
Guide for Completion of a W-8BEN-E Form



This guide and the W-8BEN-E form are for Entities only, not Individual or Joint trading accounts.

A W-8BEN-E form must be completed if you wish to trade shares listed in the United States.

The W-8BEN-E Form is a U.S. Internal Revenue Service (IRS) form used to reflect the documentation requirements of Chapter 4 and is **only required for non-U.S. residents**. Please do not complete this form if you are a U.S. citizen or Green Card holder.

By completing the W-8BEN-E form, you may be eligible to pay a reduced rate of withholding tax.

Any dates must be completed in the accepted US format MM-DD-YYYY. E.g. 26th of April 2024 would be 04-26-2024).

You only need to complete a W-8BEN-E form once every three years. It remains in effect until 31st of December three years after the date of signing, unless there are any changes in your personal circumstances. E.g. A form completed on 26th of April 2024 would remain in effect until 31st of December 2027.

Neither Selfwealth nor PhillipCapital are able to provide you with any tax advice in relation to your declaration. For further advice, please contact the IRS or your tax adviser.

Please send all completed forms to support@selfwealth.com.au

Trading as a Company? Complete these sections of the form:

A sample of how to complete the W-8BEN-E form can be found on **pages 3-5** of this guide.

- ☐ Part I: 1, 2, 4, 5, 6, 7, and 9b
- ☐ Part III: 14a and b
- ☐ Part XXV: 39, or
- ☐ Part XXVI: 40a, plus b or c
- ☐ Part XXX and **sign in ink pen**

Alterations are not allowed; please use a new form if changes are required.

Trading as an Corporate SMSF? Complete these sections of the form:

A sample of how to complete the W-8BEN-E form can be found on **pages 6-8** of this guide.

- ☐ Only ONE Trustee is required to complete a W-8BEN-E for a Corporate SMSF Account
- ☐ Part I: 1, 2, 4, 5, 6, 7, and 9b
- ☐ Part III: 14a and b
- ☐ Part XII: 26
- ☐ Part XXX and **sign in ink pen**

Alterations are not allowed; please use a new form if changes are required.

Trustees = Directors with signing authority for the Corporate Trust.

Trading as an Individual Trustee(s) SMSF? Complete these sections of the form:

A sample of how to complete the W-8BEN-E form can be found on **pages 6-8** of this guide.

- ☐ Only ONE Trustee is required to complete a W-8BEN-E for an Individual Trustee(s) SMSF Account
- ☐ Part I: 1, 2, 4, 5, 6, 7, and 9b
- ☐ Part III: 14a and b
- ☐ Part XII: 26
- ☐ Part XXX and **sign in ink pen**

Alterations are not allowed; please use a new form if changes are required.

Trading as a Corporate Trust? Complete these sections of the form:

A sample of how to complete the W-8BEN-E form can be found on **pages 9-11** of this guide.

- ☐ Only ONE Trustee is required to complete a W-8BEN-E for a Corporate Trust Account
- ☐ Part I: 1, 2, 4, 5, 6, 7, and 9b
- ☐ Part III: 14a and b
- ☐ Part XXV: 39, or
- ☐ Part XXVI: 40a, plus b or c
- ☐ Part XXX and **sign in ink pen**

Alterations are not allowed; please use a new form if changes are required.

Trustees = Directors with signing authority for the Corporate Trust.

Trading as an Individual Trustee(s) Trust? Complete these sections of the form:

A sample of how to complete the W-8BEN-E form can be found on **pages 9-11** of this guide.

- ☐ Only ONE Trustee is required to complete a W-8BEN-E for an Individual Trustee(s) Trust Account
- ☐ Part I: 1, 2, 4, 5, 6, 7, and 9b
- ☐ Part III: 14a and b
- ☐ Part XXV: 39, or
- ☐ Part XXVI: 40a, plus b or c
- ☐ Part XXX and **sign in ink pen**

Alterations are not allowed; please use a new form if changes are required.

