

# Customer Data Sheet to Framework Agreement No. ....

Legal person

Fills TMS Brokers

Cash Account Number		Identification Number	
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To be completed by the Client

Service type: <input type="checkbox"/> TMS Direct <input type="checkbox"/> TMS Connect				
This document is an integral part of the Framework Agreement. Please, legibly fill that document and sign it.				
Name and legal form				
Address of office	Street, house No./apartment No.			
	Post code		City	
	Country			
Address for correspondence (if different than the address of office)	Street, house No./apartment No.		Post code	
	City		Country	
Address of the main place of business (if different than the address of office)	Street, house No./apartment No.		Post code	
	City		Country	
REGON (if applicable)		Number in the company register		
NIP**		Fax		
LEI number		Number in the classification of activities <sup>1</sup>		
Base currency of the account *)	<input type="checkbox"/> PLN <input type="checkbox"/> EUR <input type="checkbox"/> USD <input type="checkbox"/> CHF <input type="checkbox"/> GBP			
<small>*) For the TMS Connect service - TMS Brokers keeps cash accounts in: PLN, USD, EUR;          For the TMS Direct service - TMS Brokers keeps cash accounts in: PLN, USD, EUR, CHF, GBP.          ** in the absence of a NIP number – we ask for your country of registration, name of the company register, date of registration and number in the register</small>				
Client's bank account number (for withdrawals)				Currency of the account
Client's telephone number		E-Mail		
Telephone Password (for remote identification)				
I declare that I want to receive correspondence in the following way:	<input type="checkbox"/> Via e-mail to the provided e-mail address (without additional fee) <input type="checkbox"/> By letter in printed form (the mode that may be associated in the cases indicated in the Table of Commissions and Fees with an additional fee to TMS Brokers)			
Purpose of the agreement	<input type="checkbox"/> investing financial surplus <input type="checkbox"/> reducing exchange rate risk <input type="checkbox"/> increase in the value of assets			
Source of origin of funds	<input type="checkbox"/> contract for mandate, for other specific works, other similar <input type="checkbox"/> economic activity <input type="checkbox"/> lack of income			
	<input type="checkbox"/> renting, leasing or other income from real estate			
For the Client being a joint-stock company	<input type="checkbox"/> transactions on the financial market <input type="checkbox"/> inheritance, donation, random win			
	The Company holds bearer shares representing at least 25% of votes at the general meeting or 25% of the capital of this company? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Code of business activity (if applicable)				
Code of business activity (if applicable)				
Code of business activity (if applicable)				

\_\_\_\_\_  
 Signature of the Client

**Tax residence statement – CRS**

Name		
TIN		
<b>The entity represented by me has the following tax residences (not applicable to the USA):</b>		
Poland	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Other countries of the tax residence (not applicable to the USA)</b>	<input type="checkbox"/> Yes (if yes, please fill the table below)	<input type="checkbox"/> No
Country of tax residence	Tax Identification Number in the country of tax residence – TIN*)	Explain if there is no TIN
1)		
2)		

\*) or its functional equivalent, or the numer used by the state of the residence for identification for tax purposes.

I declare that the entity represented by me has the following status within the meaning of the Act on the exchange of tax information with other countries ("CRS")(please indicate only one of the options below).

1	<input type="checkbox"/>	<b>Financial institution</b> (Bank, life insurance company, brokerage house, investment fund, pension fund or other entity carrying out similar activities).
2	<input type="checkbox"/>	<b>Active Non-financial entity - a listed entity or related entity with a listed entity</b> (An entity that is not a financial institution that is listed on the exchange market or is related within the meaning of the CRS (50% direct or indirect share in the entity making the statement has an entity listed on the stock exchange, the entity submitting the statement and the listed company). For ex.: • A company listed on the stock exchange in Poland or in another country, • An entity belonging to a capital group in which the parent company is listed on the stock exchange in Poland or another country.
3	<input type="checkbox"/>	<b>Active Non-Financial Entity - government institutions, central bank, international organizations</b> Government administration bodies, government agencies, local government units, e.g.: • the National Bank of Poland or the central bank of another country, • UNO, • NATO.
4	<input type="checkbox"/>	<b>Active Non-Financial Entity - other</b> An entity that is not a financial institution with more than 50% of gross income in the previous calendar year active (ie other than investment income such as interest, dividends, income from the sale of securities, derivatives, investment funds, etc.) and over 50% of assets held by this entity in the previous calendar year were assets that generate active income. This category also includes entities that carry out charitable activities, exempt from taxation in their country of residence. For ex .: • A company engaged in commercial, production or service activities based in Poland or another country. • Charities.
5	<input type="checkbox"/>	<b>Passive Non-Financial Entity</b> An entity that is not a financial institution, having its registered office in Poland or another country that does not belong to any of the categories of the Active Non-Financial Entity indicated above. This category includes also investing entities (eg funds, trusts) from countries that have not joined the CRS (e.g. USA) whose revenues are mainly attributable to investing and reinvesting financial assets or trading in financial assets and managed by another entity being a depository institution, trust or insurance undertaking or an investing entity. • A company (existing for more than 24 months), not carrying out a real economic activity, achieving only investment and savings income, • A company operating on the basis of a holding company that owns financial institutions, • An investment fund or trust from the USA. <b>(after selection, please complete the CRS status statements of the beneficiary)</b>

