

non - personal trusts membership application

Dnister Ukrainian Credit Co-operative Ltd

ABN 59 087 651 394 | AFSL / Australian Credit Licence 240673 | BSB 704 235 **Head Office**: 912 Mt Alexander Road, Essendon VIC 3040 | PO Box 279 | P 1800 353 041 | P (03) 9377 1100

www.dnister.com.au | admin@dnister.com.au **Member Number** application for membership and shares We hereby apply to become a member of Dnister Ukrainian Credit Co-operative Limited ABN 59 087 651 394 (Dnister) and apply for a share in the credit cooperative. We agree to pay the designated subscription price for the share and acknowledge that the value of the share (if any), and any money we have on deposit, may be used against any debt that we owe Dnister. non-personal membership type Individual or Family Discretionary Registered Managed Investment Scheme Unregistered Managed Investment Scheme Regulated Trust (Superannuation Fund) Other (please specify): membership eligibility Community - a member of the Ukrainian community in Australia Community - a member of the Latvian community in Australia (Affinity Member) Other (provide details) applicant details Full Name of Applicant Trustee (as applicable) Registered Number - ABN, ARBN, or Unique Identifying Number (where applicable) for legal entity Registered Number - ABN, ARBN, or Unique Identifying Number (where applicable) for business trading entity Registered address postcode Principal place of business postcode Postal address postcode Mobile Contact Phone Email Fax (Refer clause II in declaration and consent section.) non-personal membership attachments When you open a membership with Dnister, we must collect information about you as required by law. Please complete the Trust details (Trusts and Superannuation Funds) and each Controlling Person's Common Reporting Standard (CRS) and Foreign Account Compliance Compliance Act (FATCA) Self Certification below. identification details Certified copy of Certificate of registration (if registered) and please attach a certified copy of the Trust Deed. tax file number | exemptions Do you wish to quote your Trust Tax File Number or Exemption details at this time? Yes No

Please note that you do not have to quote/provide your Trust TFN or Exemption. However if you do not, withholding tax may be deducted from interest earned. Where you do supply a TFN or Exemption it will be applied to all accounts opened for this Client Number unless you specifically request otherwise.

Tax File Number

common reporting standard (CRS) and foreign account tax compliance act (FATCA) - individual Each Trustee must complete. non-resident of Australia 1. Are you a permanent resident of Australia? No If no, please advise current visa status: 2. If the entity applicant is a financial institution, is it a Non-Participating Foreign Financial Institution within the meaning of the Foreign Account Taxation Compliance Act (FATCA)? 3. Is the entity applicant a Passive Non-Financial Entity? (a) Yes No If Yes, please complete a separate 'CRS and FATCA Self Certification Form' for each Controlling Person. (b) 4. Are you a citizen/Entity of a country other than Australia? Yes If yes, please list countries of citizenship: 5. Are you a US citizen/Entity or US resident for tax purposes? Yes No If yes, please provide your Taxpayer Identification Number (TIN): 6. Are you a resident of any other country for tax purposes? (excluding Australia and USA) Nο If yes, please provide the name of each country, a TIN for each country or reason why you're not providing a TIN, and an explanation if reason B (below) is selected for a country: Country TIN Reason ^ ^ If yes, and no TIN is provided, select a reason from the following list: A - This country does not issue TINs. B - I don't have a TIN for this country (Please attach an explanation to this form). C – It is not mandatory for me to disclose my TIN for this country. Reason for opening a membership in Australia: signatories and persons authorised to sign on account as well as account signing instructions The relevant Authorised Account Signatories Form when attached to this document, forms part of the "non-personal membership application" by the common reporting standard (CRS) and foreign account tax compliance act (FATCA) self certification Each Controlling Person and the Applicant MUST complete the Common Reporting Standard (CRS) and Foreign Account Tax Compliance Act (FATCA) Self Certification, and when attached to this document, forms part of the "non-personal membership application" by the applicant.

