



This form must be completed if the Trust named below is a Trustee of another Trust, a Beneficial Owner of a Company or a Partner in a Partnership.

SECTION 1. TRUST DETAILS

Trust Name	COMPULSORY
Country of Establishment	COMPULSORY
Country of Primary Place of Business	COMPULSORY
Residential Address	
Postal Address	

Is the Trust named above a Financial Institution? No Yes

Please refer to the "Financial Institution Worksheet" on the "Download Forms" page on the ANZ Securities website.

SECTION 2. SETTLOR

Settlor name	COMPULSORY
Date of Birth	IF APPLICABLE
Residential Address	IF APPLICABLE

SECTION 3. TRUSTEES

List all Trustees below and complete Section 5 or download the appropriate supplement for each Trustee. Please make extra copies of this page and attach them to your application if there are more than four Trustees.

Name of Trustee

- If the Trustee is an individual, complete Section 5.
- If the Trustee is an Entity, download and complete the appropriate supplement form from the "Download Forms" page on the ANZ Securities website.

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SECTION 4. BENEFICIARIES

All Beneficiaries must be named below or classified at the bottom of the page. For Beneficiaries who fall within a class/category of Beneficiary, rather than being specifically named in the Trust Deed, please refer to the Classes of Beneficiaries section at the bottom of the page.

NAMED BENEFICIARIES

For all beneficiaries named in the Trust Deed, complete the following section. Please take copies of this page if there are more than four Beneficiaries named in the Trust Deed.

Name	<input type="text"/>	Name	<input type="text"/>
	If the named Beneficiary is an Entity and has a Country of Establishment that is not New Zealand, refer to the "FAQs" page on the ANZ Securities website.		If the named Beneficiary is an Entity and has a Country of Establishment that is not New Zealand, refer to the "FAQs" page on the ANZ Securities website.
OR	If the named Beneficiary is an individual, provide Date of Birth and complete the tick boxes below.	OR	If the named Beneficiary is an individual, provide Date of Birth and complete the tick boxes below.
Date of Birth	<input type="text"/>	Date of Birth	<input type="text"/>
Is this Beneficiary a US resident for tax purposes? (Compulsory)	<input type="checkbox"/> No <input type="checkbox"/> Yes	Is this Beneficiary a US resident for tax purposes? (Compulsory)	<input type="checkbox"/> No <input type="checkbox"/> Yes
Is this Beneficiary a US citizen? (Compulsory)	<input type="checkbox"/> No <input type="checkbox"/> Yes	Is this Beneficiary a US citizen? (Compulsory)	<input type="checkbox"/> No <input type="checkbox"/> Yes
If the answer to either of the above is Yes, refer to the "FAQs" page on the ANZ Securities website.		If the answer to either of the above is Yes, refer to the "FAQs" page on the ANZ Securities website.	

Name	<input type="text"/>	Name	<input type="text"/>
	If the named Beneficiary is an Entity and has a Country of Establishment that is not New Zealand, refer to the "FAQs" page on the ANZ Securities website.		If the named Beneficiary is an Entity and has a Country of Establishment that is not New Zealand, refer to the "FAQs" page on the ANZ Securities website.
OR	If the named Beneficiary is an individual, provide Date of Birth and complete the tick boxes below.	OR	If the named Beneficiary is an individual, provide Date of Birth and complete the tick boxes below.
Date of Birth	<input type="text"/>	Date of Birth	<input type="text"/>
Is this Beneficiary a US resident for tax purposes? (Compulsory)	<input type="checkbox"/> No <input type="checkbox"/> Yes	Is this Beneficiary a US resident for tax purposes? (Compulsory)	<input type="checkbox"/> No <input type="checkbox"/> Yes
Is this Beneficiary a US citizen? (Compulsory)	<input type="checkbox"/> No <input type="checkbox"/> Yes	Is this Beneficiary a US citizen? (Compulsory)	<input type="checkbox"/> No <input type="checkbox"/> Yes
If the answer to either of the above is Yes, refer to the "FAQs" page on the ANZ Securities website.		If the answer to either of the above is Yes, refer to the "FAQs" page on the ANZ Securities website.	

CLASSES OF BENEFICIARIES

For all beneficiaries classified in the Trust Deed, complete the following section. Please take copies of this page if there are more than four Beneficiaries classified in the Trust Deed. Examples of a Class/Type of Beneficiary are unborn grandchildren, a charity, a school, a church, etc.

Class/Type	<input type="text"/>	Class/Type	<input type="text"/>
	Complete the Class/Type of Beneficiary above and continue to Section 5 if the requirements below do not apply to the Beneficiary.		Complete the Class/Type of Beneficiary above and continue to Section 5 if the requirements below do not apply to the Beneficiary.
	If the class of Beneficiary includes an entity that has a Country of Establishment that is not New Zealand, refer to the "FAQs" page on the ANZ Securities website.		If the class of Beneficiary includes an entity that has a Country of Establishment that is not New Zealand, refer to the "FAQs" page on the ANZ Securities website.
OR	If any existing members of the Class/Type are a US resident for tax purposes or a US citizen, refer to the "FAQs" page on the ANZ Securities website.	OR	If any existing members of the Class/Type are a US resident for tax purposes or a US citizen, refer to the "FAQs" page on the ANZ Securities website.
Class/Type	<input type="text"/>	Class/Type	<input type="text"/>
	Complete the Class/Type of Beneficiary above and continue to Section 5 if the requirements below do not apply to the Beneficiary.		Complete the Class/Type of Beneficiary above and continue to Section 5 if the requirements below do not apply to the Beneficiary.
	If the class of Beneficiary includes an entity that has a Country of Establishment that is not New Zealand, refer to the "FAQs" page on the ANZ Securities website.		If the class of Beneficiary includes an entity that has a Country of Establishment that is not New Zealand, refer to the "FAQs" page on the ANZ Securities website.
OR	If any existing members of the Class/Type are a US resident for tax purposes or a US citizen, refer to the "FAQs" page on the ANZ Securities website.	OR	If any existing members of the Class/Type are a US resident for tax purposes or a US citizen, refer to the "FAQs" page on the ANZ Securities website.

5. ASSOCIATED INDIVIDUALS

Complete Section 5 for any Trustees who are individuals. Please make extra copies of this page and attach them to your application if there are more than four Trustees.

FIRST INDIVIDUAL

Title	Full legal name		
Date of Birth	COMPULSORY	Country of Birth	COMPULSORY
Contact Phone	Email		
Residential address	COMPULSORY		
Occupation	COMPULSORY		
Is the associated individual a US resident for tax purposes?	<input type="checkbox"/>	No <input type="checkbox"/>	Yes – refer to the “FAQs” page on the ANZ Securities website
Is the associated individual a US citizen?	<input type="checkbox"/>	No <input type="checkbox"/>	Yes – refer to the “FAQs” page on the ANZ Securities website

SECOND INDIVIDUAL

Title	Full legal name		
Date of Birth	COMPULSORY	Country of Birth	COMPULSORY
Contact Phone	Email		
Residential address	COMPULSORY		
Occupation	COMPULSORY		
Is the associated individual a US resident for tax purposes?	<input type="checkbox"/>	No <input type="checkbox"/>	Yes – refer to the “FAQs” page on the ANZ Securities website
Is the associated individual a US citizen?	<input type="checkbox"/>	No <input type="checkbox"/>	Yes – refer to the “FAQs” page on the ANZ Securities website

THIRD INDIVIDUAL

Title	Full legal name		
Date of Birth	COMPULSORY	Country of Birth	COMPULSORY
Contact Phone	Email		
Residential address	COMPULSORY		
Occupation	COMPULSORY		
Is the associated individual a US resident for tax purposes?	<input type="checkbox"/>	No <input type="checkbox"/>	Yes – refer to the “FAQs” page on the ANZ Securities website
Is the associated individual a US citizen?	<input type="checkbox"/>	No <input type="checkbox"/>	Yes – refer to the “FAQs” page on the ANZ Securities website

FOURTH INDIVIDUAL

Title	Full legal name		
Date of Birth	COMPULSORY	Country of Birth	COMPULSORY
Contact Phone	Email		
Residential address	COMPULSORY		
Occupation	COMPULSORY		
Is the associated individual a US resident for tax purposes?	<input type="checkbox"/>	No <input type="checkbox"/>	Yes – refer to the “FAQs” page on the ANZ Securities website
Is the associated individual a US citizen?	<input type="checkbox"/>	No <input type="checkbox"/>	Yes – refer to the “FAQs” page on the ANZ Securities website

SECTION 6. FINANCIAL DETAILS

Source of Funds:

Please provide a description and **evidence** of what has generated the total net worth of the Trust and / or where the funds have originated from. We have provided examples in the following table:

Source of Funds	Suggested Verification / Evidence
Employment	Copy of pay slip (or bonus) from within last three months Bank statement details IRD Documents
Business Proceeds	Copy of latest audited accounts Letter from solicitor/accountant
Disposal of Business or Assets	Copy of latest audited accounts Letter from solicitor/accountant
Investment Income	Copy of investment / savings certificates, contract notes, or surrender statements Bank statement clearly showing receipt of funds and investment source Letter from solicitor/accountant
Superannuation lump sum or annuity / retirement plan payments	Copy of closing statement Letter confirming collection
Insurance / compensation claim	Copy of closing statement Letter confirming claim
Lottery / Betting Win	Lotteries Commission
Inheritance	Grant of Probate (copy of the will) which must include the value of estate Letter from solicitor/accountant
Gift	Donor's source of wealth – requirements of evidence as stated above for each individual source of wealth and a letter from the donor confirming details of the gift. Letter from solicitor/accountant
Maturity or surrender of life policy	Copy of closing statement Letter confirming surrender
Sale of property	Copy of sale contract Letter from solicitor/accountant

Turn to the next page for a list of the required documentation that must accompany this supplement form.

7. FINAL CHECKLIST

- A clear and certified or verified copy of the Trust Deed
- A clear and certified or verified copy of photo identification for all Individuals who are named in Section 5
- An original, or a clear and certified or verified copy, of proof of the residential address for all Individuals who are named in Section 5
- A clear and certified or verified copy of the Source of Funds for the Trust.
- Attach this supplement form to your Company/Trust/Partnership application form.