

Approved
by "APRICOT CAPITAL"
CLOSED JOINT STOCK COMPANY
Single Shareholder
On 02 May 2024 by decision No. 02/05/2024-1
Executive Director Vachik Gevorgyan



APRICOT CAPITAL
CLOSED JOINT STOCK COMPANY

REGULATION

ON CLIENT CLASSIFICATION AND INFORMATION EXCHANGE

YEREVAN 2024

a.

1. GENERAL PROVISIONS

- 1.1. The Regulation on Client classification and information exchange (hereinafter referred to as the Regulation) of APRICOT CAPITAL CJSC (hereinafter referred to as the Company) is developed based on the legislation governing the securities market of the Republic of Armenia, particularly the RA Law "On the Securities Market" (hereinafter referred to as the Law) and the normative legal acts adopted on its basis, the normative legal acts adopted by the Central Bank the Republic of Armenia (hereinafter referred to as the Central Bank) and the Company's Charter.
- 1.2. This Regulation governs the proper process of classifying the Company's Clients, ensuring adherence to the established classification criteria, as well as the exchange of information provided and received within the framework of providing investment and non-core services.
- 1.3. The main concepts used in the Regulation are:
- Investment services.** The services defined by Clause 1 of Article 25 of the Law,
- Non-core services** . Services defined by Article 26 of the Law,
- Client.** A person who utilizes the services provided by the Company,
- Agreement.** A document signed between the Client and the Company within the framework of the provision of investment services, which encompasses the rights and obligations of the parties regarding the conclusion and execution of transactions involving securities and funds of the respective individual,
- A reliable means for transferring information.** Any means that enables the Client to receive and store information addressed to him personally, and that will later enable him to fully utilize and reproduce the stored information.,
- Regulation 4/07.** Normative legal act adopted by the Central Bank of the Republic of Armenia, i.e., Regulation 4/07 "Requirements for the Activities of Persons Providing Investment Services",
- Professional Client.** A Client possessing the requisite experience and knowledge to autonomously make investment decisions and evaluate the associated risks, meeting the criteria outlined in Chapter 3.1 of Regulation 4/07.
- Tariffs.** Fees for brokerage services, which are an integral part of the Agreement and/or any special fees agreed upon with the Client, if applicable.

Services. Services as per the Company's tariffs.

My account module. "My Account" module on the "APRICOT CAPITAL" CJSC website, through which submission and execution of Orders, submission of reports and/or orders submitted by the Client, completed transactions and other information, as well as communication and exchange of messages/information between the Client and the Company are facilitated..

- 1.4. Other concepts used in this Regulation have the meaning defined by the Law and Regulation 4/07.
- 1.5. The exchange of information and the classification of Clients within the framework of the provision of investment and non-core services by the company are governed by these Regulations, unless otherwise specified by other internal regulations of the company defining the conditions for the provision of the given service.

2. CLIENTS CLASSIFICATION

- 2.1. Before providing investment services and entering into a Service Agreement, the Company classifies Clients as either professional or non-professional regarding any or all of the investment services or transactions involving any type or class of securities.
- 2.2. As per Regulation 4/07 standards established by the Company, upon the Client's request, to validate their professional classification, the Company conducts an assessment of the Client's knowledge and experience. This assessment ensures that the Client possesses the necessary skills and understanding to utilize investment services, make informed investment decisions, and comprehend associated risks. For organizations, the evaluation of knowledge and experience applies to the manager, employee, or authorized individual responsible for conducting transactions on behalf of the organization.
- 2.3. To classify Clients, the evaluation of their knowledge and experience is conducted according to the following procedure:
 - 2.3.1. The Client completes the 'Know Your Client' questionnaire as outlined in APPENDIX 1 of these Regulations.
 - 2.3.2. Before classifying the Client as a professional, based on the results of the "Knowledge and Experience Assessment Test" section of the 'Know Your Client'

questionnaire, a Minutes (APPENDIX 2) is prepared and signed by the Customer Service Division of the Company. This Minutes is exclusively for individuals/legal entities applying to become a Professional Client. Each question in the questionnaire offers several answer options with evaluation points ranging from zero to five. If the Client obtains 70% or more points based on the questionnaire results, they are classified as a professional; otherwise, they are classified as a non-professional.

