

## IDENTIFICATION FORM AUSTRALIAN COMPANIES



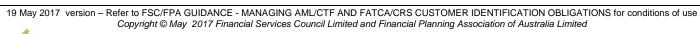
## GUIDE TO COMPLETING THIS FORM

- o This form is for AUSTRALIAN COMPANIES only. For companies incorporated outside of Australia use the FOREIGN COMPANIES IDENTIFICATION FORM.
- o Complete one form for each company.
- o Complete separate INDIVIDUAL ID Forms for each of the company's Beneficial Owners.
- o Tax information must be collected from an authorised representative of the Company
- o Complete all applicable sections of this form in BLOCK LETTERS.

SECTION 1: AUSTRALIAN COMPANY IDENTIFICATION PROCEDURE											
1.1	General	nformation									
Full	name as	registered by ASIC									
ACN [											
		L									
Registered office address (PO Box is NOT acceptable) Street											
Suburb				State		Postcode		Country			
<b>Princ</b> Stre		e of business (if any) (PO Box	s NOT acceptable)								
Sub	ourb			State		Postcode		Country			
Comp	anies incor	porated outside of Australia should	complete the FOREIG	GN COMPA	NIES IDENTI	FICATION FO	RM, rather than	n this form.			
1.2	Company	Type (select ✓ only ONE of t	ne following catego	ries)							
	Propriet	ary (companies whose name e	nds with Proprietar	ry I td or Pí	ty I td. also k	nown as priv	vate compani	es) proceed	to 1.3		
	•	companies whose name does i	·			·	·	00), p. 0000a			
4.0											
<b>1.3</b>		(Required for all Proprietary or names of all directors.	companies as per 1	.2, NOT re	equirea tor F	чынс Сотра	anies)				
4	r un give	en name(s)			Surnam	<del>-</del>					
1											
2											
3											
4											
	If there a	re more directors, provide deta	ils on a separate s	heet and ti	ick this box	□.					
1.4	Listing ar	nd Regulatory Details (Select	✓ any of the follow	ing catego	ories <b>if appl</b> i	cable)					
	Australia	an Public Listed company (co	mpanies that are li	isted on ar	Australian	financial maı	rket such as t	he ASX)	Proceed to Section 2		
	Name of	market / exchange									
	Majority Owned Subsidiary of an Australian Public Listed company (companies that are majority owned by an Australian company that is listed on an Australian financial market such as the ASX)										
	Australia	n listed company name									
	Name of	market / exchange									
	that prov	ed company (subject to the suited by ASIC as a company re Australian Credit Licensees (Ar	gistration body. Ex	camples inc	clude Austra	ilian Financia	al Services Lic		Proceed to Section 2		
	Regulato	r name									
	Licence of	details (e.g. AFSL, ACL, RSE)									

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1.5 Beneficial Ownership  To be completed for all companies that are not Australian Public Listed co Regulated Companies as per 1.4.	ompanies, majority owned by an Australian Public Listed company or							
Are there any individuals who ultimately own 25% or more of the company	y's issued share capital (through direct or indirect shareholdings)?							
Yes $\square$ (Complete 1.5.1) No $\square$ (Complete 1.5.2)								
1.5.1 Shareholder Beneficial Owners								
Provide the names of the individuals who ultimately own 25% or more of t Complete separate individual customer ID Forms for each of these in	he company's issued share capital (through direct or indirect shareholdings).							
Full given name(s)	Surname							
If Beneficial Owner name/s are provided above, proceed to section 2.								
1.5.2 Other Beneficial Owners								
If there are no individuals who meet the requirement of 1.5.1, provide the	names of the individuals who directly or indirectly control* the company							
* includes exercising control through the capacity to determine decisions								
arrangements, understanding & practices; voting rights of 25% or more; o managing official/s of the company (such as the managing director or dire	r power of veto. If no such person can be identified then the most senior							
Complete separate individual customer ID Forms for each of these in	ndividuals.							
Full given name(s) Surname	Role (such as Managing Director)							
- Langiver Hame(e)	Total (addit do managing birotal)							
If there are more Beneficial Owners, provide details on a separate sheet a	and tick this box $\square$ .							
SECTION 2: TAX INFORMATION								
Collection of tax status in accordance with the United States Foreign Accordance	ount Tax Compliance Act (FATCA) and Common Reporting Standard (CRS).							
2.1 Tax Status								
Tick ✓ one of the Tax Status boxes below or on the next page (if the below)	company is a Financial Institution, please provide all the requested information							
☐ A Financial Institution (A custodial or depository institution, an investme	nt entity or a specified insurance company for FATCA / CRS purposes)							
Provide the company's Global Intermediary Identification Number (0	GIIN), if applicable							
If the Company is a Financial Institution but does not have a GIIN, p	orovide its FATCA status (select ✓ ONE of the following statuses)							
☐ Deemed Compliant Financial Institution								
Excepted Financial Institution								
Exempt Beneficial Owner								
□ Non Reporting IGA Financial Institution								
□ Nonparticipating Financial Institution								
<ul> <li>Other (describe the company's FATCA status in the box provided in the box</li></ul>	led)							
If the company is a Financial Institution, please proceed to section 3								
	·							
Australian Public Listed Company, Majority Owned Subsidiary of an Australian Public Listed company or Australian Registered Charity (Public listed companies or majority owned subsidiaries of Australian listed companies as per 1.4 that are not Financial Institutions as described above or a company that is an Australian Registered Charity)								
If the company type is listed above, please proceed to section 3 to o	complete the form.							
Section 2.1 continues on the next page								







