

Your Ref:

Our Ref: 1811348876

Date:

10 November 2014

PARKLANDS RETIRMENT BENEFITS DAWS HOUSE 33-35 DAWS LANE LONDON

NW7 4SD

Customer Tax Operations

225 Shenley Road Borehamwood WD6 1TE

Telephone: 0208 242 9447 Minicom: 0208 236 8294

www.rbs.co.uk

Action required – Sharing of information with other countries for tax reasons

Dear customer

The United Kingdom Government has signed international agreements to share information for tax reasons.

As a result, the Royal Bank of Scotland Plc. has a legal requirement to identify customers and / or controlling person(s) from the countries detailed in the international agreements. We may also be required to disclose certain information to the United Kingdom tax authority, which will be responsible for sharing this information with tax authorities in countries where agreements are in place. This information will include name, address, tax number, account number(s) and the balance or value of the account(s).

What does this mean for me?

Customers are required to provide self certification for tax reasons so that we can identify who may be affected by this sharing of information.

What do I need to do now?

You will need to complete the enclosed self certification form (detailed below).

Tax Status Declaration form

If you are not sure how to complete the form we recommend you obtain independent tax advice. The information you provide to the Bank may affect the amount of tax you pay in other countries as a result of this information being shared.

Please make sure that you put the completed form and return cover sheet in the pre-paid envelope supplied and post it back to us. You may want to keep a copy of the documentation you send to us for your own tax records.

What happens next?

We will review the document(s) that you return to us and confirm if we have everything we need or whether we require further information.

If we do not receive a reply from you within 90 days we will assume that the existing information that we hold for your account is correct and that the account holder or controlling person(s) is a tax resident of the United States of America (USA)

If you have any questions about this or you are unsure what you need to do next, please get in touch. You can contact us on 0208 242 9447 between 08:00 and 18:00 (UK Time), Monday to Friday, excluding UK Bank Holidays or you can write to us at the above address. Customers with hearing or speech impairments can contact us on Minicom number 0208 236 8294. Calls may be recorded.

Yours sincerely

Pritesh Gokani

Centre Manager, Customer Tax Operations



Call us on 0208 242 9447, 0208 236 8294 (Minicom)

Calls may be recorded for training and audit purposes. Calls from mobiles or overseas will vary and may cost more than calls from UK land lines which are charged at local rate.

Return Cover Sheet

Name: PARKLANDS RETIRMENT BENEFITS

Ref no: 1811348876

Important Note:

Please ensure that you put this 'Return Cover Sheet' in the supplied pre-paid envelope along with the following documents:-

- Original completed, signed and dated form.
- Certified copies of the relevant documents (where appropriate).

Please ensure that you complete the box below to advise us how many documents are included alongside the cover sheet in the envelope.

Number of documents included: (Excluding this cover sheet)	
(Excluding this cover sheet)	

Tax Status Declaration – Entity

Purpose

This form is designed to capture the residency for tax purposes of the entity or organisation, who for tax purposes, own(s) the income and the assets associated with an account maintained by the Bank and held by that entity or organisation (the "Account Holder").

Do not use this form if you are an individual. Instead, complete and provide the appropriate tax status declaration form for individuals.

Your Information

Depending on the countries or territories in which the Account Holder, or any controlling person thereof, is a tax resident, we, the Bank, may be required to disclose certain information regarding the Account Holder, or any controlling person thereof, to the appropriate local tax authorities or the foreign tax authorities of the country in which the Account Holder, or the controlling person, as applicable, is a tax resident. If the Bank provides the information to its local tax authorities, then the local authorities may exchange this information with the foreign tax authorities of the country or territory in which the Account Holder, or any controlling person thereof, is a tax resident.

Complete, where applicable, the relevant sections below and provide any additional information as may be required.

If you have any questions about how to complete this form, please contact your tax advisor. For further information and guidance, please visit www.irs.gov/FATCA

Part 1 – Customer Identific	cation
Name of Account Holder:	
Country of Incorporation or Organ	nisation:
Permanent Residence Address	(Do not use a P.O. box or an 'in care of address'):
Street and House Number:	
City or Town:	
Province, State or County:	
Postal Code:	
Country:	
Mailing Address (if different from	n above)
Street and House Number:	
City or Town:	
Province, State or County:	
Postal Code:	
Country:	

Part 2 – Tax Residency Inform	nation	
I hereby certify that the Account Holde	er identified above is a resident of:	
for tax purposes.		
I further certify that:		
functional equivalent in its Or (b) the Account Holder's cour	Payer Identification Number ("TIN") country of residence for tax purpose atry of residence for tax purposes doesnts, or the Account Holder is otherw	es is: es not issue TINs or a functional
its country of tax residence	e (please tick box if relevant).	nse unable to procure a Thy from
If the Account Holder is a tax resident appropriate for the additional countries		y please complete the following section as
Country	TIN	Or TIN Unavailable
Part 3 – Entity Certification		
·	and of the following:	
Please identify the Account Holder as (a) Specified US Person	one of the following.	
(b) US Person other than a Speci	fied US Person	
(c) Non-US Person		
If the Account Holder is a Spe than a Specified US Person, p	cified US Person or a US Person otlerovide the US TIN:	her
	as a trust in its country or territory `e enclose a certified copy of the trus	

Part 4 - FATCA Status Certification

For an Account Holder classified for FATCA purposes as a financial institution <u>ONLY</u> complete Section A below. For an Account Holder classified for FATCA purposes as a non-financial entity, <u>ONLY</u> complete Section B below.

