



SwissLife

Tax Reporting Self-Certification

FATCA / CRS Declaration – Natural Person

Swiss Life (Luxembourg) S.A.

EN

Contract number:

(Enter your Swiss Life contract number)

This document must be completed in the most precise way and in **CAPITAL LETTERS**.

The personal information below have been prefilled based on the information currently available in our files. In case these **personal information are not correct or that changes have occurred**, please complete the **section 4 “Changes of personal information”** in page 4 of this form.

In case of **blanks fields**, please complete the missing information. All **mandatory fields** are marked with an asterisk (*)

1. Declarant

	1 st declarant	2 nd declarant (if applicable)
Title (*):	☐ Mr ☐ Ms	☐ Mr ☐ Ms
Surname (*):		
First names (*):		
Street name and number of residence (*):		
Postcode and town / city (*):		
Country (*):		
Date of birth (*):	____/____/____	____/____/____
Place of birth (*):		
Nationality (*):		
Telephone number (*): (including country code)		

2. Country of taxation

	Country of Tax Residence (*)	Tax Identification Number (*) <i>See definition of TIN below</i>	If no TIN available tick box A, B or C
1st declarant			☐ A ☐ B ☐ C
			☐ A ☐ B ☐ C
			☐ A ☐ B ☐ C
2 nd declarant (if applicable)			☐ A ☐ B ☐ C
			☐ A ☐ B ☐ C
			☐ A ☐ B ☐ C

Reason A – The country where I am 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 right 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 above do not require the TIN to be disclosed)

If you selected reason B, please explain why you are unable to obtain a TIN:

TIN Definition: The term “TIN” means Taxpayer Identification Number (or functional equivalent in the absence of a Taxpayer Identification Number). A TIN is a unique combination of letters or numbers assigned by a jurisdiction to an individual or an Entity and used to identify the individual or Entity for the purposes of administering the tax laws of such jurisdiction. Further details of acceptable TINs can be found at the following link:

<https://search.oecd.org/tax/automatic-exchange/tinsandtaxresidency/taxidentificationnumberstins/>

3. Declaration and signature

The declarant hereby certifies that all his declarations are honest and accurate and that he understands that the non-disclosure or an incomplete communication of information to Swiss Life can defer or stop the subscription/additional premium payment process.

The declarant hereby declares the following:	YES	NO
1. Is the declarant a citizen of the United States (including dual or multiple citizenship)?	☐	☐
2. Is the declarant a “U.S. resident alien” (e.g. Green Card Holder, in possession of a U.S. alien registration card as a lawful permanent resident issued by the U.S. citizenship and Immigration Service or anyone who meets the “substantial physical presence test” as issued by the IRS)?	☐	☐
3. Is the declarant a “U.S. Person” under U.S. tax principles or for any other reason (including but not limited to dual residency, spouse filing jointly, relinquishing U.S. citizenship or long-term permanent residency in the U.S.)? <i>(The declarant is considered as U.S. resident if he meets the criteria of the Substantial Physical Presence Test. He satisfies the test if, during the current year, he was physically present in the United States for 183 days or more, or, if less, but already 31 days or more, according to the following formula: (number of days in the current year x 1) + (number of days in the previous year x 1/3) + (number of days in the year before the previous year x 1/6) => 183 days)</i>	☐	☐
4. Regardless of the Substantial Physical Presence Test above, is the declarant still domiciled in the United States? <i>(If the declarant has left the United States during the calendar year without the intention to return or to satisfy the Substantial Physical Presence Test the next year, you can answer “No”. This must be documented with a current and official certificate of domiciliation)</i>	☐	☐
5. Is the declarant an individual resident in the United States, or any of its territories (Puerto Rico, Guam, American Samoa, U.S. Virgin Islands and Northern Mariana Islands), U.S. possessions (Midway Islands, Wake Island, Kingman Reef, Navassa Island, Johnston Atoll, Palmyra Atoll, Baker, Howland and Jarvis Islands) and the District of Columbia, regardless of his U.S. tax status?	☐	☐

6. Is the declarant a Partnership, corporation, LLC created or organised under the laws of the U.S., any of its states, the District of Columbia or any U.S. possession or territory (see point 5) or Non-US partnership, corporation or LLC where at least - either directly or indirectly - one beneficial owner qualifies as a U.S Person as defined under section 1 to 5 above controlling 10% or more of such Non-US partnership, corporation or LLC?	☐	☐
7. Is the declarant an estate of a U.S. citizen or U.S. resident?	☐	☐
8. Is the declarant a trust upon which a U.S. court would have authority under applicable law to render orders or judgements concerning substantially all issues regarding administration?	☐	☐
9. Is the declarant a trust in which one or more U.S. persons have the authority to control all substantial decisions?	☐	☐

☐ The declarant commits himself to inform Swiss Life within 30 days of any change in circumstances occurring, which causes any of the information contained in this form to be inaccurate or incomplete.

