

Tax Information for Entities Annexure: Other Entities

Collective Investments (Unit Trusts)

CLIENT DETAILS

ENTITY/ INVESTMENT ACCOUNT NUMBER																		
NAME & SURNAME/ ENTITY NAME																		
COUNTRY OF INCORPORATION																		
REGISTRATION NUMBER																		
CONTACT NUMBER																		

OTHER ENTITIES

If your entity does not fall under any of the exempt beneficial owner list or deemed compliant financial institutions, please select the applicable classification below:

U.S. PERSON

PARTICIPATING FINANCIAL INSTITUTION NON PARTICIPATING FINANCIAL INSTITUTION

ACTIVE NON FINANCIAL ENTITY (NFE) PASSIVE NON FINANCIAL ENTITY (NFE)

Entity	Definition
U.S. Person	The term “U.S. Person” is a U.S. partnership or corporation organized in the United States or under the laws of the United States or any State thereof, a trust if a: <ul style="list-style-type: none"> • court within the United States would have authority under applicable law to render orders or judgments concerning substantially all issues regarding administration of the trust, and • one or more U.S. persons have the authority to control all substantial decisions of the trust, or an estate of a decedent that is a citizen or resident of the United States. This definition shall be interpreted in accordance with the U.S. Internal Revenue Code.
Financial Institution (FI)	A financial institution, which is any non-U.S. entity that; acting for or on behalf of a customer: <ul style="list-style-type: none"> • Accepts deposits in the ordinary course of a banking or similar business, • As a substantial portion of its business, holds financial assets for the account of others, or • Is engaged (or holding itself out as being engaged) primarily in the business of investing, reinvesting, or trading in securities, partnership interests, commodities, or any interest in such securities, partnership interests, or commodities. A Financial Institution can either be participating or Non Participating.
Participating FI	A Participating FI means a financial institution that has agreed to comply with the requirements of an participating FI agreement, including a financial institution described in a Model 2 IGA that has agreed to comply with the requirements of an participating FI agreement. Under FATCA, to avoid being withheld upon, financial institutions (Participating FIs) may register with the IRS and agree to report to the IRS certain information about their U.S. accounts, including accounts of certain entities with substantial U.S. owners. In this case these FIs are participating FIs.
Non Participating FI	A Non-Participating Financial Institution (NRFI) is a financial institution that is: <ul style="list-style-type: none"> • located in a jurisdiction that does not have an intergovernmental agreement with the US and the financial institution has not entered into a FATCA agreement with the IRS.
Non Financial Entity (NFE)	Any entity that is not a financial institution. An Non Financial Entity(NFE) can include privately held operating businesses, professional services firms, or certain other non-publicly-traded entities not involved in banking or financial-sector activities. A NFE will either be an Active NFE or a Passive NFE.
Active NFE	An Active NFE is one where: <ul style="list-style-type: none"> • Less than 50% of such entity’s gross income for the preceding calendar year is passive income; and • Less than 50% of the assets held by such entity are assets that produce or are held for the production of passive income (calculated as a weighted average of the percentage of passive assets measured quarterly). Passive income includes dividends, interest, rents and royalties.
Passive NFE	A Passive NFE means any NFE that is not an Active NFE.

GIIN NUMBER FOR PARTICIPATING FINANCIAL INSTITUTION

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If you have selected Active NFE or Participating FI you do not need to complete the rest of this form. Please sign and date the form to certify your status.



TAX INFORMATION

If you have selected U.S. Person, Non-Participating FI, and Passive NFE please complete the table below.

Country(ies) of Tax Residency	Tax Number
1.	
2.	
3.	
4.	
5.	

CONTROLLING PERSONS

This section is to be completed by passive Non Financial Entities (NFE's) only.

ARE ANY CONTROLLING PERSONS OF THE ENTITY RESIDENT FOR TAX PURPOSES ANYWHERE OTHER THAN IN SOUTH AFRICA

 YES

 NO

If you have answered 'Yes', please list the controlling person(s) that have 25% or more of the shareholding/ voting rights in the entity. Please note the controlling person(s) can be an individual or an entity.

If you have answered 'No', you do not have to complete the rest of this form. Please sign and date the form to certify your status.