- 2.3.3. Prior to concluding the Agreement with the Client, the Company provides the Client with the document titled “CLIENT CLASSIFICATION NOTICE: PROFESSIONAL OR NON-PROFESSIONAL” as outlined in APPENDIX 3.
- 2.3.4. Before being classified as a Professional Client, the Client confirms in writing that they are informed that, in the case of being classified as a Professional, they may be deprived of certain legal protections that apply to non-professional Clients.
- 2.4. Before entering into an Agreement for the provision of services related to leveraged transactions, including forex transactions, with Professional Clients or classifying the Client as a Professional Client regarding such transactions, the Company shall provide the Client with a notification of the risks associated with these transactions. In this case, Clients must submit a written statement to the Company affirming their awareness of the risks related to leveraged transactions, including forex transactions, in accordance with APPENDIX 7.
- 2.5. Upon the Client's consent, either at the initiative of the Company or at the initiative of the Professional Client, the Company is permitted to treat the Professional Client as non-professional and to apply legal requirements aimed at the protection of non-professional Clients to the Client.
- 2.6. If a Professional Client believes that they are unable to assess and manage the risks arising from investment services or investments, it is the Professional Client's obligation to apply to the Company to be treated as a non-professional Client. This will enable them to benefit from the legal requirements aimed at protecting non-professional Clients.
- 2.7. A person classified as a professional Client by the Company may be reclassified as a non-professional Client according to clauses 2.5 - 2.6 of this Regulation, based on the Agreement signed with the Company. The Agreement explicitly specifies whether the

Client's non-professional classification applies to any investment services, all services, any transaction, or transactions involving any type (class) of securities.

- 2.8. When classifying Clients as professionals in accordance with the requirements of Regulation 4/07, a written request is made regarding their Agreement to be considered a qualified investor. If the Client agrees, the subsequent processes of registering as a qualified investor, deregistration, termination of the professional status presented to the Central Bank of the Republic of Armenia, termination of the Agreement, and changes in other information are carried out in accordance with Regulation 4/07 and the “Criteria for considering qualified investors and registering persons as qualified investors” procedure as per the provisions of regulation 4/06.
- 2.9. Professional Clients are required to notify the Company of any changes that may affect their professional classification. If, based on information provided by the Client or otherwise made available to the Company, the Company determines that the Client no longer meets the criteria for classification as a Professional Client, or if the Company determines that the information provided by the Client was unreliable, the Company shall immediately terminate the Client's professional classification. The Client is informed of this termination within 1 (one) working day.

3. EXCHANGE AND COMMUNICATION OF INFORMATION WITHIN THE PROVISION OF INVESTMENT SERVICES

- 3.1. Within the framework of the Agreement and the provision of Services, all operations and instructions between the Parties, as well as any information (including messages, documents, notices, extracts, reports), submission, transfer, exchange, and any communication related to any requirements arising from the Agreement, regulations, or other issues (collectively referred to as 'Notice') are conducted electronically. This is done through the email address provided by the Client to the Company and/or “APRICOT CAPITAL” CJSC My Account module, and in the agreed language, unless otherwise required by the Agreement/regulations, or by the Company through publication on the official website.
- 3.2. The Client shall be considered duly notified when the notice is sent to the email address

provided by the Client and there is electronic confirmation of its sending, even if there is no confirmation of its reading. In this case, the Client is considered duly notified from the moment the Company sends the notification. Additionally, notifications may be sent through the My Account module, in which case the Client is considered duly notified from the day following the notification, and/or through publication on the Company's official website, in which case the Client is considered duly notified from the next day. Moreover, all notifications within the framework of the provision of services provided for in the Agreement/regulations are sent via the Company's email addresses: onboarding@apricotcapital.am and/or brokerage@apricotcapital.am and/or through the My Account module.

- 3.3. In the event that the Client does not provide an email address and/or the provided email address is invalid or incomplete, communication with the Client is conducted through the My Account module and/or by sending a short message (SMS) notification to the phone number provided by the Client. The Client is informed about the possibility of receiving such information in person at the Company's office, irrespective of whether the Client approached and received the information or not. Additionally, the Client acknowledges that any notification presented within the framework of the Agreement will be considered duly received, even if the Client did not actually receive the notification due to reasons such as an incomplete or disconnected phone number, or unavailability for any other reason, or failure to update data in accordance with the Agreement. This applies in all cases of sending to the wrong phone number due to the failure to update data.
- 3.4. The Client undertakes to inform the Company in writing about any changes in the data included in the requisites of the Agreement after its conclusion and before its termination within 5 (five) working days after making the change.
- 3.5. Agreements between the Client and the Company are concluded in original, by preparing a single document signed by the parties, or in an electronic version. The Agreement can be electronically concluded through the exchange of electronic messages, documents, or data via electronic communication or other means, including electronic data exchange on an electronic platform (website, electronic application, or similar means), by performing a clear action aimed at concluding the Agreement. Agreements in electronic version are considered concluded if signed by the Company

and the Client, who provide each other with scanned versions after signing. Furthermore, the Agreement must be signed only by the person authorized to do so and who has the right to sign and receive/send emails included in the Agreement, along with postal addresses.

