

GUIDE TO COMPLETING THIS FORM

- o This form is for AUSTRALIAN COMPANIES only. For companies with an address, principle place of business or that are 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 Complete all applicable sections of this form in BLOCK LETTERS.
- o Contact Schroders if you have any queries.

SECTION 1: AUSTRALIAN COMPANY DETAILS (to be completed if the company is an Australian Company)

1.1 General Information

Full name as registered by ASIC	<input style="width: 100%;" type="text"/>
ACN	<input style="width: 100%;" type="text"/>
Principal business activity	<input style="width: 100%;" type="text"/>

1.2 Registered Address of Company

Provide the registered address as registered with ASIC (PO Box is not acceptable).

Street	<input style="width: 100%;" type="text"/>						
Suburb	<input style="width: 25%;" type="text"/>	State	<input style="width: 10%;" type="text"/>	Postcode	<input style="width: 15%;" type="text"/>	Country	<input style="width: 20%;" type="text"/>

1.3 Regulatory/ Listing Details (select ✓ each of the following categories that apply to the company & provide the information requested)

Regulated company (licensed by an Australian Commonwealth, State or Territory statutory regulator)

Regulator name	<input style="width: 100%;" type="text"/>
Licence details	<input style="width: 100%;" type="text"/>

Australian listed company

Name of market / exchange	<input style="width: 100%;" type="text"/>
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Majority-owned subsidiary of an Australian listed company

Australian listed company name	<input style="width: 100%;" type="text"/>
Name of market / exchange	<input style="width: 100%;" type="text"/>

1.4 Company Type (select ✓ only ONE of the following categories and provide any information requested)

- Public - Listed** Go to Section 3.
- Public - Unlisted** Go to Section 1.6
- Private/Proprietary** Go to Section 1.5 below

1.5 Directors (only needs to be completed for proprietary companies)

How many directors are there? provide full name of each director below

	Full given name(s)	Surname
1	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
2	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
3	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
4	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

If there are more directors, provide details on a separate sheet.

1.6 Shareholders

To be completed for all companies that are not Australian Public Listed companies, majority owned by an Australian Public Listed company or Regulated Companies as per 1.4.

Are there any individuals who ultimately own 25% or more of the company's issued share capital (through direct or indirect shareholdings)?

Yes (Complete 1.6.1) No (Complete 1.6.2)

1.6.1 Shareholder Beneficial Owners

Provide the names of the individuals who ultimately own 25% or more of the company's issued share capital (through direct or indirect shareholdings).

Complete separate individual customer ID Forms for each of these individuals.

Shareholder 1

Full given name(s)					Surname		
Date of birth (dd/mm/yyyy)							
Residential address (PO Box is NOT acceptable)							
Street							
Suburb		State		Postcode		Country	

Shareholder 2

Full given name(s)					Surname		
Date of birth (dd/mm/yyyy)							
Residential address (PO Box is NOT acceptable)							
Street							
Suburb		State		Postcode		Country	

Shareholder 3

Full given name(s)					Surname		
Date of birth (dd/mm/yyyy)							
Residential address (PO Box is NOT acceptable)							
Street							
Suburb		State		Postcode		Country	

If there are more Beneficial Owners, provide details on a separate sheet

Please proceed to Section 3.

1.6.2 Other Beneficial Owners

If there are no individuals who meet the requirement of 1.6.1, provide the names of the individuals who directly or indirectly control* the company.

* includes exercising control through the capacity to determine decisions about financial or operating policies; or by means of trusts, agreements, arrangements, understanding & practices; voting rights of 25% or more; or power of veto. If no such person can be identified then the most senior managing official/s of the company (such as the managing director or directors who are authorised to sign on the company's behalf).

Complete separate individual customer ID Forms for each of these individuals.

Full given name(s)	Surname	Role (such as Managing Director)

If there are more Beneficial Owners, provide details on a separate sheet

Please proceed to Section 3.

SECTION 2: VERIFICATION PROCEDURE

Please provide either ONE certified copy of a document from Part I or if you are unable to provide this, then a certified copy of a document from both Part II AND III for each shareholder listed in Section 1.6.

