

FATCA & CRS SELF-CERTIFICATION FORM (FOR ENTITY)

What is this form about?

Regulations based on the Foreign Account Tax Compliance Act ("FATCA") and OECD Common Reporting Standard ("CRS") require Green Link Digital Bank Pte. Ltd. ("GLDB" or "the Bank") to collect and report certain information about our customers tax residency. If you are a U.S. Person or tax resident outside the country where your account is held, the bank may be legally obliged to pass on the information in this form and other financial information with respect to your financial accounts to the relevant tax authorities and they may exchange this information with tax authorities of another jurisdiction or jurisdictions pursuant to intergovernmental agreements to exchange financial account information.

This form is intended to request information for the purpose of complying with relevant tax regulations. Please complete this Self-Certification Form so that we hold accurate and up to date information about your tax residence status. If there are subsequent changes to your circumstances, please let us know by providing an updated Self-Certification Form.

If you have any questions on how to determine your tax residence status, please consult a professional adviser as we are not allowed to give tax advice.

SECTION 1 – ENTITY INFORMATION

* Mandatory fields

To facilitate smooth processing of your application, please fill out this form legibly in BLOCK LETTERS.

Name of Entity*

Country of Incorporation*

Registered Address of Entity*

Country*

Postal Code*

If mailing address is different from registered address

Mailing Address of Entity

Country

Postal Code

Please complete the following table indicating (i) where the Account Holder is tax resident; and (ii) the Account Holder's TIN for each country / reportable jurisdiction indicated. Countries / jurisdictions adopting the wider approach may require that the self-certification include a tax identifying number for each jurisdiction of residence (rather than for each reportable jurisdiction).

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

No	(i) Country/Jurisdiction of Tax Residence *	(ii) Tax Identification Number (TIN) *	(iii) Reason if no TIN were available, please select 1 option - Reason A, B+ or C			
1			<input type="checkbox"/> Reason A	<input type="checkbox"/> Reason B+	<input type="checkbox"/> Reason C	
2			<input type="checkbox"/> Reason A	<input type="checkbox"/> Reason B+	<input type="checkbox"/> Reason C	
3			<input type="checkbox"/> Reason A	<input type="checkbox"/> Reason B+	<input type="checkbox"/> Reason C	

If the Account Holder is tax resident in more than 3 countries / jurisdictions, please attach a separate sheet.

Reason A Country/jurisdiction where the entity is resident does not issue TINs to its residents.

Reason B+ The entity is otherwise unable to obtain a TIN or equivalent number.

Reason C No TIN is required. This reason only applies if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction.

If you have selected "Reason B+" for any of the country/jurisdiction indicated:

I have selected 'Reason B+' for	Explanation for 'Reason B+'
<input type="checkbox"/> Country 1 (indicated above because)	
<input type="checkbox"/> Country 2 (indicated above because)	
<input type="checkbox"/> Country 3 (indicated above because)	

SECTION 2 – TYPE OF ENTITY

* Select one only

1. Active Non-Financial Institution		FATCA Status	CRS Status
A	<input type="checkbox"/> An active business <ul style="list-style-type: none"> It derives less than 50% of its gross income (for the previous calendar year) from passive income such as dividends, interest, rents, royalties or annuities, and Less than 50% of its assets are used to produce passive income for the previous calendar year. 	Active NFFE	Active NFE (others)
B	<input type="checkbox"/> Start-up Company <ul style="list-style-type: none"> It is just starting and not yet in operation, and has no prior operating history; and It is investing capital into assets with the intention to operate a business other than that of a Financial Institution; and The date of its incorporation is not more than 24 months prior to the date of this Self-certification Form 	Excepted Non-Financial Start-Up Company	Active NFE (others)
C	<input type="checkbox"/> A charity / non-profit organisation <ul style="list-style-type: none"> The entity is established and maintained in its country / jurisdiction of residence exclusively for religious, charitable, scientific, artistic, cultural or educational purposes. 	Non-Profit Organisation	Active NFE (others)
D	<input type="checkbox"/> A public sector entity <ul style="list-style-type: none"> Government Agencies, Statutory Boards, Entities owned by Statutory Boards, Public Sector entities and/or Foreign Embassies or Trade Representative Offices 	Entity Wholly Owned by Exempt Beneficial Owners	Active NFE (Governmental Entity or Central Bank)
E	<input type="checkbox"/> An international organisation <ul style="list-style-type: none"> It is an international organisation or a supranational organisation comprised primarily of governments; and It has in effect headquarters or substantially similar agreement with the jurisdiction; and Its income does not inure to the benefit of private persons. 	International Organisation	Active NFE (International Organisation)
F	<input type="checkbox"/> A Publicly Listed Company or its Related Entity <ul style="list-style-type: none"> Its stock is regularly traded on one or more established securities markets, or It is an affiliate (in other words, a member) or an entity the stock of which is regularly traded on an established securities market 	Publicly Traded NFFE or NFFE Affiliate of a Publicly Traded Corporation	Active NFE (Publicly Traded NFE)
G	<input type="checkbox"/> None of the above classification applies Kindly seek professional tax advice and specify your classification below. Furthermore, please complete and submit the appropriate US IRS Form W-8 / W-9.) Classification recommended by professional tax advisor:	-	-

2. Passive Non-Financial Institution		FATCA Status	CRS Status
H	<input type="checkbox"/> A passive business <ul style="list-style-type: none"> It derives more than 50% of its gross income (for the previous calendar year) from passive income such as investments, dividends, interests, rents or royalties. Please complete Section 3 and the Self Certification on Tax Residency Status (Individual) Form for all Controlling Persons.	Passive NFFE	Passive NFE

SECTION 3 – DECLARATION OF CONTROLLING PERSON(S)¹

* Mandatory fields

This section is only applicable if you have selected type of entity H under Section 2. Please complete for all Controlling Persons.

Controlling Person

Name (please underline surname)		
Type Controlling Person (please select only 1 type)		
Legal Person <input type="checkbox"/> by Ownership	<input type="checkbox"/> by Senior Managing Official	<input type="checkbox"/> by Other Means

Controlling Person

Name (please underline surname)		
Type Controlling Person (please select only 1 type)		
Legal Person <input type="checkbox"/> by Ownership	<input type="checkbox"/> by Senior Managing Official	<input type="checkbox"/> by Other Means

If there are more than 2 Controlling Person, please attach a separate sheet.

DECLARATION & SIGN-OFF

1. I understand that the information supplied by me is covered by the full provision of the terms and conditions governing the Account Holder’s relationship with GLDB setting out how GLDB may use and share the information supplied by me.
2. I acknowledge that the information contained in this form and information regarding the Account Holder and any Reportable Account(s) may be reported 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.
3. I certify that I am authorised to sign for the Account Holder in respect of all the account(s) to which this form relates.
4. I declare that all statements made in this declaration are, to the best of my knowledge and belief, correct and complete.
5. I undertake to advise GLDB within 30 days of any change in circumstances which affects the tax residency status of the Account Holder identified in Section 3 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 the Controlling Person Self-Certification Form that you may be filling out after this), and to provide GLDB with a suitably updated self-certification and Declaration within 30 days of such change in circumstances.

Name of Director[±]

Signature

Date (DD/MM/YY)

Name of Director[±]

Signature

Date (DD/MM/YY)

[±] Director/s who sign off the account opening Extract of Board Resolution with GLDB