PRELIMINARY EB-5 INVESTOR QUESTIONNAIRE

| PERSONAL INFORMATION | | | | | | | |
|--|-------------|---|-------------------------------|---------------|-------------|-----------------------------|--|
| Investor Name: | | | | | | | |
| Last Names | _ | First Name | | | Middle Name | | |
| Investor Maiden Name (if a | pplicable): | | | | | | |
| Email Address: | | Mobile I | | | | | |
| Gender: | | | | | | | |
| Marital Status: | | | | | | | |
| ☐ Single ☐ Married ☐ Divorced ☐ Widowed | | | | | | | |
| Date of Birth:(mo./day/yea | r) | Place of Birth:(city/country) Country of Citizenship | | | | ry of Citizenship | |
| Passport Issued by:(Country | y) Pass | port Number | : Pa | ssport issued | d: (date) | Passport expiry: (date) | |
| | | | | | | | |
| | (:6) | | | | | | |
| Indicate Other Nationalities | | | | | | | |
| PRESENT ADDRESS AB | ROAD: | | | | | | |
| Street Address: | Chata /Das | | | Country | | Dt-1/7:- Ct-: | |
| City: | State/Pro | ovince: | | Country: | | Postal/Zip Code: | |
| Home Phone Abroad: | Į | | Work Ph | none Abroad | : | | |
| | | | | | | | |
| ADDRESS IN THE US (II | F ANY): | | | | | | |
| Street Address: | , | | | | | | |
| City: | State/Pro | ovince: | | Country: | | Postal/Zip Code: | |
| Home Phone in the US: | | Work Phone in the US: | | | | | |
| IF YOU ARE CURRENTLY INSIDE THE UNITED STATES, PLEASE PROVIDE THE FOLLOWING: | | | | | | | |
| Type of US Visa | | Visa issuanc | e Date: | | I-94 Is | suance Date: ((attach copy) | |
| ☐ B Visitor | | | | | | (attasii 65p ₁) | |
| ☐ F / M Student | | | | I-94 ex | xpiry date: | | |
| ☐ J1 / J2 Exchange Visitor | | Visa expiry o | late: | | | | |
| ☐ Work Visa (give type): | | | | | | | |
| | | | | | | | |
| ☐ Other Visa (give type): | | | | | | | |
| Other visa (give type). | | | | | | | |
| Date of Last Entry Into US (month/day/yr): Place of Last Entry Into US: | | | | | | | |
| INFORMATION ABOUT YOUR SPOUSE: | | | | | | | |
| Full legal name Maiden name | | ame (if ar | me (if any) | | Gender: | | |
| | | | | | | ☐ Female ☐ Male | |
| Date of Birth (mo./day/year) | | Place of Birth | Place of Birth (city/country) | | | Country of Citizenship | |
| Passport Issued by | Passport | rt Number | | Passport | Issued | Passport expiry | |
| (Country) | | | | (date) | | (date) | |

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| INFORMATION ABOUT YOUR CHILDREN: | | | | | | | | |
|---|----------------------------|-----------|---|-------------------------|--|--|--|--|
| Name | Date of Birth (MM/DD/YYYY) | | City & Country of Birth | AddressSame as yours | | | | |
| | | | | | | | | |
| Please specify if any of your children will reach the age of 21 within one-year time. | | | | | | | | |
| PRIORVISAS TO THE UNITED STATES: | | | | | | | | |
| Have you ever been issued a US Visa? No | | | | | | | | |
| Date of Last Visa (MM/DD | /YYYY): | | Visa Number: | | | | | |
| Apply for the same type of | f Visa? Yes | No | Have you ever been fingerprinted? Yes No | | | | | |
| Are you applying in the sal Visa was previously issued | | our No | Is this your country of residence? Yes No | | | | | |
| Has your U.S. visa ever been lost or stolen? Yes No Have you ever been refused a U.S. Visa? Yes No If "Yes," please explain: | | | | | | | | |
| Has your U.S. Visa ever been cancelled or revoked? (Yes No | | | | | | | | |
| INVESTMENT ACKNO | WLEDGEMENT: | | | | | | | |
| Proposed Minimum Invest | tment Amount: | | | | | | | |
| □ US\$1,000,000□ US \$500,000 | | | | | | | | |
| FINANCIAL CONDITIO | N: | | | | | | | |
| Do you meet one or both of the following? 1. U\$\$200,000 Annual income for the past 3 years; or combined marital income of U\$\$300,000: | | | | | | | | |
| 2. Net worth in excess of US\$1,000,000: | | | | | | | | |
| Describe in detail any funds or assets that you intend to dedicate towards this investment, including: amounts; sources of how such funds or assets were obtained, and the dates that you have owned said assets: | | | | | | | | |
| PLEASE DESCRIBE THE BALANCE IN BANK ACCOUNTS, SHORT-TERM INVESTMENTS (SUCH AS CERTIFICATES OF DEPOSIT) OR OTHER SHORT-TERM ASSETS USED FOR THIS INVESTMENT: | | | | | | | | |
| Bank / Entity Name & Location | Account Nun | nber / [| Description of Asset | Current Balance / Value | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