(a) A Passive Non-Financial Entity (NFE) is an entity that is not an Active NFE. An Active NFE must meet certain criteria including:

- Active NFEs by reason of income and assets: Less than 50% of the NFE's gross income for the preceding calendar year or other appropriate reporting period is passive income, and less than 50% of the assets held by the NFE during the preceding calendar year or other appropriate reporting period are assets that produce or are held for the production of passive income. 'Passive income' would generally be considered to include the portion of gross income that consists of:
- dividends and interest or income equivalent to interest;
- rents and royalties, other than rents and royalties derived in the active conduct of a business conducted, at least in part, by employees of the NFE;
- the excess of gains over losses from the sale or exchange of Financial Assets that gives rise to the passive income described previously;
- the excess of gains over losses from transactions (including futures, forwards, options, and similar transactions) in any Financial Assets;
- the excess of foreign currency gains over foreign currency losses or net income from swaps;
- publicly traded NFEs;
- governmental entities, international organisations, central banks or their wholly owned entities;
- start-up NFEs; or
- non-profit NFEs.

(b) A Controlling Person (or 'beneficial owner') generally refers to any person holding 25% or more in an entity. If no natural person is identified as exercising control of the entity, the natural person who holds the position of senior managing official (e.g. directors) will be the Controlling Person of the entity. If a settlor, trustee, protector or beneficiary of a trust membership holder they are always treated as a Controlling Person of the trust.

settion of trust									
•	entity who established the trust by d trusts, registered managed inves	•	_				e 'settled sum'	•	
Full legal name of Settlor	if a Business - Registered Name	[
Registered address (PO Bo	x is not acceptable)								
	Stat	te		Postcode			Countr	у	
				·				•	
Full legal name of Settlor	if an Individual								
New Member	Existing Member			Member Nun	nber				
Surname				Title					
Given name/s				Date of Birth			/		/
Registered address (PO Bo	x is not acceptable)								
	Stat	te		Postcode			Countr	у	
beneficial owner of tru	st								
	ist is the individual(s) who ultimate	ely owr	ns or controls (directly or indirectly	the tru	st.			
This will usually be the trustee where the trustee is an individual and the trust does not have an appointor (i.e. someone with the power to dismiss the trustee and appoint a replacement – a 'protector'). If the trustee is a company and there is no appointor, then the beneficial owner(s) will usually be the person(s) who ultimately owns or controls the trustee company. Where (as is common with family trusts) the trust has an appointor, that person(s), or the individual(s) controlling that company if the appointor is a company, will usually be the beneficial owner(s).									
Full legal name of Appoin	tor if a Business - Registered Name	ie							
Registered address (PO Bo	x is not acceptable)								
	Stat	te		Postcode			Countr	v	
		L		I				• (
Full legal name of Appoin									
New Member	Existing Member			Member Nun	nber				
Surname				Title					
Given name/s				Date of Birth			/		/
Registered address (PO Bo	x is not acceptable)								
	Stat	te		Postcode			Countr	У	
trustee details									
Please provide details of each Trustee(s) of the trust. If the Trustee is a company, please complete a separate company membership application form excluding "Declaration and Consent" and "Signature of Membership holder" for each company. Individual Trustee 1 (Full Legal Name)									
New Member	Existing Member			Member Nun	nher				
	LVISCHIR INICHIDGI				iibei				
Surname				Title					,
Given name/s		г		Date of Birth			/		/
Registered address (PO Bo	x is not acceptable)								
	Stat	te		Postcode			Countr	У	
Individual Trustee 2 (Full Legal Name)									
New Member	Existing Member			Member Nun	nber				
Surname				Title					
Given name/s			Date of Birth			/		/	
Registered address (PO Box is not acceptable)									
	Stat	te [Postcode			Countr	v	

