





**Part 2: Tax information – Country/ jurisdiction of Tax Residence and Tax Identification Number (TIN)**

Please answer both of the following questions:

- 1. Are you a tax resident of Australia?                      Yes      No      (Please circle)
- 2. Are you a tax resident of another country?            Yes      No      (Please circle)

If you answered Yes to being a tax resident of another country, please complete the following table indicating:

- (i) The country/ jurisdiction of tax residence of the Policy Holder; and
- (ii) The Policy Holder’s TIN for each country/ jurisdiction indicated.

Country/ jurisdiction of tax residence	TIN	TIN exclusion (A, B or C)

**TIN Exclusion**

If a TIN is unavailable please indicate the reason as either of the following:

**Reason A**

The country where the Policy Holder is a tax resident does not issue TINs.

**Reason B**

The Policy Holder is otherwise unable to obtain a TIN or equivalent number. Please indicate why a TIN is unable to be obtained in the space below:

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**Reason C**

No TIN is required by the country of tax residence.

### Part 3: Declarations and Signature

I understand that the information supplied by me is covered by the terms and conditions governing an Policy Holder's relationship with Foresters Friendly Society which define how information supplied by me may be used and/or disclosed.

I certify that I am the Policy Holder (or am authorised to sign for the Policy Holder) of all the account(s) to which this form relates.

I declare that all statements made in this declaration are, to the best of my knowledge and belief, correct and complete.

I undertake to advise Foresters Friendly Society within 14 days of any change in circumstances that affects my tax residency and to provide Foresters Friendly Society with an updated tax residency information form and Declaration within 14 days of such change in circumstances.

**Signature:**

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**Print name:**

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**Date:**

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**Note:** If you are not the Policy Holder please indicate the capacity in which you are signing the form. If signing under a power of attorney please also attach a certified copy of the power of attorney.

**Capacity:**

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