PERPETUAL PRIVATE WRAP

Guide to completing W-8BEN individual US tax forms

APPLICABLE TO INDIVIDUALS AND JOINT ACCOUNTS



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Perpetual Private Wrap is the marketing name for the Perpetual Private Investment Wrap (Investment Wrap) an Investor Directed Portfolio Service (IDPS) operated by Perpetual Trustee Company Limited (PTCo), ABN 42 000 001 007, AFSL 236643. The Perpetual Cash Account is a wholesale deposit with Macquarie Bank Limited ABN 46 008 583 542 AFSL 237502. Perpetual Private advice and services are provided by PTCo. This publication has been prepared by PTCo and is dated 20 January 2017.

Investments in financial products accessible through Perpetual Private Investment Wrap are subject to investment risk, including possible delays in repayment and loss of income or principal invested.

This document has been prepared as a general guide only. This is not personal advice. This Guide to completing W-8BEN US tax forms has been prepared without taking into account your objectives, financial situation or needs. Therefore, you should consider the appropriateness and relevance of this document, taking into account your specific circumstances.

Perpetual strongly recommends that you seek independent taxation advice specific to your circumstances.

1/ GENERAL INFORMATION

1.1 WHO IS THIS GUIDE INTENDED FOR?

This guide is intended for individual investors that:

- are Australian residents for tax purposes
- are invested in securities that are dual listed on the ASX and a stock exchange in the United States of America (US), and
- hold these securities on your Wrap platform.

1.2 WHAT IS A W-8BEN FORM?

For listed securities that derive income in the United States of America (US), the US Internal Revenue Service (IRS) requires certain documentation from the ultimate beneficial owner to ensure the appropriate level of tax is withheld in the US. Individual investors who are non-residents for US tax purposes, are required to complete a W-8BEN form – Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding.

Generally, investors who are a non-resident of the US for tax purposes are subject to a maximum withholding tax rate of 30 per cent on certain income they derive from US sources. Where the requisite form is completed in full by an investor, a withholding tax of 15 per cent may apply for Australian tax residents who derive certain income sourced in the US, in accordance with the Australia/US Double Taxation Agreement (DTA).

The example in this guide is provided to assist with completing the W-8BEN form and does not constitute legal, financial or taxation advice. This guide has been completed using information provided in the IRS W-8BEN instructions, which can be found on the IRS website, <u>irs.gov</u>. For additional information, <u>Computershare</u> has also provided guidance on this form.

Investors should seek independent professional advice relevant to their specific circumstances, before submitting a W-8BEN form.

1.3 WHO SHOULD COMPLETE A W-8BEN FORM?

For individual investors in Perpetual Private Wrap, a W-8BEN form must be completed by the beneficial owner(s) who are **not** US citizens or residents for tax purposes. Where there are multiple beneficiaries, such as a joint account, a form must be completed for each beneficiary. Further details are set out below under 'Form completion'.

For members of our superannuation fund (the Fund), no action is required. As the Fund holds these assets in trust, the trustee of the Fund will complete the form as required.

Individual investors who are a US citizen or tax resident, will need to complete a W-9 form – Request for Taxpayer Identification Number and Certification. This can be accessed on the IRS website, irs.gov.

Please note, non-US entities (including deceased estates) must use form W-8BEN-E. For further information on the W-8BEN-E form, please see *Guide to completing W-8BEN-E entity US tax forms*.

1.4 FORM COMPLETION

A W-8BEN form will need to be completed where an individual investor holds a security that may distribute certain US sourced income. These include securities that are dual-listed (ie listed on the Australian Securities Exchange and a US stock exchange). Only one form is required per individual investor, regardless of how many dual-listed securities are held.

Generally, a current W-8BEN form will remain in effect until 31 December, three years after the date of signing. For example, a form signed on 15 March 2018 will remain in effect until 31 December 2021.

However, if a change in circumstances makes any information on the form incorrect, a new W-8BEN form (or other appropriate form) must be filed to continue to claim a reduced rate of withholding tax under the DTA. Note that no alterations or correction fluid is accepted on the W-8BEN form. Any amendments will lead to the rejection of the form.

Once completed, please submit the original signed W-8BEN form to your adviser or Operator, with any other required documentation. Perpetual Private Wrap's address is GPO Box 5230 Sydney NSW 2001. <u>Do not</u> send the form directly to the share registry, as further information is required from us prior to submission.

