

EB-5 INVESTOR SUITABILITY EVALUATION

Personal & Confidential

PRIMARY APPLICANT INFORMATION:					
Applicant / Investor Name (in English)	:				
Full Name In Native Alphabet:					
Gender: Male	☐ Female	Marital Statu	s: Married Divorced	☐ Single ☐ Widowed	
Date of Birth (month/day/year)	Place of Birth (City/Country)		Country of Citizenship		
Home / Work Phone Number		Mobile Phone Nu	ımber		
Email Address		Skype Account			
Passport Issued by (Country)		Passport Numbe	er		
Passport Issued (date)		Passport Expiry (date)		
Passport Issued (date)					
PESENT RESIDENCE AND ADDRE	SS:				
Street Address					
C'h.		Chata / Duanin as			
City		State / Province			
Country		Postal / Zip Code	<u> </u>		

INFORMATION ABOUT YOUR SPOUSE:				
Full Legal Name (in English):				
Full Name In Native Alphabet				
C 1		Maiden Name	(if applicable)	
Gender: Male	Gender:			
Date of Birth (month/day/year)	Place of Birth (City/Country)		Country of Citizenship	
	(10,000)			
INFORMATION ABOUT YOUR CH	IILDREN:			
Full Legal Name:				
Full Name In Native Alphabet				
Gender:				
Male	F	emale		
Date of Birth (month/day/year)	Place of Birth (City/Country)		Country of Citizenship	
			, .	
CURRENT EMPLOYMENT:				
Employer (name of business)				
Business Address				
City State / Provinc		State / Province		
Country		Postal / Zip Code		
Position Start Date				
Annual Salary Other Compensation				

GENERAL INFORMATION:				
GLINERAL INFORMATION.				
Have you or your spouse ever filed for Bankruptcy? If yes, please use separate page to explain			Yes	☐ No
Have you or your spouse ever been convicted of a crime? If yes, please use separate page to explain	?		☐ Yes	□ No
How well do you speak English?	Need Transl	lation	☐ Conversational	☐ Fluent
Anticipated date of your I-526 Submission (month/day/y	rear)			
APPLICANTS CURRENTLY LIVING IN THE UNITED	STATES:			
U.S. Address				
City		State / Province	ie .	,
Country		Postal / Zip Co	ode	
		104"/		1 10
Date of Arrival (month/day/year)		1-94 # (arrival a	and departure record	· #)
I-94 Issuance Date (month/day/year)		I-94 Expiration	Date (month/day/yo	ear)
The state of the control of the state of the				
Current Immigration Status	1	Expiration Dat	e	
Date of Last Entry into the U.S.		Place of Last E	ntry into the U.S.	
Social Security Number (if any) Alien Number		(if any)		
If you already have a SSN, do you want the Social Security Administration to issue you a New card?				
GENERAL IMMIGRATION QUESTIONS:				
Are you currently a Green Card holder? If yes, when does it expire?			☐ Yes	☐ No
Have you previously been issued a U.S. Visa?			☐ Yes	☐ No
If yes, what type of Visa? Is yes, wh	en was your la	ist Date of entry?		
Have you ever stayed in the U.S. beyond authorization?			Yes	☐ No
If yes, please explain the circumstances				
Have you ever previously been denied a U.S. Visa?				
			☐ Yes	☐ No
If yes, please provide details of why application was d	lenied on a se	eparate page.	<u> </u>	_

Are there any children listed on the preliminary questionnaire that will turn 21 years of age within the r If yes, please provide name and date of birth of child. Yes	next year??	
Is there any other relevant information regarding your current immigration that we should be aware of your family?	for you or any mer	nber of
If yes, please explain in separate page		
US ADMISSABILITY VERIFICATION:		
UNITED STATES LAWS GOVERNING THE ISSUANCE OF VISAS REQUIRE EACH APPLICANT OR NOT BE OR SHE IS A MEMBER OF ANY CLASS OF INDIVIDUALS EXCLUDED FROM AD UNITED STATES. THE EXCLUDABLE CLASSES ARE DESCRIBED BELOW IN GENERAL TERMS. CAREFULLY THE FOLLOWING LIST AND ANSWER YES OR NO TO EACH CATEGORY. THE A WILL ASSIST THE CONSULAR OFFICER TO REACH A DECISION ON YOUR ELIGIBILITY TO EXCEPT AS OTHERWISE PROVDIED BY LAW, ALIENS WITHIN THE FOLLOWING CLASS	MISSION INTO THE . YOU SHOULD REA INSWERS YOU GIVE) RECEIVE A VISA.	E JD
INELIGIBLE TO RECEIVE A VISA.		
DO ANY OF THE FOLLOWING CLASSES APPLY TO YOU?		
(check the yes/no box that applies to you for each question)	YES	NO
Have you ever been convicted of any offense or crime?		
Have you ever applied for a Social Security Number (SSN)?		
Have you ever been refused admission to the United States at a port-of-entry?		
An alien who has a communicable disease of public health significance; who has failed to present documentation of having received vaccinations in accordance with U.S. law; who has or has had a physical or mental disorder that poses or is likely to pose a threat to the safety or		
welfare of the alien or others; or who is a drug abuser or addict.		

An alien who seeks to enter the United States to engage in espionage, sabotage, export control violations, terrorist activities, the overthrow of the Government of the United States or other unlawful activity; who is a member of or affiliated with the Communist or other totalitarian party; who participated in Nazi persecutions or genocide; who has engaged in genocide; or who is a member or representative or a terrorist organization as currently designated by the U.S. Secretary of State.	
An alien who is likely to become a public charge.	
An alien who seeks to enter for the purpose of performing skilled or unskilled labor who has not been certified by the Secretary of Labor; who is a graduate of a foreign medical school seeking to perform medical services who has not passed the NBME exam or its equivalent; or who is a health care worker seeking to perform such work without a certificate from the CGFNS or from an equivalent approved independent organization.	
An alien who failed to attend a hearing on deportation or inadmissibility within the last 5 years; who seeks or has sought a visa, entry into the United States, or any immigration benefit by fraud or misrepresentation; who knowingly assisted any other alien to enter or try to enter the United States in violation of law; who, after November 30, 1996, attended in student (F) visa status a U.S. public elementary school or who attended a U.S. public secondary school without reimbursing the school; or who is subject to a civil penalty under INA 274C.	
An alien who is permanently ineligible for U.S. citizenship; or who departed the United States to evade military service in time or war.	
An alien who was previously ordered removed within the last 5 years or ordered removed a second within the last 20 years; who was previously unlawfully present and ordered removed within the last 10 years or ordered removed a second time within the last 20 years; who was convicted of an aggravated felony and ordered removed; who was previously unlawfully present in the United States for more than 180 days but less than one year who voluntarily departed within the last 3 years; or who was unlawfully present for more than one year or an aggregate of one year within the last 10 years.	
An alien who is coming to the United States to practice polygamy; who withholds custody of a U.S. citizen child outside the United States from a person granted legal custody by a U.S. court or intentionally assists another person to do so; who has voted in the United States in violation of any law or regulation; or who renounced U.S. citizenship to avoid taxation.	
An alien who is former exchange visitor who has not fulfilled the 2-year foreign residence requirement.	
An alien determined by the Attorney General to have knowingly made a frivolous application for asylum.	
An alien who has ordered, carried out or materially assisted in extrajudicial and political killings and other acts of violence against the Haitian people; who has directly or indirectly assisted or supported any of the groups in Colombia known as FARC, ELN, or AUC; who through abuse of a governmental or political position has converted for personal gain, confiscated or expropriated property in Cuba, a claim to which is owned by a national of the United States, has trafficked in such property or has been convicted in such conversion, has committed similar acts in another country, or is the spouse, minor child or agent of an alien who has committed such acts; who has been directly involved in the establishment or enforcement of population controls forcing a woman to undergo an abortion against her free choice or a man or a woman to undergo sterilization against his or her free choice; or who has disclosed or trafficked in confidential U.S. business information obtained in connection with U.S. participation in the Chemical Weapons Convention or is the spouse, minor child or agent or such a person.	
CONSENT TO DISCLOSURE: I authorize disclosure of information from this form to the Department of Homeland Security (DHS), the Social Security Administration (SSA), such other U.S. government agencies as may be required for the purpose of assigning me an SSN and issuing me a Social Security card, and I authorize the SSA to share my SSN with USCIS. The applicant's response does not limit or restrict the Government's ability to obtain his or her SSN, or other information on this form, for enforcement or other purposes as authorized by law. You must answer YES to this question in order to receive an SSN and/or card.	

