

# **Customer verification form – Trusts**

All fields are mandatory, unless otherwise specified.

#### 1. Document Checklist Prior to completing this form, please review this section and ensure you have all required documents ready and obtained the necessary certifications (listed below). **Documents Required** Completed Customer Verification form – Trust Who needs to complete (this form). 1. Individual trustee. 2. Authorised person of the corporate trustee. a) Director of corporate Trustee b) Secretary of corporate trustee **Certified ID Documents** Who needs to provide Certified ID Documents: • Each Beneficial Owner as nominated on this form ONE Primary Photographic Identification Document • The Individual (if not a Beneficial Owner) who signs the OR Customer verification form. ONE Primary Non-Photographic Identification Document Acceptable documents AND • Valid Australian driver's licence Medicare card $oxedsymbol{oxed}$ ONE Secondary Identification Document Australian passport • Australian birth certificate • Foreign passport issued by a foreign government Please provide a certified copy of the following Example Certified Copy of verification document. verification documents: I, John Sample, as a Medical Practitioner, Trust Deed This deed made the 1 March 2005 Parties certify that this Trust Deed is a true copy of Name of Trust: The Smith Trust the original. AND Address of Trust: 123 Sample Street, Adelaide, SA, 5000 A Trust ABN: 123 456 789 01 Trust type: Discretionary trust Deeds of Amendment (if applicable) 1 February 2023 ereinafter collectively referred to as "The Trustees' recuted as a deed 1 March 2005

Trust Deed certified and signed by Medical Practitioner.

Signed, sealed and delivered by:
Frankie Cha

Witness name:

#### 2. Steps required

- Step 1: Ensure all relevant sections of the form are completed and the customer declaration is signed
- Step 2: Attach all certified copies of supporting documents
- Step 3: Return this completed form and certified copies of supporting documents as per Page 1 by email, post, or at a branch.

#### Email - businessIDSTG@stgeorge.com.au

OR

Post – If you are located in Australia, please send via Reply Paid to:

Business Identification Team Reply Paid 91348 SYDNEY NSW 2001

No stamp is required

If you are located outside Australia, please pay for postage and reply to:

Business Identification Team GPO Box 1806 SYDNEY NSW 2001 Australia

OR

**Branch** – If visiting a branch, don't forget to bring at least 2 forms of identification as per Certified ID documents section on Page 1. For certification instructions, go to the St.George website and search BizSecure then go to the FAQ section – "How do I certify my identity?"

Find your nearest branch by visiting the St.George website and search "Branch Location".

If you have any queries, please call our dedicated Business Identification Team on **1800 080 702** then select **option 2**, from anywhere in Australia (or **+61 2 9155 7522** select **option 1** then **option 2**, if calling internationally), 8am – 6:45pm AEST, Monday to Friday.

3. Trust details
Reference Number – You'll find this in the identification correspondence (email or letter) sent by the bank
Full name of the Trust
Are there any business, trading or other names of the Trust?
ABN of the Trust (if applicable)

3. Trust details (continued)				
Full address of the principal place of business of the Trust (please use a street address n Street	ot a PO Box)			
Suburb	State	Postcode		
Nature of business activities – Australia and New Zealand Standard Industry Code (A	NZSIC)			
Please provide us with details of the industry in which your business operates for examp	le real estate, dairy man	ufacturer.		
Country in which the Trust was established				
Trust's contact email address				
Name of Trustee 1 Full legal name (Individual or Entity)				
Tutt tegat frame (mulviduat of Emitty)				
Name of Trustee 2 (if applicable)				
Full legal name (Individual or Entity)				
Name of Trustee 3 (if applicable)				
Full legal name (Individual or Entity)				
Name of Trustee 4 (if applicable)				
Full legal name (Individual or Entity)				
Name of Trustee 5 (if applicable)				
Full legal name (Individual or Entity)				

