

Instructions – CRS-Entity

Please read these instructions before completing the form.

Regulations on Common Reporting Standard (“CRS”) require RHB Bank Nominees Pte Ltd to collect and report certain information about an account holder’s tax residence. If your tax residence (or the account holder, if you are completing the form on their behalf) is located outside of Singapore, we may be legally obliged to pass on the information in this form and other financial information with respect to your accounts maintain with us to the Inland Revenue Authority of Singapore (“IRAS”) and they may exchange this information with tax authorities of another jurisdiction or jurisdictions pursuant to intergovernmental agreements to exchange financial account information.

This form will remain valid unless 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. In that case you must notify us and provide an updated self-certification.

Please complete this form if you are doing on behalf of an entity account holder other than a sole proprietor.

By completing the form, you are acknowledging and agreeing to the **RHB CRS Terms**. In addition, please refer to the **Appendix** for a summary description of select defined terms used in this form.

As a financial institution, we are not allowed to give tax advice. Your tax adviser may be able to assist you in answering specific questions on this form.

Warning note on offences for non-compliance

It is an offence under section 105M of the Singapore Income Tax Act if any person, in making a self- certification, makes a statement that is false or misleading in a material particular, if that person knows or have reason to believe that such information is false or misleading. Such offence is punishable with a fine not exceeding SGD 10,000 or imprisonment for a term not exceeding 2 years or to both.

Entity Self-Certification Form

Section 1: Identification of Account Holder and Entity Type

Entity tax residency self-certification FORM (please complete parts 1-3 in BLOCK CAPITALS)

TO RHB BANK NOMINEES PTE LTD ("THE NOMINEES")

Part 1 – Identification of Account Holder

A. Legal Name of Entity/Branch	
B. Business Registration Number	
C. Registered Business Address	
Line 1 (e.g. House/Apt/Suite Name, Number, Street, if any)*	
Line 2 (e.g. Town/City/Province/County/State)*	
Country*	Postal Code/ZIP Code (if any)*

Part 2 – Entity Type

Please provide the Account Holder's Status by ticking one of the following boxes.

1. **(a) Financial Institution** – Investment Entity

- i. An Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution
(Note: if ticking this box please also complete Part 2(2) below)
- ii. Other Investment Entity

(b) Financial Institution – Depository Institution, Custodial Institution or Specified Insurance Company

If you have ticked **(a)** or **(b)** above, please provide, if held, the Account Holder's Global Intermediary Identification Number ("GIIN") obtained for FATCA purposes.

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(c) Active NFE – a corporation the stock of which is regularly traded on an established securities market or a corporation which is a related entity of such a corporation.

If you have ticked **(c)**, please provide the name of the established securities market on which the corporation is regularly traded:

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If you are a Related Entity of a regularly traded corporation, please provide the name of the regularly traded corporation that the Entity in **(c)** is a Related Entity of:

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- (d) Active NFE** – a Government Entity or Central Bank
- (e) Active NFE** – an International Organisation
- (f) Active NFE** – other than **(c)**-**(e)** (for example a start-up NFE or a non-profit NFE)
- (g) Passive NFE** (Note: if ticking this box please also complete Part 2(2) below).

2. If you have ticked **1(a)(i)** or **1(g)** above, then please:

a. Indicate the name of any Controlling Person(s) of the Account Holder*:

Name of Controlling Person(s)
Name of Controlling Person(s) (continued)
Name of Controlling Person(s) (continued)

b. Complete separate "Controlling Person tax residency self-certification form" for each Controlling Person.

* Please see the definition of Controlling Person in the Appendix attached.

Entity Self-Certification Form

Section 2: Declaration of Tax Residency (other than U.S.)

Country/Jurisdiction of Residence for Tax Purposes and related Taxpayer Identification Number or functional equivalent* (“TIN”) (see Appendix)

Please complete the following table indicating (i) where the Account Holder is tax resident and (ii) the Account Holder’s TIN for each country/Jurisdiction indicated.

If the Account Holder is not tax resident in any country/jurisdiction (e.g., because it is fiscally transparent), please indicate that on line 1 and provide its place of effective management or jurisdiction in which its principal office is located.

If the Account Holder is tax resident in more than three countries/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/jurisdiction where the Account Holder is resident does not issue TINs to its residents

Reason B – The Account Holder is otherwise unable to obtain a TIN or equivalent number (Please explain why you are unable to obtain a TIN in the below table if you have selected this reason)

Reason C– No TIN is required. (Note. Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction).

	Country/Jurisdiction of Tax Residency	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 B above.

1	
2	
3	

Section 3: Declaration and Undertaking

I understand that the information supplied by me is subject to the RHB CRS Terms and Conditions which has been made available to me.

I acknowledge that the information contained in this form and information regarding the account holder may be provided to IRAS.

I certify that I am authorised to sign for the account holder for all the account(s) maintain with you.

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

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

Signature	Name
	Name (continued)
	Capacity

(Indicate the capacity in which your are signing this form (for example authorised officer.)

Date