Section A – Financial Institution If the Account Holder is a Financial Institution ("FI") for FATCA purposes, please tick this box and complete (a) or (b) below (as appropriate):	
(a) Please provide the FI's Global Intermediary Identification Number ("GIIN"):	
If you do not have a GIIN but you are sponsored by another FI which has a GIIN, please provide your sponsoring FI's GIIN above and state your sponsoring FI's name:	\neg
(b) If unable to provide a GIIN, please tick the reason why the Account Holder does not have a GIIN:	
i. The Account Holder identified in Part 1 is a Deemed Compliant Financial Institution in a IGA Partner Jurisdiction that has applied for but not yet obtained a GIIN;	
ii. The Account Holder identified in Part 1 is a Financial Institution that intends to apply for a GIIN (but has not yet applied or has not yet obtained it);	
iii. The Account Holder identified in Part 1 is an Exempt Beneficial Owner (e.g., an international organisation);	
iv. The Account Holder identified in Part 1 is a Certified Deemed Compliant Financial Institution (e.g., a registered charity);	
v. The Account Holder identified in Part 1 is an Owner Documented Financial Institution;	7
vi. The Account Holder identified in Part 1 is an Excepted Financial Institution;	
vii. The Account Holder identified in Part 1 is a Non-Participating Financial Institution;	
viii. Other (please state) :	<u> </u>
Section B Non-Financial Foreign Entity If the Account Holder is a non-financial entity for FATCA purposes, confirm the Account Holder's status below:	
Active NFFE Passive NFFE Excepted NFFE (Sponsored) Direct Reporting NFFE	
If the Account Holder is a (sponsored) direct reporting NFFE please provide the Account Holder's GIIN or the GIIN and the name of the sponsoring entity:	
GIIN:	
Sponsoring entity name (where applicable):	

If the Account Holder has more than one FATCA status as a result of different FATCA classification rules applicable in various countries and territories, indicate the other FATCA classification and the country where such classification applies, and contact your relationship manager at the Bank.

Other FATCA Classification:	Country:	
Section C - Controlling Person(s)		

For Passive NFFEs, please complete the table below with details of each controlling person. Controlling persons are defined as natural persons who exercise, directly or indirectly, control over the Account Holder. In the case of a trust, the controlling person is generally:

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

In the case of a legal arrangement other than a trust, the controlling person generally refers to persons in equivalent or similar positions. The term "controlling persons" must be interpreted in a manner consistent with the Recommendations of the Financial Action Task Force.

Controlling Persons (please continue on a separate sheet if necessary, signing, dating and attaching the sheet to this form)

Name of the Controlling Person	Address of the Controlling Person	Tax Residence(s) for each Controlling Person (List all)	TIN(s), if any, for each Controlling Person (List all)

Part 5 – Declaration and Signature

- 1. I authorise the Bank to provide, directly or indirectly, to any relevant tax authorities or any party authorised to audit or conduct a similar control of the Bank for tax purposes, a copy of this form and to disclose to such tax authorities or such party any additional information that the Bank may have in its possession that is relevant to the account holder's qualification for any benefits claimed on the basis of this declaration. I acknowledge and agree that information contained in this form and information regarding the account(s) and income paid or credited to or for the benefit of the account(s) maintained by the Bank and held by the Account Holder may be reported to the tax authorities of the country in which such income arises and that those tax authorities may provide the information to the country or countries in which the Account Holder is a resident for tax purposes.
- 2. I authorise the Bank to provide, directly or indirectly, a copy of this form and any information regarding the Account Holder that the Bank may have in its possession, and information regarding the account(s) and the income paid or credited to or for the benefit of the account(s) maintained by the Bank and held by the Account Holder: (i) any person that has control, receipt, or custody of income to which this form relates; (ii) any person that can disburse or make payments of income to which this form relates; or (iii) any party authorised to audit or conduct a similar control of aforementioned persons for tax purposes.
- 3. I undertake to advise the Bank promptly of any change in circumstances which causes the information contained herein to become incorrect and to provide the Bank with a suitably updated declaration within 30 days of such change in circumstances.
- 4. I declare 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 further certify that the Account Holder identified in Part 1 is the owner of all the accounts and the income to which this form relates.
- 5. I confirm that I have obtained the consent of or have the authority from each controlling person to: (i) provide such personal data in relation to these individuals to the Bank for the purposes as set out in this form; and (ii) permit the Bank to provide, directly or indirectly, such personal data to any relevant tax authority or any party authorised to audit or conduct a similar control of the Bank for tax purposes, whether or not such tax authority is located within the European Economic Area.

Please note that: (i) the Bank shall only process and transfer personal data as collected pursuant to this form or such other relevant account details for the purposes as set out in this form; (ii) the Bank shall ensure appropriate technical and organisational security measures will be taken to prevent unauthorised or unlawful processing, accidental loss of or destruction or damage to such personal data; and (iii) any personal data which is collected, stored or transferred by the Bank shall be subject to the Bank's Privacy Policy

Date: (DD-MM-YYYY)	
Please indicate the capacity in which you have acted here	

Contact: Customer Tax Operations, 225 Shenley Road, Borehamwood, WD6 1TE. Tel: 0208 242 9447