BENEFICIAL OWNERSHIP RETURN – FORM C

READ INSTRUCTIONS BEFORE COMPLETING

THE COMPANIES ACT OF JAMAICA
PARTICULARS OF BENEFICIAL OWNER

(Pursuant to Section 377A (1) of the Companies Act 2004)

CHANGES TO BENEFICIAL OWNERSHIP INFORMATION OF A COMPANY

Instructions: This Form must be completed if there are changes to the beneficial ownership information of a company and must be submitted along with Forms 27A-B

COMPLETE THIS FORM IN BLOCK CAPITALS ONLY WITHIN THE PRESCRIBED FIELDS. PUT "N/A" IN FIELDS THAT DO NOT APPLY.

1A. COMPANY NAME:		1B. COMPANY NUMBER:	

2. Nature of Change to Beneficial Ownership Information:

☐ Cessation of Beneficial Owner ☐ Commencement of Beneficial Owner ☐ Change in Relationship of Beneficial Owner to the Company

☐ General Change

3. PART ONE – CESSATION OF BENEFICIAL OWNER OF THE COMPANY

NOTICE IS GIVEN THAT ON THE _____ DAY OF _____, _____ THE FOLLOWING PERSON(S) CEASED TO BE A BENEFICIAL OWNER OF THE COMPANY

☐ Beneficial owner of the corporate subscriber (state name of corporate subscriber) _____

NAME: (First then Last)				Date person commenced as beneficial owner (dd/mm/yyy):
OCCUPATION:		NATIONALITY:		
ADDRESS:				Tax Registration Number:
				Date of Birth (dd/mm/yyyy):

RELATIONSHIP TO COMPANY

Ultimate Ownership

☐ Owns 25% - 50% interest/voting rights in the company ☐ Owns 51% - 75% interest/voting rights in the company

☐ Owns 76% - 100% interest/voting rights in the company

Ultimate Control of the Company

☐ Has the ability to determine the policy of the company ☐ Has the ability to appoint and remove Directors of the company

☐ Director or Board of Director

Control of the Management of the Company

☐ Chief Executive Officer ☐ General Manager ☐ Chief Financial Officer ☐ Chief Operations Officer

☐ Other _____

BENEFICIAL OWNERSHIP RETURN – FORM C

READ INSTRUCTIONS BEFORE COMPLETING

☐ *Beneficial owner of the corporate subscriber (state name of corporate subscriber)* _____

NAME: (First then Last)				Date person commenced as beneficial owner (dd/mm/yyy): _____
OCCUPATION:		NATIONALITY:		Tax Registration Number: _____
ADDRESS:				Date of Birth (dd/mm/yyyy): _____

RELATIONSHIP TO COMPANY

Ultimate Ownership

☐ Owns 25% - 50% interest/voting rights in the company ☐ Owns 51% - 75% interest/voting rights in the company

☐ Owns 76% - 100% interest/voting rights in the company

Ultimate Control of the Company

☐ Has the ability to determine the policy of the company ☐ Has the ability to appoint and remove Directors of the company

☐ Director or Board of Director

Control of the Management of the Company

☐ Chief Executive Officer ☐ General Manager ☐ Chief Financial Officer ☐ Chief Operations Officer

☐ Other _____

☐ *Beneficial owner of the corporate subscriber (state name of corporate subscriber)* _____

NAME: (First then Last)				Date person commenced as beneficial owner (dd/mm/yyy): _____
OCCUPATION:		NATIONALITY:		Tax Registration Number: _____
ADDRESS:				Date of Birth (dd/mm/yyyy): _____

RELATIONSHIP TO COMPANY

Ultimate Ownership

☐ Owns 25% - 50% interest/voting rights in the company ☐ Owns 51% - 75% interest/voting rights in the company

☐ Owns 76% - 100% interest/voting rights in the company

Ultimate Control of the Company

☐ Has the ability to determine the policy of the company ☐ Has the ability to appoint and remove Directors of the company

☐ Director or Board of Director

Control of the Management of the Company

☐ Chief Executive Officer ☐ General Manager ☐ Chief Financial Officer ☐ Chief Operations Officer

☐ Other _____

☐ _____ Continuation page(s) attached

BENEFICIAL OWNERSHIP RETURN – FORM C

READ INSTRUCTIONS BEFORE COMPLETING

4. PART TWO – COMMENCEMENT OF NEW BENEFICIAL OWNER OF A COMPANY

NOTICE IS GIVEN THAT ON THE _____ DAY OF _____, _____ THE FOLLOWING PERSON(S) COMMENCED AS A BENEFICIAL OWNER(S) OF THE COMPANY:

☐ *Beneficial owner of the corporate subscriber*
(state name of corporate subscriber) _____

NAME: (First then Last)				Date person commenced as beneficial owner (dd/mm/yyy): _____
OCCUPATION:		NATIONALITY:		Tax Registration Number: _____
ADDRESS:				Date of Birth (dd/mm/yyyy): _____

