 **Questionnaire for Politically Exposed Persons**

When establishing a business relationship, pursuant to the Anti-Money Laundering and Counter-Terrorism Financing Act (Narodne novine, Official Gazette of the Republic of Croatia, Nos. 108/2017 and 39/2019), HBOR must perform the corresponding procedure to establish whether the client or the beneficial owner of client is a politically exposed person. In compliance with the aforementioned Act, a politically exposed person is any natural person who has been, or was in the past 12 months, entrusted with a prominent public function in an EU member state or a third country, including immediate family members of politically exposed persons and persons who are known to be close associates of politically exposed persons.

Family members are: a spouse of a politically exposed person or a person with whom a politically exposed person lives in a cohabitation and a person with whom a politically exposed person is in a civil partnership or a person with whom a politically exposed person is in an informal civil partnership, his/her parents, his/her children and their spouses or persons with whom children of a politically exposed person live in a cohabitation and persons with whom the children of a politically exposed person are in a civil partnership or persons with whom the children of a politically exposed person are in an informal civil partnership.

Close associate is any natural person who is known to have joint beneficial ownership of a legal entity or a legal arrangement or any other close business relations with a politically exposed person or who is a sole beneficial owner of a legal entity or a legal arrangement which is known to have been set up for the benefit of a politically exposed person.

Considering the implementation of and compliance with the provisions of the Anti-Money Laundering and Counter-Terrorism Financing Act, please answer the following questions:

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| 1. | Do you exercise a prominent public function (president of a country or prime minister, minister, deputy minister, assistant minister or state secretary)? | SELECT |
| 2. | Are you an elected member of a legislative body? | SELECT |
| 3. | Are you a member of a political party management body? | SELECT |
| 4. | Are you a member of the Supreme, Constitutional or another high court against whose judgments, except in exceptional cases, the right to appeal does not apply? | SELECT |
| 5. | Are you a member of a court of auditors? | SELECT |
| 6. | Are you a member of a central bank council? | SELECT |
| 7. | Are you an ambassador, a *chargé d'affaires* or a high-ranking officer of the armed forces? | SELECT |
| 8. | Are you a member of the Management Board or the Supervisory Board of the legal entity that is owned or majority-owned by the state? | SELECT |
| 9. | Are you a manager, a deputy manager, a member of a committee or a person performing an equivalent function in an international organisation? | SELECT |
| 10. | Are you a head of municipality, a mayor, a county prefect or its deputy elected on the basis of the act regulating local elections in the Republic of Croatia? | SELECT |
| 11. | Are you a member of immediate family of the above/afore mentioned persons:  spouse,  non-marital partner,  life partner/informal life partner,  child or child's spouse or child's non-marital partner or person with whom the child is in a civil/informal civil partnership,  parent. | SELECT |
| 12. | Are you a close associate of the above/afore mentioned persons on the basis of joint beneficial ownership of a legal entity or a legal arrangement or any other close business relations with a politically exposed person or a sole beneficial owner of a legal entity or a legal arrangement which is known to have been set up for the benefit of a politically exposed person? | SELECT |
| 13. | Has it been more than 12 months since you stopped exercising the afore mentioned prominent public functions?**[[1]](#footnote-2)** | SELECT |
| 14. | If you are a politically exposed person, please state the source of funds and assets that are or will be the subject matter of a business relationship.\* | SELECT |

By signing this Questionnaire, I confirm that the data contained in the Questionnaire is true. I hereby undertake to inform you in person if there is any change to the above data.

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| **Name and family name of person to whom the above data relates:** | |
|  | |
| **Place and date:** | **Name and family name, signature:** |
|  |  |
| **Form received by (name, family name, signature of HBOR’s employee):** | |
|  | |
| **Place and date:** | **Acknowledged by (name, family name, signature of head/managing director/executive director):** |
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1. ***This question needs to be answered only if the respective natural person has been, or was in the past 12 months, entrusted with any of the functions referred to in this Questionnaire (items 1-10) or if the natural person, to whom data contained in this Questionnaire relates, is such natural person’s immediate family member/close associate.*** [↑](#footnote-ref-2)