

**Section A – To be completed by individuals**

**Section B – To be completed by entities**

## Section A - Individuals

### Personal details

(All fields marked with \* are compulsory)

\*Title Mr  Mrs  Miss  Other (specify) \_\_\_\_\_

\*Full name(s) and surname \_\_\_\_\_

\*Identity number \_\_\_\_\_

\*Passport number \_\_\_\_\_

Date of birth \_\_\_\_\_ (ddmmccyy) Country of birth \_\_\_\_\_

Identity number \_\_\_\_\_ Passport number \_\_\_\_\_

Passport country of issue \_\_\_\_\_ Passport expiry date \_\_\_\_\_ (ddmmccyy)

Social Security Number (if US Citizen) \_\_\_\_\_

Primary country of tax residence for tax purposes \_\_\_\_\_

Tax Identification Number \_\_\_\_\_

Are you a registered tax payer of any country other than your primary country of residence? Yes  No

If "Yes" please complete the information below for each country of tax residence.

| Country of Tax Residence | Tax Identification Number | OR | Not applicable |
|--------------------------|---------------------------|----|----------------|
|                          |                           |    |                |
|                          |                           |    |                |
|                          |                           |    |                |
|                          |                           |    |                |

***By ticking "Not Applicable", you confirm that the country specified does not issue a Tax Identification number. If you are a USA citizen you are resident for tax purposes in the USA***

### Section B – Legal entities

#### Legal Entity details

(All fields marked with \* are compulsory)

\*Registered name of \_\_\_\_\_  
of legal entity \_\_\_\_\_

\*Entity registration number \_\_\_\_\_ \*Country of Incorporation \_\_\_\_\_

\*Country of Operating \_\_\_\_\_ \*Country of Residence \_\_\_\_\_

Additional nationality/citizenship \_\_\_\_\_

Primary country of residence for tax purposes \_\_\_\_\_

Tax Identification Number \_\_\_\_\_

Is the organisation a registered tax payer of any other country other than your primary country of residence Yes  No

If "Yes", please complete the information below for each country of tax residency:

| Country of Tax Residence | Tax Identification Number | OR | Not applicable |
|--------------------------|---------------------------|----|----------------|
|                          |                           |    |                |
|                          |                           |    |                |
|                          |                           |    |                |

**By ticking "Not Applicable", you confirm that the country specified does not issue a Tax Identification Number.**

#### Organisation's classification under FATCA

It is mandatory to classify yourself in this section. For guidance please refer to the Legal Entities Tax Residency Classification for FATCA and CRS document, available at [www.satrx.co.za](http://www.satrx.co.za). Alternatively, speak to your tax adviser.

**If your organisation is a Financial Institution, please specify which type:**

- South African Financial Institution or a Partner Jurisdiction Financial Institution
- Participating Foreign Financial Institution (in a non-IGA jurisdiction)
- Non-Participating Foreign Financial Institution (in a non-IGA jurisdiction)
- Financial Institution resident in the USA or in a US Territory
- Exempt Beneficial Owner (this includes a South African registered retirement scheme, a South African Governmental Organisation or an International Organisation)
- Deemed Compliant Foreign Financial Institution (this includes Non Profit Organisations and Financial Institutions with a Local Client Base)

**If your organisation is not a Financial Institution, please specify below :**

- Active Non-Financial Foreign Entity
- Passive Non-Financial Foreign Entity (Please complete section for Controlling Persons)

**Please select an option if your organisation is a US tax resident and not a Specified US person:**

- A regularly traded corporation on a recognised stock exchange
- Any corporation that is a member of the same expanded affiliated group as a regularly traded corporation on a recognised stock exchange
- A government entity
- Any bank as defined in section 581 of the U.S. Internal Revenue Code
- A retirement plan under section 7701(a)(37), or exempt organization under section 501(a) of the U.S. Internal Revenue Code
- OR any other exclusion

# Tax Residency Self Certification

## Organisation's classification under Common Reporting Standard

**Please select one with reference to the primary country of residence:**

- Financial Institution under CRS (this includes all Non Reporting Financial Institutions for example a pension scheme, government entity and international organisation.)
- An investment entity located in a Non-Participating Jurisdiction and managed by another Financial Institution (If this box is ticked, please also complete section 4 for Controlling Persons)
- Entity, which frequently trades on an established securities market or associated with, an established securities market or a corporation which is a related entity of such a corporation.
- A Government Entity, a Central Bank or an International Organisation.
- Active Non-Financial Entity
- Passive Non-financial entity (Please complete section for controlling persons)

