

FATCA/CRS Entity Self-Certification Form

Please read these instructions before completing the form.

Under Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS), Maybank Group is required to collect and report certain information to the local tax authority on the status of our customers.

Should there is a change in circumstances relating to information, such as the account holder's tax status or other mandatory field information that makes this form incorrect or incomplete, please let us know by notifying us or providing us with an updated Self-Certification Form.

As a financial institution, we are not allowed to give tax advice. Kindly consult your tax or legal adviser should you have questions on or in relation to FATCA and CRS.

Part 1 - Identification of Account Holder

Legal Name of Entity:			
Country of incorporation:			
Business Registration Number:			
Registered Address:	Mailing Address: (Complete if different to the current residence address)		
Address Line 1:	Address Line 1:		
Address Line 2:	Address Line 2:		
Address Line 3: (Postal Code/ZIP Code)	Address Line 3: (Postal Code/ZIP Code)		
Address Line 4: (Country)	Address Line 4: (Country)		

Part 2 - Jurisdiction of Residence and Taxpayer Identification Number (TIN)

Complete the following table indication :

- (i) the jurisdiction of residence where the account holder is a **resident for tax purposes** (except for Brunei) and
- (ii) the account holder's TIN for each jurisdiction indicated. Indicate **All** jurisdictions of residence.

If a TIN is unavailable, indicate which of the following reasons is applicable:

Reason A - The jurisdiction where the account holder is a resident for tax purpose does not issue TINs to its residents.

Reason B - The account holder is unable to obtain a TIN.

Reason C - TIN is not required.

(Note: Select this reason only if the authorities of the jurisdiction of residence do not require the TIN to be disclosed.)

	Country of Tax Residence	TIN	If no TIN available, indicate 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 B** above.

1	
2	
3	

Note: (1) if the Entity is not a tax resident of any country, please indicate above (line1) its place of effective management or country in which its principal office is located.

(2) If the account holder is a resident for tax purpose in more than three countries, please use separate sheet.

Part 3 - Financial Institution (FI)
FATCA Status

a.	The Entity is incorporated, established, constituted or organized in the United States of America.	
	<input type="checkbox"/> Yes. Please complete and submit U.S. IRS Form W9 (https://www.irs.gov/pub/irs-pdf/fw9.pdf). <input type="checkbox"/> No. Please proceed to Part 3 (b) - (f).	
b.	The Entity is a Participating Foreign Financial Institution. - Global Intermediary Identification Number (GIIN) <input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="checkbox"/> Participating FFI <input type="checkbox"/> Reporting Model 1 FFI <input type="checkbox"/> Reporting Model 2 FFI <input type="checkbox"/> Registered deemed-compliant FI
c.	<input type="checkbox"/> The entity is a Non-Participating Foreign Financial Institution	Non-Participating FFI
d.	<input type="checkbox"/> Other types of Foreign Financial Institutions. Please complete and submit U.S IRS Form W8BENE (https://www.irs.gov/pub/irs-pdf/fw8bene.pdf)	

CRS Status

Part 3 - Financial Institution (FI)		
e.	<input type="checkbox"/> It is an Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution. <i>(Please complete Part 5 - Controlling Person if ticking this box)</i>	Non-Participating FI
f.	<input type="checkbox"/> It is a Depository Institution, Custodial Institution or Specified Insurance Company	Financial Institution