PART I – ACCEPTABLE PRIMARY ID DOCUMENTS

Tick ✓	Select ONE valid option from this section only
<input type="checkbox"/>	Australian State / Territory driver's licence containing a photograph of the person
<input type="checkbox"/>	Australian passport (a passport that has expired within the preceding 2 years is acceptable)
<input type="checkbox"/>	Card issued under a State or Territory for the purpose of proving a person's age containing a photograph of the person
<input type="checkbox"/>	Foreign passport or similar travel document containing a photograph and the signature of the person*

PART II – ACCEPTABLE SECONDARY ID DOCUMENTS – should only be completed if the individual does not own a document from Part I

Tick ✓	Select ONE valid option from this section
<input type="checkbox"/>	Australian birth certificate
<input type="checkbox"/>	Australian citizenship certificate
<input type="checkbox"/>	Pension card issued by Centrelink
<input type="checkbox"/>	Health card issued by Centrelink
Tick ✓	AND ONE valid option from this section
<input type="checkbox"/>	A document issued by the Commonwealth or a State or Territory within the preceding 12 months that records the provision of financial benefits to the individual and which contains the individual's name and residential address
<input type="checkbox"/>	A document issued by the Australian Taxation Office within the preceding 12 months that records a debt payable by the individual to the Commonwealth (or by the Commonwealth to the individual), which contains the individual's name and residential address. <i>Block out the TFN before scanning, copying or storing this document.</i>
<input type="checkbox"/>	A document issued by a local government body or utilities provider within the preceding 3 months which records the provision of services to that address or to that person (the document must contain the individual's name and residential address)
<input type="checkbox"/>	If under the age of 18, a notice that: was issued to the individual by a school principal within the preceding 3 months; and contains the name and residential address; and records the period of time that the individual attended that school

PART III – ACCEPTABLE FOREIGN ID DOCUMENTS – should only be completed if the individual does not own a document from Part I

Tick ✓	BOTH documents from this section must be presented (where translated into English where applicable)
<input type="checkbox"/>	Foreign driver's licence that contains a photograph of the person in whose name it issued and the individual's date of birth
<input type="checkbox"/>	National ID card issued by a foreign government containing a photograph and a signature of the person in whose name the card was issued

PART IV - AUSTRALIAN COMPANY - should only be completed for companies

Tick ✓	Verification options (select one of the following options used to verify the Company)
<input type="checkbox"/>	Perform a search of the relevant ASIC database.
<input type="checkbox"/>	If the ASIC database is not reasonably available, an original or certified copy of the certification of registration issued by ASIC.

SECTION 3: TAX INFORMATION

3.1 Tax Status

Tick ✓ one of the Tax Status boxes below (if the company is a Financial Institution, please provide all the requested information below)

A Financial Institution (A custodial or depository institution, an investment entity or a specified insurance company for FATCA / CRS purposes)

Provide the company's Global Intermediary Identification Number (GIIN), if applicable

If the company is a Financial Institution but does not have a GIIN, provide 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

Other (describe the company's FATCA status in the box provided)

If the company is a Financial Institution, the form is now complete.

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, the form is now complete.

- An Active Non-Financial Entity (NFE)** (Active NFEs include those that, during the previous reporting period, derived less than 50% of their gross income from passive income (e.g. dividends, interests and royalties) and held less than 50% of assets producing the 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' (www.oecd.org).

If the company is an Active NFE, the form is now complete.

- Other** (Entities that are not previously listed – Passive Non-Financial Entities)

Please proceed to section 3.2 (Foreign Beneficial Owners).

3.2 Foreign Beneficial Owners

Are any of the company's Beneficial Owners tax residents of countries other than Australia? Yes No

If Yes, please provide the details of these individuals below and complete a separate Individual Identification Form for each Beneficial Owner (unless already provided in section 1.6).

Person 1

Full given name(s)	Surname
<input type="text"/>	<input type="text"/>
Taxpayer Identification Number (TIN)	<input type="text"/>
Country	<input type="text"/>

Person 2

Full given name(s)	Surname
<input type="text"/>	<input type="text"/>
Taxpayer Identification Number (TIN)	<input type="text"/>
Country	<input type="text"/>

Person 3

Full given name(s)	Surname
<input type="text"/>	<input type="text"/>
Taxpayer Identification Number (TIN)	<input type="text"/>
Country	<input type="text"/>