Please send all completed forms to support@selfwealth.com.au

FOR REFERENCE ONLY

Form W-8BEN-E (Rev. October 2021) Department of the Treasury Internal Revenue Service	Certificate of Status of Beneficial Owner for United States Tax Withholding and Reporting (Entities) ▶ For use by entities. Individuals must use Form W-8BEN. ▶ Section references are to the Internal Revenue Code. ▶ Go to www.irs.gov/FormW8BENE for instructions and the latest information. ▶ Give this form to the withholding agent or payer. Do not send to the IRS.	OMB No. 1545-1621
Do NOT use this form for:		
• U.S. entity or U.S. citizen or resident • A foreign individual • A foreign individual or entity claiming that income is effectively connected with the conduct of trade or business within the United States (unless claiming treaty benefits) • A foreign partnership, a foreign simple trust, or a foreign grantor trust (unless claiming treaty benefits) (see instructions for exceptions) • A foreign government, international organization, foreign central bank of issue, foreign tax-exempt organization, foreign private foundation, or government of a U.S. possession (unless claiming treaty benefits) (see instructions for other exceptions) • Any person acting as a qualified intermediary acting as a qualified derivatives dealer		
Instead use Form: W-9 W-8BEN (Individual) or Form 8233 W-8ECI W-8IMY W-8ECI or W-8EXP W-8IMY		
Part I Identification of Beneficial Owner		
1 Name of organization that is the beneficial owner <div style="border: 1px solid black; padding: 2px; display: inline-block;">LUCKY PTY LTD</div>		2 Country of incorporation or organization <div style="border: 1px solid black; padding: 2px; display: inline-block;">AUSTRALIA</div>
3 Name of disregarded entity receiving the payment (if applicable, see instructions)		
4 Chapter 3 Status (entity type) (Must check one box only): <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Simple trust <input type="checkbox"/> Central Bank of Issue <input type="checkbox"/> Grantor trust </div> <div> <input type="checkbox"/> Tax-exempt organization <input type="checkbox"/> Private foundation <input type="checkbox"/> Disregarded entity </div> <div> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Complex trust <input type="checkbox"/> Estate <input type="checkbox"/> International organization </div> <div> <input type="checkbox"/> Partnership <input type="checkbox"/> Foreign Government - Controlled Entity <input type="checkbox"/> Foreign Government - Integral Part </div> </div>		
If you entered disregarded entity, partnership, simple trust, or grantor trust above, is the entity a hybrid making a treaty claim? If "Yes," complete Part III. <input type="checkbox"/> Yes <input type="checkbox"/> No		
5 Chapter 4 Status (FATCA status) (See instructions for details and complete the certification below for the entity's applicable status.)		
<div style="display: flex;"> <div style="flex: 1;"> <input type="checkbox"/> Nonparticipating FFI (including an FFI related to a Reporting IGA FFI other than a deemed-compliant FFI, participating FFI, or exempt beneficial owner). <input type="checkbox"/> Participating FFI. <input type="checkbox"/> Reporting Model 1 FFI. <input type="checkbox"/> Reporting Model 2 FFI. <input type="checkbox"/> Registered deemed-compliant FFI (other than a reporting Model 1 FFI, sponsored FFI, or nonreporting IGA FFI covered in Part XII). See instructions. <input type="checkbox"/> Sponsored FFI. Complete Part IV. <input type="checkbox"/> Certified deemed-compliant nonregistering local bank. Complete Part V. <input type="checkbox"/> Certified deemed-compliant FFI with only low-value accounts. Complete Part VI. <input type="checkbox"/> Certified deemed-compliant sponsored, closely held investment vehicle. Complete Part VII. <input type="checkbox"/> Certified deemed-compliant limited life debt investment entity. Complete Part VIII. <input type="checkbox"/> Certain investment entities that do not maintain financial accounts. Complete Part IX. </div> <div style="flex: 1;"> <input type="checkbox"/> Nonreporting IGA FFI. Complete Part XII. <input type="checkbox"/> Foreign government, government of a U.S. possession, or foreign central bank of issue. Complete Part XIII. <input type="checkbox"/> International organization. Complete Part XIV. <input type="checkbox"/> Exempt retirement plans. Complete Part XV. <input type="checkbox"/> Entity wholly owned by exempt beneficial owners. Complete Part XVI. <input type="checkbox"/> Territory financial institution. Complete Part XVII. <input type="checkbox"/> Excepted nonfinancial group entity. Complete Part XVIII. <input type="checkbox"/> Excepted nonfinancial start-up company. Complete Part XIX. <input type="checkbox"/> Excepted nonfinancial entity in liquidation or bankruptcy. Complete Part XX. <input type="checkbox"/> 501(c) organization. Complete Part XXI. </div> </div>		
<div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> Select EITHER Active NFFE or Passive NFFE. Refer to Part XXV and XXVI (Page 7) to determine the Chapter 4 Status of your Company </div>		
<div style="display: flex;"> <div style="flex: 1;"> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> Part I (6) - Fill in the Company's Registered Office Address as listed on the ASIC register </div> 6 Permanent residence address (street, apt. or suite no., or rural route) <div style="border: 1px solid black; padding: 2px; display: inline-block;">1 COLLINS STREET</div> City or town, state or province. Include postal code where appropriate. <div style="border: 1px solid black; padding: 2px; display: inline-block;">MELBOURNE VIC 3000</div> </div> <div style="flex: 1; border-left: 1px solid black; padding-left: 10px;"> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> Do not use a P.O. box or in-care-of address (other than a registered address). </div> Only applicable to Part I (6), you can complete your PO Box address in Part I (7) if you have provided a street address in Part I (6) </div> <div style="flex: 1; border-left: 1px solid black; padding-left: 10px;"> Country <div style="border: 1px solid black; padding: 2px; display: inline-block;">AUSTRALIA</div> </div> </div>		
7 Mailing address (if different from above) <div style="border: 1px solid black; padding: 2px; display: inline-block;">PO BOX 125</div> City or town, state or province. Include postal code where appropriate. <div style="border: 1px solid black; padding: 2px; display: inline-block;">MELBOURNE VIC 3000</div> <div style="float: right; text-align: right;"> Country <div style="border: 1px solid black; padding: 2px; display: inline-block;">AUSTRALIA</div> </div>		