Please ensure that any forms completed are accurate and complete as penalties may be imposed by the IRS.

For information on the ability of a taxpayer to claim a foreign income tax offset for tax withheld in the US, please view frequently asked questions and answers on W-8BEN forms on the Wrap Tax website, tax.perpetual.com.au.

2/ GUIDELINES FOR COMPLETING THE W-8BEN FORM

2.1 Individual account/each individual beneficial owner of a joint account

EXAMPLE CLIENT SCENARIO

- Account name: Mr John Smith
- Registered address: 1 Orange Street, Sydney NSW 2000
- Client is an Australian resident for tax purposes.

SECTIONS TO COMPLETE

Name and address as appearing on the register of the securityholders: Enter your Wrap Code. This can be found on the Account Details report under Account No or from your adviser.



Part I: Identification of Beneficial Owner

- Item 1: Enter your name. This must match the name on the relevant Wrap application form.
- Item 2: Enter your country of citizenship eg Australia. If you are a dual citizen, enter the country where you are both a citizen and a resident for tax purposes at the time of completing this form. If you are not a resident in any country in which you have citizenship, enter the country where you were most recently a resident.
- Item 3: Enter your residential address.
- Item 5: Enter your US TIN or social security number (if applicable). Do not enter your Australian Tax File Number (TFN). If you do not have a TIN leave this box blank.
- Item 8: Enter your date of birth.

| 1 | Name of individual who is the beneficial owner JOHN SMITH | 2 Country of AUST1 | of citizenship RALIA | | | |
|----|--|---------------------------------------|-------------------------|--|--|--|
| 3 | Permanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address, 1 ORANGE STREET | | | | | |
| | Oily or town, state or province, include postal code whe SYDNEY NSW 2000 | Gountry AUSTRALIA | | | | |
| 4 | Mailing address (if different from above) | | | | | |
| | City or town, state or province. Include postal code whe | Country | | | | |
| 5 | U.S. taxpayer identification number (SSN or ITIN), if requ | uired (see instructions) | | | | |
| 6a | Foreign tax identifying number (see instructions) | 6b Check if FTIN not legally required | i | | | |
| 7 | Reference number(s) (see instructions) | 8 Date of birth (MM-DD-YYYY) (se | e instructions) | | | |

Part II: Claim of Tax Treaty Benefits

Item 9: Enter the country of tax residency for the account (eg Australia).

| 9 | I certify that the beneficial owner is a resident of | AUSTRALIA | within the meaning of the income to | | | | |
|----|---|----------------------------------|--|--|--|--|--|
| | treaty between the United States and that country. | | | | | | |
| 10 | Special rates and conditions (if applicable—see instructions): The beneficial owner is claiming the provisions of Article and paragraph | | | | | | |
| | of the treaty identified of | on line 9 above to claim a 96 ra | te of withholding on (specify type of income): | | | | |
| | | | | | | | |
| | | | | | | | |

Part III: Certification - Sign Here

- Sign and date the form. Your name must match the name on the relevant Wrap application form. Please note, each beneficial
 owner of a joint account must complete, sign and return a separate W-8BEN form.
- 'Capacity in which acting'. If form is completed by an agent under a duly authorised Power of Attorney, the form must be
 accompanied by a copy of the Power of Attorney.
- Please submit the original signed W-8BEN form to your adviser or Operator. <u>Do not</u> send the form directly to the share registry, as further information is required from us prior to submission.



3/ BLANK W-8BEN FORM - INDIVIDUALS

Form W-8BEN-E

Certificate of Status of Beneficial Owner for United States Tax Withholding and Reporting (Entities)

