



Please read the following instructions before completing this form.

Regulations based on the OECD Common Reporting Standard ("CRS") require the collection of certain information about the tax residency status of each entity account holder and its Controlling Person(s), as applicable. In certain circumstances, there may be a requirement to share this information with relevant tax authorities. The account holder is responsible for advising its Controlling Person(s) that information may be shared with relevant tax authorities.

Definitions of relevant terms can be found in the Appendix, which is a separate attachment to this form.

This form will remain valid unless there is a change in circumstances relating to the tax status of the entity account holder and/or its controlling person(s), or other mandatory fields included on this form. The account holder must notify us of a change in circumstances that makes the information in this self-certification incorrect or incomplete and provide an updated self-certification.

This form is intended to request information only where such request is not prohibited by local law.

Please complete this form where you need to self-certify on behalf of an entity account holder, and any Controlling Person(s) if applicable.

Where the Account Holder is a Passive NFE, or an Investment Entity located in a Non-Participating Jurisdiction managed by another Financial Institution

Please provide information on the natural person(s) who exercise(s) control over the Account Holder (individuals referred to as Controlling Person(s)) by completing Part 4 for each Controlling Person. This information should also be provided by all Investment Entities located in a Non-Participating Jurisdiction and managed by another Financial Institution even if they also fall into a category of "Non-Reporting Financial Institution".

If you are completing the form on the Account Holder's behalf,

Then you should indicate the capacity in which you have signed in Part 5. For example you may be the custodian or nominee of an account on behalf of the account holder, or you may be completing the form under a signatory authority or power of attorney.

Any section or field marked with an asterisk (*) is mandatory and must be completed for all entities.

As a financial institution, we are not allowed to give tax advice.

If you have any questions about this form, these instructions, or defining your tax residency status, please speak to your tax adviser or local tax authority.

You can also find out more, including a list of jurisdictions that have signed agreements to automatically exchange information, along with details about the information being requested, on the [OECD automatic exchange of information portal](#).

Please complete Parts 1 - Part 4 in BLOCK CAPITALS.

Part 1 - Identification of Account Holder

A. **Legal Name of Entity/Branch*** _____

B. **Country of incorporation or organisation** _____

C. **Permanent Residence Address** (Do not use a P.O. Box (unless this is your registered address), or an 'in care of' address)

Street address* _____

Town/City/Province/County/State* _____

Country* _____

Postal Code/ZIP Code (if any):* _____

D. **Mailing Address** (please only complete if different from the address shown in Section C above)

Street address _____

Town/City/Province/County/State _____

Country _____

Postal Code/ZIP Code _____

Part 2 - Entity Type* Please provide the Account Holder's status by ticking one of the following boxes.

A. Financial Institution:

- (1) Investment Entity managed by another Financial Institution
(Note: If the entity is located in a Non-Participating Jurisdiction, please complete Part 4*)
- (2) Other Investment Entity
- (3) Financial Institution (other) - i.e., Depository Institution, Custodial Institution, or Specified Insurance Company

B. Non-Financial Entity (NFE):

- (1) Active NFE - a corporation the stock of which is regularly traded on an established securities market or a corporation which is a related entity of such a corporation
(Complete Section B (1.1) or B (1.2) below)*
- (2) Active NFE - a Government Entity
- (3) Active NFE - an International Organization
- (4) Active NFE - a Central Bank
- (5) Active NFE - other than (1) to (4) (for example a start-up NFE or a non-profit NFE)
- (6) Passive NFE (Complete Part 4) *
- (7) Strata Corporation

B (1.1) Please complete if the entity is a corporation the stock of which is regularly traded on an established securities market:
Provide the name of one established securities market on which the stock is regularly traded:

B (1.2) Please complete if the entity is a related entity of a corporation that is regularly traded:
Provide the name of the regularly traded corporation that the Entity is a related entity of:

Provide the name of one established securities market on which the regularly traded corporation is traded:

Part 3 - Country of Residence for Tax Purposes and related Taxpayer Identification Number or functional equivalent ("TIN") *

Please complete the following table indicating (i) where the Account Holder is tax resident and (ii) the Account Holder's TIN or functional equivalent for each country indicated.

If the Account Holder is tax resident in more than three (3) countries please use a separate sheet (Sign and date the separate sheet and attach it to this form).

Note:

- (1) If the Account Holder is not tax resident in any jurisdiction (e.g., because it is fiscally transparent), please indicate 'NONE' in line 1 of the 'Country of Tax Residence' column.
- (2) If a TIN is unavailable for any jurisdiction, please provide the appropriate reason - **A, B or C**:
 - Reason A** - *The country/jurisdiction where the Account holder is resident does not issue TINs to its residents.*
 - Reason B** - *The Account Holder is otherwise unable to obtain a TIN or equivalent number. (If Reason B is entered, please explain why you are unable to obtain a TIN in the Explanation section below).*
 - Reason C** - *No TIN is required. (Note: Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction)*

	Country/Jurisdiction of Tax Residence	TIN	If no TIN available enter Reason A, B or C
1			
2			
3			

Explanation: If Reason B is selected above, please explain in the following boxes why you are unable to obtain a TIN.

1	
2	
3	

Part 4 - Identification of Controlling Persons *(complete only if entity is a Passive NFE or an 'Investment Entity managed by another Financial Institution and located in a Non-Participating Jurisdiction')*

This section **must** be completed if it was previously indicated in Part 2 that the entity is a 'Passive NFE' or an 'Investment Entity managed by another Financial Institution and located in a Non-Participating Jurisdiction'.

Please complete the table below for **each** Controlling Person.

- If there are more than three (3) Controlling persons please use a separate sheet *(Sign and date the separate sheet and attach it to this form)*.
- If a controlling Person is tax resident in more than three (3) countries please use a separate sheet *(Sign and date the separate sheet and attach it to this form)*.

Controlling Persons are defined as natural persons who exercise control over an entity *(see definition of Controlling Person(s) in the Appendix)*. In the case of a Trust, this means:

- The settlor
- The trustees
- The protector (if any)
- The beneficiaries or class of beneficiaries, and
- Any other natural person exercising ultimate effective control over the Trust

In the case of a legal arrangement other than a Trust, it means persons in equivalent or similar positions. The term "Controlling Persons" must be interpreted in a manner consistent with the Recommendations of the Financial Action Task Force.

Note: If there are no natural person(s) who exercise control of the Entity then the Controlling Person will be the natural person(s) who hold the position of senior managing official.

Controlling Person 1

Name of Controlling Person	Family Name or Surname(s)* _____ First or Given Name* _____
Current Residence Address	Street address* _____ _____ Town/City/Province/County/State* _____ Country* _____ Postal Code/ZIP Code (if any)* _____
Mailing Address <i>(Only complete if different from the address above)</i>	Street address _____ _____ Town/City/Province/County/State _____ Country _____ Postal Code/ZIP Code _____
Date of Birth* <i>(DD/MM/YYYY)</i>	_____

Please complete the following table indicating (i) where the Controlling Person is tax resident and (ii) the Controlling Person's TIN or functional equivalent for each country indicated. *If the Controlling Person is tax resident in more than three (3) countries please use a separate sheet (Sign and date the separate sheet and attach it to this form).*

Note:

(1) If a TIN is unavailable please provide the appropriate reason - **A, B** or **C**:

Reason A - *The country/jurisdiction where the Controlling Person is resident does not issue TINs to its residents.*

Reason B - *The Controlling Person is otherwise unable to obtain a TIN or equivalent number. (If **Reason B** is entered, please explain why the Controlling Person is unable to obtain a TIN in the **Explanation** section below).*

Reason C - *No TIN is required. (**Note:** Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction)*

	Country/Jurisdiction of Tax Residence	TIN	If no TIN available enter Reason A, B or C
1			
2			
3			

Explanation: If **Reason B** is selected above, please explain in the following boxes why the Controlling Person is unable to obtain a TIN.

1	
2	
3	

Type of Controlling Person*

Please provide the Controlling Person's Status by ticking the appropriate box.

- Controlling Person of a legal person - **control by ownership**
- Controlling Person of a legal person - **control by other means**
- Controlling Person of a legal person - **senior managing official**
- Controlling Person of a trust - **settlor**
- Controlling Person of a trust - **trustee**
- Controlling Person of a trust - **protector**
- Controlling Person of a trust - **beneficiary**
- Controlling Person of a trust - **other**
- Controlling Person of a legal arrangement (non-trust) - **settlor-equivalent**
- Controlling Person of a legal arrangement (non-trust) - **trustee-equivalent**
- Controlling Person of a legal arrangement (non-trust) - **protector-equivalent**
- Controlling Person of a legal arrangement (non-trust) - **beneficiary-equivalent**
- Controlling Person of a legal arrangement (non-trust) - **other-equivalent**

Controlling Person 2

Name of Controlling Person	Family Name or Surname(s)* _____ First or Given Name* _____
Current Residence Address	Street Address* _____ _____ Town/City/Province/County/State* _____ Country* _____ Postal Code/ZIP Code (if any)* _____
Mailing Address <i>(Only complete if different from the address above)</i>	Street address _____ _____ Town/City/Province/County/State _____ Country _____ Postal Code/ZIP Code _____
Date of Birth* <i>(DD/MM/YYYY)</i>	_____

Please complete the following table indicating (i) where the Controlling Person is tax resident and (ii) the Controlling Person's TIN or functional equivalent for each country indicated. *If the Controlling Person is tax resident in more than three (3) countries please use a separate sheet (Sign and date the separate sheet and attach it to this form).*

Note:

(1) If a TIN is unavailable please provide the appropriate reason - **A, B** or **C**:

Reason A - *The country/jurisdiction where the Controlling Person is resident does not issue TINs to its residents.*

Reason B - *The Controlling Person is otherwise unable to obtain a TIN or equivalent number. (If **Reason B** is entered, please explain why the Controlling Person is unable to obtain a TIN in the **Explanation** section below).*

Reason C - *No TIN is required. (**Note:** Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction)*

	Country/Jurisdiction of Tax Residence	TIN	If no TIN available enter Reason A, B or C
1			
2			
3			

Explanation: If **Reason B** is selected above, please explain in the following boxes why the Controlling Person is unable to obtain a TIN.