FOR REFERENCE ONLY

EXTRACT FROM Page 2

Form W-8BEN-E (Rev. 10-2021)

Page **2**

Part I Identification of Beneficial Owner (continued)		
8 U.S. taxpayer identification number (TIN), if required		
9a GIIN	b Foreign TIN 12 345 678 901	c Check if FTIN not legally required. <input type="checkbox"/>
10 Reference number(s) (see instructions)		Part I (9b) - You may provide the ABN or ACN for the Entity in this section

Note: Please complete remainder of the form including signing the form in Part XXX.

Part III Claim of Tax Treaty Benefits (if applicable). (For chapter 3 purposes only.)	
14 I certify that (check all that apply):	
a <input checked="" type="checkbox"/> The beneficial owner is a resident of AUSTRALIA within the meaning of the income tax treaty between the United States and that country.	
b <input checked="" type="checkbox"/> The beneficial owner derives the item (or items) of income for which the treaty benefits are claimed, and, if applicable, meets the requirements of the treaty provision dealing with limitation on benefits. The following are types of limitation on benefits provisions that may be included in an applicable tax treaty (check only one; see instructions):	
<div> <div>Select 14 (a) & (b)</div> <div> <input type="checkbox"/> Tax-exempt pension trust or pension fund <input type="checkbox"/> Other tax-exempt organization <input type="checkbox"/> Publicly traded corporation <input type="checkbox"/> Subsidiary of a publicly traded corporation </div> </div>	<div> <input checked="" type="checkbox"/> Company that meets the ownership and base erosion test https://www.irs.gov/businesses/international-businesses/australia-tax-treaty-documents Treaty has a "limitation on benefits" Article 16 requiring that the ownership of the company is at least 75% held by Australian residents and solvent company usually meets the base erosion test requirements. </div>
c <input type="checkbox"/> The beneficial owner is claiming treaty benefits for U.S. source dividends received from a foreign corporation or interest from a U.S. trade or business of a foreign corporation and meets qualified resident status (see instructions).	
15 Special rates and conditions (if applicable—see instructions): The beneficial owner is claiming the provisions of Article and paragraph _____ of the treaty identified on line 14a above to claim a _____ % rate of withholding on (specify type of income): _____ Explain the additional conditions in the Article the beneficial owner meets to be eligible for the rate of withholding: _____	

EXTRACT FROM Page 7

Part XXV Active NFFE		Select Part XXV (39) if Active NFFE is selected in Part I (5)
39 <input type="checkbox"/> I certify that:		
<ul style="list-style-type: none"> The entity identified in Part I is a foreign entity that is not a financial institution; Less than 50% of such entity's gross income for the preceding calendar year is passive income; and Less than 50% of the assets held by such entity are assets that produce or are held for the production of passive income (calculated as a weighted average of the percentage of passive assets measured quarterly) (see instructions for the definition of passive income). 		
Part XXVI Passive NFFE		Select Part XXVI (40a) and (40b <u>or</u> 40c) if Passive NFFE is selected in Part I (5)
40a <input type="checkbox"/> I certify that the entity identified in Part I is a foreign entity that is not a financial institution (other than an investment entity organized in a possession of the United States) and is not certifying its status as a publicly traded NFFE (or affiliate), excepted territory NFFE, active NFFE, direct reporting NFFE, or sponsored direct reporting NFFE.		
Check box 40b or 40c, whichever applies.		
b <input type="checkbox"/> I further certify that the entity identified in Part I has no substantial U.S. owners (or, if applicable, no controlling U.S. persons); or		
c <input type="checkbox"/> I further certify that the entity identified in Part I has provided the name, address, and TIN of each substantial U.S. owner (or, if applicable, controlling U.S. person) of the NFFE in Part XXIX.		

