

## Tax Information Form

### Collective Investments (Unit Trusts): Kenya

#### CLIENT DETAILS

ENTITY / ACCOUNT NUMBER	<input type="text"/>
NAME & SURNAME / ENTITY NAME	<input type="text"/>
IDENTITY/PASSPORT/REGISTRATION NUMBER	<input type="text"/>
CELL PHONE NUMBER	<input type="text"/>

#### TAX INFORMATION

As part of STANLIB's obligation to comply with the U.S. Foreign Account Tax Compliance Act (FATCA), we require you to provide us with your tax information where applicable and will keep a record of such information. We will only disclose this information to the relevant tax authorities if and when required as per FATCA regulation.

##### TAX INFORMATION FOR INDIVIDUALS

ARE YOU A U.S. CITIZEN OR NATIONAL OR, ARE YOU RESIDENT FOR TAX PURPOSES IN THE U.S.  YES  NO

If you have selected 'YES', please submit the applicable United States of America Internal Revenue Services (IRS) forms.  
 If you have selected 'NO', you are not required to submit any IRS forms.

##### TAX INFORMATION FOR OTHER ENTITIES

ARE YOU A U.S. ENTITY OR, IS YOUR ENTITY RESIDENT FOR TAX PURPOSES IN THE U.S.  YES  NO

If you have answered "YES", please submit the following United States of America Internal Revenue Services (IRS) form: W-9 form.  
 If you have answered "NO" please submit the following United States of America Internal Revenue Services form: W-8BEN-E form.

#### DECLARATION

I/we confirm that all information provided herein is true and correct and I/we have read and understood the contents of this form.

SIGNATURE OF CLIENT/ AUTHORISED SIGNATORY	<input type="text"/>	DATE	<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		SIGNED AT	<input type="text"/>								
SIGNATURE OF CLIENT/ AUTHORISED SIGNATORY	<input type="text"/>	DATE	<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		SIGNED AT	<input type="text"/>								
SIGNATURE OF CLIENT/ AUTHORISED SIGNATORY	<input type="text"/>	DATE	<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		SIGNED AT	<input type="text"/>								
SIGNATURE OF FINANCIAL ADVISER	<input type="text"/>	DATE	<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		SIGNED AT	<input type="text"/>								