I undertake to inform TMS Brokers about a change in circumstances that affect the tax residence of the entity or the beneficial owner or causes the information included in the statement to become out of date and to submit a properly updated statement within **30 days** from the day the circumstances change. I am aware of criminal liability for making a false statement (Tax residence statement – CRS).

The administrator of personal data is Dom Maklerski TMS Brokers S.A. with its seat in Warsaw, ul. Zlota 59. The statement is collected for the purpose of implementing obligations related to the identification of Clients resident in participating countries under the Act on exchange of tax information with other countries. The customer has the right to access their data as well as to correct or delete them.

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Signature of the Client

### Politically Exposed Person (PEP) statement

Prejudiced about criminal liability for providing data inconsistent with the actual state (Article 233 of the Polish Criminal Code "*Who, giving evidence to serve as evidence in court proceedings or other proceedings carried out under the Act, testifies untruth or conceals the truth, is subject to the penalty of prison sentence for 6 months up to 8 years*"), I am aware of criminal liability for making a false statement and hereby declare that:

☐ I am not considered Politically Exposed Person\*

☐ I am considered Politically Exposed Person\*

Hereby I declare to amend this statement in case of any change in circumstances of my PEP status without undue delay.

.....  
Name and surname of the representative

Prejudiced about criminal liability for providing data inconsistent with the actual state (Article 233 of the Polish Criminal Code "*Who, giving evidence to serve as evidence in court proceedings or other proceedings carried out under the Act, testifies untruth or conceals the truth, is subject to the penalty of prison sentence for 6 months up to 8 years*"), I am aware of criminal liability for making a false statement and hereby declare that:

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Hereby I declare to amend this statement in case of any change in circumstances of my PEP status without undue delay.

.....  
Name and surname of the representative

\* Politically Exposed Person means a natural person who is or who has been entrusted with prominent public functions and includes the following:

- a) heads of State, heads of government, ministers and deputy or assistant ministers;
- b) members of parliament or of similar legislative body;
- c) members of the governing bodies of political parties;
- d) 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;
- e) members of courts of auditors or of the boards of central banks;
- f) ambassadors, charges d'affairs and high-ranking officers in the armed forces;
- g) members of the administrative, management or supervisory bodies of State-owned enterprises, including directors of state-owned enterprises and members of management boards and supervisory boards of companies with Treasury shareholding, in which more than half of shares or stocks belong to the State Treasury or other state legal persons;
- h) directors, deputy directors and members of the board or equivalent function of an international organisation;
- i) general directors in offices of supreme and central state bodies, general directors of voivodship offices and heads of regional offices of governmental special administration bodies;
- j) the spouse, or a person considered to be equivalent to a spouse, of a Politically Exposed Person; the children and their spouses, or person considered to be a equivalent to a spouse, of a Politically Exposed Person, the parents of a Politically Exposed Person;
- k) close associates of Politically Exposed Persons which means a 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, or a natural persons who have sole beneficial ownership of a legal entity or legal arrangement which is known to have been set up for the de facto benefit of a Politically Exposed Person.

who have exercised or exercised these public functions within one year from the date of cessation of fulfilling the conditions set out in this point.

