

Individual self-certification

Please Note

For the avoidance of doubt, the supporting notes and guidance provided are for reference purposes only and do not constitute tax advice. If you require assistance in completing this Self-Certification then you should seek qualified professional assistance.

Part 1 - Basic Information

Name of individual _____

Country of birth _____	Town of Birth _____	Date of Birth _____
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Resident / Permanent address

Street: _____

City: _____ Post Code: _____ Country: _____

Mailing address (if different to permanent address)

Street: _____

City: _____ Post Code: _____ Country: _____

Part 2 - Tax Residency

Residency for tax purposes

Please specify the jurisdiction in which you are resident for tax purposes:

Primary Jurisdiction : _____ TIN: _____ or TIN unavailable*

Additional Jurisdiction: _____ TIN: _____ or TIN unavailable*

Additional Jurisdiction: _____ TIN: _____ or TIN unavailable*

* Please specify the reason for non-availability of TIN _____

Please tick this box to confirm you have specified all jurisdictions in which you are resident for tax purposes.

Is the individual a US person¹? Yes No

If the individual named in Part 1 is contracting with a UBS entity which is not currently in an AEI Participating Jurisdiction, we request that you complete the whole of Part 2 (including tax residence and, where available, TIN) and that you consent to UBS retaining such information in relation to future reporting obligations of the UBS entity under AEI or similar information reporting regimes.

Part 3 - Certification

I certify that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete.

I agree that I will inform you within 30 days if any change in circumstances renders this certification incorrect.

I certify that the individual signing this form is either the beneficial owner as named in Part 1 of this form, or has the capacity to sign on behalf of the beneficial owner. I confirm that, where this form is being completed by someone other than the beneficial owner, the beneficial owner has given any required consents to allow the processing and disclosure of information as set out in this form.

I acknowledge and agree that for the purpose of any Automatic Exchange of Information (AEoI) and FATCA obligations:

(a) the information contained in this form (including the appendices); and

(b) any information regarding my Account(s) (including the account balance or value, the total amount of any payments of dividends, interest, other income and gross proceeds made or credited to the Account(s));

is collected using the "wider approach" under AEoI, and may be kept by the contracting UBS entity ("UBS") or any UBS Affiliate and such information may be reported by UBS (whether by itself or through any UBS Affiliate) under its obligations as a reporting financial institution (under applicable FATCA or AEoI laws and regulations) to the relevant tax authorities and disclosed to UBS Affiliates or third party service providers to perform services for UBS and for the purposes stated above. These tax authorities may exchange such information with the tax authorities of the jurisdiction(s) which are listed as my tax residence(s) in this form if the respective tax authorities have entered into an agreement to exchange financial account information. A list of such agreements to exchange financial account information may be found on the UBS FATCA and AEoI Tax Regulatory Compliance webpage (www.ubs.com/aei). For the purposes of this form, "UBS Affiliates" means any entity (i) that controls UBS; (ii) that is controlled by UBS; or (iii) that is controlled by an entity that also controls UBS, where "control" includes direct or indirect control and means possession of the power to direct or cause the direction of the management or policies of an entity, whether through the ownership of voting securities, by contract or otherwise. My consent to the collection of data using the "wider approach" under AEoI, the transfer of that data by UBS and its affiliates and (where required) to the reporting of the data under FATCA and/or AEoI to the relevant tax authorities is in addition to and does not restrict the scope of any other consent I may have otherwise provided under my account agreement with UBS. No other agreement with UBS, whether dated on, before or after this consent, may revoke or limit the effect of this consent.

Sign Here

Signature _____ Date

Print name of individual signing form _____ Capacity in which acting (if not signed by account holder)

¹ US person for FATCA purpose means a US citizen (even if residing outside the US) or a resident alien of the US. Please see Part 2 of the Supporting Notes