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2.1 T	ax Status													
	An Active Non-Financial Entity (NFE) (Active NFEs include entities where, during the previous reporting period, less than 50% of their gross income was passive income (e.g. dividends, interests and royalties) and less than 50% of assets held produced passive income. For other types of Active NFEs, refer to Section VIII in the Annexure of the OECD 'Standard for Automatic Exchange of Financial Account Information' at <a href="https://www.oecd.org">www.oecd.org</a> .)													
If the company is an Active NFE, please proceed to section 2.3 (Country of Tax Residency).														
	Other (Entities that are not previously listed – Passive Non-Financial Entities)													
	Please proceed to section 2.2 (Foreign Beneficial Owners).													
2.2	Foreign Ben	neficial Owners (	Individuals)											
Are a	any of the con	mpany's Beneficia	al Owners tax residen	ts of coun	tries other than A	Australia	a?	Yes [		No [				
			/hether an individual is t ence or place of work.  F								mount of tin	ne a pers	on spen	nds in a
		vide the details of in section 1.5).	these individuals be	low and co	omplete a separa	ate Indiv	/idual	Identifica	ation Fo	orm for ea	ch Benefi	cial Own	er (unl	ess
Full	given name(			Ro	le (such	as Dire	ctor or Se	nior Mana	aging Of	ficial)				
If the	ro ara mara P	Ionoficial Owners	orovide details on a se	narata sha	oot and tick this ha									
		•	intry of Tax Residenc		et and tick this bo	<b>х.</b> Ш.								
i iou	oc proceda te	7 0000011 2.0 (000	miny of Tax Residence	y).										
2.3	Country of T	Гах Residency												
Is the	e Company a	tax resident of a	country other than Au	ustralia?	Yes □	N	lo 🗆							
If Vo	s nlease nrov	vide the Company	y's country of tax resi	dence and	d tay identificatio	n numh	or (T	INI) or ea	uivalent	helow If	the Com	nany is s	a tav re	sidant
of mo	ore than one	other country, ple	ase list all relevant co	ountries b	elow.	ii iidiiib	CI (II	iiv) or eq	uivaieiii	Delow. II	the Com	party is a	a tax ic	SIUCITI
If No	, please proc	eed to section 3 t	o complete the form.											
			ountry for the purposes is not provided, please								lustralia or	an Emplo	yer	
1.	Country			TIN					If no	TIN, list r	eason A,	B or C		
2.	Country			TIN					If no	TIN, list r	eason A,	B or C		
3.	Country			TIN					If no	TIN, list r	eason A,	B or C		
If the	re are more co	ountries, provide d	etails on a separate sh	eet and tid	ck this box. $\square$ .									
	Reason A The country of tax residency does not issue TINs to tax residents  Reason B The Company has not been issued with a TIN													
			ot been issued with a sidency does not req		IN to be disclosed	d								



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## **SECTION 3: AUSTRALIAN COMPANY VERIFICATION PROCEDURE**

Identification documentation is to be provided to verify the information listed in the standard or simplified verification procedure described below. The simplified verification procedure is to be used for Australian Public Listed companies, Majority Owned Subsidiaries of Australian Public Listed companies and Regulated companies as described in section 1.4 of this form. All other companies are to be verified according to the standard verification procedure.

procedure.										
Standard verification procedure										
Information to be verified:										
	The full name of the company as registered by ASIC									
	/hether the company is registered as a proprietary or a public company he ACN issued to the company.									
The ACN issued to the company.										
Tick √	Verification option	ons (select one of the following options u								
	Perform a search	of the relevant ASIC database.	e relevant ASIC database.							
	If the ASIC databa	ase is not reasonably available, an o	original or certified copy o	of the certific	cation of registration	issued by ASIC.				
(as describ Information The fu	ned in section 1.4 of the to be verified: Inalial to the compan									
Tick ✓	Verification option	ons (select one or more of the following of	options used to verify the Co	mpany)						
	Perform a search	of the relevant market/exchange.								
	Perform a search	of the relevant ASIC database.								
	Perform a search	of the licence or other records of the	e relevant Commonwealt	h, State or	Territory statutory reg	gulator.				
A public document issued by the relevant company.										
→ Attach → Alter										
SECTIO	N 4: RECORD	OF VERIFICATION PROCE	DURE							
SECTIO	ON 4. KECOKD	OF VERIFICATION FROCE	DOKE							
ID DOCUI	MENT DETAILS	Document 1		Docume	ent 2 (if required)					
Verified F	rom	☐ Performed search ☐ Origin	al Certified copy	☐ Perfor	rmed search	riginal				
Documen	t Issuer / Website									
Public Do	cument Type									
Issue date	e / Search date									
By completing and signing this Record of Verification Procedure I declare that:  • an identity verification procedure has been completed in accordance with the AML/CTF Rules, in the capacity of an AFSL holder or their authorised representative;  • individual customer ID Forms have been provided for the company's Beneficial Owners (where applicable)  • the tax information provided is reasonable considering the documentation provided.										
AFS Licer	nsee Name				AFSL No.					
Represen	tative/ Employee N	ame			Phone No.					
Signature					Date Verification Completed					

