

Macquarie Associations identification form

Macquarie Bank Limited ABN 46 008 583 542 AFSL and Australian Credit Licence 237502

Guide to completing this form

- This form is for Associations.
- Provide details for the Association's Beneficial Owners (section 1.4) and provide separate *Individual identification forms* for each of these Beneficial Owners.
- Complete separate Individual identification forms for each signatory on the account.
- Complete all applicable sections of this form in **BLOCK LETTERS**.

Acceptable ID documents - provide the following document to allow verification of the Association:

- an original certified copy or certified extract of the Constitution or Rules of the Association. The document must contain the full name of Association and if incorporated, ID number of incorporation.
- · all documents must have been certified within the last 12 months, at the time of acceptance by us.



Association identification procedure

Full name of Association:		
Industry of Operation (Primary)	:	
Business activity:		
Source of net wealth (select o	ne option only as the predominant source)*	*
Business operations Inheritance/gift	Savings from employment Sale of a property or asset	Superannuation Investments Legal settlement Foreign incom
Full name of the following (or these individuals. Chairman	equivalent in each case) - Complete separa	ate Individual identification forms for each of Treasurer
Full given name(s)	Full given name(s)	Full given name(s)
Tull given name(s)	Tuli given name(s)	Tuli giveri name(s)
Surname	Surname	Surname
Surname	Surname	Surname
	ONE of the following categories)	Surname
2 Association type (select Incorporated Association Body responsible for regist	ONE of the following categories)	

^{*} Source of wealth should be considered as a whole, including any beneficial owners if applicable.

Association identification procedure (continued)

Principal place of administrati	on address (PO Box is NOT acceptable)		
Street name and number:			
Suburb:		State:	Postcode:
Country:			
If a principal place of administra	ation provided ▶ go to section 1.4		
OR			
Registered office address (PO	Box is NOT acceptable)		
Street name and number:			
Suburb:		State:	Postcode:
Country:			
If a registered office is provided	▶ go to section 1.4		
OR	- CAle - modelle - CCl - model - model - model		: C - - - - - - - - -
Name and residential address Full given name(s) of officer (if ap	of the public officer (or president, secr	retary or treasure	er if there is no public office
Surname:		osition:	
Residential address (PO Box is	NOT acceptable)		
Street name and number:			
Suburb:		State:	Postcode:
		Jeaco.	rostcode.
Country:			rostcode.
Country: Beneficial ownership	mombers who directly or indirectly con		
Country: Beneficial ownership Provide the names of the individual	members who directly or indirectly cor ntification forms for each of these ind	ntrol* the Associa	
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^{*} Includes exercising control through the capacity to determine decisions about financial or operating policies; or by means of trusts, agreements, arrangements, understanding and practices; voting rights of 25% or more; or power of veto.



Tax information

Collection of tax status in accordance with t Standard (CRS).	he United States Foreign Account Tax Comp	iance Act (FATCA) and Common Reporting
Is the Association a tax resident of a ie. An Association created or established und	a country other than Australia? der the laws of a country other than Australia.	
	ation's country of tax residence and tax ider dent of more than one other country, please	
υ,	try for the purposes of administering tax lav fication Number in the US. If a TIN is not pro	,
Please note a US TIN must be provided if the reason will no longer be accepted. The account	e entity is a US Specified Person. This is a man int cannot be opened without a US TIN.	datory requirement and a TIN exemption
Country 1	Country 2	Country 3
Country 1 Country	Country 2 Country	Country 3 Country
•	•	<u> </u>
Country	Country TIN (if no TIN, list reason A, B or C) es not issue TINs to tax residents sued with a TIN	Country



Certification of identification documents

In order for documents to meet the certification requirements, the document must clearly be certified as a true copy of the original by an appropriate person. Each certified copy document must be certified separately and must show clearly:

- the date of Certification is to be no more than 12 months old at the time of acceptance by Macquarie,
- · written or stamped 'certified true copy',
- the wet ink signature of the certifying officer, the full name, provider/registration number (if applicable), and
- · profession/qualification of the certifying officer and years of service (if applicable), legibly printed below the signature.

Certification is only required on the first page of the document. The certifier needs to sight all pages of the document in order to ensure that they have reviewed the whole document.

Persons who can certify documents include:

- Justice of the Peace
- · Notary public
- · a police officer
- a permanent employee of the Australian Postal Corporation with two or more years of continuous service who is employed in an
 office supplying postal services to the public
- an officer with, or authorised representative of, a holder of an Australian financial services licence, having two or more years of continuous service with one or more financial institutions.

For a comprehensive list go to https://www.macquarie.com.au/everyday-banking/macquarie-client-identity-verification.html