



Re: Auric Ventures International LLC: EB-5 Regional Center
Investor Suitability Questionnaire

Dear Prospective Investor:

Thank you for your interest in a prospective EB-5 visa through Auric Ventures International LLC (“AVI”)’s EB-5 Regional Center. We kindly request that you accurately complete the attached “Investor Suitability Questionnaire” (“Questionnaire”).

The Questionnaire is required to determine preliminary eligibility as a prospective investor in the EB-5 Regional Center Program, as well as to satisfy AVI’s due diligence responsibilities as an EB-5 Regional Center.

Please be advised that: (1) the Questionnaire is entirely confidential and completed Questionnaires will be kept with AVI; (2) the Questionnaire is not an application to United States Citizenship & Immigration Services (“USCIS”) for an EB-5 visa; and (3) completion of the Questionnaire does not guarantee acceptance as an investor to this EB-5 Regional Center.

After you have completed the Questionnaire, kindly sign and date the Questionnaire, and return it to our attention *via* e-mail or regular mail, at the address below with a copy of the personal data page of your valid passport and/or current United States visa, as well as all supporting documentation from the Questionnaire.

Lastly, please contact us as soon as practicable at the contact information below should you have questions concerning any of the foregoing.

Best regards,

/s/ AURIC VENTURES INTERNATIONAL LLC
14 Penn Plaza, Suite 1315
New York, NY 10122
+1 (212) 265-8280
info@eb5center.nyc

Encl./

INVESTOR SUITABILITY QUESTIONNAIRE

Please respond to all applicable items in the Questionnaire. If any item is not applicable to you, kindly mark "N/A" to any such item.

A. PRIMARY APPLICANT INFORMATION

1. Full Legal Name: _____
(Last Name, First Name, Middle Initial)
2. Maiden Name: _____
3. Gender: ☐ Male ☐ Female
4. Mobile Phone No.: _____
5. E-Mail Address: _____
6. Marital Status: ☐ Single ☐ Married ☐ Divorced ☐ Widowed
7. Date of Birth: _____
(Month / Day / Year)
8. Place of Birth: _____
(City & Country)
9. Citizenship: _____
(Country)
10. Passport Issued By: _____
(Country)
11. Passport No.: _____
12. Passport Issued: _____
(Date)
13. Passport Expiry: _____
(Date)
14. English Language: ☐ Fluent ☐ Conversational ☐ Translator Required
15. Other Nationalities: _____

B. PRESENT APPLICANT ADDRESS ABROAD (IF APPLICABLE)

1. Country: _____
2. Street Address: _____

(Street Address / City / State or Province / Postal Code)
3. Home Phone No.: _____
4. Work Phone No.: _____

C. PRESENT APPLICANT UNITED STATES ADDRESS (IF APPLICABLE)

1. Street Address: _____

(Street Address / City / State / Postal Code)
2. Home Phone No.: _____
3. Work Phone No.: _____

D. IF APPLICANT CURRENTLY RESIDING WITHIN THE UNITED STATES

1. Visa Category: ☐ B Visitor
☐ F / M Student
☐ J1 / J2 Exchange Visitor
☐ Work Visa (Category) _____
☐ Other Visa (Category) _____
2. Visa Issuance Date: _____
3. Visa Expiry Date: _____
4. I-94 Issuance Date: _____
5. I-94 Expiry Date: _____
6. Last US Entry Date: _____
7. Last US Entry Place: _____

E. SPOUSE INFORMATION

1. Full Legal Name: _____
2. Maiden Name: _____
3. Gender: ☐ Male ☐ Female
4. Date of Birth: _____
(Month / Day / Year)
5. Place of Birth: _____
(City & Country)
6. Citizenship: _____
(Country)
7. Passport Issued By: _____
(Country)
8. Passport No.: _____
9. Passport Issued: _____
(Date)
10. Passport Expiry: _____
(Date)

F. CHILD OR CHILDREN INFORMATION

1. Please provide the following information about your children under the age of 21.

<u>Full Legal Name</u>	<u>Date of Birth</u> (Month / Day / Year)	<u>Place of Birth</u> (City & Country)	<u>Present Address</u> (Check <input type="checkbox"/> If Same)
a.			<input type="checkbox"/>
b.			<input type="checkbox"/>
c.			<input type="checkbox"/>

2. Do any children turn 21 years old within the next year? ☐ Yes ☐ No
3. If you answered "Yes" to Question "F2", please indicate which child or children, if any, will turn 21 within the next year.
☐ 1(a) ☐ 1(b) ☐ 1(c)

G. PRIOR APPLICANT VISAS TO THE UNITED STATES

1. Have you ever been issued a US Visa? ☐ Yes ☐ No
2. Last US Visa Date? _____
3. Last US Visa Type? _____
4. Have you ever been fingerprinted? ☐ Yes ☐ No
5. Has your US Visa ever been lost or stolen? ☐ Yes ☐ No
6. Has your US Visa ever been cancelled or revoked? ☐ Yes ☐ No
7. Have you ever been refused a US Visa? ☐ Yes ☐ No
8. If you answered "Yes", please explain. _____

9. Have you ever been denied entry to the US? ☐ Yes ☐ No
10. If you answered "Yes", please explain. _____

11. Are you currently a Green Card holder? ☐ Yes ☐ No
12. If you answered "Yes", when does it expire? _____

H. EMPLOYMENT & WORK HISTORY

1. Name of Employer: _____
2. Business Address: _____

(Street Address / City / State or Province / Postal Code)

