

# BERKELEY FUTURES LIMITED

*Authorised and Regulated by the Financial Conduct Authority*

## TAX COMPLIANCE - INTERNATIONAL EXCHANGE OF INFORMATION AGREEMENT INDIVIDUAL SELF-CERTIFICATION FORM

Tax regulations<sup>i</sup> require the collection of certain information about each account holder's tax residency and citizenship status.

This form is designed to capture the citizenship and residency for tax purposes of the person entitled to the income and assets associated with an account (the beneficial owner).

Please complete, where applicable, the relevant sections below in relation to all relevant accounts and provide any additional information as may be required. Please be advised that in certain circumstances we may be required to share this information with relevant tax authorities.

If you are a US citizen or resident of the US for tax purposes under US Internal Revenue Service ("IRS") regulations please contact us prior to completion

Do not use this form if you are an entity, nominee or other intermediary. Instead you should complete and provide the appropriate Self-Certification form.

If you have any questions about how to complete this form, please contact your tax advisor.

### Part 1 – Customer Identification

#### Name of Account Holder:

Title: \_\_\_\_\_ Family Name or Surname (s): \_\_\_\_\_

First or Given Name: \_\_\_\_\_ Middle Name(s): \_\_\_\_\_

#### Permanent Residence Address:

Street: \_\_\_\_\_

Province, State or Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

City: \_\_\_\_\_

Country: \_\_\_\_\_

Place (City/Town) and Country of Birth: \_\_\_\_\_

Date of Birth DD/MM/YYYY: \_\_\_\_\_

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<sup>i</sup> The term "tax regulations" refers to regulations created to enable automatic exchange of information and include Foreign Account Tax Compliance Act, various Agreements to Improve International Tax Compliance entered into between the UK, the Crown Dependencies and the Overseas Territories, and the OECD Common Reporting Standard for Automatic Exchange of Financial Account Information[, as implemented in the relevant jurisdictions].

**Part 2 – Tax Residency/Citizenship Information (continue on a separate sheet if necessary)**

For the purposes of taxation, I am a resident or citizen in the following countries and my TIN/functional equivalent in each additional country is set out below or I have indicated that a TIN/functional equivalent is unavailable:

**Account Holder:**

Country:	TIN or tick the box if TIN is unavailable:
_____	_____ <input type="checkbox"/>
_____	_____ <input type="checkbox"/>
_____	_____ <input type="checkbox"/>
_____	_____ <input type="checkbox"/>

**Part 3 – Authorisations and Undertakings**

1. I authorise the Recipient to provide, directly or indirectly, to any relevant tax authorities or any party authorised to audit or conduct a similar control of the Recipient for tax purposes, a copy of this form and to disclose to such tax authorities or such party any additional information that the Recipient may have in its possession that is relevant to my qualification for any benefits claimed on the basis of this Declaration. I acknowledge and agree that information contained in this form and information regarding income paid or credited to or for the benefit of the account(s) set out above may be reported to the tax authorities of the country in which such income arises and that those tax authorities may provide the information to the country or countries in which I am a resident for tax purposes.

2. I authorise the Recipient to provide, directly or indirectly, a copy of this form and information regarding income paid or credited to or for the benefit of the account(s) set out above to: (i) any person that has control, receipt, or custody of income to which this form relates; (ii) any person that can disburse or make payments of income to which this form relates; or (iii) any party authorised to audit or conduct a similar control of aforementioned persons for tax purposes.

3. I certify that I am the beneficial owner of all the income to which this form relates or am using this form to document myself as an individual that is an owner of an account held at the Recipient financial institution

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

I agree that I will submit a new form within 30 days if any certification on this form becomes incorrect.

**Sign Here:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_  
(DD-MM-YYYY)

**If you have signed this on behalf of the account holder please indicate the capacity in which you have acted here:**

\_\_\_\_\_