Resolution Life

Instruction sheet

IDENTIFICATION FORM FOR UNREGULATED TRUSTS AND TRUSTEES

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) 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.



This is a true and correct copy of the original.

JOHN CLARKE - Justice of the Peace - 01.08.19

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	ction	
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)	•
2.2	Foreign controlling persons (Individuals) Country of tax residency	•
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Please mail this form to: Resolution Life, GPO Box 3306, Sydney NSW 2001

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IDENTIFICATION FORM UNREGULATED AUSTRALIAN TRUSTS & FOREIGN TRUSTS



GUIDE TO COMPLETING THIS FORM

- o 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	M3140723
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	types of Trusts	
☐ Family Trust	☐ Charitable	e Trust Testamentary 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 cl has both named and class/es of bei		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	d 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.

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

Truste	ee 1	Trus	stee 2	Tr	ustee 3
ull given name(s)/ Compa	ny name	Full given name(s)/	Company name	Full given name(s)/ Company name
Surname		Surname		Surname	
Residential/ Business Address		_	734 010723	Desidential/ President	Address
RESIDENTIAL/ BUSINESS ADDRESS		Residential/ Busines (PO Box is NOT acceptable)	ss Address	Residential/ Busin (PO Box is NOT acceptable)	ess Address
Suburb	State	Suburb	State	Suburb	State
Country	Postcode	Country	Postcode	Country	Postcode
]					1 5515545
A Customer ID form should	d be completed fo	ails on a separate sheet an or ONE of the Trustees bas individual or an AUSTRAL	ed on the nature of this		
A Customer ID form should nould be completed for a T	d be completed fo	or ONE of the Trustees bas	ed on the nature of this		
A Customer ID form should nould be completed for a T Beneficial Ownership	d be completed for Frustee who is an	or ONE of the Trustees bas	ed on the nature of this IAN COMPANY ID FOR	M for a Trustee that is a	n Australian Company.
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If there are more Beneficial Owners, provide details on a separate sheet and tick this box \square .



SEC	TION 2: TAX INFORI	MATION		
Colle	ction of tax status in accorda	ance with the United States Foreign Account Tax 0	Compliance Act (FATCA) and Common F	Reporting Standard (CRS).
2.1 T	ax Status			
Tick	✓ one of the Tax Status box	oxes below (if the Trust is a Financial Institution, p	please provide all the requested informati	on below)
	Financial Institution (A cus	stodial or depository institution, an investment entity or a s	specified insurance company for FATCA / CRS	purposes)
	Provide the Trust's Global I	Intermediary Identification Number (GIIN), if applic	able	
	If the Trust is a Financial In	stitution but does not have a GIIN, provide its FAT	CA status (select ✓ ONE of the following	g status)
	□ Deemed Compliant F	inancial Institution		
	☐ Excepted Financial In	nstitution		
	☐ Exempt Beneficial Ov	wner		
	☐ Non Reporting IGA F (If the Trust is a Trust)	inancial Institution tee-Documented Trust, provide the Trustee's GIIN)	
	☐ Nonparticipating Fina	ncial Institution		
	☐ US Financial Institution	on		
	☐ Other (describe the T	rust's FATCA status in the box provided)		
	PLEASE ANSWER TH	HE QUESTION BELOW FOR ALL FINANCIA	AL INSTITUTIONS	
	Is the Financial Institution	an Investment Entity located in a Non-Participating	g CRS Jurisdiction and managed by ano	ther Financial Institution?
	Yes □ No □			
	If Yes, proceed to section	2.2 (Foreign Controlling Persons). If No, Please	go to section 3 to complete the form.	
	CRS Participating Jurisdiction	ns are on the OECD website at http://www.oecd.org/tax/arg	utomatic-exchange/crs-implementation-and-as	sistance/crs-by-jurisdiction.
	Australian Registered Cha	arity or Deceased Estate		
	_	Registered Charity or Deceased Estate, please p	roceed to section 3 to complete the form.	
		Active Non-Financial Entity (NFE) (Active NFEs inc	·	
	gross income was passive inco	ome (e.g. dividends, interests and royalties) and less than exure of the OECD 'Standard for Automatic Exchange of I	50% of assets held produced passive income.	. For other types of Active NFEs,
	If the Trust is a Foreign (no	n-Australian) Charity or an Active NFE, please pro	oceed to section 2.3 (Country of Tax Resi	idency).
	Other (Trusts that are not p	previously listed – Passive Non-Financial Entities))		
	Please proceed to section 2	2.2 (Foreign Controlling Persons).		
2.2	Foreign Controlling Perso	ns (Individuals)		
Are a	iny of the Trust's Controlling	Persons tax residents of countries other than Aus	tralia	Yes □ No □
If the	Trustee is a company, are a	any of this company's Controlling Persons tax resid	dents of countries other than Australia	Yes \(\Bar{\cap} \) No \(\Bar{\cap} \)
		al who directly or indirectly exercises control over the Trus any beneficial owners controlling more than 25% of the sh		
		Whether an individual is tax resident of a particular coun idence or place of work. For the US, tax residency can be		unt of time a person spends in a
		ns above, please provide the details of these indiv ss already provided as a Beneficial Owner).	iduals below and complete a separate In	dividual Identification Form
	Full given name(s)	Surname	Role (such as Trustee or Beneficiary	. etc. refer * below)
	. 4.1 9.1 011 114110(5)		. 1010 Joseph do Tradico di Bolichidaly.	(13. 15.51 bolow)
If the	re are more controlling porces	s, provide details on a separate sheet and tick this bo		
	2 2.2 more controlling persons	e, p. c. rae detaile on a deparate offeet and tien tills be	··· ·	

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Proceed to section 2.3.

Is the Trust a tax resident of a cou	ntry other than Australia? Yes	No 🗆
If Yes, please provide the Trust's of than one other country, please list		mber (TIN) or equivalent below. If the Trust is a tax resident of more
If No, please proceed to section 3	to complete the form.	
	country for the purposes of administering tax laws. Thi led, please list one of the three reasons specified (A, B	s is the equivalent of a Tax File Number in Australia or a Employee Identification 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 of	details on a separate sheet and tick this box.	
Reason B The Trust has not be Reason C The country of tax re	esidency does not require the TIN to be disclose	
SECTION 3: UNREGULAT	TED TRUST VERIFICATION PROCED	DURE
Trust Verification procedure Information to be verified: Full name of to	ne Trust and Settlor/s name	
Tick ✓ Verification options	(select one or more of the following options used to ve	rify the Trust)
Extracts of Trust Dec	eds must include the name of the Trust, Trustees	available an original or certified extract of the Trust Deed *. s, Beneficiaries, Settlor/s and Appointers (where applicable).
* Documents that are written in a langu	age that is not English must be accompanied by an Eng	glish translation prepared by an accredited translator.
→ Either attach a legible certif		•
·		
SECTION 4: RECORD OF	VERIFICATION PROCEDURE	
SECTION 4: RECORD OF ID DOCUMENT DETAILS	VERIFICATION PROCEDURE Document 1	Document 2 (if required)
SECTION 4: RECORD OF ID DOCUMENT DETAILS Verified From	VERIFICATION PROCEDURE	Document 2 (if required) ☐ Original ☐ Certified Copy
SECTION 4: RECORD OF ID DOCUMENT DETAILS Verified From Document Issuer	VERIFICATION PROCEDURE Document 1	
SECTION 4: RECORD OF ID DOCUMENT DETAILS Verified From Document Issuer Issue Date	VERIFICATION PROCEDURE Document 1	
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SECTION 4: RECORD OF ID DOCUMENT DETAILS Verified From Document Issuer Issue Date Expiry Date Document Number Accredited English Translation By completing and signing this Re • an identity verification procedure representative; • Customer ID Forms have been individual Customer ID Forms • the tax information provided is	VERIFICATION PROCEDURE Document 1 Original Certified Copy N/A Sighted Cord of Verification Procedure I declare that:	Original Certified Copy N/A Sighted ML/CTF Rules, in the capacity of an AFSL holder or their authorised cial Owners and rided.
SECTION 4: RECORD OF ID DOCUMENT DETAILS Verified From Document Issuer Issue Date Expiry Date Document Number Accredited English Translation By completing and signing this Re • an identity verification procedure representative; • Customer ID Forms have been individual Customer ID Forms	VERIFICATION PROCEDURE Document 1 Original Certified Copy N/A Sighted cord of Verification Procedure I declare that: are has been completed in accordance with the An provided for one of the Trust's Trustees; have been provided for all of the Trust's Benefic	Original Certified Copy N/A Sighted ML/CTF Rules, in the capacity of an AFSL holder or their authorised
SECTION 4: RECORD OF ID DOCUMENT DETAILS Verified From Document Issuer Issue Date Expiry Date Document Number Accredited English Translation By completing and signing this Re • an identity verification procedure representative; • Customer ID Forms have been individual Customer ID Forms • the tax information provided is	VERIFICATION PROCEDURE Document 1 Original Certified Copy N/A Sighted cord of Verification Procedure I declare that: are has been completed in accordance with the An provided for one of the Trust's Trustees; have been provided for all of the Trust's Benefic	Original Certified Copy N/A Sighted ML/CTF Rules, in the capacity of an AFSL holder or their authorised cial Owners and rided.

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