| Departr | ctober 2021) ment of the Tre Revenue Serv | easury vice | e by entitie ► Go ► G | s. Individuals must use For to www.irs.gov/FormWa live this form to the with | m W-8BEN. ▶ 8BENE for ins holding agen | Section truction t or pay | references ns and the er. Do no | s are to the Internal R e latest information t send to the IRS. | Revenue Code. I. | OMB No. 1545-1621 |
|---------------------------------|---|---|---------------------------------------|--|--|---------------------------------|---|--|--|--|
| ddres opea giste | and ss as ring on the er of the tyholders | Bond Street C Wrap Accoun | t No. | s Limited | | | | | | |
| Must include Country in full | | GPO Box 4067 Sydney NSW 2001 | | | | | Securityholder Reference Number (SRN) Holder Identification Number (HIN) FOR INTERNAL USE ONLY – please do not complete | | | |
| ount | ry in full | Country | | AUSTR | ALIA | ١ | | | | |
| Par | t I Ide | entification (| of Bene | ficial Owner | | | | | | |
| 1 | Name of org | ganization that i | s the bene | eficial owner | | | | 2 Country of ir | ncorporation | or organization |
| 3 | Name of dis | sregarded entity | receiving | the payment (if applic | able, see ins | truction | ns) | | | |
| 4 | Simple | trust Bank of Issue | ☐ Ta | check one box only): ux-exempt organization ivate foundation sregarded entity | ☐ Com | | | ☐ F | Ü | nment - Controlled Enti nment - Integral Part |
| | - | | | , simple trust, or grantor tru | | | • | | | |
| 5 | Nonpar | ticipating FFI (ir | ncluding a ed-compli | e instructions for detai in FFI related to a Repo ant FFI, participating F | orting IGA | □ N □ F | lonreport oreign go | ing IGA FFI. Com | plete Part XII. | S. possession, or foreig |
| | Reporti Registe FFI, spe See ins | onsored FFI, or structions. ored FFI. Compl | mpliant F nonreport ete Part I\ | FI (other than a reporti ing IGA FFI covered in /. registering local bank. | Part XII). | E: | xempt rentity who erritory fixcepted xcepted xcepted | inancial institution nonfinancial grou | omplete Part opt beneficial on omplete P op entity. Com output ou | XV. owners. Complete Part X art XVII. plete Part XVIII. . Complete Part XIX. |
| | Comple | ete Part VI. | | with only low-value ac | | □ N □ P | lonprofit ublicly tr | anization. Comple organization. Con aded NFFE or NF on. Complete Part | nplete Part XX FE affiliate of | |
| | vehicle | . Complete Part | VII. | d life debt investment e | | | | territory NFFE. Co FE. Complete Par | | XXIV. |
| | ☐ Certain | | es that do | not maintain financial a | accounts. | ☐ E: | xcepted | FFE. Complete Pa inter-affiliate FFI. | | rt XXVII. |
| | Owner- | ete Part IX. -documented FF | | | | □s | ponsore | orting NFFE. d direct reporting | | lete Part XXVIII. |
| 6 | | ted distributor. (esidence addres | | | route). Do no | | | hat is not a financ cor in-care-of add | | an a registered address). |
| | City or towr | n, state or provii | nce. Inclu | de postal code where a | appropriate. | | | | Country | |
| 7 | Mailing add | ress (if different | from abo | ve) | | | | | | |
| | City or towr | n, state or provi | nce. Inclu | de postal code where a | appropriate. | | | | Country | |
| | perwork Re | | | | | | Cat. No. 59 | | | V-8BEN-E (Rev. 10-20) |

Australian Capital Territory

Level 6 10 Rudd Street Canberra ACT 2601

New South Wales

Angel Place Level 12 123 Pitt Street Sydney NSW 2000

Queensland

Central Plaza 1 Level 15 345 Queen Street Brisbane QLD 4000

South Australia

Level 11 101 Grenfell Street Adelaide SA 5000

Victoria

Rialto South Tower Level 35 525 Collins Street Melbourne VIC 3000

Western Australia

Exchange Plaza Level 29 2 The Esplanade Perth WA 6000

www.perpetual.com.au





Checklist for Completing the W-8BEN Form

| Below is a checklist to assist in the completion of the W-8BEN form |
|---|
| The form available on the tax website has been used |
| The form available on the tax website has been used |
| Wrap account details have been provided |
| Name of an individual that is a beneficial owner |
| Country of citizenship |
| Permanent address |
| Date of birth |
| Relevant sections completed in Part II |
| Only one beneficial owner signs and prints their name on each form |
| The document has been dated |
| Please ensure the complete W-BEN form is submitted either via email to wrapsolutions@macquarie.com or via registered post to the following address: GPO Box 4067, Sydney, NSW, 2001 |
| Failure to complete any of the items identified in this checklist may result in the form being rejected by the |

Failure to complete any of the items identified in this checklist may result in the form being rejected by the Share Registry and the <u>full rate of withholding tax being applied</u>. We cannot guarantee the receipt of any form. We will pass on valid forms received to the Share Registry.

