

# Controlling Person Tax Residency Self-Certification Form

## Form CRS-CP

### INSTRUCTIONS

Form CRS Controlling Person Self-Certification Form  
Please read these instructions before completing the form

#### Why are we asking you to complete this form?

To help protect the integrity of tax systems, governments around the world are introducing a new information gathering and reporting requirement for financial institutions. This is known as the Common Reporting Standard (the "CRS").

Under the CRS, Boslil Bank Limited (**Boslil or we**) is required to determine where you are 'tax resident' (this will usually be where you are liable to pay income taxes). If you are tax resident outside the country where your account is held, we may need to give our local tax authority this information, along with information relating to your accounts that may then be shared between different countries' tax authorities.

Completing this form will ensure that we hold accurate and up to date information about your tax residency.

If your circumstances change and any of the information provided in this form becomes incorrect, please inform Boslil immediately and provide an updated Self-Certification.

#### Who should complete the CRS Controlling Person Self-Certification Form?

When an account is held with Boslil on behalf of a Passive Entity (e.g. certain trusts or investment vehicles) we need those **individuals** identified as having ultimate control of the entity to complete a form. These individuals are known as Controlling Persons.

If you need to self-certify on behalf of an entity (which includes all companies, trusts and partnerships) complete an "Entity Tax Residency Self-Certification Form" (CRS-E). Similarly, if you are a personal Account Holder, complete an "Individual Self-Certification Form" (CRS-I). You can find these forms at [www.boslil.com/crs](http://www.boslil.com/crs).

For joint or multiple controlling persons, each individual will need to complete a copy of this form. Even if you have already provided information in relation to the United States Government's Foreign Account Tax Compliance Act (FATCA), you may still need to provide additional information for the CRS as this is a separate regulation.

If you are completing this form on behalf of a controlling person, please ensure that you inform them that you have done so and state in what capacity you are signing in Part 4. For example, you may be a representative of the entity, or completing the form under a power of attorney.

#### Where to go for further information?

If you have any questions about this form or these instructions please visit: [www.boslil.com/crs](http://www.boslil.com/crs) or contact your Client Relations Officer.

The Organisation for Economic Co-operation and Development (OECD) has developed the rules to be used by all governments participating in the CRS and these can be found on the OECD's 'Automatic Exchange of Information' (AEOI) website: [www.oecd.org/tax/automatic-exchange/](http://www.oecd.org/tax/automatic-exchange/)

If you have any questions on how to define your tax residency status, please visit the OECD website or speak to a professional tax adviser as we are not allowed to give tax advice.

You can find a list of definitions in the separate Appendix found under the **CRS FORMS** tab.

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Please Complete Parts 1-3 in BLOCK CAPITALS

### Part 1 – Identification of Controlling Person

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#### A. Name of Controlling Person:

Family Name or Surname

Title

First Name

Middle Name(s)

#### B. Current Residence Address:

House/Apt/Suite No./ Street

Town/City/ State/Province

Country

Postal Code

#### C. Mailing Address: (please complete if different from the address shown in Section B above)

House/Apt/Suite No.  
Street/P. O. Box

Town/City/ State/Province

Country

Postal Code

D. Date of Birth (DD/MM/YYYY)

#### E. Place of Birth:

Town/City of Birth

Country of Birth

#### F. Please enter the legal name of the relevant Entity Account Holder(s) of which you are a Controlling Person

Legal Name of <b>Entity 1</b>	<input type="text"/>
Legal Name of <b>Entity 2</b>	<input type="text"/>
Legal Name of <b>Entity 3</b>	<input type="text"/>

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### Part 2 - Jurisdiction(s) of Residence for Tax Purposes and related Taxpayer Identification Number or Functional Equivalent (TIN)

Please complete the following table indicating:

- (i) where the Controlling Person is tax resident;
- (ii) the Controlling Person's TIN for each country indicated; and,
- (iii) if the Controlling Person is a tax resident in a country that is a Reportable Jurisdiction(s)<sup>1</sup> then please also complete **Part 3 "Type of Controlling Person"**.

If the Controlling Person is tax resident in more than three (3) jurisdictions please use a separate sheet.

If a TIN is unavailable please provide the appropriate reason A, B or C where appropriate.

- **Reason A** – The country where I am liable to pay tax does not issue TINs to its residents
- **Reason B** – Despite the country/jurisdiction of residence for tax purposes generally issuing TINs, the Controlling Person is not required to obtain a TIN.
- **Reason C** – The Controlling Person is otherwise unable to obtain a TIN. Please explain why you are unable to obtain a TIN in the below table.

Jurisdiction(s) of Tax Residence	TIN	If no TIN available enter Reason A, B or C
1		
2		
3		

Please explain in the following boxes why you are unable to obtain a TIN if you selected Reason C above.

1	
2	
3	

<sup>1</sup> See OECD's 'Automatic Exchange of Information' (AEOI) website: [www.oecd.org/tax/automatic-exchange/](http://www.oecd.org/tax/automatic-exchange/)

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### Part 3 – Type of Controlling Person

(Please only complete this section if you are a tax resident in one or more Reportable Jurisdictions)

Please provide the Controlling Person's status by ticking the appropriate box below.		Entity 1	Entity 2	Entity 3
a	Controlling Person of a legal person - <b>control by ownership</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b	Controlling Person of a legal person - <b>control by other means</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c	Controlling Person of a legal person - <b>senior managing official</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d	Controlling Person of a trust - <b>settlor</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e	Controlling Person of a trust - <b>trustee</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f	Controlling Person of a trust - <b>protector</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g	Controlling Person of a trust - <b>beneficiary</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h	Controlling Person of a trust - <b>other</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i	Controlling Person of a legal arrangement (non-trust) - <b>settlor/equivalent</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j	Controlling Person of a legal arrangement (non-trust) - <b>trustee/equivalent</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k	Controlling Person of a legal arrangement (non-trust) - <b>protector/equivalent</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l	Controlling Person of a legal arrangement (non-trust) - <b>beneficiary/equivalent</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m	Controlling Person of a legal arrangement (non-trust) - <b>other/equivalent</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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### Part 4 – Declarations and Signature

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

I acknowledge that the information contained in this form and information regarding the Controlling Person and any Reportable Account(s) may be reported to the tax authorities of the jurisdiction in which this account(s) is/are maintained and exchanged with tax authorities of another jurisdiction or jurisdictions in which the Controlling Person may be tax resident pursuant to intergovernmental agreements to exchange financial account information.

I certify that I am the Controlling Person, or am authorized to sign for the Controlling Person, of all the account(s) held by the Entity Account Holder to which this form relates.

I certify that where I have provided information regarding any other person (such as a Controlling Person or other Reportable Person to which this form relates) that I will, within 30 days of signing this form, notify those persons that I have provided such information to Boslil and that such information may be provided to the tax authorities of the country in which the account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the person may be tax resident pursuant to intergovernmental agreements to exchange financial account information.

**I declare that all statements made in this declaration are, to the best of my knowledge and belief, correct and complete.**

**Signature:**

I undertake to advise Boslil within 30 days of any change in circumstances which affects the tax residency status of the Controlling Person identified in Part 1 of this form or causes the information contained herein to become incorrect, and, to provide Boslil a suitably updated self-certification and declaration within 90 days of such changes in circumstances.

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**Name:**

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**Date:**

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**Note:** If you are not the Controlling Person, please indicate the capacity in which you are signing the form. If signing under a power of attorney, please also attach a certified copy of the power of attorney.

**Capacity:**

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