3.6. Information required from Clients:

- 3.6.1. Within the framework of providing investment services, the Company requests information from the Client regarding the Client's knowledge and experience regarding the investment service or security provided by it, as outlined in APPENDIX 1. This enables the Company to assess whether the investment service or security meets the Client's requirements. If the Company determines, based on the information provided by the Client, that the investment service or security provided does not meet the Client's requirements, it issues a warning to the Client. This warning is presented to the Client in accordance with APPENDIX 4.
- 3.6.2. In the event of the Company providing advice related to the management of a portfolio of securities or investment in securities, the criteria for requesting information from the Client are regulated in accordance with the Company's regulations governing the provision of these services and Regulation 4/07.
- 3.6.3. In the event that the Client does not provide the information required by point 3.6.1 of this Regulation or provides insufficient information, the Company warns the Client that such behavior does not allow the assessment of whether the investment service or security provided by the Company meets the Client's requirements. This warning is presented to the Client in accordance with APPENDIX 5.
- 3.6.4. In the event that the Client does not provide the information required by point 3.6.2 of this Regulation or provides insufficient information, the Company warns the Client that such behavior does not allow the evaluation or recommendation of investment services and securities that best meet the Client's wishes. This warning is presented to the Client in accordance with APPENDIX 6.
- 3.6.5. After receiving the information specified in clauses 3.6.1 and 3.6.2 of this Regulation, the Company determines whether the Client has the necessary knowledge and experience in the field of investment activity to understand the

risks arising from the given investment service or security. The Company considers that the Professional Client has the necessary knowledge and experience.

- 3.6.6. The Company relies on information provided by the Client, unless it knew or could have known that the information was clearly out of date, inaccurate, or incomplete.
- 3.7. Before concluding a relevant Agreement with the Client regarding any service provided by the Company, the Client familiarizes themselves with all of the Company's regulations and internal legal acts, which are posted on the Company's website. The relevant service provision Agreement with the Client states that the Client is familiar with the regulations, other internal acts, documents, and Tariffs that regulate the provision of the given service developed and approved by the Company.
- 3.8. The provisions for information exchange and communication with the Client within the framework of the provision of investment services are established by this Regulation and other internal legal acts of the Company. Furthermore, in the event of contradictions between this Regulation and other internal legal acts, preference is given to the internal legal act regulating the given relationship.

4. FINAL PROVISIONS

- 4.1. All additions and amendments to these Regulations are approved by the Meeting (unless otherwise provided by the Company's Charter) and enter into force upon approval by the Meeting.

APPENDIX 1

**QUESTIONNAIRE
ON KNOWING AND IDENTIFYING CLIENTS
(in the case of Legal Entities)**

Company Profile:	
1. Name of the company	
2. Organizational legal form	
3. Date/month/year of registration	
4. Country and address of registration	
5. Business address(es)	
6. Registering authority	
7. Registration number	
8. Country of tax residency	
9. Taxpayer identification number	<input type="checkbox"/> State whether having an TIN is not required by law and provide an explanation.
10. Is the company licensed to provide services in the financial market?	<input type="checkbox"/> No <input type="checkbox"/> Yes * If Yes, specify the activity(ies) for which the company is licensed.
11. Is the company regulated?	<input type="checkbox"/> No <input type="checkbox"/> Yes * If Yes, please state the name of the regulatory body. Website of the regulatory body
12. Describe the main activity/operations in which the company is engaged	
13. Are the shares of the company considered freely tradable in the market?	<input type="checkbox"/> No <input type="checkbox"/> Yes * If the shares are listed, please specify the market on which they are listed.

14. Does the company have nominee shareholder(s)?	<input type="checkbox"/> No <input type="checkbox"/> Yes
15. Is the company part of a group? ?	<input type="checkbox"/> No <input type="checkbox"/> Yes * If Yes, please specify the name of the group.
16. Contacts	
Phone number(s)	
Email address(es)	
17. Company website (if available)	
18. Legal Entity Identifier (LEI)	
19. GIIN, if available	

Head of the executive body

First Name, Last Name, Father's Name	
Position	
Registration address	
Residence address	
Passport details	
Are you/have you been a person with political influence or a family member or affiliate of a person with political influence?	<input type="checkbox"/> No <input type="checkbox"/> Yes * If yes, please provide details

Company's share structure

20. Please specify the names of participants who hold 20% or more of the authorized capital.	What is the participation rate in percentage?
1)	
2)	
3)	
4)	
5)	



