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| **ZLECENIE W TRYBIE AWARYJNYM** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **37** | | | | - |  | | | | | | | | |  | | | | | | |  | | | | | |  | | | | | | |  | | | | | | | | | | | | | | | |
| **Numer Uczestnika** | | | | | | | | | | | | | |  | | **Numer zlecenia** | | | | | | | | | | | | | | | |  | | **Data przyjęcia zlecenia** | | | | | | | | | | | | | | | |
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| **Typ uczestnictwa:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Osoba prawna | | | | | | | | | | | | | | | | | |  | | |  | | Jednostka nieposiadająca osobowości prawnej | | | | | | | | | | | | | | | | | | | | | | |  | |  | |
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| **Zlecenie:** | | | | | | |  |  | Zmiana danych Uczestnika/Reprezentanta/Pełnomocnika | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | | | |  |  | Zmiana numeru rachunku bankowego | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Aktualne dane Uczestnika** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Nazwa Uczestnika | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| NIP: | | | | | | | |  | | | | | | | | | | | | REGON: | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| \* w przypadku braku numeru NIP: | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | |  | |  | |  | |  |  |  |  |  | |  | |  | |  | |
| Państwo rejestracji\*: | | | | | | | |  | | | | | | | | | | | | Nazwa rejestru\*: | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
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| Forma organizacyjna: | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Status dewizowy: | | | | | | | |  | Rezydent | | | | |  | |  | |  | | | Nierezydent - kraj rezydencji: | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
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| **Adres stały:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Miejscowość: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |  | | | Kod pocztowy: | | | | | | | |  | | | | | | | | | |
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| Ulica, nr domu/lokalu: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Adres korespondencyjny:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Status podatnika USA (FATCA)\*: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1 |  | |  | | Podatnik USA (będący Szczególną Osobą Amerykańską | | | | | | | | | | | | | | | | | | | | | | | | | | Numer TIN: | | | | | | | |  | | | | | | | | | | |
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| 2 |  | |  | | Podatnik USA (niebędący Szczególną Osobą Amerykańską) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 3 |  | |  | | Raportująca/Uczestnicząca Instytucja Finansowa (zgodnie z FATCA) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | |  | | Numer GIIN: | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 4 |  | |  | | Wyłączona Instytucja Finansowa (niezgodna z FATCA) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 5 |  | |  | | Zwolniony Uprawniony Odbiorca (podmiot non-profit) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 6 |  | |  | | Współpracująca (nieraportująca) Instytucja Finansowa (zwolniona z FATCA) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 7 |  | |  | | Podmiot niefinansowy z siedzibą poza USA o aktywnych dochodach | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 8 |  | |  | | Podmiot niefinansowy z siedzibą poza USA o pasywnych dochodach | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | |  | | (należy podać dane beneficjenta rzeczywistego w części VI.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *\* Typ instytucji według klasyfikacji FATCA:* ***1.******Podatnik USA (będący Szczególną Osobą Amerykańską)*** *- to podmiot, który posiada siedzibę w USA lub jest zorganizowany na podstawie prawa USA i jednocześnie nie należy do jednej z poniższych kategorii: 1) podmiot notowany na rynku giełdowym lub podmiot powiązany z takim podmiotem, 2) bank, 3) organizacja zwolnioną z podatku na podstawie przepisów USA, 4) podmiot należący do administracji federalnej lub stanowej USA, 5) spółka inwestycyjna w rozumieniu przepisów USA, 6) dealer papierów wartościowych lub broker, 7) fundusz typu trust;* ***2. Podatnik USA (nie będący Szczególną Osobą Amerykańską)*** *- to podmiot, który posiada siedzibę w USA i jednocześnie