

CRS Compliance Form			
Number	Question	Response	Next option
Mandatory fields are marked with an *			
Sub-heading	Section 1 - Financial Institution Profile Data		
1.1	FI Name	Pre-populated	
1.2	FI Number	Pre-populated	
1.3	Reporting Period*		
1.4	Is the FI Licensed or Registered with FSC*	Yes	1.5 required
		No	1.6 required
		Registration - Private Funds Law (only available in year 1)	1.5 required
1.5	Insert FSC Number (option to add more than one number)	Number	Section 2. Note - Section 3 does not apply when valid FSC number provided
1.6	Please confirm the nature of the FI's business (i.e. if not regulated by FSC)	Drop down with the following options: 1. Pension Fund 2. Securitisation Special Purpose Vehicles 3. Debt Issues and Debt Issuing Vehicles 4. Schemes involving the issue of certificates representing investments - Structured Finance Vehicles 5. Preferred Equity Financing Vehicles 6. A fund of whose investment interests are listed on a stock exchange (including an over-the-counter-market) specified by the Authority by notice in the Gazette 7. Occupational and personal pension schemes 8. Sovereign wealth funds 9. - Single family offices 10.	Section 2
		11 - Other	1.7 required
1.7	Please provide explanation	Limit 250 Characters	Section 2
Sub-heading	Section 2 - Financial Account Data		
2	Confirm currency used to complete this section*	Drop down of currencies	2.1 required
2.1	Please confirm the total value of the FI's Financial Accounts for the reporting period (e.g. Net Asset Value in the case of an investment fund)*	Insert Value	2.2 required
2.2	Does the FI have any non-reportable accounts for the reporting period*	Drop down - Yes	2.3 required
		Drop down - No	Section 3
		Drop down - Existence, number or value of no reportable accounts is unknown	2.5.3 required
2.3	Please confirm the reason the account(s) are considered to be non-reportable	Check Box - Financial account(s) where the account holder is not a Reportable Person but is a Reportable Jurisdiction Person (e.g. FI resident in Canada)	2.4 required
		Check Box - Financial account(s) where the account holder and all controlling persons are not Reportable Jurisdiction Persons (e.g. all resident in the Cayman Islands)	2.5 required
		Check Box - Both	2.4 and 2.5 Required
2.4	Please provide further classification details of the financial account(s) where the account holder is not a Reportable Person but is a Reportable Jurisdiction Person	Check Box - Financial Institution	2.4.1 required
		Check Box - Other	2.4.2 required
		Check Box - Both	2.4.1 and 2.4.2 Required
2.4.1	Financial Institution - Total number of Non-Reportable Accounts	Insert Number	
	Financial Institution - Total Value of Non-Reportable Accounts	Insert Value	
	Financial Institution - Total Number or USD Value of Non-Reportable Accounts is unknown	Check Box	2.5.3 required
2.4.2	Other - Total number of Non-Reportable Accounts	Insert Number	
	Other - Total Value of Non-Reportable Accounts	Insert Value	

	Other - Total Number or USD Value of Non-Reportable Accounts is unknown	Check Box	2.5.3 required
2.5	Please provide further classification details of the financial account(s) where the account holder and all controlling persons are not reportable jurisdiction persons	Check Box - US Person	2.5.1 required
		Check Box - Other	2.5.2 required
		Check Box - Both	2.5.1 and 2.5.2 Required

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2.5.1	US Person - Total number of Non-Reportable Accounts	Insert Number	
	US Person - Total Value of Non-Reportable Accounts	Insert Value	
	US Person - Total Number or USD Value of Non-Reportable Accounts is unknown	Check Box	2.5.3 required
2.5.2	Other - Total number of Non-Reportable Accounts	Insert Number	
	Other - Total Value of Non-Reportable Accounts	Insert Value	
	Other - Total Number or USD Value of Non-Reportable Accounts is unknown	Check Box	2.5.3 required
2.5.3	Please confirm why the existence, number or value of Non-Reportable Accounts is unknown.	Free Text - Limit 200 characters	Section 3
2.6	Total number of Non-Reportable Accounts	Pre-populated (using information provided above)	
2.7	Total Value of Non-Reportable Accounts	Pre-populated (using information provided above)	
Sub-heading	Section 3 - AML/KYC and Accounting		
3.1	Does the FI have audited financial statements*	Drop down - Yes	3.2 required
		Drop down - No	3.2 required
3.2	Which entity carries out the AML/KYC obligations*	FI itself	3.4 required
		Other	3.3 required
3.3	Name of entity / service provider	Free Text	3.4 required
3.4	Location of entity / service provider	Drop down of Countries	3.5 required
3.5	Are the AML/CFT obligations performed in accordance with Turks & Caicos Islands (TCI) law*	Yes	Section 4
		No	3.6 required
3.6	Specify which jurisdiction's laws are applied in the performance of AML/CFT obligations.	Drop down of Countries	Section 4
Sub-heading	Section 4 - CRS Process		
4.1	Which entity reviews account holder information and drafts the reportable accounts list for review by the management of the FI*	FI itself	4.4 required
		Other	4.2 required
4.2	Name of entity / service provider	Free Text	4.3 required
4.3	Location of entity / service provider	Drop down of Countries	4.4 required
4.4	Please confirm the FI has established and maintained written policies and procedures which comply with the FI's obligations under the TCI CRS Regulations.*	Yes	4.5 required
		No	4.6 required
4.5	Please confirm the FI has implemented and complied with its said written policies and procedures	Yes	4.6 required
		No	4.6 required
4.6	Please confirm the FI has complied with Reg. 7(3) of the CRS Regulations in relation to self-certifications.*	Yes	Section 5
		No	Section 5
Sub-heading	Section 5 - Declaration		
5.1	By submitting this CRS Compliance Form to the Financial Transactions Information Exchange (FTIE), the Turks & Caicos Islands Financial Institution (TCIFI): (a) Confirms that all information in this CRS Compliance Declaration is accurate; and (b) Acknowledges that there are sanctions for providing inaccurate information to the (FTIE and for contravention of the TCIFI's compliance and due diligence obligations.		
	Submit*	Button	End

