

AEOI TAX COMPLIANCE FORM - INDIVIDUAL

1.	FIRST NAME	MIDDLE NAME	LAST NAME		
2.	RESIDENTIAL ADDRESS (INCLUDING	G COUNTRY)			
3.	MAILING ADDRESS (INCLUDING CO	JNTRY) (IF DIFFERENT):			
4.	TELEPHONE NUMBER(S) INCLUDING	G AREA CODE (XXX)-XXX-XXXX			
	HOME:	WORK:	MOBILE:		
5.	E-MAIL ADDRESS:				
6.	COUNTRY(IES) OF CITIZENSHIP OR IF YOU ARE A CITIZEN OR NATIONAL OF MO	NATIONALITY:)RE THAN ONE COUNTRY, PLEASE STATE ALL COUN	TRIES.		
7.	TAX RESIDENCE COUNTRY(IES):				
	PLEASE STATE ALL COUNTRIES IN WHICH	YOU ARE LIABLE TO TAX BY REASON OF RESIDENCE	, DOMICILE, ETC		
8.	PLEASE PROVIDE THE TAX IDENTIFICATION NUMBER FOR EACH TAX RESIDENCY COUNTRY: PLEASE LIST TAX ID NUMBERS IN CORRESPONDING ORDER TO ITEM 7.				
9	DATE OF BIRTH:	10. CITY OF BIRTH:	11. COUNTRY OF BIRTH:		
12.	ARE YOU THE HOLDER OF A U.S. G	REEN CARD? YES NO			
13.		RE PRESENT IN THE U.S. IN THE CURRENT			
		AND 1/6 OF THE DAYS YOU WERE PRESEN A 31 DAYS DURING THE CURRENT YEAR A			
			YES NO		
14.	ARE YOU A GRANTEE OF A POWER	OF ATTORNEY OR AN AUTHORISED SIGNA			
			YES NO		

CS10277 – May 2019



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15. ARE YOU GIVING STANDING INSTRUCTIONS FOR THE TRANSFER OF DIVIDEND INCOME TO A U.S. ACCOUNT?					
		YES	NO		
16. HAVE YOU DESIGNATED ANY U.S. BENEFICIARIES ON YOUR IF YES, PLEASE STATE THE FULL NAMES AND ADDRESSES (YES	NO		
17. COMPLETION OF U.S. TREASURY FORMS		FORM	1 ATTACHED		
IF YOU ARE A U.S. CITIZEN, RESIDENT OR GREEN CARD HOLDER PLEASE	E CONFIRM COMPLETION OF FORM WS	-			
IF YOU HAVE PROVIDED INFORMATION INDICATING A CONNECTION TO T PLEASE CONFIRM COMPLETION OF FORM W8-BEN OR OTHER APPROPR SUPPORTING DOCUMENTATION.	,				
18. DECLARATION AND WAIVER					
THE UNDERSIGNED CONFIRMS THAT THE FOREGOING ANSWERS ARE TRUE AND CORRECT AND AUTHORIZES SAGICOR (WHICH EXPRESSION SHALL INCLUDE SAGICOR FINANCIAL CORPORATION LIMITED AND ANY ENTITY UNDER ITS CONTROL) TO SUBMIT ALL CURRENT AND HISTORICAL DATA RELATED TO ANY PAST OR PRESENT ACCOUNT(S) OF THE UNDERSIGNED, INCLUDING, BUT NOT LIMITED TO, THE EXISTENCE OF THE ACCOUNT IN THE NAME OF THE UNDERSIGNED; THE IDENTITY, ADDRESS AND TAX IDENTIFICATION NUMBER OF THE UNDERSIGNED; THE BENEFICIAL OWNER OF THE ACCOUNT; THE HOLDERS OF POWERS OF ATTORNEY FOR THE ACCOUNT; THE DETAILS OF ANY ACCOUNT TRANSACTIONS; THE NATURE, BALANCES AND COMPOSITION OF THE ASSETS HELD IN THE ACCOUNT; ANY CORRESPONDENCE RELATING TO THE ACCOUNT AND ANY US INTERNAL REVENUE SERVICE OR DEPARTMENT OF TREASURY FORMS WHICH THE UNDERSIGNED FURNISHES TO THE SAGICOR (COLLECTIVELY "CUSTOMER INFORMATION") TO THE U.S. INTERNAL REVENUE SERVICE OR DOMESTIC GOVERNMENTAL AUTHORITIES ("AUTHORITIES") AS NECESSARY FOR COMPLIANCE WITH THE U.S. FOREIGN ACCOUNT TAX COMPLIANCE ACT, THE MULTILATERAL COMPETENT AUTHORITY AGREEMENT ON AUTOMATIC EXCHANGE OF FINANCIAL ACCOUNT INFORMATION OR RELATED DOMESTIC LEGISLATION. THE UNDERSIGNED FURTHER ACKNOWLEDGES THAT CUSTOMER INFORMATION MAY BE USED BY ONE OR MORE OF THE AUTHORITIES FOR LAW ENFORCEMENT PURPOSES, INCLUDING BUT NOT LIMITED TO CRIMINAL PROCEEDINGS AND CIVIL TAX PROCEEDINGS AGAINST THE UNDERSIGNED OR THIRD PARTIES. THE UNDERSIGNED HEREBY RELEASES AND DISCHARGES SAGICOR FROM ITS OBLIGATIONS UNDER ANY CONTRACT THE UNDERSIGNED AT ANY TIME BY ANY MEANS IN ORDER TO OBTAIN OR UPDATE CUSTOMER INFORMATION AND AGREES THAT SAGICOR MAY CONTACT THE UNDERSIGNED AT ANY TIME BY ANY MEANS IN ORDER TO OBTAIN OR UPDATE CUSTOMER INFORMATION AND AGREES THAT SAGICOR MAY CONTACT THE UNDERSIGNED AT ANY TIME BY ANY MEANS IN ORDER TO OBTAIN OR UPDATE CUSTOMER INFORMATION AND AGREES THAT SAGICOR MAY CONTACT THE UNDERSIGNED AT ANY TIME BY ANY MEANS IN ORDER TO OBTAIN OR UPDATE CUSTOMER INFORMATION AND THAT THE UNDERSIGNED WILL ALSO UNDER TANY TIME BY					
SIGNATURE APPLICATION / ACCOUNT NO.	 DATE				