

# **OANDA Global Markets Limited**

# **Corporate Application Form**

Please ensure all the documentation listed below is provided when this application is submitted, and depending upon circumstances additional documentation may be requested.

| Document Poquired  | Document(s) Provided |    |  |
|--|----------------------|----|--|
| Document Required  | Yes                  | No |  |
| Completed OANDA Corporate Application Form   |                      |    |  |
| Certificate of Incorporation Or where available a recently issued 'Certificate of Incumbency'  |                      |    |  |
| Memorandums & Articles of Association  |                      |    |  |
| Certified copy of the Shareholders/ Members Register   |                      |    |  |
| Certified copy of the Directors Register   |                      |    |  |
| Proof of Trading Company Address (may be Bank statement, see below)  |                      |    |  |
| Company Bank Statement (must be dated within the last 3 months)  |                      |    |  |
| Last 2 years of Company Financial Statements   |                      |    |  |
| Identification document (passport, DL, ID Card) and address verification document (bank statement, utility bill, etc.) for <b>two Directors</b> and <b>all shareholders with a 10%</b> or over holding |                      |    |  |

In addition, please provide the following documentation where applicable.

| Document Required  | Document Provided |     |    |
|--|-------------------|-----|----|
| Document Required  | Y                 | 'es | No |
| Regulated Company AML Questionnaire Form – Appendix 1 (Only required when the company is a Financial Services company) |                   |     |    |
| Company FATCA IGA & CRS Self-Certification Form – Appendix 3   |                   |     |    |



# **COMPANY INFORMATION**

| Full Legal Company Name:                          |                          |  |
|---|--------------------------|--|
| Entity Type:                                      |                          | Trust Fund   |
| Registered Company Number: (eg: 123456, AB123456) |                          |  |
| Date of Incorporation:                            |                          |  |
| Country of Incorporation:                         |                          |  |
| Registered Company Address:                       |                          |  |
|   |                          |  |
|   | Country                  | Postal/Zip Code  |
| Trading Company Address:                          |                          |  |
|   |                          |  |
|   | Country                  | Postal/Zip Code  |
| Postal Company Address:                           |                          |  |
|   | Country                  | Postal/Zip Code  |
| Legal Entity Identification (LEI) Number:         |                          |  |
| ·   | •                        | ative contract to a trade repository. Your LEI o report all financial transactions entered into by |
| Regulatory Status:                                | Unregulated Regulated    | Name of the Regulator  |
| Listed on an Exchange:                            | No Yes Name of the Excha | inge   |
| Company Website Address:                          |                          |  |
| Company Contact Tele Number:                      |                          |  |
| Company Contact Email Address:                    |                          |  |



### **BUSINESS INFORMATION**

| Nature of business?   |  |  |  |
|---|--|--|--|
| Industry sector? (eg: Financial Services, Legal, Accountancy, Insurance, Consumer Goods, Marketing, IT, Transport, Engineering, Export/ Import, Manufacturing, Property/ Construction, Education, Transport, Pharmaceuticals, Casino, etc.) |  |  |  |
| What is the purpose of the account? (eg: hedging, investing client money, etc)  |  |  |  |
| Is the company a financial institution?  Yes No No  |  |  |  |
| Is the company operating with the required authorisation or license?  Yes No No   |  |  |  |
| Is the company a shell bank? Yes No No  |  |  |  |
| Does the company provide services to a shell bank?  Yes No No   |  |  |  |
| Has the company ever been subject to bankruptcy/insolvency proceedings in any country or territory?  Yes No   |  |  |  |
| Please state the country or territory & date of the proceedings   |  |  |  |
| Primary Contact Full Name:  |  |  |  |
| Primary Contact Position:   |  |  |  |
| Primary Contact Email Address:  |  |  |  |
| Primary Contact Telephone Number:   |  |  |  |
| Is the Primary Contact the person who will be trading on this account? Yes No   |  |  |  |
| If no, please state the primary trader on this account  |  |  |  |
| The following information should be completed by the person who will be trading on the account:   |  |  |  |
| Country of Residence:   |  |  |  |
| Nationality:  |  |  |  |
| How long have you worked at a financial institution?  |  |  |  |



# Over the past two years, how many times have you traded: CFD's: Less than 6 trades 7 to 50 trades More than 50 trades FX: Less than 6 trades 7 to 50 trades More than 50 trades Other Derivative Products: Less than 6 trades 7 to 50 trades More than 50 trades Other Investment Products: Less than 20 trades 21 to 50 trades More than 50 trades Have you ever traded any of the above products more than 50 times? Yes No Do you have any qualifications that will assist you in understanding OANDA's services, eg: professional degree? Yes CORPORATE STRUCTURE INFORMATION Shareholders/Beneficial Owners (please list everyone with a holding of 10% or above) Name **Nationality Address** Date of Birth (DD/MM/YYYY) **Directors** Name **Nationality Address** Date of Birth (DD/MM/YYYY)



### **FINANCIAL INFORMATION**

| li li  |                         |              | PANY TWO DIRECTORS               |  |
|--|-------------------------|--------------|----------------------------------|--|
| Name of Director:                                    | Signature:              | Date:        | _ Name of Director:              | Signature:Date:  |
| I also agree to OANDA's                              | privacy policy.         |              |                                  |  |
| ·  |                         |              |                                  | mer Agreement by way of the OANDA agrees to be bound by the terms of these |
| I confirm that the above i trading via Forex, and CF |                         | d accurate   | and that the company und         | derstands the nature and risks of margin                                   |
| DECLARATION  |                         |              |                                  |  |
|  | ☐ EUR ☐ USD ☐           | ☐ AUD ☐      | CAD CHF HKD                      | ☐ JPY ☐ SGD  |
| SWIFT/BIC:   |                         |              | IBAN:                            |  |
| Sort Code:   |                         |              | Account Number:                  |  |
| Account Name:  |                         |              |                                  |  |
| Bank Name:   |                         |              |                                  |  |
| Company Bank Account                                 | Details: (please provid | ed details t | for the company's primary t      | pank account)  |
| If other, please state                               |                         |              |                                  |  |
| Commercial Activities                                | Third party funds       | Investm      | ent held at another broker       | age Other  |
| What is the source of fun                            | ds? (please tick the m  | ost relevar  | nt answer)                       |  |
| 5,000,000-9,999,999                                  |                         |              | 100,000-249,999 250              | 000-999,999  |
| _  |                         |              | (total assets less total liabili | ·  |
|  |                         |              |                                  |  |
| Under 25,000   |                         | 99,999       | 100,000-249,999 🗌 250            | 000-749,999  |
| What is the estimated an                             | nual revenue for the    | company i    | n USD equivalent?                |  |



