# Civil Code (Second Schedule)(Register of Beneficial Owners - Associations) Regulations

**Form 1 – Submission of Initial Information**

### Association Details:

Name: ……………....................................................................................................................(the “**Association**”)

Address......................................................................................................................................................................

Registration Number (if applicable) ………………………………………………………………………………. Contact Details (tel. no. and email address) ……....……………………………………………………………….

|  |  |  |
| --- | --- | --- |
| **Type of Association:** |  Private Interest Association |  Purpose Association[1](#_bookmark0) |
| **Date of Establishment:** |  Pre 1st January 2018 |  Post 1st January 2018[2](#_bookmark1) |

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### To the Registrar for Legal Persons: Beneficial Ownership Information[3](#_bookmark2)

In compliance with the Civil Code (Second Schedule)(Register of Beneficial Owners - Associations) Regulations 2017, the administrators of the Association hereby declare to the Registrar for Legal Persons pursuant to regulation 5 or 6 of such Regulations, as the case may be, that[4](#_bookmark3):

### The Administrators

**Part A1 -** The Administrator(s) of the Association is (are):

|  |  |  |  |
| --- | --- | --- | --- |
| **Details** | **Administrator 1** | **Administrator 2** | **Administrator 3** |
| **Name** |  |  |  |
| **Date of Birth/Establishment** |  |  |  |
| **Nationality** |  |  |  |
| **Country of Residence** |  |  |  |

1. An association established for the achievement of a social purpose or for the carrying on of any lawful activity on a non-profit making basis and which does not have any private interest;
2. In such case, also submit an authenticated copy of the statute;
3. If any one/more of the persons indicated in this form is to be considered to be at risk of fraud, kidnapping, blackmail, violence or intimidation, or is a minor or otherwise incapable, please specify in a separate document, including documentary evidence why such category applies;
4. Replicate all tables in this form as necessary;

|  |  |  |  |
| --- | --- | --- | --- |
| **Official Identification****Document Number indicating the type of document and the country of issue** |  |  |  |
| **Effective Date when person became an Administrator** |  |  |  |

**PART A2** – If any one/more of the administrators indicated in Part A1 above is a legal organisation, provide details of the persons entrusted with the management and administration thereof clearly indicating which legal organisation they manage and administer:

Name of Legal Organisation acting as Administrator (indicated above)

|  |  |  |  |
| --- | --- | --- | --- |
| **Details** | **Administrator 1** | **Administrator 2** | **Administrator 3** |
| **Name** |  |  |  |
| **Date of Birth** |  |  |  |
| **Nationality** |  |  |  |
| **Country of Residence** |  |  |  |
| **Official Identification****Document Number indicating the type of document and the country of issue** |  |  |  |
| **Effective Date when****person became an Administrator** |  |  |  |

**Part A3** – Comments

### The Protector or Members of the Supervisory Council

**PART B1** - The Protector or Members of the Supervisory Council, if any, are:

|  |  |  |
| --- | --- | --- |
| **Details** | **Protector/ Supervisory Council Member** | **Protector/ Supervisory Council Member** |
| **Name** |  |  |
| **Date of Birth/Establishment** |  |  |
| **Nationality** |  |  |
| **Country of Residence** |  |  |
| **Official Identification Document****Number indicating the type of document and the country of issue** |  |  |
| **Effective Date when person became****a Protector** or **Member of the Supervisory Council** |  |  |

**PART B2** – If any one/more of the Protectors or members of the Supervisory Council indicated in Part B1 above is a legal organisation, provide details of the persons entrusted with the management and administration thereof clearly indicating which legal organisation they manage and administer:

Name of Legal Organisation acting as Protector or member of the Supervisory Council

 (indicated above)

|  |  |  |  |
| --- | --- | --- | --- |
| **Details** | **Administrator 1** | **Administrator 2** | **Administrator 3** |
| **Name** |  |  |  |
| **Date of Birth** |  |  |  |
| **Nationality** |  |  |  |
| **Country of Residence** |  |  |  |
| **Official Identification****Document Number indicating the type of document and the country of issue** |  |  |  |
| **Effective Date when person** |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **became an Administrator** |  |  |  |

