

Tax Information Addendum Individuals

	completed form and supporting documents to:		
	UTinstructions@satrixsupport.co.za	Fax	011 263 6155
ii you nave	any questions, contact us on.		
Tel	0860 111 401	E-mail	unittrusts@satrix.co.za.

Important information

- Please read all the information in this form carefully and ensure that you understand it.
- Any writing/instruction outside of the allocated fields will not be processed.
- We require this information in order to fulfil our obligations to the South African Revenue Services (SARS) for FATCA (Foreign Account Tax Compliance Act) and CRS (Common Reporting Standards) reporting under agreements for the Automatic Exchange of Information relating to tax residency.
- The Multilateral Competent Authority Agreements signed between the Government of South Africa and other countries were designed to improve international tax compliance.
- Sanlam and all its group companies are thus required to collect information from each client to ensure that their identification and classification is correct according to the tax requirements. We will report on clients' tax status to SARS.
- If you need assistance filling in this tax information, please contact your tax adviser.

1. Particu	ulars of in	ivesto	r			
Investor code Title: Mr	Mrs		 Other (please specif	fy)		
Full name(s)						
Surname						
Date of Birth			(dd/mm/ccyy)			
SA Identity num	ber			Nationality		
Passport number	er			Passport expiry date		(dd/mm/ccyy)
Country of birth				Passport country of issue		
Please specify a			oitizonobin			
Primary country	of residence	for tax p	urposes			
Tax Identificatio	n Number					
Are you a regist	ered tax paye	er of any	country other than yo	our primary country of residence?	Yes	No _
If "Yes", please	complete the	informa	tion below for each co	ountry of tax residence:		
Country of t	ax residence	е		Tax Identification Number	OR	Not applicable

By ticking "Not Applicable", you confirm that the country specified does not issue a Tax Identification Number. If you are a USA citizen you are resident for tax purposes in the USA.

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2. Declaration by investor / Authorised representative

- I / We certify that the information provided about my/our country of citizenship and country of tax residence is correct.
- I / We will notify Satrix Managers (RF) (Pty) Ltd immediately if my / our tax residency for Foreign Account Tax Compliance Act ('FATCA') or equivalent classification changes or if there are any changes in circumstances that may impact on my / our tax residency status and / or FATCA classification.

Signature of investor	Date signed	(dd/mm/ccyy)
*Authorised signatory	Date signed	(dd/mm/ccyy)
*Authorised signatory	Date signed	(dd/mm/ccyy)
*Authorised signatory	Date signed	(dd/mm/ccyy)
*Authorised signatory	Date signed	(dd/mm/ccyy)

SATRIX is an authorised financial services provider (FSP No. 15658) and a registered and approved Manager in Collective Investment Schemes in Securities. Collective investment schemes are generally medium- to long-term investments. Past performance is not necessarily a guide to future performance, and that the value of investments / unit / unit trusts may go down as well as up. A schedule of fees and charges and maximum commissions is available from the Manager on request. Collective investments are traded at ruling prices and can engage in borrowing and scrip lending. The Manager does not provide any guarantee either with respect to the capital or the return of a portfolio. The manager has the right to close the portfolio to new investors in order to manager it more efficiently in accordance with its mandate.

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^{*}Authorised signatory(ies) acting on behalf of the investor (e.g. parents / guardians of a minor and all persons authorised to act on behalf of the investor). Please refer to *Annexure A* for additional information required for each authorised signatory acting on behalf of the investor.



FICA - Additional information required

Important information

Each person acting on behalf of the investor will need to complete the sections below. In the event that more than one person is authorised to act on behalf of the investor, copies of this section can be made as required and must accompany the fully completed application form.

The information required is **mandatory** to meet legislative requirements and therefore the application will not be processed without receiving the additional information for each applicable party.

Particulars of Person ac	_	f Investor				
itle: Mr Mrs	Other (please specify)					
· · · · · · · · · · · · · · · · · · ·						
Surname Date of birth	(dd/mm/ccyy)	Country of bi	rth			
			ıuı	-		
		5				d/mm/ccyv
Passport Country of Issue						
Occupation						
Address details:						
Residential address						
Country					Postal o	code
Postal address						
 Country					Postal o	code
Telephone (home) (()	Work	() ()	
Country and area codes, e.g. +27	21 555 5555		+27	21	\	555 5555
Cell phone () Country and area codes, e.g. +27	82 555 5555	Fax:	+27	21		555 5555
Email address						
Tax status						
Primary country of residence for to	ax purposes					
Tax Identification Number						
Are you a registered tax payer of				e?	Yes	s [No
If "Yes", please complete the infor	rmation below for each o					
Country of tax residence		Tax Identification N	Number		OR	Not applicable
By ticking "Not Applicable", you co	nfirm that the country sp	ecified does not issue a	Tax Iden	tification N	umber.	
If you are a USA citizen you are res	ident for tax purposes in	the USA.				
certify that the information I ha	ave provided above is	true and correct.				
*Authorised signatory		Date sign	ad			(dd/mm/ccyy
Authorised signatory acting on behali	f of the investor	Date sign		-		(33/1111/1/00)
5 , 5	*					

11/2016 Satrix Managers (RF) (Pty) Ltd