



Self Certification for Entity Clients U.S. Foreign Account Tax Compliance Act (FATCA) and the OECD Common Reporting Standard (CRS)

The U.S. Foreign Account Tax Compliance Act based on the Act of October 9, 2015 on the execution of the Agreement between the Government of the Polish Republic and the Government of the United States of America on the improvement of the international fulfillment of tax obligations and the implementation of FATCA legislation and the OECD Common Reporting Standard (CRS) based on and the Act of March 9, 2017 on the exchange of tax information with other countries require Deutsche Bank Polska S.A. to collect and report certain tax related information about its clients. This statement covers requirements of the Act of 4 April 2019 amending the Act on the exchange of tax information with other countries and certain other acts.

Please complete the sections below as directed and provide any additional information as may be required. If the tax residence of an Account Holder is located outside the country of the Deutsche Bank Polska S.A. entity requesting this form and also in a Reportable Jurisdiction then the Account Holder will be a Reportable Jurisdiction Person and Deutsche Bank Polska S.A. is legally bound to report the relevant information on this form to the appropriate tax authorities.

U.S. tax forms may be required in addition to this Self Certification.

- If you are a non-U.S. entity, receiving income that constitutes U.S. Source Fixed and Determinable Annual or Periodical (FDAP) income, please provide a completed IRS W-8 series tax form.
- If you are a U.S. entity please provide a completed IRS Form W-9.

This form is for entities only. Do not complete this form for an Individual Account Holder. Instead you should complete and provide the Self Certification for Individual Clients which can be obtained from your Deutsche Bank Polska S.A. Relationship Manager.

If you have any remaining questions about how to complete this form or about how to determine your tax residence status you should contact your tax adviser or local tax authority. Deutsche Bank Polska S.A. will not be in a position to provide assistance beyond the information contained within this guide as by law we are not permitted to give tax advice.

Definition and instructions to fill the form can be found under Web address at :
https://country.db.com/poland/klienci-korporacyjni/dokumenty/?language_id=1

Part 1 – Entity Details

Please complete this part with Capital Letters. Fields with (*) are mandatory.

1. Legal Name of Entity or Organisation*:
2. Country of Incorporation or Organisation:
3. Current Residence Address of Entity or Organisation*:
*-(Do not use a P.O. box (unless this is your registered address) or an 'in care of address'
Line 1 (e.g. House / Apt. / Suite Name / Number / Street)*:
Line 2 (e.g. City / Town / Province / State)*:
Country*:
Postal Code / ZIP Code*:
4. Mailing Address (if different from the Current Residence Address)
Line 1 (e.g. House / Apt. / Suite Name / Number / Street):
Line 2 (e.g. City / Town / Province / State):
Country:
Postal Code / ZIP Code:
5. Commercial Register Number:



Part 2 – Entity Certification – Non U.S. Entities – for the purpose of FATCA

Part 2 (a) – Financial Institutions - FI

If this entity is a Foreign Financial Institution (FFI), please select the FI's status from one of the options below.

6. Please select FFI classification and provide GIIN in Line 6:
 - i. Participating Foreign FFI
 - ii. Registered Deemed Compliant Foreign FFI (including Reporting Model I FFI)
 - iii. Reporting Model II Foreign FFI
 - iv. Sponsored Entity
7. Please provide the Entity's GIIN (Global Intermediary Identification Number):
8. If the Entity does not have a GIIN (under Part 2(a) Line 6) please provide the reason why the Entity cannot provide a GIIN:
 - i. It is a FFI, which has applied for a GIIN and has not yet received a GIIN
 - ii. It is an Exempt Beneficial Owner (e.g. an international organisation)
 - iii. It is a Certified Deemed Compliant FFI (e.g. a FFI with low value accounts)
 - iv. It is an Owner Documented FFI
 - v. Non-reporting FFI(e.g. Trustee Documented Trust)
 - vi. Sponsored Entity covered by Annex II of a Model I IGA that does not have any U.S. reportable accounts
 - vii. Non Participating FFI

or

Part 2 (b) – Non Financial Foreign Entities - NFFE

9. If the Entity is not a Financial Institution (i.e. a Non Financial Foreign Entity, NFFE), please select the Entity's status from one of the options below.
 - i. Active NFFE
 - ii. Passive NFFE
In this case please complete the table in Appendix 1 "Controlling Persons".
 - iii. Direct / Sponsored Direct Reporting NFFE
Please provide the Entity's GIIN



