GUIDE TO COMPLETING THIS FORM

- o This form is for FOREIGN COMPANIES only. For companies incorporated in Australia use the AUSTRALIAN 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 Tax information must be collected from an authorised representative of the Company
- $o\quad \textit{Complete all applicable sections of this form in BLOCK LETTERS}.$

SEC	CTION	1: FORE	GN COMPANY IDE	NTIFICATION	ON PRO	OCEDURE				
1.1	Genera	I Information	n							
Full	name of	foreign Com	pany							
Cour	ntry of fo	ormation / inc	orporation / registration							
	Select ✓	if registered	by a foreign body and pr	ovide name of	body					
Comp	oanies ind	corporated in A	ustralia should complete the	AUSTRALIAN (COMPANI	ES IDENTIFIC	ATION FORM,	rather than this	s form.	
1.2	Is the C	Company reg	gistered with ASIC? (sea	lect ✓ ONE of	the follow	ving)				
	Yes	Provide AR	BN							
		Provide EI 1	THER principal place	of business a	ddress in	Australia O	R 🗌 Austra	lian agent nar	me and add	ress details (Tick one box)
		Address (P	O Box is NOT acceptable)							
		Street								
		Suburb			State		Postcode		Country	
		Name of lo	cal agent in Australia							
	No		mpany identification num gistration body	ber (if any) iss	ued by th	ne				
		Principal pl	ace of business in the Co	mpany's coun	try of forr	mation or inco	orporation (P	O Box is NOT a	cceptable)	
		Street					1			
		Suburb			State		Postcode		Country	
1.3	Registe	ered Address	s of Company							
			dress as registered with <i>i</i> or registration (if any).	ASIC. If the Co	ompany i	s NOT registe	ered with ASI	IC, provide the	e registered	address in the country of
101111	ation, in	Street	r regionation (ii arry).							
		Suburb			State		Postcode		Country	
1.4	Compa	ny Type (sei	lect √ only ONE of the fo	llowing catego	ries)					
	Private	e , proceed to	1.5							
	Public	, proceed to	1.6							
1.5	Directo	ors (Required	d for all Private Companie	es as per 1.4, l	NOT requ	iired for Publi	ic Companies	s)		
F	Provide t	the names of	all directors.							
	Full g	given name(s)			Surnan	ne			
1										
2										
3										
4										
1	f there a	are more dire	ctors, provide details on a	a separate she	et and tid	k this box 🗆				

SWAE-012647-2017 1/5

1.6	Listing and Regulatory Details	(select ✓ any of the following cate	egories if appli	cable)	
	Ownership comparable to simila	are subject to disclosure requirement r public listing requirements in Austra enforceab <u>le means promotes transp</u>	alia. Refers to li	sting on a financial market that	
	Name of market / disclosure reg	ime			
	Country				l
		an Australian Public Listed Comp d on a financial market such as the A		s that are majority owned by an	
	Australian listed Company name	•			
	Name of market / exchange				
	regulator beyond that provided b	t to the supervision of an Australian (by ASIC as a Company registration b stralian Credit Licensees (ACL); or Re	ody. Examples	include Australian Financial	
	Regulator name				I
	Licence details (e.g. AFSL, ACL	, RSE)			
If an	y of the above are ticked, Proceed	d to Section 2			
1.7 Beneficial Ownership To be completed for all companies that are not Public Listed companies, majority owned by an Australian Public Listed Company or companies regulated in Australia as per 1.6					
Are t	here any individuals who ultimate	ly own 25% or more of the Company	's issued share	capital (through direct or indirect s	nareholdings)?
Yes	☐ (Complete 1.7.1) No ☐	(Complete 1.7.2)			
1.7.1	Shareholder Beneficial Owners	s			
Prov	ide the names of the individuals w	ho ultimately own 25% or more of th	e Company's is	sued share capital (through direct o	or indirect shareholdings).
Com	plete separate individual custo	mer ID Forms for each of these in	dividuals.		3 /
Eull	given name(a)		Surname		
Full	given name(s)		Sumame		
If be	neficial owner name/s are provide	ed above, proceed to section 2.			
1.7.2	Other Beneficial Owners				
If the	re are no individuals who meet th	e requirement of 1.7.1, provide the n	ames of the ind	ividuals who directly or indirectly co	ontrol* the Company.
arrar	gements, understanding & praction	ne capacity to determine decisions al ces; voting rights of 25% or more; or uch as the managing director or direct	power of veto.	If no such person can be identified	then the most senior
Com	plete separate individual custo	mer ID Forms for each of these inc	dividuals.		
Full	given name(s)	Surname		Role (such as Managing Director	r)
If the	ere are more Beneficial Owners, p	rovide details on a separate sheet a	nd tick this box		
	,	·			

SECTION 2: TAX INFORMATION

Collection of tax status in accordance with United States Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS).

