

# Management Agreement of RMB Bank Settlement Account for Organization

(Special Terms Section, First Edition, 2025)

The Applicant confirms that prior to signing this Special Terms Section, it has read, acknowledged, and confirmed the Management Agreement of RMB Bank Settlement Account for Organization (General Terms Section, First Edition 2025) (hereinafter referred to as the "General Terms section"). The Applicant acknowledges that this Special Terms section and the General Terms section collectively constitute the Management Agreement of RMB Bank Settlement Account for Organization (hereinafter referred to as the "Agreement"), and they shall have equal legal effect. The Applicant agrees to comply with all the terms and conditions stipulated in both the General Terms section and this Special Terms section.

## Item 1 Basic information of the parties

Applicant: \_\_\_\_\_

ID Name and Number: \_\_\_\_\_

Legal Representative/Responsible Person: \_\_\_\_\_

ID Name and Number of Legal Representative/Responsible Person: \_\_\_\_\_

Contact Phone Number of Legal Representative/Responsible Person: \_\_\_\_\_

Domicile Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

Effective Service Address: \_\_\_\_\_

Recipient: \_\_\_\_\_ Mobile Number: \_\_\_\_\_

Email: \_\_\_\_\_

Processing Bank: BANK OF JILIN \_\_\_\_\_

Legal Representative/Responsible Person: \_\_\_\_\_

Domicile Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

## Item 2 Account Information

The Applicant opens a(n) \_\_\_\_\_ deposit account at the Processing Bank, with the specific

details as follows:

Account Name : \_\_\_\_\_

Account Number : \_\_\_\_\_

**Item 3 Standardized abbreviation of the applicant**

Not applicable

Applicable \_\_\_\_\_

**Item 4 Name of Investor**

Name(s) of Contributor(s): (List all contributors in sequence) \_\_\_\_\_

**Item 5 Applicant of Electronic Password Payment**

Applicant	ID Name	ID Number	Phone Number

**Item 6 Large Payment Verification**

Verification method:  Check via Mini Program  Other \_\_\_\_\_

Per-Transaction Amount Exceeds or Reaches the Sum of CNY \_\_\_\_\_ (in capitals)

(¥ \_\_\_\_\_).

Contact Person Name (in Verification)	ID Name (Required for Mini Program Verification)	ID number (Required for Mini Program Verification)	Phone Number

**Item 7 Corporate SMS Alert Service**

Corporate SMS Alert:  Activate  Do not activate

Service Type:  Real-time Alerts  Scheduled Alerts

Balance Alerts  Threshold Alerts (Amount): \_\_\_\_\_

Phone Number	Service Type	Threshold Alert Amount
	<input type="checkbox"/> Real-time Alerts <input type="checkbox"/> Scheduled Alerts <input type="checkbox"/> Threshold Alerts <input type="checkbox"/> Balance Alerts	
	<input type="checkbox"/> Real-time Alerts <input type="checkbox"/> Scheduled Alerts <input type="checkbox"/> <input type="checkbox"/> Threshold Alerts <input type="checkbox"/> Balance Alerts	
	<input type="checkbox"/> Real-time Alerts <input type="checkbox"/> Scheduled Alerts <input type="checkbox"/> Threshold Alerts <input type="checkbox"/> Balance Alerts	
	<input type="checkbox"/> Real-time Alerts <input type="checkbox"/> Scheduled Alerts <input type="checkbox"/> Threshold Alerts <input type="checkbox"/> Balance Alerts	
	<input type="checkbox"/> Real-time Alerts <input type="checkbox"/> Scheduled Alerts <input type="checkbox"/> Threshold Alerts <input type="checkbox"/> Balance Alerts	

**Item 8 Self-Service Receipt Printing Terminal**

Self-Service Receipt Printing Terminal:     Activate     Do not activate

Usage Method:     IC Card \_\_\_\_\_ (Quantity)     Account Number + Password

**Item 9 Reconciliation Cycle, Reconciliation Delivery Method, and Reconciliation Contact Person**

Reconciliation cycle:     Monthly     Quarterly

Delivery Method for Bank-Enterprise Balance Statements:

E-Banking Reconciliation (If selected, must sign the Corporate Online Banking Service Agreement)

Collect Statements at Counter     Mail Statements

Other \_\_\_\_\_

Information of Reconciliation Contact Person:

Reconciliation Contact Person	ID Type	ID Number	Phone Number

## Item 10 Multi-Tier Account Service

### Multi-Tier Account Model:

- Virtual Master Account with Real Sub-accounts Type of Multi-Tier Account
- Real Master Account with Virtual Sub-accounts Type of Multi-Tier Account

### Interest Calculation Rules:

- Both Master account and sub-accounts accrue interest
- Master account accrues interest, sub-accounts do not accrue interest

### Legal Deduction Rules:

- Deduct in ascending order of sub-account serial numbers
- Deduct in descending order of sub-account serial numbers
- Prorate deduction proportionally based on amount



吉林銀行  
BANK OF JILIN

**Item 11 Client Beneficial Owner Information Collection**

Beneficial Owner 1: Name \_\_\_\_\_

Beneficial Owner Type:  Type 1  Type 2  Type 3  Type 4  Other

Specific Proportion	% (Mandatory for Type 1 & 2)	Actual Control Method	<input type="checkbox"/> Method 1 <input type="checkbox"/> Method 2 <input type="checkbox"/> Method 3 <input type="checkbox"/> Method 4 <input type="checkbox"/> Other (Mandatory for Type 3)			
Position Type		Beneficial Ownership	From _____(YEAR)_____(MONTH)_____ (DAY) to _____(YEAR)_____(MONTH)_____ (DAY) (if applicable)			
Contact Method	<input type="checkbox"/> Telephone <input type="checkbox"/> Email <input type="checkbox"/> Mail <input type="checkbox"/> Other		Detailed Contact Information			
ID Type	ID number	Date of birth		_____(YEAR)_____ (MONTH)_____ (DAY)		
ID Validity Period	_____(YEAR)_____(MONTH)_____ (DAY) to _____(YEAR)_____(MONTH)_____ (DAY)		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	Nationality	
Residential/Company Address						

Beneficial Owner 2: Name \_\_\_\_\_

Beneficial owner type:  Type 1  Type 2  Type 3  Type 4  Other

Specific Proportion	% (Mandatory for Type 1 & 2)	Actual Control Method	<input type="checkbox"/> Method 1 <input type="checkbox"/> Method 2 <input type="checkbox"/> Method 3 <input type="checkbox"/> Method 4 <input type="checkbox"/> Other (Mandatory for Type 3)			
Position Type		Beneficial Ownership	From _____(YEAR)_____(MONTH)_____(DAY) to _____(YEAR)_____(MONTH)_____(DAY) (if applicable)			
Contact Method	<input type="checkbox"/> Telephone <input type="checkbox"/> Email <input type="checkbox"/> Mail <input type="checkbox"/> Other		Detailed Contact Information			
ID Type	ID number	Date of birth		_____(YEAR)_____(MONTH)_____(DAY)		
ID Validity Period	_____(YEAR)_____(MONTH)_____(DAY) to _____(YEAR)_____(MONTH)_____(DAY)		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	Nationality	
Residential/Company Address						

Beneficial Owner 3: Name \_\_\_\_\_

Beneficial owner type:  Type 1  Type 2  Type 3  Type 4  Other

Specific Proportion	% (Mandatory for Type 1 & 2)	Actual Control Method	<input type="checkbox"/> Method 1 <input type="checkbox"/> Method 2 <input type="checkbox"/> Method 3 <input type="checkbox"/> Method 4 <input type="checkbox"/> Other (Mandatory for Type 3)			
Position Type		Beneficial Ownership	From _____(YEAR)_____(MONTH)_____ (DAY) to _____(YEAR)_____(MONTH)_____ (DAY) (if applicable)			
Contact Method	<input type="checkbox"/> Telephone <input type="checkbox"/> Email <input type="checkbox"/> Mail <input type="checkbox"/> Other		Detailed Contact Information			
ID Type	ID number	Date of birth		_____(YEAR)_____ (MONTH)_____ (DAY)		
ID Validity Period	_____(YEAR)_____(MONTH)_____ (DAY) to _____(YEAR)_____(MONTH)_____ (DAY)		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	Nationality	
Residential/Company Address						