Part 3 – Entity Certification – for the purpose of CRS

Part 3 (a) – Financial institutions - FI

or

Part 3 (b) – Non financial Entities - NFE

10. If this entity is a Financial Institution (FI), please select the FI's status from one of the options below.
- I. Depository Institution, Custodial Institution or Specified Insurance Company
 - II. An Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution
In this case please complete the table in Appendix 1 "Controlling Persons"
 - III. Other Investment Entity

11. If the Entity is not a Financial Institution (i.e. a Non Financial Entity, NFE), please select the Entity's status from one of the options below.
- I. Active NFE – a corporation the stock of which is regularly traded on an established securities market or a related entity of such a corporation.
 If you have ticked (I), please provide the name of the established securities market on which the corporation is regularly traded:

 If you are a Related Entity of a regularly traded corporation, please provide (a) the name of the regularly traded corporation that the Entity in (I) is a Related Entity of
 - II. Active NFE – Government Entity, Central Bank or International Organisation
 - III. Active NFE – other
 - IV. Passive NFE
In this case please complete the table in Appendix 1 "Controlling Persons".

Part 4 – Country of Residence for Tax Purposes and related TIN or functional equivalent

Please complete the following table indicating (i) where the Account Holder is tax resident and (ii) the Account Holder's TIN for each country indicated.

If the Account Holder is not tax resident in any jurisdiction (e.g., because it is fiscally transparent), please indicate that on line 1 and provide its place of effective management or country in which its principal office is located.

The Entity we represent has other tax residency than Poland / USA: YES NO

If a TIN is unavailable please provide appropriate reason A, B or C where appropriate:

Reason A – The country where the Account Holder is liable to pay tax does not issue TINs to its residents.

Reason B – The account Holder is otherwise unable to obtain a TIN or equivalent number (please explain why you are unable to obtain TIN in the below table if you have selected this reason).

Reason C – No TIN is required. (Note: only select this reason if the authorities of the country of tax residence entered below do not require the TIN to be disclosed)

	12. Country of Tax residence*	13. Local Tax Identification number (TIN)	14. TIN Type	15. If no TIN available, enter Reason A, B or C
1				
2				
3				

If the Account Holder is tax resident in more than three countries and this table is not sufficient, please use a separate sheet with Part 4 to complete, put the data and sign.



Please explain in the following boxes why you are unable obtain a TIN if you selected Reason B above.

1	
2	
3	

Part 5 – Declaration and Signature

I declare that all statements made in this Certification are, to the best of my knowledge and belief, correct and complete. I understand that the information supplied by me in this Certification (including any attachment hereto) is covered by the full provisions of the terms and conditions governing my/the Account Holder’s relationship with Deutsche Bank Polska S.A. setting out how Deutsche Bank Polska S.A. may use and share the information supplied by me to Deutsche Bank Polska S.A.

On behalf of the Entity identified in Part 1 of this form, I acknowledge and agree that the information contained in this Certification (including any attachment hereto), information regarding the Account Holder, its accounts and Controlling Persons may be reported by Deutsche Bank Polska S.A. to the tax authorities of the country in which this account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the Account Holder may be tax resident where those countries (or tax authorities in those countries) have entered into Agreements to exchange financial account information with the country/ies in which this account(s) is/are maintained.

On behalf of the Entity identified in Part 1 of this form I undertake to advise Deutsche Bank Polska S.A. promptly of any change in circumstances which causes the information contained herein to become incorrect and to provide Deutsche Bank Polska S.A. with a suitably updated Certification within 30 days of such change in circumstances.

I hereby declare that I have the capacity to make statements on behalf of the entity identified in Part 1 of this form.

I am aware of criminal liability for disclosing false statements.

Full name* (in capital letters):	Signature*:
Date (yyyy/mm/dd)*:	
Full name* (in capital letters):	Signature*:
Date (yyyy/mm/dd)*:	

(Signatures of persons, who have the capacity to make statements on behalf of the entity)



Appendix 1 Controlling Persons

For Passive NFFEs/NFEs please complete this section.

