Tax Status Declaration Form – Entity

Purpose

This form is designed to let us know your residency and status for tax purposes. The information you give us should relate to the entity which own(s) the income and the assets associated with an account that we, the Bank, maintain.

Please don't use this form if you're an individual. Instead, please ask us for a copy of the tax status declaration form for individuals – you can do this by getting in touch with us.

Your information

Part 1 - Customer identification

Depending on the countries or territories in which the entity or controlling person(s) is a tax resident, we, the Bank, may be required to disclose certain information regarding the entity or controlling person(s) to the tax authority of the jurisdiction in which the entity holds its account. If the Bank provides the information to its local tax authorities, then the local tax authorities may exchange this information with the foreign tax authorities of the countries or territories in which the entity or controlling person(s) is a tax resident.

Complete, where applicable, the relevant sections below and provide any additional information as may be required.

Please fill in the form in BLOCK CAPITALS and return it to us. If you have any questions about how to complete this form, please contact your tax advisor. For further information please visit our website.

	
Name of entity:	
Country of incorporation:	
Permanent residence address:	
(Do not use a P.O. box or an 'in care of	of address')
Address line 1:	
Address line 2:	
City or town:	
County, region, state or province:	
Post/zip code:	
Country:	

Mailing address (if differer	it from permanent address	s)			
Address line 1:					
Address line 2:					
City or town:					
County, region, state or prov	rince:				
Post/zip code:					
Country:					
Part 2 – Tax residency	information				
Please list below:					
 The entity's Tax paye 	or the purposes of taxation, or Identification Number (TIN n tax resident in the count of the applicable dates	I) in each co	untry (or initia	l to indicate a	•
colocida piodos cintol	the applicable dates				
		Initial If TIN unavailable	Tax resident for the last calendar year (Y/N)	in the last c	sidency has changed alendar year please de dates below
Country	TIN			From	To
		 			

Part 3 – Entity certification

Please identify the account holder as one of the following:	
(a) Specified US person	
(b) US person other than a specified US person	
(c) Non-US person	
If the account holder is a specified US person or a US person other than a specified US person, provide the US TIN:	
Is the account holder treated as a trust in its country or territory of tax residency?:	YES NO

If yes, please enclose a certified copy of the trust deed

Part 4 – Entity's Tax status certification

We are required to identify customers tax residencies and tax statuses, therefore please complete the Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) tax status certifications sections below. The tax status definitions and criteria differ under the legislations so you are required to select one option each from Section A and Section B

For further information on FATCA and CRS, and/or to help determine what type of entity you are for international tax sharing reporting purposes please see our website **www.rbs.co.uk/taxresidency**

Section A - FATCA tax status certification

Non-Financial Foreign Entity (NFFE)

Active NFFE

For an entity classified for tax purposes as a foreign financial institution \underline{ONLY} complete the section I	pelow.
Foreign Financial Institution If the entity is a Foreign Financial Institution ("FFI") for tax purposes, under the aforementioned international agreements, please tick the box and complete either section (a) or (b).	
(a) Please provide the FFI's Global Intermediary Identification Number ("GIIN"):	
If you do not have a GIIN but you are sponsored by another FFI which does have one, please fill in your sponsoring FFI's GIIN above and their name in the box below:	
(b) If you can't provide a GIIN, please detail the reason why:	
For an entity classified for tax purposes as a non-financial foreign entity, <u>ONLY</u> complete the section below.	

If the entity is not one of the above classifications in Section A, please indicate the tax classification below. For a list of acceptable 'other' classifications please visit www.rbs.co.uk/taxresidency

(Sponsored) Direct

Reporting NFFE

If the entity is a non-financial foreign entity for tax purposes, confirm your classification below:

Passive NFFE (please

complete Section C)

Other tax classification:		

Section B - CRS tax status certification

For an entity classified for tax purposes as a Financial Institution <u>ONLY</u> complete the Section below. Please select one of the following classifications:

(a) Financia	al Institution – Investment Entity			
i) An Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution (Please complete Section C)				
ii) Other Investment Entity				
	al Institution which is a depositary institution, custodial institution or a ed Insurance Company			
(c) Financi	al Institution which is non reporting, select one:			
i.	Government Entity			
ii.	International Organisation			
iii.	Central Bank			
iv.	Broad Participation Retirement Fund			
٧.	Narrow Participation Retirement Fund			
vi.	Pension Fund of (i) – (iii) above			
vii.	Exempt Collective Investment Vehicle			
viii.	Trustee – Documented Trust			
ix.	Qualified Credit Card Issuer			
х.	Other			
	ty classified for tax purposes as a non-financial entity, <u>ONLY</u> he section below. Please select one of the following classifications:			
	IFE – a corporation where the stock is regularly traded on an established narket or related entity of such corporation			
i.	Please provide the name of the established securities market on which the corporation is traded:			
ii.	If you are a related entity of a regularly traded corporation, please provide the name of regularly traded corporation:			
(e) Active NFE – Government Entity				
(f) Active NFE – an International Organisation				
(g) Active NFE – other than (d)-(f) above				
(h) Passive	(h) Passive NFE – please complete Section C			

Section C – Controlling person(s) – Only fill this in if you've ticked that you're a Passive NFFE in Section 4A or a Passive NFE or an Investment Entity located in a Non-Participating Jurisdiction in Section 4B

Please complete the table below with details of each controlling person. If you need more space, then please continue on a separate sheet, sign it, date it, and attach it to this form.

Name and Date of Birth (DD/MM/YYYY) of the controlling person	Permanent residence address of the controlling person (Don't use a P.O. box or an 'in care of address')	Tax residence(s) for each controlling person (list all)	TIN(s), if any, for each controlling person (list all)

Part 5 – Declaration and signature

- 1. I authorise the Bank to provide, directly or indirectly, to any relevant tax authorities or any party authorised to audit or conduct a similar control of the Bank for tax purposes, a copy of this form and to disclose to such tax authorities or such party any additional information that the Bank may have in its possession that is relevant to the entity's qualification for any benefits claimed on the basis of this declaration. I acknowledge and agree that information contained in this form and information regarding the account(s) and income paid or credited to or for the benefit of the account(s) maintained by the Bank and held by the entity may be reported to the tax authorities of the country in which such income arises and that those tax authorities may provide the information to the country or countries in which the entity is a resident for tax purposes.
- 2. I authorise the Bank to provide, directly or indirectly, a copy of this form and any information regarding the entity that the Bank may have in its possession, and information regarding the account(s) and the income paid or credited to or for the benefit of the account(s) maintained by the Bank and held by the entity to: (i) any person that has control, receipt, or custody of income to which this form relates; (ii) any person that can disburse or make payments of income to which this form relates; or (iii) any party authorised to audit or conduct a similar control of aforementioned persons for tax purposes.
- 3. I will advise the Bank of any change in circumstances which causes the information the entity has provided to become incorrect and to provide the Bank with an updated declaration within 30 days of a change in circumstances.
- 4. I declare that I have reviewed the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify that the entity identified in Part 1 is the owner of all the accounts and the income to which this form relates.
- 5. I confirm that I have obtained the consent of or have the authority from each controlling person to: (i) provide such personal data in relation to these individuals to the Bank for the purposes as set out in this form; and (ii) permit the Bank to provide, directly or indirectly, such personal data to any relevant tax authority or any party authorised to audit or conduct a similar control of the Bank for tax purposes, whether or not such tax authority is located within the European Economic Area.

Please note that: (i) the Bank shall only process and transfer personal data collected in this form or other relevant account details for the purposes as set out in this form; (ii) the Bank shall make sure appropriate technical and organisational security measures will be taken to prevent unauthorised or unlawful processing, accidental loss of or destruction or damage to such personal data; and (iii) any personal data which is collected, stored or transferred by the Bank shall be subject to the Bank's Privacy Policy

I certify that I am an authorised signatory on the account(s) identified in Part 1 of this form.) and have the ca	pacity to sign for the entity
Sign here:	Print name:	
Date:		
(DD-MM-YYYY)		
Please indicate the capacity in which you have acted here.		