

Tax residency

Self-certification for legal entities

1. What you need to know

- The Tax Administration Act 28 of 2011 (adopting aspects of the U.S.A Foreign Account Tax Compliance Act (FATCA), and the OECD Common Reporting Standard (CRS) for Automatic Exchange of Financial Information) require us to collect certain information about investor's tax arrangements.
 - Please complete the section below as directed and provide any additional information that is requested.
 - Please note that in certain circumstances we may be legally obliged to share this information, and other financial information with respect to an investor's investment, with SARS who may in turn share this information with other relevant tax authorities.
 - If any of the information below changes in the future, please advise us of these changes promptly.
- Information filled in outside of the relevant fields will not be considered when processing your instruction.
- Return the completed and signed form with the relevant supporting documents to us via email to nedgroupinvestments@silica.net (please print and sign the form before scanning and emailing it to us, as an authorised signature is required for processing).
- If you have any questions about this form please contact your financial planner or our Client Service Centre on **0860 123 263** (from within RSA) or on **+27 21 416 6011** (from outside RSA).

2. Investor details

Investor number

Registered name

Registration number

Country of organisation or incorporation

Date of incorporation
 D D M M Y Y Y Y

CONTACT DETAILS

<p>Registered address</p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p>Code <input type="text"/></p> <p>Country <input type="text"/> South Africa</p> <p>If other <input type="text"/></p>	<p>Postal address (if different)</p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p>Code <input type="text"/></p> <p>Country <input type="text"/> South Africa</p> <p>If other <input type="text"/></p>
<p>Physical business address</p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p>Code <input type="text"/></p> <p>Country <input type="text"/> South Africa</p> <p>If other <input type="text"/></p>	<p>Place of effective management (if different to registered or physical business address)</p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p>Code <input type="text"/></p> <p>Country <input type="text"/> South Africa</p> <p>If other <input type="text"/></p>

3. Tax residency

It is mandatory to classify yourself in this section, for guidance please refer to the **Addendum: Legal entities tax residency classification (FATCA and CRS)** available at www.nedgroupinvestments.com, and speak to your tax adviser.

Are you resident for tax purposes in South Africa? Yes No

If yes, please indicate your tax number

Are you tax resident in any other country? Yes No

If yes, please complete following for each country of tax residency

Country of tax residency	Tax identification number (TIN)	OR	Not applicable
1 <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"/> <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="checkbox"/>	<input type="checkbox"/>
2 <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"/> <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="checkbox"/>	<input type="checkbox"/>
3 <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"/> <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="checkbox"/>	<input type="checkbox"/>
4 <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"/> <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="checkbox"/>	<input type="checkbox"/>
5 <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"/> <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="checkbox"/>	<input type="checkbox"/>

Please note

- By ticking not applicable you confirm that the country specified does not issue a tax identification number.

CLASSIFICATION UNDER FATCA AND CRS

Please indicate if you are a

 Financial Institution **OR** a Non Financial Institution

If you are a Financial Institution

FATCA Classification In this section the word "foreign" includes South African legal entities.	(please tick one)
South African Financial Institution or a Partner Jurisdiction Financial Institution	<input type="checkbox"/>
Participating Foreign Financial Institution (in a Non-IGA jurisdiction)	<input type="checkbox"/>
Non-Participating Foreign Financial Institution	<input type="checkbox"/>
Financial Institution resident in the USA or in a US Territory	<input type="checkbox"/>
Exempt Beneficial Owner (this includes a South African registered retirement scheme, a South African Governmental Organisation or an International Organisation)	<input type="checkbox"/>
Deemed Compliant Foreign Financial Institution (this includes Non-Profit Organisations and Financial Institutions with a Local Client Base).	<input type="checkbox"/>

CRS Classification	(please tick one)
Financial Institution under CRS (this includes all Non-Reporting Financial Institutions for example a pension scheme, government entity and international organisation.)	<input type="checkbox"/>
A non-participating professionally managed Investment Entity (this does not include a South African Financial Institution). <i>If this box is ticked, please also complete the Addendum Controlling Persons (natural persons only) in respect of any Controlling Persons.</i>	<input type="checkbox"/>

If you are a financial institution that has obtained a Global Intermediary Identification Number (GIIN) please provide:

GIIN

If you are a Non Financial Institution

FATCA Classification In this section the word "foreign" includes South African legal entities.	(please tick one)
Active Non-Financial Foreign Entity	<input type="checkbox"/>
Passive Non-Financial Foreign Entity <i>(If this box is ticked, please also complete the Addendum Controlling Persons (natural persons only) in respect of any Controlling Persons).</i>	<input type="checkbox"/>
Non-Financial Entity that is a 'US Person' - please tick one of the following boxes: US Reportable Person Not a US Reportable Person	<input type="checkbox"/> <input type="checkbox"/>

CRS Classification	(please tick one)
A corporation the stock of which is regularly traded on an established securities market or a corporation which is a related entity of such a corporation.	<input type="checkbox"/>
A Government Entity, a Central Bank or an International Organisation.	<input type="checkbox"/>
Active Non-Financial Entity.	<input type="checkbox"/>
Passive Non-Financial Entity. <i>(If this box is ticked, please also complete the Addendum Controlling Persons (natural persons only) in respect of any Controlling Persons).</i>	<input type="checkbox"/>

4. Investor declaration

- I hereby confirm that I am duly authorised to act on behalf of the investor and certify that the information provided on this form is, to the best of my knowledge and belief, accurate and complete.
- I agree to notify Nedgroup Investments immediately in the event that the information on the self-certification form changes.

Investor / Authorised
signatory

Date
D D M M Y Y Y Y

Name

Capacity

Authorised signatory

Date
D D M M Y Y Y Y

Name

Capacity

Authorised signatory

Date
D D M M Y Y Y Y

Name

Capacity

Authorised signatory

Date
D D M M Y Y Y Y

Name

Capacity

Nedgroup Investments (Pty) Limited (Company registration number 1996/017075/07)

Incorporating Nedgroup Collective Investments (RF) Proprietary Limited (Company registration number 1997/001569/07); Nedgroup Investment Advisors Limited (Company registration number 1998/017581/07) an authorised Financial Services Provider (FSP Licence No. 1652) Sponsor of the Nedgroup Investments Retirement Funds

Nedbank Clocktower Clocktower Precinct V&A Waterfront Cape Town 8001
PO Box 1510 Cape Town 8000 South Africa

www.nedgroupinvestments.com

Directors: I Ruggiero NA Andrew CE Sevenoaks

Addendum

Controlling Persons (natural persons only)

Complete this section for each Controlling Person only if the investor is

- (i) a Passive Non-Financial Foreign Entity (FATCA classification),
- (ii) a Passive Non-Financial Entity (CRS classification) or
- (iii) non-participating professionally managed Investment Entity (this does not include a South African Financial Institution (CRS classification)).

For guidance please refer to the **Addendum: Legal entities tax residency classification (FATCA and CRS)** available at www.nedgroupinvestments.com, and speak to your tax adviser.

The following persons are considered to be Controlling Persons of the investor, as indicated.

1. Company:

- Managing Director
- Any natural person holding 25% or more interest in such company
- Any other natural person/company of cial exercising control over such Company

2. Closed corporation:

- Each and every member
- Any other natural person exercising control over such Closed Corporation

3. Partnership:

- Each and every partner
- Each and every other person exercising control over the Partnership

4. Trust:

- Each and every trustee
- Each and every beneficiary
- The settlor
- The protector(s) (if any)
- Any other natural person exercising control over such Trust

1. Personal details

Complete this section for each Controlling Person.

Relationship to investor	<input type="text"/>											
Title and surname	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>							
First names	<input type="text"/>											
Date of birth	<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	D	D	M	M	Y	Y	Y	Y				
SA ID number	<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Passport number (if foreign national)	<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Expiry date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				
	D	D	M	M	Y	Y	Y	Y	Country of issue	<input type="text"/>		
Nationality	<input type="text"/>								Country of birth	<input type="text"/>		

CONTACT DETAILS

Cell + (0)

Email address

Alternate telephone + (0)

Residential address or registered address

Postal address (if different)

Code Country

Code Country

2. Tax residency

Country of tax residency	Tax identification number (TIN)	OR	Not applicable
1 <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"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		<input type="checkbox"/>
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Please note:

- 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.

3. Investor declaration

- I hereby confirm that I am duly authorised to act on behalf of the investor and certify that the information provided on this form is, to the best of my knowledge and belief, accurate and complete.
- I agree to notify Nedgroup Investments immediately in the event that the information on the self-certification form changes.

Investor / Authorised signatory	<input type="text"/>	Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> D D M M Y Y Y Y
Name	<input type="text"/>	Capacity <input type="text"/>
Authorised signatory	<input type="text"/>	Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> D D M M Y Y Y Y
Name	<input type="text"/>	Capacity <input type="text"/>
Authorised signatory	<input type="text"/>	Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> D D M M Y Y Y Y
Name	<input type="text"/>	Capacity <input type="text"/>

Authorised signatory

Date

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D	D	M	M	Y	Y	Y	Y

Name

Capacity