FOR REFERENCE ONLY**EXTRACT FROM Page 8****Part XXX Certification**

Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under penalties of perjury that:

- The entity identified on line 1 of this form is the beneficial owner of all the income or proceeds to which this form relates, is using this form to certify its status for chapter 4 purposes, or is submitting this form for purposes of section 6050W or 6050Y;
- The entity identified on line 1 of this form is not a U.S. person;
- This form relates to: (a) income not effectively connected with the conduct of a trade or business in the United States, (b) income effectively connected with the conduct of a trade or business in the United States but is not subject to tax under an income tax treaty, (c) the partner's share of a partnership's effectively connected taxable income, or (d) the partner's amount realized from the transfer of a partnership interest subject to withholding under section 1446(f); **and**
- For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.

Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which the entity on line 1 is the beneficial owner, if which the entity on line 1 is the beneficial owner.

Select to confirm that you have the capacity to sign for the entity

Information becomes incorrect.

☒ I certify that I have the capacity to sign for the entity identified on line 1 of this form.

Full name of the signer

DATE must be completed
in MM-DD-YYYY format
(e.g. 26th April 2024
would be 04-26-2024)

Sign Here

Authorised signatory to sign by hand
(digital signature not accepted)

Signature of individual authorized to sign for beneficial owner

PETER JACK JASON

Print Name

04-26-2024

Date (MM-DD-YYYY)