Beneficial Owner 4: Name \_\_\_\_\_

Beneficial Owner Type:  Type 1  Type 2  Type 3  Type 4  Other

Specific Proportion	% (Mandatory for Type 1 & 2)	Actual Control Method	<input type="checkbox"/> Method 1 <input type="checkbox"/> Method 2 <input type="checkbox"/> Method 3 <input type="checkbox"/> Method 4 <input type="checkbox"/> Other (Mandatory for Type 3)			
Position Type		Beneficial Ownership	From _____(YEAR)_____(MONTH)_____ (DAY) to _____(YEAR)_____(MONTH)_____ (DAY) (if applicable)			
Contact Method	<input type="checkbox"/> Telephone <input type="checkbox"/> Email <input type="checkbox"/> Mail <input type="checkbox"/> Other		Detailed Contact Information			
ID Type	ID number	Date of birth		_____(YEAR)_____ (MONTH)_____ (DAY)		
ID Validity Period	_____(YEAR)_____(MONTH)_____ (DAY) to _____(YEAR)_____(MONTH)_____ (DAY)		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	Nationality	
Residential/Company Address						

Beneficial Owner 5: Name \_\_\_\_\_

Beneficial owner type:  Type 1  Type 2  Type 3  Type 4  Other

Specific Proportion	% (Mandatory for Type 1 & 2)	Actual Control Method	<input type="checkbox"/> Method 1 <input type="checkbox"/> Method 2 <input type="checkbox"/> Method 3 <input type="checkbox"/> Method 4 <input type="checkbox"/> Other (Mandatory for Type 3)			
Position Type		Beneficial Ownership	From _____ (YEAR) _____ (MONTH) _____ (DAY) to _____ (YEAR) _____ (MONTH) _____ (DAY) (if applicable)			
Contact Method	<input type="checkbox"/> Telephone <input type="checkbox"/> Email <input type="checkbox"/> Mail <input type="checkbox"/> Other		Detailed Contact Information			
ID Type	ID number	Date of birth		_____ (YEAR) _____ (MONTH) _____ (DAY)		
ID Validity Period	_____ (YEAR) _____ (MONTH) _____ (DAY) to _____ (YEAR) _____ (MONTH) _____ (DAY)		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	Nationality	
Residential/Company Address						

## **Item 12 Dispute Resolution**

Any dispute arising from or in connection with the conclusion or performance of this Agreement shall be resolved through friendly consultations between the parties. Should consultations fail, the parties may choose one of the following resolution methods:

**File a lawsuit with the People's Court with jurisdiction which locates at the domicile of the Processing Bank (including other institutions of Bank of Jilin entrusted, authorized, or assuming business under this Agreement), in accordance with the law.**

Apply for arbitration with the \_\_\_\_\_ Arbitration Commission in accordance with the law.

## **Item 13 Formation and Effectiveness of the Agreement**

13.1 The General Terms section and this Special Terms section collectively constitute the Management Agreement of RMB Bank Settlement Account for Organization. This Agreement shall be formed upon the Applicant's confirmation of the General Terms section, and the signing (or affixing of a personal seal) by the Applicant's Legal Representative (or person in charge of the company) or Authorized representative on this Special Terms section, together with the affixing of the official seal of the Applicant and the business seal of the Processing Bank.

This Agreement shall become effective after the Applicant's account opening application and relevant supporting documents have been reviewed by the Processing Bank and submitted to the local branch of the People's Bank of China for approval or record-filing. In the case of opening a temporary deposit account for capital verification of registration or capital increase, this Agreement shall become effective upon the affixing of the specimen bank seal by the contributor(s) on this Special Terms section and the business seal of the Processing Bank.

