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| MALTA FINANCIAL SERVICES AUTHORITY |
| **Authorisation Forms - Annex** |
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| **Annex AX18: Trusts and Fiduciary Arrangements Questionnaire** |
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| **High Level Guidelines** |
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| 1. **General**   This form, **Annex AX18:** **Trusts and Fiduciary Arrangements Questionnaire** (‘Annex’), shall be duly filled in by Qualifying Shareholders or Other Controllers (‘Qualifying Holder’) who are submitting a Corporate Questionnaire and hold the shares of the Applicant or Authorised Person on (i) trust or (ii) on a fiduciary basis as a mandatary for and on behalf of other persons. This Annex shall be submitted as part of and in conjunction with the relevant Corporate Questionnaire, as indicated therein.  In this respect, the Qualifying Holder shall to the best of its knowledge, provide information, which is truthful, accurate and complete. The Qualifying Holder shall notify the MFSA immediately if the information provided changes in any material respect either prior to or subsequent to authorisation.  The Qualifying Holder shall not tamper with, or modify in any manner, this Annex. Should it transpire that the document was tampered with, or modified in any manner, the Authority shall consider the submission to be invalid. Any potential improvements should be communicated to the MFSA for consideration.  The Authority may at its sole discretion request from the Qualifying Holder further information/ documentation.   1. **Definitions**   Unless otherwise specified, terms used in this Annex shall have the same meaning assigned to them within the respective Corporate Questionnaire.   1. **Instructions**   In order for this Annex to be considered complete, the Qualifying Holder is required to complete all the respective sections under this Annex, as applicable.   1. **Privacy Notice**   The MFSA ensures that any processing of personal data is conducted in accordance with Regulation (EU) 2016/679 (General Data Protection Regulation), the Data Protection Act (Chapter 586 of the Laws of Malta) and any other relevant European Union and national law. For further details, you may refer to the MFSA Privacy Notice available on the MFSA webpage <https://www.mfsa.mt/privacy-notice/>. |

| 1. Qualifying Holder Details | | |
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|  | **Qualifying Holder - Identification Details** | |
|  | Registered Name  *(if not yet Formed, provide proposed name)* | Enter text |
|  | Registered Number (*if applicable)* | Enter text |
|  | LEI Code  (*if applicable)* | Enter text |

| 1. Trusts and Fiduciary Arrangements | |
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|  | **Trusts and Fiduciary Arrangements** |
|  | Provide the respective details of the Qualifying Holder’s holdings of shares of the Applicant or Authorised Person on (i) trust or (ii) on a fiduciary basis as a mandatary for and on behalf of other persons, in the respective sub-sections below, as applicable: |
|  | **Trustees** |
|  | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | * 1. Trust Arrangement | | | | | | | *Identification of Trust* | | | | | | | Name of Trust | Enter text | | | | | | Governing Law | Select country | | | | | | Type of Trust | Select item | If *‘Other’*: Indicate type of Trust | | Enter text | | | *Identification of Named Beneficiary/ies* | | | | | | | If ‘*Discretionary Trust’* or *‘Other’*: Provide details of the class of Beneficiaries | Enter text | | | | | | If ‘*Fixed Interest Trust’* or *‘Other’*: Identify the Beneficiaries: | | | | | | | |  |  |  |  | | --- | --- | --- | --- | | * + 1. Beneficiary | | | | | Title | Select item | | | | Name | Enter text | Surname | Enter text | | Date of Birth | Enter date | | | | Identification Document (‘ID’) Type | Select item | ID Number | Enter text | | ID Expiry Date | Enter date | Country of Issuance | Select country | | Percentage of Beneficial Interest | Enter text | | | |  | | | | | *(Add multiple as applicable)* | | | | | | | | | | | *Identification of Settlors* | | | | | | | |  |  |  |  | | --- | --- | --- | --- | | * + 1. Settlor | | | | | Title | Select item | | | | Name | Enter text | Surname | Enter text | | Date of Birth | Enter date | | | | Identification Document (‘ID’) Type | Select item | ID Number | Enter text | | ID Expiry Date | Enter date | Country of Issuance | Select country | |  | | | | | *(Add multiple as applicable)* | | | | | | | | | | | *Identification of Protector* | | | | | | | Type of Person | Select item | | | | | | If ‘*Natural Person’*: Provide the following details: | | | | | | | Title | Select item | | | | | | Name | Enter text | | Surname | | Enter text | | Date of Birth | Enter date | | | | | | Identification Document (‘ID’) Type | Select item | | ID Number | | Enter text | | ID Expiry Date | Enter date | | Country of Issuance | | Select country | | If ‘*Legal Person’*: Provide the following details: | | | | | | | Registered Name | Enter text | | | | | | Registered Number | Enter text | | Date of Registration | | Enter date | | Name of Registry | Enter text | | Country of Registration | | Select country | | *Trust Deed* | | | | | | | **Attachment | Trust Deed**  Provide a copy of the Trust Deed | | | | | |   *(Add multiple as applicable)* |
|  | **Fiduciary Arrangements** |
|  | |  | | --- | | * 1. Fiduciary Arrangement | | *Identification of Named Beneficiary/ies* | | |  |  |  |  | | --- | --- | --- | --- | | * + 1. Beneficiary – Natural Person | | | | | Title | Select item | | | | Name | Enter text | Surname | Enter text | | Date of Birth | Enter date | | | | Identification Document (‘ID’) Type | Select item | ID Number | Enter text | | ID Expiry Date | Enter date | Country of Issuance | Select country | | Percentage of Beneficial Interest | Enter text | | | |  | | | | | *(Add multiple as applicable)* | | | | | | |  |  |  |  | | --- | --- | --- | --- | | * + 1. Beneficiary – Legal Person | | | | | Registered Name | Enter text | | | | Registered Number | Enter text | Date of Registration | Enter date | | Name of Registry | Enter text | Country of Registration | Select country | | Percentage of Beneficial Interest | Enter text | | | |  | | | | | *(Add multiple as applicable)* | | | | | | *Fiduciary Services Agreement* | | **Attachment | Fiduciary Services Agreement**  Provide a copy of the Fiduciary Services Agreement | |  |   *(Add multiple as applicable)* |