

About this Application

This is an International Client Application Form. Please read it carefully, as you select products and services, please advise the best way to communicate with us, and agree to certain provisions that will govern our relationship. Once accepted, this application and all accompanying or supplemental documents form the entire agreement between us for this account.

Unless otherwise indicated in this application, the words "you," "your," "yourself," and "yours" mean the applicant(s). The words "we," "us," and "our" mean Eastern Quay Asset Management, 20/F, North Star Times Tower, No. 8, Beicheng East Road, Chaoyang District, Beijing, China and our branches, subsidiaries, and affiliates.

Getting Started

Please complete and sign this application and forward along with any required supplemental forms identified through this application process.

In order to complete this application, you will need the following information:

- Identification information, such as a driver's licence, passport, or another type of government-issued identification
- Social Security Number
- W-8BEN Form
- Information about your annual income, debt, expenses, and net worth
- Back-up contact information
- The Items with **RED [*]** are required fields. Please make sure you provide the information for those items.

The above information helps us comply with various securities regulations and rules and the USA PATRIOT Act, a Federal law that requires all securities firms to obtain, verify, and record information that identifies each applicant. The information also helps us more fully understand your investment profile and identify what types of investments or strategies may be suitable for you. Please note: if we cannot verify the information you provide, we may be required to restrict or deny your account.

Please remember to notify us if you experience a significant life change, such as the birth of a child, marriage, divorce, death of a spouse, loss of a job, change in financial situation, etc.

1 Your Account

→ *Account Type

Do you have other accounts with us? Yes | No

Initial Transaction Type : Buy Sell ACAT

Details :

Amount :

2 Your Account Information

→ *Primary Applicant

Title: Mr. Ms. Mrs. Dr. Other: _____

Suffix : Sr. Jr. Other:

First Name

Middle Name

Last Name

→ *Address and Contact Information

Apt/Suite No.

Bldg.

Street

City

State

Postal Code (Zip)

Country

Home Phone

Mobile Phone

Work Phone

Email

Please check if you have been at your current address for less than one year.

→ *Mailing Address If Different From Above

Apt/Suite No.

Bldg.

Street

City

State

Postal Code (Zip)

Country

→ *Civil Status and Dependents

Single
 Married
 Domestic Partner
 Divorced
 Widowed

No. of Dependents _____

→ *Employment Status

Employed
 Self-Employed
 Not Employed
 Retired
 Student
 Other : _____

Job Title	Occupation
Employer	Years with this Employer

→ *Business Address

Apt/Suite No.	Bldg.	Street
City	State	Postal Code (Zip) Country

→ *Industry and Other Affiliations

Are you, your spouse, or any other immediate family members, including parents, in-laws, siblings and dependent(s):

<input type="checkbox"/> Yes <input type="checkbox"/> No	Employed by or associated with the securities industry (for example, a sole proprietor, partner, officer, director, branch manager, registered representative or other associated person of a broker-dealer firm) or a financial services regulator? If yes, please specify entity below. If this entity requires its approval for you to open this account, please provide a copy of the required authorization letter (with this Application). <input type="checkbox"/> Broker-Dealer or Municipal Securities Dealer <input type="checkbox"/> FinRa or other Self Regulatory Organization* <input type="checkbox"/> Investment Adviser <input type="checkbox"/> State or Federal Securities Regulator (*Including a national securities exchange, registered securities association, registered clearing agency or the Municipal Securities Rulemaking Board.) Name of entity(ies) : _____
<input type="checkbox"/> Yes <input type="checkbox"/> No	An officer, director or 10% (or more) shareholder in a publicly-owned company? Name of company and symbol : _____
<input type="checkbox"/> Yes <input type="checkbox"/> No	A senior military, governmental or political official in a non-US country? Name of country : _____

→ *Financial Investment Experience

Please provide the following information below in order for us to fully understand your investment experience. We are aware that the information you provide may change over time as you work with us. Please check the boxes below to best describe your investment experience to date.