## Controlling person's self-certification

Tax regulations require us to collect information for each Controlling Person's tax residency. The Controlling Person must be a natural person. We may be obliged to share information about your Controlling Persons with SARS who may share the information with any or all participating tax jurisdictions. Please note that we require FICA documentation for each Controlling Person. See annexure B for details of documentation requirements.

### Details of controlling persons 1

Title    Mr     Mrs     Miss     Other (specify) \_\_\_\_\_

Full name(s) and surname \_\_\_\_\_

Permanent residential address \_\_\_\_\_

Country \_\_\_\_\_ Postal code \_\_\_\_\_

Postal address: \_\_\_\_\_  
(only complete if different from registered address)

Country \_\_\_\_\_ Postal code \_\_\_\_\_

Date of birth \_\_\_\_\_ (ddmmccyy)    Country of birth \_\_\_\_\_

Identity number \_\_\_\_\_    Passport number \_\_\_\_\_

Passport country of issue \_\_\_\_\_    Passport expiry date \_\_\_\_\_ (ddmmccyy)

Social Security Number (if US Citizen) \_\_\_\_\_

Primary country of tax residence \_\_\_\_\_

Tax Identification Number \_\_\_\_\_

Are you a registered tax payer of any country other than your primary country of residence?

Yes     No

If "Yes" please complete the information below for each country of tax residency.

| Country of Tax Residence | Tax Identification Number | OR | Not applicable |
|--------------------------|---------------------------|----|----------------|
|                          |                           |    |                |
|                          |                           |    |                |
|                          |                           |    |                |
|                          |                           |    |                |

***By ticking "Not Applicable", you confirm that the country specified does not issue a Tax Identification number. If you are a USA citizen you are resident for tax purposes in the USA***

## Tax Residency Self Certification

### Details of controlling persons 2

Title    Mr     Mrs     Miss     Other (specify) \_\_\_\_\_

Full name(s) and surname \_\_\_\_\_

Permanent residential address \_\_\_\_\_

Country \_\_\_\_\_ Postal code \_\_\_\_\_

Postal address:  
(only complete if different from registered address) \_\_\_\_\_

Country \_\_\_\_\_ Postal code \_\_\_\_\_

Date of birth \_\_\_\_\_ (ddmmccyy)    Country of birth \_\_\_\_\_

Identity number \_\_\_\_\_    Passport number \_\_\_\_\_

Passport country of issue \_\_\_\_\_    Passport expiry date \_\_\_\_\_ (ddmmccyy)

Social Security Number (if US Citizen) \_\_\_\_\_

Primary country of tax residence \_\_\_\_\_

Tax Identification Number \_\_\_\_\_

Are you a registered tax payer of any country other than your primary country of residence?

Yes     No

If "Yes" please complete the information below for each country of tax residency.

| Country of Tax Residence | Tax Identification Number |
|--------------------------|---------------------------|
|                          |                           |
|                          |                           |
|                          |                           |
|                          |                           |

OR

| Not applicable |
|----------------|
|                |
|                |
|                |
|                |

***By ticking "Not Applicable", you confirm that the country specified does not issue a Tax Identification number. If you are a USA citizen you are resident for tax purposes in the USA***

### Investor /Legal Entity declaration

I / We confirm that I / we:

- have read and understood the important notes, terms and conditions on the first page.
- have the authority and am / are legally competent to enter into and conclude this transaction, with the necessary legal assistance when it is required.
- are aware that the legal guardian must sign the instruction on behalf of a minor (if applicable).

Signature of Investor \_\_\_\_\_ Date\_\_\_\_\_ (ddmmccyy)

Authorised signatory \_\_\_\_\_ Date\_\_\_\_\_ (ddmmccyy)

Authorised signatory \_\_\_\_\_ Date\_\_\_\_\_ (ddmmccyy)

Authorised signatory \_\_\_\_\_ Date\_\_\_\_\_ (ddmmccyy)