



# Tax File Numbers, Australian Business Numbers or Exemptions

UBS Asset Management (Australia) Ltd

Use this form if you are an existing investor and wish to update your Tax File Number, Australian Business Number or advise of a reason for exemption. If you are an existing investor who has invested through an IDPS or external broker you will need to contact that provider to change your details.

Please complete all sections in BLOCK letters, using a black pen. If you make an error while completing this form, do not use correction fluid. Cross out your mistakes and initial your changes.

## HOW TO COMPLETE THIS FORM

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### Step 1 Please ensure that you have completed the following:

- written your investor number and investor name as it appears on your latest statement
  - completed the tax section relevant to you
  - signed the form as per the 'Acknowledgements and signatures' in **section 5**.
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### Step 2 Send your documents to us.

You can return your forms by post, fax or email according to the details below:

You can return your forms by post to:  
UBS Asset Management (Australia) Ltd  
GPO Box 804  
Melbourne VIC 3001

Scan and email to: [ubs\\_transactions@unitregistry.com.au](mailto:ubs_transactions@unitregistry.com.au)

Please include your investor number in the subject line of your email.

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## LEGAL NOTICES

UBS Asset Management (Australia) Ltd ABN [31 003 146 290], Australian Financial Services Licence [222605], is the Responsible Entity and issuer of this Tax File Numbers, Australian Business Numbers or Exemptions Form.

Your privacy is important to us. We will treat all personal information in accordance with UBS Asset Management (Australia) Ltd's Privacy Policy. A copy of the Privacy Policy can be obtained by calling 1800 075 218 or +61 2 9324 3034 or from UBS Asset Management (Australia) Ltd's website: <https://www.ubs.com/global/en/legal/privacy/australia.html>

Last updated: 28 June 2022

## 1. INVESTOR DETAILS

Investor number

Investor name

## 2. TAX FILE NUMBERS, AUSTRALIAN BUSINESS NUMBERS OR EXEMPTIONS

### Individuals

Please provide your Australian Tax File Number (TFN) or reason for exemption. If you are an Australian resident and do not provide your TFN, or reason for exemption, you will be taxed at the highest marginal tax rate plus the Medicare levy.

TFN

Reason for exemption (see HELP box below)

### HELP

#### List of TFN Exemption Reasons:

- Entity not required to lodge an income tax return
- Investor is a pensioner
- Investor is a recipient of other benefit
- Investor is under 16 years of age
- Investor is in the business of providing finance
- Investor is not an Australian resident
- Investor is a Norfolk Island resident

### Companies

Please provide your Australian Business Number (ABN).

ABN

### Trusts or superannuation funds

Please provide the below information which is applicable to you.

ABN (applicable if you are a trust or a self-managed superannuation fund registered with the Australian Tax Office)

TFN

Australian Registered Scheme Number (ARSN) (applicable if your trust is registered with ASIC)

### 3. FOREIGN ACCOUNT TAX COMPLIANCE ACT AND COMMON REPORTING STANDARD (FATCA/CRS)

The Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) are regulatory requirements that aim to deter tax evasion by US and other foreign taxpayers. The Australian and a number of other foreign Governments have an agreement which requires us to obtain certain information from investors, including taxation information. You may be liable to a penalty if you provide information that is false or misleading that is material. We may decide not to open an account without first receiving the required information. For more information, visit [www.ato.gov.au](http://www.ato.gov.au).

If you are unsure of any of how our due diligence and reporting obligations under the FATCA/CRS may affect you, please contact a legal or accounting professional.

### 4. ACKNOWLEDGMENTS AND SIGNATURES

By completing and signing this form, you are telling us:

- authorise us to act according with the instructions on this form
- acknowledge that the instructions on this form supersede, and have priority over, all previous instructions received by us, and
- agree to indemnify us from and against all losses, costs, expenses, claims, actions or proceedings brought against us in connection with following your instructions on this form

#### Who needs to sign this form

**Individual** - where the investment is in one name, the account holder must sign.

**Joint Holding** - where the investment is in more than one name, all of the account holders must sign.

**Companies** - where the company has a sole director who is also the sole company secretary, this form must be signed by that person. If the company (pursuant to section 204A of the Corporations Act 2001) does not have a company secretary, a sole director can also sign alone. Otherwise this form must be signed by a director jointly with either another director or a company secretary. Please indicate the capacity in which the form is signed.

**Trust** - the trustee(s) must sign this form. Trustee(s) signing on behalf of the trust confirm that the trustee(s) is/are acting in accordance with such designated powers and authority under the trust deed.

**Power of Attorney** - if you have not already lodged the Power of Attorney with us, please attach an original certified copy of the Power of Attorney document that includes Certificate of Witness and Statement of Acceptance and original Certified Identification Document of the Power of Attorney. I/We attest that the Power of Attorney has not been rescinded or revoked and that the Donor is still living.

#### Signature of investor 1, director or authorised signatory

Signature

Date (DD/MM/YY)   /   /

Full name

#### Company officer (please indicate company capacity)

- |                                     |                          |
|-------------------------------------|--------------------------|
| Director                            | <input type="checkbox"/> |
| Sole director and company secretary | <input type="checkbox"/> |
| Authorised signatory                | <input type="checkbox"/> |

#### Signature of investor 2, director/company secretary or authorised signatory

Signature

Date (DD/MM/YY)   /   /

Full name

#### Company officer (please indicate company capacity)

- |                                     |                          |
|-------------------------------------|--------------------------|
| Director                            | <input type="checkbox"/> |
| Sole director and company secretary | <input type="checkbox"/> |
| Authorised signatory                | <input type="checkbox"/> |