

ES Notification Form F – Domestic Entity, Relevant Activity

Entity Status Confirmation under the Cayman Islands Economic Substance Act

Instructions: Complete this form for a Cayman Islands <u>Domestic Entity</u> engaged in one or more of the following <u>Relevant Activities</u>:

- Banking
- Fund Management
- Insurance

Complete this form using Adobe Acrobat. The form does not need to be signed. Send the completed form to regulation@campbellslegal.com

If any of the information set out below changes, you should notify Campbells within 30 days of the change by email to regulation@campbellslegal.com

Entity Name (the "Named Entity"):	
Named Entity Reference Number (to be added by Campbells):	
Named Entity Type ¹ :	Company
	Partnership
	LLC
Named Entity Financial Year End (dd/mm):	
The Named Entity is part of an MNE Group. The term "MNE Group" means any Group that includes	Yes ²
two or more enterprises for which the tax residence is in different jurisdictions or includes an enterprise that is resident for tax purposes in one jurisdiction and is subject to tax with respect to the business carried out through a permanent establishment in another jurisdiction.	No

Domestic Entity:

Carrying on business in the Cayman Islands and which complies with section 3(a) of the Trade and Business Licensing Act.

Carrying on business in the Cayman Islands and which complies with section 4(1) of the Local Companies (Control) Act.

A company incorporated in the Cayman Islands that is limited by guarantee or is a not-for-profit association.

N/A

Relevant Activity³ Confirmation

Select the applicable Relevant Activity below and check the applicable confirmations.

Contact your Campbells attorney if you have questions about the Relevant Activity Confirmation.

Relevant Activity Confirmation

Banking Check to Confirm

The Named Entity is engaged in the business of receiving (other than from a bank or trust company) and holding on current, savings, deposit or other similar account money which is repayable by cheque or order and may be invested by way of advances to customers or otherwise.

Yes

		1.03
Banking Business type	Banking Class A Banking	
	Banking Class B Banking	
	Banking Class B (Restricted)	
CIMA Reference Number	Number:	None
Fi Number	Number:	None
IRS GIIN Number	Number:	None
If yes, Trade and Business Licence	Yes Number:	No

If no, review Relevant Activity on website. If not engaged in Relevant Activity, complete Form I

Relevant Activity Confirmation

Fund Management Check to Confirm

The Named Entity is engaged in the business of managing securities as set out in paragraph 3 of Schedule 3 to the Securities Investment Business Act (2020 Revision) (SIBA) carried on by a relevant entity licensed or otherwise authorised to conduct business under that Act for an investment fund.

The Named Entity manages securities belonging to another person, being an investment fund, in circumstances involving the exercise of discretion pursuant to paragraph 3 of Schedule 2 of <u>SIBA</u>.

Yes

Fund Management Business Type	Securities – Full	
	Securities – Register	red Person
	Securities - Restricte	ed
CIMA Reference Number	Number:	None
FI Number	Number:	None
IRS GIIN Number	Number:	None
If yes, Trade and Business Licence	Yes Number:	No

If no, review Relevant Activity on website. If not engaged in Relevant Activity, complete Form I

Relevant Activity Confirmation.

Insurance Check to Confirm

The Named Entity is engaged in the business of accepting risks by effecting or carrying out contracts of insurance, whether directly or indirectly, and includes running-off business including the settlement of claims. For the avoidance of doubt, reinsurance business is also included in the definition of insurance business.

Yes

Insurance Business Type	Class A External Insurer		
	Class A Local Insurer - De	omestic only	
	Class B Insurer	····,	
	Class C Insurer		
	Class D Insurer – Domes	tic only	
		tic Offig	
	Insurance Agent		
	Insurance Broker		
	Insurance Manager		
	Portfolio Insurance Com	pany	
CIMA Reference Number	Number:	None	
FI Number	Number:	None	
IRS GIIN Number	Number:	None	
If yes, Trade and Business Licence	Yes Number:	No	
If no, review Relevant Activity on website. If not engaged in Relevant Activity, complete Form I			
Please update your Campbells contact details:	No change		
Billing Contact at the Named Entity:	Same of Principal Contact		
Name:			
Role:			
Phone:			
Email:			
Billing Contact (Other) at the Named Entity:	ı		
Name:			
Role:			
Phone:			
Email:			
Principal Contact at the Named Entity:			
Legal Matters Regu	llatory Matters		
Name:			
Role:			
Phone:			
Email:			
Authorised Contact 2 at the Named Entity:			
Legal Matters Regu	latory Matters		
Name:	·		
Role:			
	i e		

Email:	
Completed by (Type name of person completing this form. A	
signed copy is NOT required. Do not scan.):	
Office held (if no office, enter Authorised Signatory):	
Email:	
Date (yyyymmdd):	

Notes:

- All entities formed or registered in the Cayman Islands, except trusts, are required to notify the Registrar of Companies
 whether they are in scope or out of scope for <u>Economic Substance</u> reporting. This notification must be confirmed
 annually.
- 2. Includes two or more enterprises for which the tax residence is in different jurisdictions or includes an enterprise that is resident for tax purposes in one jurisdiction and is subject to tax with respect to the business carried out through a permanent establishment in another jurisdiction. If the Named Entity is tax resident outside the Cayman Islands, complete ES Notification Form D.
- 3. If more than one Relevant Activity is applicable, please complete a separate ES Notification Form H for each Relevant Activity.