

Please co	mplete Application form i	n full in black or blue pen using C/	APITAL LETTERS and 🔀 where appropriate.	
Email to: or	equity.lending@nab.com.a	u		
Send to:	NAB Equity Lending	Attention		
	PO Box 5350 Melbourne Vic 3001	NAB Equity Lending contact na	me	
Client/Fac	cility name			
As part of the 'know your customer' requirements of the Anti-Money Laundering Act (AML), Foreign Account Tax Compliance Act (FATCA), and Common Reporting Standard (CRS) obligations, we need to collect and validate the information outlined below.				
Please use black or blue pen and write in CAPITALS.				
Section 1 Foreign Tax Residency				
As you have indicated that the applicant, or the entity, is a tax resident of a country other than Australia, provide their tax identification number (TIN) or equivalent below. A TIN is the number assigned by each country for the purposes of administering tax laws. This is the equivalent of a Tax File Number in Australia or an Employer Identification Number / Social Security Number in the US.				
If a TIN is not provided, list one of the three reasons specified (A, B or C) for not providing a TIN. In the case of Reason B, provide an explanation why the TIN could not be obtained. If the individual or the entity are a tax resident of more than one other country, list all relevant countries below. Note that if country of foreign residency is the USA, a TIN is mandatory.				
Country 1		TIN 1	Reason Code 1 and explanation if B was chosen	
Country 2		TIN 2	Peacen Code 2 and explanation if R was chosen	
Country 2			Reason Code 2 and explanation if B was chosen	
Country 3		TIN 3	Reason Code 3 and explanation if B was chosen	
Reason A	The country of tax residence	 cy does not issue TINs to tax residen	ts	
Reason B The individual or entity has not been issued with a TIN				
Reason C The country of tax residency does not require the TIN to be disclosed				
Section 2 Financial Institutions				
As you have indicated that the entity is a financial institution, provide the requested information below:				
Provide the Entity's or the Trustee's Global Intermediary Identification Number (GIIN), if applicable:				
If the entity is a Financial Institution but does not have a GIIN, provide the entity's FATCA status (Select one of the following):				
Deemed Compliant Financial Institution Non-Reporting IGA Financial Institution Excepted Financial Institution				
	Non-Participating Financial Institution Exempt Beneficial Institution US Financial Institution			
Other (describe the FATCA status in the box provided)				
Is the Financial Institution an Investment Entity located in a Non-Participating CRS Jurisdiction and managed by another Financial Institution? Refer to http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/crs-by-jurisdiction for the list of participating jurisdictions				
Yes	Yes No			
If yes, complete section 3.				
Section 3				
Are any of the trustees, beneficiaries, associated parties (e.g. appointor/ settlor), directors, partners, or beneficial owners of the incorporated				
trustee or the organisation, foreign residents for tax purposes?:				
Yes No				