ADDITIONAL INFORMATION REQUES	TED				
Have you retained an Immigration Attorney?] Yes	☐ No	
If yes, please provide contact information for our files.					
If no, do you need a referral?] Yes	☐ No	
Were you referred to us by someone?					
If yes, please provide name and contact information for our files.			Yes	☐ No	
ii yes, picase provide name and contac	e information for our mes.]	,		
ASSETS AND SOURCE OF FUNDS:					
Please use separate page if needed.					
ASSETS	AMOUNT		SOUF	RCE OF FUNDS	
CHECKING ACCOUNT	\$				
SAVINGS ACCOUNT	\$				
INVESTMENTS	\$				
(Stocks, Bonds & Mutual Funds)					
BUSINESS INCOME	\$				
REAL ESTATE	\$				
INHERITANCE	\$				
GIFT*	\$				
LOAN	\$				
OTHER	\$				
* Note: if an asset is a gift, source of funds parents' real estate. TOTA	for the gift needs to be explained. i.e	. \$250,00	0 gift from parents	, source of funds: sale of	
SOURCE OF FUNDS FOR INVESTMENT	Τ·				
Please use separate page if needed.	•				
OF THE ABOVE ASSETS, WHICH WILL CON Please be as specific as possible when completing					
ASSETS	AMOUNT		SOUF	RCE OF FUNDS	
	\$				
	¢				
	7				
	\$				
	\$				
TOTAL INVESTMENT	\$ 500,000				
DETERMINATION OF ACCREDITED IN	VESTOR STATUS:				
What is your main EB-5 green card investme	nt goal?				
○ To achieve financial security	○ To generate son	ne income	for now and some gi	rowth for later	
To obtain a green card for me	ighest gro	owth possible for my	future		
To obtain green cards for my immediate family members					

In what type of Regional Center project are you interested in?					
☐ Loan Type					
☐ Equity Type					
☐ I do not have a preference					
Do you have any preference on a specific geographic area?					
Yes. Where					
□ No.					
Which industry would you like to invest in?					
☐ Hotel/ Restaurant / Entertainment and Recreation Facility					
Commercial office / Residential Property / Senior Housing					
☐ Infrastructure / Utility					
Public Facility, such as Medical Centers, Stadiums and Universities					
Retail / Shopping Mall					
☐ Mining					
Agriculture / Farm					
☐ High Technology					
Other					
☐ No preference					
Is government involvement (Grants, Bonds, other financial subsidiary) in the project important to you?					
Yes					
□ No					
☐ Other					
How many investors do you expect to see in a Regional Center?					
Less than 30 EB-5 Investors					
30 - 80 EB-5 Investors					
■ 80 - 150 EB-5 Investors					
More than 150 EB-5 investors					
☐ No preference					
How much Administration Fee are you willing to pay the EB-5 Regional Center?					
Less than \$35,000					
S35,000 - \$50,000					
☐ Above \$50,000					
☐ No preference					
What do you expect the time horizon for this investment to be?					
2 - 5 years					
○ 6 - 10 years					
Over 10 years					

What do you cons	sider to be an acceptable rate of return for	your EB-5 investment?	
C Less than or equ	ıal to 1%	6% - 9%	
<u> </u>		More than 9%	
<u>3</u> % - 5%			
Which of the follo	wing statements best describes your react	tion if the value of your portfolio de	clined 15% over a period of one year?
O I would be conc	erned because I can only accept minor fluctuat	ions in the value of my portfolio.	
O I am willing to ex	xperience some additional risk to potentially ol	otain modest returns. However, I am mo	ore concerned with capital preservation.
O I invest for long-	term growth and can accept temporary change	ed due to market fluctuation.	
Prior investment	experience:		
My business or	investment experience is such that I can analyz	e a prospective investment and determ	ine whether it is suitable for me.
I normally cons	ult with an investment advisor before making a	n investment decision.	
I have experience	as an investor in:		
Stocks which ar	re listed on a national securities exchange.		
Mutual funds w	hich hold a portfolio primarily consisting of sto	cks.	
Taxable exemp	t bonds.		
Partnerships, lir	mited liability companies, corporations which in	nvest in real estate or real estate investn	nent trusts (REIT's)
Other types of i	nvestments not mentioned in any of the previo	ous categories.	
The undersigned	is an accredited investor by reason of at le	ast one of the following (check ever	y item that applies):
	either individually or with my spouse) is at least f my total assets (excluding my principal reside		orth" means the amount by which the fair
	nnual income was at least US \$200,000 in each idual annual income" means my gross income		
My annual inco	me, jointly with my spouse, was at least US \$30	0,000 in each of the two most recent ye	ars, and i expect such income in the current
year.			
VERIFICATION:			
Please supply cop	oies of at least two (2) of the following docu	uments via fax or e-mail for the appl	icant and the spouse:
2. Valid p 3. Nation	overnment issued drivers license including bassport (copy of picture page) al Identity card of current US visa (if inside the United State		
	of I-94 (if inside the United States) ertificates for investor and all non-U.S. dep	andants (lang form naming both n	aronto)
	ge certificates	endents (long form, naming both p	arents)
I hereby acknowle to review the infor		te and truthful as of this date. My sign	nature on this page allows Exclusive Visa LLC
Signature		Date	