należy do jednej z poniższych kategorii: 1) podmiot notowany na rynku giełdowym lub podmiot powiązany z takim podmiotem, 2) bank, 3) organizacja zwolniona z podatku na podstawie przepisów USA, 4) podmiot należący do administracji federalnej lub stanowej USA, 5) spółka inwestycyjna w rozumieniu przepisów USA, 6) dealer papierów wartościowych lub broker, 7) fundusz typu trust;* ***3. Raportująca/Uczestnicząca Instytucja Finansowa (zgodna z FATCA)*** *- polska lub zagraniczna (ale inna niż amerykańska) instytucja finansowa (tj. m.in. bank, zakład ubezpieczeń oferujący produkty inwestycyjne, dom maklerski, fundusz inwestycyjny czy podmiot prowadzący działalność w zakresie przechowywania aktywów) zarejestrowana na portalu Internal Revenue Service (urząd podatkowy USA – w skrócie „IRS”);* ***4.******Wyłączona Instytucja Finansowa (niezgodna z FATCA)*** *- Instytucja Finansowa (tj. m.in. bank, zakład ubezpieczeń oferujący produkty inwestycyjne, dom maklerski, fundusz inwestycyjny czy podmiot prowadzący działalność w zakresie przechowywania aktywów), która nie została zwolniona z obowiązków wynikających z FATCA i niezarejestrowana na portalu Internal Revenue Service (instytucja niezgodna z FATCA);* ***5. Zwolniony Uprawniony Odbiorca*** *- do kategorii zaliczane są następujące podmioty: 1) rządy państw oraz podległe im jednostki organizacyjne a także jednostki samorządu terytorialnego, oraz należące do rządów i samorządów w całości agencje i inne jednostki sektora finansów publicznych, 2) organizacje międzynarodowe oraz agencje i inne jednostki organizacyjne w całości należące do tych organizacji, 3) banki centralne, 4) fundusze emerytalne oraz podmioty zarządzające tymi funduszami, 5) podmioty będące instytucją inwestycyjną w rozumieniu FATCA, pod warunkiem, że każdy z bezpośrednich udziałowców oraz wierzycieli uprawnionych do odsetek jest instytucją depozytową lub posiada status Zwolnionego Uprawnionego Odbiorcy;* ***6.******Współpracująca (nieraportująca) Instytucja Finansowa (zwolniona z FATCA)*** *- grupa instytucji finansowych zwolnionych z obowiązków wynikających z FATCA i nie posiadających obowiązku rejestracji na portalu Internal Revenue Service, obejmująca w szczególności małe, lokalne instytucje finansowe (działające w formie banków spółdzielczych lub SKOK);* ***7. Podmiot niefinansowy z siedzibą poza USA o aktywnych dochodach*** *- podmioty posiadające siedzibę w Polsce lub innym kraju poza USA, niebędące instytucją finansową, które spełniają jedną z poniższych przesłanek: 1) ponad 50% dochodów brutto tych podmiotów w poprzednim roku kalendarzowym miało charakter aktywny (tj. inny niż dochody o charakterze inwestycyjnym takie jak odsetki, dywidendy, przychody ze sprzedaży papierów wartościowych, z instrumentów pochodnych, z funduszy inwestycyjnych etc.) oraz ponad 50% aktywów posiadanych przez te podmioty w poprzednim roku kalendarzowym stanowiły aktywa, które generują przychód aktywny, 2) podmiot jest notowany na rynku giełdowym lub jest powiązany w rozumieniu FATCA z takim podmiotem, 3) podmioty wykonujące działalność charytatywną, zwolnione w kraju swojej siedziby z opodatkowania, 4) podmiot jest spółką holdingową posiadającą wyłącznie akcje podmiotów nieprowadzących działalności finansowej lub zapewniający finansowanie dla takich podmiotów, przy czym warunek ten dotyczy podmiotów o charakterze inwestycyjnym, 5) podmioty o charakterze non-profit, zwolnione w kraju swojej siedziby z opodatkowania;* ***8. Podmiot niefinansowy z siedzibą poza USA o pasywnych dochodach*** *- podmioty posiadające siedzibę w Polsce lub innym kraju poza USA, niebędące instytucją finansową i niezaliczające się do żadnej z ww. kategorii (statusów) FATCA.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Status CRS\*\*: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1 |  | |  | | Instytucja Finansowa | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 2 |  | |  | | Aktywny NFE – podmiot giełdowy lub powiązany z podmiotem giełdowym | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 3 |  | |  | | Aktywny NFE – instytucje rządowe, banki centralne i organizacje międzynarodowe | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 4 |  | |  | | Aktywny NFE – inne | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 5 |  | |  | | Pasywny NFE (należy podać dane beneficjenta rzeczywistego w części VI.