RELATIONSHIP TO COMPANY

Ultimate Ownership

☐ Owns 25% - 50% interest/voting rights in the company ☐ Owns 51% - 75% interest/voting rights in the company
☐ Owns 76% - 100% interest/voting rights in the company

Ultimate Control of the Company

☐ Has the ability to determine the policy of the company ☐ Has the ability to appoint and remove Directors of the company
☐ Director or Board of Director

Control of the Management of the Company

☐ Chief Executive Officer ☐ General Manager ☐ Chief Financial Officer ☐ Chief Operations Officer
☐ Other _____

☐ *Beneficial owner of the corporate subscriber*
(state name of corporate subscriber) _____

NAME: (First then Last)				Date person commenced as beneficial owner (dd/mm/yyy): _____
OCCUPATION:		NATIONALITY:		Tax Registration Number: _____
ADDRESS:				Date of Birth (dd/mm/yyyy): _____

RELATIONSHIP TO COMPANY

Ultimate Ownership

☐ Owns 25% - 50% interest/voting rights in the company ☐ Owns 51% - 75% interest/voting rights in the company
☐ Owns 76% - 100% interest/voting rights in the company

Ultimate Control of the Company

☐ Has the ability to determine the policy of the company ☐ Has the ability to appoint and remove Directors of the company
☐ Director or Board of Director

Control of the Management of the Company

☐ Chief Executive Officer ☐ General Manager ☐ Chief Financial Officer ☐ Chief Operations Officer
☐ Other _____

BENEFICIAL OWNERSHIP RETURN – FORM C

READ INSTRUCTIONS BEFORE COMPLETING

☐ *Beneficial owner of the corporate subscriber (state name of corporate subscriber)* _____

NAME: (First then Last)				Date person commenced as beneficial owner (dd/mm/yyy): _____
OCCUPATION:		NATIONALITY:		Tax Registration Number: _____
ADDRESS:				Date of Birth (dd/mm/yyyy): _____

RELATIONSHIP TO COMPANY

Ultimate Ownership

☐ Owns 25% - 50% interest/voting rights in the company ☐ Owns 51% - 75% interest/voting rights in the company

☐ Owns 76% - 100% interest/voting rights in the company

Ultimate Control of the Company

☐ Has the ability to determine the policy of the company ☐ Has the ability to appoint and remove Directors of the company

☐ Director or Board of Director

Control of the Management of the Company

☐ Chief Executive Officer ☐ General Manager ☐ Chief Financial Officer ☐ Chief Operations Officer

☐ Other _____

☐ _____ Continuation page(s) attached

BENEFICIAL OWNERSHIP RETURN – FORM C

READ INSTRUCTIONS BEFORE COMPLETING

5. PART THREE – CHANGES IN NATURE OF THE RELATIONSHIP BETWEEN THE BENEFICIAL OWNER AND THE COMPANY

NOTICE IS GIVEN THAT ON THE _____ DAY OF _____, _____ THE FOLLOWING PERSON(S) CHANGED THEIR PREVIOUS NATURE OF THE RELATIONSHIP BETWEEN THE BENEFIICAL OWNER AND THE COMPANY:

NAME OF BENEFICIAL OWNER	PREVIOUS NATURE OF THE RELATIONSHIP BETWEEN THE BENEFIICAL OWNER AND THE COMPANY	CURRENT NATURE OF THE RELATIONSHIP BETWEEN THE BENEFICIAL OWNER AND THE COMPANY
	RELATIONSHIP TO COMPANY **Ultimate Ownership** ☐ Owns 25% - 50% interest/voting rights in the company ☐ Owns 51% - 75% interest/voting rights in the company ☐ Owns 76% - 100% interest/voting rights in the company **Ultimate Control of the Company** ☐ Has the ability to determine the policy of the company ☐ Has the ability to appoint and remove Directors of the company ☐ Director or Board of Director **Control of the Management of the Company** ☐ Chief Executive Officer ☐ General Manager ☐ Chief Financial Officer ☐ Chief Operations Officer ☐ Other _____	**RELATIONSHIP TO COMPANY** **Ultimate Ownership** ☐ Owns 25% - 50% interest/voting rights in the company ☐ Owns 51% - 75% interest/voting rights in the company ☐ Owns 76% - 100% interest/voting rights in the company **Ultimate Control of the Company** ☐ Has the ability to determine the policy of the company ☐ Has the ability to appoint and remove Directors of the company ☐ Director or Board of Director **Control of the Management of the Company** ☐ Chief Executive Officer ☐ General Manager ☐ Chief Financial Officer ☐ Chief Operations Officer ☐ Other _____
	RELATIONSHIP TO COMPANY **Ultimate Ownership** ☐ Owns 25% - 50% interest/voting rights in the company ☐ Owns 51% - 75% interest/voting rights in the company ☐ Owns 76% - 100% interest/voting rights in the company **Ultimate Control of the Company** ☐ Has the ability to determine the policy of the company ☐ Has the ability to appoint and remove Directors of the company ☐ Director or Board of Director **Control of the Management of the Company** ☐ Chief Executive Officer ☐ General Manager ☐ Chief Financial Officer ☐ Chief Operations Officer ☐ Other _____	**RELATIONSHIP TO COMPANY** **Ultimate Ownership** ☐ Owns 25% - 50% interest/voting rights in the company ☐ Owns 51% - 75% interest/voting rights in the company ☐ Owns 76% - 100% interest/voting rights in the company **Ultimate Control of the Company** ☐ Has the ability to determine the policy of the company ☐ Has the ability to appoint and remove Directors of the company ☐ Director or Board of Director **Control of the Management of the Company** ☐ Chief Executive Officer ☐ General Manager ☐ Chief Financial Officer ☐ Chief Operations Officer ☐ Other _____

