T Declaration for trusts

Account/securities account number:		Contracting partner:	
Category (where appropriate	<u> </u>		
of due diligence (CDB 20), th	ne undersigned hereby declare	cs' code of conduct with regard to the exercise (s) that he/she/they is a/are trustee(s) or g company of a trust known as:	
In such capacity, he/she/the to the bank:	y provide(s) to the best of his	her/their knowledge the following information	
1. Information pertaining to	the trust (for a) and b) please	tick the applicable boxes):	
a) Type of trust:	b) !	Revocability:	
☐ Discretionary trust or		Revocable trust or	
☐ Non-discretionary trust		rrevocable trust	
2. Information pertaining to entity/-ies):	the (ultimate economic, not fi	duciary) settlor of the trust (individual[s] or	
First name(s), last name(s)/en	ntity:		
Actual address of domicile/r	egistered office (incl. country):		
Date of birth:	Nationality:	Date of death (if deceased):	
In case of a revocable trust:	does the settlor have the right	to revoke the trust?	
☐ Yes	□ No		

- (-// :=== ::=::::=(5/)/entity:			
	,, charge			
Actual address of domicile/registered office (incl. country):				
Date of birth:	Nationality:	Date of death (if deceased):		
4. Information				
a) pertaining to the bene	ficiary/-ies at the time of the signing	of this form:		
First name(s), last name(s))/entity:			
Actual address of domicil	le/registered office (incl. country):			
Date of birth:	Nation	ality:		
Has/Have the beneficiary	//-ies an actual right to claim a distrib	oution?		
	□ No			
□ Yes				

5. Information pertaining to the protector(s) as well as trust (in case of revocable trusts) or to appoint the	
a) Information pertaining to the protector(s)	
First name(s), last name(s)/entity:	
Actual address of domicile/registered office (incl. cour	ntry):
Date of birth:	Nationality:
In case of a revocable trust: does the protector have the second of the protector have the second of the second of the protector have the second of the sec	ne right to revoke the trust?
b) Information pertaining to (a) further person(s)	
First name(s), last name(s)/entity:	
Actual address of domicile/registered office (incl. cour	ntry):
Date of birth:	Nationality:
In case of a revocable trust: Has/have this/these furth ☐ Yes	ner person(s) the right to revoke the trust?

underlying company.	oen a bank account for the trust above or its
The contracting partner(s) hereby undertake(s) to auto	omatically inform the bank of any changes.
Date:	Signature(s):

It is a criminal offence to deliberately provide false information on this form (Article 251 of the Swiss Criminal Code, document forgery).