### **CERTIFIED BOARD RESOLUTION (Limited Companies only)**

Your board must hold a meeting and pass certain resolutions to enable your company to open an account with us. Please certify that this has happened below and provide a certified copy of the signed and dated resolution. The board must also authorise people to trade on your company's account ('Authorised Signatories'). The Authorised Signatories must sign the authorised signatories list in the schedule.

|      | horised signatories list in the schedule.   |
|------|---|
| I    | (full_name)   |
| Co   | mpany secretary/ Director of(company name)  |
| Ce   | tify that the following resolutions were duly passed by the directors of the company at a meeting held on   |
|      | (date)  |
| lt w | vas Resolved as follows:  |
| 1.   | That the account(s) be opened with OANDA Global Markets Ltd (OANDA) in the name of the company for the purpose of entering into contracts in forex, contracts for difference and any form of margin trading contracts, and any transactions related or ancillary to any of the contracts.   |
| 2.   | That an agreement be entered into with OANDA in connection with the opening of the account(s) in such a form as OANDA shall require and that all transactions entered into by the company shall be subject to the terms of the Customer Agreement as amended from time to time.   |
| 3.   | That each of the persons whose names and specimen signatures appear in the attached authorised signatories list (Appendix 2) shall be and are hereby jointly and severally authorised to sign any document in connection with the opening or operation of the account(s) including (but without limitation) the Customer Agreement and any document creating, perfecting or relating to any mortgage, charge or encumbrance over the company's assets and to give any oral or written instructions to OANDA with respect to the account(s) including (but without limitation) instructions to effect or otherwise enter into transactions with or on behalf of the company. |
| 4.   | That any transaction of any description whatsoever previously entered into by the company with or through OANDA be  |

- 4. That any transaction of any description whatsoever previously entered into by the company with or through OANDA be and are hereby ratified and approved.
- 5. That these resolutions be communicated to OANDA and shall remain in force and that OANDA shall be entitled to rely on the same until an amending resolution shall be passed and a copy certified by an officer of the company shall have been received by OANDA.

| further certify that there is no legal | regulatory or other reason why the com | pany chauld not conduct this business  |
|--|--|--|
| TUTTIEL CETTIV MAI METE IS NO TEGAL    | TECHNOLY OF OTHER TEASON WITY THE CON- | idany should noi conduct inis dusiness |

| Signature of Company Secretary/ Director | Date |  |
|--|------|--|
| g,,,,                                    |      |  |



#### **APPENDIX I**

### **ANTI-MONEY LAUNDERING QUESTIONNAIRE FORM**

This form is to be completed by Regulated Financial Services companies only.

| Full Company Legal Name:  |  |
|---------------------------|--|
| Country of Incorporation: |  |
| Name of Regulator:        |  |
| Regulatory Number:        |  |

Please tick the "Yes" or "No" column in response to the following statements:

| Statement  | Yes | No |
|--|-----|----|
| Money laundering and terrorist financing is a crime in our country.  |     |    |
| Our institution has policies and procedures for prevention of money laundering and terrorist financing.  |     |    |
| These policies and procedures conform to the Financial Action Task Force standards.  |     |    |
| Our institution has a program designed to establish the true identity of each customer, beneficial owners and the origin of funds.   |     |    |
| Our institution provides Anti-Money Laundering (AML) training, which includes prevention of money laundering and terrorist financing and identification of suspicious transactions, to employees who work directly with customers or customer funds.                                   |     |    |
| Our institution has written policies and procedures to prevent, detect and report suspicious transactions.   |     |    |
| Our institution conducts internal or external audits to assess its AML policies and procedures and verify compliance with relevant AML and anti-terrorist financing laws?  |     |    |
| Our institution is required to report suspicious transactions or abnormal customer activities to our supervisory and/or regulatory authority.  |     |    |
| Our institution prohibits accounts or relationships with "Shell Banks" (A Shell Bank is defined as a bank incorporated in a jurisdiction in which it has no physical presence).  |     |    |
| All our institution's branches and subsidiaries subject to AML policies and procedures.  |     |    |
| Our institution conducts enhanced due diligence (EDD) for customers and transactions that the institution has reason to believe pose a heightened risk of illicit activities.  |     |    |
| Our institution screens customers and transactions against lists administered by the United Nations (UN), European Union (EU), Office of Foreign Assets Control (OFAC) or any international organisation or local authority to identify sanctioned countries entities and individuals. |     |    |
| Our institution updates customer information on a regular basis.   |     |    |
| Our institution conducts EDD for accounts or transactions pertaining to Politically Exposed Persons (PEPs), their families and close associates.   |     |    |
| Our institution retains relevant customer due diligence (CDD) and account opening records.   |     |    |
| Our institution has never been subject to any investigation, conviction or regulatory action related to money laundering or terrorist financing.   |     |    |



| If you responded "No" to any of the statements above, please provide an explanation to (if require please continue on an additional sheet of paper). | or this response:  |
|--|--|
|  |  |
|  |  |
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|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| I confirm that the information provided on this form is accurate and that I am the Money Lac   | undering Reporting Officer or Director of (Company name) |
| Name:  |  |
| Signature:   |  |
| Title:   |  |
| Date:  |  |



#### **APPENDIX II**

# **AUTHORISED SIGNATORIES LIST**

| Authorised signatories for:(name of company |               |         |           |  |
|---|---------------|---------|-----------|--|
| As at(date)                                 |               |         |           |  |
|   |               |         |           |  |
| NAME  | DATE OF BIRTH | ADDRESS | SIGNATURE |  |
|   |               |         |           |  |
|   |               |         |           |  |
|   |               |         |           |  |
|   |               |         |           |  |
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|   |               |         |           |  |
|   |               |         |           |  |
|   |               |         |           |  |
|   |               |         | ,         |  |
| Name of Director: —                         |               |         |           |  |
| Signature:                                  |               | Date:   |           |  |
|   |               |         |           |  |
| Name of Director:                           |               |         |           |  |
| Signaturo:                                  |               | Data    |           |  |



#### **APPENDIX III**

# PLEASE REFER TO FOLLOWING FATCA IGA & CRS SELF-CERTFICATION FORM



| FATCA IGA & CRS Self-Certification        |                            |                           |            |                         |              |                       |                   |                      |                  | f-C           | er               | ti               | fic                      | at          | tio   |                      | Please read before completing this form:   |   |   |  |  |  |
|---|----------------------------|---------------------------|------------|-------------------------|--------------|-----------------------|-------------------|----------------------|------------------|---------------|------------------|------------------|--------------------------|-------------|---|----------------------|--|---|---|--|--|--|
| Entity 701  I. Account Holder Information |                            |                           |            |                         |              |                       |                   |                      |                  |               |                  | io               | n                        |             |   | 1                    | Tax authorities require Financial Institutions (FIs) to collect and report certain information about Account Holder's tax residency statuses.  To enable the FI to comply with its obligations to report to the relevant tax authorities, you are required to state the residency for tax purposes of the person or persons identified as the holder(s) of a Financial Account. On this form these persons are cumulatively referred to as the |   |   |  |  |  |
|   |                            |                           |            |                         |              |                       |                   |                      |                  |               |                  |                  |                          |             |   |                      | "Account Holder(s)".   |   |   |  |  |  |
| sho                                       | uld<br>tod                 | d be p<br>dian, r         | rov<br>non | rided<br>ninee          | . If<br>e, s | the pigna             | per:              | son<br>y, in         | op<br>ive        | oenir<br>estm | ng<br>ent        | the<br>a         | aco<br>dviso             | or<br>or    | unt i<br>or le                                    | is ne<br>egal        | ot a<br>gu   | r of a Financial Account. The name of the Account Holder Financial Institution and is acting as an intermediary, agent ardian on behalf of one or more other account holders this ho is referred to as the Account Holder.            | , |  |  |  |
| Leg                                       | al                         | Entity                    | Na         | ame                     |              |                       |                   |                      |                  |               |                  |                  |                          |             |   |                      |  | Country of Incorporation or Organisation  |   |  |  |  |
|   | -                          |                           |            |                         |              |                       |                   |                      |                  |               |                  |                  |                          |             |   |                      |  |   |   |  |  |  |
| Perm                                      | naı                        | nent F                    | Res        | iden                    | ce.          | Add                   | res               | S (if                | nor              | ne, A         | .ddr             | ess              | of P                     | rin         | ncipa   | I Off                | ice)   |   |   |  |  |  |
|   |                            |                           |            |                         |              |                       |                   |                      |                  |               |                  |                  |                          |             |   |                      |  |   |   |  |  |  |
| City                                      | ·/T                        | OWD                       |            |                         | 0            | tate                  | /Dr               | ovin                 |                  |               | $\neg$           | Do               | stal                     | _           | odo   |                      |  | Country (do not abbreviate)   |   |  |  |  |
| City                                      | , ,                        | OWII                      |            |                         |              | iaic                  | /I I'             | OVII                 | 100              | ,             |                  |                  | Jolai                    | Ö           | ouc   |                      |  | Country (do not approviate)   |   |  |  |  |
|   |                            |                           |            |                         |              |                       |                   |                      |                  |               |                  |                  |                          |             |   |                      |  |   |   |  |  |  |
| GIII                                      | 1 (                        | if any                    | )          |                         |              |                       |                   |                      |                  |               |                  |                  |                          |             |   |                      |  | Sponsoring Entity's Name (if entity is a sponsored entity and providing sponsor's GIIN)   | d |  |  |  |
|   |                            |                           |            |                         | 1            |                       |                   |                      |                  |               | 1                |                  |                          | 1           |   |                      |  | providing operator of clinty  |   |  |  |  |
|   |                            |                           |            |                         |              |                       |                   |                      |                  |               | L                |                  |                          |             |   |                      |  |   |   |  |  |  |
| н т                                       | -<br>-                     | x R                       | Δ6         | side                    | 'n           | <b>^</b>              |                   |                      |                  |               |                  |                  |                          |             |   |                      |  |   |   |  |  |  |
|   | 0                          | IA I\                     | C          | siuc                    | 711          | CC                    |                   |                      |                  |               |                  |                  |                          |             |   |                      |  |   |   |  |  |  |
|   |                            | -                         |            |                         |              |                       | -                 |                      |                  |               |                  |                  |                          |             |   |                      |  | Holder is resident for tax purposes.  |   |  |  |  |
| If th                                     | е                          | entity                    | ha         | s no                    | res          | ider                  | nce               | for                  | tax              | x pu          | rpo              | se               | s, eı                    | nte         | er th   | e c                  | oun  | ry in which its place of effective management is situated.  |   |  |  |  |
| prov<br>assi<br>purp                      | vic<br>igr                 | led fo<br>ned to<br>ses o | r ea<br>th | ach c<br>e ind<br>dmini | ou<br>ivid   | ntry<br>dual<br>ering | of r<br>by<br>tax | esio<br>a go<br>kes. | der<br>ove<br>In | nce f<br>ernm | for<br>ner<br>ne | tax<br>nt,<br>co | c pui<br>or its<br>untri | rpo<br>s ta | oses<br>ax a<br>s thi                             | s ide<br>auth<br>s m | entii<br>orit<br>ay l  | etion number (TIN) or functional equivalent should be ed. A TIN is a unique combination of letters and/or number es, which is used to identify the account holder for the e a number that is specifically referred to as a TIN, while | S |  |  |  |
|   |                            | try of                    |            |                         |              |                       |                   | r nu                 | ımı              | bers          | (S               | uc               | n as                     | а           | SOC   | iai i                | nsu  | rance number) to identify their residents for tax purposes.  Taxpayer Identification Number 1 TIN Unavailable:  |   |  |  |  |
| Cot                                       | JI 11                      | iry Oi                    | тах        | K Kes                   | iue          | rice                  | ; I               |                      |                  |               |                  |                  |                          |             |   |                      |  | Taxpayer Identification Number 1 TIN Unavailable:   |   |  |  |  |
| Cou                                       | ınt                        | try of <sup>-</sup>       | Гах        | Res                     | ide          | ence                  | 2                 |                      |                  |               |                  |                  |                          |             |   |                      |  | Taxpayer Identification Number 2 TIN Unavailable:   |   |  |  |  |
| Cou                                       | Country of Tax Residence 3 |                           |            |                         |              |                       |                   |                      |                  |               |                  |                  |                          |             | Taxpayer Identification Number 3 TIN Unavailable: |                      |  |   |   |  |  |  |
|   |                            |                           |            |                         |              |                       |                   |                      |                  |               |                  |                  |                          |             |   |                      |  |   |   |  |  |  |



| TIN Unavailable Explanation(s) – If any "TIN Unavailable" box is checked, please provide an explanation.                                   |   |  |  |  |  |  |  |  |  |
|--|---|--|--|--|--|--|--|--|--|
|  |   |  |  |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |  |  |
| I certify the tax residence countries provides is considered a tax resident.   | led represent all countries in which the entity   |  |  |  |  |  |  |  |  |
| If Account Holder has additional countries of tax residence please attach a statement to this form containing the Country and TIN for each |   |  |  |  |  |  |  |  |  |
| III. CRS Status  |   |  |  |  |  |  |  |  |  |
| FINANCIAL INSTITUTION - A entity that falls into any of the follo  | wing categories:  |  |  |  |  |  |  |  |  |
| <ol> <li>Custodial Institution - any entity that holds, as a substan<br/>others. See Annex for definition of</li> </ol>                    | tial portion of its business, Financial Assets for the account of<br>"substantial portion".                                       |  |  |  |  |  |  |  |  |
| <ul><li>2. Depository Institution - An entity that accepts deposits in</li><li>3. Investment Entity - any Entity that either:</li></ul>    | the ordinary course of a banking or similar business.   |  |  |  |  |  |  |  |  |
|  | following activities or operations for or on behalf of a customer: s, bills, certificates of deposit, derivatives, etc.); foreign |  |  |  |  |  |  |  |  |
|  | instruments; transferable securities; or commodity futures  |  |  |  |  |  |  |  |  |
|  | anagement; or iii) otherwise investing, administering, or   |  |  |  |  |  |  |  |  |
| managing Financial Assets or money on behab<br>b) the gross income of which is primarily attributable to                                   |   |  |  |  |  |  |  |  |  |
| the Entity is managed by a Financial Institution.  | rinvesting, reinvesting, or trading in rinaholar resets, ii   |  |  |  |  |  |  |  |  |
| 4. Specified Insurance Company - any Entity that is an i   |   |  |  |  |  |  |  |  |  |
| company) that issues, or is obligated to make payments w<br>Annuity Contract.  | ith respect to, a Cash Value Insurance Contract or an   |  |  |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |  |  |
| Is the Account Holder  |   |  |  |  |  |  |  |  |  |
| If Yes complete the Financial Person Institution certification  Yes  | No If No complete the Nonfinancial Entity certification   |  |  |  |  |  |  |  |  |
| Financial Institution (FI)   | Nonfinancial Entity (NFE)   |  |  |  |  |  |  |  |  |
| Is the entity an Investment Entity managed by an FI?   | Select the category of NFE which applies to the entity.   |  |  |  |  |  |  |  |  |
| (See Financial Institution definition above – section 3(b))  | See Annex for definitions of NFE categories. Select only single category.   |  |  |  |  |  |  |  |  |
| Yes If any tax residence country provided is not a   | If the category is "Passive NFE", then complete the   |  |  |  |  |  |  |  |  |
| participating CRS jurisdiction, then complete the  | Controlling Persons attachment.   |  |  |  |  |  |  |  |  |
| Controlling Persons Attachment.  | Governmental Entity, International Organisation, or   |  |  |  |  |  |  |  |  |
| ☐ No   | Central Bank  |  |  |  |  |  |  |  |  |
|  | A corporation the stock of which is regularly traded  |  |  |  |  |  |  |  |  |
|  | on an established securities market (or entity related  |  |  |  |  |  |  |  |  |
|  | to such a corporation)  |  |  |  |  |  |  |  |  |
|  | Name of Securities Market:Name of Related Entity:   |  |  |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |  |  |
|  | A Start-up Company formed in the past 24 months  Please provide the date of the entity was organised:                             |  |  |  |  |  |  |  |  |



#### IV. FATCA Status

**U.S. Person** - A corporation or partnership organized in the United States, the U.S. government or any state within the U.S. or the District of Columbia, a trust if a court within the United States is able to exercise primary jurisdiction over the administration of the trust and one or more United States persons have the authority to control all substantial decisions of the trust, or an estate the income of which, from sources without the United States which is not effectively connected to a U.S. trade or business is includible in gross income for U.S. tax purposes.

