



THE COMPANIES ACT

PARTICULARS OF BENEFICIAL OWNER

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

BENEFICIAL OWNERSHIP RETURN – FORM A

BENEFICIAL OWNER OF A COMPANY

PLEASE INDICATE THE REASON FOR SUBMITTING THIS FORM:

- Attachment to the Form 1A ,1C,1D
- Attachment to the Form 19A
- Attachment to the Form 31A
- Attachment to the Form 9
- Annual Submission (Overseas Companies with a Share Capital)

1A. NAME OF COMPANY		
1B. COMPANY REGISTRATION NUMBER	1C. COMPANY TAXPAYER REGISTRATION NUMBER	
1D. COUNTRY OF INCORPORATION <i>(overseas company)</i>	1E. PRINCIPAL PLACE / ADDRESS OF BUSINESS <i>(overseas company)</i>	
1F. COMPANY TELEPHONE NUMBER	1G. EMAIL ADDRESS	1H. TYPE OF COMPANY
		<input type="checkbox"/> Private <input type="checkbox"/> Public

2A. PERIOD FOR WHICH RETURN IS MADE UP <i>(where return is being filed annually)</i>							
(I) START	DAY	MONTH	YEAR	(II) END	DAY	MONTH	YEAR

2B. DATE OF RETURN <i>(where return is being filed with another form)</i>		
DAY	MONTH	YEAR

PLEASE CONTINUE TO NEXT PAGE

FOR OFFICIAL USE ONLY COMPANY # _____

The beneficial owner(s) of the company is/are the natural individual(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.



THE COMPANIES ACT
PARTICULARS OF BENEFICIAL OWNER

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

BENEFICIAL OWNERSHIP RETURN – FORM A

3A. BENEFICIAL OWNERS OF THE COMPANY			
NAME OF BENEFICIAL OWNER 1	ADDRESS	NATIONALITY	OCCUPATION
RELATIONSHIP TO COMPANY <u>Ultimate Ownership</u> <input type="checkbox"/> Owns 25% - 50% interest/voting rights in the company <input type="checkbox"/> Owns 51% - 75% interest/voting rights in the company <input type="checkbox"/> Owns 76% - 100% interest/voting rights in the company <u>Ultimate Control of the Company</u> <input type="checkbox"/> Has the ability to determine the policy of the company <input type="checkbox"/> Has the ability to appoint and remove Directors of the company <input type="checkbox"/> Director or Board of Directors <u>Control of the Management of the Company</u> <input type="checkbox"/> Chief Executive Officer <input type="checkbox"/> General Manager <input type="checkbox"/> Chief Financial Officer <input type="checkbox"/> Chief Operations Officer <input type="checkbox"/> Other _____			Date person commenced as beneficial owner (dd/mm/yyyy): _____ Tax Registration Number: _____ Date of Birth (dd/mm/yyyy): _____
NAME OF BENEFICIAL OWNER 2	ADDRESS	NATIONALITY	OCCUPATION
RELATIONSHIP TO COMPANY <u>Ultimate Ownership</u> <input type="checkbox"/> Owns 25% - 50% interest/voting rights in the company <input type="checkbox"/> Owns 51% - 75% interest/voting rights in the company <input type="checkbox"/> Owns 76% - 100% interest/voting rights in the company <input type="checkbox"/> Beneficial owner of the corporate subscriber _____ (state name of corporate subscriber) <u>Ultimate Control of the Company</u> <input type="checkbox"/> Has the ability to determine the policy of the company <input type="checkbox"/> Has the ability to appoint and remove Directors of the company <input type="checkbox"/> Director or Board of Directors <u>Control of the Management of the Company</u> <input type="checkbox"/> Chief Executive Officer <input type="checkbox"/> General Manager <input type="checkbox"/> Chief Financial Officer <input type="checkbox"/> Chief Operations Officer <input type="checkbox"/> Other _____			Date person commenced as beneficial owner (dd/mm/yyyy): _____ Tax Registration Number: _____ Date of Birth (dd/mm/yyyy): _____
NAME OF BENEFICIAL OWNER 3	ADDRESS	NATIONALITY	OCCUPATION
RELATIONSHIP TO COMPANY <u>Ultimate Ownership</u> <input type="checkbox"/> Owns 25% - 50% interest/voting rights in the company <input type="checkbox"/> Owns 51% - 75% interest/voting rights in the company <input type="checkbox"/> Owns 76% - 100% interest/voting rights in the company <input type="checkbox"/> Beneficial owner of the corporate subscriber _____ (state name of corporate subscriber) <u>Ultimate Control of the Company</u> <input type="checkbox"/> Has the ability to determine the policy of the company <input type="checkbox"/> Has the ability to appoint and remove Directors of the company <input type="checkbox"/> Director or Board of Directors <u>Control of the Management of the Company</u> <input type="checkbox"/> Chief Executive Officer <input type="checkbox"/> General Manager <input type="checkbox"/> Chief Financial Officer <input type="checkbox"/> Chief Operations Officer <input type="checkbox"/> Other _____			Date person commenced as beneficial owner (dd/mm/yyyy): _____ Tax Registration Number: _____ Date of Birth (dd/mm/yyyy): _____