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Oświadczam, że podmiot przeze mnie reprezentowany posiada następujące rezydencje podatkowe (inne niż USA)\*\*: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. Kraj rezydencji podatkowej | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Numer identyfikacji podatkowej w kraju rezydencji podatkowej (Tax Identification Number – TIN): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. Kraj rezydencji podatkowej | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. Kraj rezydencji podatkowej | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Numer identyfikacji podatkowej w kraju rezydencji podatkowej (Tax Identification Number – TIN): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *\*\*Caspar Towarzystwo Funduszy Inwestycyjnych S.A. oraz reprezentowane przez nie fundusze inwestycyjne są zobowiązane na podstawie Ustawy z dnia 9 marca 2017 roku o wymianie informacji podatkowych z innymi państwami („CRS”) do przekazania Szefowi Krajowej Administracji Skarbowej, w celu przekazania właściwemu organowi państwa uczestniczącego\*\*\*, danych dotyczących rachunków znajdujących się w posiadaniu osób będących rezydentami państwa uczestniczącego\*\*\* na podstawie prawa podatkowego tego państwa uczestniczącego\*\*\*.*  *\*\*\* Przez państwo uczestniczące rozumie się:*  *a) inne niż Rzeczypospolita Polska państwo członkowskie,*  *b) inne niż Stany Zjednoczone Ameryki państwo lub terytorium, z którym Rzeczypospolita Polska zawarła porozumienie stanowiące podstawę automatycznej wymiany informacji o rachunkach raportowych,*  *c) inne niż Stany Zjednoczone Ameryki państwo lub terytorium, z którym Unia Europejska zawarła porozumienie stanowiące podstawę automatycznej wymiany informacji o rachunkach raportowanych wymienione w wykazie opublikowanym przez Komisję Europejską.*  *Listę państw uczestniczących, o których mowa w lit. b-c, ogłasza Minister Finansów w drodze obwieszczenia do 15 października każdego roku kalendarzowego.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *Typ instytucji według klasyfikacji CRS:*  *1. Instytucja Finansowa to:*  *1) Instytucja powiernicza - podmiot, który w ramach istotnej części swojej działalności gospodarczej przechowuje aktywa finansowe na rachunek innych osób przy czym uważa się, że przechowywanie aktywów finansowych na rachunek innych osób stanowi istotną część działalności gospodarczej podmiotu, jeżeli jego przychody brutto przypadające na przechowywanie aktywów finansowych i na związane z tym usługi finansowe stanowią co najmniej 20% przychodów brutto tego podmiotu w krótszym z następujących okresów:*  *a) w okresie trzech lat, kończącym się 31 grudnia (lub ostatniego dnia roku obrotowego, jeżeli nie jest on zgodny z rokiem kalendarzowym), poprzedzającego rok, w którym jest dokonywane ustalenie tego udziału,*  *b) w okresie istnienia tego podmiotu.*  *2) Instytucja depozytowa -podmiot, który przyjmuje depozyty w ramach prowadzonej działalności bankowej lub podobnej, w tym: a) bank krajowy, bank zagraniczny, oddział banku krajowego za granicą oraz oddział banku zagranicznego, w rozumieniu ustawy z dnia 29 sierpnia 1997 r. – Prawo bankowe, b) instytucja kredytowa oraz oddział instytucji kredytowej, w rozumieniu ustawy z dnia 29 sierpnia 1997 r. – Prawo bankowe, c) spółdzielcza kasa oszczędnościowo -kredytowa oraz Krajowa Spółdzielcza Kasa Oszczędnościowo -Kredytowa;*  *3) Podmiot inwestujący -podmiot, który:*  *a) w ramach działalności gospodarczej wykonuje głównie co najmniej jedną z następujących czynności lub operacji na rzecz lub w imieniu klienta: • obrót instrumentami rynku pieniężnego (czekami, wekslami, certyfikatami depozytowymi, instrumentami pochodnymi itp.), obrót walutą, obrót pochodnymi instrumentami walutowymi, instrumentami pochodnymi na stopę procentową i indeksowymi instrumentami pochodnymi, obrót zbywalnymi papierami wartościowymi lub towarowymi kontraktami terminowymi typu future, • zarządzanie indywidualnym i zbiorowym portfelem aktywów, • inne formy inwestowania, administrowania lub zarządzania aktywami finansowymi lub środkami pieniężnymi*  *b) lub którego przychody brutto przypadają głównie na inwestowanie lub reinwestowanie aktywów finansowych lub obrót tymi aktywami, jeżeli jest zarządzany przez inny podmiot będący instytucją depozytową, instytucją powierniczą, zakładem ubezpieczeń lub podmiotem inwestującym, o którym mowa w lit. a;*  *4) Zakład ubezpieczeń - Krajowy zakład ubezpieczeń, o którym mowa w art. 3 ust. 1 pkt 18 ustawy z dnia 11 września 2015 r. o działalności ubezpieczeniowej i reasekuracyjnej (Dz. U. poz. 1844 oraz z 2016 r. poz. 615 i 1948), a także zagraniczny zakład ubezpieczeń w rozumieniu art. 3 ust. 1 pkt 55 ustawy o wymianie informacji podatkowych z innymi państwami, które zawierają pieniężną umowę ubezpieczenia lub umowę renty, bądź są zobowiązane do dokonywania płatności z tytułu tych umów.