Capital International Bank

US FATCA & CRS Individual Self-Certification



Please Note: This form has been optimised for digital use to avoid as much paper waste as possible. Please download and save this file locally on your device that you are using and open with Adobe Acrobat.

You do not need a paid account, but you may need to configure your digital ID for signing (please follow the 'on screen' steps when using Adobe Acrobat for full details on how to do this).

Under Isle of Man legislation and regulations in relation to the automatic exchange of information for tax matters (collectively 'AEOI'), we are obliged to obtain certain information about each account holder's tax status.

As a financial institution we are not allowed to provide tax advice and the notes below are not to be construed as tax advice. We recommend you seek independent tax advice from a suitably qualified professional tax advisor in respect of your particular circumstances.

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

Explanatory Notes: US Foreign Account Tax Compliance Act (FATCA) & Common Reporting Standards (CRS)

- 1. Regulatory Obligation Our obligation to capture this information and to report to our local tax office comes from regulations created to enable the automatic exchange of information and includes FATCA and the CRS.
- 2. Specified US Person A Specified US Person means a US citizen or any US resident individual, a partnership or corporation organised in the US or under the laws of the US or any State thereof, save for exceptions.
- 3. Participating Jurisdictions A current list of participating jurisdictions can be found at the following web address www.bit.ly/OECD-Portal-CRS.

1. Account Holder Information					
Title		Date of Birth			
Surname		Place of Birth			
Forename(s)		Nationality			
Other/Maiden N	ame(s)	Other Nationalities			
Residential Addr	ress				
'Care Of' & PO Bo addresses are not accepted	x				
	Country		Postcode		
2. US FATCA - Declaration of US Citizenship or US Residence for Tax Purposes					
Please tick and complete as appropriate.					
ricase tick and complete as appropriate.					
a) I confirm that I am a US citizen and/or resident in the US for tax purposes (green card holder or resident under the substantial presence test) and my US federal taxpayer identification number (US TIN) is as follows:					
b) confirm that I was born in the US (or a US territory) but I am no longer a US citizen as I have voluntarily surrendered my citizenship as evidenced by the attached documents.					
c) I confirm that I am <u>NOT</u> a US citizen or resident in the US for tax purposes					

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B. Common Reporting Standards (CRS) - Tax Residency					
An account holder is always a tax resident in at least one jurisdiction, with the possibility of being a tax resident in multiple jurisdictions.					
Please complete the following table indicating your place of tax residence and Tax Identification Number (TIN) for each jurisdiction given.					
Jurisdiction(s) of Tax Residency Tax Identification Number (TIN) TIN Type					
a)					
'					
b)					
c)					
If a TIN is not available please provide a functional equivalent (such as your social security, national insurance, citizen, personal identification or a resident registration number). If no TIN or functional equivalent is available for any of the jurisdictions listed please advise the reason why (such as the jurisdiction does not issue such numbers) in the text box below:					
Further information on the issuance rules for TINs and their format can be found on the OECD's Automatic Exchange Portal at					
https://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/					
De deselle					
. Declaration					
I declare that the information I have provided in this form is to the best of my knowledge and belief, accurate and complete.					
 I agree to provide Capital International Bank with an updated Self Certification form within 30 days where any change in circumstances occur which causes any of the information contained in this form to be inaccurate or incomplete 					
• I acknowledge that the information I have provided in this form may be reported to the tax authorities of the country in which this account(s) is maintained and exchanged with tax authorities of another country where I am resident pursuant to International agreement to exchange financial account information.					
Account Holder Name	Account Holder Signature				
Date (dd/mm/yyyy)					

Capital International Bank

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Issue Date: 10/07/2025 Ref: FCIv1c

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