☐ _____ Continuation page(s) attached

BENEFICIAL OWNERSHIP RETURN – FORM C

READ INSTRUCTIONS BEFORE COMPLETING

6. PART FOUR – GENERAL CHANGES TO BENEFICIAL OWNERSHIP INFORMATION

NOTICE IS GIVEN THAT ON THE _____ DAY OF _____, _____ THE FOLLOWING PERSON(S) CHANGED THEIR PREVIOUS NATURE OF THE RELATIONSHIP BETWEEN THE BENEFIICAL OWNER AND THE COMPANY:

☐ Change Of Occupation of Beneficial Owner	☐ Change Of Name of Beneficial Owner (*indicate reason for change of name)* ☐ MARRIAGE CERTIFICATE ☐ DEED POLL *PROOF OF CHANGE OF NAME MUST BE SUBMITTED WITH FORM.*	☐ Change Of Address of Beneficial Owner	☐ Change Of Nationality of Beneficial Owner

Provide a detailed description of the particulars you are changing, stating old information and the new information as well. For example, if the address is changed you should state from where to where. The address should be complete and include street/district, town, and parish.

_____

_____

_____

7. DECLARATION OF ACCURACY OF PRESENTED INFORMATION

To the best of my knowledge, information and belief, I hereby certify the contents of this form to be accurate.

NAME OF DECLARANT			
CAPACITY	☐ Director ☐ Secretary ☐ Authorised Official ☐ Member		
SIGNATURE		DATE (dd/mm/yyyy)	

ITEM 8: This item must be signed declaring the accuracy of the information presented. The capacity of the signee/signatory must be indicated as well as the date which the declaration was made.

FILED BY PAGE

8. PARTICULARS OF INDIVIDUAL/COMPANY FILING THE FORM WITH THE COMPANIES OFFICE OF JAMAICA

FIRST NAME:		LAST NAME:		The 'Filed By' Information page must be completed. The information given must be accurately presented.
ADDRESS:	STREET:			
	TOWN:			
	POST OFFICE:			
	PARISH:			
E-MAIL ADDRESS:				
CONTACT NUMBER:				
FAX NUMBER:				

THE COMPANIES ACT OF JAMAICA
BENEFICIAL OWNER INFORMATION – SCHEDULE C

INSTRUCTIONS

GENERAL

This document is required to be filed at the Companies Office of Jamaica and must conform to the requirements under the Companies Act of Jamaica and subsequent Amendments made thereto.

Where any provision required to be set out is too long for the space provided in the form, a schedule may be appended to the form. This schedule must be labeled appropriately, for example, 'Schedule A' or 'Schedule B' and the where alphanumeric characters are used to label a schedule(s), same must be done in ascending order.

PARTICULARS OF BENEFICIAL OWNER

The beneficial owner(s) of the company is/are the natural person(s) who exercise(s) ultimate ownership of the company OR exercise(s) ultimate effective control of the company OR exercise control over the management of the company. Ultimate ownership of the company arises where a person(s) own 25% or more interest, whether through shares or voting rights in the company. Ultimate effective control arises where a person(s) has/have the ability to determine the policy of the company or has/have the ability to appoint and remove Directors of the company; these persons could be Directors or the Board of Directors. Control over the management of the company refers to persons of authority who control the management of the company.

The beneficial owner's address must be stated in full. This includes street address, apartment number (if applicable), postal code or zone (if applicable) or post office (if applicable), city (if applicable), parish (if applicable), state (if applicable) and country. Where the beneficial owner is a company, the registered office address of the company must be stated.

The beneficial owner's nationality must be stated. Where the natural person has multiple nationalities, only one nationality will be required.

The beneficial owner's occupation must be stated.

ADDITIONAL PARTICULARS OF BENEFICIAL OWNER

The full name of the beneficial owner must be stated. Where the beneficial owner is a natural person, the first and last name must be stated and there should be no abbreviation of same.

The beneficial owner's Tax Registration Number must be stated. If they do not have this, then they must state **one** out of the following:

1. GOVERNMENT ORVOTERS I.D NUMBER OR
2. PASSPORT NUMBER, or
3. DRIVER'S LICENCE NUMBER

The beneficial owner's date of birth must be stated.

COMPANY INFORMATION

The company name and registration number must be stated, that is, the company filing this Beneficial Ownership Return Form.