

### Entity

### **Self-certification form**

#### **Need more information?**

**▶** 

alrayanbank.co.uk



0800 4086 407

Mon to Fri: 9am-5pm

Her Majesty's Revenue and Customs (HMRC) requires Al Rayan Bank PLC to collect and report certain information about an account holder's tax residency.

Please complete this form where you need to self-certify on behalf of an entity account holder. If you are completing this form on the account holder's behalf, please fill in their details. For joint or multiple account holders, please use a separate form for each account holder.

If the account holder is a US citizen or resident of the US for tax purposes under US Internal Revenue Service (IRS), you should also complete the IRS W-9 Form.

All fields marked with a \* are mandatory. For your assistance, you can read the selected summaries of defined terms on our website at alrayanbank.co.uk/tax-forms.

### Section 1 Account holder details

Legal name of entity or organisation\*

Country of incorporation*	
Registered address incl. country and post code*	
Mailing address incl. country and post code*	
Section 2 <b>Tax residency</b>	
equivalent) for each reportable jurisdiction. Jurisdiction identifying number for each jurisdiction of resident of the Account Holder is not tax resident in any jurisdiction of resident in any jurisdiction of resident in any jurisdiction. If the Account Holder is principal officially a separate sheet.  If a TIN is unavailable please provide where appropriate and in the country where I am liable to pay the Reason B – The Account Holder is otherwise unally	sdiction (for example, it is fiscally transparent), please provide its place of effective ce is located. If the Account Holder is tax resident in more than three countries please priate, reason A, B or C:
Country of tax residence*	
TIN (or tick the box if TIN is not available)*	
If TIN is not available, state reason code*	
If you have stated <b>Reason B</b> above,	
please provide an explanation	

Country of tax residence		
TIN (or tick the box if TIN is not available)		
If TIN is not available, state reason code		
If you have stated <b>Reason B</b> above, please		
provide an explanation		
provide an explanation		
Country of tax residence		
TIN (or tick the box if TIN is not available)		
If TIN is not available, state reason code		
If you have stated <b>Reason B</b> above, please		
provide an explanation		
Section 3 Entity type*		
Income and assets NFE definition: Less that period) is passive income, and less than 50% reporting period) are assets that produce (or a 1. (a) Financial Institution (FI) - Investment	•	
i. An investment entity located in a no each Controlling Person in Section 4 ii. Other investment entity	on-participating jurisdiction and managed by another FI. If ticking this box, please give details of	
(b) Financial Institution (FI) - Non-investme	ant Entity	
	titution or Specified Insurance Company	
	de, if held, the entity's Global Intermediary Identification Number (GIIN) obtained for FATCA Purposes:	
2. Non-Financial Entity (NFE) - Active or Pa	ssive	
(a) Active NFE – a corporation the stoorelated entity of such a corporation	ck of which is regularly traded on an established securities market or a corporation which is a	
If you have ticked (a), please provide the name	of the established securities market on which the corporation is regularly traded:	
If you are a Related Entity of a regularly traded (a) is a Related Entity of:	corporation, please provide the name of the regularly traded corporation that the Entity in	
(b) Active NFE – a Government Entity	or Central Bank (c) Active NFE – an International Organisation	
(d) Active NFE – other than (a)-(c) (for example a start-up NFE or a non-profit NFE)		
(e) Passive NFE (If ticking this box, plea	ase give details of each Controlling Person in Section 4)	
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## Section 4 **Controlling Persons**

issued by such jurisdiction

#### To be completed if you have selected options 1. (a) i. or 2. (e) in Section 3. Otherwise, proceed to Section 5.

Please provide details of each Controlling Person. Please continue on a separate sheet if necessary.

**Controlling person** – An Entity is controlled by the persons or entities who hold at least 10% of the voting shares in the Entity or who are known to exercise significant influence over the policy, business and strategy of the Entity.

In the case of a trust, the Controlling Person(s) are the settlor(s), the trustee(s), the protector(s) (if any), the beneficiary(ies) or dass(es) of beneficiaries, or any other natural person(s) exercising ultimate effective control over the trust (including through a chain of control or ownership). Where the settlor(s) of a trust is an Entity then regulation requires Financial Institutions to also identify the Controlling Persons of the settlor(s) and when required report them as Controlling Persons of the trust.

