

CLIENT DECLARATION FOR FATCA AND CRS PURPOSES

FINANCIAL CLIENTS

Client name :	Client ID:
Part 1	FATCA STATUS (US FOREIGN ACCOUNT TAX COMPLIANCE ACT) STATUTORY DECLARATION
For the purposinformation be	se of FATCA due diligence and reporting requirements imposed on Saxo, please provide the company's FATCA elow.
This form is or Therefore, fina Status with a s declaration he	nly intended for non-US Financial Institutions (or FFIs) declaring to be direct beneficiaries of holdings and payments. Ancial institutions declaring to be intermediaries of payments to underlying clients shall instead declare their FATCA Separate US declaration (W-8IMY). Legal entities with FATCA Status of Non-Financial Entity (NFFE) cannot make status re either.
Note, that Sax	o does not on-board financial institutions that are categorized as nonparticipating FFIs.
For guidance on www.irs.gov/	on how to classify your account according to FATCA please refer to the instructions to US tax form W-8BEN-E or on fatca
Please provide	the entity's Global Intermediary Identification Number (GIIN) if you have one:
	· · · · · ·
	he legal entity/corporation:
I/We declare o	our FATCA status (Chapter 4 of the US Internal Revenue Code) to be:
Reporting N Registered of Sponsored Certified de Certified de Certified de Certified de Certified-de Owner-doct Nonreportir Exempt reti Territory fin Excepted in	Model 1 FFI (the entity is domiciled in an IRS partner jurisdiction) Model 2 FFI (the entity is domiciled in an IRS partner jurisdiction) deemed-compliant FFI (other than a reporting Model 1 FFI)

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PART 2 CRS (COMMON	REPORTING STANDARD IN OECD CONTEXT)		
For the purpose of CRS due dilige	ence and reporting requirements imposed on Saxo , ple	ase provide the FI's C	RS information
below.			
I/We declare our CRS status to:			
a) Financial Institution – Inve	estment Entity		
(i) An Investment Entity loca	ted in a Non-Participating Jurisdiction and managed	by another Financial	Institution
(ii) Other Investment Entity		•	
	oository Institution, Custodial Institution or Specified	Insurance Company	
.,	φ	,	
Only complete this section if th	e FI is tax resident in more/other countries than the o	country of registered	address:
COUNTRY OF RESIDENCE	ADDRESS	TIN	NO TIN AVAILABLE (X)
Please attach a separate docume	ent if further countries of residency.		
If (i) is ticked please indicate the	name of any Controlling Person(s) of the FI:		
NAME	ADDRESS	COUNTRY OF TAX RESIDENCE	E TIN
			-

PART 3 CLAIM FOR US TAX TREATY BENEFITS - US WITHHOLDING TAX TREATY STATEMENT

Please attach a separate document if further controlling persons.

FART 5 CLAIM FOR 05 TAX TREATT BENEFITS - 05 WITHHOLDING TAX TREATT STATEMENT				
Entities/corporations in jurisdictions that have concluded a tax treaty with the U.S. may under the provisions of such tax treaty be eligible for reduced rates on withholding taxes on income derived from sources in the U.S. The applicability of treaty benefits, however, depends on whether the recipient meets the provisions in the specific tax treaty, including any limitation of benefits provisions. It is the responsibility of the client to ensure that such provisions are met. Please consult with your tax advisor on treaty benefit issues.				
Please tick off the below declaration if you want to claim tax treaty benefits:				
(Company name:) meets all the provisions of the Tax Treaty between US and (country) that are necessary to claim a reduced rate of withholding, including any limitation on benefits provision, and derives the income within the meaning of section 894 of the US Internal Revenue Code, and the regulations thereunders the beneficial owner. The following are types of limitation on benefits provisions that may be included in the applicable tax trecklick only one):	er,			
Government Other tax exempt Subsidiary of publicly traded Corporation Tax exempt pension trust or pension fund Company with an item of income that meets active trade or business test Favorable discretiionary determination by the U.S. compentent authority received Company that meets the derivative benefits test Company that meets the ownership and base erosion test Publicly traded corporation Other (please specify article and paragraph):				

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PART 4	CEDTIE	ICATION
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I declare under penalties of perjury that the information given in part 1 and 2 of this form to the best of my knowledge is true, correct and complete.

I further certify under penalties of perjury that:

- The entity identified in Part 2 is not a US person
- The income to which this form relates is: (a) not connected with the conduct of a trade or business in the United States, (b) connected but is not subject to US tax under an income tax treaty, or (c) the partner's share of a partner-ship's effectively connected income
- For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person. A foreign person includes a foreign corporation, a foreign partnership, a foreign trust, a foreign estate, and any other person that is not a U.S. person. It also includes a foreign branch or office of a U.S. financial institution or U.S. clearing organization if the foreign branch is a qualified intermediary (QI). Generally, a payment to a U.S. branch of a foreign person is a payment to a foreign person.

Further, I agree that I will submit a new form within 30 days if any certification given in this form becomes incorrect.

Signature:	Name:
Date:	
I certify that I have authorization to sign on behalf of the	above.

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