#### **Specified U.S. Person** - Any U.S. person other than:

- a publicly traded corporation, or a corporation that is a member of the same expanded affiliated group as a publicly traded corporation
- a tax exempt organization (as defined in section 501(a))
- an individual retirement plan (as defined in section 7701(a)(37))
- the United States or an agency or instrumentality of the United States, owr any state (including District of Columbia and United States possessions) or state authorities a bank (as defined in section 581)
- a real estate investment trust (as defined in section 856)
- a regulated investment company (as defined in section 851)
- an entity registered with the SEC under the Investment Company Act of 1940
- a common trust fund (as defined in section 584(a))or a tax exempt trust (as defined in section 664(c) or 4947(a)(1))
- a registered dealer, or a registered broker (as defined in section 6045(c)).

| Is the  | Account He | older a U.S. Person?   |
|---|------------|--|
| If Yes complete the U.S. Person certification | Yes        | No If No complete the non U.S. Person certification            |
| U.S. Person                                   |            | Non-U.S. Person  |
| Is the entity a specified U.S. person?        |            | Select a classification that matches your FATCA status:        |
| (See U.S. Person definition above)            |            | See Annex for definitions of IGA categories.                   |
|   |            | Select only a single category.                                 |
| Yes   |            | If the category is Passive NFFE, then complete the Controlling |
| _   |            | Persons attachment.  |
| ☐ No  |            |  |
|   |            | Participating FFI (Provide GIIN in Part I)                     |
|   |            | Local/Partner Jurisdiction FFI (Provide GIIN in Part I)        |
|   |            | Deemed-Compliant FFI   |
|   |            | Select deemed-compliant category:                              |
|   |            | ☐ Trustee-Documented Trust (Provide GIIN and                   |
|   |            | trustee name in Part I)  |
|   |            | ☐ Sponsored Investment Vehicle (Provide GIIN and               |
|   |            | sponsor's name in Part I)                                      |
|   |            | ☐ Registered-Deemed Compliant FFI (Provide GIIN                |
|   |            | in Part I)  ☐ Other Deemed-Compliant Category                  |
|   |            | Unter Deemed-Compliant Category                                |
|   |            | Nonparticipating FFI   |
|   |            | Exempt Beneficial Owner  |
|   |            | Direct Reporting NFFE (Provide GIIN in Part I)                 |



|  | Direct Reporting NFFE (Provide GIIN in Part I)   |
|--|--|
|  | Sponsored Direct Reporting NFFE (Provide GIIN and sponsor's name in Part I)  |
|  | A Start-up Company formed in the past 24 months  Please provide the date of the entity was organised:  |
|  | Other Active NFFE (See Annex for other categories)   |
|  | Passive NFFE (Complete Controlling Persons attachment)   |
| V. Declarations and Signature  |  |
| <ul> <li>the full provisions of the terms and conditions govern how the FI may use and share the information suppli</li> <li>I acknowledge and agree that information contained information regarding the account(s) set out above m account is maintained and that those tax authorities of which I/the Account Holder am/ is resident for tax pur</li> <li>I undertake to advise the FI promptly of any change in to become incorrect and to provide the FI a suitably of change in circumstances.</li> <li>I certify that I am authorised to sign for the Account Holder that all statements made on this form/in this</li> </ul> | in this Certification (including any attachments hereto) and may be reported to the tax authorities of the country in which the or the FI may provide the information to the country or countries in rposes.  n circumstances which causes the information contained herein updated Certification and/or attachment within 30 days of such |
| Name of Signer   | Signature  |
| Capacity in which Signing  Date (DD/MM/YYYY)   |  |



|                       | First Name   |                |             | F                             | Family Name/Surname   |                             |                            |  |  |  |  |  |  |
|-----------------------|--|----------------|-------------|-------------------------------|---|-----------------------------|----------------------------|--|--|--|--|--|--|
|                       | Current Residence Address  |                |             |                               |   |                             |                            |  |  |  |  |  |  |
|                       | City/Town  | State/Province | ce          | Postal (                      | Code  | Cour                        | ntry (do not abbreviate)   |  |  |  |  |  |  |
| Controlling<br>Person | Country of Tax Resid   | dence 1        | Taxpaye     | er Identification Number 1    |   | 1                           | Date of Birth (DD/MM/YYYY) |  |  |  |  |  |  |
|                       | Country of Tax Resid   | dence 2        | Taxpaye     | r Identific                   | fication Number 2   |                             | Town/City of Birth         |  |  |  |  |  |  |
|                       | Country of Tax Resid   | dence 3        | Taxpaye     | r Identific                   | ification Number 3  |                             | Country of Birth           |  |  |  |  |  |  |
|                       | TIN Unavailable Explanation(s<br>If any TIN is not provided above, |                | planation.  | Controlling<br>Person<br>Type | Legal Arrangement - Trust: Settlor Trustee  Legal Arrangement - Other: Settlor Equivalent |                             | Control by Ownership       |  |  |  |  |  |  |
|                       | First Name Family Name/Surname                                     |                |             |                               |   |                             |                            |  |  |  |  |  |  |
|                       | Current Residence Address  |                |             |                               |   |                             |                            |  |  |  |  |  |  |
|                       | City/Town  | ce             | Postal (    | Postal Code                   |   | Country (do not abbreviate) |                            |  |  |  |  |  |  |
| Controlling<br>Person | Country of Tax Resid   | Taxpaye        | r Identific | fication Number 1             |   | Date of Birth (DD/MM/YYYY)  |                            |  |  |  |  |  |  |
|                       | Country of Tax Resid   | dence 2        | Taxpaye     | r Identific                   | fication Number 2   |                             | Town/City of Birth         |  |  |  |  |  |  |
|                       | Country of Tax Resid   | dence 3        | Taxpaye     | r Identific                   |   |                             | Country of Birth           |  |  |  |  |  |  |
|                       | TIN Unavailable Explanation(s<br>If any TIN is not provided above, |                | planation.  | Controlling<br>Person<br>Type | rerson Legal Arrangement - Trust:   Settlor   Trustee   Protector   Bene                  |                             |                            |  |  |  |  |  |  |



