

CAPITAL MARKETS

HORIZONS

CLIENT ACCOUNT OPENING FORM

Date								
MSX Folio Number								
1. Client Information								
Account Type Individual Company Funds Others								
Investor I Company Name								
			Ā	ندركنا	/ الت	تثمر ً	المس	اسم
Date of Birth I Incorporation Passport No								
Nationality Place of Issue								
I.D I C.R. No. Date of Issue								
Gender Male Female Date of Expiry								
Driving License No								
Occupation Employed Self Employed								
Name of Employer Designation								
How many number of years you have been in the Oman (only for Non-Citizens)								
Address								
Permanet Address								
P. O. Box Postal Code City								
Country GSM No								
Current Address								
P. O. Box Postal Code City								
Country GSM No								
Tel. (Residence)								
E-mail								
General Information								
Years of Investment ExperienceBelow 2 yrs2 yrs to 10 yrs	Abc	ove 1	l0 yr:	S				
Sources of Income Salary Investments & Savings	Oth	er						
Annual Income Below 15,000 OMR 15,000-50,000 OMR	Abc	ove 5	50,00	0 ON	/IR			
Please enable the following for my profile: E-mail Yes No WhatsApp Service Yes	No							
2. Settlement Account Details :								
Client's Bank Branch								
Account Number								
Country								

3. In Case	e of Mir	nors															
Name of Tr	ustee																
Trustee Fol	lio No																
Address																	
P. O. Box				F	Postal	Code	е					City					
Country											GS	SM No					
Tel.Office									Te	el. (Re	eside	ence)					
E-mail																	

4. Terms and Conditions :

- 1. I hereby authorize Horizons Capital Markets Co. SAOC, hereinafter referred to in this agreement as (the Company), to open a securities trading account and to execute all securities buy/ sell orders in Muscat Stock Exchange by virtue of the authorizations issued by me in relation to my account with the Company. I shall hereby be liable for any and all orders requested by me
- 2. In accordance with the applicable laws and established practices in the Sultanate of Oman, I undertake to pay for the securities I request to buy. The Company is entitled not to execute any buy order if I fail to pay for or if there is not enough cash balance when receiving the buy order and before executing the same
- 3. I am fully aware that the execution of the orders requested by me from the Company is subject to the CMA and Muscat Stock Exchange laws and regulations. I am also fully aware that the electronic and computer-based systems are inherently vulnerable to disruption, delay or failure as a result of foreseeable or unforeseeable events at any time, for reasons outside the control of the Company and/ or Muscat Stock Exchange. Therefore, I release the Company and the Muscat Stock Exchange from any liability or loss that may be incurred as a result of such disruption, delay or failure
- 4. In the event that my account becomes overdrawn for whatever reason, the Company may liquidate all or some of the securities owned by me to cover the overdrawn balance of my account in accordance with the laws and regulations governing the same.
- 5. The Company is entitled not to execute buy/ sell orders if such orders are in conflict with the applicable laws or if the conditions necessary for execution are not met. In addition, the Company has the right to close or freeze my account whenever it violates the applicable laws.
- 6. All notices, SMS and/or account statements issued and sent by the Company to me are deemed accurate, accepted and legally binding, unless I object to them in writing within 15 days from the date of sending the same. The Company shall not be held liable if I did not receive such notices and/ or account statements for whatever reason.
- 7. I hereby undertake to pay all buy/ sell commissions set by the Company in accordance with the regulations issued by the Capital Market Authority and/ or Muscat Stock Exchange, and any fees or any other expenses against any additional services agreed upon. In addition, the Company is entitled to deduct these amounts directly from my account and I disclaim any right to object to such deductions
- 8. The Company is entitled to provide the relevant regulatory and/ or judicial authorities in the Sultanate of Oman with any information and/ or documents related to my account.
- 9. The Company may amend any of these terms and conditions in accordance with the instructions issued by CMA, Muscat Stock Exchange and/ or any other regulatory authority. Such amendments shall be binding on both parties.
- 10. This Agreement is subject to the laws and regulations of CMA, Muscat Stock Exchange and/ or any other concerned regulatory authorities approved by Omani law. The courts of the Sultanate of Oman shall have jurisdiction over this agreement.
- 11. I shall promptly notify Muscat Stock Exchange and the Company if I and/ or together with any of my minor children own a percentage amounting to the maximum permissible ownership percentage in any listed company on Muscat Stock Exchange. In such a case, I shall apply to obtain an official approval from the concerned authorities before concluding such transaction if the conclusion of which will lead to the increase of such percentage.
- 12. I hereby ackowledge that the information provided is true and accurate and undertake to notify the company i writing in case of any changes.
- 13. I hereby acknowledge that all documents attached are legal, accurate and true.
- 14. I herby authorize Horizons Capital Markets SAOC to record and archive any verbal or telephone orders, or my discussion in respect of buying or selling any traded securites.