_____ Continuation page(s) attached

FOR OFFICIAL USE ONLY COMPANY # _____

The beneficial owner(s) of the company is/are the natural individual(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.



THE COMPANIES ACT
PARTICULARS OF BENEFICIAL OWNER

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

BENEFICIAL OWNERSHIP RETURN – FORM A

3B. CORPORATE SHAREHOLDER

NAME OF CORPORATE SHAREHOLDER				
BENEFICIAL OWNER OF CORPORATE SHAREHOLDER <i>If there are several beneficial owners of this company, please use continuation page.</i>				
NAME	ADDRESS	COMMENCEMENT DATE AS BENEFICIAL OWNER	NATIONALITY	OCCUPATION
RELATIONSHIP TO COMPANY <u>Ultimate Ownership</u> <input type="checkbox"/> Owns 25% - 50% interest/voting rights in the company <input type="checkbox"/> Owns 51% - 75% interest/voting rights in the company <input type="checkbox"/> Owns 76% - 100% interest/voting rights in the company <u>Ultimate Control of the Company</u> <input type="checkbox"/> Has the ability to determine the policy of the company <input type="checkbox"/> Has the ability to appoint and remove Directors of the company <input type="checkbox"/> Director or Board of Directors <u>Control of the Management of the Company</u> <input type="checkbox"/> Chief Executive Officer <input type="checkbox"/> General Manager <input type="checkbox"/> Chief Financial Officer <input type="checkbox"/> Chief Operations Officer <input type="checkbox"/> Other _____				
DATE OF BIRTH _____		TAX REGISTRATION NUMBER _____		

NAME OF CORPORATE SHAREHOLDER				
BENEFICIAL OWNER OF CORPORATE SHAREHOLDER <i>If there are several beneficial owners of this company, please use continuation page.</i>				
NAME	ADDRESS	COMMENCEMENT DATE AS BENEFICIAL OWNER	NATIONALITY	OCCUPATION
RELATIONSHIP TO COMPANY <u>Ultimate Ownership</u> <input type="checkbox"/> Owns 25% - 50% interest/voting rights in the company <input type="checkbox"/> Owns 51% - 75% interest/voting rights in the company <input type="checkbox"/> Owns 76% - 100% interest/voting rights in the company <u>Ultimate Control of the Company</u> <input type="checkbox"/> Has the ability to determine the policy of the company <input type="checkbox"/> Has the ability to appoint and remove Directors of the company <input type="checkbox"/> Director or Board of Directors <u>Control of the Management of the Company</u> <input type="checkbox"/> Chief Executive Officer <input type="checkbox"/> General Manager <input type="checkbox"/> Chief Financial Officer <input type="checkbox"/> Chief Operations Officer <input type="checkbox"/> Other _____				
DATE OF BIRTH _____		TAX REGISTRATION NUMBER _____		
				<input type="checkbox"/> _____ Continuation page(s) attached

FOR OFFICIAL USE ONLY COMPANY # _____

The beneficial owner(s) of the company is/are the natural individual(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.