Investment	Years experience			Transactions per year (excluding automatic investments)		
<input type="checkbox"/> Mutual Funds/ Exchange Traded Funds	<input type="checkbox"/> 0	<input type="checkbox"/> 1-5 yrs.	<input type="checkbox"/> Over 5 yrs.	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-15	<input type="checkbox"/> Over 15
<input type="checkbox"/> Individual Stocks	<input type="checkbox"/> 0	<input type="checkbox"/> 1-5 yrs.	<input type="checkbox"/> Over 5 yrs.	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-15	<input type="checkbox"/> Over 15
<input type="checkbox"/> Bonds	<input type="checkbox"/> 0	<input type="checkbox"/> 1-5 yrs.	<input type="checkbox"/> Over 5 yrs.	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-15	<input type="checkbox"/> Over 15
<input type="checkbox"/> Options	<input type="checkbox"/> 0	<input type="checkbox"/> 1-5 yrs.	<input type="checkbox"/> Over 5 yrs.	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-15	<input type="checkbox"/> Over 15
<input type="checkbox"/> Securities Futures	<input type="checkbox"/> 0	<input type="checkbox"/> 1-5 yrs.	<input type="checkbox"/> Over 5 yrs.	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-15	<input type="checkbox"/> Over 15
<input type="checkbox"/> Annuities	<input type="checkbox"/> 0	<input type="checkbox"/> 1-5 yrs.	<input type="checkbox"/> Over 5 yrs.	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-15	<input type="checkbox"/> Over 15
<input type="checkbox"/> Alternative ¹	<input type="checkbox"/> 0	<input type="checkbox"/> 1-5 yrs.	<input type="checkbox"/> Over 5 yrs.	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-15	<input type="checkbox"/> Over 15
<input type="checkbox"/> Margin	<input type="checkbox"/> 0	<input type="checkbox"/> 1-5 yrs.	<input type="checkbox"/> Over 5 yrs.	<input type="checkbox"/> 0-5	<input type="checkbox"/> 6-15	<input type="checkbox"/> Over 15

¹May include structured products, hedge funds, etc.



→ *Financial Situation and Needs, Liquidity Considerations, And Tax Status (please tell us your estimates)

ANNUAL INCOME² (from all sources)	NET WORTH³ (excluding your residence)	LIQUID NET WORTH⁴	TAX RATE (highest marginal)
<input type="checkbox"/> \$25,000 and under <input type="checkbox"/> \$25,001-50,000 <input type="checkbox"/> \$50,001-100,000 <input type="checkbox"/> \$100,001-250,000 <input type="checkbox"/> \$250,001-500,000 <input type="checkbox"/> Over \$500,000	<input type="checkbox"/> \$25,000 and under <input type="checkbox"/> \$25,001-50,000 <input type="checkbox"/> \$50,001-100,000 <input type="checkbox"/> \$200,001-500,000 <input type="checkbox"/> \$500,001-1,000,000 <input type="checkbox"/> \$1,000,000-3,000,000 <input type="checkbox"/> Over \$3,000,000	<input type="checkbox"/> \$25,000 and under <input type="checkbox"/> \$25,001-50,000 <input type="checkbox"/> \$50,001-100,000 <input type="checkbox"/> \$200,001-500,000 <input type="checkbox"/> \$500,001-1,000,000 <input type="checkbox"/> \$1,000,000-3,000,000 <input type="checkbox"/> Over \$3,000,000	<input type="checkbox"/> 0-15% <input type="checkbox"/> 16-25% <input type="checkbox"/> 26-30% <input type="checkbox"/> 31-35% <input type="checkbox"/> Over 35%
ANNUAL EXPENSES⁵ (recurring)	SPECIAL EXPENSES⁶ (future, non-recurring)	LIQUIDITY NEEDS	
<input type="checkbox"/> \$50,000 and under <input type="checkbox"/> \$100,001-250,000 <input type="checkbox"/> \$250,001-500,000 <input type="checkbox"/> Over \$500,000	<input type="checkbox"/> \$50,000 and under <input type="checkbox"/> \$100,001-250,000 <input type="checkbox"/> \$250,001-500,000 <input type="checkbox"/> Over \$500,000 Timeframe for special expenses: <input type="checkbox"/> Within 2 years <input type="checkbox"/> 3-5 years <input type="checkbox"/> 6-10 years	The ability to quickly and easily convert to cash all or a portion of the investments in this account without experiencing significant loss in value from, for example, the lack of a ready market, or incurring significant costs or penalties is (check one) <input type="checkbox"/> Very important <input type="checkbox"/> Important <input type="checkbox"/> Somewhat important <input type="checkbox"/> Does not matter	

2. Annual income includes income from sources such as employment, alimony, social security, investment income, etc.
3. Net worth is the value of your assets minus your liabilities. For purposes of this application, asset include stocks, bonds, mutual funds, other securities, bank accounts, and other personal property. Do not include your primary residence among your assets. For liabilities, include any outstanding loans, credit card balances, taxes, etc. Do not include your mortgage.
4. Liquid net worth is your net worth minus assets that cannot be converted quickly and easily into cash, such as real estate, business equity, personal property and automobiles, expected inheritances, assets earmarked for other purposes, and investments or accounts subject to substantial penalties if they were sold or if assets were withdrawn from them.
5. Annual expenses might include mortgage payments, rent, long-term debts, utilities, alimony or child support payments, etc.
6. Special expenses might include a home purchase, remodelling a home, a car purchase, education, medical expenses, etc.

