



**NEVIS ISLAND ADMINISTRATION
MINISTER OF FINANCE
INLAND REVENUE DEPARTMENT**

FORM 93(3)

EXPLANATORY NOTES

Notes in brackets and italics are for explanatory purposes only and full reference must be had to the provisions of the Ordinance

Application for a tax resident certificate

pursuant to section 93(3) of the Multiform Foundations Ordinance, 2004 and in accordance with Part V of Multiform Foundations Regulations, 2005

To the Minister of Finance

Multiform foundation number
(if applicable)

Multiform foundation name in full

I/We hereby give request that a tax resident certificate be granted in respect of the above-mentioned multiform foundation with effect from the below-mentioned date:

Date from which certificate applied for

(NOTE: The tax certificate shall be valid for the entire income year in which it is issued pursuant to the Regulations)

and upon grant of the certificate acknowledge that we shall be bound by the relevant provisions of the Income Tax Act 1966 (as amended) until such time as we shall have made an election to cease to be a tax resident foundation for the purposes of the Ordinance and the Regulations

Name of signatory in full

Signature

Date

** delete whichever is not applicable*

[secretary][member of the management board] [registered agent] *

Presenter's name, address, reference and contact numbers (if any)

(NOTE: This is optional)