



ENTITY ACCOUNT – CRS SELF CERTIFICATION

Please read these instruction carefully before completine form.

Regulations based on the OECD Common Reporting Standard (“CRS”) requires BOK International Bahrain to collect and report certain information about an account holder’s tax residence. Each jurisdiction has its own rules for defining tax residence, and jurisdictions have provided information on how to determine if you are resident in the jurisdiction on the following website: <http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-residency/>.

If the account holder’s tax residence is located outside the Kingdom of Bahrain, we may be legally obliged to pass on the information in this form and other financial information with respect to your financial accounts to the National tax authorities and this information may then be shared with tax authorities of different countries.

This form will remain valid unless there is a change in circumstances relating to information. If your circumstances change and any of the information provided in this form becomes incorrect, please let us know immediately and provide an updated self - certification.

If you are an individual account holder or sole trader or sole proprietor do not complete this form. Instead please complete a 'Self – Certification Form – Individual'. For joint or multiple account holders please complete a separate form for each account holder. If you are a U.S. citizen or tax resident under U.S. law, you should indicate that you are a U.S. tax resident on this form and you may also need to fill in an IRS W - 9 form.

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 control over the Account Holder (individuals referred to as “Controlling Person(s)”) by completing a “Controlling Person tax residency self - certification form” for each Controlling Person. This information should be provided by all Investment Entities located in a Non Participating Jurisdiction and managed by another Financial Institution.

If you are filling in this form on behalf of someone else, please ensure that you let them know that you have done so and tell us in what capacity you are signing in Part 4. For example, you may be the custodian or nominee of an account on behalf of the account holder or you may be completing this form under a power of attorney.

Summaries of defined terms such as an account holder, and other terms, have been provided in the Appendix.

This form is intended to request information consistent with local law requirements. As a financial institution, we are not allowed to give tax advice.

All fields in this form need to be filled, with the exception of Section D, Part 1.

Entity tax residency self - certification FORM -(please complete parts 1 - 3 in BLOCK CAPITALS)

Part 1 – Identification of Account Holder

A. Legal Name of Entity/Branch:

.....

B. Country of incorporation or organization:

.....

C. Current Residence Address:

.....

Line 1 (e.g. House/Apt/Suite Name, Number, Street, if any):

.....

Line 2 (e.g. Town/City/Province/County/State):

.....

Country:

.....

Postal Code/ZIP Code (if any):

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

.....

Line1 (e. g. House/Apt/Suite Name, Number, Street)

.....

Line 2 (e. g Town /City /Province/ Country/ State)

.....

Country:

.....

Postal Code /ZIP Code (if any):

.....

Part 2 – Entity Type Please provide the Account Holder’s Status by ticking one of the following boxes.

1. (a) Financial Institution – Investment Entity

i. An Investment Entity located in a Non - Participating Jurisdiction and managed by another Financial Institution

(Note: if ticking this box please also complete Part 2(2) below)

ii. Other Investment Entity

(b) Financial Institution – Depository Institution, Custodial Institution or Specified Insurance Company

If you have ticked (a) or (b) above, please ensure, if held, the Account Holder’s Global Intermediary Identification Number (“GIIN”) has been provided under FATCA Self Declaration.

(c) 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

If you have ticked (c), 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 corporation, please provide the name of the regularly traded corporation that the Entity in (c) is a Related Entity of:

(d) Active NFE – a Government Entity or Central Bank

(e) Active NFE – an International Organisation

(f) Active NFE – other than (c) - (e) (for example a start - up NFE or a non - profit NFE

(g) Passive NFE (Note: if ticking this box please also complete Part 2(2) below)

2. If you have ticked 1(a) (i) or 1 (g) above, then please:

a. Indicate the name of any Controlling Person(s) of the Account Holder:

.....

.....

b. Complete “Controlling Person tax residency self - certification form” for each Controlling Person.

Please see the definition of Controlling Person in Appendix





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Part 3 – Country/Jurisdiction of Residence Tax Purposes and related Taxpayer Identification Number or functional equivalent number (“TIN”) (see Appendix)

Please complete the following table indicating (i) where the Account Holder is tax resident; (ii) the Account Holder's TIN for each country/jurisdiction indicated.

If the Account Holder is not tax resident in any country/jurisdiction (e.g., because it is fiscally transparent), please indicate that on line 1 and provide its place of effective management or jurisdiction in which its principal office is located.

If the Account Holder is tax resident in more than three countries/ jurisdictions, please use a separate sheet

If a TIN is unavailable please provide the appropriate reason A, B or C where appropriate:

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 (please explain why you are unable to obtain a TIN in the below table if you have selected this reason)

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			

Please explain in the following boxes why you are unable to obtain a TIN if you selected Reason **B** above

1	
2	
3	

Part 4 – Declarations and Signature

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 **BOK International Bahrain** setting out how **BOK International Bahrain** 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/Jurisdiction in which this account(s) is/are maintained and exchanged with tax authorities of another country/jurisdiction or countries/jurisdictions in which the Account Holder may be tax resident pursuant to intergovernmental agreements to exchange financial account information.

I certify that I am authorised 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.





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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/ Jurisdiction in which this account(s) is/are maintained and exchanged with tax authorities of another country/jurisdiction or countries/jurisdictions in which the Account Holder may be tax resident pursuant to intergovernmental agreements to exchange financial account information.

I certify that I am authorised 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 BOK International Bahrain within 90 days of any change in circumstances which affects the tax residency status of the Account Holder identified in Part 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 Part 2 question 2 a), and to provide BOK International Bahrain with a suitably updated Self – Certification and Declaration within up to 90 days of such change in circumstances.

Signature:

.....

Print name:

.....

(Name as per Passport)

Date: (dd/mm/yy)

.....

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 the power of attorney.

Capacity: (Self, Shareholder, POA, Guarantor)

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