

## CHANGE OF CLIENT DATA FORM (Business Nature / Financial Status/ Investment Experience and Target / Identity Declaration/ Direct Marketing Authorisation) – For Corporate Account

To: Shenwan Hongyuan Securities (H.K.) Limited  
Shenwan Hongyuan Futures (H.K.) Limited

Please complete and submit the Form to us by:

- ✦ Fax: (852) 3525 8451 / Email: [customer.service@swwhyk.com](mailto:customer.service@swwhyk.com)
- ✦ Mail: Level 19, 28 Hennessy Road, Hong Kong (Attn: Customer Service Department)

Name of Account Holder(s) : \_\_\_\_\_

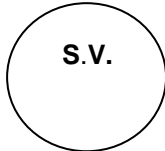
Account No. : \_\_\_\_\_

Note : Please complete the part(s) to be changed only in BLOCK LETTERS and tick  where applicable.

In this form, SWHYS shall mean Shenwan Hongyuan Securities (H.K.) Limited and SWHYF shall mean Shenwan Hongyuan Futures (H.K.) Limited

<b>Business Nature</b>	
Business Nature	
<b>Financial Status</b>	
Latest Annual Net Profit Before Tax	<input type="checkbox"/> Below HK\$200,000 <input type="checkbox"/> HK\$200,001 - HK\$500,000 <input type="checkbox"/> HK\$500,001 - HK\$1,000,000 <input type="checkbox"/> HK\$1,000,001 - HK\$3,000,000 <input type="checkbox"/> HK\$3,000,001 - HK\$8,000,000 <input type="checkbox"/> Above HK\$8,000,000
Net Asset Value	<input type="checkbox"/> Below HK\$1,000,000 <input type="checkbox"/> HK\$1,000,001 - HK\$3,000,000 <input type="checkbox"/> HK\$3,000,001 - HK\$8,000,000 <input type="checkbox"/> HK\$8,000,001 - HK\$40,000,000 <input type="checkbox"/> HK\$40,000,001 - HK\$80,000,000 <input type="checkbox"/> Above HK\$80,000,000
Source(s) of Funds (More than one option can be chosen)	<input type="checkbox"/> Business Owner <input type="checkbox"/> Sales Proceeds <input type="checkbox"/> Investment Income <input type="checkbox"/> Financial Loan <input type="checkbox"/> Others (Please specify: _____)
Source(s) of Wealth (More than one option can be chosen)	<input type="checkbox"/> Business Income <input type="checkbox"/> Investment by Ultimate Beneficial Owner/Partner <input type="checkbox"/> Investment Income <input type="checkbox"/> Sale of Property/Asset <input type="checkbox"/> Intra-group Financing <input type="checkbox"/> Others (Please specify: _____)
<b>Investment Experience / Objectives</b>	
Investment Experience (More than one option can be chosen)	<input type="checkbox"/> Stock: _____ year(s) <input type="checkbox"/> Warrants: _____ year(s) <input type="checkbox"/> Options: _____ year(s) <input type="checkbox"/> Futures: _____ year(s)
Investment Objectives (More than one option can be chosen)	<input type="checkbox"/> Conservative <input type="checkbox"/> Growth <input type="checkbox"/> Aggressive <input type="checkbox"/> Others: _____
<b>Identity Declaration</b>	
Is your company the ultimate beneficiary of the Account? (Note: Ultimate beneficiary of the Account means the person or entity that stands to gain the commercial or economic benefit of a transaction and/or bear its commercial or economic risk.) <input type="checkbox"/> Yes <input type="checkbox"/> No <sup>Note 1</sup> , please state the name of ultimate beneficiary: _____ Relationship: _____ Note 1: Ultimate beneficiary is required to provide identity document, address proof and contact phone number.	
Is your company (via its director(s) or authorised person(s)) ultimately responsible for originating the instructions in relation to transactions in the Account? <input type="checkbox"/> Yes <input type="checkbox"/> No <sup>Note 2</sup> , please state the name of ultimate responsible person: _____ Relationship: _____ Note 2: The person ultimately responsible for originating the instruction is required to provide identity document, address proof and contact phone number.	
Is any of the director, substantial shareholder, beneficial owner or authorised person of your company ("Relevant Person") and/or the Relevant Person's spouse, partner, children, parents or close associates a Politically Exposed Person ("PEP")? (Note: PEP refers to a person entrusted with a prominent public function including a head of state, head of government, senior politician, senior executive of a state-owned corporation and an important political party official, which is more specifically defined under the Anti-Money Laundering and Counter-Terrorist Financing Ordinance (Cap. 615 of the Laws of Hong Kong).) <input type="checkbox"/> No <input type="checkbox"/> Yes, please specific the name of PEP: _____ Relationship: _____ Title of Public Office: _____ Place of Public Office: _____	
Is your company or any of your director, beneficial owner or substantial shareholder a listed company or its director or substantial shareholder? <input type="checkbox"/> No <input type="checkbox"/> Yes, please specific the name of listed company: _____ Place of Listing: _____ Shareholding (if applicable): _____	
Is your company or any of your director, beneficial owner or authorised person are a licensed/registered person with the Securities and Futures Commission of Hong Kong ("SFC") or its employee or director? <input type="checkbox"/> No <input type="checkbox"/> Yes, please specific name of licensed/registered corporation: _____	
Is any of the shareholder, director, beneficial owner or authorised person of your company an employee, director or a relative of any employee/director of SWHYS/SWHYF or its holding company or any of the subsidiaries of the holding company? <input type="checkbox"/> No <input type="checkbox"/> Yes, please specific the name of director/employee: _____ Relationship: _____	

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<b>Identity Declaration (Continued)</b>	
<p><b>(For Margin Account Only)</b> Does any of your group companies have a margin account with SWHYS?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes, please specify the name of Account: _____ Account no.: _____</p>	
<p><b>(For Margin Account Only)</b> Do you control 35% or more of the voting rights of another corporate client of SWHYS?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes, please specify the name of Account: _____ Account no.: _____</p>	
<p><b>(For Margin Account Only)</b> If a natural person either alone or with spouse controls 35% or more of your voting rights, does that natural person either alone or with spirse also control 35% or more of the voting rights of another corporate client of SWHYS?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes, please specify the name of Account: _____ Account no.: _____</p> <p style="text-align: center;">Name of that natural person and spouse (if applicable): _____</p>	
<b>Direct Marketing Authorisation</b>	
<p><input type="checkbox"/> We <b>DO</b> consent for SWHYS , SWHYF and other member company of the Shenwan Hongyuan Group (“Shenwan Hongyuan Group” means Shenwan Hongyuan (H.K.) Limited and its subsidiaries) (correctively, the “Company”) to use our personal data in direct marketing.</p> <p><input type="checkbox"/> We <b>DO NOT</b> consent for the Company to use our personal data in direct marketing</p> <p>The above represents our present choice whether or not to receive direct marketing contact or information. This replaces any choice communicated by us to the SWHYS , SWHYF prior to this Form. Our above choice applies to the direct marketing of the classes of products and services as set out in the Shenwan Hongyuan Group’s policy statement relating to the Personal Data (Privacy) Ordinance (Cap. 486 of the Laws of Hong Kong), provided together with relevant Terms and Conditions. We shall also refer to the policy statement on the kinds of personal data which may be used in direct marketing.</p>	
<p><b>Please update the above change(s) to the records of all the account(s) maintained with the Company under the Name of Client above. We confirm that such change(s) shall also apply to all documents we previously executed without any effect on the legality of such documents. We declare that all information provided in this Form and all supporting and relevant documents submitted by us to your Company in relation to this Form is true, complete, accurate and up-to-date. Your Company is entitled to rely fully on such information for all purposes unless your Company has received actual prior notice in writing of any change from us. We undertake that we shall advise your Company forthwith any changes to the information supplied in this Form.</b></p>	
<p>_____</p> <p>Authorised Signatory and/or company chop</p>	<p>_____</p> <p>Date</p>
<b>For Office Use Only</b>	
<p>If there is change in Business Nature or Identity Declaration, please request salesperson to complete Anti-Money Laundering and Counter Financing of Terrorism Risk Assessment Questionnaire.</p>	
	<p>_____</p> <p>Input by</p> <p>_____</p> <p>Approved by</p>