|                       | First Name  |                |            | F                             | Family Name/Surname  |                             |  |  |  |  |  |
|-----------------------|---|----------------|------------|-------------------------------|--|-----------------------------|--|--|--|--|--|
|                       |   |                |            |                               |  |                             |  |  |  |  |  |
|                       | Current Residence Address   |                |            |                               |  |                             |  |  |  |  |  |
|                       | City/Town   | State/Province | 00         | Postal C                      | 10-4-  |                             | to /do not obbas into  |  |  |  |  |
|                       | City/Town   | State/Provinc  | ce         | 1 ostal oode                  |  | Country (do not abbreviate) |  |  |  |  |  |
| Controlling<br>Person | Country of Tax Resid  | dence 1        | Тахрау     | l<br>er Identifica            | fication Number 1  |                             | Date of Birth (DD/MM/YYYY)   |  |  |  |  |
|                       | Country of Tax Resid  | dence 2        | Тахрау     | er Identifica                 | ification Number 2   |                             | Town/City of Birth   |  |  |  |  |
|                       | Country of Tax Resid  | dence 3        | Тахрау     | er Identifica                 | tification Number 3  |                             | Country of Birth   |  |  |  |  |
|                       | TIN Unavailable Explanation(s<br>If any TIN is not provided above |                | planation. | Controlling<br>Person<br>Type | Local Assengement Tructs - Caller - Tauter - Basteries - Basteries - Other |                             |  |  |  |  |  |
|                       | First Name  |                |            | F                             | Family Name/Surname  |                             |  |  |  |  |  |
|                       |   |                |            |                               |  |                             |  |  |  |  |  |
|                       | Current Residence Address   |                |            |                               |  |                             |  |  |  |  |  |
|                       | City/Town State/Province  |                | ce         | Postal C                      | ode Cou  |                             | ntry (do not abbreviate)   |  |  |  |  |
| Controlling<br>Person | Country of Tax Resid  | dence 1        | Тахрау     | er Identifica                 | ication Number 1   |                             | Date of Birth (DD/MM/YYYY)   |  |  |  |  |
|                       | Country of Tax Resid  | dence 2        | Тахрау     | er Identifica                 | ication Number 2   |                             | Town/City of Birth   |  |  |  |  |
|                       | Country of Tax Resid  | dence 3        | Тахрау     | er Identifica                 | fication Number 3  |                             | Country of Birth   |  |  |  |  |
|                       | TIN Unavailable Explanation(s If any TIN is not provided above,   |                | planation. | Controlling                   | Legal Person:  |                             | Control by Ownership Control by Other Means Senior Managing Official |  |  |  |  |
|                       |   | Person<br>Type |            |                               |  |                             |  |  |  |  |  |

<sup>\*</sup>If Account Holder has additional Controlling Persons, provide multiple Controlling Persons attachments.



# Annex

#### **CRS Definitions**

#### **NFE CATEGORIES**

#### **NFEs**

An NFE means any entity that is not a financial institution. An NFE may be an Active NFE or a Passive NFE.

#### **Active NFEs**

#### **Active NFEs by Reason of Income and Assets**

Less than 50% of the NFE's gross income for the preceding calendar year or other appropriate reporting period is passive income and less than 50% of the assets held by the NFE during the preceding calendar year or other appropriate reporting period are assets that produce or are held for the production of passive income.

# A Corporation the Stock of which is Regularly Traded on an Established Securities Market (or entity related to such a corporation)

The stock of the NFE is regularly traded on an established securities market or the NFE is a Related Entity of an Entity the stock of which is regularly traded on an established securities market.

Regularly Traded Meaningful volume of trading with respect to the stock on an on-going basis.

Established Securities Market An exchange that is officially recognised and supervised by a governmental

authority in which the market is located and that has a meaningful annual value of

shares traded on the exchange.

Related Entity An Entity is a "Related Entity" of another Entity if either Entity controls the other

Entity, or the two Entities are under common control. For this purpose control includes direct or indirect ownership of more than 50% of the vote and value in an

Entity.

#### **Governmental Entity**

The government of a jurisdiction, any political subdivision of a jurisdiction (including a state, province, county, or municipality), or any wholly owned agency or instrumentality of a jurisdiction or of any one or more of the foregoing.

#### **International Organisation**

Any international organisation or wholly owned agency or instrumentality thereof. This category includes any intergovernmental organisation (including a supranational organisation) (1) that is comprised primarily of governments; (2) that has in effect a headquarters or substantially similar agreement with the jurisdiction; and (3) the income of which does not inure to the benefit of private persons.

#### **Central Bank**

An institution that is by law or government sanction the principal authority, other than the government of the jurisdiction itself, issuing instruments intended to circulate as currency. Such an institution may include an instrumentality that is separate from the government of the jurisdiction, whether or not owned in whole or in part by the jurisdiction.

#### Holding NFEs that are Members of a Nonfinancial Group

Substantially all of the activities of the NFE consist of holding (in whole or in part) the outstanding stock of, or providing financing and services to, one or more subsidiaries that engage in trades or businesses other than the business of a Financial Institution, except that an Entity does not qualify for this status if the Entity functions (or holds itself out) as an investment fund, such as a private equity fund, venture capital fund, leveraged buyout fund, or any investment vehicle whose purpose is to acquire or fund companies and then hold interests in those companies as capital assets for investment purposes.

#### A Start-up Company formed in the past 24 months

The NFE is not yet operating a business and has no prior operating history, but is investing capital into assets with the intent to operate a business other than that of a Financial Institution, provided that the NFE does not qualify for this exception after the date that is 24 months after the date of the initial organisation of the NFE.



#### NFE Liquidating or Emerging from Bankruptcy

The NFE was not a Financial Institution in the past five years, and is in the process of liquidating its assets or is reorganising with the intent to continue or recommence operations in a business other than that of a Financial Institution.