FOR REFERENCE ONLY

Form W-8BEN-E (Rev. October 2021) Department of the Treasury Internal Revenue Service	Certificate of Status of Beneficial Owner for United States Tax Withholding and Reporting (Entities) <small>► For use by entities. Individuals must use Form W-8BEN. ► Section references are to the Internal Revenue Code. ► Go to www.irs.gov/FormW8BENE for instructions and the latest information. ► Give this form to the withholding agent or payer. Do not send to the IRS.</small>	OMB No. 1545-1621												
Do NOT use this form for:														
• U.S. entity or U.S. citizen or resident W-9 • A foreign individual W-8BEN (Individual) or Form 8233 • A foreign individual or entity claiming that income is effectively connected with the conduct of trade or business within the United States (unless claiming treaty benefits) W-8ECI • A foreign partnership, a foreign simple trust, or a foreign grantor trust (unless claiming treaty benefits) (see instructions for exceptions) W-8IMY • A foreign government, international organization, foreign central bank of issue, foreign tax-exempt organization, foreign private foundation, or government (other than a U.S. possession) connected U.S. income or that is claiming the applicability of section(s) 115(2), 501(c), 892, or 1361 (see instructions for other exceptions) W-8ECI or W-8EXP • Any person acting as a qualified derivatives dealer W-8IMY														
Instead use Form:														
Part I Identification of Beneficial Owner														
1 Name of organization that is the beneficial owner <div style="border: 1px solid red; padding: 2px; display: inline-block;">LUCKY SUPERANNUATION FUND</div>		2 Country of incorporation or organization <div style="border: 1px solid red; padding: 2px; display: inline-block;">AUSTRALIA</div>												
3 Name of disregarded entity receiving the payment (if applicable, see instructions)														
4 Chapter 3 Status (entity type) (Must check one box only): <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Simple trust</td> <td><input type="checkbox"/> Tax-exempt organization</td> <td><input checked="" type="checkbox"/> <div style="border: 1px solid red; padding: 2px;">Complex trust</div></td> <td><input type="checkbox"/> Partnership</td> </tr> <tr> <td><input type="checkbox"/> Central Bank of Issue</td> <td><input type="checkbox"/> Private foundation</td> <td><input type="checkbox"/> Estate</td> <td><input type="checkbox"/> Foreign Government - Controlled Entity</td> </tr> <tr> <td><input type="checkbox"/> Grantor trust</td> <td><input type="checkbox"/> Disregarded entity</td> <td><input type="checkbox"/> International organization</td> <td><input type="checkbox"/> Foreign Government - Integral Part</td> </tr> </table>			<input type="checkbox"/> Simple trust	<input type="checkbox"/> Tax-exempt organization	<input checked="" type="checkbox"/> <div style="border: 1px solid red; padding: 2px;">Complex trust</div>	<input type="checkbox"/> Partnership	<input type="checkbox"/> Central Bank of Issue	<input type="checkbox"/> Private foundation	<input type="checkbox"/> Estate	<input type="checkbox"/> Foreign Government - Controlled Entity	<input type="checkbox"/> Grantor trust	<input type="checkbox"/> Disregarded entity	<input type="checkbox"/> International organization	<input type="checkbox"/> Foreign Government - Integral Part
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If you entered disregarded entity, partnership, simple trust, or grantor trust above, is the entity a hybrid making a treaty claim? If "Yes," complete Part III. <input type="checkbox"/> Yes <input type="checkbox"/> No														
5 Chapter 4 Status (FATCA status) (See instructions for details and complete the certification below for the entity's applicable status.) <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Nonparticipating FFI (including an FFI related to a Reporting IGA FFI other than a deemed-compliant FFI, participating FFI, or exempt beneficial owner). <input type="checkbox"/> Participating FFI. <input type="checkbox"/> Reporting Model 1 FFI. <input type="checkbox"/> Reporting Model 2 FFI. <input type="checkbox"/> Registered deemed-compliant FFI (other than a reporting Model 1 FFI, sponsored FFI, or nonreporting IGA FFI covered in Part XII). See instructions. <input type="checkbox"/> Sponsored FFI. Complete Part IV. <input type="checkbox"/> Certified deemed-compliant nonregistering local bank. Complete Part V. <input type="checkbox"/> Certified deemed-compliant FFI with only low-value accounts. Complete Part VI. <input type="checkbox"/> Certified deemed-compliant sponsored, closely held investment vehicle. Complete Part VII. <input type="checkbox"/> Certified deemed-compliant limited life debt investment entity. </td> <td style="width: 50%; vertical-align: top;"> <input checked="" type="checkbox"/> <div style="border: 1px solid red; padding: 2px;">Nonreporting IGA FFI. Complete Part XII.</div> <div style="border: 1px solid red; padding: 2px; display: inline-block;">Select "Nonreporting IGA FFI" for Australian Superannuation</div> <input type="checkbox"/> Foreign government, government of a U.S. possession, or foreign territory. Complete Part XIII. <input type="checkbox"/> International organization. Complete Part XIV. <input type="checkbox"/> Exempt retirement plans. Complete Part XV. <input type="checkbox"/> Entity wholly owned by exempt beneficial owners. Complete Part XVI. <input type="checkbox"/> Territory financial institution. Complete Part XVII. <input type="checkbox"/> Excepted nonfinancial group entity. Complete Part XVIII. <input type="checkbox"/> Excepted nonfinancial start-up company. Complete Part XIX. <input type="checkbox"/> Excepted nonfinancial entity in liquidation or bankruptcy. Complete Part XX. <input type="checkbox"/> 501(c) organization. Complete Part XXI. <input type="checkbox"/> Nonprofit organization. Complete Part XXII. <input type="checkbox"/> Publicly traded NFFE or NFFE affiliate of a publicly traded corporation. Complete Part XXIII. <input type="checkbox"/> Excepted territory NFFE. Complete Part XXIV. <input type="checkbox"/> Active NFFE. Complete Part XXV. <input type="checkbox"/> Passive NFFE. Complete Part XXVI. <input type="checkbox"/> Excepted inter-affiliate FFI. Complete Part XXVII. <input type="checkbox"/> Direct reporting NFFE. <input type="checkbox"/> Sponsored direct reporting NFFE. 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6 Permanent residence address (street, apt. or suite no., or rural route) <div style="border: 1px solid red; padding: 2px; display: inline-block;">Do not use a P.O. box or in-care-of address (other than a registered address).</div> <div style="border: 1px solid red; padding: 2px; display: inline-block;">1 COLLINS STREET</div> City or town, state or province. Include postal code where appropriate. <div style="border: 1px solid red; padding: 2px; display: inline-block;">MELBOURNE VIC 3000</div>														
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FOR REFERENCE ONLYEXTRACT FROM Page 2

Form W-8BEN-E (Rev. 10-2021)

Page **2****Part I Identification of Beneficial Owner** (continued)**8** U.S. taxpayer identification number (TIN), if required**9a** GIIN**b** Foreign TIN

12 345 678 901

c Check if FTIN not legally required. ☐**10** Reference number(s) (see instructions)Part I (9b) - You may provide the ABN
or ACN for the Entity in this section**Note:** Please complete remainder of the form including signing the form in Part XXX.**Part III Claim of Tax Treaty Benefits** (if applicable). (For chapter 3 purposes only.)**14** I certify that (check all that apply):

- a** ☒ The beneficial owner is a resident of **AUSTRALIA** within the meaning of the income tax treaty between the United States and that country.
- b** ☒ The beneficial owner derives the item (or items) of income for which the treaty benefits are claimed, and, if applicable, meets the requirements of the treaty provision dealing with limitation on benefits. The following are types of limitation on benefits provisions that may be included in an applicable tax treaty (check only one; see instructions):

Select 14 (a) & (b)

☐ Tax-exempt pension trust or pension fund☐ Other tax-exempt organization☐ Publicly traded corporation☐ Subsidiary of a publicly traded corporation☐ Company that meets the ownership and base erosion test☐ Company that meets the derivative benefits test☐ Company with an item of income that meets active trade or business test☐ Favorable discretionary determination by the U.S. competent authority received☐ No LOB article in treaty☒ Other (specify Article and paragraph): **Article 16 (2)(g) - Ownership/base erosion test**

- c** ☐ The beneficial owner is claiming treaty benefits on income derived from a U.S. trade or business of a foreign corporation and meets the "ownership and base erosion" test

15 **Special rates and conditions** (if applicable—see instructions):

The beneficial owner is claiming the provisions of Article and paragraph _____

of the treaty identified on line 14a above to claim a _____ % rate of withholding on (specify type of income): _____

Explain the additional conditions in the Article the beneficial owner meets to be eligible for the rate of withholding: _____

EXTRACT FROM Page 5

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Page **5****Part XII Nonreporting IGA FFI****26** ☒ I certify that the entity identified in Part I:

- Meets the requirements to be considered a nonreporting financial institution pursuant to an applicable IGA between the United States and **AUSTRALIA** . The applicable IGA is a ☒ Model 1 IGA or a ☐ Model 2 IGA; and is treated as a **AUSTRALIAN RETIREMENT FUND** under the provisions of the IGA or Treasury regulations (if applicable, see instructions);

Select Model 1 IGA

- If you are a trustee documented trust or a sponsored entity, provide the name of the trustee or sponsor _____.

The trustee is: ☐ U.S. ☐ Foreign

FOR REFERENCE ONLY**EXTRACT FROM Page 8****Part XXX Certification**

Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under penalties of perjury that:

- The entity identified on line 1 of this form is the beneficial owner of all the income or proceeds to which this form relates, is using this form to certify its status for chapter 4 purposes, or is submitting this form for purposes of section 6050W or 6050Y;
- The entity identified on line 1 of this form is not a U.S. person;
- This form relates to: (a) income not effectively connected with the conduct of a trade or business in the United States, (b) income effectively connected with the conduct of a trade or business in the United States but is not subject to tax under an income tax treaty, (c) the partner's share of a partnership's effectively connected taxable income, or (d) the partner's amount realized from the transfer of a partnership interest subject to withholding under section 1446(f); **and**
- For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.

Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which the entity on line 1 is the beneficial owner, if which the entity on line 1 is the beneficial owner.

Select to confirm that you have the capacity to sign for the entity

form becomes incorrect.

☒ I certify that I have the capacity to sign for the entity identified on line 1 of this form.

Full name of the signer

DATE must be completed
in MM-DD-YYYY format
(e.g. 26th April 2024
would be 04-26-2024)

Sign Here

Authorised signatory to sign by hand
(digital signature not accepted)

Signature of individual authorized to sign for beneficial owner

PETER JACK JASON

Print Name

04-26-2024

Date (MM-DD-YYYY)

