Foreign Tax Details Form

Sandhurst Trustees

Account Name

Customer/Portfolio Number

Sandhurst Trustees Limited (Sandhurst) is required to collect information in compliance with OECD Common Reporting Standard (CRS) and Foreign Account Tax Compliance Act (FATCA) which have been incorporated into Australian law through the Tax Administration Act.

For definitions of Foreign Tax terminology, please refer to the Foreign Tax Glossary which is available with this form. This form is required to be completed for tax purposes when a new or existing customer applies for a reportable account and declares as a foreign tax resident, or when the bank requires an existing customer to certify their foreign tax status. It is to be completed by the applicant and/or Account Holder and returned to a Sandhurst representative.

Part A - Individual for CRS and FATCA

Section 1 - Customer Information

lf	there	are	more	than	two	applicants	please	complete	additional	forms
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Applicant 1	Applicant 2		
Full Legal Name(s)	Full Legal Name(s)		

Section 2 - Tax Residency

Applicant 1

Please list below all countries/territories in which you are tax resident. Where the tax jurisdiction issues a Tax Identification Number (TIN) or functional equivalent, please provide information in boxes below.

Country/Jurisdiction of Tax Residence	Tax Identification Number or Equivalent
If you have not provided a TIN, please select a reason:	
A) The country/jurisdiction does not issue TINs to its residents	
B) I am unable to obtain a TIN or equivalent number (Please explain why you	, are unable to obtain a TIN in the space below)
C) The country/jurisdiction does not require the collection of the TIN. (You concerning the collection of the TIN issued by set of the the collection of the TIN issued by set of the the collection of the TIN issued by set of the the collection of the TIN issued by set of the the collection of the the the collection of the the the collection of the the the the collection of the the the the the collection of the the the the collection of the	-
Applicant 2 Please list below all countries/territories in which you are tax resident. Where th (TIN) or functional equivalent, please provide information in boxes below.	he tax jurisdiction issues a Tax Identification Number
Country/Jurisdiction of Tax Residence	Tax Identification Number or Equivalent
If you have not provided a TIN, please select a reason:	
A) The country/jurisdiction does not issue TINs to its residents	
B) I am unable to obtain a TIN or equivalent number (Please explain why you	are unable to obtain a TIN in the space below)
C) The country/jurisdiction does not require the collection of the TIN. (You concerning the collection of the TIN issued by set the collection of the TIN issued by se	-

When Sections 1 and 2 are completed, proceed	ed to Part D - Declaration and Signature			
Part B - Entities				
Entity/Organisation Details				
Legal name of Entity				
Nature of Business				
Tax Residency for Common Reporting S	Standard (CRS)			
Please select the appropriate category which i	is applicable to the Entity Type:			
 Financial Institution - Investment Entity i. An Investment Entity located in a Non- box you must complete the Controlling ii. Other Investment Entity 	Participating Jurisdiction and managed by another Financial Institution (if ticking this Person section Part C)			
Financial Institution - Depository Institutio	on, Custodial Institution or Specified Insurance Company			
If you have ticked above, please provide, if hel FATCA purposes	d, the Account Holder's Global Intermediary Identification Number ("GIIN") obtained for			
Global Intermediary Identification Number (GIII	N):			
Active NFE - the stock is regularly traded corporation	on an established securities market or a corporation which is a related entity of such a			
Please provide the name of the established se	ecurities market on which the corporation is regularly traded:			
If you are a Related Entity of a regularly tradec Entity is a Related Entity of:	d corporation, please provide the name of the regularly traded corporation that the			
Active NFE - a Government Entity or Centr	al Bank			
Active NFE - an International Organisation				
Active NFE, other than the above Active N	IFE categories (for example a non-profit NFE)			
Passive NFE (If ticking this box you must complete the Contr	rolling Person section Part C)			
Please provide the TIN for the Entity				
Tax Identification Number or Equivalent:				
If no TIN has been supplied, tick this box if it i	s because the country of tax residence does not issue TINs to its residents OR if there			

If no TIN has been supplied, tick this box if it is because the country c is another reason why a TIN is not available please state that reason.

Tax Residency for Foreign Account Tax Compliance Act (FATCA)

