BENEFICIAL OWNER IDENTIFICATION FORM AND

Privacy Consent Statement

I the undersigned \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (head office:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Court Registry No:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereinafter ("**Candidate**") hereby declare that the following person(s) of the Candidate directly or indirectly hold at least 10% of the shares and/or votes, or otherwise exercise effective control, supervision, or any type of control over the Candidate (hereinafter collectively referred to as "**Beneficial Owners**"). In the case of a fund manager, a person(s)who directly or indirectly holds or otherwise exercises effective control or control of the fund in the managed funds shall also be considered as beneficial Owner(s) above.

**Identification of the Beneficial Owner:**

a) First and last name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Birth first and last name: \_\_\_\_\_\_\_\_\_\_\_\_

Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place and date of birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address or the place of residence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

b) First and last name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Birth first and last name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place and date of birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address or the place of residence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

(c) First and last name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Birth first and last name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place and date of birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address or the place of residence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Declaration on the status of a key public person**

I declare that:

□ none of the Beneficial Owners are considered to be a prominent public person under the Act on Anti-money laundering or a close relative or close relationship with such a person.

□ according to the Act on Anti-money laundering the following are considered to be the public person or a close relative or close relationship with such a person, on the basis of the following position/function:

a) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

b) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

c) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Privacy notice and informed consent statement:**

By signing this statement, I acknowledge the information provided by the Hungarian Private Equity and Venture Capital Association that the data recorded by this statement and previously provided by me or the person acting on my behalf in the membership process will be processed as follows:

Legal basis: fulfilment of legal obligations, consent

Retention period: for 1 year after the termination of the Effective Ownership status during the membership

Purpose of data processing: fulfillment of legal obligation/ Purpose of data management: fulfillment of a legal obligation

Transmission of data:

Personal data: personal data provided in this statement and in the membership process of the organization represented by the data subject

Transmission of data: in case of official notification or request to the competent authority

I undertake to notify the Hungarian Private Equity and Venture Capital Association of any changes in the above data within five working days and to confirm the change in my identification data by document.

Date: ....................................

.......................................................

Name of the candidate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Represents: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In witnesses:

Witness 1: .............................................. Witness 2: ....................................................

 name name

....................................................................... ........................

 address address

....................................................................... ......................

 signature signature