Form W-8BEN

(Rev. October 2021)

Department of the Treasury Internal Revenue Service

Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)

► For use by individuals. Entities must use Form W-8BEN-E.

Go to www.irs.gov/FormW8BEN for instructions and the latest information.

▶ Give this form to the withholding agent or payer. Do not send to the IRS.

OMB No. 1545-1621

| ivame | and | Bond Street Custodia | ins Limited | _ | | | | |
|-----------------|--|---|--|---|---------------|--------------------------|--|-------------|
| addres | | Wrap Account No. | | | | | | |
| registe | aring on the er of the tyholders | Wrap Account Name. | | | | | | |
| oodan | tyrioladio | GPO Box 4067 | | | Securit | yholder Referenc | ce Number (SRN) | |
| | | Sydney NSW 2001 | | | Holder | Identification Nu | ımber (HIN) | |
| | include | Cyancy NOW 2001 | | | FOR INT | TERNAL USE ONLY | - please do not complete | |
| Count | ry in full | Country | AUSTRA | LIA | | | | |
| | | - | | | | | | |
| Note: provid | If you are res | sident in a FATCA partn risdiction of residence. | er jurisdiction (that is, a Mo | odel 1 IGA jurisc | diction w | ith reciprocity), c | ertain tax account information | may be |
| Part | | | ficial Owner (see instr | uctions) | | | | |
| 1 | | dividual who is the bene | | | | 2 Country of c | · | |
| 3 | Permanent | residence address (stre | et, apt. or suite no., or rural | route). Do not u | se a P.C |). box or in-care | -of address. | |
| | City or towr | n, state or province. Incl | ude postal code where appr | ropriate. | | | Country | |
| 4 | Mailing add | ress (if different from ab | ove) | | | | | |
| | City or towr | n, state or province. Incl | ude postal code where appr | ropriate. | | | Country | |
| 5 | U.S. taxpay | ver identification number | r (SSN or ITIN), if required (s | ee instructions) | | | | |
| 6a | Foreign tax | identifying number (see | instructions) | 6b Check if F | TIN not | legally required . | | . 🗆 |
| 7 | Reference r | number(s) (see instructio | ns) | 8 Date of birth (MM-DD-YYYY) (see instructions) | | | | |
| Part | II Clai | m of Tax Treaty B | enefits (for chapter 3 | purposes onl | y) (see | instructions) | | |
| 9 | | t the beneficial owner is | · · · · · · · · · · · · · · · · · · · | • | 3 7 (| , | within the meaning of the inco | me tax |
| | • | een the United States a | • | | | | | |
| 10 | Special rat | | | | | | risions of Article and paragraph Iding on (specify type of income | |
| | Explain the | additional conditions in | the Article and paragraph the | he beneficial ow | ner mee | ts to be eligible fo | or the rate of withholding: | <u> </u> |
| Part | III Ceri | tification | | | | | | |
| | | | ne information on this form and to the | hest of my knowledge | and helief it | t is true correct and co | implete. I further certify under penalties of p | eriury that |
| • I am | the individual t | | or am authorized to sign for the | _ | | | income or proceeds to which this fo | |
| • The p | person named | on line 1 of this form is not | a U.S. person; | | | | | |
| • This | form relates to: | | | | | | | |
| ` , | | • | onduct of a trade or business in | | • | | | |
| . , | | • | uct of a trade or business in the | | is not sub | oject to tax under ar | n applicable income tax treaty; | |
| | • | | vely connected taxable income; | | | otion 1446(f) | | |
| | - | | sfer of a partnership interest sub | - | | | eaty between the United States and that co | ountry: and |
| · | | | ne beneficial owner is an exemp | | | · | eaty between the officed States and that oc | runniy, and |
| Furthern | nore, I authorize | this form to be provided to any | withholding agent that has control, | receipt, or custody | of the incor | me of which I am the b | peneficial owner or any withholding agen | |
| Sign | Here | I certify that I have the | e capacity to sign for the person | n identified on line | 1 of this fo | orm. | | |
| | | | | | | | | |
| | | Signature of ben | neficial owner (or individual autho | orized to sign for b | eneficial o | owner) | Date (MM-DD-YYYY) | |
| | | | | | | | | |

Print name of signer