

FATCA Entity Self-Certification Form

This Form must be completed for all Non-Individuals ("Applicant") who open accounts with the State Bank of India, Singapore Branch ("SBIS") and serves to clarify possible tax liability in the United States of America (U.S.). In addition to this Form, additional documents may be required to prove the Applicant's U.S. person status. FATCA refers to the Foreign Account Tax Compliance Act of the U.S.

Part A: General Information	
Applicant Name:	Applicant's Registration Number:
Country of Incorporation:	Country(ies) of Operation:
Country(ies) in which Applicant is subjected to Tax:	Tax Identification Number (TIN):

Part B: FATCA Status of Applicant
<p>Please complete this section by ticking the corresponding boxes that match your FATCA status. Kindly consult your tax advisor if you require assistance on identifying your FATCA Status.</p> <p><input type="checkbox"/> Specified US Person [Please provide SBIS with completed W-9]</p> <p><input type="checkbox"/> Non-Financial Foreign Entity (NFFE)</p> <p style="margin-left: 20px;"><input type="checkbox"/> Active NFFE <input type="checkbox"/> Passive NFFE <input type="checkbox"/> Other NFFE, please specify _____</p> <p><input type="checkbox"/> Exempt Beneficial Owner</p> <p style="margin-left: 20px;"><input type="checkbox"/> Government Entity <input type="checkbox"/> International Organisation <input type="checkbox"/> Central Bank</p> <p style="margin-left: 20px;"><input type="checkbox"/> Fund that Qualifies as Exempt Beneficial Owner</p> <p><input type="checkbox"/> Foreign Financial Institution (FFI)</p> <p style="margin-left: 20px;"><input type="checkbox"/> Singaporean Financial Institution or other Partner Jurisdiction Financial Institution [Please provide SBIS with GIIN in Part D of this Form]</p> <p style="margin-left: 20px;"><input type="checkbox"/> Reporting FFI [Please provide SBIS with GIIN in Part D of this Form and W-8-BEN E]</p> <p style="margin-left: 20px;"><input type="checkbox"/> Non-Reporting FFI</p> <p style="margin-left: 20px;"><input type="checkbox"/> Participating FFI [Please provide SBIS with GIIN in Part D of this Form and W-8-BEN E]</p> <p style="margin-left: 20px;"><input type="checkbox"/> Non-Participating FFI *</p> <p style="margin-left: 20px;"><input type="checkbox"/> Deemed Compliant FFI [Please provide SBIS with GIIN in Part D of this Form and W-8-BEN E]</p> <p style="margin-left: 20px;"><input type="checkbox"/> Owner-Documented FFI [Please provide SBIS with GIIN in Part D of this Form and W-8-BEN E]</p>

Part C: Information on US Controlling Person(s)																								
<p><input type="checkbox"/> Applicant has 1 or more US Controlling Person(s)</p> <p>Please complete this section with details on Applicant's US Controlling Person(s)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Name</th> <th style="width: 30%;">Residential Address</th> <th style="width: 15%;">TIN</th> <th style="width: 30%;">Percentage Ownership</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> <p><input type="checkbox"/> Applicant has no US Controlling Person(s)</p> <p><i>Note - For Passive NFFE, you are required to aggregate the ownership values of any related parties to determine whether the ownership threshold of 25% is met. "Related parties" refers to a person's family which includes brothers and sisters, spouse, ancestors and lineal descendants. It also includes legal adoption. "Ancestors" includes parents and grandparents. "Lineal descendants" includes children and grandchildren. "Family" includes spouses of any of the family members.</i></p>	Name	Residential Address	TIN	Percentage Ownership																				
Name	Residential Address	TIN	Percentage Ownership																					

Part D: Global Intermediary Identification Number (GIIN)

Please only complete this section if the Applicant is a FFI or Direct Reporting NFFE or Sponsor Direct Reporting NFFE and has a GIIN

GIIN:

If you are a Sponsored FFI without a GIIN, please provide the name and GIIN of the Sponsoring FFI

Sponsoring FFI:

GIIN of Sponsoring FFI:

Part E: Change of Status

You agree to notify SBIS within 30 days ("Notification Period") if there are any changes in circumstances that may cause the information furnished in this Form or in the relevant accompanying documents provided to SBIS to become incorrect, misleading, potentially misleading, outdated and/or anything which, in SBIS's opinion, constitutes a material or adverse effect on your status ("Material Change in Status"). In the event of the Applicant's failure to notify SBIS of any Material Change of Status within the Notification Period, SBIS reserves the right to terminate the banking relationship with the Applicant.