If the Applicant pre-signs for channel and product services simultaneously with the account application, this Agreement and the services hereunder shall become effective on the date the unit bank settlement account opened at the Processing Bank becomes effective (postponed in case of holidays). Services not applied for by the Applicant shall not take effect temporarily.

If the Applicant closes the unit bank settlement account opened at the Processing Bank, this Agreement shall automatically terminate from the date of official account closure, and all product services associated with that account shall simultaneously terminate automatically. If the Applicant breaches this Agreement or other business rules of the Processing Bank, the Processing Bank has the right to suspend or terminate this Agreement.

13.2 This Special Terms section is done in duplicate, with the Applicant and the Processing Bank each retaining one copy. Together with the General Terms section (electronic version), they constitute this Agreement and possess equal legal effect.

**The Applicant and the Processing Bank hereby confirm that the above special terms pertain to the elements of the business applied for by the Applicant. These contents form an integral part of the Management Agreement of RMB Bank Settlement Account for Organization, and the General Terms section possesses equal legal effect.**

**The Applicant declares: We possess the civil capacity for rights and civil capacity for conduct to enter into and perform this Agreement, have fully understood the contents hereof, and the execution and performance of this Agreement represent our true intent.**

**The Processing Bank has, in accordance with the law, brought to our attention the clauses which exempt the Processing Bank from liability, increase our liability, or exclude our rights (particularly those in bold and highlighted). At our request, the Processing Bank has explained the concepts, contents, and legal consequences of the relevant clauses. We have acknowledged and agreed to these before signing this Agreement.**

**The Applicant fully understands and is clearly aware of the legal responsibilities associated with leasing, lending, selling, or purchasing accounts. The Applicant commit to opening and using this account in accordance with the law and shall not illegally utilize this account to engage in illegal or criminal activities.**

**The Applicant acknowledges that Bank of Jilin may amend the content of this Agreement based on laws and regulations, regulatory requirements, Bank of Jilin's relevant business policies, and bank account risk management needs. Such amendments will be announced through the official website of Bank of Jilin and the "Ji Hang e-Service" Mini Program.**

**Special Note: Your deposit at the Processing Bank is covered by the national deposit insurance system. The Processing Bank has paid the insurance premium for you; no additional payment is required from you. The safety of your deposit and your legitimate rights and interests are protected by national law and the deposit insurance system in accordance with the relevant provisions of the Deposit Insurance Regulations.**

**Specimen Bank Seal of Contributor(s):** \_\_\_\_\_

\_\_\_\_\_ (YEAR) \_\_\_\_\_ (MONTH) \_\_\_\_\_ (DAY)

OR

**Applicant (Official Seal):** \_\_\_\_\_

**Legal Representative/Responsible Person**

**(or Authorized representative)**

**Signature or Personal Seal:**

\_\_\_\_\_ (YEAR) \_\_\_\_\_ (MONTH) \_\_\_\_\_ (DAY)

**Processing Bank (Business Seal):** \_\_\_\_\_

\_\_\_\_\_ (YEAR) \_\_\_\_\_ (MONTH) \_\_\_\_\_ (DAY)



**Annex 1**

**Institutional Tax Residency Self-Certification Form**

Name of Institution: \_\_\_\_\_

**1. Institution Type:**

- 1. Passive non-financial institution (Passive NFE) (If selected, please also complete the Controlling Person(s) Tax Residency Self-Certification Form)
- 2. Other non-financial Entity

**2. Tax Residency of the Institution:**

- 1. Tax resident only of China (If selected, proceed directly to Section 5)
- 2. Tax resident only of a jurisdiction other than China
- 3. Tax resident of both China and another jurisdiction(s)

**3. Basic Information of the Institution**

- 1. Name of Institution (English): \_\_\_\_\_
- 2. Institution Address (English or Pinyin): \_\_\_\_\_ (Country) \_\_\_\_\_ (Province) \_\_\_\_\_ (City) \_\_\_\_\_
- 3. Address of Institution (Chinese): \_\_\_\_\_ (Country) \_\_\_\_\_ (Province) \_\_\_\_\_ (City) \_\_\_\_\_  
(Optional for overseas addresses)

**4. Tax Residency Jurisdiction(s) and Taxpayer Identification Number (TIN):**

- 1. \_\_\_\_\_
- 2. (if any) \_\_\_\_\_
- 3. (if any) \_\_\_\_\_

If a TIN cannot be provided, please indicate the reason:

- The jurisdiction does not issue TINs
- The Account Holder is unable to obtain a TIN. If selected, please explain the reason:  
\_\_\_\_\_

**5. I confirm that the information provided above is true, accurate, and complete. I agree to notify your institution within 30 days if any of this information changes. Otherwise, I shall bear the adverse consequences resulting therefrom.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Capacity of Signatory:  Individual (in person)  Authorized Signatory of the Institution

## **Instructions for Completing Annex 1:**

1. The term "Chinese tax resident" referred to in this form means an enterprise or other organization that is established within China under Chinese law, or that is established under the laws of a foreign country (region) but has its place of effective management within China.

2. The term "Non-resident" referred to in this form means an enterprise (including other organizations) that is not a Chinese tax resident, but excludes government agencies, international organizations, central banks, financial institutions, or companies whose shares are traded on a securities market and their affiliated entities. The aforementioned "securities market" refers to a market recognized and regulated by the local government. For the rules for identifying tax residency in other jurisdictions and relevant information on Taxpayer Identification Numbers (TINs), please refer to the website of the State Taxation Administration ([http://www.chinatax.gov.cn/aeoi\\_index.html](http://www.chinatax.gov.cn/aeoi_index.html)).

3. Financial Institutions include depository institutions, custodial institutions, investment entities, specified insurance companies, and their branches.

(1) A "Depository Institution" is an entity that accepts deposits in the ordinary course of its banking or similar business.

(2) A "Custodial Institution" is an entity that derives more than 20% of its gross income during the preceding three calendar years (or the existence period if shorter) from holding financial assets for customers.

(3) An "Investment Entity" is an entity that meets one of the following conditions:

A. It derives more than 50% of its gross income during the preceding three calendar years (or the existence period if shorter) from investing, reinvesting, or trading in financial assets on behalf of customers;

B. It is managed by a Depository Institution, a Custodial Institution, a Specified Insurance Company, or an Investment Entity described in A above; and derives more than 50% of its gross income during the preceding three calendar years (or the existence period if shorter) from investing, reinvesting, or trading in financial assets;

C. It is an investment fund established for the purpose of investing, reinvesting, or trading in financial assets, such as a securities investment fund or a private investment fund.

(4) A "Specified Insurance Company" is any entity that is engaged in the business of issuing, or is obligated to make payments with respect to, cash value insurance or annuity contracts. The term "Insurance Company" referred to in this form means an entity with gross income from insurance, reinsurance, and annuity contracts exceeding 50% of its total gross income during the preceding calendar year, or with assets related to insurance, reinsurance, and annuity contracts exceeding 50% of its total assets at the end of the preceding calendar year.

4.A "Passive Non-Financial Entity (Passive NFE)" means:

(1) Any NFE with more than 50% of its gross income during the preceding calendar year being passive income (e.g., dividends, interest, rents, royalties excluding those derived from active trade or business, and income from the sale of financial assets that produce such income);

(2) Any NFE with more than 50% of its assets held during the preceding calendar year being assets that produce or are held for the production of passive income (can be determined based on audited financial statements);

(3) An investment entity that is a tax resident in a jurisdiction that does not participate in the automatic exchange of financial account information for tax purposes. The list of jurisdictions participating in the automatic exchange of financial account information can be found on the State Taxation Administration website ([http://www.chinatax.gov.cn/aeoi\\_index.html](http://www.chinatax.gov.cn/aeoi_index.html)). The tax residency of a Financial Institution is generally determined by the jurisdiction under whose laws it is governed. In the case of a trust that is a Financial Institution, the tax residency is generally determined by the residency of the trustee(s). If a Financial Institution (other than a trust) is not a tax resident of any jurisdiction, it may be treated as a tax resident of the jurisdiction where its place of effective management or its governing body is situated. Companies, partnerships, trusts, and funds can all be Passive NFEs.