*  *2.Aktywny Podmiot Niefinansowy – podmiot giełdowy lub powiązany z podmiotem giełdowym tj.:*  *1) spółka kapitałowa, której akcje są przedmiotem regularnego obrotu na co najmniej jednym uznanym rynku papierów wartościowych,*  *2) spółka będąca podmiotem powiązanym spółki, o której mowa w ppkt 1 powyżej.*  *3. Aktywny Podmiot Niefinansowy – instytucje rządowe, banki centralne i organizacje międzynarodowe. W zakres tej kategorii wchodzą:*  *1) podmioty rządowe takie jak:*  *a) rząd jakiegokolwiek państwa,*  *b) jednostki terytorialne niższego szczebla jakiegokolwiek państwa w tym stany, prowincje, okręgi, województwa, powiaty lub gminy,*  *c) agencja lub instytucja jakiegokolwiek państwa będąca w całości własnością danego państwa lub jednostek wymienionych w ppkt a i b,*  *d) osoba, organizacja, agencja, urząd, fundusz, instytucja lub inny organ, niezależnie od tego, w jaki sposób zostały one ustanowione, stanowiące organ sprawujący władzę w jakimkolwiek państwie, pod warunkiem, że dochody netto tego organu są zapisywane na jego własnym rachunku lub na innych rachunkach danego państwa i żadna część tych dochodów nie przynosi korzyści osobie prywatnej,*  *e) podmiot kontrolowany przez państwa, przez który rozumie się podmiot prawny niezależny od państwa, pod warunkiem że:•podmiot ten jest własnością innego podmiotu rządowego i jest kontrolowany bezpośrednio lub za pośrednictwem podmiotu kontrolowanego przez inny podmiot rządowy, •dochody netto tego podmiotu są zapisywane na jego własnym rachunku lub na rachunkach innego podmiotu rządowego i żadna część tych dochodów nie przynosi korzyści osobie prywatnej, •po rozwiązaniu tego podmiotu jego aktywa powierzane są innemu podmiotowi rządowemu,*  *2) organizacje międzynarodowe, przez które rozumie się:*  *a) organizacje międzynarodowe: •w skład których wchodzą głównie państwa, •które zawarły z danym państwem obowiązujące porozumienie w sprawie lokalizacji jej siedziby lub inne podobne porozumienie, •których dochód nie przynosi korzyści osobom prywatnym,*  *b) agencje lub instytucje będące w całości własnością podmiotu, o którym mowa ppkt. a.*  *3) bank centralny -instytucja określona przez prawo lub wyznaczona przez rząd jako centralny organ – inny niż rząd danego państwa – emitująca instrumenty przeznaczone do obiegu jako waluta niezależnie od tego, czy instytucja ta jest w całości lub w części własnością tego państwa.*  *4. Aktywny Podmiot Niefinansowy – inne (dalej: „NFE”) - podmiot, który prowadzi aktywną działalność handlową lub biznesową inną niż działalność finansowa, który nie jest Aktywnym Podmiotem Niefinansowym –podmiotem giełdowym lub powiązanym z podmiotem giełdowym ani Aktywnym Podmiotem Niefinansowym – instytucją rządową, bankiem centralnym i organizacją międzynarodową. Wskazana kategoria obejmuje w szczególności podmiot spełniający jeden z poniższych warunków:1) mniej niż 50 % dochodu brutto NFE za poprzedni rok kalendarzowy lub inny odpowiedni okres sprawozdawczy stanowi dochód pasywny, przez który rozumie się przychody z dywidend i inne przychody z udziału w zyskach osób prawnych, przychody ze zbycia udziałów (akcji), wierzytelności, odsetek i pożytków od wszelkiego rodzaju pożyczek, poręczeń i gwarancji, a także przychody z praw autorskich, praw własności przemysłowej, w tym z tytułu zbycia tych praw, a także zbycia i realizacji praw z instrumentów finansowych, oraz mniej niż 50 % aktywów posiadanych przez NFE w trakcie poprzedniego roku kalendarzowego stanowią aktywa, które przynoszą dochód pasywny lub są posiadane dla osiągania dochodu pasywnego,2) wszystkie czynności dokonywane przez NFE obejmują posiadanie, w całości lub w części, wyemitowanych akcji jednostek zależnych, lub zapewnienie finansowania i świadczenia usług tym jednostkom, które prowadzą działalność w branżach lub sektorach innych niż działalność instytucji finansowej; podmiot nie kwalifikuje