

July 2024

Foreign tax status declaration – Individual and Controlling Person

Please use this form for an Individual or Controlling Person to provide additional identification information, Foreign Account Tax Compliance Act (FATCA) status, and Common Reporting Standard (CRS) information.

Please complete these instructions in BLACK INK using CAPITAL LETTERS and ✓ boxes where provided.

Section 1: Client details

Please confirm your personal details below:

Account number

Title (Dr/Mr/Mrs/Ms/Miss) Surname

Given name(s)

Date of birth / /

Residential address (PO Box is not acceptable)

Street

Suburb State Postcode

Country (if not Australia)

Only complete this part if you are a sole trader

Full business name (if any)

ABN (if any) - - -

Principal place of business (if any) (PO Box is not acceptable)

Street

Suburb State Postcode

Country (if not Australia)

Section 2: Tax status

Tax Residency rules differ by country. Whether an individual is a tax resident of a particular country is often (but not always) based on the amount of time a person spends in a country, the location of a person’s residence or place of work. For the US, tax residency can be as a result of citizenship or residency.

Please answer **both** tax residency questions as you can be a tax resident of more than one country.

Is the Individual a tax resident of Australia? Yes No

Is the Individual of any other Country? Yes No

If you are a tax resident of any other country please complete the details below.

Foreign Residents only – Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS)

Under FATCA and CRS laws, we are required to ask all investors to provide additional information about their tax residency. Tax residency rules differ by country. Whether an individual is a tax resident of a particular country is often (but not always) based on the amount of time a person spends in a country, the location of a person’s residence or place of work.

For all countries where you are a tax resident please provide a TIN (Tax Identification Number) which is the number assigned by each country for the purposes of administering tax laws such as a Social Security Number in the US. If a TIN cannot be provided, please list one of the three reasons specified (A, B or C) for not providing a TIN.

| Country | TIN | If no TIN, please list Reason A, B or C |
|----------------------|----------------------|---|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

If there are more countries, provide details on a separate sheet and tick this box

Reasons for not providing a TIN:

Reason A – The country of tax residency does not issue TINs to tax residents, **OR**

Reason B – You have not been issued with a TIN – **You must provide details for this reason below,**

Reason you have not been issued with a TIN (if applicable)

OR

Reason C – The country of tax residency does not require the TIN to be disclosed.

Section 3: Declaration and signature

Individual declaration (the person named in this form)

Please note: The Service Operator collects the information in this form for the purpose of complying with FATCA and CRS requirements. Any personal information provided in this form will be handled in accordance with the privacy policy at sfg.com.au/portfolio/privacy. If you do not provide all of the requested information, we may not be able to action your request or your tax status may not be maintained accurately.

- I will promptly notify the Service Operator if any of these details change and on request with any further information which is necessary or desirable for the Service Operator to comply with any obligations it may have in connection with FATCA/CRS.
- I consent to the collection and use of the above information by the Service Operator for the purposes specified.
- I authorise any changes set out in this form to be applied to or recorded against my/our account.
- I declare that the details given in this form are true and correct.

Please note: If this form is signed under Power of Attorney, the Attorney declares that they have not received notice of revocation of that power (a certified copy of the Power of Attorney should be submitted with this form unless we have already received it). You generally cannot sign under Power of Attorney if acting on behalf on entity.

Signature Date / /

OR

Financial Planner Declaration

By completing and signing this declaration, I certify that the individual named in this form has verbally or in writing confirmed to me the truth of the information provided and I have no reason to doubt its reasonableness.

AFSL Licensee name AFSL No
 Representative/
 Employee name Phone No

 Signature Date / /

Please forward all correspondence and enquiries to

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