I have read and understood the terms and condition mentioned above and in witness there to I have signed the same.

Client Name									
	Client Signature	Brokerage Manager	Compliance Officer						
For Companies :		For Individuals :							
1. Copy of the C.R.		1. Copy of the I.D. or Passport.							
2. Copy of Passport I IE	D for the Authorized Persons.	2. Proof of Address							
3. List of authorized sig	natories and their specimen signature.	3. Copy of a valid Power of Attorney duly endorsed by competent legal authorities							

4. All papers must be authenticated.

is case if the account is operated by another person, copy of ID of authorized person.

4. In case of a minor: Copy of the birth certificate, Copy of ID I Passport of the natural guardian.

P.O. Box: 685, P.C.: 115, Madinat Sultan Qaboos, Sultanate of Oman, Tel.: +968 24826000, Fax: +968 24826099, C.R. No.: 1055489



نموذج تصريح الفاتكا FATCA Declaration Form

Investor Name: _____ Account Number (NIN):

FATCA DECLARATION FOR INDIVIDUAL INVESTORS							
FATCA Compliance Confirmation Indicia	"Yes" or "No"						
هل أنت مقيم (تحمل البطاقة الخضراء) أو مواطن في الولايات المتحدة ؟ 1	1. Are you a resident (green card holder) or Citizen of the United State?						
هل الولايات المتحدة مكان ميلادك؟ 2	2. Is U.S. your place of birth?						
ق بريد أو رقم هاتف في الولايات المتحدة ؟ 3	3. Do you hold any residence address or correspondence address /mail address, P.O Box address/ or a telephone number in the U.S.?						
هل لديك أمر تحويل أموال دوري من/ إلى الولايات المتحدة؟ 4 .	4. Do you have a standing Instructions to transfer funds periodically to a U.S. account or receive from a U.S. address?						
هل الوكيل متواجد في الولايات المتحدة أو لديه إقامة / جنسية . امريكية ؟ 5	5. Is your POA holder based out of US or hold U.S. residence / citizenship?						
هل تدفع ضر ائب في الولايات المتحدة ؟ 6	6. Do you pay tax in the U.S.?						
وية تدل على وجود أَقَامة /جنسيةُ الولايات المتحدة ؟7	7. Do you hold a Tax Identification Number or any identification that indicates U.S. residence / citizenship?						
Tax Identification Number (TIN)	رقم التعريف الضريبي						

	FATCA DECLARATION FOR NON-INDIVIDUAL CLIENTS						
FOR NON-INDIVIDUAL INVESTORS (COMPANY / INSTITUTIONS / CUSTODIAN etc.)							
FATCA Compliance Confirmation Indicia		"Yes" or "No"					
1. Does the organization / entity hold a mailing	هل الشركة لديها عنوان بريدي أو عنوان تواصل أو رقم هاتف .						
address / communication address / a telephone	في الولايات المتحدة ؟ 1						
number in the U.S.?	-						
2. Is the country of incorporation – U.S.?	هل مكان التأسيس هو الولايات المتحدة ؟ 2 .						
3. Does the organization have a U.S. beneficiary?	هل لدى المؤسسة / الشركة مستفيد أمريكي ؟3 .						
4. Is your Director / Authorized signatory / POA	هل المدير /المفوض بالتوقع /الوكيل متواجد في الولايات .						
holder based out of U.S. or holds U.S. residence /	المتحدة أو لديه إقامة /جنسية امريكية ؟ 4						
citizenship?							
5. Does your organization have one or more U.S.	ملكية على التصويت أو قيمة الأسهم؟ ٪11 . هل لدى الشركة						
beneficial owners /shareholders with 10% or more	أمريكي واحد أو أكثر من المستفيدين الحقيقيين /المساهمين مع أكثر						
ownership on vote or value of stock?	من 5						
6. Does your organization have partners (of U.S.)	من الربح أو من فوائد رأس المال ؟ 11 ٪ هل لدى الشركة %						
owning more than a 10% profit or capital interest in	شريك أمريكي يملك أكثر من 6						
a partnership?							
7. Does the organization pay tax in the U.S.?	هل الشركة تدفع ضررائب في الولايات المتحدة ؟7 .						

