

## INDIVIDUAL STANDARD KNOW-YOUR-CLIENT (KYC) QUESTIONNAIRE

The information in this form is sought for AML / KYC purposes and will be held by T&F subject to the confidentiality laws of the Cook Islands. The information is not filed as part of any public record.

### Section 1 – GENERAL INFORMATION (please complete in BLOCK CAPITALS)

**A. Individual:**  
Title and Full Name: \_\_\_\_\_ Designation: \_\_\_\_\_  
(e.g. SETTLOR)

**B. Date of Birth**  
(dd/mm/yyyy): \_\_\_\_\_ Nationality: \_\_\_\_\_  
(list all)

**C. Place of Birth**  
(Town or City): \_\_\_\_\_ (Country): \_\_\_\_\_

**D. Passport & Social Security No.:** \_\_\_\_\_  
☐ Please provide a Certified copy of a valid form of Passport or other Photo ID per 'KYC Package' below

**E. Current Residence/Permanent Address:**  
☐ Please provide a Certified copy of utility bill dated within the last 3 months, or other form of proof of address as per 'Individual KYC Package' below

\_\_\_\_\_  
Line 1 (e.g. House/Apt/Suite Name, Number, Street)

\_\_\_\_\_  
Line 2 (e.g. Town/City/Province/County/State)

\_\_\_\_\_  
Country

\_\_\_\_\_  
Postal Code/ZIP code

**F. Email Address:** \_\_\_\_\_ **Telephone:** + ( ) \_\_\_\_\_

**G. Are you a Politically Exposed Person (P.E.P.)** (Individuals entrusted with prominent public functions by a country (e.g. heads of state, heads of govt, senior politicians, government, judicial or military officials, executives of state owned corporations and important political party officials) or someone closely related to a P.E.P.):

YES / NO

If yes please explain:

\_\_\_\_\_

## Section 2 – TAX RESIDENCY

We do not give tax advice. For more information on tax residence, please consult your tax adviser. You can find further information on FATCA [here](#) or CRS at <http://www.oecd.org/tax/automatic-exchange/>

### A. Is the Individual a US Person<sup>1</sup>?

- ☐ **No.** Please attach a completed IRS Form W-8/W-8 BEN if applicable.
- ☐ **Yes.** Please attach a completed IRS Form W-9

### B. Please complete the following table: indicate where the Individual is a tax resident and the tax number (TIN). (If you are tax resident in more than three countries/jurisdictions, please use a separate sheet.)

	Country/Jurisdiction of tax residence	TIN	If no TIN available enter Reason A, B <sup>^</sup> or C
1			
2			
3			

If a TIN is unavailable please provide the appropriate reason A, B or C where indicated above:

**Reason A** -The country/jurisdiction where the Account Holder is resident does not issue TINs to its residents **Reason B<sup>^</sup>** - The Account Holder is otherwise unable to obtain a TIN or equivalent number (Please explain why you are unable to obtain a TIN in the below table if you have selected this reason)

**Reason C** - No TIN is required. (Note. Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction)

### C. <sup>^</sup>If reason B is selected above, please explain briefly below:

1	
2	
3	

I declare that the information provided in this form is true, correct and complete.

I certify that I am the Individual named in Part 1 (or am authorised to sign for the Individual) who is the beneficial owner of all the account(s) to which this form relates.

I agree to inform **Trustees & Fiduciaries (Cook Islands) Ltd** within 30 days of any change in circumstances which causes the information contained herein to become incorrect or incomplete, including a change in tax status.

I acknowledge that the account details of the Individual named in Part 1 in this form may be collected, stored, processed and shared with relevant competent authorities for the purpose of complying with obligations under applicable laws and regulations, including disclosure of the information to governmental authorities and regulators. Where required, I agree to provide a waiver to allow this information to be reported to the competent authority.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print name: \_\_\_\_\_

Capacity (if not signed by the Individual Named in Section 1.A.): \_\_\_\_\_

If signing under a power of attorney please also attach a certified copy of the power of attorney

<sup>1</sup> US person for FATCA purpose means a US citizen (even if residing outside the US) or a resident alien of the US

### Section 3 – INDIVIDUAL BIOGRAPHY AND SOURCE OF WEALTH

#### PERSONAL

Describe your family situation:
Describe your occupation (by industry), area of expertise and employment (or attach a copy of your current CV):

#### BUSINESS INTERESTS/OWNERSHIP (IF ANY)

<u>Current</u> business(es):  Business email address(es):  Business website(s):	Any other relevant business interests that have contributed to your wealth:
<u>Previous</u> business websites (if any):	
Describe the geographical location of your current business activities:	
Business Proofs (You may be requested to provide copies of contracts, invoices, payslips, agreements etc.)	

#### WEALTH

Significant asset holdings:	Location:	Value:
If income is from Salary, please list last 3 places of employment (or attach a copy of your current CV):		
Your estimated Net Worth (nearest \$m):		
<b>Source of Funds</b> - describe how the assets/funds you will settle or transfer to the proposed entity were obtained: (e.g. Savings from ..., sale of business ..., Loan repayments, Royalties from ..., Lease Rents from..., Investment Income from (property, security, equity in ...) or Inheritance/Gift from ..., etc.)		
Source Proofs (You may be requested to provide proof of source such as bank letter, copy of Gift Deed etc.)		

**KYC PACKAGE – Please attach the following additional documents:**

1. ☐ **Section 1 - Identification Documents.** ‘Certified True Copy’\* of proof of ID documents:
  - A valid photographic identification document such as a Passport, Resident Identity Card or Driver’s License (for account signatories this should include your signature); **AND**
  - A utility bill or bank statement proving residential address (dated within the last 3 months) **OR** any other national document that can verify the residential address.
2. ☐ **Section 2 - Tax Status Self-Certification.** Where relevant, you must include an IRS W9 or W8BEN form.
3. ☐ **Section 3 - Client Biography & Source of Wealth:** If requested, please provide additional documents and evidence confirming business interests and/or source of funds.

**\*CERTIFICATION**

For ‘Certified True Copy’, the Approved Certifier has sighted the original documents and certifies the following:

*“I hereby certify this to be a true copy of the original” [and in relation to photographic identification] “and that the photograph bears a true likeness to the individual”.*

**Approved Certifier:**

An approved certifier must be a person independent of the individual, trust or legal person for which the certification is being provided and includes:

- 1) Notary Public exercising his or her office;
- 2) Registrar or Deputy Registrar of a court;
- 3) Justice of the Peace;
- 4) legal practitioner;
- 5) Certified Public Accountant; or
- 6) an officer or employee of a licensed bank, trust company or insurance company.