

Account Privacy Information

Trust is Salesforce's number 1 value and as part of our commitment to Trust, we want to be transparent with you.

We are asking you for certain personal details in order to ensure that we have a contact to liaise with to ensure these compliance forms are kept up to date and renewed.

It is in Salesforce's legitimate interest to ensure the compliance of our partner ecosystem.

Your information will only be shared within Salesforce and not with any third parties, other than with Salesforce's external counsel for compliance reasons, and also those third parties within your own partner community, which may include accounts from entities within your own group structure, such as entities you have acquired, and/or subsidiaries in other countries.

The personal data submitted will only be retained for as long as necessary to provide our products and services, and in support of our partner ecosystem compliance-related obligations, and we may retain that information beyond that period if necessary for legal, operational or other legitimate reasons.

By submitting your information today, you acknowledge that you are sharing this information for these purposes and as described above.

For any concerns about your privacy or for more details about your rights, please reach out to our Data Protection Officer at privacy@salesforce.com .

I've read and understand this privacy notice

Attestation

By submitting this form, you attest that (1) the information you have provided in this form is true to the best of your knowledge after reasonable inquiry and (2) if you are submitting this form on behalf of a company or other legal entity, that you have the authority to do so.



I've read and understand this attestation



Terms & Definitions

This questionnaire includes a few terms with specific definitions. When you see these terms, here's what we mean.

"Organization" means the legal entity that will be signing a partnership agreement with Salesforce.

"Government Official" means anyone that is, works for, or on the behalf of a (1) national, regional, municipal, or local government; (2) department, agency, subsidiary, or branch of a national, regional, municipal, or local government; (3) government-owned or government-controlled company (example: a state-owned oil company, bank, airline, hospital, public university, etc.); (4) subsidiary of a government-owned or government- controlled company; (5) public international organization (examples: the International Monetary Fund, the United Nations, the World Bank, the World Trade Organization, etc.); (6) member of a royal family; or (7) political party, political party official, or candidate for political office. It should also be understood to encompass political parties and political campaigns as entities themselves, as well as their candidates, officials, and employees.

"Government-Owned or Government-Controlled Entities" mean a (1) national, regional, municipal, or local government; (2) department, agency, subsidiary, or branch of a national, regional, municipal, or local government; (3) government-owned or government- controlled company (for example, a state-owned oil company, bank, airline, public university, hospital, etc.); (4) subsidiary of a government-owned or government-controlled company; (5) public international organization (for example, the International Monetary Fund, the United Nations, the World Bank, the World Trade Organization, etc.); (6) company owned or controlled by a royal family; or (7) political party or political campaign.

I've read and understand these terms and definitions

Contact Information

First Name	Last Name		
Job Title	Phone Numbe	er	
Email			



General Business Information

- 1. Provide the full legal name of the Organization that will be signing a partnership agreement with Salesforce. Use the name that appears on the Organization's formation documents. Example: "Skynet LLC" or "Skynet GmbH", not "Skynet".
- If the Organization has done or currently does business by different names, including personal names, provide those names. Example: "Skynet LLC d/b/a CRM Legends". If not applicable, enter "N/A".
- 3. Provide the URL of the Organization's main website.
- 4. Briefly describe the nature of the Organization's business, including how a partnership with Salesforce would fit into the Organization's business model.

5. If the Organization is a legal entity, provide the date of formation.



6. If the Organization is a legal entity, provide the place of formation, including city and country. *If not applicable, enter "N/A".*



7. If the Organization is a legal entity, *attach* any documentation of formation or incorporation.



8. If the Organization previously conducted business under a different name, including a personal name, provide those names, along with approximate time periods. *If not applicable, enter "N/A".*

Name	Approximate Time Period

9. Provide the street address, city, state, and ZIP code for the Organization's primary place of business.

Street		
City	State	ZIP
Country		

10. Provide the street address, city, state, and zip code for the Organization's registered address.

Street				
City		State	ZIP	
Country				

11. Is the Organization publicly listed on a stock exchange?



12. Provide the name of the stock exchange and the Organization's ticker symbol. *If not applicable, enter "N/A".*





13. If the Organization is NOT publicly listed, how is the ownership of the Organization structured? *If not applicable, enter "N/A".*

