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(Please complete parts 1-4 in BLOCK CAPITALS)

Part 1 – Identification of Account Holder

Legal Name of Entity/Branch* Zad Holding company

Country of Incorporation or Organization QATAR

Current Residence Address:

Line 1 (e.g. House/Apt/Suite Name, Number, Street, if any)* Cornich, Doha Port Street no. 200 Building no. 383

Line 2 (e.g. Town/City/Province/County/State)* Doha,

Country* Qatar.

Postal Code/ZIP Code (if any)* 1444

Mailing Address: (please complete only if the mailing address is different than the address mentioned above)

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

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

Country

Postal Code/ZIP Code

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 provide, if held, the Account Holder's Global Intermediary Identification Number ("GIIN") obtained for FATCA purposes.

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(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: **Qatar Stock Exchange**

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 Organization
- (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)

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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.*

- i.
- ii.
- iii.
- iv.
- v.

b. Complete "Controlling Person tax residency self-declaration form" for each Controlling Person.

Part 3 – Country/Jurisdiction of Residence for Tax Purposes and related Taxpayer Identification Number (TIN) or Equivalent Number*

Please complete the following table indicating (i) where the Account Holder is tax resident and (ii) The Account Holder's TIN for each country/jurisdiction indicated. Countries/Jurisdictions adopting the wider approach may require that the self-declaration include a tax identifying number for each country/jurisdiction of residence (rather than for each Reportable Jurisdiction). (iii) If the Account Holder is tax resident in more than five countries/jurisdictions, please use a separate sheet. (iv) If a TIN is unavailable please provide the appropriate reason A, B or C where indicated below.

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	QATAR	5000163378	
2			
3			
4			
5			

If B was selected, please explain below why you are unable to obtain a TIN.

- 1
- 2
- 3
- 4
- 5

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 Dukhan Bank setting out how Dukhan Bank may use and share the information supplied by me.

I acknowledge that the information contained in this form and the 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 the Account Holder (or am authorized to sign for the Account Holder) 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 Dukhan Bank within [45] days of any change in circumstances which affects the tax residency status of the individual identified in Part 1 of this form or causes the information contained herein to become incorrect or incomplete, and to provide Dukhan Bank with a suitably updated self-declaration and Declaration within 90 days of such change in circumstances.

Signature: *

Name: * Abdul Salam Kadarsha Abdul Hakkeem / Mansoor Mohamed J M Al Thani

Date: *

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Note Please indicate the capacity in which you are signing the form (for example 'Authorized Officer') If signing under a power of attorney, please also attach a certified copy of the power of attorney

Capacity: * CFO / Board Member