I hereby confirm the information provide is true, accurate and complete. I agree and undertake to notify Horizons Capital Markets S.A.O.C within 30 days if there is a change in any information which I have provided above. Also consents to the disclosure and reporting of any tax related information obtained or held by Horizons Capital Markets S.A.O.C to any local or foreign regulatory or tax authority (IRS).

يوما في حال حدوث أي تغيير أو تعديل في المعلومات المقدمة أعلاه. كما أوافق على قيام شركة الرمز كابيتال 03 إنني أوؤكد لكم بأن جميع المعلومات المقدمة أعلاه صحيحة وكاملة ، كما أنني اتعهد بإخطار شركة الرمز كابيتال ذ.م.م خلال بتزويد التقارير المتعلقة بمعلومات الصرائب إلى أي جهة تنظيمية أو ضريبية محلية كانت أم أجنبية.



Client Account Opening Form – Appendix – Form 1

Please read these instructions before completing the form

Why are we asking you to complete this form?

To help protect the integrity of tax systems, governments around the world are introducing a new information gathering and reporting requirement for financial institutions. This is known as the Common Reporting Standard ('the CRS').

Under the CRS, we are required to determine where you are 'tax resident' (this will usually be where you are liable to pay income taxes). If you are tax resident outside the country/jurisdiction where your account is held we may need to give the national tax authority this information, along with information relating to your accounts. That may then be shared between different countries'/ jurisdictions' tax authorities.

Completing this form will ensure that we hold accurate and up to date information about your tax residency.

If your circumstances change and any of the information provided in this form becomes incorrect, please let us know immediately and provide an updated Self-Certification.

Who should complete the CRS Individual Self-Certification Form?

Personal banking customers or sole traders should complete this form.

For joint account holders, each individual will need to complete a copy of the form.

Even if you have already provided information in relation to the United States Government's Foreign Account Tax Compliance Act (FATCA), you may still need to provide additional information for the CRS as this is a separate regulation.

If you are completing this form on behalf of someone else, please ensure that you let them know that you have done so and tell us in what capacity you are signing in Part 3. For example, you might be completing this form as a custodian or nominee of an account, under a Power of Attorney or as a legal guardian on behalf of an account holder who is a minor.



CRS-I

Individual Tax Residency Self-Certification Form

Please complete Parts 1-3 in BLOCK CAPITALS

Part 1

Identification of Individual Acc	ount Hold	ər						
A. Name of Account Hold	er:							
Family Name or Surname(s)								
Title	Mr	Mrs	Miss	Ms	Other (specify)			
First or Given name(s)								
Middle Name(s)								
B. Current Residence Ad	dress:							
Line 1 House/Apt/Suite Name, Number, Street								
Line 2 Town/City Province/County/State								
Country					Postal Code/2	ZIP code		
C. Mailing Address: (pleas	se only c	omplete if o	different fro	m the addr	ess shown in Sectio	n B above	•)	
Line 1 House/Apt/Suite Name, Number, Street								
Line 2 Town/City Province/County/State								
Country					Postal Code / 2	ZIP code		
D. Date of birth	D D	M M Y	Y Y Y					
E. Place of birth								
Town or City of Birth								

Country of Birth



Part 2

Country/Jurisdiction of Residence for Tax Purposes and related Taxpayer Identification Number or functional equivalent ("TIN") (See Appendix)

Please complete the following table indicating:

- i. where the Account Holder is a tax resident;
- ii. the Account Holder's TIN for each country/jurisdiction indicated.