#### Treasury Centers that are Members of a Nonfinancial Group

The NFE primarily engages in financing and hedging transactions with, or for, Related Entities that are not Financial Institutions, and does not provide financing or hedging services to any Entity that is not a Related Entity, provided that the group of any such Related Entities is primarily engaged in a business other than that of a Financial Institution.

#### Non-Profit NFE

An NFE that meets the following criteria:

- it is established and operated in its jurisdiction of residence exclusively for religious, charitable, scientific, artistic, cultural, athletic, or educational purposes; or it is established and operated in its jurisdiction of residence and it is a professional organisation, business league, chamber of commerce, labour organisation, agricultural or horticultural organisation, civic league or an organisation operated exclusively for the promotion of social welfare;
- II. it is exempt from income tax in its jurisdiction of residence;
- III. it has no shareholders or members who have a proprietary or beneficial interest in its income or assets;
- IV. the applicable laws of the NFE's jurisdiction of residence or the NFE's formation documents do not permit any income or assets of the NFE to be distributed to, or applied for the benefit of, a private person or non-charitable Entity other than pursuant to the conduct of the NFE's charitable activities, or as payment of reasonable compensation for services rendered, or as payment representing the fair market value of property which the NFE has purchased; and
- V. the applicable laws of the NFE's jurisdiction of residence or the NFE's formation documents require that, upon the NFE's liquidation or dissolution, all of its assets be distributed to a Governmental Entity or other non-profit organisation, or escheat to the government of the NFE's jurisdiction of residence or any political subdivision.

#### **Passive NFE**

For purpose of completing this certification, a Passive NFE means any NFE that is not an Active NFE.

#### **ENTITY MANAGED BY ANOTHER FINANCIAL INSTITUTION**

An Entity is "managed by" another Entity if the managing Entity performs, either directly or through another service provider on behalf of the managed Entity, any of the following activities or operations: trading in money market instruments; foreign exchange; exchange, interest rate and index instruments; transferrable securities; or commodity futures trading.

An Entity only manages another Entity if it has discretionary authority to manage the other Entity's assets (either in whole or part). Where an Entity is managed by a mix of Financial Institutions, NFEs or individuals, the Entity is considered to be managed by another Entity that is a Depository Institution, a Custodial Institution, a Specified Insurance Company, or an Investment Entity that performs the above trading functions, if any of the managing Entities is such an Entity.

#### PARTICIPATING CRS JURISDICTION

A jurisdiction with which an agreement is in place pursuant to which it will provide the information set out in the CRS. A list of all participating jurisdictions can be found at: <a href="http://www.oecd.org/tax/transparency/AEOI-commitments.pdf">http://www.oecd.org/tax/transparency/AEOI-commitments.pdf</a>

#### **GLOBAL INTERMEDIARY IDENTIFICATION NUMBER (GIIN)**

The term GIIN or Global Intermediary Identification Number means the identification number that is assigned to a participating FFI or registered deemed-compliant FFI. The term GIIN or Global Intermediary Identification Number also includes the identification number assigned to a reporting Model 1 FFI for purposes of identifying such entity to withholding agents. All GIINs will appear on the IRS FFI list.



# Annex

#### **FATCA Definitions - 1**

#### **FATCA STATUS - FINANCIAL INSTITUTION**

#### Participating FFI

An FFI that has agreed to comply with the requirements of an FFI agreement, including an FFI described in a Model 2 IGA that has agreed to comply with the requirements of an FFI agreement. The term PFFI also includes a QI branch of a U.S. financial institution, unless such branch is a Reporting Model 1 FFI.

#### Local/Partner Jurisdiction FFI

An FFI located in a jurisdiction that has in effect an agreement with the United States to facilitate the implementation of FATCA. A list of all participating jurisdictions can be found at:

http://www.treasury.gov/resource-center/tax-policy/treaties/Pages/FATCA-Archive.aspx

#### **Trustee-Documented Trust**

A trust established under the laws of the local jurisdiction to the extent that the trustee of the trust is a Reporting U.S. Financial Institution, Reporting Model 1 FFI, or Participating FFI and reports all information required to be reported pursuant to the Agreement with respect to all U.S. Reportable Accounts of the trust.

#### **Registered Deemed-Compliant FFI**

An FFI that registers with the IRS to declare its status. Includes certain local FFIs, non-reporting members of participating FFI groups, qualified collective investment vehicles, restricted funds, qualified credit card issuers and servicers, and sponsored investment entities and controlled foreign corporations.

#### Other Deemed-Compliant FFI

Deemed-compliant FFIs also include the following: Non-Registering Local Bank, FFI with Only Low Value Accounts, Sponsored Closely-Held Investment Vehicle, Limited Life Debt Investment Entity, and any other FFI treated as a deemedcompliant FFI under an applicable IGA (except for a registered deemed-compliant FFI).

#### Nonparticipating FFI

An FFI other than a participating FFI, a deemed-compliant FFI, or an exempt beneficial owner.

#### **Exempt Beneficial Owner**

An entity in one of the following categories:

| Governmental Entity        | The government of a jurisdiction, any political subdivision of a jurisdiction (including a state, province, county, or municipality), or any wholly owned agency or instrumentality of a jurisdiction or of any one or more of the foregoing.  |
|----------------------------|--|
| International Organisation | Any international organisation or wholly owned agency or instrumentality thereof. This category includes any intergovernmental organization (including a supranational organisation) (1) that is comprised primarily of governments; (2) that has in effect a headquarters or substantially similar agreement with the jurisdiction; and (3) the income of which does not inure to the benefit of private persons. |
| Central Bank               | An institution that is by law or government sanction the principal authority, other than the government of the jurisdiction itself, issuing instruments intended to circulate as currency. Such an institution may include an instrumentality that is separate from the government of the jurisdiction, whether or not owned in whole or in part by the jurisdiction.  |
| Exempt Retirement Fund     | A retirement fund that meets one of the following categories under the applicable IGA: Treaty-Qualified Retirement Fund, Broad Participation Retirement Fund, Narrow   |

Participation Retirement Fund, Pension Fund of an Exempt Beneficial Owner, or

Investment Entity Wholly Owned by Exempt Beneficial Owners.