<p>21. Do any of the named participants have a connection to the US:</p> <p><input type="checkbox"/> Citizenship</p> <p><input type="checkbox"/> Residency/right of residence</p> <p><input type="checkbox"/> GREEN CARD</p> <p><input type="checkbox"/> Born in the United States</p>	<p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>* If yes, please provide the names of the participant(s) with US affiliation.</p> <p>1)</p> <p>2)</p> <p>3)</p> <p>4)</p> <p>5)</p> <p>* If Yes, list the name of the participant(s) with US affiliation.</p>
<p>22. Are there individuals with political influence among the owners who hold 20% or more of the authorized capital of the client?</p>	<p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p>23. Are there any family members or affiliates of individuals with political influence among the owners who hold 20% or more of the authorized capital of the client?</p>	<p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>

Declaration on the beneficial owner

* Individual(s) directly or indirectly owning 20%

1. Beneficial owner	
First Name, Last Name, Father's Name	
Passport details	
Place of birth	
Date of birth (day/month/year)	
Nationality	
Registration address	
Residence address	
Center of vital interest	
Country of Residence	
Country of Tax Residency	
Taxpayer Identification Number * In case of RA persons, PSN	

	<input type="checkbox"/> Indicate if having a Taxpayer Identification Number (TIN) is not required by law and provide any other personal identification number available.
Form of participation	<input type="checkbox"/> Directly <input type="checkbox"/> Indirect
Participation Rate (%)	
Does the person involve participation in the governing bodies of the legal entity?	<input type="checkbox"/> No <input type="checkbox"/> Yes * If Yes, please specify the position
Is or has the person been associated with political influence or a family member or affiliate of someone with political influence?	<input type="checkbox"/> No <input type="checkbox"/> Yes * If Yes, please provide details
2. Beneficial owner	
First Name, Last Name, Father's Name	
Passport details	
Place of birth	
Date of birth (day/month/year)	
Nationality	
Registration address	
Residence address	
Center of vital interest	
Country of Residence	
Country of Tax Residency	
Taxpayer Identification Number * In case of RA persons, PSN	
	<input type="checkbox"/> Indicate if having a Taxpayer Identification Number (TIN) is not required by law and provide any other personal identification number available.
Form of participation	<input type="checkbox"/> Directly <input type="checkbox"/> Indirect
Participation Rate (%)	



Does the person involve participation in the governing bodies of the legal entity?	<input type="checkbox"/> No <input type="checkbox"/> Yes * If Yes, please specify the position
Is or has the person been associated with political influence or a family member or affiliate of someone with political influence?	<input type="checkbox"/> No <input type="checkbox"/> Yes * If Yes, please provide details
3. Beneficial owner	
First Name, Last Name, Father's Name	
Passport details	
Place of birth	
Date of birth (day/month/year)	
Nationality	
Registration address	
Residence address	
Center of vital interest	
Country of Residence	
Country of Tax Residency	
Taxpayer Identification Number * In case of RA persons, PSN	
	<input type="checkbox"/> Indicate if having a Taxpayer Identification Number (TIN) is not required by law and provide any other personal identification number available.
Form of participation	<input type="checkbox"/> Directly <input type="checkbox"/> Indirect
Participation Rate (%)	
Does the person involve participation in the governing bodies of the legal entity?	<input type="checkbox"/> No <input type="checkbox"/> Yes * If Yes, please specify the position

<p>Is or has the person been associated with political influence or a family member or affiliate of someone with political influence?</p>	<p><input type="checkbox"/> No <input type="checkbox"/> Yes * If Yes, please provide details</p>
<p>4. Beneficial owner</p>	
<p>First Name, Last Name, Father's Name</p>	
<p>Passport details</p>	
<p>Place of birth</p>	
<p>Date of birth (day/month/year)</p>	
<p>Nationality</p>	
<p>Registration address</p>	
<p>Residence address</p>	
<p>Center of vital interest</p>	
<p>Country of Residence</p>	
<p>Country of Tax Residency</p>	
<p>Taxpayer Identification Number * In case of RA persons, PSN</p>	
	<p><input type="checkbox"/> Indicate if having a Taxpayer Identification Number (TIN) is not required by law and provide any other personal identification number available.</p>
<p>Form of participation</p>	<p><input type="checkbox"/> Directly <input type="checkbox"/> Indirect</p>
<p>Participation Rate (%)</p>	
<p>Does the person involve participation in the governing bodies of the legal entity?</p>	<p><input type="checkbox"/> No <input type="checkbox"/> Yes * If Yes, please specify the position</p>
<p>Is or has the person been associated with political influence or a family member or affiliate of someone with political influence?</p>	<p><input type="checkbox"/> No <input type="checkbox"/> Yes * If Yes, please provide details</p>
<p>5. Beneficial owner</p>	