→ *Investment Risk Tolerance

Different investment products and strategies will involve different levels of risk. When choosing different products and strategies you must understand that higher expected returns will involve different degrees of risk and therefore it may cause you to lose the majority of your investment. Investments should be chosen based on your objectives, timeframe, and tolerance for market fluctuations.

Please select the degree of risk you are willing to take with the assets in this account.

- Conservative. I want to preserve my initial principal in this account, with minimal risk, even if that means this account does not generate significant income or returns and may not keep pace with inflation
- Moderately Conservative. I am willing to accept low risk to my initial principal, including low volatility, to seek a modest level of portfolio returns.
- Moderate. I am willing to accept some risk to my initial principal and tolerate some volatility to seek higher returns, and understand I could lose a portion of the money invested.
- Moderately Aggressive. I am willing to accept high risk to my initial principal, including high volatility, to seek high returns over time, and understand I could lose a substantial amount of the money invested.
- Significant Risk. I am willing to accept maximum risk to my initial principal to aggressively seek maximum returns, and understand I could lose most, or all, of the money invested.

→ Decision-Making (check all that apply)

- I consult with my broker, investment adviser, CPA, or other financial professional.
- I generally make my own decisions.
- I discuss investment decisions with family and/or friends.



→ *Other Investments

Please provide us with additional information about your other investments to help us more fully understand your investment profile and identify what types of investments or strategies may be suitable for you.

Investment Type / Description	Firm Holding Investment	Amount (US\$)
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$

(Use extra sheet as needed)

3 How You Intend to Use This Account

Please answer the following questions regarding your investment targets and investment period of time in order for us to determine which investment products and strategies are suitable for you.

→ *Investment Objectives and Investment Time Horizon

The investments in this account will be (check one):	I plan to use this account for the following (check all that apply):
<input type="checkbox"/> Less than 1/3 of my financial portfolio <input type="checkbox"/> Roughly 1/3 to 2/3 of my financial portfolio <input type="checkbox"/> More than 2/3 of my financial portfolio	<input type="checkbox"/> Generate income for current or future expenses <input type="checkbox"/> Partially fund my retirement <input type="checkbox"/> Wholly fund my retirement <input type="checkbox"/> Steadily accumulate wealth over the long term <input type="checkbox"/> Preserve wealth and pass it on to my heirs <input type="checkbox"/> Pay for education <input type="checkbox"/> Pay for a house <input type="checkbox"/> Market speculation <input type="checkbox"/> Other : _____

The expected period of time you plan to invest to achieve your financial goal(s):

- Under 1 year
- 1-2 years
- 3-5 years
- 6-10 years
- 11-20 years
- Over 20 years

→ Investment Objectives and Investment Time Horizon

In order for us to fully understand your investment profile and type of investment and strategies that are suitable for you, please provide any additional information that has not been requested above, so that it will help us more fully understand your investment profile and identify what types of investments or strategies may be suitable for you.

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4 Tell Us How You Will Fund This Account

*Please tell us how you are funding this account (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Income | <input type="checkbox"/> Insurance payout |
| <input type="checkbox"/> Pension or retirement savings | <input type="checkbox"/> Inheritance |
| <input type="checkbox"/> Funds from another account | <input type="checkbox"/> Social Security benefits |
| <input type="checkbox"/> Gift Sale of business or property | <input type="checkbox"/> Home Equity Line of Credit/Reverse Mortgage |
| | <input type="checkbox"/> Other : _____ |

5 Tell Us How You Want To Work With Us

→ Account Features

Please note : You may change your account features and options at any time, with advance written notice to us.

Borrowing Money to Buy Securities (Buying "On Margin") Please Read Carefully

You will have a "cash account," unless you choose to have a "margin loan account" (customarily known as a "margin account"). To help you decide whether a margin loan account is right for you, please read this information, the Margin Loan Agreement and the Margin Disclosure Statement.

You may apply for a margin account after a period of one (1) year of trading with the firm.

In a cash account, you pay for your securities in full by the settlement date of the purchase (generally three business days from the purchase). In a margin loan account, we may lend you a portion of the purchase price. This is called buying securities "on margin." For example, when you buy equity securities (such as common stock) on margin, you typically must deposit at least 50% of the purchase price, and we would loan you the balance. You are liable for repaying the borrowed funds and the interest incurred.

If you borrow funds in your margin loan account and the value of your holdings declines below the firm's and/or regulatory maintenance margin requirement, you may be subject to a "margin call." This means that we can either

(1) require you to deposit additional cash or margin-eligible securities to your account immediately, or (2) sell any of the securities in your account to cover any shortfall, without informing you in advance. We will decide which of your securities to sell. Even if we notify you that you have a certain number of days to cover the shortfall, we may still sell your securities before that timeframe expires. Further, we may increase at any time the level of equity that you must maintain in your margin account without triggering a margin call.

We have the right to lend shares held in your margin loan account to others. This should not impede your ability to sell these shares, but may cause you to lose voting rights and the right to preferred tax treatment on certain dividend payments.

Managing Your Cash

Sometimes there is cash in your account that hasn't been invested. For example, you may have just deposited money into your account without giving instructions on how to invest it, or you may have received cash dividends or interest. We will automatically place—or "sweep"—that cash into one of the cash management programs listed below—also called "cash sweep programs." Cash management programs offer different benefits and risks, including different interest rates, customer protections and insurance coverage (namely, FDIC or SIPC coverage). Some may have certain eligibility criteria, such as minimum cash balances and specific account types.

Please choose one of the cash management programs listed below. You may instruct us to change your selected cash management program at any time to another, if you meet the eligibility criteria of the new cash management program. If you do not choose one, we will automatically place your un-invested cash into the default cash management program, which will be Money Market Deposit Account. We will give you advance notice of any change in your choice or of the options generally available to you. We may need your consent for certain changes, but not for others.

*Sales Proceeds (check one)	*Dividends/Interest (check one)
<input type="checkbox"/> Mail a cheque to the address of record <input type="checkbox"/> Send directly to your bank account. Please provide bank name and account number: <input type="checkbox"/> Sweep into Money-Market Fund <input type="checkbox"/> Securities Investor Protection Corporation (SIPC7) Protected <input type="checkbox"/> Sweep into Money-Market Deposit Account <input type="checkbox"/> Federal Deposit Insurance Corporation (FDIC8) Insured <input type="checkbox"/> Other : _____	<input type="checkbox"/> Mail a cheque to the address of record <input type="checkbox"/> Send directly to your bank account. Please provide bank name and account number: <input type="checkbox"/> Sweep into same investment as indicated at left <input type="checkbox"/> Reinvest in the same security

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→ *Communications Options

Unless you choose otherwise, we will use postal mail to send you any communications. As an alternative, you may choose to be notified by email when certain communications are available for you to access online. If you wish to be notified by email instead of receiving communications by postal mail, please select one of the options below:

- All communications** – I wish to be notified by email about the online availability of any communications, including trade confirmations, prospectuses, account statements, proxy materials, tax-related documents, and marketing and sales documents.
- All communications except trade confirmations, account statements, and tax-related documents** – I wish to be notified by email about the online availability of all communications except trade confirmations, account statements, and tax-related documents, which I still wish to receive by postal mail.
- All communications except tax-related documents** – I wish to be notified by email about the online availability of all communications except tax-related documents, which I still wish to receive by postal mail.

If you choose email for any communications, please tell us the email address we should use :

*Postal Mail Options (if you requested postal mail delivery in the previous section)

By checking the boxes below, you request that all communications for the applicants listed on this application be delivered to the following single postal mailing address:

- Primary Applicant's Mailing Address
- Other. Please specify : _____

*Duplicate Copies (optional)

Please send duplicate copies of the following documents to the person listed below:

All Communications Trade Confirmations, Account Statements, and Tax-Related Documents Only

Title: <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Dr. <input type="checkbox"/> Other: _____					Suffix : <input type="checkbox"/> Sr. <input type="checkbox"/> Jr. <input type="checkbox"/> Other:		
First Name		Middle Name		Last Name			
Apt/Suite No.	Bldg.		Street				
City		State		Postal Code (Zip)		Country	

Relationship to Primary Applicant : _____

6 Review and Submit This Application

→ *Confirmations and Signatures (Please Read Carefully)

By signing this application, you affirm that you have received and read this application and any supplemental documents governing this relationship. You affirm that the information you have provided is accurate and you agree to notify us of any changes in the information provided.

*Primary Applicant

- Non-Resident Alien** : I certify that I am not a U.S. citizen, U.S. resident alien, or other U.S. person for U.S. tax purposes, and I am submitting the applicable Form W-8 with this form to certify my foreign status and, if applicable, claim tax treaty benefits.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

*Signatures

Name of Primary Applicant (please print)



Signature of Primary Applicant



Date



Please send your completed application to :

Email : accounts@equam.com