## **Controlling Persons**



## Attachment

Please provide the information requested below on the Account Holder's controlling person(s) if you have indicated that the Account Holder is:

- a. for FATCA purposes a Passive NFFE, or
- b. for CRS purposes a Passive NFE or an investment entity managed by a financial institution with a tax residence in a non-CRS jurisdiction.

Controlling Persons – The natural persons who exercise control over an Entity. In the case of a trust, such term means the settlor(s), the trustee(s), the protector(s) (if any), the beneficiary(ies) or class(es) of beneficiaries, and any other natural person(s) exercising ultimate effective control over the trust, and in the case of a legal arrangement other than a trust, such term means persons in equivalent or similar positions. The term "Controlling Persons" must be interpreted in a manner consistent with the Financial Action Task Force Recommendations (See FATF Recommendation 10 – Customer Due Diligence).

This attachment is considered an integral part of the self-certification to which it is associated. If there is a change in Controlling Persons, please submit an updated attachment within 30 days.

Controlling Person	First name Family Name/Surname								
Person	Residential Address Line 1								
	City	State	Postcode		Countr	у			
	Country of Tax Residence 1	Taxpayer Identifica	tion Number 1	Date of Birth (DD/MM/YYYY)					
	Country of Tax Residence 2	Taxpayer Identifica	tion Number 2	City of Birth					
	Country of Tax Residence 3	Taxpayer Identifica	tion Number 3	Country of Birth					
	TIN Unavailable Explanation(s) – If TIN is not provided above, please provide at			Legal Person	Control by Ownership	Control by Others Me	ans	Senior Managir	ng Official
			Controlling Person Type	Legal Agreement  – Trust	Settlor	Trustee	Protector	☐ Beneficiary	y  Other
				Legal Agreement - Other	Settlor Equivalent	Trustee Equivalent	Protector Equivalent	Beneficiary Equivalent	Other Equivalent
Controlling	First name Family Name/Surname								
Person	Residential Address Line 1								
	City	State	Postcode	Country					
	Country of Tax Residence 1	Taxpayer Identifica	tion Number 1	Date of Birth (DD/MM/YYYY)					
	Country of Tax Residence 2	Taxpayer Identifica	tion Number 2	City of Birth					
	Country of Tax Residence 3	Taxpayer Identifica	tion Number 3	Country of Birth					
	TIN Unavailable Explanation(s) – If TIN is not provided above, please provide at	n explanation.	O a sa tara Nisa sa	Legal Person	Control by Ownership Control by Others Means Senior Managing Of			ng Official	
			Controlling Person Type		Settlor	Trustee	Protector	Beneficiary	y Other
				Legal Agreement - Other	Settlor Equivalent	Trustee Equivalent	Protector Equivalent	Beneficiary Equivalent	Other Equivalent
Controlling Person	First name	Family Name/Surname							
1 613011	Residential Address Line 1								
	City	State	Postcode	Country					
	Country of Tax Residence 1	Taxpayer Identifica	tion Number 1	Date of Birth (DD/MM/YYYY)					
	Country of Tax Residence 2	Taxpayer Identifica	tion Number 2	City of Birth					
	Country of Tax Residence 3	Taxpayer Identifica	tion Number 3	Country of Birth					
	TIN Unavailable Explanation(s) – If TIN is not provided above, please provide at			Legal Person	Control by Ownership	Control by Others Me	ans	Senior Managir	ng Official
			Controlling Person Type	Legal Agreement – Trust	Settlor	Trustee	Protector	☐ Beneficiary	y  Other
			.,,,,,	Legal Agreement  – Other	Settlor Equivalent	Trustee Equivalent	Protector Equivalent	Beneficiary Equivalent	Other Equivalent

<sup>\*</sup>If Account Holder has additional Controlling Persons, provide multiple Controlling Persons attachments.