Com	pany				
Please select the appropriate category applicable to the entity type:					
	Financial Institution	Provide either the Company's:			
	A Custodial or Depository institution, an investment entity or a specified insurance company for FATCA purposes	Global Intermediary Identification Number (GIIN)			
		FATCA Status			
\square	United States Company	Provide the Company's US Taxpayer			
	A Company created in the US, established under the laws of the US or a US Taxpayer	Identification Number (TIN)			
	Australian Proprietary Company	FATCA Status: Active NFFE Passive NFFE			
	A Company created in Australia that is subject to Australian law and where any of the beneficial owners are US citizens or residents of the US for tax purposes	If Passive NFFE, complete section Part C - Personal details for each controlling person that is a US Citizen or resident of the US for Tax purposes.			
	Australian Public Company	No further information required			
Trus Plea	t se select the appropriate category applicat	ble to the entity type:			
	Financial Institution or Trust with a	Provide either the Trust or Trustees:			
	Trustee that is a Financial Institution A Trust that is primarily established for Custodial or Investment purposes or a	Global Intermediary Identification Number (GIIN) OR			
	Trust that has a Trustee that is a Financial Institution in its own right.	FATCA Status			
	United States Trust A Trust created in the US, established under the laws of the US or a US Taxpayer	Provide the Trust's US Taxpayer Identification Number (TIN)			
	Other	FATCA Status: Active NFFE Passive NFFE			
	Trusts that are not US Trusts, Financial Institutions or do not have Financial Institution Trustees	If Passive NFFE, complete section Part C - Personal details for each controlling person that is a US Citizen or resident of the US for Tax purposes.			
	Regulated, Charitable or Testamentary Trusts	No further information required			
	Partnership Please select the appropriate category applicable to the entity type:				
	Financial Institution	Provide either the Partnership's:			
	A Custodial or Depository institution, an investment entity or a specified	Global Intermediary Identification Number (GIIN)			

OR

FATCA Status

Provide the Partnership's US Taxpayer

Identification Number (TIN)

United States Partnership A partnership created in the US,

insurance company for FATCA

established under the laws of the US or a US Taxpayer

Other

Purposes

Complete section Part C - Personal details for each controlling person that is a US Citizen or resident of the US for Tax purposes

Partnerships that are not US Partnerships or Financial Institutions and where any of the partners are US Citizens or Residents of the US for tax purposes

Part C - Controlling Persons of Passive NFFEs/NFEs

Please include the tax residencies and other details of all Controlling Persons (using a separate sheet if required). If a Controlling Person has more than one tax residency please list them on separate lines:

First controlling person			
Full Legal Name	Residential Address (PO Box is not acceptable)		
Country of tax Residency	TIN	City/town of birth	
		Controlling person type	
Date of Birth Country of birth		(Select one from 'a' to 'f' below)	
If a country of tax residency does not issue TINs or you a	re otherwise una	ble to obtain a TIN please state the reason below:	
Second controlling person			
Full Legal Name	Residential Add	ress (PO Box is not acceptable)	
Country of tax Residency	TIN	City/town of birth	
		Controlling person type	
Date of Birth Country of birth		(Select one from 'a' to 'f' below)	
If a country of tax residency does not issue TINs or you a	re otherwise una	ble to obtain a TIN please state the reason below:	
Third controlling person Full Legal Name	Residential Add	ress (PO Box is not acceptable)	
Country of tax Residency	TIN	City/town of birth	
Date of Birth Country of birth		Controlling person type (Select one from 'a' to 'f' below)	
If a country of tax residency does not issue TINs or you a	re otherwise una	ble to obtain a TIN please state the reason below:	
Fourth controlling person			
Full Legal Name	Residential Add	ress (PO Box is not acceptable)	
Country of tax Residency	TIN	City/town of birth	
		Controlling person type	
Date of Birth Country of birth		(Select one from 'a' to 'f' below)	
If a country of tax residency does not issue TINs or you a	re otherwise una	ble to obtain a TIN please state the reason below.	

Part C - Controlling Persons of Passive NFFEs/NFEs (cont.)

Controlling Person Types

- a. Controlling Person of a entity control by ownership
- b. Controlling Person of a entity control by other means
- c. Controlling Person of a entity senior managing official
- d. Controlling Person of a trust settlor*
- e. Controlling Person of a trust trustee
- f. Controlling Person of a trust beneficiary/class (es) of beneficiaries

*If any of the following apply to a Controlling Person who is a Settlor of a Trust:

The settlor is deceased

The settlor's identity is unknown

The settlor has no ongoing connection to the trust other than the initial creation of the trust and their foreign tax residency is unknown. There is no known settlor (e.g. bare or informal trust)

Then please tick this box: No further information required

When Part C is completed, proceed to Part D.

Part D - Declaration and Signature

I/we understand that the information supplied by me/us is covered by the full provisions of the terms and conditions governing the Account Holder's relationship with Sandhurst setting out how Sandhurst may use and share the information supplied by me/us.

I/we acknowledge that the information contained in this form and information regarding the Account Holder and any Reportable Account(s) may be provided to the tax authorities of the country/jurisdiction in which this account(s) is/are maintained and exchanged with tax authorities of another country/jurisdiction or countries/jurisdictions in which the Account Holder may be tax resident pursuant to intergovernmental agreements to exchange financial account information.

I/we certify that I/we am the Account Holder (or am authorised to sign for the Account Holder) of all the account(s) to which this form relates.

I/we declare that all statements made in this declaration are, to the best of my knowledge and belief, correct and complete. I/we undertake to advise Sandhurst promptly of any change in circumstances which affects the tax residency status of the individual identified in Part A of this form or causes the information contained herein to become incorrect or incomplete, and to provide Sandhurst with a suitably updated self-certification and Declaration promptly of such change in circumstances.

Signature:		
Print name:		
Date:		

Note: If you are not the Account Holder please indicate the capacity in which you are signing the form. If signing under a power of attorney please also attach a certified copy of the power of attorney.

Capacity: