

CUSTOMER IDENTIFICATION FORM PARTNERSHIPS AND PARTNERS

Please note that we **CANNOT** process your application unless the information requested in this form has been provided.

If you are not a partnership or partner, you must download and complete the relevant customer identification form from www.perpetual.com.au/customer-id

Alternatively, to order a form or if you have any questions, phone:
Investor Services 1800 022 033
Adviser Services 1800 062 725

About this customer identification form

This form has been designed to meet Perpetual's obligations under the Anti-Money Laundering and Counter Terrorism Financing Act (2006) (AML Act) to identify our customers.

The AML Act regulates financial services and transactions in a way that is designed to detect and prevent money laundering and terrorism financing.

Under the AML Act, we are required to:

- verify your identity before providing services to you, and to re-identify you if we consider it necessary to do so
- where you supply documentation relating to your identity, keep a record of this documentation for seven years after the end of your relationship with Perpetual.

This form also meets our customer identification obligations under the United States (US) Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS).

Additional tax information is available on our website at www.perpetual.com.au/tax.

Privacy

Perpetual is committed to protecting your privacy.

By completing this form, you authorise us to collect your personal information. If you are completing this form as an adviser for another person, you confirm that you have provided them with this privacy notification and that they have consented to us collecting their personal information.

We collect, use and disclose your personal information in accordance with our privacy policy, which includes details about how you may request access to and correct the information that we hold about you. Our policy also outlines our privacy complaints process. This policy is publicly available at our website or you can obtain a copy free of charge by contacting us.

Checklist

You must complete the following steps to ensure your application is processed:

- complete **ALL** required sections in this customer identification form
- provide certified copies of document(s), as requested in this customer identification form, either to us or to your financial adviser
- enclose this completed form with your completed investment application form and send to Perpetual.

1.4: Partnership details – Partnerships not regulated by a professional association

If the Partnership is not regulated by a professional association, provide the names and addresses of all the other Partners.

Partner 1	Partner 2	Partner 3
first name(s) / business name <input type="text"/>	first name(s) / business name <input type="text"/>	first name(s) / business name <input type="text"/>
last name <input type="text"/>	last name <input type="text"/>	last name <input type="text"/>
residential / business address (PO Box is NOT acceptable) <input type="text"/>	residential / business address (PO Box is NOT acceptable) <input type="text"/>	residential / business address (PO Box is NOT acceptable) <input type="text"/>
suburb (if relevant) state OR city <input type="text"/> <input type="text"/>	suburb (if relevant) state OR city <input type="text"/> <input type="text"/>	suburb (if relevant) state OR city <input type="text"/> <input type="text"/>
country postcode <input type="text"/> <input type="text"/>	country postcode <input type="text"/> <input type="text"/>	country postcode <input type="text"/> <input type="text"/>

If there are more Partners, provide details on a separate sheet and tick this box

1.5: Beneficial Ownership

Are there any individuals who ultimately own 25% or more of the Partnership; or are entitled (either indirectly or directly) to exercise 25% or more of the voting rights of the Partnership, including power of veto? Yes (complete 1.5.1) No (complete 1.5.2)

1.5.1: Beneficial Owners

Provide the names of the individuals who ultimately own 25% or more of the Partnership; or are entitled (either indirectly or directly) to exercise 25% or more of the voting rights of the Partnership, including power of veto?

Complete separate Individual customer ID Forms for each of these individuals (unless already provided in 1.3)

	first name(s)	last name
1.	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>

If Beneficial Owner name(s) are provided above, proceed to section 2.

1.5.2: Other Beneficial Owners

If there are no individuals who meet the requirement of 1.5.1, provide the names of the individuals who directly or indirectly control* the Partnership.

* includes exercising control through the capacity to determine decisions about financial or operating policies; or by means of trusts, agreements, arrangements, understanding & practices. If no such person can be identified then the most senior managing official(s) of the Partnership (such as the managing Partner or senior managing official).