się do tego statusu, jeżeli działa jako fundusz private equiy , fundusz venture capital, fundusz typu leveraged buyout (LBO) lub jakikolwiek inny instrument inwestycyjny, którego celem jest nabycie lub finansowanie spółek, a następnie posiadanie udziałów w tych spółkach jako aktywów trwałych do celów inwestycji, 3) NFE nie prowadzi działalności gospodarczej i nie prowadził wcześniej takiej działalności, jednakże inwestuje kapitał w aktywa z zamiarem prowadzenia działalności innej niż działalność instytucji finansowej, pod warunkiem że nie upłynął okres 24 miesięcy od dnia utworzenia tego NFE, 4) NFE nie był instytucją finansową przez ostatnie pięć lat oraz jest w trakcie procesu likwidacji aktywów lub reorganizacji z zamiarem kontynuowania lub wznowienia działalności w zakresie innym niż działalność instytucji finansowej,5) NFE zajmuje się głównie transakcjami finansowymi lub zabezpieczającymi z podmiotami powiązanymi, które nie są instytucjami finansowymi, lub na rzecz tych podmiotów oraz nie zapewnia finansowania ani nie świadczy usług zabezpieczających na rzecz innego podmiotu niebędącego podmiotem powiązanym, pod warunkiem że grupa tych powiązanych podmiotów prowadzi przede wszystkim działalność inną niż działalność instytucji finansowej, 6) NFE spełnia łącznie następujące kryteria: a) został utworzony i działa w swoim państwie rezydencji wyłącznie dla celów religijnych, charytatywnych, naukowych, artystycznych, kulturalnych, sportowych lub edukacyjnych, lub został utworzony i działa w tym państwie jako organizacja zawodowa, organizacja przedsiębiorców, izba handlowa, organizacja pracy, organizacja rolnicza lub ogrodnicza, organizacja obywatelska lub organizacja prowadzona wyłącznie w celu wspierania opieki społecznej, b) jest zwolniony z podatku dochodowego w państwie rezydencji, c) nie posiada udziałowców ani członków, którzy są właścicielami lub beneficjentami jego dochodu lub aktywów, d) mające zastosowanie przepisy państwa rezydencji NFE lub jego dokumenty założycielskie nie pozwalają na przekazanie ani wykorzystanie jego dochodu lub aktywów na rzecz osoby prywatnej lub podmiotu niebędącego podmiotem charytatywnym, z wyjątkiem gdy dokonywane są zgodnie z prowadzoną przez NFE działalnością charytatywną, zapłaty rozsądnego wynagrodzenia za wykonane usługi lub zapłaty odzwierciedlającej uczciwą wartość rynkową nabytego przez ten podmiot majątku, e) mające zastosowanie przepisy państwa rezydencji NFE lub jego dokumenty założycielskie wymagają, aby w przypadku likwidacji lub rozwiązania tego NFE wszystkie jego aktywa zostały przekazane podmiotowi rządowemu lub innej organizacji pożytku publicznego, lub przypadły w udziale rządowi państwa rezydencji tego NFE lub jednostce terytorialnej niższego szczebla danego państwa.*  *5. Pasywny Podmiot Niefinansowy: 1) podmiot, który nie należy do kategorii wskazanych w pkt 2 -4 powyżej, 2) podmiot inwestujący, o którym mowa w pkt 1 ppkt 3 powyżej, niebędący instytucją finansową z państwa uczestniczącego(państwem uczestniczącym jest państwo członkowskie Unii Europejskiej lub inny kraj, z którym Rzeczpospolita Polska zawarła porozumienie stanowiące podstawę do automatycznej wymiany informacji o rachunkach raportowanych, wymieniony w obwieszczeniu Ministra Finansów publikowanym w Dzienniku Urzędowym Rzeczypospolitej Polskiej „Monitor Polski”).* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *Rezydencja podatkowa danego państwa oznacza podleganie opodatkowaniu od całości dochodów w tym państwie i zgodnie z przepisami prawa ze względu na miejsce zamieszkania, siedzibę efektywny zarząd lub inne kryterium o podobnym charakterze. Prawo krajowe różnych państw może przewidywać inne warunki powstania rezydencji podatkowej w tych państwach. Rezydencję podatkową określa się z uwzględnieniem odpowiednich umów o unikaniu podwójnego opodatkowania. Przez efektywny zarząd należy rozumieć m.in. podejmowane decyzje dotyczące zarządzania podmiotem, zebrania osób podejmujących decyzje dotyczące zarządzania podmiotem, itp. Niemniej wobec braku definicji legalnej efektywnego zarządu na gruncie przepisów prawa polskiego, istnieje możliwość uznania innych okoliczności za efektywny zarząd.*  *W przypadku podmiotu nieposiadającego rezydencji podatkowej (np. spółki osobowej prawa handlowego niebędącej podatnikiem podatku dochodowego od osób prawnych), jako kraj rezydencji należy wskazać państwo, z którego ten podmiot jest efektywnie zarządzany, zgodnie z prawem którego został utworzony lub w którym podlega nadzorowi finansowemu.