First Name, Last Name, Father's Name	
Passport details	
Place of birth	
Date of birth (day/month/year)	
Nationality	
Registration address	
Residence address	
Center of vital interest	
Country of Residence	
Country of Tax Residency	
Taxpayer Identification Number * In case of RA persons, PSN	
	<input type="checkbox"/> Indicate if having a Taxpayer Identification Number (TIN) is not required by law and provide any other personal identification number available.
Form of participation	<input type="checkbox"/> Directly <input type="checkbox"/> Indirect
Participation Rate (%)	
Does the person involve participation in the governing bodies of the legal entity?	<input type="checkbox"/> No <input type="checkbox"/> Yes * If Yes, please specify the position
Is or has the person been associated with political influence or a family member or affiliate of someone with political influence?	<input type="checkbox"/> No <input type="checkbox"/> Yes * If Yes, please provide details
<input type="checkbox"/> In the event of a change of beneficial owner or the appearance of a new beneficial owner during the course of the business relationship, I undertake to inform APRICOT CAPITAL CJSC.	

Description of the Business Relationship

24. The purpose of the business relationship with APRICOT CAPITAL CJSC	* Please describe the main types of transactions you intend to conduct with your opening account.
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25. Expected account replenishment amount in AMD:	
26. Country from which the funds will be transferred	
27. Source of company funds:	* Please attach all supporting documents related to the source of the Company's funds.
28. What financial instruments do you intend to trade with the opening account?	
29. The type(s) of account(s) the Company intends to open	<input type="checkbox"/> Account for Own Funds <input type="checkbox"/> Account for Client Funds

Center for the Vital Interests of the Company

* This section is to be completed only by clients who are not residents of the Republic of Armenia.

<p>The center of vital interests of the company is</p> <p>_____</p> <p>_____,</p> <p style="text-align: center;">* specify the country</p> <p>as</p> <p><input type="checkbox"/> The company is registered there,</p> <p><input type="checkbox"/> The company is a member of a holding group whose parent company is registered there,</p> <p><input type="checkbox"/> The company is tax resident there,</p> <p><input type="checkbox"/> Other</p> <p>_____</p>	
<p><input type="checkbox"/> In the event of a change in the center of vital interests during the business relations undertake to inform APRICOT CAPITAL CJSC.</p>	
<p>30. Do you wish to be classified as a professional Client?</p>	<p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>If No, please answer questions 31-35</p> <p>If Yes, please answer questions 36-49</p>

Client Knowledge and Experience Assessment Questionnaire

* This questionnaire must be completed by the Company's authorized signatory.

** This part can be omitted by companies that are licensed to provide services in the financial market.

31. Do you possess sufficient knowledge and experience to assess all the risks involved in investing?

- Yes
 Yes, but I need some advice
 No, I need professional advice.

32. Your education

- Higher degree in economics
 Other higher degree
 Secondary education
 I don't have any

33. Which investment services have you dealt with in any way (you can choose several options)

- Brokerage services
 Other investment services
 Advice on investments in securities
 Not related

34. Which securities have you dealt with in any way (you can choose several options)

- Derivative
 Equity
 Debt
 Other
 Not related

35. The nature of your securities transactions (you can choose several options)

- Buy/sell
 Other
 No transactions have been completed

36. Your professional work experience related to the provision of investment services in the financial market

- I have no such experience
 Up to 2 years
 2 years or more

37. In which countries' financial markets do you have experience investing (you can choose several options)

- CIS countries
 Europe
 USA
 Other

38. Your education

- Higher degree in economics
 Other higher degree
 Secondary education
 I don't have any

39. Do you have a qualification in a finance/investment related field (you can choose more than one)

- ACCA, CFA, CFP, ChFC, CIMA, FRM, or other relevant qualification certificate
- Qualification or certificate issued by the Central Bank of RA
- I don't have any

40. Which investment services have you dealt with in any way (you can choose more than one)

- Brokerage services
- Dealer transactions
- Other investment services
- Advice on investments in securities

41. Which securities have you dealt with in any way (you can choose several options)

- Derivative
- Equity
- Debt
- Other

42. The nature of your securities transactions (you can choose more than one option)

- Repo:
- Buy/sell
- Other

43. Has the book value of the company's assets exceeded AMD 500 million as of the end of the previous year?

- Yes
- No

44. Did the company's annual revenue for the previous year exceed AMD 1 billion?

- Yes
- No

45. Does the total capital of the company as of the end of the previous month (if not known, as of the month before the last month) exceed AMD 50 million?