Individual Trustee 3 (Full Legal Name)							
New Member	Existing Member			Member Nu	mber		
Surname				Title			
Given name/s				Date of Birth	1	1	1
Registered address (PO Box is no	ot acceptable)						
		State		Postcode		Country	
Individual Trustee 4 (Full Legal	Name)						
New Member	Existing Member			Member Nui	mber		
Surname] -			Title			
Given name/s				Date of Birth	ı	/	/
Registered address (PO Box is not acceptable)							
		State		Postcode		Country	
Individual Truston F /F.:!!! c==!!	Namo					_	
Individual Trustee 5 (Full Legal	Existing Member			Member Nui	mher		
Surname	Existing Member			Title	illibei		
Given name/s	at a sandalah			Date of Birth	1	/	/
Registered address (PO Box is no	ot acceptable)	Class		D. H. H.		7 6	
		State		Postcode		Country	
Each individual trustee, Settlor as If there are more Beneficial Owne				documents.			
handiaiania							
beneficiaries List all beneficiaries of the trust.							
Beneficiary Information (Full le		n name)					
Beneficiary 1							
Beneficiary 2							
Beneficiary 3							
Beneficiary 4							
Beneficiary 5							
Beneficiary 6							
classes of beneficiaries							
If the terms of the Trust identify beneficiaries by reference to membership of a class then provide details (e.g. unit holders, family members of named							
person, charitable organisations/causes).							
If there are more than six Beneficiaries or more than four classes in the above section, please attach additional page.							
Has any Beneficiary received or become entitled to receive a distribution in the year? Yes No If 'Yes', the Trustee is to provide details of the Beneficiary and a Self-Certification on their behalf.							
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Common Reporting Standard (CRS) and Foreign Account Tax Compliance Act (FATCA) Self Certification

Each Trustee, Settlor, Appointor and the Applicant MUST complete the CRS and FATCA Self Certification. If you require more forms please contact us.

I/We declare and consent as follows:

- 1. I/We agree to be bound by Dnister's Constitution and pay all charges imposed or levied by the Co-operative in accordance with the Corporations Act and charges set from time to time in relation to the operation of my/our account/s and provision of services.
- 2. I/We have reviewed and read the General Information Terms and Conditions, relevant Terms and Conditions, Financial Services Guide and Product Disclosure Statements relating to the account/s, services and access option/s that I/we have applied for, and agree to be bound by them.
- 3. I/We have received, or agree to receive by accessing the Co-operative's website at dnister.com.au, the Co-operative's Financial Services Guide.
- 4. I/We have read, understood and agree to the Co-operative's Privacy Policy provided to me/us or as available at dnister.com.au/privacy.
- 5. I/We authorise the Co-operative to use and/or disclose my/our personal information for the purpose of considering this application, administering the products and services they supply to me/us and where reasonably necessary in doing so to third parties associated with the Co-operative and its providers.
- 6. I/We consent to the Co-operative collecting verifying, using, handling and disclosing personal information from me as required pursuant to the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 and I/we understand that it is an offence under that Act to give false and misleading information and that if I/we supply incomplete or inaccurate information the Co-operative may not be able to provide me/us with products or services.
- 7. I/We have been truthful in all information provided in this application.
- 8. For non-residents only: As a non-permanent resident of Australia, I consent to the Co-operative conducting a Visa Entitlement Verification Online enquiry and authorise the Department of Immigration and Citizenship to release the details of my residency status for the purposes only of assessing my eligibility to open an account and/or obtain finance.
- 9. I/We certify that information provided in this form regarding my/our tax residency status is true and correct. I/We acknowledge that my/our tax information may be provided directly or indirectly, to any relevant tax authority, including the Australian Tax Office and (if applicable) exchanged with tax authorities of another country or countries in which I/we may be resident for tax purposes pursuant to bilateral or multilateral agreements between governments to exchange financial account information. I/We undertake to advise the Co-operative within thirty days of any change in circumstances which affects my/our tax residency status or where any information contained herein is no longer correct.
- 10. From time to time, the Co-operative may contact me/us with information about products, services and promotions through mail, telephone, email or SMS.
- 11. I/We acknowledge that by providing our email address, I/We consent to receive all 'legal notices' by email

However, I/we acknowledge that I/we may request that you do not provide me/us with direct marketing information by opting out.

Tick here to opt out or telephone the Co-operative on 1800 353 041.

signature of membership holder member, in	accordance with its trust deed
signatory 1 (full legal name)	signatory 2 (full legal name)
Title	Title
Surname	Surname
Given names	Given names
Position title	Position title
Signature	Signature
Date	Date
signatory 3 (full legal name)	company trustee (full legal name)
Title	Name of
Surname	trustee
Given names	Signature
Position title	
Signature	Name
	Position
Date	Date