*  *W razie wątpliwości w zakresie ustalenia rezydencji podatkowej należy skonsultować się z wybranym przez siebie doradcą podatkowym.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Dane kontaktowe:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| 1. **Aktualne dane Reprezentanta I/Pełnomocnika\*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Aktualne dane Reprezentanta II/Pełnomocnika II\*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Zmiana/dodanie rachunku bankowego** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Składający zlecenie** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Dane dodatkowe wynikające z ustawy Przeciwko Praniu Pieniędzy (PPP)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | dochody z działalności gospodarczej, udziały w przedsiębiorstwie  (w przypadku zaznaczenia tej odpowiedzi, proszę wypełnić poniższe dane): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | handel bronią i amunicją | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | handel paliwami | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | handel kamieniami szlachetnymi | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | handel samochodami/komisy | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | działalność kantorowa | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | działalność lombardowa | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Cel inwestycji:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Eksponowane Stanowisko Polityczne:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Niniejszym oświadczam, że: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Osobą Zajmującą Eksponowane Stanowisko Polityczne (PEP)\*. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| W przypadku potwierdzenia statusu PEP, proszę uzupełnić poniższe informacje: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Kraj urodzenia: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Obywatelstwo: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Eksponowane Stanowisko Polityczne:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Niniejszym oświadczam, że według mojej wiedzy Rzeczywisty Beneficjent: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Osobą Zajmującą Eksponowane Stanowisko Polityczne (PEP)\*. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *\* Przez Osobę Zajmującą Eksponowane Stanowisko Polityczne (PEP – Politically Exposed Person) rozumie się, z wyłączeniem grup stanowisk średniego i niższego szczebla, osoby zajmujące znaczące stanowiska publiczne lub pełniące znaczące funkcje publiczne, w tym:*  *a) szefów państw, szefów rządów, ministrów, wiceministrów oraz sekretarzy stanu,*  *b) członków parlamentu lub podobnych organów ustawodawczych,*  *c) członków organów zarządzających partii politycznych,*  *d) członków sądów najwyższych, trybunałów konstytucyjnych oraz innych organów sądowych wysokiego szczebla, których decyzje nie podlegają zaskarżeniu, z wyjątkiem trybów nadzwyczajnych,*  *e) członków trybunałów obrachunkowych lub zarządów banków centralnych,*  *f) ambasadorów, chargés d'affaires oraz wyższych oficerów sił zbrojnych,*  *g) członków organów administracyjnych, zarządczych lub nadzorczych przedsiębiorstw państwowych, spółek z udziałem Skarbu Państwa, w których ponad połowa akcji albo udziałów należy do Skarbu Państwa lub innych państwowych osób prawnych,*  *h) dyrektorów, zastępców dyrektorów oraz członków organów organizacji międzynarodowych lub osoby pełniące równoważne funkcje w tych organizacjach,*  *i) dyrektorów generalnych w urzędach naczelnych i centralnych organów państwowych oraz dyrektorów generalnych urzędów wojewódzkich,*  *j) inne osoby zajmujące stanowiska publiczne lub pełniące funkcje publiczne w organach państwa lub centralnych organach administracji rządowej;*  *oraz członków rodziny ww. osób, przez których rozumie się:*  *a) małżonka lub osobę pozostającą we wspólnym pożyciu z osobą zajmującą eksponowane stanowisko polityczne,*  *b) dziecko osoby zajmującej eksponowane stanowisko polityczne i jego małżonka lub osoby pozostającej we wspólnym pożyciu,*  *c) rodziców osoby zajmującej eksponowane stanowisko polityczne;*    *a także osób znanych jako bliscy współpracownicy Osoby Zajmującej Eksponowane Stanowisko Polityczne, przez których rozumie się:*  *a) osoby fizyczne będące beneficjentami rzeczywistymi osób prawnych, jednostek organizacyjnych nieposiadających osobowości prawnej lub trustów wspólnie z Osobą Zajmującą Eksponowane Stanowisko Polityczne lub utrzymujące z taką Osobą inne bliskie stosunki związane z prowadzoną działalnością gospodarczą,*  *b) osoby fizyczne będące jedynym beneficjentem rzeczywistym osób prawnych, jednostek organizacyjnych nieposiadających osobowości prawnej lub trustu, o których wiadomo, że zostały utworzone w celu uzyskania faktycznej korzyści przez Osobę Zajmującą Eksponowane Stanowisko Polityczne.