THE COMPANIES ACT
PARTICULARS OF BENEFICIAL OWNER

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

BENEFICIAL OWNERSHIP RETURN – FORM A

4. LIST OF INDIVIDUAL/NATURAL SHAREHOLDERS

This list shall include all shareholders holding shares during the period for which the Annual Return is made up and must reflect all changes in shareholders.
NOTE: Where shares are transferred, forfeited etc. the date of the transaction must be indicated under the relevant column next to the name of the person acquiring/disposing of the shares and the type of transaction (see key at right).
Where shares are issued during the period, the details shall also be provided on a Return of Allotment (Form 9). This includes newly issued shares and shares re-allotted upon forfeiture.

KEY TO TYPES OF TRANSACTION
N = NEW ISSUE **T** = TRANSFER
TM = TRANSMISSION **F** = FORFEITURE
R = REDEMPTION **P** = PURCHASE
S = SURRENDERED (as a gift to the company)

NAME (For individuals: FIRST LAST)	CLASS OF SHARES	NUMBER OF SHARES HELD AT BEGINNING OF PERIOD	CHANGES IN SHAREHOLDING DURING THE PERIOD		DATE OF TRANSACTION (dd/mm/yyyy)	TYPE OF TRANSACTION (see key above)	NUMBER OF SHARES HELD AT THE END OF THE PERIOD
			# of shares acquired ²	# of shares disposed of ³			

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

NAME (For individuals: FIRST LAST)	CLASS OF SHARES	NUMBER OF SHARES HELD AT BEGINNING OF PERIOD	CHANGES IN SHAREHOLDING DURING THE PERIOD		DATE OF TRANSACTION (dd/mm/yyyy)	TYPE OF TRANSACTION (see key above)	NUMBER OF SHARES HELD AT THE END OF THE PERIOD
			# of shares acquired ²	# of shares disposed of ³			

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

NAME (For individuals: FIRST LAST)	CLASS OF SHARES	NUMBER OF SHARES HELD AT BEGINNING OF PERIOD	CHANGES IN SHAREHOLDING DURING THE PERIOD		DATE OF TRANSACTION (dd/mm/yyyy)	TYPE OF TRANSACTION (see key above)	NUMBER OF SHARES HELD AT THE END OF THE PERIOD
			# of shares acquired ²	# of shares disposed of ³			

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

¹ Transmission occurs on the death of the shareholder and the shares that were held by the deceased pass on to his personal representative.

² Acquired shares are shares received by shareholders during the period for which the Annual Return is made up, usually by means of transfer or allotment

³ Disposed shares are those which no longer belong to the shareholder, usually by means of transfer, forfeiture, purchase or redemption by the company or given as gift to the company.

_____ Continuation page(s) attached

FOR OFFICIAL USE ONLY COMPANY # _____

The beneficial owner(s) of the company is/are the natural individual(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.



THE COMPANIES ACT

BENEFICIAL OWNERSHIP RETURN – FORM A

PARTICULARS OF BENEFICIAL OWNER

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

5. LIST OF SHAREHOLDERS WHO ARE COMPANIES

This list shall include all **companies** who are **members of the company** during the period for which the Annual Return is made up.

Members are those legal persons whose names have been entered in the company's register of members. In a company with shares, these persons will also tend to be shareholders.