14. List all shareholders holding more than a 15% stake and the interest percentage held by each. *If not applicable, enter "N/A".*

Full Name	Position

15. If the Organization is NOT publicly listed, provide all Government-Owned/Controlled Entities and current or former Government Officials who hold more than a 5% stake in the Organization. *If not applicable, enter "N/A".*

Name	Government Position



Key Management

1. Identify the Organization's key management by position, including the person responsible for legal or compliance.

Full Name	Position

Board of Directors

1. List the members of the Organization's Board of Directors. Include the positions they hold in any other Corporate Affiliation. Example: Board of Directors at Other Company LLC. If not applicable, enter "N/A".

"Affiliate" means any entity that directly or indirectly controls, is controlled by, or is under common control with the subject entity. For purposes of this definition, "Control" means direct or indirect ownership or control of more than 50% of the voting interests of the subject entity.

Full Name	Position(s) in any other Corporate Affiliation(s)



BUSINESS & GOVERNMENT RELATIONSHIPS

Salesforce Relationship

1. <u>Has the Organization previously been approved as a partner or reseller by Salesforce?</u>

2. Does the Organization have a current or past business relationship with Salesforce? *If yes, specify the relationship type(s). If not applicable, select "N/A".*

ISV = Independent Software Vendor OEM = Original Equipment Manufacturer VAR = Value-Added Reseller

- 3. Provide the name of your primary point of contact at Salesforce. *If not applicable, enter "N/A".*
- 4. How did you come to know about Salesforce?



Business Information and Government Relationships

1. List the names of any individuals who referred you to Salesforce, along with their associated organizations. Specify any Government Officials and/or Government-Owned or Government-Controlled Entities. *If not applicable, enter "N/A".*

Full Name	Job Title	Organization	Government Officials and/or Government-Owned or Government-Controlled Entities.

2. List the countries where the Organization will be providing goods or services under its agreement with Salesforce.

3. Will the Organization use, hire, engage, or pay any consultants, re-sellers, sub-distributors, intermediaries or other third parties, including affiliates of the Organization, to obtain or retain customers for (or sales of) Salesforce products and services?

"Affiliate" means any entity that directly or indirectly controls, is controlled by, or is under common control with the subject entity. For purposes of this definition, "Control" means direct or indirect ownership or control of more than 50% of the voting interests of the subject entity.





If yes, provide the following for each third party: name, primary address, relationship to Organization, and activities to be performed, and reasons for needing to use the third party. If not applicable, enter "N/A".

Name	Primary Address	Relationship To Organization	Activities	Reasons for using third party

4. Do you propose to sell to or interact with any Government Officials or Government-Owned or Government-Controlled Entities in connection with your Salesforce-related business?

If yes, provide more detail about which government entities, including the name of the government entities, and the countries they are located in, if known. If known. If not applicable, enter "N/A".

Name	Country of location

5. Does any Government Employee or Official have any economic or ownership interest in the business that the Organization is conducting with Salesforce?





If yes, provide the following for each Government Employee or Official: full name, government entity, and description of the economic or ownership interest. If not applicable, enter "N/A".

Full Name	Government Entity	Description of Economic or Ownership Interest

6. Do any Government Officials or family members of Government Officials have a role at the Organization as an Executive, Board Member, or employee doing Salesforce-related work?

If yes, provide the following for each Executive, Board Member, or employee: full name, relationship to Government Official, name of Government Official, government entity, and years of employment at government entity. If not applicable, enter "N/A".

Full Name	Relationship to Government Official	Name of Government Official	Government Entity	Years of employment a Government Entity

7. Have any of your Organization's Board Members, or key employees involved in the Salesforce partnership, ever been employed by Salesforce?



If yes, list the names of the Board Members or key employees, along with approximate start and end dates while employed at Salesforce. Provide the dates in MM/DD/YYYY format. If not applicable, enter "N/A".

Board Members or key employees	Start Date	End Date

8. Do any of the Organization's Board Members or employees have a familial relationship with a Salesforce employee or board member?

