

# B6 Self certification for entities

(with exclusion of natural persons, self-employed in business or agriculture but including civil partnerships)

### **ENTITIES SELF-CERTIFICATION**

#### I - IDENTIFICATION

Legal Name of er	atity	
Country of incorporation or organisation		
Permanent address	Number,Street Postal Code City/Province/State Country	
Mailing address	Number,Street Postal Code City/Province/State Country	
NumerEQ (wprowadza Doradca)		

#### II - TAX RESIDENCY

Polish Act dated March 9, 2017 on Exchange of Tax information with other Countries - ("AEOI Act") requires BNP Paribas Bank Polska S.A. to collect certain information on their client's tax status.

Please provide in the table below the list of **ALL** the Countries where the entity is resident for tax purposes and indicate its TIN (Taxpayer Identification Numbers) in those countries.

COUNTRY/COUNTRIES OF TAX RESIDENCE	TAXPAYER IDENTIFICATION NUMBER (TIN)*

\*Please indicate N/A if the Country of Tax Residence does not issue a TIN

The only acceptable reason for accepting self certification without a TIN is that the country of tax residence does not issue TINs. In other cases, the tax identification number is required.

Polish Act dated October 9, 2015 on Execution of Agreement between the Government of the Republic of Poland and the Government of the United States of America on improving fulfillment of international tax obligations and the implementation of FATCA legislation ("FATCA Act") requires BNP Paribas Bank Polska S.A. to collect certain information concerning American tax residents.

Please provide answers to below questions:	
Is the Entity incorporated, organized or resident in the US ?	YES D NO D
<ul> <li>If Yes, please:</li> <li>Additionally fill a W-9 IRS Form, and</li> <li>Indicate whether the entity is a: <ul> <li>a FATCA Specified US person</li> <li>a FATCA Non-specified US person</li> </ul> </li> </ul>	
III - FATCA AND AEOI STATUSES	
Please indicate the status of the entity by ticking <b>one single type</b> (A, B, C or D information required for the selected status:	) of entity below and provide the
(A) Financial Institution	
FATCA TYPE OF FINANCIAL INSTITUTION (PLEASE TICK ONLY OF	
□ US Financial Institution (US FI) (Please submit additionally an IRS W-ser	ies form)
Foreign Financial Institution (FFI)	
Registered FFI:	
Participating FFI (Final Regulations environment)	
Reporting Model 1 FFI (IGA 1 environment)	
Reporting Model 2 FFI (IGA 2 environment)	
For the 3 types of Registered FFI above, please provide its GIIN:	
<ul> <li>Non-Reporting IGA FFI (including IGA exempted pension funds)</li> <li>Please provide the entity status allowing for an IGA exemption :</li> <li>If you are an FFI treated as a registered deemed-compliant FFI under provide your GIIN:</li> </ul>	r an applicable Model 2 IGA,
Non-Participating FFI (NPFFI)	
<ul> <li>Other FFI (certified deemed-compliant FFI, sponsored FFI): Please series IRS Form</li> </ul>	submit additionally a W-8
Is the Entity An Investment Entity and managed by another Financial Institu	
<ul> <li>If Yes, is the Entity located in a Non-Participating Jonstitution? . YES I NO</li> <li>If Yes, then the Entity is considered as a Passive NFE under the AEOI and Appendix A must be completed.</li> </ul>	