3. Work Phone No.: _____
4. Current Occupation: _____
4. Current Position: _____
5. Start Date: _____
(Month / Year)
6. Annual Salary: _____
7. Other Compensation: _____
8. Are you a full-time student? ☐ Yes ☐ No
9. Are you retired? ☐ Yes ☐ No

I. FINANCIAL CONDITION

1. **Sophistication – All Investors.** Do you, either individually or with your purchase representative or representatives, if any, possess sufficient knowledge and experience in financial and business matters to be capable of evaluating the merits and risks of this investment?
☐ Yes ☐ No
2. Do you have an average annual income of two hundred thousand USD (\$200,000.00) for the past three (3) years?
☐ Yes ☐ No
3. Do you have a combined marital income of three hundred thousand USD (\$300,000.00) for the past three (3) years?
☐ Yes ☐ No
4. Do you have a net worth in excess of one million USD (\$1,000,000.00)?
☐ Yes ☐ No

J. SOURCE OF INVESTMENT FUNDS

1. Please describe the source of funds or assets intended for the prospective EB-5 investment.
- | | |
|---|---|
| <input type="checkbox"/> Savings | <input type="checkbox"/> Family Loan |
| <input type="checkbox"/> Bank/Mortgage Loan | <input type="checkbox"/> Corporate Loan |
| <input type="checkbox"/> Gift/Inheritance | <input type="checkbox"/> Other |

2. Location of Assets: ☐ United States ☐ Abroad ☐ Both
3. If Abroad, which Country? _____
4. Do you have copies of your last 5 years of personal income tax returns?
☐ Yes ☐ No
5. If “No”, is personal income tax paid in your country of tax residence?
☐ Yes ☐ No
6. Have all of the funds and/or assets used for this investment been legally obtained?
☐ Yes ☐ No

K. IMMIGRATION HISTORY

If you answer “Yes” to any of the following, please attach a written explanation of the subject circumstances as an addendum to this Questionnaire.

1. Have you or your spouse ever been arrested, charged with a crime, or convicted of a crime, even if subject to a pardon or amnesty? ☐ Yes ☐ No
2. Have you ever been involved in money laundering? ☐ Yes ☐ No
3. Have you or your spouse ever filed for bankruptcy? ☐ Yes ☐ No
4. Do you have communicable diseases that endanger the public, such as tuberculosis or other such communicable diseases? ☐ Yes ☐ No
6. Do you have a mental or physical disorder that poses a threat, or is likely to pose a threat to the safety or welfare of yourself or others? ☐ Yes ☐ No
7. Are you or have you ever been a drug abuser or drug addict? ☐ Yes ☐ No
8. Have you or your spouse ever overstayed a US Visa? ☐ Yes ☐ No
9. Have you or your spouse ever been deported from the US? ☐ Yes ☐ No
10. Have you or your spouse ever been refused admission to the US? ☐ Yes ☐ No

11. Have you ever lied or committed fraud to obtain a US Visa? ☐ Yes ☐ No
12. Have you ever stated to a US immigration officer or other US government official that you are a US citizen? ☐ Yes ☐ No
13. Have you ever voted or registered to vote in a US election? ☐ Yes ☐ No
14. Do you seek to engage in espionage, sabotage, export control violations, or other such illegal activities within the US? ☐ Yes ☐ No
15. Have you ever been involved with a paramilitary, vigilante, rebel, guerrilla, or other such insurgent organization? ☐ Yes ☐ No
16. Do you seek to engage in terrorist activities in the US or are you a member of a terrorist organization? ☐ Yes ☐ No
17. Have you ever engaged in terrorist activities in any country? ☐ Yes ☐ No
18. Have you ever provided financial or other support to a terrorist organization, or do you intend to provide financial support to a terrorist organization? ☐ Yes ☐ No
19. Have you ever incited or participated in torture, extrajudicial killings, political or religious killings, and/or severe violations of religious freedom? ☐ Yes ☐ No
20. Have you ever incited or participated in a genocide? ☐ Yes ☐ No
21. Have you ever been a member of the Nazi Party? ☐ Yes ☐ No

L. ADDITIONAL DOCUMENTS & INFORMATION
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Once you have completed the Questionnaire, please execute it, and send copies of the following identification documents for the Primary Applicant, and if applicable, any spouse and/or children *via* mail or e-mail:

1. A copy of a valid government issued national identity card with photograph.
2. A copy of the personal identification page of a valid passport.
3. If applicable, a copy of a current US Visa stamp, visitor Visa, or Form I-797 Visa Approval Notice.
4. If applicable, a copy of Form I-94 of each member of your family within the US.

Please be advised that should you proceed with your EB-5 Visa Petition, United States Citizenship & Immigration Services (“USCIS”) may require copies of any or all of the following documents in support of your petition:

5. Signed personal income tax returns filed with the Taxing Authority of your country of tax residence for the last five (5) years.
6. If applicable, other documents filed with the Taxing Authority of your country of tax residence that prove compliance with your obligations to pay tax on the income you earn, for the last five (5) years.
7. Bank statements of at least three (3) to six (6) months for each account used in the transaction.
8. If applicable, wire transfer confirmations for money wire transferred.
9. Ownership documents proving ownership of shares in a company.
10. Notorial deeds or contracts confirming ownership of real estate assets.
11. Written deed of gift of any assets or cash gifted to the investor.
12. If applicable, foreign business registration records of companies you own.
13. If applicable, signed business income tax returns filed with the relevant Taxing Authority for the last five (5) years for the main companies, which provide you with income.

L. CERTIFICATION

I, the undersigned, hereby certify that all of the information I have provided on this Questionnaire, inclusive of all supporting documentation and addenda, is true and accurate, and has been completed to the best of my ability.

Print Name: _____

Sign Name: _____

Dated: _____