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| Please describe key real estate assets abroad or in the U.S. that either have been (or will be) sold or mortgaged for this investment, or which help provide you with over U.S.\$1,000,000 in total assets. | | | | | |
|---|--------------|--|--|--|--|
| Will you use loans to finance this investment? If yes, please describe loans in detail: | | | | | |
| Will you use gifts or inherited funds for this investment? If yes, please describe in detail | : | | | | |
| Are you the sole and exclusive owner of the assets described above? If you are not, ple | ase explain. | | | | |
| IMMIGRATION HISTORY: | | | | | |
| If you answer yes to any of the following questions, please attach a written explanation | on. | | | | |
| HAVE any of the funds and assets used for this investment been illegally obtained? | Yes No | | | | |
| Have you ever been involved in money laundering? | Yes No | | | | |
| Have you or your spouse ever filed for bankruptcy? | Yes No | | | | |
| Have you or your spouse ever been arrested, charged with a crime, or convicted of a crime, even if subject to a pardon or amnesty? | Yes No | | | | |
| Do you HAVE a communicable disease that endangers the public, such as tuberculosis? | Yes No | | | | |
| Do you have a mental or physical disorder that poses or is likely to pose a threat to the safety or welfare of yourself or others? | Yes No | | | | |
| Are you or have you ever been a drug abuser or addict? | Yes No | | | | |
| Have YOU or your spouse ever overstayed a visa to the US? | Yes No | | | | |
| Have YOU or your spouse ever been deported from the US? | Yes No | | | | |
| Have YOU or your spouse ever been refused admission to the US? | Yes No | | | | |
| Have you ever lied or committed fraud to obtain a visa or admission to the US? | Yes No | | | | |
| Have you ever stated to an immigration officer or other US government official that you are a US citizen? | Yes No | | | | |
| HAVE you ever voted or registered to vote in an election in the US? | Yes No | | | | |
| Do you seek to engage in espionage, sabotage, export control violations or other illegal activity in the US? | Yes No | | | | |

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| Have YOU been involved wit rebel, guerrilla or insurgent | Yes No | | | | | |
|---|-----------------|-------------------------------------|------------------|--|--|--|
| Do you seek to engage in terrorist activities in the US or are you a member Yes No of a terrorist organization? | | | | | | |
| Have you ever engaged in terrorist activities any where in the world? Yes | | | | | | |
| Have YOU ever provided financial or other support to a terrorist organization, or do you intend to provide financial support to terrorist organization? | | | | | | |
| Have YOU ever been a mem If yes, was this required for | Yes No | | | | | |
| Have you ever incited or participated in extrajudicial killings, political or religious killings, severe violations of religious freedom or torture? | | | | | | |
| Have you ever incited or participated in genocide or been a member of the Nazi party? Yes No | | | | | | |
| EMPLOYMENT & WOR | RK HISTORY | | | | | |
| Employer (Exact Name of Business): | | Business Address: | | | | |
| City: | State/Province: | Country: | Postal/Zip Code: | | | |
| Position: | | Start Date: | | | | |
| Annual Salary: | | Other Compensation: | | | | |
| Are you retired? | ☐ Yes ☐ No | Are you a full-time student? Yes No | | | | |
| Describe Any Significant Previous Employment (please give employer name, exact dates of employment, highest position held, and annual salary): | | | | | | |
| I CONFIRM THAT ALL OF THE INFORMATION I HAVE PROVIDED AND THE DOCUMENTS SUBMITTED IN RESPONSE TO THIS INVESTOR QUESTIONNAIRE IS ACCURATE AND COMPLETE: | | | | | | |
| PRINT NAME: | | SIGNATURE: | | | | |
| DATE: | | | | | | |