CONTROLLING PERSONS 1

NATURE OF CONTROLLING PERSON

INDIVIDUAL PARTNERSHIP(S) LISTED COMPANY
 UNLISTED COMPANY TRUST(ANY TYPE) RETIREMENT FUND (PENSION, PROVIDENT, BENEFIT, RA ETC.)
 OTHER ENTITY

NAME & SURNAME / REGISTERED NAME

DATE OF BIRTH

-

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COUNTRY(IES) OF NATIONALITY(IES)

PASSPORT NUMBER

REGISTRATION NUMBER

COUNTRY OF INCORPORATION

FULL PHYSICAL ADDRESS

FULL POSTAL ADDRESS (IF DIFFERENT FROM PHYSICAL)

TAX INFORMATION:

Country(ies) of Tax Residency	Tax Number
1.	
2.	
3.	



Country(ies) of Tax Residency	Tax Number
4.	
5.	

CONTROLLING PERSONS 2

NATURE OF CONTROLLING PERSON INDIVIDUAL PARTNERSHIP(S) LISTED COMPANY
 UNLISTED COMPANY TRUST(ANY TYPE) RETIREMENT FUND (PENSION, PROVIDENT, BENEFIT, RA ETC.)
 OTHER ENTITY

NAME & SURNAME/REGISTERED NAME

DATE OF BIRTH - -
D D M M Y Y Y Y

COUNTRY(IES) OF NATIONALITY(IES)

PASSPORT NUMBER

REGISTRATION NUMBER

COUNTRY OF INCORPORATION

FULL PHYSICAL ADDRESS

FULL POSTAL ADDRESS (IF DIFFERENT FROM PHYSICAL)

TAX INFORMATION:

Country(ies) of Tax Residency	Tax Number
1.	
2.	
3.	
4.	
5.	

CONTROLLING PERSONS 3

NATURE OF CONTROLLING PERSON INDIVIDUALS PARTNERSHIP(S) LISTED COMPANY
 UNLISTED COMPANY TRUST(ANY TYPE) RETIREMENT FUND (PENSION, PROVIDENT, BENEFIT, RA ETC.)
 OTHER ENTITY

NAME & SURNAME/REGISTERED NAME

DATE OF BIRTH - -
D D M M Y Y Y Y

COUNTRY(IES) OF NATIONALITY(IES)



PASSPORT NUMBER

REGISTRATION NUMBER

COUNTRY OF INCORPORATION

FULL PHYSICAL ADDRESS

FULL POSTAL ADDRESS (IF DIFFERENT FROM PHYSICAL)

TAX INFORMATION:

Country(ies) of Tax Residency	Tax Number
1.	
2.	
3.	
4.	
5.	

CONTROLLING PERSONS 4

NATURE OF CONTROLLING PERSON

INDIVIDUAL PARTNERSHIP(S) LISTED COMPANY
 UNLISTED COMPANY TRUST(ANY TYPE) RETIREMENT FUND (PENSION, PROVIDENT, BENEFIT, RA ETC.)
 OTHER ENTITY

NAME & SURNAME/REGISTERED NAME

DATE OF BIRTH

- -

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COUNTRY(IES) OF NATIONALITY(IES)

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COUNTRY OF INCORPORATION

FULL PHYSICAL ADDRESS

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TAX INFORMATION:



Country(ies) of Tax Residency	Tax Number
1.	
2.	
3.	
4.	
5.	

DECLARATION

The Governments of the Republic of South Africa and the United States of America (USA) have entered into an Agreement in terms of which each party has agreed to share information allowing for the improvement of tax compliance between the countries in respect of financial assets held within their boundaries with the overall aim to improve information gathering from financial institutions.

What this means for you as a client is that STANLIB is legally obliged to provide South African Revenue Service (SARS) with certain information you provide to STANLIB when you invest or transact with us. SARS in turn will pass such information to the Inland Revenue Services of the USA. STANLIB, in complying with its obligations to SARS may make use of the services of other Affiliate Companies in its group of companies in collating, interpreting, storing and forwarding of your information to SARS.

I/We agree to provide all documentation and information required in terms of STANLIB's business rules. I/We confirm that all information provided herein is true and correct and that I have read and understood the contents of this form.

We are required to collect, process and share your Personal Information (PI). Your PI is collected and processed by our staff, representatives or sub-contractors and we make every effort to protect and secure your PI. You are entitled at any time to request access to the information STANLIB has collected, processed and shared.

SIGNATURE OF CLIENT	<input style="width: 100%; height: 100%;" type="text"/>	DATE	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
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