

Inter-Governmental Agreement Declaration to confirm your tax status under FATCA

Rank use only

	Dark use Only				
Customer Name	Customer Number				
Customer Address					
Customer Permanent Residence Address, if different from the above address					
Your Permanent Residence Address is the address where you are treated as resident for tax purposes, or, if not applicable, the address of your principal office					
	· · · ·				
Place of Incorporation					
Tax Residency - Please provide an address in each country where you are reside	ent for Tax purposes				

FATCA ENTITY CLASSIFICATION STATUS

In relation to chapter 4, subtitle A (sections 1471 through 1474) of the United States Internal Revenue Code of 1986 (the provisions commonly referred to as the "Foreign Account Tax Compliance Act" or "FATCA") and regulations made thereunder or the Bermuda-USA FATCA Intergovernmental Agreement to facilitate compliance with FATCA with the United States, I/We (please delete as appropriate) make the following certifications:

- 1. I/We hereby certify that I am/We are NOT
- A corporation incorporated, created or organised in the United States of America or under the law of the United States of America
 or of any of the States of the United States of America, including the District of Columbia
- A partnership created or organised in the United States of America or under the law of the United States of America or of any of the States of the United States of America, including the District of Columbia;
- A trust in respect of which a court within the United States of America is able to exercise primary supervision over the administration of the trust, and one or more United States persons have the authority to control all substantial decisions of the trust; or
- An estate (other than an estate the income of which, from sources without the United States which is not effectively connected
 with the conduct of a trade or business within the United States, is not includible in gross income under subtitle A of the United
 States Internal Revenue Code of 1986)
- 2. I/We hereby certify that I am/we are acting on our own behalf and not as agent, intermediary or nominee of another person
- 3. Please read the following information carefully and select one of the entity types to provides confirmation of your status under FATCA. Once you have made your selection, please complete the box and sign on page 4 of this form. You will find more information on some of the terms used within this declaration within the associated notes of this declaration.

Trading Entity (Active Non-Financial Foreign Entity)
I/We hereby certify that I/we satisfy the following criteria:
 Less than 50% of my/our gross income for the preceding calendar year or other appropriate reporting period is passive income (see notes) and
 Less than 50% of my/our assets held by us during the preceding calendar year or other appropriate reporting period are assets that produce or are held for the production of passive income AND
• I/We are engaged in the following active trade or business other than that of a financial institution (see notes):
Please describe your principal business activity
Start Up Trading Entity
I/We hereby certify that I/we satisfy the following criteria:
• I am not yet operating a business and have no prior operating history, but am investing capital into assets with the intent to operate a business other than that of a financial institution.
 I acknowledge that this certification will expire 24 months from the date that is 24 months after the date of the initial organization of the NFFE (see notes)
The Entity was formed on:
Please state day, month and year
Listed Entity
I/We hereby certify that I/we satisfy the following criteria:
 I/We am a non-financial foreign entity and our stock is regularly traded on an established securities market within the meaning of the Bermuda-USA FATCA Intergovernmental Agreement.
or
 The NFFE is a Related Entity (see notes) of an entity the stock of which is traded on an established securities market within the meaning of the Bermuda-USA FATCA Intergovernmental Agreement.
Please list all relevant securities markets that apply
Non US Government Entity
I/We hereby certify that I/we satisfy the following criteria:
I am/We are a non-U.S. government entity, a political subdivision of such government (which, includes a state, province, county, or municipality), or a public body performing a function of such government or a political subdivision thereof, a
government entity of a U.S. Territory, an international organization, a non-U.S. central bank of issue, or an entity wholly owned

by one or more of the foregoing

Non Financial Holding Group Service Company					
I/We hereby certify that I/we satisfy the following criteria:					
 Substantially all of our/my activities consist of holding (in whole or in part) the outstanding stock of, and providing financing and services to, one or more subsidiaries that engage in trades or businesses other than the business of a Financial Institution (see notes), 					
 I/We do not operate as an investment fund, such as a private equity fund, venture capital fund, leveraged buyout fund or any investment vehicle whose purpose is to acquire or fund companies and then hold interests in those companies as capital assets for investment purposes 					
Group Financing Companies					
I/We hereby certify that I/we satisfy the following criteria:					
• I/We engage primarily in financing and hedging transactions with or for Related Entities (see notes) that are not Financial Institutions, and do not provide financing or hedging services to any Entity that is not a Related Entity, provided that the group of any such Related Entities is primarily engaged in a business other than that of a Financial Institution (see notes).					
Charitable Organisation					
I/We hereby certify that I/we satisfy the following criteria:					
 I am/ We are established and maintained in our country of residence exclusively for religious, charitable, scientific, artistic, cultural, or educational purposes; or it is established and operated in its jurisdiction of residence and it is a professional organization, business league, chamber of commerce, labor organization, agricultural or horticultural organization, civic league or an organization operated exclusively for the promotion of social welfare; 					
I am/ We are exempt from income tax in our country of residence; I M/ I be a see a back of the second of the back of the second of the s					
 I/We have no shareholders or members who have a proprietary or beneficial interest in our income or assets; The applicable laws of our country of residence or our formation documents do not permit any of our income or assets to be distributed to, or applied for the benefit of, a private person or non-charitable entity other than pursuant to the conduct of our charitable activities, or as payment of reasonable compensation for services rendered, or as payment representing the fair market value of property which we have purchased; and 					
• The applicable laws of our country of residence or our formation documents require that, upon the entity's liquidation or dissolution, all of our assets be distributed to a governmental entity or other non-profit organization, or transfer to the government of our country of residence or any political subdivision thereof					
The Charity registration number is					
US Territory Entity					
I/We hereby certify that I/we satisfy the following criteria:					
• The entity is organized in a U.S. Territory and all of the owners are bona fide residents of that U.S. Territory					

Passive Non Financial Forei	gn Entity	
 I/We confirm that I am/We are not 	ot a foreign financial institution and not within any of the other above cate	egories
	Persons that are Specified US Persons (see notes) are listed below;	-9
Full Name	Full Name	
Permanent	Permanent	
Residential	Residential	
Address	Address	
Jnited States	United States	
Tax dentification	Tax	
Number	Number	
Full Name	Full Name	
Permanent	Permanent [
Residential	Residential	
Address	Address	
Jnited States Tax	United States	
dentification	Tax	
Number	Number	

Please provide details of any additional Controlling Persons on the Additional Controlling Persons Insert

In Liquidation

I/We declare that:

- All statements made in this declaration are, to the best of my knowledge and belief, correct and complete
- Should any of the information we have provided in this declaration become incorrect, I/we will inform HSBC as soon as possible

Signature	Signature	
Full Name	Full Name	
Official Position	Official Position	
Date	Date	
Signature	Signature	
Full Name	Full Name	
Official Position	Official Position	
Date	Date	

(Signed in accordance with the mandate)

Please use the Additional Signature Insert for more to sign in accordance with your mandate