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Signature of the Client

I declare that the Ultimate Beneficiary Owner (UBO) is \*\*):

	Data of the UBO	FATCA statement for UBO (please fill it if point 8 in the FATCA statement is marked)
1	<b>First name and last name:</b> <b>Citizenship</b> ID No. or date of birth: Series and no. identity document: Address of residence: <b>I hereby declare that the person controlling my activity as a UBO</b> <input type="checkbox"/> is <input type="checkbox"/> is not <b>considered as a Politically Exposed Person (PEP).</b>	<input type="checkbox"/> is not a US taxpayer <input type="checkbox"/> is a US taxpayer  TIN:
2	<b>First name and last name:</b> <b>Citizenship</b> ID No. or date of birth: Series and no. identity document: Address of residence: <b>I hereby declare that the person controlling my activity as a UBO</b> <input type="checkbox"/> is <input type="checkbox"/> is not <b>considered as a Politically Exposed Person (PEP).</b>	<input type="checkbox"/> is not a US taxpayer <input type="checkbox"/> is a US taxpayer  TIN:
3	<b>First name and last name:</b> <b>Citizenship</b> ID No. or date of birth: Series and no. identity document: Address of residence: <b>I hereby declare that the person controlling my activity as a UBO</b> <input type="checkbox"/> is <input type="checkbox"/> is not <b>considered as a Politically Exposed Person (PEP).</b>	<input type="checkbox"/> is not a US taxpayer <input type="checkbox"/> is a US taxpayer  TIN:
4	<b>First name and last name:</b> <b>Citizenship</b> ID No. or date of birth: Series and no. identity document: Address of residence: <b>I hereby declare that the person controlling my activity as a UBO</b> <input type="checkbox"/> is <input type="checkbox"/> is not <b>considered as a Politically Exposed Person (PEP).</b>	<input type="checkbox"/> is not a US taxpayer <input type="checkbox"/> is a US taxpayer  TIN:

\*\*) The **Ultimate Beneficiary Owner (UBO)** is understood as a natural person or natural persons exercising direct or indirect control over the Client through the rights that arise from legal or factual circumstances, enabling a decisive influence on actions or actions taken by the Client, or a natural person or natural persons on behalf of whom economic relations are established or an occasional transaction is carried out, including:

a) in the case of a Client who is a legal person other than a company whose securities are admitted to trading on a regulated market subject to disclosure requirements resulting from the provisions of European Union law or the corresponding provisions of the law of a third country:

- a natural person who is a shareholder or shareholder of a Client who has the right to own more than 25% of the total number of shares in that legal person,
- a natural person holding more than 25% of the total number of votes in the body that constitutes the Client, also as a lienor or user, on the basis of agreements with other persons entitled to vote,
- a natural person exercising control over a legal person or legal persons who jointly owns more than 25% of the total number of shares or Client shares, or jointly holding more than 25% of the total number of votes in the Client's body, also as a lienor or user, or based on agreements with other persons entitled to vote,
- a natural person exercising control over the Client by having in relation to this person the right, referred to in art. 3 par. 1 point 37 of the Polish Act of 29 September 1994 on accounting (Journal of Laws of 2018, item 395, 398 and 650), or
- a natural person in a higher management position in the case of a documented lack of ability to determine or doubt as to the identity of the natural persons referred to in the above indents and in the case of non-recognition of suspicions of money laundering or terrorist financing,

b) in the case of a Customer being a trust (the so-called legal relationship resulting from a legal event, contract or agreement, including a set of such events or legal acts under which the ownership is transferred or property is held as a trustee for the purpose of exercising trust management and making these values available to beneficiaries of this relationship):

- the founder,
- trustee,
- supervisor,
- beneficial owner,
- another person exercising control over the trust.

Signature of the Client

### FATCA statement

I declare that the entity represented by me has the following status within the meaning of the Act of 9 October 2015 on the implementation of the Agreement between the Government of the Republic of Poland and the Government of the United States of America on improving the fulfillment of international tax obligations and the implementation of FATCA legislation.  
(please indicate only one of the following options)

1	<input type="checkbox"/>	A non-financial entity based outside of the US with active income		
2	<input type="checkbox"/>	The US taxpayer (Specified US Person)	TIN	
3	<input type="checkbox"/>	The US taxpayer (not a Specified US Person)		
4	<input type="checkbox"/>	Reporting/ Participating Financial Institution (compatible with FATCA)	GIIN	
5	<input type="checkbox"/>	Nonparticipating Financial Institution (incompatible with FATCA)		
6	<input type="checkbox"/>	Exempt Beneficial Owner (non-profit entity)		
7	<input type="checkbox"/>	Deemed – compliant Foreign Financial Institution (released from FATCA)		
8	<input type="checkbox"/>	Non-financial entity with headquarters outside the US with passive income		

Definitions of FATCA statuses can be found at TMS Brokers website in the Documents tab.