If yes, provide the following for each Board Member or employee: full name of Organization employee, job title of Organization employee, relationship to Salesforce employee or board member, and name of Salesforce employee or board member. If not applicable, enter "N/A".

Full Name	Job Title	Relationship to Salesforce employee	Name of Salesforce employee



Financial Information

Specify a contact at a bank, credit institution, or accounting firm whom we can contact about the financial standing of the Organization.

Entity Name	Address	Website	Contact Name

Business References

List three representatives from distinct organizations whom we may contact and who can speak to the Organization's experience providing the type of services the Organization will provide under its partnership/reseller agreement with Salesforce. For each representative, provide a full name, the company the person works for, and an email or phone number. References should not be employed by Salesforce, the Organization, or the Organization's affiliates.

"Affiliate" means any entity that directly or indirectly controls, is controlled by, or is under common control with the subject entity. For purposes of this definition, "Control" means direct or indirect ownership or control of more than 50% of the voting interests of the subject entity.

Full Name	Company Name	Email Address or Phone Number

COMPLIANCE INFORMATION

1. Does the Organization have an ethics and compliance program?

If yes, <u>attach</u> the Organization's compliance-related code(s), procedure(s), or policy(ies) in one attachment.



2. Describe the content of any training related to the Organization's ethics and compliance program. *If not applicable, enter "N/A".*

3. Describe the frequency of any trainings related to the Organization's ethics and compliance program. *If not applicable, enter "N/A".*

 Describe the categories of employees that are included in any trainings related to the Organization's ethics and compliance program. If not applicable, enter "N/A".

5. Describe how the Organization assists management and employees in confidentially reporting suspected fraud, abuse, and other misconduct in the workplace. *If not applicable, enter "N/A".*



6. Has the Organization, any associated entity, any individual in this Due Diligence Questionnaire, or any present or former owner, director, employee, or third party of the Organization been, in the last ten years: (a) suspended or debarred from doing business by any local, national, or international government authority; (b) investigated for or charged with any criminal act; (c) the subject of any allegation or investigation of fraud, misrepresentation, bribery, corruption, tax evasion, sanctions violations or other related activities; or (d) mentioned in the media or press for having been involved in any such improper activity?

If yes, provide a description. If not applicable, enter "N/A".

7. Do you have any reason to believe that your Organization has engaged in any acts of fraud, misrepresentations, bribery, corruption, tax evasion, sanctions violations, or similar activities?

If yes, provide a description. If not applicable, enter "N/A"

8. Is the Organization compliant with U.S. laws (and similar laws of other countries) that restrict the sale of goods and services to certain embargoed countries and individuals on denied parties lists?

For more details about prohibited countries and denied parties, go to: <u>https://www.salesforce.com/company/legal/compliance/</u>



CERTIFICATION

Please append the following documents to this Due Diligence Questionnaire. Check the boxes below to indicate that these documents are included in your submission. If any requested document is not applicable, please do not check the corresponding box.



Documentation of formation or incorporation.

Documentation showing that the Entity is properly registered, licensed, and/or authorized to perform the proposed services in those jurisdictions relevant to the proposed business relationship.

List of all shareholders (or, quota holders, members, partners, etc., as the case may be) holding more than a fifteen percent (15%) stake in the Entity, and the interest percentage held by each. Please also list all current or former Government Officials who hold more than a five percent (5%) stake in the Entity.



List of any other beneficial owners who are not shareholders (or, quota holders, members, partners, etc., as the case may be), and a description of the arrangement through which they hold beneficial ownership of some or all of the Entity. Please identify any beneficial owners who are current or former Government Officials.



Copy of any written compliance-related code, procedure, or policy addressing anti-corruption compliance, business ethics, payments of commissions, gifts and/or entertainment for customers or Government Officials, or related topics.

Letter of good standing from your bank, if necessary.

I have reviewed this Due Diligence Questionnaire and I declare that the information provided is accurate and complete to the best of my knowledge and belief.

Name of Company:	Signature:
Date:	Typed Name and Title: (must be a senior officer of the Company, or of the division/business unit):