- Yes
- No

46. Which position do you consider to be the riskiest, leading to capital loss when trading options?

- Call option purchase
- Put option purchase
- Selling a call option
- Selling a put option

47. Your investment goal when trading options:

- Part of a long/short strategy
- Capital gain
- Speculation
- Other

48. What is considered the opposite position of a short sale?

- Investments in gold and silver
- Cryptocurrency purchase
- Buying stocks with a long position
- Long sale

49. Which of the following options is not a reason for an investor to short sale?

- Hedging against a possible decline in the price of an asset owned by the investor
- Pair trading
- Earn income from share price appreciation
- Profiting from low stock prices

I hereby confirm that the funds from transactions conducted in association with "APRICOT CAPITAL" CJSC do not originate from money laundering or terrorism financing. I am committed to providing supporting documentation to "APRICOT CAPITAL" CJSC upon request.

Additionally, I acknowledge that I am acquainted with the internal regulations of "APRICOT CAPITAL" CJSC concerning the prevention of money laundering and terrorist financing, and I agree to comply with them.

I certify that, besides the provided information and/or documents, I do not possess any additional information and/or documents that I deem necessary for establishing a business relationship. I acknowledge full responsibility for the availability and non-provision of such information.

Furthermore, I confirm that the information contained in the attached documents to this application is accurate. I am fully aware that any misrepresentation or omission of essential facts may result in the application of measures of responsibility as defined by RA legislation.

I hereby consent to APRICOT CAPITAL CJSC processing the provided data for the purpose of conducting necessary checks as part of the due diligence procedure. This includes (but is not limited to) verifying the validity of passports, conducting checks for inclusion on sanctions lists and other watch lists, verifying the accuracy of details provided, and ensuring compliance with applicable laws and regulations.

Head of executive body: _____

Full name:

(Signature/Seal)

(day/month/year)



REGULATION
ON CLIENT CLASSIFICATION AND
INFORMATION EXCHANGE

Edition: 2
Classification: PB
Date: 02 May 2024

QUESTIONNAIRE
ON KNOWING AND IDENTIFYING CLIENTS
(in the case of individuals)

Client Profile	
1. First Name, Last Name, Father's Name	
2. Date of Birth (DD/MM/YYYY)	
3. List all countries of which you are a citizen	
4. Do you hold a residence permit in any country other than those listed above?	<input type="checkbox"/> No <input type="checkbox"/> Yes
	* If Yes, please specify the country(s)
5. Country of residence	
6. Country of tax residency	
7. Taxpayer registration number	
	<input type="checkbox"/> Indicate if having an TIN is not required by law
8. Other Personal Identification Number (if applicable) * PSN in the case of RA persons	
9. Registration address	
10. Residential address	
11. Specify type of employment	<input type="checkbox"/> I am Employed (including self-employed) <input type="checkbox"/> I am not Employed
	* If you are employed, please indicate the company and your position
	* If you are self-employed, please specify the industry
12. Are you, or have you ever been, a person with political influence or a family member or affiliate of someone with political influence?	<input type="checkbox"/> No <input type="checkbox"/> Yes
	* If Yes, please provide details
13. Contact information	
Phone number(s)	



Email address(es)	
14. Do you have any affiliation with the US?	<input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, specify the applicable items: <input type="checkbox"/> Citizenship <input type="checkbox"/> Residency/right of residence <input type="checkbox"/> GREEN CARD <input type="checkbox"/> I was born in the USA
15. Marital status	<input type="checkbox"/> Married <input type="checkbox"/> Unmarried * If married, please list spouse's US affiliation (if applicable): <input type="checkbox"/> Citizenship <input type="checkbox"/> Residency/right of residence <input type="checkbox"/> GREEN CARD <input type="checkbox"/> He/She was born in the USA
Declaration on the beneficial owner * Please check the box below if you are the beneficial owner of a business relationship with APRICOT CAPITAL CJSC	
<input type="checkbox"/> I confirm that I am the sole beneficiary of the account opened at APRICOT CAPITAL CJSC and that no other beneficiary exists in this business relationship	
<input type="checkbox"/> In the course of the business relationship, in the event of a change of beneficial owner or the appearance of a new beneficial owner, I undertake to inform APRICOT CAPITAL CJSC.	

Description of the Business Relationship

16. The purpose of the business relationship with APRICOT CAPITAL CJSC	* Please describe the main types of transactions you intend to conduct with your opening account.
17. Expected account replenishment amount in AMD:	
18. Country from which the funds will be transferred	
19. What types of financial instruments do you plan to trade with the newly opened account?	