2.1 Tax Status

2.1	Tax Status			
Tick	✓ one of the Tax Status boxes	s below (if the Company is a Financial Institution	, ple	ase provide all the requested information below)
	A Financial Institution (A cust	todial or depository institution, an investment entity or a	speci	fied insurance Company for FATCA / CRS purposes)
	Provide the Company's Global	Intermediary Identification Number (GIIN), if app	licab	le
	If the Company is a Financial I	nstitution but does not have a GIIN, provide its F	ATC	A status (select ✓ ONE of the following statuses)
	☐ Deemed Compliant Finance	ial Institution		
	☐ Excepted Financial Instituti	ion		
	☐ Exempt Beneficial Owner			
	☐ Non Reporting IGA Financi	ial Institution		
	☐ Nonparticipating Financial	Institution		
	☐ US Financial Institution			
	☐ Other (describe the compa	any's FATCA status in the box provided)		
	PLEASE ANSWER THE	QUESTION BELOW FOR ALL FINANCIAI	- INS	STITUTIONS
	Is the Financial Institution an	Investment Entity located in a Non-Participating	CRS	Jurisdiction and managed by another Financial Institution?
	Yes □ No □			
	''	? (Foreign Beneficial Owners). If No, Please go t		'
	CRS Farticipating Junsuictions at	e on the OECD website at http://www.oecd.org/taxautt	mauc	c-exchange/crs-implementation-and-assistance/crs-by-jurisdiction.
	A Public Listed Company, Ma Central Bank	ajority Owned Subsidiary of a Public Listed C	omp	any, Governmental Entity, International Organisation or
	If the Company type is listed al	bove, please proceed to section 3 to complete th	e for	m.
	income was passive income (e.g. o		asset	e, during the previous reporting period, less than 50% of their gross s held produced passive income. For other types of Active NFEs, referount Information' at www.oecd.org .)
	If the Company is a charity or a	an Active NFE, please proceed to section 2.3 (Co	ountr	y of Tax Residency).
	Other (Entities that are not previous	usly listed – Passive Non-Financial Entities)		
	Please proceed to section 2.2	(Foreign Beneficial Owners).		
2.2	Foreign Beneficial Owners (In	idividuals)		
Does	the Company have any Benefic	cial Owners who are tax residents of countries ot	her t	han Australia? Yes ☐ No ☐
		nether an individual is tax resident of a particular country ace or place of work. For the US, tax residency can be a		en (but not always) based on the amount of time a person spends in a
If Ye				ridual Identification Form for each Beneficial Owner (unless
Full	given name(s)	Surname		Role (such as Director or Senior Managing Official)
			7	
If the	re are more Beneficial Owners, pr	ovide details on a separate sheet and tick this box.		
	eed to section 2.3.	orido dotalio ori a ocparato sirioti aria tich tillo box.		

SWAE-012647-2017 3/5

2.3 Cou	ntry of Tax Residency
Is the Cor	mpany a tax resident of a country other than Australia? Yes \square No \square
	ease provide the Company's country of tax residence and tax identification number (TIN) or equivalent below. If the Company is a tax resident nan one other country, please list all relevant countries below.
If No, plea	ase proceed to section 3 to complete the form.
	e number assigned by each country for the purposes of administering tax laws. This is the equivalent of a Tax File Number in Australia or an Employer on Number in the US. If a TIN is not provided, please list one of the three reasons specified (A, B or C) for not providing a TIN.
1. C	country TIN If no TIN, list reason A, B or C
2. C	country TIN If no TIN, list reason A, B or C
3. C	country TIN If no TIN, list reason A, B or C
If there are	e more countries, provide details on a separate sheet and tick this box. \square .
	A The country of tax residency does not issue TINs to tax residents
	n B The Company has not been issued with a TIN The Country of tax residency does not require the TIN to be disclosed
Neason	The country of tax residency does not require the first to be disclosed
SECTIO	ON 3: FOREIGN COMPANY VERIFICATION PROCEDURE
	tion documentation is to be provided to verify the information listed in one of the verification procedure described below (either the standard
	In procedure for companies registered with ASIC, the standard verification procedure for companies not registered with ASIC or the simplified in procedure for Public Listed companies, Majority Owned Subsidiaries of Australian Public Listed companies or companies regulated in
Australia	as described in section 1.6 of this form).
	rerification procedure for Foreign Companies registered with ASIC
	to be verified: iull name of the Company as registered by ASIC
	ARBN issued to the Company
o Whet	her it is registered by a foreign registration body and if so, whether it is registered as a private or public Company.
Tick ✓	Verification options (select one of the following options used to verify the Company)
	Perform a search of the relevant ASIC database.
	Perform a search of the relevant foreign registration body.
	If the ASIC or foreign registration body database is not reasonably available, an original or certified copy of the certification of registration issued by ASIC or by the relevant foreign registration body. *
	verification procedure for Foreign Companies NOT registered with ASIC to be verified:
	iull name of the Company
	ther it is registered by a foreign registration body and if so whether it is registered as a private or public Company
	dentification number issued to the Company
Tick ✓	Verification options (select one of the following options used to verify the Company) Perform a search of the relevant foreign registration body.
	Perform a search of the relevant foreign registration body. If the foreign registration body database is not reasonably available, an original or certified copy of the certification of registration issued by
	the relevant foreign registration body. *
	Where the above means are unavailable, a disclosure certificate from the Company given by an individual acting as agent of the Company (where the agent has been verified). See your licensee for other disclosure certificate requirements. *

Simplified this form)	verification procedure for a regulated Company, a listed Company or a majority owned subsidiary of an Australian listed Company (as described in section 1.6 of
Information	n to be verified:
o The	full name of the Company
o That	the Company is a regulated Company, a listed Company or a majority owned subsidiary of an Australian listed Company (whichever is applicable)
Tick ✓	Verification options (select one of the following options used to verify the Company)
Tick ✓	Verification options (select one of the following options used to verify the Company) Perform a search of the relevant financial market.
Tick ✓	

IMPORTANT NOTE:

A public document issued by the Company. *

- → Ensure that individual customer ID Forms have been provided for the Company's Beneficial Owners as per 1.7 AND
- → Attach a legible certified copy of the ID documentation used to verify the Company (and any required translation)

SWAE-012647-2017 5/5

^{*} Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.