



Account Number:

Do NOT use this Self-Certification Form for:

Entity accountholders (use instead the AEOI Entity Self-Certification Form)

Beneficial Owner / Controlling Person (use instead the AEOI Beneficial Owner / Controlling Person Self-Certification Form)

**Automatic Exchange of Information “AEOI” (FATCA & CRS)
Individual Self-Certification Form**

PART I: IDENTIFICATION OF THE ACCOUNTHOLDER

	Required Items	Details
A.	First Name	
B.	Last Name	
C.	Current residence address	
	Line 1 (e.g. House/ Apt/ Suite Name/ Number, Street)	
	Line 2 (e.g. Province / County / State, if relevant)	
	Postal Code	
	City	
	Country	
D.	Country of birth	
E.	City of birth	
F.	Date of birth [DD/MM/YYYY]	

PART II: U.S. VS. NON U.S. STATUS

Please answer all three questions

	Yes	No
1 Are you a U.S. citizen?	<input type="checkbox"/>	<input type="checkbox"/>
2 Are you a U.S. tax resident? (e.g. Substantial Presence Test ¹ , Green Card Test)	<input type="checkbox"/>	<input type="checkbox"/>
3 Are you a U.S. taxpayer for another reason?	<input type="checkbox"/>	<input type="checkbox"/>

In case of loss of nationality of the United States or abandonment of residence in the United States, please attach the “Certificate of Loss of Nationality of the United States” (Form DS-4083) or the “Record of Abandonment of Lawful Permanent Resident Status” (Form I-407), as applicable.

If you have answered “Yes” to one of the questions above, please provide also a duly completed and signed U.S. Form W-9.

If you consider that you are not a U.S. Person despite having answered “Yes” to one of the questions above, please state your considerations below (e.g. student status, diplomat status) and provide the appropriate documentation to prove your circumstances:

¹ To meet the substantial presence test, a person must be physically present in the United States on at least 31 days during the current year, and 183 days during a 3-year period that includes the current year and the 2 years immediately before that, counting: all the days the person was present in the current year, and one-third of the days the person was present in the first year before the current year, and, one-sixth of the days the person was present in the second year before the current year.



PART III: COUNTRY OF TAX RESIDENCE AND TAX IDENTIFICATION NUMBER OR FUNCTIONAL EQUIVALENT (TIN)

An individual is tax resident in at least one country and can be tax resident in more than one country. Please complete the following table indicating (i) where you are tax resident, and (ii) your TIN for each country indicated.

If you are tax resident in more than one country, you are formally required to include all jurisdictions of tax residence.

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

Reason A - Your country of residence does not issue TINs, or

Reason B - You are otherwise unable to obtain a TIN or equivalent number.

	Country of tax residence	Taxpayer Identification Number	If no TIN available enter A or B
1.			
2.			
3.			

If you have selected **Reason B** above, please provide an additional explanation below, e.g. you have just applied for a TIN, the country of residence issues TINs automatically but only on certain dates (In such case, please provide your TIN as soon as you receive it).

1.	
2.	
3.	

For more information on TINs and the concept of tax residency you may visit:

- [European Commission website](#), where you can check the validity of a TIN, and
- [OECD explanations on TINs](#), and
- [OECD explanations on tax residency rules](#).

PART IV: DECLARATION AND SIGNATURE

I, the undersigned, declare that I have examined the information on this Form and that to the best of my knowledge and belief it is true, correct and complete. In particular I confirm that I am not tax resident in any other country than the one(s) listed.

I, the undersigned, certify towards the Bank, that I respect all declarative tax obligations to the relevant authorities in my country(ies) of tax residence, and, where required, that I am committed to pay all taxes and fees (if any) related to the interests held in the Bank.

Notification of changes

I personally commit to notify the Bank promptly in writing of any change affecting the declarations on this Form within 30 days of the change.

If there is a change of circumstances that causes the Bank to know, or have reason to know, that the information in the Form is incorrect or unreliable, the Bank will not be able to rely on this original Form and I undertake to complete a new valid Form.

Should my status change from "Non-U.S. Person" to "U.S. Person", I undertake to provide a valid U.S. Form W-9 within 30 days of the change of circumstances.

Harmless Clause

In case the Form should become untrue, and if I do not communicate/sign the appropriate documentation to the Bank (inter alia, the new set of Form(s) as well as the IRS Form W-9 if required), I acknowledge that the Bank is entitled to apply its reason to know procedures and/or presumption rules to assign a status by default.

Furthermore, I understand that I may be held personally liable by the Bank for any and every consequence in this respect.



Declarations & Data privacy

By application of FATCA and CRS regulations, as well as the Luxembourg law on the protection of individuals in relation to the processing of their personal data (Data Protection Law), and the European General Data Protection Regulation, I declare being informed, and agrees, that my personal data (including, but not limited to, my name, address, country of residence for tax purposes, TIN) and financial information related to the account held, may be exchanged with the Luxembourg tax authorities, then can in turn transfer this information to the relevant foreign tax authorities, including the U.S. tax authorities (if relevant).

In this context, I am informed, and agrees, to ensure an efficient service, the data may be processed and the reporting may be prepared either by the Bank or any authorised third party which will then transmit them to the Luxembourg tax authorities. The data will be treated with the utmost confidentiality. The Bank (or any authorized third party), acting as FATCA and CRS data controller and data processor, will in no circumstances use the compiled data other than for FATCA and CRS purposes.

I must provide any additional information that might be required from time to time by the Bank for the purposes of the FATCA and CRS Laws, and failure to do so within the prescribed timeframe may trigger a reporting to the Luxembourg tax authorities.

As per the data protection rules, I have a right of access to the data collected and that I have a right to rectify the data in case of error.

Date (DD/MM/YYYY): _____ City: _____

Print name: _____ Signature: _____

Note: If signing under a power of attorney, please also attach a duly executed copy thereof.

Capacity: _____