Complete separate Individual customer ID Forms for each of these individuals (unless already provided in 1.3)

1. first name(s)

last name

role (such as Senior Managing Partner / Authorised Signatory)

2. first name(s)

last name

role (such as Senior Managing Partner / Authorised Signatory)

3. first name(s)

last name

role (such as Senior Managing Partner / Authorised Signatory)

4. first name(s)

last name

role (such as Senior Managing Partner / Authorised Signatory)

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

Section 2: Tax information

Collection of tax status in accordance with the United States Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS). Tax information requested in this form is explained on our website at www.perpetual.com.au/tax.

2.1: Tax status

Tick ✓ one of the 3 Tax status boxes below (A-C)

(if the Partnership 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 and CRS purposes)

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

If the Partnership 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

US Financial Institution

Other

If you are a Specified US Person, provide your TIN

Describe the Partnership's FATCA status

PLEASE ANSWER THE QUESTION BELOW FOR ALL FINANCIAL INSTITUTIONS

Is the Financial Institution an Investment Entity located in a Non-Participating CRS Jurisdiction and managed by another Financial Institution?

Yes No

If Yes, proceed to section 2.2 (Foreign Controlling Persons).

If No, proceed to section 3 to complete the form.

CRS participating and committed jurisdictions are on the Perpetual website at www.perpetual.com.au/crs-participating-jurisdictions

B An Active Non-Financial Entity (NFE)

(Active NFEs include entities where, during the previous reporting period, less than 50% of their gross income was passive income (e.g. dividends, interests and royalties) and less than 50% of assets held were for the production of 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' at www.oecd.org.)

If the Partnership is an Active NFE, proceed to section 2.3 (Country of tax residency).

C

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

Proceed to section 2.2 (Foreign Controlling Persons).

2.2: Foreign Controlling Persons

Are any of the Partnership's Controlling Persons* tax residents of countries other than Australia? Yes No

* A Controlling Person is any individual who directly or indirectly owns or controls the Partnership and includes all Partners or Senior Managing Officials.

Tax Residency rules differ by country. Whether an individual is tax resident of a particular country is often (but not always) based on the amount of time a person spends in a country, the location of a person's residence or place of work. For the US, tax residency can also be as a result of citizenship or residency.

If Yes, please provide the details of these individuals below and complete a separate Individual Identification Form for each Controlling Person (unless already provided in 1.3 as Beneficial Owner or 1.4 as the identified Partner).

	first name(s)	last name
1.	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>

If there are more controlling persons, provide details on a separate sheet and tick this box

Proceed to section 2.3.

2.3: Country of tax residency

Is the Partnership a tax resident of a country other than Australia? Yes No

(A Partnership created or established under the laws of a country other than Australia)

If the Partnership is a tax resident of a country other than Australia, please provide its tax identification number (TIN) or equivalent below. If it is a tax resident of more than one other country, please list all relevant countries below.

If No, proceed to section 3 to complete the form.

A TIN is the number assigned by each country for the purposes of administering tax laws. This is the equivalent of a Tax File Number in Australia or a Social Security 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. Country	<input type="text"/>	TIN	<input type="text"/>	If no TIN, list reason A, B or C	<input type="checkbox"/>
2. Country	<input type="text"/>	TIN	<input type="text"/>	If no TIN, list reason A, B or C	<input type="checkbox"/>
3. Country	<input type="text"/>	TIN	<input type="text"/>	If no TIN, list reason A, B or C	<input type="checkbox"/>

If there are more countries, provide details on a separate sheet and tick this box

Reason A The country of tax residency does not issue TINs to tax residents

Reason B The Partnership has not been issued with a TIN

Reason C The country of tax residency does not require the TIN to be disclosed

Section 3: Partnerships and Partners identification documents

Complete section 3.1 for all Partnerships and section 3.2 if the Partnership is a member of a professional association.

- **If you are applying directly with Perpetual** – You will need to provide a certified copy of the document(s) with your application
- **If you are lodging this application through a financial adviser** – You may provide a certified copy of the document(s) with your application **OR** have your adviser sight an original or certified copy of your document(s).