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Oświadczenia** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. Oświadczam, iż zostały mi przedstawione Kluczowe Informacje dla Inwestorów Caspar Parasolowy FIO oraz akceptuję ich treść.  2. Zostałem/am poinformowany/a, że na moje żądanie Fundusz bezpłatnie doręczy mi roczne i półroczne połączone sprawozdanie finansowe Funduszu oraz sprawozdania finansowe Subfunduszy, a także Prospekt Informacyjny. Powyższe dokumenty są dostępne również we wszystkich miejscach zbywania Jednostek Uczestnictwa oraz na stronie internetowej www.caspar.com.pl.  3. Potwierdzam, że są mi znane zasady i terminy realizacji zleceń, aktualnie obowiązująca tabela opłat oraz zasady opodatkowania dochodów z tytułu uczestnictwa w Funduszu. Wyrażam zgodę na otrzymywanie informacji dotyczących dokumentów regulujących funkcjonowanie Funduszu za pośrednictwem strony internetowej www.caspar.com.pl/dokumenty/tfi przy czym potwierdzam posiadanie przeze mnie regularnego dostępu do Internetu.  4. Zostałem/am poinformowany/a, że z uczestnictwem w Funduszu wiąże się ryzyko, szczegółowo opisane w Prospekcie Informacyjnym. Mam świadomość, że wszystkie Subfundusze, wchodzące w skład Funduszu cechują się dużą zmiennością ze względu na skład portfela inwestycyjnego, oraz że Subfundusze Caspar Stabilny, Caspar Globalny i Caspar Obligacji mogą lokować większość aktywów w inne kategorie lokat niż papiery wartościowe lub instrumenty rynku pieniężnego, tj. w tytuły uczestnictwa lub instrumenty dłużne.  5. Potwierdzam, że podane powyżej dane są pełne, poprawne, aktualne i zgodne z moją intencją. W przypadku zmiany tych danych zobowiązuję się do niezwłocznej ich aktualizacji. Jestem świadomy/a, że w przypadku błędów lub nieścisłości może nastąpić opóźnienie w rozliczeniu zlecenia lub brak realizacji zlecenia.  6. Zobowiązuję się do aktualizacji oświadczenia w przypadku zmiany okoliczności, które mają wpływ na rezydencję podatkową reprezentowanego przeze mnie podmiotu lub beneficjenta rzeczywistego tego podmiotu powodujących, iż poprzednie oświadczenie straciło aktualność oraz możliwej konieczności dostarczenia dodatkowych dokumentów w celu weryfikacji wiarygodności tego oświadczenia. Zobowiązuję się poinformować o zmianie okoliczności, która ma wpływ na rezydencję podatkową podmiotu lub beneficjenta rzeczywistego lub powoduje, że informacje zawarte w oświadczeniu stały się nieaktualne oraz złożyć odpowiednio zaktualizowane oświadczenie w terminie 30 dni od dnia, w którym nastąpiła zmiana okoliczności.  7. Oświadczam, iż zostałem/am poinformowany/a, że Towarzystwo uznało mnie za klienta detalicznego. Na mój wniosek Towarzystwo może uznać mnie za klienta profesjonalnego. Jednocześnie oświadczam, że zostałem/am poinformowany/a, że klient uznany za profesjonalnego, również może złożyć do Towarzystwa wniosek o zmianę jego klasyfikacji. Zasady traktowania klientów detalicznych i profesjonalnych znajdują się w dokumencie „Procedura klasyfikacji klientów” zamieszczonym na stronie internetowej www.caspar.com.pl.  8. Zostałem/am poinformowany/a, że:  a) moje dane osobowe w związku z moim uczestnictwem w Funduszu są administrowane przez Caspar Parasolowy Fundusz Inwestycyjny Otwarty, reprezentowany przez Caspar Towarzystwo Funduszy Inwestycyjnych SA z siedzibą w Poznaniu przy ulicy Półwiejskiej 32, 61-888 Poznań;  b) celem przetwarzania moich danych osobowych przez Fundusz jest realizacja moich zleceń związanych z uczestnictwem w Funduszu na zasadach określonych w ustawie z dnia 27 maja 2004 r. o funduszach inwestycyjnych i zarządzaniu alternatywnymi funduszami inwestycyjnymi (t. j. Dz. U. z 2018 r., poz. 1355, ze zm.). Podanie danych osobowych jest dobrowolne, ale konieczne do realizacji tych zleceń;  c) Fundusz przetwarza moje dane osobowe również na potrzeby prowadzonej działalności w celach statystycznych, analitycznych, monitorowania ryzyka operacyjnego, rozpatrywania reklamacji, dochodzenia roszczeń, archiwizacji, realizacji obowiązków wynikających z przepisów prawa, w szczególności MIFID, AML, FATCA, CRS, a także w celu przekazywania materiałów marketingowych dotyczących Funduszu;  d) Fundusz przetwarza moje dane osobowe przez okres mojego uczestnictwa w Funduszu, a następnie przez okres 6 lat liczony od daty wyceny ostatniego umorzenia na uczestnictwie;  e) mam prawo dostępu i sprostowania moich danych osobowych oraz prawo do ich przeniesienia, a także do wniesienia skargi na Fundusz w związku z przetwarzaniem danych osobowych; skargę należy wnosić do Prezesa Urzędu Ochrony Danych Osobowych;  f) mam także prawo do żądania usunięcia moich danych osobowych, żądania ograniczenia ich przetwarzania oraz wniesienia sprzeciwu wobec ich przetwarzania, jednak skorzystanie z tych praw uniemożliwi uczestnictwo w Funduszu i będzie skutkować odkupieniem moich jednostek uczestnictwa przez Fundusz;  g) Fundusz powierzył przetwarzanie moich danych osobowych Agentowi Transferowemu – ProService Finteco sp. z o.o. oraz Dystrybutorowi, za pośrednictwem którego jest przyjmowane dane zlecenie;  h) funkcję Inspektora Ochrony Danych Osobowych pełni pracownik Towarzystwa, z którym można się skontaktować pod adresem iodo@caspartfi.pl.  9. Wyrażam zgodę/nie wyrażam zgody na przetwarzanie moich danych osobowych w celach marketingowych teraz i w przyszłości oraz na otrzymywanie informacji handlowej w rozumieniu ustawy z dnia 18 lipca 2002 r. o świadczeniu usług drogą elektroniczną na adres e-mail wskazany powyżej przez spółki z grupy kapitałowej Towarzystwa, tj. Caspar Asset Management S.A. z siedzibą w Poznaniu przy ul. Półwiejskiej 32, 61-888 Poznań oraz F-Trust S.A. z siedzibą w Poznaniu przy ul. Półwiejskiej 32, 61-888 Poznań.  10. Wyrażam zgodę/nie wyrażam zgody na otrzymywanie od Caspar Towarzystwa Funduszy Inwestycyjnych S.A. z siedzibą z siedzibą w Poznaniu przy ulicy Półwiejskiej 32, 61-888 Poznań informacji handlowej w rozumieniu ustawy z dnia 18 lipca 2002 r. o świadczeniu usług drogą elektroniczną na adres e-mail wskazany powyżej.  11. Wyrażam zgodę/nie wyrażam zgody na przetwarzanie moich danych osobowych przez Caspar Towarzystwo Funduszy Inwestycyjnych S.A. z siedzibą w Poznaniu przy ulicy Półwiejskiej 32, 61-888 Poznań w celach marketingowych teraz i w przyszłości.  12. Wyrażam zgodę/nie wyrażam zgody na kontakt telefoniczny z Caspar Towarzystwem Funduszy Inwestycyjnych S.A. z siedzibą z siedzibą w Poznaniu przy ulicy Półwiejskiej 32, 61-888 Poznań w celach marketingowych oraz związanych z obsługą mojej inwestycji.  13. Oświadczenia o wspólności majątkowej – dotyczy wyłącznie WSM:  a) Oświadczamy, iż pozostajemy we wspólności majątkowej małżeńskiej.  b) Oświadczamy, iż wyrażamy zgodę na składanie wszelkich oświadczeń woli Funduszowi przez każdego z małżonków oraz odbieranie należnych nam środków pieniężnych, pochodzących z odkupienia Jednostek Uczestnictwa, przez każdego z małżonków, włączywszy żądanie odkupienia wszystkich nabytych Jednostek Uczestnictwa, żądanie ustanowienia blokady Subrejestru i jego zamknięcia oraz zlecenia Konwersji, Zamiany i transferu Jednostek Uczestnictwa, a także na podejmowanie wszelkich należnych nam środków pieniężnych.  c) Oświadczamy, iż wyrażamy zgodę na realizację zleceń zgodnie z kolejnością ich składania przez każdego z małżonków, chyba że drugi wyrazi sprzeciw najpóźniej w chwili składania zlecenia przez pierwszego.  d) Oświadczamy, iż wyrażamy zgodę na wyłączenie odpowiedzialności Towarzystwa za skutki złożonych przez nas i ewentualnych pełnomocników, żądań odkupienia, będących wynikiem odmiennych decyzji każdej ze stron.  14. Zostałem/am poinformowany/a, że szczegółowe zasady składania i rozpatrywania skarg i reklamacji opisane są w Polityce rozpatrywania skarg i reklamacji znajdującej się na stronie internetowej Towarzystwa www.caspar.com.pl. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |
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| Podpis Składającego zlecenie | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | Podpis składającego zlecenie | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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