] <b>(</b>	orporation that is publicly traded or an affiliate of a publicly traded corporation
	ame one securities exchange upon which the stock is regularly traded :
	overnmental entity (or their wholly owned Entities)
	entral Bank (or their wholly owned Entities)
	nternational Organisation (or their wholly owned Entities)
(C)	Active Non-Financial Entity (Active NFE)
	Type of Active NFE (other than (B))
	Active NFE by reason of income and assets
	Non-Profit Organisation
	Other Active NFE (provide exact status):
<b>(D)</b>	Passive Non-Financial Entity (Passive NFE) (other than (B))
(U)	Passive Non-Finalicial Entity (Passive NFE) (other than (B))
•	Please complete the Section IV and the Table in Appendix A
•	If the Entity is a FATCA Direct reporting Passive NFFE, please provide its GIIN:
	(If the Direct Reporting Passive NFFE does not have any GIIN, please tick this box $\square$ and submit additionally a W-8BEN-E IRS
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- Inf	ORMATION ON CONTROLLING PERSONS
INF g the	ORMATION ON CONTROLLING PERSONS e table presented in Appendix A, please indicate the Controlling Persons of the entity if the Entity is a
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follo	ORMATION ON CONTROLLING PERSONS e table presented in Appendix A, please indicate the Controlling Persons of the entity if the Entity is a wing: Passive Non-Financial Entity (Status D of Section III) nvestment Entity (A) meeting all the following criteria:
- INF ng the follor	ORMATION ON CONTROLLING PERSONS e table presented in Appendix A, please indicate the Controlling Persons of the entity if the Entity is a wing: Passive Non-Financial Entity (Status D of Section III) nvestment Entity (A) meeting all the following criteria: It is an Investment entity whose gross income is primarily attributable to investing, reinvesting, o trading in Financial Assets, AND this means and here Financial Lagert and the following criteria
follor	ORMATION ON CONTROLLING PERSONS e table presented in Appendix A, please indicate the Controlling Persons of the entity if the Entity is a wing: Passive Non-Financial Entity (Status D of Section III) nvestment Entity (A) meeting all the following criteria: It is an Investment entity whose gross income is primarily attributable to investing, reinvesting, o trading in Financial Assets, AND It is managed by a Financial Institution, AND At least one of the countries of Tax Residence declared in section II is not an AEOI Participating
- INF ng the follor - I	ORMATION ON CONTROLLING PERSONS e table presented in Appendix A, please indicate the Controlling Persons of the entity if the Entity is a wing: Passive Non-Financial Entity (Status D of Section III) nvestment Entity (A) meeting all the following criteria: It is an Investment entity whose gross income is primarily attributable to investing, reinvesting, o trading in Financial Assets, AND It is managed by a Financial Institution, AND

#### V – PRIVACY NOTICE AND CONFIDENTIALITY

The requested personal information, except TINs of Controlling Persons issued by countries which are not Reportable Jurisdictions as of the date hereof, is compulsory and failure to complete this form could mean that BNP Paribas Bank Polska S.A. may not be able to process your application.

#### **VI - CERTIFICATION SECTION**

I declare that the information provided in this form is, to the best of my knowledge and belief, true, accurate and complete.

I undertake to notify BNP Paribas Bank Polska S.A. promptly of any change in circumstances which causes the information contained herein to become incorrect and to provide a new self-declaration within 30 days of such change in circumstances.

#### I am aware of criminal liability for making a false statement.

Date: \_\_ -\_\_-

.....

Place: \_\_\_\_\_

Authorized representative 1	Authorized representative 2
First name and surname in block capitals:	First name and surname in block capitals:
Capacity in which acting:	Capacity in which acting:
Signature <sup>1</sup> :	Signature <sup>1</sup> :
5	

#### NAME, SURNAME, SIGNATURE OF EMPLOYEE COLLECTING SELF-CERTIFICATION

<sup>1</sup> 

In case of joint representation, this form should be signed in accordance with the entity's representation rules. In case of a civil partnership, all partners should sign the Self- certification form for entities (B) and each partner should sign the Self-certification form for individual customer (A).

## Appendix A: List of the Entity's Controlling Persons

Last Name	First Name	Type of Controlling Person <sup>2</sup>	Address	Date of birth (DD/MM/YYYY)	Place of birth	Country(ies) of tax residence (or citizenship if US) <sup>1</sup>	TIN <sup>1</sup>

The list of Controlling persons to be listed in this table is detailed in the form guidance. Please add additional sheets if required.

<sup>1</sup>Please list ALL the Controlling Persons Tax residences and associated TIN. <sup>2</sup>See list of type of Controlling Persons in Appendix B and indicate the appropriate code.

# Appendix B: Type of the Controlling Person

Code	Role of the Controlling Person
CRS801	CP of legal person – ownership
CRS802	CP of legal person – other means
CRS803	CP of legal person – senior managing official
CRS804	CP of legal arrangement – trust – settlor
CRS805	CP of legal arrangement – trust – trustee
CRS806	CP of legal arrangement – trust – protector
CRS807	CP of legal arrangement – trust – beneficiary
CRS808	CP of legal arrangement – trust – other
CRS809	CP of legal arrangement – other – settlor-equivalent
CRS810	CP of legal arrangement – other – trustee-equivalent
CRS811	CP of legal arrangement – other – protector-equivalent
CRS812	CP of legal arrangement – other – beneficiary-equivalent
CRS813	CP of legal arrangement – other – other-equivalent