligations of appropriate reporting to tax administrations of countries of residence on their respective tax residents.

Furthermore, in accordance with the Anti-Money Laundering and Terrorist Financing Act, when establishing a business relationship or conducting transactions, the Bank is obligated to apply a procedure that determines whether the Client or Client's beneficial owner is a politically exposed person.

### DEFINITION OF A POLITICALLY EXPOSED PERSON

Politically Exposed Person (PEP) is a natural person who is or who was in the previous 12 months performed a prominent public function in a member state or a third country, including its immediate family members and persons known to be close associates of a politically exposed person.

#### Natural persons who perform or have performed a prominent public function are:

1. heads of state, heads of government, ministers and their deputies, state secretaries and assistant ministers
2. members of legislative bodies
3. members of the governing bodies of political parties
4. members of supreme courts, of constitutional courts or of other high-level judicial bodies, the decisions of which are not subject to further appeal, except in exceptional circumstances
5. members of courts of auditors
6. members of the boards of central banks
7. ambassadors, chargés d'affaires and high-ranking officers in the armed forces
8. members of management or supervisory boards of commercial companies that are owned or majority owned by the state or local and regional self-government units
9. directors, deputy directors and members of the boards and persons performing equivalent functions in international organisations
10. heads of municipalities, mayors, county prefects and their deputies elected pursuant to the law regulating local elections in the Republic of Croatia.

#### Immediate family members of politically exposed person are:

1. the spouse, or a person considered to be equivalent to a spouse, of a politically exposed person
2. the children and their spouses, or persons considered to be equivalent to a spouse, of a politically exposed person
3. the parents of a politically exposed person.

#### Persons known to be close associates of politically exposed person are:

1. natural persons who are known to have joint beneficial ownership of legal entities or legal arrangements, or any other close business relations, with a politically exposed person
2. natural persons who have sole beneficial ownership of a legal entity or legal arrangement which is known to have been set up for the benefit of a politically exposed person.

### INFORMATION ON OWNER

Name  Surname

OIB  Date of Birth

Place of Birth  Country of Birth

### Residence address

Street and No

Place  Country

Owner is a politically exposed person (PEP)  Yes  No

If yes, owner:

a) performs or was performed in the last 12 months a public function

Type of public function

b) family member of politically exposed person

Name and surname and public function of politically exposed person

c) close associate of politically exposed person

Name and surname and public function of politically exposed person

Owner is a US tax resident<sup>7</sup>  Yes

Tax Identification Number

No

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State the countries (other than US) where the owner is a tax resident and the respective Tax Identification No.

**COUNTRY OF RESIDENCE**

**TAX IDENTIFICATION NUMBER**



If no Tax Identification No. was entered for the country of residence, state the reason

- country of tax residence does not issue a tax number
- country of tax residence has not issued a tax number to the business entity
- other (state)

If the country of residence address is different from the country of tax residence, clarify

**INFORMATION ON OWNER**

Name

Surname

OIB

Date of Birth

Place of Birth

Country of Birth

**RESIDENCE ADDRESS**

Street and No

Place

Country

Owner is a politically exposed person (PEP)  Yes  No

If yes, owner:

a) performs or was performed in the last 12 months a public function

Type of public function

<sup>7</sup> US tax resident is required to deliver the W-9 form filled and signed.

b) family member of politically exposed person  
Name and surname and public function of politically exposed person

c) close associate of politically exposed person  
Name and surname and public function of politically exposed person

Owner is a US tax resident<sup>7</sup>

Yes

No

Tax Identification Number

State the countries (other than US) where the owner is a tax resident and the respective Tax Identification No.

**COUNTRY OF RESIDENCE**

  
  


**TAX IDENTIFICATION NUMBER**

  
  


If no Tax Identification No. was entered for the country of residence, state the reason

country of tax residence does not issue a tax number

country of tax residence has not issued a tax number to the business entity

other  
(state)

If the country of residence address is different from the country of tax residence, clarify

By signing this Questionnaire:

- I confirm, under material liability, that any and all information provided in this Questionnaire is true and up to date
- I undertake to personally and without any delay notify the Bank of any data changes in respect of the information provided in this Questionnaire in writing
- In the event that, as a Client, I wish to establish business relationship with one of the members of Raiffeisen Group in the country or abroad, I agree that the data from this Questionnaire as well as all other data and documents that I have made available to the Bank during onboarding process and in the course business relationship for the purpose of implementing the measures arising from the Anti-Money Laundering and Terrorist Financing Act may be exchanged with such member of the Raiffeisen Group
- I explicitly agree that any and all information from this Questionnaire as well as other any and all information that I have placed at the Bank's disposal at any time of establishing and duration of business relationship as well as information, facts and circumstances which the Bank learns while executing any agreements that I have made with the Bank, can be used at the Bank and other Raiffeisen Group members in the country or abroad to the effect of determining tax residency and complying with the obligations arising from the Act on Administrative Cooperation in the Field of Taxation and can be used and communicated, in compliance with the regulations, to the effect of implementing the obligations of adequate reporting to tax administrations of the respective countries of residence on their respective resident taxpayers for the purpose of implementing the Act on Administrative Cooperation in the Field of Taxation
- I am aware that any and all information referring to personal data processing are contained in the Rules of Personal Data Treatment of Raiffeisenbank Austria d.d. which are available at the branches and on [www.rba.hr](http://www.rba.hr)

Name and surname of the Client's authorised representative/s signing the form:

  


Place and date



\_\_\_\_\_  
Client's signature

<sup>7</sup> US tax resident is required to deliver the W-9 form filled and signed.