

Form No. 2

Information applicable to Non-Profit Organizations (NPOs) for filing the Beneficial Owners Declaration with the Central Bank of Costa Rica.

Identification Number	
Corporate Name	
Commercial Name	
Date of Incorporation	
Purpose and Objectives of Activities	
Country of Incorporation	
Main Economic Activity	
Phone Number	
Email	
Physical Address for Location (Province, Canton, District).	
Exact Address	
Parent Association and corresponding country (if applicable).	

Identifying Information of Control Structure Members (Board of Directors, Executive Management, Administrative Council, Directors, or equivalents).

For Individuals with Costa Rican-issued Identification (cedula, DIMEX, DIDI):	
Type of Identification	
ID Number	
Full Name	
Date of Birth	
Place of Birth	
Deceased Status (if applicable)	
Nationality	
Primary Phone Number	
Secondary Phone Number	
Email	
Country of Residence	
Physical Address for Location (Province, Canton, District).	
Exact Address	
Postal Code	

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**Datos identificativos de los miembros de la estructura de control
(sea Junta Directiva, Cuerpo Gerencial, Consejo de Administración, Directores o equivalentes).**

For Foreign Individuals (passport or other identification document issued abroad):

Type of Identification	
Nationality of Identification	
ID Number	
Date of Birth	
Full Name	
Country of Birth	
Expiration Date of Identification	
Nationality	
Phone Number	
Secondary Phone Number	
Email	
Country of Residence	
Physical Address for Location (Province, Canton, District).	
Exact Address	
Postal Code	

Donors of NPOs.

National Individuals:

Type of Person	
Amount Donated	
Condition when the amount donated refers to goods (if applicable).	
Type of Identification	
ID Number	
Full Name	
Date of Birth	
Place of Birth	
Deceased Status (if applicable)	
Nationality	

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Donors of NPOs.

Foreign Individuals:	
Type of Person	
Amount Donated	
Condition when the amount donated refers to goods (if applicable)	
Type of Identification	
Nationality of Identification	
ID Number	
Date of Birth	
Full Name	
Country of Birth	
Domestic legal entity	
Type of entity	
Amount donated	
Condition when the donated amount refers to goods (when applicable).	
National Legal Entities:	
Type of Person	
Amount Donated	
Condition when the amount donated refers to goods (if applicable).	
Legal ID Number	
Corporate Name	
Country of Incorporation	
Commercial Name	
Date of Incorporation	
Foreign Legal Entities:	
Type of Person	
Amount Donated	
Condition when the amount donated refers to goods (if applicable).	
ID Number	
Corporate Name	

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Beneficiaries of NPO Donations

For each beneficiary of NPO donations, the same information required for donors must be reported, depending on whether they are national or foreign individuals or legal entities.

Income and Expenses Detail

Submit a file with the detailed income and expenses, understood as the "Income Statement" and the "Trial Balance" or, alternatively, an auxiliary income and expense report where the total annual amounts for the reporting period are reflected, and segregated on a monthly basis.

Person Submitting the Information: Legal Representative or Attorney.

Must be the individual registered as the entity's legal representative in the Public Registry, or alternatively, and exceptionally, a Special Power of Attorney may be granted.

Identification Information:	
Type of Identification:	
ID Number:	
Full Name:	
Date of Birth:	
Place of Birth:	
Nationality:	
Phone Number:	
Secondary Phone Number:	
Email:	
Country of Residence:	
Physical Address for Location (Province, Canton, District).	
Exact Address:	
Postal Code:	