NAME OF COMPANY 1:	DATE COMMENCED AS MEMBER (dd/mm/yyyy)	DATE OF INCORPORATION: (dd/mm/yyyy)	COMPANY REGISTERED OFFICE ADDRESS/OTHER ADDRESS	COUNTRY OF INCORPORATION	CLASS OF SHARES	NUMBER OF SHARES

NAME OF COMPANY 2:	DATE COMMENCED AS MEMBER (dd/mm/yyyy)	DATE OF INCORPORATION: (dd/mm/yyyy)	COMPANY REGISTERED OFFICE ADDRESS/OTHER ADDRESS	COUNTRY OF INCORPORATION	CLASS OF SHARES	NUMBER OF SHARES

NAME OF COMPANY 3:	DATE COMMENCED AS MEMBER (dd/mm/yyyy)	DATE OF INCORPORATION: (dd/mm/yyyy)	COMPANY REGISTERED OFFICE ADDRESS/OTHER ADDRESS	COUNTRY OF INCORPORATION	CLASS OF SHARES	NUMBER OF SHARES

NAME OF COMPANY 4:	DATE COMMENCED AS MEMBER (dd/mm/yyyy)	DATE OF INCORPORATION: (dd/mm/yyyy)	COMPANY REGISTERED OFFICE ADDRESS/OTHER ADDRESS	COUNTRY OF INCORPORATION	CLASS OF SHARES	NUMBER OF SHARES

_____ Continuation page(s) attached

FOR OFFICIAL USE ONLY COMPANY # _____

The beneficial owner(s) of the company is/are the natural individual(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.



THE COMPANIES ACT

PARTICULARS OF BENEFICIAL OWNER

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

BENEFICIAL OWNERSHIP RETURN – FORM A

6. BENEFICIAL OWNERS WHO CEASED TO BE SO DURING THE REPORTING PERIOD

NAME OF BENEFICIAL OWNER (first then last name)	CESSATION DATE (dd/mm/yyyy)	REASON FOR CESSATION

7. MEMBERS WHO CEASED TO BE SO DURING THE REPORTING PERIOD

NAME OF BENEFICIAL OWNER (first then last name)	CESSATION DATE (dd/mm/yyyy)	REASON FOR CESSATION

8. 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	<input type="checkbox"/> Director	<input type="checkbox"/> Secretary	<input type="checkbox"/> Authorised Official <input type="checkbox"/> Member
SIGNATURE		DATE (dd/mm/yyyy)	

FOR OFFICIAL USE ONLY COMPANY # _____

The beneficial owner(s) of the company is/are the natural individual(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.

FILED BY - INFORMATION

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

NAME:

.....

**COMPLETE
ADDRESS:**

.....

.....

EMAIL ADDRESS:

.....

**CONTACT
NUMBER:**

.....

FAX NUMBER

.....

JAMAICA
THE COMPANIES ACT
BENEFICIAL OWNER INFORMATION – SCHEDULE A

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 alphanumerical characters are used to label a schedule(s), same must be done in ascending order.

DEFINITIONS

Beneficial owner(s) of the company is/are the natural individual(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 a Director(s) of the company; these persons could be the Director(s) or Board of Directors.

Control over the management of the company refers to persons of authority who control the management of the company.

BENEFICIAL OWNER AND INDIVIDUAL MEMBER DETAILS

The full name of the beneficial owner(s) and or member(s) must be stated. The first and last name must be stated and there should be no abbreviation of same.

The beneficial owner and or member's address must be stated in full. This includes apartment number, street address, town, postal code or zone, post office, city, parish, state or country where applicable.

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

The beneficial owner and or member's occupation must be stated where applicable.

The beneficial owner and or member's identification number must be stated. **ONE** of the following must be provided as well as the original or certified copy of the identification being used:

1. TAX REGISTRATION NUMBER (*nine-digit number assigned by the Tax Administration Jamaica*), or
2. NATIONAL VOTER'S ID NUMBER, or
3. PASSPORT NUMBER, or
4. DRIVER'S LICENCE NUMBER

(Certification may be done by a Justice of the Peace, Attorney-At-Law or Notary Public)

All dates must be presented as day/month/year.