20. The source of your funds	<input type="checkbox"/> Salary <input type="checkbox"/> Interest income <input type="checkbox"/> Dividends, <small>* if you selected dividends, please indicate which company you are receiving dividends from</small> <input type="checkbox"/> Income from securities trading <input type="checkbox"/> Other (specify) <small>* Please attach all supporting documents relating to the source of your funds</small>
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Center of Vital Interest

* This section is filled only by those Clients who are not residents of the Republic of Armenia

The center of my vital interests is _____, <small>* specify the country</small>	
as	
<input type="checkbox"/> I live there <input type="checkbox"/> My family lives there <input type="checkbox"/> My residence is located there <input type="checkbox"/> My main personal property is located there <input type="checkbox"/> My main family property is located there <input type="checkbox"/> It is the main place of my economic activity <input type="checkbox"/> It is the main place of my professional activity <input type="checkbox"/> Other _____:	
<input type="checkbox"/> In the event of a change in the center of vital interests during the business relationship, I commit to informing APRICOT CAPITAL CJSC	
21. Want to be classified as a professional Client?	<input type="checkbox"/> No <input type="checkbox"/> Yes If No, please answer questions 21-25 If Yes, please answer questions 26-39

Client Knowledge and Experience Assessment Questionnaire

<p>22. Do you possess sufficient knowledge and experience to assess all the risks involved in investing?</p> <input type="checkbox"/> Yes <input type="checkbox"/> Yes, but I need some advice <input type="checkbox"/> No, I need professional advice.
--

23. Your education

- Higher degree in economics
- Other higher degree
- Secondary education
- I don't have any

24. Which investment services have you dealt with in any way (you can choose several options)

- Brokerage services
- Other investment services
- Advice on investments in securities
- Not related

25. Which securities have you dealt with in any way (you can choose several options)

- Derivative
- Equity
- Debt
- Other
- Not related

26. The nature of your securities transactions (you can choose several options)

- Buy/sell
- Other
- No transactions have been completed

27. The number of securities transactions you have made during the last four quarters (quarterly average)

- I have not made transactions
- Up to 10 transactions
- 10 or more transactions

28. The average volume per transaction you have made over the last four quarters

- I have not made transactions
- Up to 1 million AMD
- 1 million AMD and more

29. What is the current value of your portfolio?

- I don't have any securities
- Up to 100 million AMD
- 100 million AMD and more

30. Your professional work experience related to the provision of investment services in the financial market

- I have no such experience
- Up to 2 years
- 2 years or more

31. In which countries' financial markets do you have experience investing (you can choose several options)

- CIS countries
- Europe
- USA

Other

32. Your education

- Higher degree in economics
 Other higher degree
 Secondary education
 I don't have any

33. Do you have a qualification in a finance/investment related field (you can choose more than one)

- ACCA, CFA, CFP, ChFC, CIMA, FRM, or other relevant qualification certificate
 Qualification or certificate issued by the Central Bank of RA
 I don't have any

34. Which investment services have you dealt with in any way (you can choose more than one)

- Brokerage services
 Other investment services
 Advice on investments in securities

35. Which securities have you dealt with in any way (you can choose several options)

- Derivative
 Equity
 Debt
 Other

36. The nature of your securities transactions (you can choose more than one option)

- Buy/sell
 Other

37. Which position do you consider to be the riskiest, leading to capital loss when trading options?

- Call option purchase
 Put option purchase
 Selling a call option
 Selling a put option

38. Your investment goal when trading options:

- Part of a long/short strategy
 Capital gain
 Speculation
 Other

39. What is considered the opposite position of a short sale?

- Investments in gold and silver
 Cryptocurrency purchase
 Buying stocks with a long position
 Long sale

40. Which of the following options is not a reason for an investor to short sale?

- Hedging against a possible decline in the price of an asset owned by the investor
- Pair trading
- Earn income from share price appreciation
- Profiting from low stock prices

I hereby confirm that the funds from transactions conducted in association with "APRICOT CAPITAL" CJSC do not originate from money laundering or terrorism financing. I am committed to providing supporting documentation to "APRICOT CAPITAL" CJSC upon request.

Additionally, I acknowledge that I am acquainted with the internal regulations of "APRICOT CAPITAL" CJSC concerning the prevention of money laundering and terrorist financing, and I agree to comply with them.

I certify that, besides the provided information and/or documents, I do not possess any additional information and/or documents that I deem necessary for establishing a business relationship. I acknowledge full responsibility for the availability and non-provision of such information.

Furthermore, I confirm that the information contained in the attached documents to this application is accurate. I am fully aware that any misrepresentation or omission of essential facts may result in the application of measures of responsibility as defined by RA legislation.

