TAX COMPLIANCE - INTERNATIONAL EXCHANGE OF INFORMATION AGREEMENT ENTITY SELF-CERTIFICATION FORM:

Tax regulationsⁱ require the collection of certain information about each account holder's tax residency status.

Please complete, where applicable, the relevant sections below and provide any additional information as may be required. In certain circumstances there may be a requirement to share this information with relevant tax authorities.

If you have any questions about how to complete this form, please contact your tax advisor or local tax authority.

If your organisation is resident in the United Statesⁱⁱ or dual resident, you should also provide a completed, signed and dated IRS Form W-9.

Do not use this form if you are acting as an agent, nominee or conduit for the account of others or you are not considered to be the Beneficial Owner of the payments. Instead you should complete the Intermediary Self-Certification form and submit with the appropriate self-certification(s) from the Beneficial Owner(s).

Part I – Entity/Organisation Details

(a)	Name of Entity or Organisation		
(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')		
(d)	Country		
(4)	country		
(e)	Postcode		
(0)	losteode		
(f)	Mailing Address (If different		
(י)	from above)		
	nom abovej		
(a)	Country		
(8)	country		
(h)	Postcode		
(11)	Fosicoue		
Part	II – Tax Residency		
I here	eby certify that the entity or organisatio	n identified above is a resident of:	
	ax purposes; and		
	• • •		
• •	e entity or organisation's Tax Identificat	. ,	
equiv	alent in its country of residence for tax	purposes is:	

Or

(b) The entity or organisation's country of residence for tax purposes does not issue TINs or a functional equivalent to its residents or the entity or organisation is otherwise unable to procure a TIN or a functional equivalent from its country of residence (please tick box if relevant).

If the entity or organisation is tax resident in more than one jurisdiction please complete the following section as appropriate.

Country:	TIN:	or TIN Unavailable	
Country:	TIN:	or TIN Unavailable	
-			

Part III – Entity Certification

Section A – For a Financial Institution (FI) to complete

If your organisation is a FI, please complete (a) or (b) below as appropriate:

(a) Participating FFI or Registered Deemed Compliant (including Reporting Model 1 FFI)

Please provide your Organisation's Global Intermediary Identification Number (GIIN):

										i i

If you do not have a GIIN but you are sponsored by another entity which does, please provide your sponsor's GIIN above and state your sponsor's name:

- (b) If unable to provide a GIIN, please tick the reason why your organisation does not have a GIIN:
 - i. It is a Participating Financial Institution in a IGA Partner Jurisdiction and has not yet obtained a GIIN:
 - ii. It is a Financial Institution that intends to apply for a GIIN but has not yet applied or has not yet received it:
 - iii. It is an Exempt Beneficial Owner(i.e. an international organisation):
 - iv. It is a Certified Deemed Compliant Financial Institution (i.e. a registered charity):
 - v. It is an Owner Documented Financial Institution:
 - vi. It is a Non-Participating Foreign Financial Institution
 - vii. Other (please state) :

Section B – For a Non-Financial Institution (NFI) to complete (if your organisation is a resident of the UK Crown Dependencies or Gibraltar, then please see Note 1, below):

If your organisation is not a FI, please confirm your organisation's status below:

Active NFFE

Passive	NFFF
1 43514 6	

Direct Reporting NFFE

Note 1: If your classification differs under the UK Crown Dependencies/Gibraltar Intergovernmental Agreements then please note alternative classification below:

UK-CD/Gibraltar Classification:

If you are a direct reporting NFFE please provide your GIIN or the GIIN of your sponsoring entity and the name of the

sponso	oring e	entity:	 	 	 	 	 	 		 	_	
							•		•			

Please tick this box to confirm that the sponsoring entity has agreed with the entity identified above (that is not a nonparticipating FFI) to act as the sponsoring entity for this entity:

For Passive NFFEs, please complete either individual forms for each controlling person or complete the table below. Controlling Persons are defined as natural persons who exercise control over the entity or the shareholders of the entity based on local Anti-Money Laundering (AML) requirements. 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.

Controlling Persons (please continue on a separate sheet if necessary, signing, dating and attaching the sheet to this form):

If the Controlling Person(s) are US Citizens then they should additionally complete a W9 form.

Name	Address	Tax Residence(s) (List all)	TIN(s) (Provide all)	Place (City/Town & Country) and Date of Birth (DD/MM/YYYY)

Part IV – Declaration and Signature

1. I authorise the Recipient to provide, directly or indirectly, to any relevant tax authorities or any party authorised to audit or conduct a similar control of the Recipient for tax purposes, a copy of this form and to disclose to such tax authorities or such party any additional information that the Recipient 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 income paid or credited to or for the benefit of the account(s) set out above 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 resident for tax purposes.

2. I authorise the Recipient to provide, directly or indirectly, a copy of this form and information relating to the account(s) set out above, as required by law, 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 certify that that the entity named is the beneficial owner of all the income to which this form relates.

I undertake to notify the recipient of any change in circumstances that causes any certification on this form to become incorrect and to provide a suitably updated form within 30 days of such change.

I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete.

I certify that I have the capacity to sign for the entity identified in Part I of this form.

Sign Here:

Print Name:

Date:

(DD-MM-YYYY)

ⁱ The term 'tax regulations' refers to regulations created to enable automatic exchange of information and include Foreign Account Tax Compliance Act, various Agreements to Improve International Tax Compliance entered into between the UK, the Crown Dependencies and the Overseas Territories, and the OECD Common Reporting Standard for Automatic Exchange of Financial Account Information[, as implemented in the relevant jurisdictions].

ⁱⁱ The definitions of these terms may be found in paragraphs \$1.1471-1, \$1.1471-5, \$1.1471-6, \$1.1472-1 and \$1.1473-1 of the United States Internal Revenue Code. If the country in which your organisation is resident has signed an Intergovernmental Agreement (IGA) with the United States or with other relevant countries, please refer to the equivalent definitions in the relevant IGA and or the enabling legislation applicable to that country's IGA.