

IDENTIFICATION FORM REGISTERED CO-OPERATIVE

GUIDE TO COMPLETING THIS FORM

- o This form is for REGISTERED CO-OPERATIVES.
- o Provide details for the registered cooperatives Beneficial Owners (Section 1.3) and provide separate INDIVIDUAL ID Forms for each of these Beneficial Owners.
- o Tax information must be collected from an authorised representative of the Registered Co-operative
- o Complete all applicable sections of this form in BLOCK LETTERS.

SECTION 1: REGISTERED CO-OPERATIVE IDENTIFICATION PROCEDURE

1.1 General Information

Full name of Registered Co-operative

Provide ID number issued by relevant registration body (if any)

Full name of the following (or equivalent in each case):

	Full given name(s)	Surname
Chairman	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>
Secretary	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>
Treasurer	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>

1.2 Address Information *(select ✓ and provide ONE of the following)*

Principal place of operations

Address *(PO Box is NOT acceptable)*

Street

Suburb State Postcode Country

If a principal place of operations provided go to Section 1.3.

Registered office

Address *(PO Box is NOT acceptable)*

Street

Suburb State Postcode Country

If a registered office is provided go to Section 1.3.

Name & Residential address of the Secretary *(or president or treasurer if there is no secretary)*

Full Given Name(s) of officer (if applicable)	Surname	Position
<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>

Address *(PO Box is NOT acceptable)*

Street

Suburb State Postcode Country

Go to Section 1.3.

1.3 Beneficial Ownership

Provide the names of the individuals that directly or indirectly control the Registered Co-operative, such as the Chairman, President, Treasurer or Secretary.

Complete separate individual customer ID Forms for each of these individuals.

Full given name(s)	Surname	Role <i>(such as Chairman, President, etc.)</i>
<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>
<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>
<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>

Please Note: Beneficial Owner/s must be listed above and individual ID Forms completed for all Beneficial Owners.

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).

Is the Registered Co-operative a tax resident of a country other than Australia? Yes No

(A Registered Co-operative created or established under the laws of a country other than Australia)

If Yes, please provide the Registered Co-operative's country of tax residence and tax identification number (TIN) or equivalent below. If the Registered Co-operative is a tax resident of more than one other country, please list all relevant countries below.

If No, proceed to section 3.

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 an Employee Identification 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="text"/>
2.	Country	<input type="text"/>	TIN	<input type="text"/>	If no TIN, list reason A, B or C	<input type="text"/>
3.	Country	<input type="text"/>	TIN	<input type="text"/>	If no TIN, list reason A, B or C	<input type="text"/>

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 Registered Co-operative has not been issued with a TIN

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

SECTION 3: REGISTERED CO-OPERATIVE VERIFICATION PROCEDURE**Registered Co-operative Verification procedure**

Information to be verified:

- o Full name of the Registered Co-operative
- o ID number issued by relevant registration body (if any)

Tick ✓	Verification options (select one or more of the following options used to verify the Registered Co-operative)
<input type="checkbox"/>	Information provided by ASIC or the relevant registration body responsible for the registration of the Registered Co-operative. *
<input type="checkbox"/>	An original or certified copy or certified extract of the register maintained by the Registered Co-operative. *
<input type="checkbox"/>	An original, certified copy or certified extract of the minutes of a meeting of the Registered Co-operative. *
<input type="checkbox"/>	A search of the relevant ASIC, government or other regulator's database (such as ABN lookup).

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

IMPORTANT NOTE:

- Ensure that individual customer ID Forms have been provided for the registered cooperative's Beneficial Owners as per 1.3 AND
- Attach a legible certified copy of the ID documentation used to verify the Registered Co-operative (and any required translation)