## Controlling person tax residency self-certification



This self-certification form records your personal information to fulfil our obligations under the Common Reporting Standard and the Foreign Account Tax Compliance Act. Please complete all sections of this form (all fields marked \* are mandatory). Each controlling person for your entity needs to complete and sign a copy of this form.

## How we protect your privacy:

To find out how we collect, use, and disclose your information, please see our Master Privacy Policy. You can ask us to send you a copy, or find it on our website: bnz.co.nz/privacy

irst			Date of birth*
iddle			D D M M Y Y
Aiddle			IRD number (NZ only)  NB: if no IRD number is provided and you are a NZ tax resident, a resident withholding tax (RWT rate of 45% will be applied. If you are non-resident for tax purposes and you need to update you
ast			
Physical address*			
treet address			non-resident withholding tax rate, please send a secure message through Internet Banking or contact 0800 275 269.
uburb			NZ resident withholding tax rate:
own/City		Postcode	10.5% 17.5% 30% 33% 39%
ountry			If you have provided your IRD number but not selected a tax rate, an RWT rate of 33% will be applied.
US permanent residents, inclupeople born outside of the Uni US tax residents certain persons who spend a sion more information, please refere you a current tax resident you answered Yes to either que	ited States with a US par ignificant number of day er to <a href="www.ird.govt.nz">www.ird.govt.nz</a> ar of another country (no	rent  ys in the United States ea nd search for 'FATCA'.  ot New Zealand)?*	ch year.  Yes No a tax resident of in the table below.
Country of tax residence	Tax number (or equivalent)	No tax number (reason code^)	Please provide an explanation if using reason code B
South y of tax residence			

C - The country doesn't need to issue a tax number or equivalent, or collect a tax number or an equivalent under domestic law. For more information on tax number requirements, please refer to <a href="www.oecd.org">www.oecd.org</a> and search 'tax identification number'. If you are a US tax resident you are required under FATCA to provide your Tax Identification Number (TIN). A Social Security Number (SSN) is one type of TIN.

	select your main relationship, which is applicable for:
Entity na	ame
For a tru protecto they act exercisi controll	r legal arrangement: ust, the controlling persons are the settlor(s), the trustee(s), the or(s), the beneficiaries, or classes of beneficiaries, irrespective of whether tually exercise control over the trust, and any other natural person ng ultimate effective control over the trust. For a legal arrangement, ing persons means persons in equivalent or similar positions to persons ted to a trust.
Se	ttlor
○ Tr	ustee
O Pro	otector
Ве	eneficiary
Se	ttlor-equivalent (e.g. executor)
◯ Tr	ustee-equivalent (e.g. general partner)
O Pro	otector-equivalent
Ве	eneficiary-equivalent
Ot	her natural person having control
A contr	person (e.g. company): olling person is considered a natural person who exercises control over ity. This is generally a person who:
	ontrol by ownership as a controlling ownership interest (25% and more).
Ų A₁	ontrol by other means natural person who exercises control over the entity through other eans. Common examples include: secretary, treasurer, director.
○ Se	nior managing official natural person who holds the position of a senior managing official of e entity. Common examples include: president, director.

## **Section 4: Declaration**

Please read the declaration and sign at the end of this section. If you are under the age of 13, a parent or legal guardian must sign this form on your behalf. If you're signing based on an authority granted to you utilising a Power of Attorney, please provide a certified copy of the document with this form.

- I certify that all the information supplied is true and complete.
- I certify that I am the account holder/controlling person, or am authorised to sign for the account holder/controlling person of all accounts to which this form relates, and/or all account(s) held by the entity(ies) of which I am a controlling person as specified in the controlling person section of the entity self-certification.
- I declare that all statements made in this Declaration are, to the best of my knowledge and belief, correct and complete.
- I undertake to advise BNZ within 20 days of any change in circumstances which affects the tax residency status of the individual identified above in this form or causes the information contained herein to become incorrect or incomplete, and to provide BNZ a suitably updated self-certification and Declaration and relevant documentation (as requested) within 20 days (or a lesser period as requested by BNZ) of such change in circumstances.
- I acknowledge that the information contained in this form and information regarding the account holder/controlling person and any account(s) may be reported to the tax authorities of the country/jurisdiction in which this account(s) is/are maintained and exchanged with tax authorities of another country/jurisdiction or countries/jurisdictions in which the account holder/controlling person may be tax resident pursuant to intergovernmental agreements to exchange financial account information.

<ul> <li>I certify that all statements made in this Declaration also extend to any information that I (or an authorised person on my behalf) may supply to BNZ, in whatever manner, subsequent to signing this form.</li> </ul>
Signature
Name
Date of Signature D D M M Y Y
Capacity
please tell us if you are signing this form in your capacity as a legal guardian or nolder of a power of attorney.
Where can I go to get more information?
/isit the following websites and search Common Reporting Standard or FATCA:    bnz.co.nz
BANK USE ONLY

Customer Number