

Foreign Tax Certification



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Please note the following:

bcu needs to verify whether you are a citizen or resident of another country for tax purposes, or if the entity is a Passive Non-Financial Entity or Financial Institution. All account owners must complete and sign the Foreign Tax Certification form. For a joint account, all account owners must sign, for a non personal entity, one person who has effective control over the entity can sign (e.g. company CEO, director, trustee, ultimate beneficial owner).

SECTION A - ACCOUNT NAME

Account Name

- Please select one:
- | | |
|---|-----------------|
| <input type="checkbox"/> Individual / Joint Account | Go to section B |
| <input type="checkbox"/> Non Personal Accounts | Go to section C |
-

SECTION B - INDIVIDUAL / JOINT ACCOUNT

1. Are you or any of the joint applicants US citizens or residents of the U.S. for tax purposes?

- | | |
|------------------------------|------------------|
| <input type="checkbox"/> No | Go to question 2 |
| <input type="checkbox"/> Yes | Go to section D |

2. Are you a resident for tax purposes of another country?

- | | |
|------------------------------|-----------------|
| <input type="checkbox"/> No | Go to section E |
| <input type="checkbox"/> Yes | Go to section D |
-

SECTION C - NON PERSONAL ACCOUNTS

1. Is the entity a financial institution?

Financial Institution means a Custodial Institution, Authorised Deposit Taking Institution or an Insurance Company.

- | | |
|------------------------------|----------------------------|
| <input type="checkbox"/> No | Go to question 2 |
| <input type="checkbox"/> Yes | Refer to Retail Operations |

2. Does the entity earn more than 50% of its gross income from interest, rent, dividends, distributions or royalties; OR use more than 50% of its assets to generate such income?

- | | |
|------------------------------|------------------|
| <input type="checkbox"/> No | Go to section E |
| <input type="checkbox"/> Yes | Go to question 3 |

3. Are any of the individuals who exercise control over the entity (e.g. company CEO, director, ultimate beneficial owner) :

a. US citizens or residents of the U.S. for tax purposes?

- | | |
|------------------------------|------------------|
| <input type="checkbox"/> No | Go to question b |
| <input type="checkbox"/> Yes | Go to section D |

b. A resident for tax purposes of another country?

- | | |
|------------------------------|-----------------|
| <input type="checkbox"/> No | Go to section E |
| <input type="checkbox"/> Yes | Go to section D |

SECTION D - FOREIGN TAX RESIDENT/CONTROLLING PERSON

Provide the below details for every individual who is a citizen or resident of another country for tax purposes.

Signatory 1

Title _____ Given Names _____ Surname _____

Details of country(s) where tax resident _____

Foreign Taxpayer Identification Number (TIN) _____

Signatory 2

Title _____ Given Names _____ Surname _____

Details of country(s) where tax resident _____

Foreign Taxpayer Identification Number (TIN) _____

(If more space is required, please copy and attach)

SECTION E - DECLARATION

By signing this form, I/we declare:

- The information provided by me/us is true and correct and may be used by bcu to undertake any action to comply with any applicable regulations;
- The information provided by me/us may be disclosed to any other person, including persons and bodies located overseas to enable it to be reported and used in compliance with the relevant applicable regulation;
- In this form 'applicable regulation' means all laws, rules, regulations and other legal requirement(s) in force from time to time in Australia and in any jurisdiction worldwide. These include, without limitation, the Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS);
- I/we will promptly notify bcu and provide it with any changes to the information provided that would render the information in this form incorrect or unreliable/

X

Signature 1

Name _____

Date _____

X

Signature 2

Name _____

Date _____

If signing on behalf of the entity, provide your position _____

NOTE: If there are more than 2 joint account owners, please copy and attach section/s.

OFFICE USE ONLY

Information provided is reasonable considering the documentation and other information provided

Officer _____ Staff no. _____ Signature _____

Input to system RIM _____ Date _____