1	
2	
3	

Type of Controlling Person*

Please provide the Controlling Person's Status by ticking the appropriate box.

- Controlling Person of a legal person - **control by ownership**
- Controlling Person of a legal person - **control by other means**
- Controlling Person of a legal person - **senior managing official**
- Controlling Person of a trust - **settlor**
- Controlling Person of a trust - **trustee**
- Controlling Person of a trust - **protector**
- Controlling Person of a trust - **beneficiary**
- Controlling Person of a trust - **other**
- Controlling Person of a legal arrangement (non-trust) - **settlor-equivalent**
- Controlling Person of a legal arrangement (non-trust) - **trustee-equivalent**
- Controlling Person of a legal arrangement (non-trust) - **protector-equivalent**
- Controlling Person of a legal arrangement (non-trust) - **beneficiary-equivalent**
- Controlling Person of a legal arrangement (non-trust) - **other-equivalent**

Controlling Person 3

Name of Controlling Person	Family Name or Surname(s)* _____ First or Given Name* _____
Current Residence Address	Street address* _____ _____ Town/City/Province/County/State* _____ Country* _____ Postal Code/ZIP Code (if any)* _____
Mailing Address <i>(Only complete if different from the address above)</i>	Street address _____ _____ Town/City/Province/County/State _____ Country _____ Postal Code/ZIP Code _____
Date of Birth* <i>(DD/MM/YYYY)</i>	_____

Please complete the following table indicating (i) where the Controlling Person is tax resident and (ii) the Controlling Person's TIN or functional equivalent for each country indicated. *If the Controlling Person is tax resident in more than three (3) countries please use a separate sheet (Sign and date the separate sheet and attach it to this form).*

Note:

(1) If a TIN is unavailable please provide the appropriate reason - **A, B** or **C**:

Reason A - *The country/jurisdiction where the Controlling Person is resident does not issue TINs to its residents.*

Reason B - *The Controlling Person is otherwise unable to obtain a TIN or equivalent number. (If Reason B is entered, please explain why the Controlling Person is unable to obtain a TIN in the **Explanation** section below).*

Reason C - *No TIN is required. (Note: Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction)*

	Country/Jurisdiction of Tax Residence	TIN	If no TIN available enter Reason A, B or C
1			
2			
3			

Explanation: If Reason B is selected above, please explain in the following boxes why the Controlling Person is unable to obtain a TIN.

1	
2	
3	

Type of Controlling Person*

Please provide the Controlling Person's Status by ticking the appropriate box.

- Controlling Person of a legal person - **control by ownership**
- Controlling Person of a legal person - **control by other means**
- Controlling Person of a legal person - **senior managing official**
- Controlling Person of a trust - **settlor**
- Controlling Person of a trust - **trustee**
- Controlling Person of a trust - **protector**
- Controlling Person of a trust - **beneficiary**
- Controlling Person of a trust - **other**
- Controlling Person of a legal arrangement (non-trust) - **settlor-equivalent**
- Controlling Person of a legal arrangement (non-trust) - **trustee-equivalent**
- Controlling Person of a legal arrangement (non-trust) - **protector-equivalent**
- Controlling Person of a legal arrangement (non-trust) - **beneficiary-equivalent**
- Controlling Person of a legal arrangement (non-trust) - **other-equivalent**

Part 5 - Declaration and Signature*

- 1) I declare that the information provided in this form is, to the best of my knowledge and belief, accurate and complete.
- 2) I undertake to notify the recipient promptly of any change in circumstances that causes any information on this form to become incorrect, (including any change to the information on Controlling Persons identified in Part 4), and to provide a suitably updated form within 30 days of such change in circumstances.
- 3) I acknowledge that the information contained in this form and information regarding the Account Holder and its controlling persons, as applicable, and any Reportable Account(s) may be reported to the tax authorities of the country/ies in which the account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the Account Holder may be tax resident where those countries (or tax authorities in those countries) have entered into Agreements to exchange financial account information with the country/ies in which this account(s) is/are maintained.
- 4) I certify that I am authorised to sign for the Account Holder in respect of all the account(s) to which this form relates.

Signature:* _____

Print name:* _____

Date:* (dd/mm/yyyy) _____

Note: Please indicate the capacity in which you are signing the form (for example 'Authorised Officer').
If signing under a power of attorney please also attach a certified copy of the power of attorney.

Capacity: * _____