



FATCA & CRS ENTITY SELF-CERTIFICATION FORM

The Foreign Account Tax Compliance Act (FATCA) and the Common Reporting Standard (CRS) regulations require financial institutions to collect and report information about the tax residency of their customers. As such, AMBL and its subsidiaries are obligated to ask you to provide the information requested in this form.

Please tick ‘Yes’ where applicable and complete in block letters

PART 1. Identification of Account Holder

1a) Full legal name: _____

1b) Country of incorporation: _____

1c) Entity’s address: _____

** Do not use a P.O. Box or an “in care of” address*

PART 2. FATCA Tax Residency

The Government of the United States of America passed a law in March 2010 under the Foreign Account Tax Compliance Act (FATCA) requiring disclosure on all accounts held by United States nationals and of any persons or entities to which the following indicia are applicable. Please tick where appropriate pertaining to your U.S. status.

i. Global Intermediary Identification Number (GIIN) - Required for Financial Institutions Only.

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ii. Kindly indicate your Chapter 4 Status (FATCA status) below.

☐ US person	☐ Participating FFI	☐ Exempt beneficial owner	☐ Excepted NFFE
☐ Specified US person	☐ Deemed-compliant FFI	☐ Nonparticipating FFI	☐ Passive NFFE
☐ Foreign individual	☐ Restricted distributor	☐ Territory financial institution	

US Status Evaluation Criteria	Response	If “Yes”, submit
iii. Is the business a US territory entity? The entity is organised in a US territory.	☐ Yes ☐ No	Form W-8BENE from the entity + Form W-9 for each controlling person who is a US citizen/ US resident
iv. Is the business a non-US entity? Does it satisfy all the statements below? - Incorporated outside the USA - Has no US status indicators - All controlling persons of the entity are non-US persons (not US citizens or tax residents)	☐ Yes ☐ No	No additional documents required
v. Is the business an “Active” Non-Financial Foreign Entity (NFFE)? The term ‘Active NFFE’ generally refers to an entity that operates an active trade or business other than a financial business. Its income is generated from direct business activities or services, such as sales revenue, fees for services, or income from the operation of a trade or business. It typically involves material participation or effort.	☐ Yes ☐ No	No additional documents required
vi. Is the business a US-owned “Passive” Non-Financial Foreign Entity (NFFE)? “Passive” NFFE with one or more persons owning 10% of the shares or ownership of the entity is a US citizen/ green card holder or tax resident. A Passive NFFE is any non -financial foreign entity that is not an Active NFFE. Typically, it earns most of its income (at least 50%) from passive income/sources. These sources include interest income, interest equivalent to income, capital gain, dividends, certain rentals (except if derived from the active conduct of a business by employees), royalties, annuities, sale of financial assets/ transactions, excess foreign currency gains, certain commodity gains, amounts from cash value insurance contracts or insurance company earnings from reserves.	☐ Yes ☐ No	Form W-8BENE from the entity + Form W-9 for each controlling person who is a US citizen/ US resident

PART 3. CRS – Tax Residency – Controlling Persons

The Trinidad & Tobago (TT) Government Common Reporting Standard (‘the CRS’) guideline on the Implementation of the Declared Tax agreement that took effect on 1st January 2025 requires that all financial institutions obtain the following information from their customers. This enables TT to exchange information with other participating jurisdictions to tackle tax evasion and avoidance.



Indicate the name of any Controlling Person(s) for the Entity (natural persons who exercise control over the Entity who has 10% or more ownership in the entity. Where more than six (6) Controlling Persons exist, please complete an additional form.

TIN/ SSN	Full Name	% Holding	Controlling Person Type

PART 3a) CRSTax Residency – Entity

Is the entity a tax resident of any other country, not including the United States of America? ☐ Yes ☐ No
If yes, please complete the following table indicating where the Entity is tax resident and the Entity’s Tax Identification Number (TIN) for each country indicated. (If the Entity is not a tax resident in any country (e.g. because it is fiscally transparent), please indicate tax residency status on line 1 and provide the Entity's place of effective management or the country where its principal office is located.)
If a TIN is unavailable, please provide the Reason A, B or C where appropriate:

- Reason A The country/jurisdiction where I am liable to pay tax does not issue TINs to its residents.
- Reason B I am otherwise unable to obtain a TIN or equivalent number. (Please explain why you are unable to obtain a TIN in the table below if you have selected this reason.)
- Reason C The laws of my country/jurisdiction of tax residence do not require me to provide a TIN.

Country/ Jurisdiction of Tax Residence	TIN	If no TIN available, select Reason A, B or C		
1.		☐ Reason A	☐ Reason B	☐ Reason C
2.		☐ Reason A	☐ Reason B	☐ Reason C

PART 4. Declaration and Certification

- I/We certify that the information provided in this form is true, accurate, and complete to the best of my/our knowledge.
- I/We acknowledge and agree that the information contained in this form, along with details regarding the Account Holder and any Reportable Account(s), may be disclosed to the tax authorities of the country/jurisdiction where the account(s) is/are maintained. Such information may also be exchanged with tax authorities of other countries/jurisdictions where the Account Holder is a tax resident, in accordance with applicable laws, regulations, and Intergovernmental Agreements related to the exchange of financial account information.
- I/We hereby consent to, autho rise, and instruct ANSA Merchant Bank Limited and its subsidiaries to disclose and exchange such information as required by law. I/We expressly waive any rights or protections under applicable data protection, confidentiality, or other relevant laws to the extent necessary to facilitate such disclosures and exchanges.
- I/We undertake to promptly notify ANSA Merchant Bank Limited and its subsidiaries, within 30 days of any changes to my/our tax residency status or any updates to the information provided in this form.
- I/We agree to indemnify and hold ANSA Merchant Bank L imited and its subsidiaries harmless against any claims, penalties, or damages resulting from the provision of incorrect, incomplete, or misleading information in this form.
- I/We confirm that an authorised individual has duly signed this Declaration.

Entity Stamp/ Seal

Customer’s Signature 1

Name in Block Letters

Date

Customer’s Signature 2

Name in Block Letters

Date

Customer’s Signature 3

Name in Block Letters

Date