ITEM 1

ITEM 1A: The full name of company should be stated at item 1A. The name here must be consistent with the name stated on its Certificate of Incorporation or most recent Change of Name Certificate (as at the date of the form) or in the case of new incorporation the name stated on the Form 1A, 1C, or 1D.

ITEM 1B: Item 1B must be completed to indicate the company registration number at the Companies Office of Jamaica. If no registration number has been assigned, “Not Applicable” (N/A) should be placed on the line.

ITEM 1C: Item 1C should be completed with the company’s TRN. This is the nine-digit number assigned to the company by the Tax Administration Jamaica. If no TRN has not yet been assigned “Not Applicable” (N/A) should be placed on the line.

ITEM 1D: Item 1D should only be completed by an overseas company. The company should indicate the country and state that it was incorporated in. This cannot be a local address.

ITEM 1E: Item 1E should only be completed by an overseas company. The company should state the address of its principal place of business. This cannot be a local address.

ITEMS 1F and 1G Item 1F and 1G are not mandatory, however, if provided must be completed in full. For example, item 1F must reflect a legitimate 10-digit telephone number and item 1G must contain the relevant domain ending, such as ‘gmail.com’ or ‘yahoo.com’.

ITEM 1H: Item 1H must be completed to indicate the type of company.

ITEM 2

ITEM 2A: Item 2A: This section should be completed to reflect the reporting period of the Beneficial Ownership Return. This section is applicable where an annual return is being filed along with the Form A. The dates at item 2 of the Beneficial Ownership Return Form A must mirror the dates at item 2 on the annual return.

ITEM 2B: The date of return refers to the effective date of the notice being given where the documents being submitted along with the Form A are documents other than the annual return.

ITEM 3

ITEM 3A: Item 3A requires that the name of the beneficial owner of the company must be stated. The name must include the first and surname. The address for each beneficial owner listed must be stated in full, as well as nationality and occupation. The item requires that the beneficial owner’s relationship to the company must then be selected. The relationship of the beneficial owner of the company can be by way of Ultimate Ownership, Ultimate Control of the Company or Control of the Management of the Company. The relationship to the company may be by one or more ways.

ITEM 3B: Item 3B requires that the name of the corporate member/shareholder of the company must be stated. The name must be clearly stated and as written on the original company documents (for example: Certificate of Incorporation, Articles of Incorporation). The address for each corporate member/ shareholder listed must be stated in full. The beneficial owner of the corporate member/shareholder must then be stated in the space provided, as well as nationality and occupation. The item requires that the beneficial owner’s relationship to the company must then be selected. The relationship of the beneficial owner of the company can be by way of Ultimate Ownership, Ultimate Control of the Company or Control of the Management of the Company. The relationship to the company may be by one or more ways.

ITEM 4

ITEM 4: Item 4 requires that the name of the current members of the company who are natural individuals must be stated. The name must include the first and surname. The address for each beneficial owner listed must be stated in full, as well as nationality and occupation. The item requires that the date the member commenced being a member of the company must be given in the format as day/month/year. All members who are natural persons must be listed in this section.

ITEM 5

ITEM 5: Item 5 requires that the name of the current members of the company who are legal individuals must be stated. The name must be clearly stated and as written on the original company documents (for example: Certificate of Incorporation, Articles of Incorporation). The address company member listed must be stated in full as well as the country and date of incorporation. The item requires that the date the member commenced being a member must be given in the format as day/month/year. All members who are legal persons must be listed in this section

ITEM 6

ITEM 6: All beneficial owners who have ceased to be a beneficial owner of the company during the reporting period must be stated. The name should be given in full, as well as the cessation date in the format of day/ month/ year, and the reason for cessation.

ITEM 7

ITEM 7: All members who have ceased to be a member of the company during the reporting period must be stated. The name should be given in full, as well as the cessation date in the format of day/ month/ year, and the reason for cessation.

ITEM 8

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 INFORMATION

The 'Filed By Information' page must be completed. The information given must be accurately presented.