Please choose the capacity/position of Controlling Person from the list - Controlling Person of:

An entity or other legal person – control by ownership

An entity or other legal person – **control by other means** 

An entity or other legal person – senior managing official

A trust – Settlor or Trustee or Protector or Beneficiary or Other

A legal arrangement (non-trust) – **Settlor-equivalent** or **Trustee-equivalent** or **Protector-equivalent** or **Beneficiary-equivalent** or **Other-equivalent** 

It is mandatory that you include your TIN (or equivalent). If a TIN is unavailable please provide where appropriate, reason A, B or C:

**Reason A** – The country where I am liable to pay tax does not issue TINs to its residents

**Reason B** – The Account Holder is otherwise unable to obtain a TIN or equivalent number (please explain why you are unable to obtain a TIN) **Reason C** – No TIN is required. Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN

First Controlling Person

Second Controlling Person

Capacity/position\*

Full name incl. title\*

Date of birth\*

Town of birth\*

Nationality\*

Permanent address incl. country\*

Mailing address incl. country\*

#### Please state all countries in which the Controlling Person is considered a tax resident; please use a separate sheet if more than 3

	First Controlling Person	Second Controlling Person
Are you a US Person?*	Yes No	Yes No
If you have answered Yes to the above question please provide your TIN (or tick the box if TIN is not available)		
If TIN is not available, state reason code		
If you have stated <b>Reason B</b> above, please provide an explanation		
Are you resident for tax purposes in any country other than the UK?*  If No, then proceed to Section 5 Declaration Section. If Yes then fill in sections below.	Yes No	Yes No
Country of tax residence 1		
Country of tax residence 2		
Country of tax residence 3		
TIN 1 (or tick the box if TIN is not available		
TIN 2 (or tick the box if TIN is not available)		
TIN 3 (or tick the box if TIN is not available)		
If TIN 1 is not available, state reason code		
If TIN 2 is not available, state reason code		
If TIN 3 is not available, state reason code		
If you have stated <b>Reason B</b> for TIN 1,		
please provide an explanation		
If you have stated <b>Reason B</b> TIN 2,		
please provide an explanation		
If you have stated <b>Reason B</b> TIN 3,		
please provide an explanation		

Please state all countries in which the Controlling Person is considered a tax resident; please use a separate sheet if more than 3

	Third Controlling Person	Fourth Controlling Person
Capacity/position*		
Full name incl. title*		
Date of birth*	D D M M Y Y Y	D D M M Y Y Y
Town of birth*		
Country of birth*		
Nationality*		
Permanent address incl. country*		
Mailing address incl. country*		
Are you a US Person?*	Yes No	Yes No
If you have answered Yes to the above question please provide your TIN (or tick the box if TIN is not available)  If TIN is not available, state reason code  If you have stated <b>Reason B</b> above, please		
provide an explanation		
Are you resident for tax purposes in any country other than the UK?*  If No, then proceed to Section 5 Declaration	Yes No	Yes No
Section. If Yes then fill in sections overleaf.		

Please state all countries in which the Controlling Person is considered a tax resident; please use a separate sheet if more than 3

	Third Controlling Person	Fourth Controlling Person
Country of tax residence 1		
Country of tax residence 2		
Country of tax residence 3		
TIN 1 (or tick the box if TIN is not available		
TIN 2 (or tick the box if TIN is not available)		
TIN 3 (or tick the box if TIN is not available)		
If TIN 1 is not available, state reason code		
If TIN 2 is not available, state reason code		
If TIN 3 is not available, state reason code		
If you have stated <b>Reason B</b> for any of the TIN		
1, 2 or 3 above, please provide an explanation		

# Section 5 **Declaration and signature**

Tax legislations referred to in this form are 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.

I understand that the information supplied by me is covered by the full provisions of the terms and conditions governing the Account Holder's relationship with Al Rayan Bank PLC setting out how Al Rayan Bank PLC may use and share the information supplied by me.

I acknowledge that the information contained in this form and information regarding the Account Holder and any Reportable Account(s) may be provided to the tax authorities of the country in which this account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the Account Holder may be tax resident pursuant to intergovernmental agreements to exchange financial account information with the country/ies in which this account(s) is/are maintained.

I certify that I am authorised to sign for the Account Holder in respect of all the account(s) to which this form relates.

I declare that all statements made in this declaration are, to the best of my knowledge and belief, correct and complete.

I undertake to advise Al Rayan Bank PLC within 28 days of any change in circumstances which affects the tax residency status of the Account Holder identified in Section 1 of this form or causes the information contained herein to become incorrect or incomplete (including any changes to the information on controlling persons identified in Section 2 and detailed in Section 4), and to provide Al Rayan Bank PLC with a suitably updated self-certification and declaration within 28 days of such change in circumstances.

Signature		
Print name*		
Signature and date*  Your signature must not go outside the box		Date:
<b>Note</b> : 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:	

Al Rayan Bank PLC is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Our firm reference number is 229148. Al Rayan Bank PLC is incorporated and registered in England and Wales. Registration No. 4483430. Registered office: 44 Hans Crescent, Knightsbridge, London, SW1X 0LZ.