Part 4 - Non Financial Entity (NFE)		
		FATCA/CRS Status
1	<input type="checkbox"/> Active Business <ul style="list-style-type: none"> - At least 50% of its gross income (for the previous calendar year) from these business activities and <u>not</u> from passive income such as investments, dividends, interest, rents or royalties. - At least 50% of assets held by produce or are held to produce active income. 	Active NFFE
2	<input type="checkbox"/> Start Up Company <ul style="list-style-type: none"> - Date of incorporation not more than 24 months. - Not yet operating a business and has no prior operating history. - Investing capital in assets with the intent to operate a new line of business other than that of a financial institution. 	Excepted non-financial start-up company
3	<input type="checkbox"/> Charity/Non-Profit Organisation <ul style="list-style-type: none"> - Entity that is a religious, charitable, scientific, artistic, cultural or educational that is exempt from income tax in its country of residence. - Professional organization, business league, chamber of commerce, labour organisation, agricultural or horticultural organization, civil league or an organization operated exclusively for promotion of social welfare. - Has no shareholders or members who have a proprietary or beneficial interest in its income or assets. - Its formation documents or the local law do not permit the distribution of any income or assets to or for the benefit of a private person or non-charity entity except for payment as reasonable compensation for services or distribution in accordance with the charity's charitable activities. - Its formation documents or the local law require all of the charity's assets to be distributed to a government entity or other non-profit organization upon the charity's dissolution or liquidation. 	Non Profit Organisation
4	<input type="checkbox"/> Excepted non-financial entity in liquidation or bankruptcy <ul style="list-style-type: none"> - An entity that is not Financial Institution or investment entity in the past five years. - An entity in the process of liquidation or bankruptcy or re-organising with the intent to continue or recommence operations in business other than that of a Financial Institution. 	Excepted non financial entity in liquidation or bankruptcy
5	Publicly Listed Company or its Related Entity <input type="checkbox"/> - The entity is a corporation that is not a financial institution. <ul style="list-style-type: none"> - The stock of such corporation is regularly traded on one or more established securities markets, including _____ (name one securities exchange upon which the stock is regularly traded) <input type="checkbox"/> - The entity is a corporation that is not a financial institution. <ul style="list-style-type: none"> - The entity is a member of the same expanded affiliated group as an entity the stock of which is regularly traded on an established securities market. - The name of the entity, the stock of which is regularly traded on an established securities market, is _____ and - The name of the securities market on which the stock is regularly traded is _____. 	NFFE that is publicly traded or affiliate of a publicly trade NFE
6	<input type="checkbox"/> Passive Investment Entity <i>It derives more than 50% of its gross income from passive income such as investments, dividends, interests, rents or royalties.</i> <i>(Please complete Part 5 - Controlling Person if ticking this box)</i>	Passive NFFE
7	<input type="checkbox"/> Exempt Beneficial Owners <i>Central Banks, Government agencies, Statutory Boards, Entities owned by Statutory Boards, Foreign Embassies or Trade Representative Offices, International Organisations.</i>	Entities wholly owned by exempt beneficial owners

Note:

If you do not belong to any of the above, please complete and submit U.S IRS Form W8BENE (<https://www.irs.gov/pub/irs-pdf/fw8bene.pdf>).

Part 5 - Controlling Person

Indicate the name of all Controlling Person(s) of the Account Holder:

1. _____
2. _____
3. _____

Note:
 (1) Complete the FATCA/CRS Controlling Person Self Declaration Form for each of the Controlling Person.
 (2) If there is no natural person(s) who exercise control of the account holder then the Controlling Person will be the natural person(s) who hold the position of senior managing official.

Declaration and Signature

I/We represent and declare that the information provided above is true, accurate and complete. I/We understand that the term "U.S. person" means any citizen or resident of the United States.

I/We certify that I/We are authorised to sign for the Account Holder in respect of all the account(s) to which this form relates.

I/We hereby consent to Malayan Banking Berhad or any of its affiliates, including branches (collectively "the Bank") disclosing the financial accounts information to regulatory authorities in accordance with the requirements of the Foreign Account Tax Compliance Act and Common Reporting Standard as may be stipulated by applicable laws, regulations, agreement or regulatory guidelines or directives.

I/We hereby agree that the Bank may withhold from my/our account(s) such amounts in accordance with the provisions of the Foreign Account Tax Compliance Act or as may be stipulated by applicable laws, regulations, agreement or regulatory guidelines or directives.

I/We hereby agree that the Bank may classify me/us as a reportable account(s) or non-participating foreign financial institution ("NPFPI") and/or suspend, recall or terminate my/our account(s) and/or facilities granted to me/us, in the event I/We fail to provide accurate and complete information and/or documentation as the Bank may require.

I/We undertake to notify the Bank in writing within 30 calendar days if there is a change in any information which I/We have provided to the Bank.

Signature:	_____
Name:	_____
Date (dd/mm/yyyy):	_____
Capacity:	_____ <i>(Please indicate the capacity in which you are signing the form. If signing under a Power of Attorney please also attached a certified copy of the Power of Attorney)</i>