I hereby consent to APRICOT CAPITAL CJSC processing the provided data for the purpose of conducting necessary checks as part of the due diligence procedure. This includes (but is not limited to) verifying the validity of passports, conducting checks for inclusion on sanctions lists and other watch lists, verifying the accuracy of details provided, and ensuring compliance with applicable laws and regulations.

Client

Full name

_____ day/month/year

(Signature)

APPENDIX 2

MINUTES

Based on the results of completing the "Client's Knowledge and Experience Assessment Questionnaire", the Client

(Name, Surname, Fater's name and passport data (if a legal entity, then the name of the organization and Name, Surname, Father's name and passport data of the authorized person))

has attained _____ points:

Executive Director

Full name

Signature

Seal

_____ (day/month/year)

APPENDIX 3

CLIENT CLASSIFICATION (PROFESSIONAL OR NON-PROFESSIONAL)

Pursuant to the requirements of Regulation 4/07 "Requirements for the Activities of Entities Providing Investment Services" approved by the Resolution No. 113-N of the Central Bank of RA dated 8/04/2008, "APRICOT CAPITAL" CJSC as an entity providing investment services in the securities market classifies

(Name and Surname of the Individual Client/Name of the Legal Entity)

(any or all of the investment services specified in the Law of the Republic of Armenia "On the Securities Market," or any transaction or transactions with any type (class) of securities are indicated)

as a

- Professional
- Non-professional

Basis of Classification`

- Regulation 4/07 "Requirements for the Activity of Persons Providing Investment Services," as approved by the Council of the Central Bank of Armenia through Resolution No. 113 dated 04/08/2008
- Results of the client's "Knowledge and Experience Assessment" test

Additional comments (if available))

"APRICOT CAPITAL" CJSC

Executive Director Vachik Gevorgyan

(Signature) Seal

WARNING

Based on the requirements stipulated in Regulation 4/07 "Requirements for the Activities of Persons Providing Investment Services," approved by the Council of the Central Bank of Armenia through Resolution No. 113 dated 04/08/2008, and the requirements of RA Law "On Securities Market", "APRICOT CAPITAL" CJSC, as a person providing investment services in the securities market, warns

(Client's name, surname, father's name /name)

that

(The investment service and/or the name of the securities specified in the RA Law "On the Securities Market" are indicated)

does not meet Client's requirements based on the information provided by Client to the Company.

This warning consists of 2 copies, one of which is provided to the Client, and the other remains with the

Company.

"APRICOT CAPITAL" CJSC

Executive Director

(signature) Seal

(Client's name, surname, father's name / name)

(signature)

(day/month/year)

APPENDIX 5

WARNING

Based on the requirements stipulated in Regulation 4/07 "Requirements for the Activities of Persons Providing Investment Services," approved by the Council of the Central Bank of Armenia through Resolution No. 113 dated 04/08/2008 and the requirements of RA Law "On Securities Market", "APRICOT CAPITAL" CJSC, as a person providing investment services in the securities market, warns

(Client's name, surname, father's name /name)

that the information provided by Client does not enable an assessment of whether the

(the investment service and/or the name of the securities specified in the RA Law "On the Securities Market" are indicated)

meets their requirements based on the information provided by the client to the company.

This warning consists of 2 copies, one of which is provided to the Client, and the other remains with the
Company.

"APRICOT CAPITAL" CJSC
Executive Director

(signature) Seal

(Client's name, surname, father's name / name)

(signature) Seal

(day/month/year)

APPENDIX 5**WARNING**

Based on the requirements stipulated in Regulation 4/07 "Requirements for the Activities of Persons Providing Investment Services," approved by the Council of the Central Bank of Armenia through Resolution No. 113 dated 04/08/2008 and the requirements of RA Law "On Securities Market", "APRICOT CAPITAL" CJSC, as a person providing investment services in the securities market, warns

(Client's name, surname, father's name /name)

that the information provided by the client does not enable it to offer or recommend investment services and securities that best meet the client's preferences, based solely on the information provided to the company.

This warning consists of 2 copies, one of which is provided to the Client, and the other remains with the Company.

"APRICOT CAPITAL" CJSC
Executive Director

(signature) Seal

(Client's full name)

(signature) Seal

(day/month/year)

STATEMENT

For Acknowledgment of Risk for Leveraged Trading, Including Forex Trading

Name and Legal Structure (First Name, Last Name, Middle Name)

acknowledge that leveraged transactions, including forex transactions, carry high risks, and engaging in these transactions is appropriate only for clients prepared to potentially lose their initial security deposit (margin). I am aware that such transactions are subject to substantial price fluctuations, which may lead to substantial gains or losses.

(signature)

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(day/month/year)