

Dividends Tax: Reduced Rates

Declaration and Undertaking to be made by the beneficial owner of a dividend (Reduced Rate of Dividends Tax)

Notes on completion of this form:

- This form is to be completed by the beneficial owner (of dividends, including dividends in specie) in order for the reduced rate of Dividends Tax, referred to in sections 64FA, 64G or 64H of the Income Tax Act, 1962 (Act No 58 of 1962) (the Act) as well as the provisions of the Agreement for the Avoidance of Double Taxation and Prevention of Fiscal Evasion (DTA) between the Republic of South Africa and the country of residence of the beneficial owner, to apply.
- In order to qualify for the reduced rate referred to above this declaration and written undertaking should be submitted to STANLIB before payment of the dividend. Failure to do so will result in the full 20% Dividends Tax being withheld/payable.
- Where the beneficial owner is a foreign resident but does not qualify for a reduced rate this form should NOT be completed.

PART A: WITHHOLDING AGENT

This part is to be pre-populated by the company or regulated intermediary

| | | | | | | | | | | | | | | | | | | | | | | | | |
|--------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| REGISTERED NAME | | | | | | | | | | | | | | | | | | | | | | | | |
| DIVIDENDS TAX REFERENCE NUMBER | | | | | | | | | | | | | | | | | | | | | | | | |
| CONTACT DETAILS | | | | | | | | | | | | | | | | | | | | | | | | |

PART B: BENEFICIAL OWNER

This part is to be completed by the person entitled to the benefit of the dividend attaching to a share(s).

CLIENT TYPE

| | | | | | | | | |
|----------------|--------------------------|---------------------------|--------------------------|--------------------|--------------------------|---|--------------------------|--|
| NATURAL PERSON | <input type="checkbox"/> | INDIVIDUAL | <input type="checkbox"/> | FOREIGN INDIVIDUAL | <input type="checkbox"/> | INSOLVENT ESTATE | <input type="checkbox"/> | DIRECTOR OF PRIVATE COMPANY/MEMBER OF A CC |
| JURISTIC | <input type="checkbox"/> | ASSOCIATION NOT FOR GAIN | <input type="checkbox"/> | CLUBS | <input type="checkbox"/> | CLOSE CORPORATION | <input type="checkbox"/> | CORPORATE: ESTATE / LIQUIDATION |
| | <input type="checkbox"/> | ESTATE LATE | <input type="checkbox"/> | FOREIGN COMPANY | <input type="checkbox"/> | LISTED COMPANY | | |
| | <input type="checkbox"/> | OTHER COMPANY | <input type="checkbox"/> | PARTNERSHIP | <input type="checkbox"/> | RETIREMENT FUND (PENSION, PROVIDENT, BENEFIT, RA) | | |
| | <input type="checkbox"/> | RSA GOVERNMENT | <input type="checkbox"/> | SOCIETY | <input type="checkbox"/> | STOKVEL | | |
| | <input type="checkbox"/> | PROVINCIAL ADMINISTRATION | <input type="checkbox"/> | MUNICIPALITIES | | | | |
| | <input type="checkbox"/> | TRUST | <input type="checkbox"/> | UNLISTED COMPANY | <input type="checkbox"/> | UNINCORPORATED BODY OF PERSONS | | |

| | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| FULL NAMES & SURNAME / REGISTERED NAME* | | | | | | | | | | | | | | | | | | | | | | | | |
| IDENTITY/PASSPORT/REGISTRATION NUMBER* | | | | | | | | | | | | | | | | | | | | | | | | |
| TAX REFERENCE NUMBER* | | | | | | | | | | | | | | | | | | | | | | | | |
| COUNTRY OF RESIDENCE* | | | | | | | | | | | | | | | | | | | | | | | | |
| INVESTMENT/ENTITY NUMBER | | | | | | | | | | | | | | | | | | | | | | | | |

*Compulsory fields

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: REDUCED RATE

This part is to be completed by the person entitled to the benefit of the dividend attaching to a share(s). Please provide the following details for all shares held in respect of which a reduced rate of tax is applicable:

| Registered Company Name | Explanation of the reasons the beneficial owner meets the requirements of the DTA |
|-------------------------|---|
| <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |

* If more entries need to be made please complete another Form DTD(RR).

DECLARATION IN TERMS OF SECTIONS 64FA(2)(a), 64G(3)(i) OR 64H(3)(i) OF THE ACT:

I (full names in print please), the undersigned hereby

declare that all the relevant requirements in terms of Article of the Agreement for the Avoidance of Double Taxation and Prevention of Fiscal Evasion (DTA) in force on the relevant date between the Republic of South Africa and the country of residence of the beneficial owner specified above, as well as sections 64FA, 64G or 64H of the Act (whichever is applicable), have been met and that dividends paid on the shares specified above are therefore subject to a reduced rate of %.

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 SECTION 64FA(2)(b), 64G(3)(ii) OR 64H(3)(ii) 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.

Rate of %

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

| | | | | | | | | | |
|----------------------|----------------------|---|----------------------|----------------------|---|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | - | <input type="text"/> | <input type="text"/> | - | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| D | D | | M | M | | Y | Y | Y | Y |

CAPACITY OF SIGNATORY
(IF NOT THE BENEFICIAL OWNER)