By signing this declaration the declarant is aware that:

- He gives his irrevocable consent to Swiss Life reporting the contract, pre-existing contracts and associated assets to the U.S. tax authorities, if he has the status of "U.S. person" now or in the future and if the contract must be reported to the U.S. and Luxembourg tax authorities;
- He expressly and irrevocably authorises Swiss Life to disclose information to the U.S. and Luxembourg tax authorities by name including details of the assets involved if, at a future date, there are indications that the policyholder is a "U.S. person" and the latter fails to provide Swiss Life with the required information.
- He understands and acknowledges that Swiss Life is legally required to disclose and report data (including tax relevant information) pertaining to the contract with Swiss Life and any other relevant data arising from the application documents or other documents regarding the contract to competent authorities for FATCA and CRS purposes in accordance with relevant Luxembourg Laws that release Swiss Life for such purpose of insurance, data and business secrecy.
- He understands and acknowledges that Swiss Life may be obliged to disclose and report data (including tax relevant information) pertaining to the contract with Swiss Life and any other relevant data arising from the application documents or other documents regarding the contract to its business partners (the custodian bank holding the Contract's assets, asset manager and any other mandated third party, appointed during the term of the contract) or to authorise its business partners to transfer such data or information. This duty may lead to a disclosure of the data or information to the competent authorities. The declarant agrees to this disclosure and data transfer, to the extent necessary, releases Swiss Life and its business partners from the Luxembourg insurance secrecy provision in order to comply with the aforementioned disclosure, reporting and data transfer requirements.
- This data/information may include, but is not limited to, personal data of the declarant such as a copy of the identity card, full name, address, date and place of birth, nationality, Social Security Number or Taxpayer Identification Number, as well as data related to the bank account underlying the contract including but not limited to account statements, amount of assets and any revenues or income, and any other relevant data arising from the execution of the insurance contract including U.S. Treasury and IRS Form W-9, FinCEN Report 114 and TD F 90-22.1 FBAR, 8938, 8966 or other equivalent and similar forms, whether this information is confidential or not (the "Data"). The Data may be disclosed by means of written courier (postal or electronically) and verbally (telephone or oral communication).
- Being a reporting financial institution, Swiss Life is responsible for the transfer of personal information concerning the declarant to the Luxembourg tax authority. The declarant fully and unlimitedly releases Swiss Life from any liability incurred from disclosing or transferring the data. He is aware of the risk related to electronic communication and explicitly releases Swiss Life from any liability with regard to any erroneous transmission.
- The data may be communicated to the Luxembourg tax authority and to relevant authorities of each jurisdiction participating in the CRS / AEOI standards.
- He understands and acknowledges that answers to each questions of the FATCA and CRS declaration are mandatory and he accepts all risks associated with inaccurate or incomplete answers. The declarant has the rights to access the data which will be communicated to the Luxembourg tax authority and he shall advise Swiss Life in order to rectify any erroneous information.

Place/Date

Signature of the 1st declarant

/ /

Place/Date

Signature of the 2nd declarant (if applicable)

/ /

4. Change of personal information

Please complete the information below **ONLY** if you **need to correct or modify** prefilled information disclosed in the above section 1. In case the information disclosed in section 1 have not changed, please **disregard this section**.

In case you need to complete the information below, please use **CAPITAL LETTERS**.

1st declarant

Title:	☐ Mr	☐ Ms
Surname:		
First names:		
Street name and number of residence:		
Postcode and town / city:		
Country:		
Date of birth (DD/MM/YYYY):	/	/
Place of birth:		
Nationality:		
Telephone number : (including country code)		

2nd declarant (if applicable)

Title:	☐ Mr	☐ Ms
Surname:		
First names:		
Street name and number of residence:		
Postcode and town / city:		
Country:		
Date of birth (DD/MM/YYYY):	/	/
Place of birth:		
Nationality:		
Telephone number : (including country code)		