3.1: Partnership name verification

Select ✓ only **ONE** of the following options used to verify the Partnership

- An original, a certified copy or certified extract of the Partnership agreement.*
- A certified copy or a certified extract of minutes of a Partnership meeting.*
- An original, or a certified copy of a current membership certificate (or equivalent) of a professional association.*
- Membership details independently sourced from the relevant professional association.*
- A search of the relevant ASIC, government or other regulator's database (such as ABN lookup).
- A certified copy of a notice issued by the Australian Taxation Office within the last 12 months eg Notice of Assessment. Block out the TFN before scanning, copying or storing this document.
- An original or certified copy of a certificate of registration of business name issued by a government or government agency in Australia.*

Section 3.2: Professional membership verification

Select ✓ only **ONE** of the following options used to verify the Partnership

- An original current membership certificate (or equivalent).*
- Membership details independently sourced from the relevant association.*

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

How to certify your documents

A certified copy means a document that has been certified as a true and correct copy of a document by a person listed below, including all persons described in the Statutory Declarations Regulations 1993.

To create a certified copy, one of the persons listed below must write the following on the copy of the document.

'I, [full name], [category of persons as listed below], certify that this [name of document] is a true and correct copy of the original. [signature and date]'

- An Australian bank, building society, credit union or finance company officer with a minimum of 2 years continuous service
- A fellow of the National Tax and Accountants' Association
- An Australian judge of a court, Justice of the Peace or magistrate
- An Australian legal practitioner
- A notary public
- An Australian medical practitioner including dentist, nurse, optometrist, pharmacist, physiotherapist, psychologist or veterinary surgeon
- A permanent employee or agent of the Australian Postal Corporation with a minimum of 2 years continuous service
- An Australian federal, state or territory police officer
- A teacher employed on a full-time basis at an Australian school or tertiary education institution
- An accountant who is a full member of the Chartered Accountants Australia and New Zealand, CPA Australia, the Institute of Public Accountants or the Association of Taxation and Management Accountants
- An Australian Consulate or Diplomatic Officer
- An officer or authorised representative of an Australian Financial Services Licence holder with a minimum of 2 years continuous service with one or more licensees
- A person in a country other than Australia who is authorised by local law to administer oaths or affirmations or to authenticate documents (please list the local law providing this authority when certifying the document)

IMPORTANT: Please ensure that you have either

- provided a customer ID Form for **ONE** of the Partners as per 1.3 **AND**
- provided individual customer ID Forms for **EACH** of the Partnership’s Beneficial Owners as per 1.5 **AND**
- attached a legible certified copy of the ID documentation used to verify the Partnership and selected Partner (and any required translation) **OR** complete the Record of Verification Procedure section below, and **DO NOT** attach copies of the ID Documents.

Section 4: Record of verification procedure (Adviser use only)

This section is to be used by Advisers (Australian Financial Services (AFS) licensees only) when a record of verification is provided, rather than certified copies of identity documentation.

Please verify: 1. The existence of the Partnership and if it is regulated by a professional association; **AND**
2. The identity of the individual Partner.

ID document details	Document 1	Document 2 (if applicable)
verified from	<input type="checkbox"/> performed search <input type="checkbox"/> original <input type="checkbox"/> certified copy	<input type="checkbox"/> performed search <input type="checkbox"/> original <input type="checkbox"/> certified copy
document issuer / website	<input type="text"/>	<input type="text"/>
public document type	<input type="text"/>	<input type="text"/>
issue date / search date	<input type="text" value="dd / mm / yyyy"/>	<input type="text" value="dd / mm / yyyy"/>
accredited English translation	<input type="checkbox"/> N/A <input type="checkbox"/> sighted	<input type="checkbox"/> N/A <input type="checkbox"/> sighted

By completing and signing this Record of Verification Procedure I declare that:

- an identity verification procedure has been completed in accordance with AML/CTF Rules, in the capacity of an AFSL holder or their authorised representative;
- individual customer ID Forms have been provided for all of the Partnership’s Beneficial Owners;
- customer ID forms have been provided for one of the Partners; and
- the tax information provided is reasonable considering the documentation provided.

AFS licensee name	<input type="text"/>	AFSL number	<input type="text"/>
representative / employee name	<input type="text"/>	phone number	<input type="text"/>
signature	<input type="text"/>	date verification completed	<input type="text" value="dd / mm / yyyy"/>