

CLIENT'S PHYSICAL ADDRESS *

COMPLEX / UNIT / HOUSE NUMBER *

COMPLEX NAME / ESTATE *

STREET NUMBER *

STREET NAME / FARM NAME / AREA NAME *

SUBURB / DISTRICT *

CITY / TOWN *

COUNTRY * CODE *

***Compulsory section**

CLIENT'S POSTAL ADDRESS

SAME AS PHYSICAL ADDRESS

PO BOX NUMBER

POST OFFICE NAME

POSTAL CODE

PRIVATE BAG NUMBER

POST OFFICE NAME

POSTAL CODE

POSTNET SUITE NUMBER

PRIVATE BAG NUMBER

POST OFFICE NAME

POSTAL CODE

PART C: EXEMPTION

This part is to be completed by the person entitled to the benefit of the interest. Please indicate the reason why the beneficial owner is exempt from the Withholding Tax on Interest:

Ai	Section 50D(3)(a) - Foreign (natural) person physically present in SA for more than 183 days in aggregate during the 12 months prior to the payment
Bi	Section 50D(3)(b) - Debt claim connected with a permanent establishment in the Republic of South Africa (and the foreign person is registered as a taxpayer in SA)
Ci	Exempt / Not taxable in terms of Double Taxation Agreement
Di	Exempt / Not taxable in terms of another International Agreement
Ei	Other / Not able to distinguish to applicable exemption code Note: choosing this option could trigger an audit case

If you have selected Exemption Reason Ei in the table above, please specify the details in the space provided below.



DECLARATION IN TERMS OF SECTIONS 50D OR 50E(2) OF THE ACT:

I

(full names in print please), the undersigned hereby

declare that the foreign person referred to in Part B to or for the benefit of which the interest is paid is exempt from the withholding tax on interest in terms of section 50D(3) of the Act, or otherwise, as indicated above.

THE DATE FROM WHICH THIS DECLARATION IS EFFECTIVE

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D D M M Y Y Y Y

Privacy: It is important to us that you understand how we obtain, process, store, and share your information. This will apply to all the products and/or services which we provide to you, including any products and/or services provided by our affiliates and associates. When you open an investment with us, you give us permission to disclose information for the purposes described herein, including the information of dependents and beneficiaries. You consent to STANLIB collecting, processing, storing, and disclosing this information for the purposes of:

1. Administering your investment account and processing any instructions on the account.
2. Communicating with you and your Financial Adviser/ broker.
3. Providing your information to any entity within Standard Bank Group Limited, including its subsidiaries and affiliates, where you already have a relationship with, or where you have applied for a product or benefit from, such entity. This information will only be shared for the administration of your products or benefits by this entity.
4. Providing relevant information to a contracted third party who requires the information to provide a service to you for your investment. We will ensure that the third party agrees to keep your information confidential and appropriately secured.
5. Transferring your Personal Information outside the borders of the Republic of South Africa. We will ensure that anyone to whom we pass on your Personal Information agrees to treat your information with the same level of protection as we do.
6. Providing information to industry registers such as ASISA, and contracted third parties, such as tracing agents, attorneys, debt collectors and other persons that assist with the enforcement of agreements.
7. Providing your information to regulatory authorities, governmental departments, local and international tax authorities and other persons that STANLIB under the law have to share your information with.
8. Payment processing for services providers, merchants, banks and other persons that assist with the processing of your payment instructions.
9. Assisting law enforcement and fraud prevention agencies and other persons tasked with the prevention and prosecution of crime.
10. Persons to whom STANLIB cede their rights or delegate their obligations to under agreements.
11. Conducting research or servicing products. Where appropriate, this information will be de-identified such that it cannot be linked back to you personally.
12. We undertake solely to collect and process your information as permitted by law. If you feel we have not done so, you have the right to contact us and object.
13. We will take reasonable steps to ensure that all Personal Information you provided to us is kept secure and confidential.
14. We will keep your Personal Information until such time as we are compelled to delete it, as prescribed by applicable law.
15. If we become involved in a proposed or actual merger, acquisition, or any form of sale of assets, we may use and disclose your Personal Information to third parties in connection with the evaluation of the transaction. The surviving company, or the acquiring company in the case of a sale of assets, would have access to your Personal Information, which would continue to be subject to these terms.
16. You have the right to request a copy of the Personal Information we hold about you. We are allowed to charge you a fee to provide this information to you.
17. You have the right to request that we update, correct, or delete your Personal Information

I/We agree to provide all documentation and information requested in this document and further required by law and consent to STANLIB processing my information for the purposes stipulated within the Terms and Conditions.

Query Support and Middle Office: STANLIB Compliance and Complaints, PO Box 202, Melrose Arch, 2076 Telephone: 0860 123 003.

Complaints: Should the Client wish to lodge a complaint with STANLIB regarding the services being provided, the Client can locate STANLIB's Complaints procedure on www.stanlib.com/contactus/pages/furtherqueries.aspx, alternatively the Client can send an email to rateus@stanlib.com

SIGNATURE
(DULY AUTHORISED TO DO SO)

DATE

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D D M M Y Y Y Y

CAPACITY OF SIGNATORY
(IF NOT THE BENEFICIAL OWNER)

UNDERTAKING IN TERMS OF SECTIONS 50D OR 50E(2) OF THE ACT:

I

(full names in print please), the undersigned

undertake to forthwith inform the Withholding Agent in writing should the circumstances of the beneficial owner referred to in the declaration above change.

SIGNATURE
(DULY AUTHORISED TO DO SO)

DATE

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D D M M Y Y Y Y

CAPACITY OF SIGNATORY
(IF NOT THE BENEFICIAL OWNER)