Controlling Persons are defined as natural persons which are Ultimate Beneficial Owners of the Entity based on the valid Act about anti-money laundering and financing terrorism, or in case of no UBO – board members of the Entity. In the case of Trust this means:

- the settlor
- the trustees
- the protector (if any)
- the beneficiaries or class of beneficiaries
- any other natural person exercising ultimate effective control over the Trust.

In the case of a legal arrangements other than a Trust, it means persons in equivalent or similar positions.

Please continue on a separate sheet if necessary, signing, dating and attaching the sheet to this form.

If the Controlling Person(s) are U.S. citizen or resident of the U.S. for tax purposes then they should additionally complete a W-9 form.

Controlling person	First name				
	Full name/ Surname				
	Address		Date and place of birth (City/Town, Country)		
	City/Town		Postal code		
	State/Province				
	Mailing address (if different from Residence Address):				
	Country of Tax Residence		Tax Identificaation Number (TIN)	TIN Type	Please provide explanation if no TIN is available
	Country of Tax Residence		Tax Identificaation Number (TIN)	TIN Type	Please provide explanation if no TIN is available
	Country of Tax Residence		Tax Identificaation Number (TIN)	TIN Type	Please provide explanation if no TIN is available
	Controlling Person Tyoe	Legal Person:	Ownership	Other Means	Senior Managing Official
Legal Arrangement – Trust:		Settlor	Trustee	Protector	Beneficiary Others
Legal Arrangement - Other		Settlor Equivalent	Trustee Equivalent	Protector Equivalent	Beneficiary Equivalent

Controlling person	First name				
	Full name/ Surname				
	Address		Date and place of birth (City/Town, Country)		
	City/Town		Postal code		
	State/Province				
	Mailing address (if different from Residence Address):				
	Country of Tax Residence		Tax Identificaation Number (TIN)	TIN Type	Please provide explanation if no TIN is available
	Country of Tax Residence		Tax Identificaation Number (TIN)	TIN Type	Please provide explanation if no TIN is available
	Country of Tax Residence		Tax Identificaation Number (TIN)	TIN Type	Please provide explanation if no TIN is available
	Controlling Person Tyoe	Legal Person:	Ownership	Other Means	Senior Managing Official
Legal Arrangement – Trust:		Settlor	Trustee	Protector	Beneficiary Others
Legal Arrangement - Other		Settlor Equivalent	Trustee Equivalent	Protector Equivalent	Beneficiary Equivalent



Controlling person	First name			
	Full name/ Surname			
	Address		Date and place of birth (City/Town, Country)	
	City/Town		Postal code	
	State/Province			
	Mailing address (if different from Residence Address):			
	Country of Tax Residence		Tax Identificaation Number (TIN)	TIN Type Please provide explanation if no TIN is available
	Country of Tax Residence		Tax Identificaation Number (TIN)	TIN Type Please provide explanation if no TIN is available
	Country of Tax Residence		Tax Identificaation Number (TIN)	TIN Type Please provide explanation if no TIN is available
	Controlling Person Tyoe	Legal Person:	Ownership	Other Means
Legal Arrangement – Trust:		Settlor	Trustee	Protector Beneficiary Others
Legal Arrangement - Other		Settlor Equivalent	Trustee Equivalent	Protector Equivalent Beneficiary Equivalent

Controlling person	First name			
	Full name/ Surname			
	Address		Date and place of birth (City/Town, Country)	
	City/Town		Postal code	
	State/Province			
	Mailing address (if different from Residence Address):			
	Country of Tax Residence		Tax Identificaation Number (TIN)	TIN Type Please provide explanation if no TIN is available
	Country of Tax Residence		Tax Identificaation Number (TIN)	TIN Type Please provide explanation if no TIN is available
	Country of Tax Residence		Tax Identificaation Number (TIN)	TIN Type Please provide explanation if no TIN is available
	Controlling Person Tyoe	Legal Person:	Ownership	Other Means
Legal Arrangement – Trust:		Settlor	Trustee	Protector Beneficiary Others
Legal Arrangement - Other		Settlor Equivalent	Trustee Equivalent	Protector Equivalent Beneficiary Equivalent