If the Account Holder is tax resident in more than three countries/jurisdictions please use a separate sheet

If a TIN is unavailable please provide the appropriate reason A, B or C:

- **Reason A** The country/jurisdiction where the Account Holder is liable to pay tax does not issue TINs to its residents
- **Reason B** The Account Holder is otherwise unable to obtain a TIN or equivalent number. (Please explain why you are unable to obtain a TIN in the below table if you have selected this reason)
- Reason C No TIN is required. (Note. Only select this reason if the authorities of the country/jurisdiction of tax residence entered below do not require the TIN to be disclosed)

Please explain in the following boxes why you are unable to obtain a TIN if you selected Reason B above.

1	
2	
3	



Part 3

Declarations and Signature

I understand that the information supplied by me is covered by the full provisions of the terms and conditions governing the Account Holder's relationship with Horizons Capital Markets S. A.O.C. (HCM) setting out how HCM may use and share the information supplied by me.

I acknowledge that the information contained in this form and information regarding the Account Holder and any Reportable Account(s) may be provided to the tax authorities of the country/jurisdiction in which this account(s) is/are maintained and exchanged with tax authorities of another country/jurisdiction or countries/jurisdictions in which the Account Holder may be tax resident pursuant to intergovernmental agreements to exchange financial account information.

I certify that I am the Account Holder (or am authorised to sign for the Account Holder) of all the account(s) to which this form relates.

I certify that where I have provided information regarding any other person (such as a Controlling Person or other Reportable Person to which this form relates) that I will, within 30 days of signing this form, notify those persons that I have provided such information to HCM and that such information may be provided to the tax authorities of the country/jurisdiction in which the account(s) is/are maintained and exchanged with tax authorities of another country/jurisdiction or countries/jurisdictions in which the person may be tax resident pursuant to intergovernmental agreements to exchange financial account information.

I declare that all statements made in this declaration are, to the best of my knowledge and belief, correct and complete.

I undertake to advise HCM within 30 days of any change in circumstances which affects the tax residency status of the individual identified in Part 1 of this form or causes the information contained herein to become incorrect, and to provide HCM with a suitably updated self-certification and Declaration within 90 days of such change in circumstances.

Signature	
Print name	
Date	D D M M Y Y Y Y
	Note: If you are not the Account Holder please indicate the capacity in which you are signing the form. If signing under a power of attorney please also attach a certified copy of the power of attorney.

Capacity:



DECLARATION

Please fill the information below as requested	
Name of the Account Holder	
Specify the total years of experience in using different investment products	Equity, Experience ofyears
	Bonds, Experience ofyears
	Derivatives, Experience of years
	Mutual Funds including ETF's, Experience of years
Political Exposure	Politically Exposed Person (PEP) Related to a Politically Exposed Person (If yes to any of the above, Please fill the PEP Questionaire)
	Not a PEP or Related to any PEP

RISK DISCLOSURE

1. Risk of Higher Volatility:

Volatility refers to the dynamic changes in price that a security undergoes when trading activity continues on the stock exchange. As a result of volatility, order may only be partially executed or not executed at all, or the price at which order got executed may be substantially different from the last traded price or change substantially thereafter, resulting in notional or real losses.

2. Risk of Lower Liquidity:

Liquidity refers to the ability of market participants to expeditiously trade at competitive price with minimal price difference. There may be a risk of lower liquidity in some securities. As a result, trade order may only be partially executed or may be executed with relatively greater price different or may not be fully executed at all.

- 3. Risk of Wider Spreads: Spread refers to price gap in-between the best bid & ask. The wider spreads in turn will hamper better price formation.
- 4. Risk of News Announcement: News announcement refers to material information that may impact the price of security and suddenly cause unexpected positive or negative movements.
- 5. Risk of Rumor:

Rumors about companies in the market through word of mouth, social media platforms, newspapers or any other source. The investors should be wary of and desist from acting on rumors.

6. Market Risk:

Investments are subject to market risk. The security prices may go up or down depending upon the factors and forces affecting the securities market.

I/We hereby declare, understand and knowledge that trading in shares and Bonds have varying element of risk, is generally not an appropriate avenue for someone of limited resources/limited investment and trading experience and low risk tolerance.

I/We hereby declare that I have adequate knowledge to deal with securities listed in stock exchanges and can tolerate the risks associated with it.
I/We hereby declare, agree and confirm that the details furnished above are true to the best of my knowledge and belief.
In case

CLIENT SIGNATURE		
Date		