3. Trust details (continued)			
Trust Type (Please select one from the list below)			
Unit/fixed			
Testamentary			
Discretionary (including family Trust)			
Unregistered Managed Investment Scheme			
Trust other than a Standard Trust			
Registered Managed Investment Scheme			
Australian Registered Scheme Number (ARSN)			
Regulated Trust  Name of the Trust regulator and the registration/licensing details (e.g. registration number, or ABN for a regulated SMSF)			
Traine of the Trust regulator and the registration/freehising details (e.g. registration number, of Abriton a regulated 5005)			
Government Superannuation Fund			
Name of the legislation establishing the fund			
Wholesale Unregistered Managed Investment Scheme			
Is the Trust a <b>Managed Investment Scheme</b> that is not registered by ASIC, and meets the following criteria:			
<ul> <li>Only has wholesale clients; and</li> <li>Does not make small scale offerings to which section 1012E of the Corporations Act 2001 applies</li> </ul>			
Yes			
4. Foreign Tax Residency			
Is the Trust a tax resident of any country outside of Australia?			
Yes Please indicate below the country(ies) outside of Australia in which the Trust is a resident for tax purposes and each country's associated Tax Identification Number (TIN)* (Min 1 – Max 5):			
Country Foreign TIN			
1			
2			
3 4			
5			
□ No <b>S</b> Go to next question			

\* A Foreign TIN is an identifying number or equivalent issued by the Trust's country of tax residency that is used for tax purposes. If the Trust is a tax resident in a jurisdiction that doesn't issue a TIN or equivalent, you'll need to provide evidence (which could include publicly available information) from an official authority written in English.

#### 5. Purpose of Business Relationship/Source of funds/Source of wealth Purpose of business relationship (please select one or more options) This refers to your reasons for engaging with us to obtain products and services. Customers may have multiple reasons for dealing with us. Please indicate all your reasons. Transactional Correspondent banking Wealth Savings Short-term borrowing Financial markets Protection Long-term borrowing Source of funds (please select one or more options) This refers to the origin of the funds that are the subject of the business relationship between you and us. Many customers have multiple sources of funds. Please indicate all your sources of funds. ☐ External investment/capital Injection Commission Tax refund Mergers and acquisitions Gift/donation Bonus Business profits Government grant Controlled money account Business income/earnings Liquidation of assets Loan Rental income Investment income/earnings $oxedsymbol{oxed}$ Insurance payment Sale of assets Corporate investments earnings Compensation payment Additional sources (please specify) Source of wealth (please select one or more options) This refers to the origin of your total net assets/total net worth. Many customers will have multiple sources of wealth. Please indicate all your sources of wealth **Business** profits Gift/donation ∪ Owns real estate/property Mergers and acquisitions Rental income Business income/earnings Controlled money account Insurance payment Investment income/earnings

# 6. Beneficial Owners

Liquidation of assets

Sale of assets

(This section is not applicable if Trust Other than a standard Trust was selected above and details provided) (Max of 4 Beneficial Owners)

Full name (given name/s and family name), full address (not a PO Box) and date of birth of each INDIVIDUAL who is a Beneficial Owner. Please attach certified copies of identification documentation for all (Beneficial Owners) as per the Document Checklist.

Corporate investments earnings

Compensation payment

#### A Beneficial Owner of a Trust refers to:

Additional sources (please specify)

- Generally, where the Trustee is an individual, the Trustee will be the Beneficial Owner.
- Where the Trustee is a non-individual, the person(s) that owns or controls the non-individual will be the Beneficial Owner(s).

Where no Beneficial Owner(s) can be identified under the ownership or control arrangement, an individual who holds the power to appoint or remove the Trustees of the Trust, such as the Appointer of a Trust must be identified. This individual should be outlined in the Trust Deed.

### 6. Beneficial Owners (continued)

If there is not enough space, provide details on a separate sheet and attach to this form, labelling the section that the attachment relates to.

Beneficial Owner 1					
Full name (as per identific	ation document)				
Other name(s) (if any)					
Are you a St.George custo (Your Customer Number o				)	Date of birth
Employment type (e.g. Fu	ll-time, Part-time, (	Casual)			
Occupation					
Full address (not a PO Bo Street	×)				
Suburb				State	Postcode
Mobile number			Email address		
ls Beneficial Owner 1 a ta	x resident of any co	ountry outside of Aus	tralia?		
_		untry(ies) in which Be d Tax Identification No			purposes
Country			Foreign TII	N	
1					
2					
3 4					
5					
☐ No <b>③ Go to next</b>	auestion		I		

<sup>\*</sup> A Foreign TIN is an identifying number or equivalent issued by the individual's country of tax residency that is used for tax purposes. If the Trust is a tax resident in a jurisdiction that doesn't issue a TIN or equivalent, you'll need to provide evidence (which could include publicly available information) from an official authority written in English.