5. A "Controlling Person" is a natural person who exercises control over an entity. The Controlling Person(s) of a company is determined in the following order of priority:

(1) A natural person(s) who directly or indirectly owns more than 25% of the company's shares or voting rights;

(2) A natural person(s) who exercises control over the company through other means such as personnel, finance, etc.;

(3) A senior managing official(s) of the company.

The Controlling Person(s) of a partnership is a natural person(s) who owns more than 25% of the partnership interests. The Controlling Person(s) of a trust includes the settlor(s), trustee(s), beneficiary(ies), and any other natural person(s) exercising ultimate effective control over the trust. The Controlling Person(s) of a fund is a natural person(s) holding more than 25% of the interest or otherwise exercising control over the fund.

6. Government agencies, international organizations, central banks, financial institutions, listed companies and their affiliates, as well as public institutions, the military, armed police forces, neighborhood committees, village committees, community committees, social groups, and other similar entities are not required to complete this self-certification form.

**Annex 2**

**Controlling Person(s) Tax Residency Self-Certification Form**

Name: \_\_\_\_\_

- I declare that I am:  1. A tax resident only of China  
 2. A tax resident only of a jurisdiction other than China  
 3. A tax resident of both China and another jurisdiction(s)

If you selected option 2 or 3 above, please complete the following information:

**1. Information on the Controlled Entity**

Name of Controlled Entity (English): \_\_\_\_\_

Address of Controlled Entity (English or Pinyin):

(Country) \_\_\_\_\_ (Province) \_\_\_\_\_ (City) \_\_\_\_\_

Tax Residency Jurisdiction(s) and Taxpayer Identification Number (TIN):

\_\_\_\_\_

**2. Information on the Controlling Person**

Surname (English/Pinyin): \_\_\_\_\_ Given Name(s) (English/Pinyin): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ (YEAR) \_\_\_\_\_ (MONTH) \_\_\_\_\_ (DAY)

Current Residential Address (Chinese):

(Country) \_\_\_\_\_ (Province) \_\_\_\_\_ (City) \_\_\_\_\_ (Optional for overseas addresses)

(English/Pinyin):

(Country) \_\_\_\_\_ (Province) \_\_\_\_\_ (City) \_\_\_\_\_

Place of Birth (Chinese):

(Country) \_\_\_\_\_ (Province) \_\_\_\_\_ (City) \_\_\_\_\_ (Optional for overseas addresses)

(English/Pinyin):

(Country) \_\_\_\_\_ (Province) \_\_\_\_\_ (City) \_\_\_\_\_

Tax Residency Jurisdiction(s) and Taxpayer Identification Number (TIN):

1. \_\_\_\_\_

2. (if any) \_\_\_\_\_

3. (if any) \_\_\_\_\_

If a TIN cannot be provided, please indicate the reason:

- The jurisdiction does not issue TINs

The Account Holder is unable to obtain a TIN. If selected, please explain the reason:

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**3. I confirm that the information provided above is true, accurate, and complete. I agree to notify your institution within 30 days if any of this information changes. Otherwise, I shall be responsible for the adverse consequences resulting therefrom.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_(YEAR)\_\_\_\_\_ (MONTH)\_\_\_\_\_ (DAY)

Capacity of Signatory:    Individual (in person)    Authorized Signatory of  
the Institution

**Instructions for Completing Annex 2:**

1. The term "Chinese tax resident" referred to in this form means an individual who either: has a domicile in China due to household registration, family, or economic interests, and is habitually resident in China; or has no domicile in China but has resided in China for 183 days or more in aggregate within a tax year.

2. The term "Non-resident" referred to in this form means an individual who is not a Chinese tax resident. For the rules for identifying tax residency in other jurisdictions and relevant information on Taxpayer Identification Numbers (TINs), please refer to the website of the State Taxation Administration ([http://www.chinatax.gov.cn/aeoi\\_index.html](http://www.chinatax.gov.cn/aeoi_index.html)).