I undertake to update the statement regarding the status of the entity represented by me within the meaning of the Act of 9 October 2015 on the implementation of the Agreement between the Government of the Republic of Poland and the Government of the United States of America on improving the fulfillment of international tax obligations and the implementation of FATCA legislation, in the event of a change in circumstances causing the previous declaration to become obsolete and, if necessary, to provide additional documents to verifying the credibility of this statement.

I am aware of criminal liability for making a false statement (FATCA statement).

**\*\* Definition of the US taxpayer** – should be interpreted in accordance with the provision of the Internal Revenue Code according to which the US taxpayer is a natural person who meets at least one of the conditions listed below:

1. has US citizenship (also in case of simultaneous possession of another citizenship);
2. obtained the right of permanent residence in the USA for any period in a given year (Green Card);
3. made the choice of an American residence for tax purposes after meeting the conditions provided in the US regulations;
4. stayed in the USA for at least 31 days during the tax year and the same time the total number of days in which the person was in the USA;
5. during the current year and 2 previous calendar years is at least 183 days (setting the total numbers of stay, the multiplier 1 for the number of days in the current years is used, 1/3 for the days of stay in the previous year and 1/6 for the days of stay two years back, which means that:  
1 day in the current year = 1 day for the total number of days; 3 days in the previous year = 1 day for the total number of days; 6 days stay two years back = 1 day for the total number of days of stay.

I undertake to update the statement regarding the status of the Client as a US taxpayer in the event of a change in circumstances causing, that the previous declaration has become obsolete and, if necessary, to provide additional documents to verify the credibility of this statement.

I hereby declare the completeness and compliance with the actual and legal status of the data contained in the Customer Data Sheet and I undertake to update them in writing immediately after the changes occur. I hereby declare that I have read the information contained in: Best Execution Policy of Dom Maklerski TMS Brokers S.A., Information Sheet about TMS Brokers, Description of Financial Instruments and Risks, Key Information Documents and accept their content. At the same time, I declare that before the conclusion of the Framework Agreement they have been made available to me, I have read and accept the content of the following documents:

☐ **For the TMS Direct service:**

- Terms of use governing the provision of services for the execution of orders by Dom Maklerski TMS Brokers S.A. in the TMS Direct transaction system, maintenance of cash accounts and registers, and foreign exchange,
- Table of Commission and Fees,
- Financial Instruments Specification.

☐ **For the TMS Connect service:**

- Terms of use governing the provision of services for the execution of orders by Dom Maklerski TMS Brokers S.A. in the MT5 transaction system, maintenance of cash accounts and registers, and foreign exchange,
- Table of Commission and Fees TMS Connect,
- Financial Instruments Specification TMS Connect,
- Table of Swap Points,
- Rollover Table.

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Signature of the Client

I hereby declare the completeness and compliance with the actual and legal status of the data contained in the Customer Data Sheet and I undertake to update them in writing immediately after the changes occur.

I hereby agree to execute orders by TMS Brokers outside the system of trading in financial instruments in accordance with the relevant provisions indicated in the Best Execution Policy of Dom Maklerski TMS Brokers S.A.

Date	Name and surname of the person representing the Client	PESEL/Date and place of birth ***)	Citizenship	Series, number of identity document and expiry date	Signature

\*\*\*) In the case of people who do not have a PESEL number, the PESEL should be filled in with the date of birth and the country of birth of the person representing the Client.

<sup>1</sup> 1 = Agriculture, forestry and fishing; 2 = Mining and quarrying; 3 = Industrial processing; 4 = Production and supply of electricity, gas, steam and air for air conditioning systems; 5 = Water supply, sewage and waste management as well as remediation related activities; 6 = Construction; 7 = Wholesale and retail trade, repair of motor vehicles and motorcycles; 8 = Transport and storage management; 9 = Accommodation and food service activities; 10 = Information and communication; 11 = Financial and insurance activities; 12 = Activities related to real estate market services; 13 = Professional, scientific and technical activities; 14 = Activities in the field of administration services and support activities; 15 = Public administration and national defense; obligatory social insurance; 16 = Education; 17 = Healthcare and social services; 18 = Activities related to culture, entertainment and recreation; 19 = Other service activities; 20 = Households employing employees; households producing goods and providing services for their own needs; 21 = Extra-territorial organizations and teams.