#### 6. Beneficial Owners (continued) Purpose of business relationship (please select one or more options) This refers to your reasons for engaging with us to obtain products and services. Customers may have multiple reasons for dealing with us. Please indicate all your reasons. Transactional Correspondent banking Wealth Savings Short-term borrowing Financial markets Protection Long-term borrowing Source of funds (please select one or more options) This refers to the origin of the funds that are the subject of the business relationship between you and us. Many customers have multiple sources of funds. Please indicate all your sources of funds. Salary/wages Inheritance Compensation payment Redundancy Commission Gift/donation Bonus Liquidation of assets Windfall Government benefits Tax refund Business profits Superannuation/pension Insurance payment Sale of assets Investment income/earnings Rental income Business income/earnings Additional sources (please specify) Source of wealth (please select one or more options) This refers to the origin of your total net assets/total net worth. Many customers will have multiple sources of wealth. Please indicate all your sources of wealth Government benefits Windfall Business income/earnings **Business profits** Inheritance Compensation payment Rental Income Liquidation of assets Gift/donation Redundancy Employment income/earnings Owns real estate/property Insurance payment Superannuation/pension None Sale of assets Investment income/earnings

Additional sources (please specify)

Beneficial (	Owner 2			
	(as per identification document)			
utt name (	(as per identification document)			
Other name	e(s) (if any)			
	St.George customer? If yes, then ple			
Your Custo	our Customer Number can be found on your statement in St.George Online Banking)			Date of birth / /
Employme	nt type (e.g. Full-time, Part-time, Ca	asual)		
Occupation	n			
-ull addres	ss (not a PO Box)			_
Street				
Suburb			State	Postcode
Mobile nun	mher	Fmail a	address	
-robite riuri	iibei		add 633	
s Beneficia	al Owner 2 a tax resident of any cou	untry outside of Australia?		
Yes	Please indicate below the cour and each country's associated			k purposes
	Country		Foreign TIN	
	1			
	2			
	3			
	4 <u> </u>			

6. Beneficial Owners (continued)

<sup>\*</sup> A Foreign TIN is an identifying number or equivalent issued by the individual's country of tax residency that is used for tax purposes. If the Trust is a tax resident in a jurisdiction that doesn't issue a TIN or equivalent, you'll need to provide evidence (which could include publicly available information) from an official authority written in English.

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Investment income/earnings

Sale of assets

Additional sources (please specify)

Beneficial (	Owner 3				
ull name	(as per identification document)				
	· · · · · · · · · · · · · · · · · · ·				
Other nam	ne(s) (if any)				
	St.George customer? If yes, then pl				Date of birth
					/ /
Employme	ent type (e.g. Full-time, Part-time, C	Casual)			
Occupation	n				
	ss (not a PO Box)				
Street					
Suburb				State	Postcode
Mobile nun	nber		Email address		
	mber al Owner 3 a tax resident of any co	untry outside of Au			
s Beneficia		ıntry(ies) in which B	ustralia? Beneficial Owner 3 is a		urposes
s Beneficia	al Owner 3 a tax resident of any co	ıntry(ies) in which B	ustralia? Beneficial Owner 3 is a	Max 5):	urposes
s Beneficia	al Owner 3 a tax resident of any co Please indicate below the cour and each country's associated	ıntry(ies) in which B	ustralia? Beneficial Owner 3 is a R Number (TIN)* (Min 1 –	Max 5):	urposes
s Beneficia	al Owner 3 a tax resident of any co  Please indicate below the country's associated  Country	ıntry(ies) in which B	ustralia? Beneficial Owner 3 is a R Number (TIN)* (Min 1 –	Max 5):	urposes
s Beneficia	al Owner 3 a tax resident of any control Please indicate below the country and each country's associated  Country  1	ıntry(ies) in which B	ustralia? Beneficial Owner 3 is a R Number (TIN)* (Min 1 –	Max 5):	urposes
_	al Owner 3 a tax resident of any co  Please indicate below the country and each country  Country  1 2	ıntry(ies) in which B	ustralia? Beneficial Owner 3 is a R Number (TIN)* (Min 1 –	Max 5):	urposes

6. Beneficial Owners (continued)

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Investment income/earnings

Sale of assets

Additional sources (please specify)

