

**Date:** [Insert Date]

**To:**

[Financial Institution Name]

[Address Line 1]

[Address Line 2]

## **Subject: FATCA Status Declaration for Non-Financial Foreign Entity (NFFE)**

**Entity Name:** [Insert Full Legal Name of Entity]

**Country of Incorporation/Organization:** [Insert Country]

**Registered Address:** [Insert Full Address]

To whom it may concern,

In connection with the Foreign Account Tax Compliance Act (FATCA) requirements, the undersigned hereby certifies the following status for the above-named entity:

### **Part I: FATCA Classification (Select one)**

- **Active NFFE:** The entity is a non-financial entity and less than 50% of its gross income for the preceding calendar year is passive income and less than 50% of the assets held by the entity are assets that produce or are held for the production of passive income.
- **Passive NFFE:** The entity is a non-financial entity that is not an Active NFFE.
- **Excepted NFFE:** (e.g., Publicly traded corporation, an affiliate of a publicly traded corporation, or a non-profit organization).

### **Part II: Substantial U.S. Owners (Applicable to Passive NFFEs only)**

Tick one of the following:

- The entity has no Substantial U.S. Owners.
- The entity has Substantial U.S. Owners, and their details (Name, Address, and U.S. TIN) are provided below:

[Insert Details Here]

**Part III: Certification**

I certify that I have the capacity to sign for the entity identified above. I declare that the information provided in this form is, to the best of my knowledge and belief, true, correct, and complete. I agree to notify [Financial Institution Name] within 30 days if any change in circumstances occurs that causes the information on this form to become incorrect.

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**Authorized Signature**

**Print Name:** [Insert Name]

**Title/Position:** [Insert Title]