**Part B3** – Comments

### The Members[5](#_bookmark4)

**PART C1 -** The Members of the Association are:

|  |  |  |  |
| --- | --- | --- | --- |
| **Details** | **Member 1** | **Member 2** | **Member 3** |
| **Name** |  |  |  |
| **Date of Birth/Establishment** |  |  |  |
| **Nationality** |  |  |  |
| **Country of Residence** |  |  |  |
| **Official Identification****Document Number indicating the type of document and the country of issue** |  |  |  |
| **Effective Date when person became a member** |  |  |  |
| **Nature of the interest held**[**6**](#_bookmark5) |  |  |  |
| **Extent of the interest held**[**7**](#_bookmark6) |  |  |  |

**PART C2 –** If one/more of the members indicated above is: (a) a legal organisation or (b) a fiduciary or other intermediary, also provide details of the natural person(s) who is/are the ultimate beneficial owner(s) (UBO) thereof in this Part C2:

|  |  |  |
| --- | --- | --- |
| **Details** | **UBO 1** | **UBO 2** |
| **Name** |  |  |
| **Date of Birth** |  |  |

1. Only insert details if a member has a direct or indirect ownership of 25% plus 1 or more of the ownership interests or more than 25% of the voting rights;
2. That is, whether direct or indirect ownership of 25% plus 1 or more of the ownership interests or more than 25% of the voting rights;
3. Indicate as a percentage of total ownership;

|  |  |  |
| --- | --- | --- |
| **Nationality** |  |  |
| **Country of Residence** |  |  |
| **Official Identification Document Number indicating the type of document and the country of issue** |  |  |
| **Effective Date when person became a member** |  |  |
| **Nature of the interest held**[**8**](#_bookmark7) |  |  |
| **Extent of the interest held**[**9**](#_bookmark8) |  |  |

**Part C3** – Comments

### The Controllers

**PART D1** - The following is/are the natural person(s) exercising ultimate and effective control over the association[10](#_bookmark9):

|  |  |  |
| --- | --- | --- |
| **Details** | **Controller 1** | **Controller 2** |
| **Name** |  |  |
| **Date of Birth** |  |  |
| **Nationality** |  |  |
| **Country of Residence** |  |  |
| **Official Identification Document Number indicating the type of document and the country of issue** |  |  |

1. That is indirect ownership of 25% plus 1 or more of the ownership interests or more than 25% of the voting rights;
2. Indicate as a percentage of total ownership;
3. Effective control is considered to exist by other means in terms of the Civil Code (Second Schedule)(Register of Beneficial Owners – Associations) Regulations, S.L. 16.16, when a person’s consent is to be obtained, or his/her direction is binding, (other than in the normal

course of actions such as in a General Meeting or a Board of Administrators meeting where everyone has one vote), in terms of the statute of the association or any other instrument in writing for material actions to be taken by the administrators; *"material actions"*

*means the following actions or any other actions achieving the same result:*

1. *the amendment of the statute;*
2. *the appointment or removal of administrators or protectors or members of the supervisory council;*
3. *the acceptance of new members or the removal of members or any increase or reduction in ownership interests;*
4. *the re-domiciliation of the association;*
5. *the assignment or transfer of all or the majority of the assets of the association; or*
6. *the termination of the association.* If any such person is already mentioned in another part of this Form 1, simply cross-refer to that Part;

|  |  |  |
| --- | --- | --- |
| **Effective Date when natural person****started exercising ultimate and effective control** |  |  |

**Part D2** – Comments

**Declaration:** The information provided in this Form 1, and in any annexes thereto, where applicable, is accurate and up to date information with regard to the beneficial owners of the Association at the time of signing of this declaration.

All information regarding intermediaries[11](#_bookmark10) and ultimate beneficial owners has been obtained, where applicable, and has been included in this Form 1.

Signature:

Signature:

Name:

Name:

*Administrator of the Association Administrator of the Association*[*12*](#_bookmark11)

Dated this .................... day of .................... of the year .....................................................................................

**For Official Use by the Registrar for Legal Persons**

**Date of Entry in the Register of Beneficial Owners: Comments:**

1. The association is also to obtain information on the principal or beneficiary of such intermediary;
2. This form is to be signed by two of the administrators of the association, unless a resolution is attached to this Form 1 authorising one administrator to sign on behalf of the association. If the association has a sole administrator, the form is to be signed by such administrator. When an administrator is a body corporate, this form is to be signed by at least two persons entrusted with the management and

administration thereof.