Beneficial C	Owner 4				
Full name (a	as per identification document)				
Other name	e(s) (if any)				
	st.George customer? If yes, then ple				
(Your Custo	omer Number can be found on your	statement in St.Geo	rge Online Banking)		Date of birth
					/ /
Employmen	nt type (e.g. Full-time, Part-time, Ca	asual)			
Occupation					
Full address	s (not a PO Box)				
	s (not a PO Box)				
	s (not a PO Box)				
Street	s (not a PO Box)			State	Postcode
Street	s (not a PO Box)			State	Postcode
Street Suburb			Email address	State	Postcode
Street Suburb			Email address	State	Postcode
Street Suburb Mobile num	nber	ntry outside of Aust		State	Postcode
Suburb  Mobile num	nber Il Owner 4 a tax resident of any cou		ralia?		
Suburb  Mobile num	nber	try(ies) in which Ber	ralia? neficial Owner 4 is a I	resident for tax p	
Suburb  Mobile num	nber  Il Owner 4 a tax resident of any cou  Please indicate below the coun and each country's associated 1	try(ies) in which Ber	ralia? neficial Owner 4 is a I mber (TIN)* (Min 1 –	resident for tax p Max 5):	
Suburb  Mobile num	Downer 4 a tax resident of any cou  Please indicate below the coun and each country's associated Tountry	try(ies) in which Ber	ralia? neficial Owner 4 is a I	resident for tax p Max 5):	
Suburb  Mobile num	nber  Il Owner 4 a tax resident of any cou  Please indicate below the coun and each country's associated 1	try(ies) in which Ber	ralia? neficial Owner 4 is a I mber (TIN)* (Min 1 –	resident for tax p Max 5):	
Suburb  Mobile num	Downer 4 a tax resident of any courting and each country and country	try(ies) in which Ber	ralia? neficial Owner 4 is a I mber (TIN)* (Min 1 –	resident for tax p Max 5):	
Suburb  Mobile num	Downer 4 a tax resident of any courting and each country's associated Tountry  Country  1  2	try(ies) in which Ber	ralia? neficial Owner 4 is a I mber (TIN)* (Min 1 –	resident for tax p Max 5):	

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Superannuation/pension

Investment income/earnings

None

Insurance payment

Additional sources (please specify)

Sale of assets

6. Benefic	cial Owners (continued)				
Beneficial O	wner 5				
Full name (a	s per identification document)				
Other name(	s) (if any)				
	George customer? If yes, then p ner Number can be found on yo				Date of birth
(Tour Custor	ner Number can be found on yo	ur statement in St.Get	orge Online Banking)		/ /
Employment	type (e.g. Full-time, Part-time,	Casual)			, ,
Occupation					
Full address	(not a PO Box)				
Street					
Suburb				State	Postcode
Mobile numb	per		Email address		
	0 5		: 2		
	Owner 5 a tax resident of any c				
L Yes	Please indicate below the country's associated				rposes
	Country		Foreign TIN		
	1				
	2				
	3				
	4				
	5				
□ No. ♠	Go to next question				
140 🗸	GO TO HEAT QUESTION				

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#### 7. Foreign Tax Residency statement

We are required to identify tax residents of a country(ies) other than Australia in order to meet account information reporting requirements under local and international laws.

If at any time after account opening, information in our possession suggests that you, the entity and/or any individual who holds ownership and/or control in the entity of 25% or more (Beneficial Owner/Controlling Person) may be a tax resident of a country(ies) other than Australia, you may be contacted to provide further information on your foreign tax status and/or the foreign tax status of the entity and/or any Beneficial Owners/Controlling Persons. Failure to respond may lead to certain reporting requirements applying to the account.

You certify that if at any time there is a change to the foreign tax status details for you, the entity and/or any controlling persons, you will inform the bank. You also certify that if at any time there is a change of a controlling person/s in your entity, you will inform the bank.

A Beneficial Owner/Controlling Person refers to the individual(s) that directly or indirectly owns a legal interest in the entity of 25% or more and/or exercises actual effective control over the entity, whether from an economic or other perspective such as through voting rights. In addition, in the case of a Trust, a Beneficial Owner/Controlling Person includes the settlor(s), Trustee(s), appointer(s), protector(s), beneficiary(ies) or classes of beneficiaries and in the case of an entity other than a Trust, the term includes persons in equivalent or similar positions.

#### 8. Privacy statement and consent request

#### **Privacy statement**

All personal information we collect about you is collected, used and disclosed by us in accordance with our Privacy Statement which is available at <a href="mailto:statement">statement</a> or by calling us on 13 33 30. Our Privacy Statement also provides information about how you can access and correct your personal information and make a complaint. You do not have to provide us with any personal information, but if you don't, we may not be able to continue to provide products or services to the customer for which you are a Trustee, partner, representative, Beneficial Owner, or controlling person.

