### **Resolution Life**

### Instruction sheet

# IDENTIFICATION FORM FOR UNREGULATED TRUSTS AND TRUSTEES

# LIFESTREAM GUARANTEED INCOME VIA COLONIAL FIRST STATE FIRSTCHOICE

#### Identification and verification

All clients applying for a new policy must complete the identification procedures for the purposes of Anti-Money Laundering and Counter-Terrorism Financing laws. In addition, in order to comply with the obligations of the Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) we are required to collect further information.

To do this, you need to complete the attached form.

### What do I need to complete?

The table over the page provides you with a guide on which mandatory sections you need to complete as identified by a solid dot (•). Where a section does not apply to all trust or trustee types, an explanation is provided as additional guidance.

### You will need to identify what type of trust you are - are you:

- · a family trust
- · a charitable trust
- · a testamentary trust
- an other unregulated trust (trusts that are not subject to the oversight of a Commonwealth, State or Territory statutory regulator).

If you are any of the following you should complete the Identification Form Australian Regulated Trusts and Trustees:

- a regulated trust eg a Self Managed Superannuation Fund ('SMSF') or a trust that is regulated by the Australian Securities and Investments Commission ('ASIC'), the Australian Taxation Office ('ATO') or the Australian Prudential Regulation Authority ('APRA')
- a registered managed investment scheme (ie managed investment scheme that is registered by ASIC)
- an Australian Government superannuation fund (ie a government superannuation fund established under Commonwealth or State/ Territory legislation), or
- · an other regulated trust.

### Will documents in a language other than English be accepted?

Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator. An accredited translator is any person who is currently accredited by the National Accreditation Authority for Translators and Interpreters Ltd (NAATI) at the level of Professional Translator or above.

### Identification requirements

### What the certifier needs to do to certify your photocopied ID

The certifier can certify the photocopy of your ID by placing a stamp or writing 'This is a true and correct copy of the original' followed by their signature, printed name, qualification and the date. For example:

### Persons who can certify documents

A person who is currently licensed or registered under a law to practise in one of the following occupations:

- Chiropractor
- Dentist
- Legal practitioner
- · Medical practitioner
- Nurse
- Optometrist
- Patent attorney
- Pharmacist
- · Physiotherapist
- Psychologist
- · Trademarks attorney
- · Veterinary surgeon.



JOHN CLARKE - Justice of the Peace - 01.08.19

Colonial First State | Phone: 13 13 36 | Mail: GPO Box 3956 SYDNEY NSW 2001 | Email: contactus@cfs.com.au Issued by Resolution Life Australasia Limited ABN 84 079 300 379, AFSL No. 233671 (Resolution Life). Colonial First State Investments Limited ABN 98 002 348 352 AFSL 232468 (CFSIL) provides platform administration services to Resolution Life in respect of this annuity product. For further information see the relevant product disclosure statement.

### Identification requirements (continued)

A person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described) or a person who is in the following list:

- Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
- An officer with, or a credit representative of, a holder of an Australian Credit Licence (ACL), having two or more years of continuous service with one or more licensees
- An officer with, or authorised representative of, a holder of an Australian Financial Services Licence (AFSL), having two or more years of continuous service with one or more licensees
- Australian Consular Officer, within the meaning of the Consular Fees Act 1955. This includes a person appointed to hold or act in any of the following offices of the Commonwealth (of Australia) in a country or place outside Australia:
  - (a) Consul-General
  - (b) Consul
  - (c) Vice-Consul
  - (d) Trade Representative
  - (e) Consular Agent
- Australian Diplomatic Officer, within the meaning of the Consular Fees Act 1955. This includes a person appointed to hold or act in any of the following offices of the Commonwealth (of Australia) in a country or place outside Australia:
  - (a) Ambassador
  - (b) High Commissioner
  - (c) Minister
  - (d) Head of a Mission
  - (e) Commissioner
  - (f) Charge d'Affaires
  - (g) Counsellor, Secretary or Attache at an Embassy, High Commissioner's office, Legation or similar
- Bailiff
- Bank officer with two or more continuous years of service
- Building society officer with two or more years of continuous service
- · Chief executive officer of a Commonwealth court
- · Clerk of a court
- Commissioner for Affidavits
- · Commissioner for Declarations
- Credit union officer with two or more years of continuous service
- Employee of the Australian Trade and Investments Commission who is:
  - (a) in a country or place outside Australia and
  - (b) authorised under paragraph 3 (d) of the Consular Fees Act 1955 and
  - (c) exercising his or her function in that place
- Employee of the Commonwealth who is:
  - (a) in a country or place outside Australia and
  - (b) authorised under paragraph 3 (c) of the Consular Fees Act 1955 and
  - (c) exercising his or her function in that place

- Fellow of the National Tax Accountants' Association
- Finance company officer with two or more years of continuous service
- Holder of a statutory office not specified in another item in this list
- · Judge of a court
- · Justice of the Peace
- Magistrate
- Marriage celebrant registered under Subdivision C of Division 1 of Part IV of the Marriage Act 1961
- · Master of a court
- Member of Chartered Secretaries Australia
- Member of Engineers Australia, other than at the grade of student
- Member of the Association of Taxation and Management Accountants
- Member of the Australasian Institute of Mining and Metallurgy
- Member of the Australian Defence Force who is:
  - (a) an officer or
  - (b) a non-commissioned officer within the meaning of the Defence Force Discipline Act 1982 with two or more years of continuous service or
  - (c) a warrant officer within the meaning of that Act
- Member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accountants or the Institute of Public Accountants
- · Member of:
  - (a) the Parliament of the Commonwealth or
  - (b) the Parliament of a State or
  - (c) a Territory legislature or
  - (d) a local government authority of a State or Territory
- Minister of religion registered under Subdivision A of Division 1 of Part IV of the Marriage Act 1961
- Notary public
- · Permanent employee of:
  - (a) the Commonwealth or a Commonwealth authority or
  - (b) a State or Territory or a State or Territory authority or
  - (c) a local government authority or
  - (d) With two or more years of continuous service and the person is not already specified in another item on this list
- Person before whom a statutory declaration may be made under the law of the State or Territory in which the declaration is made
- Police officer
- Registrar, or Deputy Registrar, of a court
- · Senior Executive Service employee of:
  - (a) The Commonwealth or a Commonwealth authority or
  - (b) a State or Territory or a State or Territory authority
- Sherriff
- · Sheriff's officer
- Teacher employed on a full-time basis at a school or tertiary education institution.

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### Identification and verification procedure for the trust and trustee

- You need to complete **section 1.4** for all trustees (including trustees that are individuals and trustees that are an Australian company or foreign company).
- If the trust has more than one trustee, you need to provide us with information for ONLY ONE of the trustees.
- If the selected trustee is a Foreign company, please complete the **FOREIGN COMPANY IDENTIFICATION FORM** in addition to this form.

Sec	tion		
1	Unregulated trust identification procedure		
1.1	General information	•	
1.2	Type of unregulated trust	•	
1.3	Beneficiaries' details	•	
1.4	Trustee details	Provide full name and address of all trustees.	
1.5	Beneficial ownership	Provided the names of the individuals that directly or indirectly control the trust.	
2	Tax information		
2.1	Tax status	•	
2.2	Foreign controlling persons (Individuals)	•	
2.3	Country of tax residency	•	
3	Unregulated trust verification procedure	Resolution Life will perform the trust verification procedure. However if we cannot access the information to complete this procedure we may ask you to provide us with further information.	
4	Record of verification procedure	To be completed by the adviser.	

Please mail this form to: Colonial First State, Reply Paid 27, SYDNEY NSW 2001 ePost (adviser use only): Scan and upload the forms via ePost through FirstNet adviser

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## IDENTIFICATION FORM UNREGULATED AUSTRALIAN TRUSTS & FOREIGN TRUSTS



#### GUIDE TO COMPLETING THIS FORM

- This form is for all Trusts that are not subject to the oversight of an Australian statutory regulator. Trusts that are subject to the oversight of an Australian statutory regulator, including Self-Managed Superannuation Funds, should complete the AUSTRALIAN REGULATED TRUSTS AND TRUSTEES IDENTIFICATION FORM.
- o Provide information about the Trust (Section 1) and complete the Trust verification procedure (Section 3).
- o Provide details for ALL Trustees (Section.1.4) and provide a separate Customer ID Form for ONE of the Trustees.
- o Provide details for the Trust's Beneficial Owners (Section 1.5) and provide separate INDIVIDUAL ID Forms for each of these Beneficial Owners.
- o Tax information must be collected from an authorised representative of the Trust
- o Complete all applicable sections of this form in BLOCK LETTERS.

SECTION 1: TRUST IDENTI	FICATION PROCEDURE	
1.1 General Information		
Full name of the Trust		
Full business name of the Trustee in respect of the Trust (if any)		
Country where Trust established (if not established in Australia)		
Full Name of Settlor/s*		
* The person/s who settles the initia	I sum or assets to create the Trust.	
1.2 Type of Unregulated Trust		
Tick ✓ Select one of the following	g types of Trusts	
☐ Family Trust	☐ Charitable	e Trust
Other type provide	description	
		emes, government superannuation funds or other regulated Trust should IFICATION FORM, rather than this form.
1.3 Beneficiaries Details		
Provide the names (1.3.1) and/or class both named and class/es of ber		es. Both the names and classes of beneficiaries must be provided (if the Trust
1.3.1 Named Beneficiaries		
Full Given / Entity name(s)		Surname
1		
2		
3		
4		
1.3.2 Class/es of beneficiaries (e.g.	unit holders, family members of named	I person, charitable organisations/causes)

If there are more beneficiaries provide details on a separate sheet and tick this box  $\square$  .

### 1.4 Trustee Details

Provide the name & residential/business addresses of ALL of the Trustees below.

If there are more Beneficial Owners, provide details on a separate sheet and tick this box  $\Box$  .

Complete a separate Customer ID Form for ONE of these Trustees\*.

Tr	ustee 1	Tr	ustee 2	Tr	ustee 3	
ull given name(s)/ Cor	npany name	Full given name(s	)/ Company name	Full given name(s	)/ Company name	
Surname		Surname		Surname		
Residential/ Business Address (PO Box is NOT acceptable)			Residential/ Business Address (PO Box is NOT acceptable)		Residential/ Business Address (PO Box is NOT acceptable)	
Suburb	State	Suburb	State	Suburb	State	
Country	Postcode	Country	Postcode	Country	Postcode	
	r a Trustee who is ar		ased on the nature of this ALIAN COMPANY ID FOR			
vide the names of the	individuals that direc	tly or indirectly control* to t they are the Trust's Ber		ed to be the individual ide	entified as the Trustee abov	
		neans of Trusts, agreem by to appoint or remove the		standings and practices;	or exercising control throug	
			e individuals (unless an i f a Trustee that is an ent		Form has already been	
ıll given name(s)	Surnan	ne	Role	(such as Trustee or App	pointer)	

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SEC	CTION 2: TAX INFORMATION				
Colle	ection of tax status in accordance with the Unit	ted States Foreign Account Tax Comp	oliance Act (FATCA) and Common R	eporting Sta	ndard (CRS).
2.1 T	ax Status				
Tick	✓ one of the Tax Status boxes below (if the	e Trust is a Financial Institution, pleas	e provide all the requested information	on below)	
	Financial Institution (A custodial or depository	institution, an investment entity or a specif	ied insurance company for FATCA / CRS	purposes)	
	Provide the Trust's Global Intermediary Ident	tification Number (GIIN), if applicable			
	If the Trust is a Financial Institution but does	not have a GIIN, provide its FATCA s	status (select ✓ ONE of the following	status)	
	☐ Deemed Compliant Financial Institution	n			
	☐ Excepted Financial Institution				
	☐ Exempt Beneficial Owner				
	Non Reporting IGA Financial Institution (If the Trust is a Trustee-Documented				
	☐ Nonparticipating Financial Institution				
	☐ US Financial Institution				
	☐ Other (describe the Trust's FATCA sta	itus in the box provided)			
	PLEASE ANSWER THE QUESTION	BELOW FOR ALL FINANCIAL II	NSTITUTIONS		
	Is the Financial Institution an Investment E	ntity located in a Non-Participating CF	RS Jurisdiction and managed by anot	ther Financia	al Institution?
	Yes □ No □				
	If Yes, proceed to section 2.2 (Foreign Con	trolling Persons). If No, Please go to	section 3 to complete the form.		
	CRS Participating Jurisdictions are on the OECD	website at <a href="http://www.oecd.org/tax/automa">http://www.oecd.org/tax/automa</a>	atic-exchange/crs-implementation-and-ass	sistance/crs-by	<u>/-jurisdiction</u> .
	Australian Registered Charity or Decease	ed Estate			
	If the Trust is an Australian Registered Chari		ed to section 3 to complete the form.		
	A Foreign Charity or an Active Non-Finan gross income was passive income (e.g. dividends, refer to Section VIII in the Annexure of the OECD 's	interests and royalties) and less than 50%	of assets held produced passive income.	For other type	
	If the Trust is a Foreign (non-Australian) Cha	arity or an Active NFE, please proceed	to section 2.3 (Country of Tax Residue)	dency).	
	Other (Trusts that are not previously listed –	Passive Non-Financial Entities))			
	Please proceed to section 2.2 (Foreign Cont	rolling Persons).			
2.2	Foreign Controlling Persons (Individuals)				
Are a	any of the Trust's Controlling Persons tax resid	dents of countries other than Australia		Yes □	No □
If the	Trustee is a company, are any of this company	ny's Controlling Persons tax residents	of countries other than Australia	Yes 🗆	No 🗆
	ontrolling Person is any individual who directly or ind Trustee company this includes any beneficial owner				or Beneficiaries.
	Residency rules differ by country. Whether an individuly, the location of a person's residence or place of w			nt of time a pe	erson spends in a
	s to either of the two questions above, please ach Controlling Person (unless already provide		s below and complete a separate Ind	dividual Iden	tification Form
	Full given name(s) Surname	R	Role (such as Trustee or Beneficiary,	etc. refer * l	below)
	,, ,		,,,		
If the	re are more controlling persons, provide details o	on a separate sheet and tick this box. $\Box$	l.		



Proceed to section 2.3.

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2.3 Country of Tax Residency		
Is the Trust a tax resident of a co	ountry other than Australia? Yes	No 🗆
If Yes, please provide the Trust's than one other country, please list		number (TIN) or equivalent below. If the Trust is a tax resident of more
If No, please proceed to section	3 to complete the form.	
	h country for the purposes of administering tax laws. Tirled, please list one of the three reasons specified (A,	This is the equivalent of a Tax File Number in Australia or a Employee Identification B or C) for not providing a TIN.
1. Country	TIN	If no TIN, list reason A, B or C
2. Country	TIN	If no TIN, list reason A, B or C
3. Country	TIN	If no TIN, list reason A, B or C
If there are more countries, provide	e details on a separate sheet and tick this box	
Reason C The country of tax	residency does not require the TIN to be disclos	
SECTION 3: UNREGULA	ATED TRUST VERIFICATION PROCE	DURE
Trust Verification procedure Information to be verified: Full name of	the Trust and Settlor/s name	
•	ns (select one or more of the following options used to	,
		y available an original or certified extract of the Trust Deed *. es, Beneficiaries, Settlor/s and Appointers (where applicable).
* Documents that are written in a lang	juage that is not English must be accompanied by an E	English translation prepared by an accredited translator.
<ul> <li>→ Either attach a legible cert</li> <li>→ Alternatively, if agreed bet DO NOT attach copies of the property of the property</li></ul>	tween your licensee and the product issuer, on the ID Documents	Trust's Beneficial Owners as per 1.5 AND ify the Trust (and any required translation) OR complete the Record of Verification Procedure section below, and
SECTION 4: RECORD O	F VERIFICATION PROCEDURE	
ID DOCUMENT DETAILS	Document 1	Document 2 (if required)
Verified From	☐ Original ☐ Certified Copy	Original Contified Conv
	+ 0	☐ Original ☐ Certified Copy
Document Issuer		☐ Original ☐ Certified Copy
Issue Date		□ Original □ Certified Copy
		□ Original □ Certified Copy
Issue Date Expiry Date	□ N/A □ Sighted	□ N/A □ Sighted
Issue Date  Expiry Date  Document Number  Accredited English Translation  By completing and signing this R  • an identity verification proced representative;  • Customer ID Forms have bee  • Individual Customer ID Form	□ N/A □ Sighted	□ N/A □ Sighted  a AML/CTF Rules, in the capacity of an AFSL holder or their authorised ficial Owners and
Issue Date  Expiry Date  Document Number  Accredited English Translation  By completing and signing this R  • an identity verification proced representative;  • Customer ID Forms have be  • Individual Customer ID Form  • the tax information provided  AFS Licensee Name	□ N/A □ Sighted  Decord of Verification Procedure I declare that:  Decord of Verification Proce	□ N/A □ Sighted  e AML/CTF Rules, in the capacity of an AFSL holder or their authorised ficial Owners and ovided.  AFSL No.
Issue Date  Expiry Date  Document Number  Accredited English Translation  By completing and signing this R  • an identity verification proced representative;  • Customer ID Forms have bee  • Individual Customer ID Form  • the tax information provided	□ N/A □ Sighted  Decord of Verification Procedure I declare that:  Decord of Verification Proce	□ N/A □ Sighted  a AML/CTF Rules, in the capacity of an AFSL holder or their authorised ficial Owners and ovided.

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