

SECURITIES COMMISSION OF THE BAHAMAS

Poinciana House North Building, 2nd Floor 31A East Bay Street P.O. Box N-8347 Nassau, The Bahamas Tel: (242) 397-4100 Fax: (242) 356-7530 E-mail: <u>info@scb.gov.bs</u> Website: <u>www.scb.gov.bs</u>

DIGITAL ASSETS AND REGISTERED EXCHANGES ACT, 2020 PART A

Form 2

(Section 8)

Personal Questionnaire for Director, Founder, Beneficial Owner, Officer, and Significant Interest Holder for persons registered under Part III of the Act

General Instructions: Please complete all sections of the form. Where the space allocated is insufficient, you may continue on a separate page, and submit it as an attachment along with the completed form. Attachments must be clearly labelled to indicate the item number they refer to. A list of required attachments also appears at the end of this form.

Completed applications should be submitted to:

Supervision Department

Securities Commission of The Bahamas Poinciana House North Building, 2nd Floor 31A East Bay Street P.O. Box N-8347 Nassau, The Bahamas

Or via email to: SUDfilings@scb.gov.bs

WARNING: Intentional misstatement or failure to disclose information may constitute an offence.



Personal Questionnaire for Director, Founder, Beneficial Owner, Officer, and Significant Interest Holder for persons registered under Part III of the Act

A. Personal Details

1. Name of the registered person (firm, marketplace. etc.) in connection with which this questionnaire is being completed.

2. Full legal name of representative:

	Prefix	Last Name	First Name	Middle Initial
3.	List any previous names of the applicant			
	Prefix	Last Name	First Name	Middle Initial
	Prefix	Last Name	First Name	Middle Initial
4.	Indicate role(s) in which representative will be acting			
	Director			
	Founder			
	Beneficial Owner			
	Officer			
	Significant Security Holder			



5. Home address

Address Line 1:

Address Line 2:

City:

State/Province:

Zip/Postal Code:

Country:

Date at this address:

Tick here if the applicant operates more than one address in The Bahamas and provide details in an attached document.

6. Previous home addresses during the last ten years (With relevant dates).

Previous Address 1

Address Line 1:

Address Line 2:

City:

State/Province:

Zip/Postal Code:

Country:

Relevant dates at this address:

Previous Address 2

Address Line 1:

Address Line 2:



City:

State/Province:

Zip/Postal Code:

Country:

Relevant dates at this address:

Tick here if the applicant operates more than one address in The Bahamas and provide details in an attached document.

7. Date of Birth:

Place of birth

Town:

State:

Country:

8. Citizenship

Bahamas:

Others: Please specify:

9. Identification number

(Passport No., Voters Registration No., National Identification No., Social Security No., Tax Identification No. or specify other type)

Identification No

Identification Type:

Please specify other Type:



B. Employment and Education History

10. Present occupation or employment:

Name of Employer:

Address of the employer:

Address Line 1:

Address Line 2:

City:

State/Province:

Zip/Postal Code:

Country:

The nature of business:

Title of position held:

Relevant start date:

For each employer, provide the name, position & telephone number of a reference:

Name:

Position:

Telephone No.:

11. Prior occupations and employment during the last ten years, including:

- i. The name and address of the employer
- ii. The nature of business
- iii. Title of position held, and
- iv. Relevant start date

For each employer, provide the name, position & telephone number of a reference.



12. List companies of which the Applicant:

(a) Is a current director or significant interest holder:

(Specify the name of the entity, the country of incorporation, the nature of business)

(b) Has been a director or significant interest holder at any time during the last ten years:

(Specify the name of the entity, the country of incorporation, the nature of business)

*Significant interest as defined in section 2 of the Act

13. Describe the formal education or training the Applicant has in digital asset business (including professional qualifications or degrees and year in which they were obtained).

Please provide evidence of status with any professional membership indicated.

14. Are you or have you ever been a director, officer, significant interest holder, or been an employee of any other entity registered with the Commission?

No

Yes

(If yes, please provide full details.)

15. Have you been licensed or registered to work in a similar capacity in any other jurisdiction?

No

Yes

(If yes, attach full details, including copy of evidence of such registration or license)

C. Discipline History

16. Have you or any person with which you were associated as a director, manager, officer or significant interest holder, in any jurisdiction, been disciplined by any stock exchange, securities regulatory body or professional association or been denied admission, registration or renewal or had a membership or registration revoked?

No

Yes

(If yes, attach full details)

17. Have you or any person with which you were associated as a director, manager, officer, or significant interest holder, in any jurisdiction, ever been declared bankrupt, been convicted of a crime, or been sued under any commercial law, securities law, companies' law or law concerning fraud?

No

Yes

(If yes, attach full details)



18. Have you at any time been involved with an application for regulatory approval in any jurisdiction where that application has been refused or withdrawn?

No Yes

(If yes, attach full details)

19. Have you, in any jurisdiction, been dismissed from any office or employment or barred from entry to any profession or occupation?

No

Yes

(If yes, attach full details)

20. Has any person with which you were associated as a director, manager, officer, or significant interest holder, in any jurisdiction been compulsorily wound up or made any arrangement with its creditors or ceased trading in circumstances where its creditors did not receive or have not yet received full settlement of their claims, either while you were associated with it or within one year after you ceased to be associated with it?

No

Yes

(If yes, attach full details)

21. In carrying out your duties will you be acting on the directions or instructions of any other person?

No

Yes

(If yes, attach full details)



"I, the undersigned, hereby affirm that to the best of my information, knowledge and belief the contents of this form and any attachments provided with this form are true, correct and not misleading and that I am in compliance with all the applicable provisions of the Act. I undertake that as long as I continue to be a director, significant interest holder, manager, or officer of the registered person named in item 1, I will

- i. Continue to comply with all the applicable provisions of the Act, and
- ii. Notify the commission immediately of any material changes affecting the completeness of the answers to any of the questions above.

"I also hereby authorize the Commission to make such enquiries and seek such further information as it thinks appropriate in verifying the information given in this Personal Questionnaire, or in any other documents submitted as part of this application, for the purposes of performing its due diligence and background checks. I understand that the results of these checks may be disclosed to the person who submitted this application."

Date	Signature:
DD MMM YYYY	Name:

Other documents to be attached

- 1. A copy of Work Permit or Permanent Residence Permit (for Non- Bahamian citizens).
- 2. A copy of the relevant pages of the applicant's passport (to include name, date of birth, nationality, signature, expiration date and photograph).
- 3. Applicant's current Police Certificate (not more than three months old) or an affidavit in acceptable form, from both applicant's home country and The Bahamas (if currently residing in The Bahamas) if the Police Certificate is not available.
- 4. Two recent photographs of Applicant, individually signed on the back by the Applicant.
- 5. Copy of any relevant degree, educational courses passed, and professional qualifications.
- 6. An application fee to be submitted with this application as prescribed.