FOR REFERENCE ONLY

Form W-8BEN-E (Rev. October 2021) Department of the Treasury Internal Revenue Service		Certificate of Status of Beneficial Owner for United States Tax Withholding and Reporting (Entities) ▶ For use by entities. Individuals must use Form W-8BEN. ▶ Section references are to the Internal Revenue Code. ▶ Go to www.irs.gov/FormW8BENE for instructions and the latest information. ▶ Give this form to the withholding agent or payer. Do not send to the IRS.		OMB No. 1545-1621
Do NOT use this form for:				Instead use Form:
• U.S. entity or U.S. citizen or resident				W-9
• A foreign individual				W-8BEN (Individual) or Form 8233
• A foreign individual or entity claiming that income is effectively connected with the conduct of trade or business within the United States (unless claiming treaty benefits)				W-8ECI
• A foreign partnership, a foreign simple trust, or a foreign grantor trust (unless claiming treaty benefits) (see instructions for exceptions)				W-8IMY
• A foreign government, international organization, foreign central bank of issue, foreign tax-exempt organization, foreign private foundation, or government-owned or controlled entity claiming that income is effectively connected U.S. income or that is claiming the applicability of section(s) 115(2), 501(c), 892, or 1361 (see instructions for other exceptions)				W-8ECI or W-8EXP
• Any person claiming that income is effectively connected with the conduct of trade or business within the United States as a qualified derivatives dealer				W-8IMY
Part I Identification of Beneficial Owner				
1 Name of organization that is the beneficial owner		2 Country of incorporation or organization		
LUCKY FAMILY TRUST		AUSTRALIA		
3 Name of disregarded entity receiving the payment (if applicable, see instructions)				
4 Chapter 3 Status (entity type) (Must check one box only):				
<input type="checkbox"/> Simple trust <input type="checkbox"/> Tax-exempt organization <input checked="" type="checkbox"/> Complex trust <input type="checkbox"/> Partnership <input type="checkbox"/> Foreign Government - Controlled Entity				
<input type="checkbox"/> Central Bank of Issue <input type="checkbox"/> Private foundation <input type="checkbox"/> Estate <input type="checkbox"/> Foreign Government - Integral Part				
<input type="checkbox"/> Grantor trust <input type="checkbox"/> Disregarded entity <input type="checkbox"/> International organization				
If you entered disregarded entity, partnership, simple trust, or grantor trust above, is the entity a hybrid making a treaty claim? If "Yes," complete Part III. <input type="checkbox"/> Yes <input type="checkbox"/> No				
5 Chapter 4 Status (FATCA status) (See instructions for details and complete the certification below for the entity's applicable status.)				
<input type="checkbox"/> Nonparticipating FFI (including an FFI related to a Reporting IGA FFI other than a deemed-compliant FFI, participating FFI, or exempt beneficial owner).				
<input type="checkbox"/> Nonreporting IGA FFI. Complete Part XII.				
<input type="checkbox"/> Foreign government, government of a U.S. possession, or foreign central bank of issue. Complete Part XIII.				
<input type="checkbox"/> Participating FFI.				
<input type="checkbox"/> International organization. Complete Part XIV.				
<input type="checkbox"/> Reporting Model 1 FFI.				
<input type="checkbox"/> Exempt retirement plans. Complete Part XV.				
<input type="checkbox"/> Reporting Model 2 FFI.				
<input type="checkbox"/> Entity wholly owned by exempt beneficial owners. Complete Part XVI.				
<input type="checkbox"/> Registered deemed-compliant FFI (other than a reporting Model 1 FFI, sponsored FFI, or nonreporting IGA FFI covered in Part XII). See instructions.				
<input type="checkbox"/> Territory financial institution. Complete Part XVII.				
<input type="checkbox"/> Excepted nonfinancial group entity. Complete Part XVIII.				
<input type="checkbox"/> Excepted nonfinancial start-up company. Complete Part XIX.				
<input type="checkbox"/> Excepted nonfinancial entity in liquidation or bankruptcy. Complete Part XX.				
<input type="checkbox"/> Sponsored FFI. Complete Part IV.				
<input type="checkbox"/> 501(c) organization. Complete Part XXI.				
<input type="checkbox"/> Certified deemed-compliant nonregistering local bank. Complete Part V.				
Select EITHER Active NFFE or Passive NFFE. Refer to Part XXV and XXVI (Page 7) to determine the Chapter 4 Status of your Trust				
<input type="checkbox"/> Excepted territory NFFE. Complete Part XXIV.				
<input type="checkbox"/> Active NFFE. Complete Part XXV.				
<input type="checkbox"/> Passive NFFE. Complete Part XXVI.				
<input type="checkbox"/> Excepted inter-affiliate FFI. Complete Part XXVII.				
<input type="checkbox"/> Direct reporting NFFE.				
<input type="checkbox"/> Sponsored direct reporting NFFE. Complete Part XXVIII.				
<input type="checkbox"/> Account that is not a financial account.				
<input type="checkbox"/> Certified deemed-compliant limited life debt investment entity.				
6 Permanent residence address (street, apt. or suite no., or rural route)				
1 COLLINS STREET		Do not use a P.O. box or in-care-of address (other than a registered address).		
City or town, state or province. Include postal code where appropriate.		Country		
MELBOURNE VIC 3000		AUSTRALIA		
7 Mailing address (if different from above)				
PO BOX 125		Country		
City or town, state or province. Include postal code where appropriate.		AUSTRALIA		
MELBOURNE VIC 3000				

For Paperwork Reduction Act Notice, see separate instructions. Cat. No. 59689N Form **W-8BEN-E** (Rev. 10-2021)

FOR REFERENCE ONLYEXTRACT FROM Page 2

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Page **2**

Part I Identification of Beneficial Owner (continued)		
8 U.S. taxpayer identification number (TIN), if required		
9a GIIN	b Foreign TIN 12 345 678 901	c Check if FTIN not legally required. <input type="checkbox"/>
10 Reference number(s) (see instructions)	Part I (9b) - You may provide the ABN or ACN for the Entity in this section	

Note: Please complete remainder of the form including signing the form in Part XXX.

Part III Claim of Tax Treaty Benefits (if applicable). (For chapter 3 purposes only.)	
14 I certify that (check all that apply):	
a <input checked="" type="checkbox"/> The beneficial owner is a resident of <u>AUSTRALIA</u> within the meaning of the income tax treaty between the United States and that country.	
b <input checked="" type="checkbox"/> The beneficial owner derives the item (or items) of income for which the treaty benefits are claimed, and, if applicable, meets the requirements of the treaty provision dealing with limitation on benefits. The following are types of limitation on benefits provisions that may be included in an applicable tax treaty (check only one; see instructions):	
<div>Select 14 (a) & (b)</div> <div><input type="checkbox"/> Tax-exempt pension trust or pension fund</div> <div><input type="checkbox"/> Other tax-exempt organization</div> <div><input type="checkbox"/> Publicly traded corporation</div> <div><input type="checkbox"/> Subsidiary of a publicly traded corporation</div>	<div><input type="checkbox"/> Company that meets the ownership and base erosion test</div> <div><input type="checkbox"/> Company that meets the derivative benefits test</div> <div><input type="checkbox"/> Company with an item of income that meets active trade or business test</div> <div><input type="checkbox"/> Favorable discretionary determination by the U.S. competent authority received</div> <div><input type="checkbox"/> No LOB article in treaty</div>
c <input type="checkbox"/> The beneficial owner is claiming treaty benefits from a U.S. trade or business of a foreign corporation and meets the requirements of the treaty.	<div><input checked="" type="checkbox"/> Other (specify Article and paragraph): Article 16 (2)(g) - Ownership/base erosion test</div> <div>Company or Trust that meets "the ownership and base erosion" test</div>
15 Special rates and conditions (if applicable—see instructions):	
The beneficial owner is claiming the provisions of Article and paragraph _____ of the treaty identified on line 14a above to claim a _____ % rate of withholding on (specify type of income): _____	
Explain the additional conditions in the Article the beneficial owner meets to be eligible for the rate of withholding: _____	

EXTRACT FROM Page 7

Part XXV Active NFFE		Select Part XXV (39) if Active NFFE is selected in Part I (5)
39	<input type="checkbox"/> I certify that: <ul style="list-style-type: none">• The entity identified in Part I is a foreign entity that is not a financial institution;• Less than 50% of such entity's gross income for the preceding calendar year is passive income; and• Less than 50% of the assets held by such entity are assets that produce or are held for the production of passive income (calculated as a weighted average of the percentage of passive assets measured quarterly) (see instructions for the definition of passive income).	
Part XXVI Passive NFFE		Select Part XXVI (40a) and (40b or 40c) if Passive NFFE is selected in Part I (5)
40a	<input type="checkbox"/> I certify that the entity identified in Part I is a foreign entity that is not a financial institution (other than an investment entity organized in a possession of the United States) and is not certifying its status as a publicly traded NFFE (or affiliate), excepted territory NFFE, active NFFE, direct reporting NFFE, or sponsored direct reporting NFFE.	
Check box 40b or 40c, whichever applies.		
b	<input type="checkbox"/> I further certify that the entity identified in Part I has no substantial U.S. owners (or, if applicable, no controlling U.S. persons); or	
c	<input type="checkbox"/> I further certify that the entity identified in Part I has provided the name, address, and TIN of each substantial U.S. owner (or, if applicable, controlling U.S. person) of the NFFE in Part XXIX.	

FOR REFERENCE ONLYEXTRACT FROM Page 8**Part XXX Certification**

Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under penalties of perjury that:

- The entity identified on line 1 of this form is the beneficial owner of all the income or proceeds to which this form relates, is using this form to certify its status for chapter 4 purposes, or is submitting this form for purposes of section 6050W or 6050Y;
- The entity identified on line 1 of this form is not a U.S. person;
- This form relates to: (a) income not effectively connected with the conduct of a trade or business in the United States, (b) income effectively connected with the conduct of a trade or business in the United States but is not subject to tax under an income tax treaty, (c) the partner's share of a partnership's effectively connected taxable income, or (d) the partner's amount realized from the transfer of a partnership interest subject to withholding under section 1446(f); **and**
- For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.

Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which the entity on line 1 is the beneficial owner, or to any other person if which the entity on line 1 is the beneficial owner.

Select to confirm that you have the capacity to sign for the entity **Signature becomes incorrect.**

☒ I certify that I have the capacity to sign for the entity identified on line 1 of this form.

Full name of the signer

DATE must be completed
in MM-DD-YYYY format
(e.g. 26th April 2024
would be 04-26-2024)

Sign Here

Authorised signatory to sign by hand
(digital signature not accepted)

Signature of individual authorized to sign for beneficial owner

PETER JACK JASON

Print Name

04-26-2024

Date (MM-DD-YYYY)