Part F: Confirmation of Completeness, Accuracy and Truth of Information

You acknowledge and confirm that the information provided in this Form and the relevant accompanying documents, including but not limited to Form W-9 provided to SBIS are complete, accurate and true.

Part G: Authorisation

You hereby irrevocably authorise SBIS to disclose to the Inland Revenue Authority of Singapore (IRAS) and/or foreign tax authorities (including the U.S. Internal Revenue Service) the Applicant's name, address, taxpayer identification number, account number, FATCA compliance status, FATCA indicia, account balance, account value, payments to and from any of the Applicant's account(s), account statements, amount of money, the type and value of financial products and/or assets held with SBIS, amount of revenue and income and any other information regarding the Applicant and shareholders or beneficial owners of the Applicant ("Applicant's Information") as may be requested or required by IRAS and/or foreign tax authorities (including the U.S. Internal Revenue Service).

You also irrevocably authorise SBIS to withhold and payout from the Applicant's account(s) and/or from the income derived from SBIS such amounts as may be required by IRAS and/or foreign tax authorities (including the U.S Internal Revenue Service).

You further authorise SBIS to close the Applicant's account and SBIS reserves the right to terminate the banking relationship with the Applicant if:

- The information provided in this Form and relevant accompanying documents are found to be incomplete, inaccurate and/or false, or
- You fail to provide the necessary information to determine whether you are a U.S. person, or
- You fail to provide the necessary information requested by SBIS to confirm your FATCA classification, or
- You have specified your status as a Non-Participating Foreign Financial Institution (FFI).

You agree and acknowledge that SBIS is entitled to take all necessary actions to be and remain compliant with FATCA under any laws, regulations, directives, notices or agreements between governments or issued by authorities such as the Monetary Authority of Singapore, IRAS and the Ministry of Finance of Singapore.

Part H: Allocation of Risk

You agree that, subject to any professional duties and obligations that are imposed on us by statute or as required by relevant professional standards, we shall not seek to establish the accuracy and completeness of any information and the authenticity of any document provided to us by you. Where any document so provided purports to be a copy, we may assume that the copy provided is a complete, true and accurate copy of such document.

You agree to accept the risk and not hold SBIS responsible if:

- The banking relationship with SBIS is terminated due to your failure to notify SBIS within the Notification Period of any changes in circumstances that may cause the information furnished in this Form or in the relevant accompanying documents provided to SBIS to become incorrect, misleading, potentially misleading and/or outdated, or
- The information provided in this form and/or the relevant accompanying documents provided to SBIS are found to be incomplete, inaccurate and/or false, or

You also agree to accept the risk and hold SBIS harmless against all actions, proceedings and claims brought or threatened against SBIS (whether by you or any third party) and all loss, damages and expenses (including legal expenses) relating to, in any way out of or in connection with the disclosure of the Applicant's Information as required by IRAS and/or foreign tax authorities (including the U.S. Internal Revenue Service).

Part I: Signatory

We hereby acknowledge and fully agree to the clauses, terms and conditions specified within this Form. We further acknowledge that we permit the disclosure of information, account withholding and termination of banking/business relationship as may be deemed necessary by SBIS, in accordance with the relevant laws of Singapore, towards the fulfilment of its obligations under FATCA, Singapore's Intergovernmental Agreement with the US (IGA) and/or to authorities such as the Monetary Authority of Singapore, IRAS and/or the Ministry of Finance of Singapore.

Name & Signature of Authorised Applicant:
Date:

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Date: