

# Entity Classification (W-8BAR-E) Form



Please complete all sections, use black ink and BLOCK letters, marking boxes like  this with a X.

**Guide to completing this form**

- This form will not be valid if it is not signed and dated by the applicant or authorised adviser.

## Section 1 – Entity / Organisation name and classification

Name of entity / organisation

What is the purpose of the entity / organisation; what does it do?

Are you an Australian entity / organisation?

Yes ▶ Please supply your ABN / ACN

No ▶ Please supply your Tax Identification Number (TIN)

AND Please supply country of formation / incorporation / registration

Please select an option that best describes your entity / organisation:

- Trust – Managed Investment
- Bank or Other Non-Banking Financial Institution
- Investment entity (Listed / Unlisted)

Proceed to Section 2

- Unlisted Company
- Trust – Other / Discretionary (Describe below – e.g. Family Trusts, Unit Trusts):

- Partnership
- Association (Describe below – e.g. Sporting Association):

Proceed to Section 3

- Listed Company / Subsidiary of a Listed Company
- Registered Superannuation Funds (including SMSFs and Retirement plans)
- Entity operating as a Charity / Registered charity
- Government or Government Agency

Proceed to Section 5

## Section 2 – Investment entities or Financial Institutions only

If you are a Bank, Investment, Insurance or other Financial Institution please provide the entity's Global Intermediary Identification Number (GIIN), if applicable:

Alternatively if you do not have a GIIN, please select your FATCA Foreign Financial Institution (FFI) classification from the following:

Deemed Compliant FFI    Exempt Beneficial Owner    Excepted FFI    Non-Participating FFI

Other – Please provide reason

Proceed to section 5

## Section 3 – Unlisted Companies, Trusts, Partnerships and Associations only

Does the entity earn more than 50% of its income from Investment activities (e.g. rent, dividends or interest) or are more than 50% of its Assets used to generate investment income?

Yes ▶ Proceed to Section 4    No ▶ Proceed to Section 5

## Section 4 – Beneficial Owners & controlling persons information

Please use the space below to list the details of the beneficial owners and controlling persons of the entity / organisation.

- For unlisted company – List **ALL** Shareholders whose shareholding is greater than 25% and **ALL** Directors.
- Trusts - List **ALL** Trustees and beneficiaries. Note: Where a Trustee or Beneficiary is itself a Company or Trust, you must list the actual person(s) who are the ultimate beneficial owner(s) or controlling person(s).
- Associations – List the President / Chairman, Secretary and Treasurer or equivalent officers.
- Partnerships – List **ALL** Partners

Full Name	Date of birth	Position	Residential Address	Country	% Ownership
	DD / MM / YYYY				%
	DD / MM / YYYY				%
	DD / MM / YYYY				%
	DD / MM / YYYY				%
	DD / MM / YYYY				%
	DD / MM / YYYY				%
	DD / MM / YYYY				%
	DD / MM / YYYY				%

Please complete the following if any of the individuals noted above are either a resident, citizen, or tax resident of a country other than Australia. Please list all countries of residence, citizenship or tax residence. Note that you can list multiple countries per individual.

Full Name	Countries of Citizenship	Countries of Residency	Countries of Tax Residency	Foreign Tax Identification Number

Proceed to section 5

## Section 5 – Your declaration

I declare that:

- All the information provided on this form is complete and correct;
- I will advise Commonwealth Bank Group if any of this information changes;
- I am authorised to sign on/on behalf of/for the entity/organisation as an authorised signatory/authorised officer;
- I acknowledge that the information provided by me/us in this application including my/our Citizenship, Residency and Tax Residency status, or to my/our adviser, to enable the Bank to comply with the United States Foreign Account Tax Compliance Act and any related laws designed to implement those laws in Australia (FATCA), is complete and correct. I/ we will promptly notify the Bank and provide any changes to the information provided by me/us in connection with FATCA;
- I acknowledge that the Bank may require further information from me/us from time to time in order to meet its obligations under AML/CTF Laws, FATCA or its internal policies and procedures, and I/we agree to provide the Bank with whatever additional information is reasonably required in order for the Bank to meet its obligations under AML/CTF Laws, FATCA and or its internal policies and procedures;
- I declare that the FATCA information provided is reasonable considering the documentation provided; and
- I certify that the entity's activities and classification that I have provided are complete and correct and that I will advise the Bank immediately if such information is to change.

### Applicant 1/ Director 1/ Trustee 1/ Authorised Adviser

Full Name

Position

Signature

Date

### Applicant 2/ Director 2/ Trustee 2

Full Name

Position

Signature

Date