

SELF-CERTIFICATION FORM IN ORDER TO IDENTIFY BELONGING TO CATEGORY OF PUBLIC OFFICIALS, FATCA-STATUS¹, TAX RESIDENCY² OF CLIENT – INDIVIDUAL PERSON, INDIVIDUAL ENTREPRENEUR AND INDIVIDUAL PERSON ENGAGED IN PRIVATE PRACTICE

1. Client details (hereinafter – Client)

Full name _____
 Date of birth _____ / _____ / _____ Citizenship _____

2. Information about the client's belonging to the category of public officials and the country of tax residence (mark the corresponding box with a sign):

Country of tax residence	INN/TIN - REQUIRED FIELD (if there is no TIN - indicate the reason for each jurisdiction)
<input type="checkbox"/> Russian Federation*	
<input type="checkbox"/>	
<input type="checkbox"/>	

* INN field is obligatory for filling in by foreign citizens who are tax residents of the Russian Federation

Country of tax residence (indicate what country are you tax resident in and the tax number in this country or another tax identification number (TIN))³

Information about belonging to the category of public officials yes: FPO⁴ IPO⁵ RPO⁶ no

3. Information for the purpose of FATCA-STATUS identification:

Are you a US tax resident? If you answered "Yes", please provide the completed W-9 form and indicate your Individual Taxpayer Identification Number (ITIN) and the date of its assignment (in the format dd.mm.yyyy)	<input type="checkbox"/> Yes <input type="checkbox"/> No ITIN _____ Date _____
Residence Address / post address in the territory of the USA If you answered "Yes", please specify in English: A. Permanent Residence Address: _____ (Number, street, and room or suite no. (P.O.Box), City or town, State, province or region, Country, including postal code)	<input type="checkbox"/> Yes <input type="checkbox"/> No

I confirm that the information in this form is true, and I also understand that I am responsible for providing false information and deliberate misrepresentations in accordance with applicable law. In the event of a change in the identification information submitted under this form, I undertake to provide the Bank with updated information no later than 30 days from the date of the information change.

When changing any information submitted under item 2 of this form (as well as other information affecting the tax residency status), I undertake to provide the Bank with updated information no later than 5 business days from the date of changes.

If at least one of the items of the form (Part 3) you have marked "Yes", then confirm your intentions to submit to the Bank documents confirming / refuting the status of a US tax resident, and also provide Consent to the processing and transfer of information, marking the relevant items:

- I give my Consent to the processing and transfer of information to the IRS⁷ and the authorized bodies of the Russian Federation⁸
- I refuse to provide Consent to the processing and transfer of information to the IRS and the authorized bodies of the Russian Federation (In case of refusal to process and transfer information to the IRS, the Bank has the right to refuse to conclude a financial services agreement, decide to refuse to perform operations, and (or) unilaterally terminate a bank account agreement (deposit)).

____ / ____ / _____

(Date)



(Client signature)

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¹ FATCA-status – status, assigned to an individual person as a result of identification in accordance with the "Foreign Account Tax Compliance Act" dated 18.03.2010.

² Tax residency – belonging of an individual person to the tax system of a particular state (jurisdiction)

³ Information is requested in the framework of compliance with the requirements of Article 142.4 Ch. 20.1 of the Tax Code of the Russian Federation, as well as the Decree of the Government of the Russian Federation.

⁴ FPO - foreign public official.

⁵ IPO - international public official.

⁶ RPO - Russian public official.

⁷ IRS – Internal Revenue Service

⁸ Authorized bodies of the Russian Federation – Bank of Russia, Federal Service for Financial Monitoring, Federal Tax Service.