#### Consent request

You consent to St.George collecting and holding any sensitive information (such as health information or information about your racial or ethnic origin) which appears on certified copies of your identity documents. You will not be able to withdraw your consent to St.George holding this information after it has been provided because St.George is required to retain copies of identification documents under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006.

If you do not consent to St.George's collection of any such sensitive information, you may verify your identity in person at any St.George branch.

#### 9. Declaration

#### **Customer declaration**

I acknowledge and declare that to the best of my knowledge, the information I have provided above is true and correct as at the date of this document. I have been duly appointed by the entity and authorised to sign for and on behalf of the entity. I understand that it is an offence to knowingly give false or misleading information or knowingly produce a false or misleading document under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006. I confirm that there have not been any changes or amendments to the certified document on and from the date on which it was certified.

Where I am providing personal information about another individual, I have made them aware:

- that I will be doing this; and
- that St.George will collect, use and share their personal information in accordance with its Privacy Statement available at <a href="mailto:stgeorge.com.au/privacy/privacy-statement">stgeorge.com.au/privacy/privacy-statement</a>

Where I am providing St.George with another person's sensitive information, I have obtained their consent to sharing it with St.George and their consent to St.George collecting, using and disclosing their sensitive information in accordance with St.George's Privacy Statement.

## 9. Declaration (continued)

Signature of authorised person	Position held (Individua Trustee, Secretary of C		of Corporate
Entity Name	Date of signature		
Full name (given name/s and family name)	Customer Number (if a	pplicable)	
Are you also a Beneficial Owner and have provided your detail  Yes  No Please continue completing Signatory details of			
Signatory details if you are not a Beneficial Owner	questions below		
Full name (as per identification document)			
Other names (if any)	Date of birth		
Employment type (e.g. Full-time, Part-time, Casual)	1 1		
Occupation			
Full residential address (not a PO Box)			
Street			
Suburb	Sta	te	Postcode
Email address	Mobile number		
Are you a tax resident of any country outside of Australia?			
Yes Please indicate below the country(ies) in which y associated Tax Identification Number (TIN)* (Mir		ourposes and each	country's
Country	Foreign TIN		
1			
2			
3			
4			
5			

#### 9. Declaration (continued) O to next question \* A Foreign TIN is an identifying number or equivalent issued by the individual's country of tax residency that is used for tax purposes. If you're a tax resident in a jurisdiction that doesn't issue a TIN or equivalent, you'll need to provide evidence (which could include publicly available information) from an official authority written in English Purpose of business relationship (please select one or more options) This refers to your reasons for engaging with us to obtain products and services. Customers may have multiple reasons for dealing with us. Please indicate all your reasons. Transactional Correspondent banking Savings Short-term borrowing Financial markets Protection Long-term borrowing Source of funds (please select one or more options) This refers to the origin of the funds that are the subject of the business relationship between you and us. Many customers have multiple sources of funds. Please indicate all your sources of funds. Compensation payment Salary/wages Inheritance Commission Redundancy Gift/donation Bonus Liquidation of assets Windfall Loan Government benefits Tax refund Superannuation/pension **Business** profits Insurance payment Sale of assets Investment income/earnings Rental Income Business income/earnings Additional sources (please specify) Source of wealth (please select one or more options) This refers to the origin of your total net assets/total net worth. Many customers will have multiple sources of wealth. Please indicate all your sources of wealth. Government benefits Windfall Business income/earnings Inheritance Business profits Compensation payment Liquidation of assets Rental income Gift/donation Redundancy Employment income/earnings Owns real estate/property

Superannuation/pension

Investment income/earnings

Insurance payment

Additional sources (please specify)

Sale of assets

# 9. Declaration (continued)

Bank use only				
Please contact the Business Identification Team on <b>1800 080 702</b> then select <b>option 2</b> , between 8am – 6:45pm AEST, Monday to Friday.				
The team will be able to assist customers with completing the form.				
Kindly check all sections of the form are completed and signed.	Please check all required documents are certified correctly.			
The completed form and certified identification will need to be forwarded to <a href="mailto:businessIDSTG@stgeorge.com.au">businessIDSTG@stgeorge.com.au</a> after completing the Employee Declaration.				
Employee Declaration				
I have followed the process for identification and verification as required by policy and procedure and have verified the required information provided by the customer using approved verification source(s). Where the verification source has been provided by the customer the document is to the best of my knowledge a certified copy.				
Employee name (print)	Employee salary number			
Employee signature	Date			
X				