Investment Entity Wholly

An Entity that is a Financial Institution solely because it is an Investment Entity,

provided that each direct holder of an Equity Interest

Owned by Exempt BOs in the Entity is an exempt beneficial owner, and each direct holder of a debt interest

in such Entity is either a Depository Institution (with respect to a loan made to such

Entity) or an exempt beneficial owner.

#### **Direct Reporting NFFE**

A direct reporting NFFE is a passive NFFE that elects to report certain information about its direct or indirect substantial U.S. owners directly to the IRS on Form 8966 in lieu of providing such information to the financial institutions at which the NFFE holds an account. Direct reporting NFFEs will be required to register with the IRS to obtain a GIIN and agree to report the information about its substantial U.S. owners directly to the IRS. A direct reporting NFFE will not be treated as a participating FFI or be required to enter into an FFI agreement; it will be treated as an excepted NFFE.

#### **Sponsored Direct Reporting NFFE**

An entity to serving as a "sponsor" for one or more direct reporting NFFEs, which will require the sponsoring entity to report information about a sponsored direct reporting NFFE's direct or indirect substantial U.S owners directly to the IRS on a Form 8966.



# **Annex**

#### **FATCA Definitions - 2**

#### **FATCA STATUS - NFFE**

#### **NFFEs**

An NFFE means any entity that is not a financial institution. An NFFE may be an Active NFFE or a Passive NFFE.

#### **Active NFFEs**

#### **Active NFFEs by Reason of Income and Assets**

Less than 50% of the NFFE's gross income for the preceding calendar year or other appropriate reporting period is passive income and less than 50% of the assets held by the NFFE during the preceding calendar year or other appropriate reporting period are assets that produce or are held for the production of passive income.

# A Corporation the Stock of which is Regularly Traded on an Established Securities Market (or entity related to such a corporation)

The stock of the NFFE is regularly traded on an established securities market or the NFFE is a Related Entity of an Entity the stock of which is regularly traded on an established securities market.

Regularly Traded Meaningful volume of trading with respect to the stock on an on-going basis.

Established Securities Market An exchange that is officially recognised and supervised by a governmental

authority in which the market is located and that has a meaningful annual value of

shares traded on the exchange.

Related Entity An Entity is a "Related Entity" of another Entity if either Entity controls the other

Entity, or the two Entities are under common control. For this purpose control includes direct or indirect ownership of more than 50% of the vote and value

in an Entity.

#### **Excepted Territory NFFE**

The NFFE is organized in a U.S. Territory and all of the owners of the payee are bona fide residents of that U.S. Territory.

#### **Governmental Entity**

The NFFE is a government (other than the U.S. government), a political subdivision of such government (which, for the avoidance of doubt, includes a state, province, county, or municipality), or a public body performing a function of such government or a political subdivision thereof, a government of a U.S. Territory, an international organization, a non-U.S. central bank of issue, or an Entity wholly owned by one or more of the foregoing.

#### Holding NFFEs that are Members of a Nonfinancial Group

Substantially all of the activities of the NFFE consist of holding (in whole or in part) the outstanding stock of, or providing financing and services to, one or more subsidiaries that engage in trades or businesses other than the business of a Financial Institution, except that an Entity does not qualify for this status if the Entity functions (or holds itself out) as an investment fund, such as a private equity fund, venture capital fund, leveraged buyout fund, or any investment vehicle whose purpose is to acquire or fund companies and then hold interests in those companies as capital assets for investment purposes.

#### A Start-up Company formed in the past 24 months

The NFFE is not yet operating a business and has no prior operating history, but is investing capital into assets with the intent to operate a business other than that of a Financial Institution, provided that the NFFE does not qualify for this exception after the date that is 24 months after the date of the initial organisation of the NFFE.

#### NFFE Liquidating or Emerging from Bankruptcy

The NFFE was not a Financial Institution in the past five years, and is in the process of liquidating its assets or is reorganising with the intent to continue or recommence operations in a business other than that of a Financial Institution.



#### Treasury Centers that are Members of a Nonfinancial Group

The NFFE primarily engages in financing and hedging transactions with, or for, Related Entities that are not Financial Institutions, and does not provide financing or hedging services to any Entity that is not a Related Entity, provided that the group of any such Related Entities is primarily engaged in a business other than that of a Financial Institution.

#### **Non-Profit NFFE**

An NFFE that meets the following criteria:

- it is established and operated in its jurisdiction of residence exclusively for religious, charitable, scientific, artistic, cultural, athletic, or educational purposes; or it is established and operated in its jurisdiction of residence and it is a professional organisation, business league, chamber of commerce, labour organisation, agricultural or horticultural organisation, civic league or an organisation operated exclusively for the promotion of social welfare;
- II. it is exempt from income tax in its jurisdiction of residence;
- III. it has no shareholders or members who have a proprietary or beneficial interest in its income or assets;
- IV. the applicable laws of the NFFE's jurisdiction of residence or the NFFE's formation documents do not permit any income or assets of the NFFE to be distributed to, or applied for the benefit of, a private person or non-charitable Entity other than pursuant to the conduct of the NFFE's charitable activities, or as payment of reasonable compensation for services rendered, or as payment representing the fair market value of property which the NFFE has purchased; and
- V. the applicable laws of the NFFE's jurisdiction of residence or the NFFE's formation documents require that, upon the NFFE's liquidation or dissolution, all of its assets be distributed to a Governmental Entity or other non-profit organisation, or escheat to the government of the NFFE's jurisdiction of residence or any political subdivision.

#### **Passive NFFE**

For purpose of completing this certification, a Passive NFFE means any NFFE that is not an Active NFFE.