Know Your Customer: Non-Individual Investor Form



1. Investor details

Registered name of legal entity					
Company Registration Number					
Trading Name					
		*(only complete if different	from the registered name)		
Country of Incorporation					
Date of Incorporation					
Nature of Business					
Email Address					
Registered Address					
Postal address					
		*(only complete if different fr	om the registered address)		
Country			Postal code		
Website					
		*(only if applicable)			
The following information is required Common Reporting Standards (CRS)		d international tax compliance with Income Tax Ac	t, Foreign Account Compliance Act (FATCA) and		
Primary country of tax residence	mary country of tax residence Tax Identification Number				
If your primary country of tax residence is Botswana, are you registered for Value-Added Tax (VAT)?					
Yes No If "Yes", please supply your VAT number					
Is the organisation a registered tax payer of any country other than your primary country of residence?					
Yes No					
If "Yes", please complete the information below for each country of tax residency					
Country of tax residence		Tax Identification Number			

Organisation's classification unde	r FATCA (if applicable, please fill the below)						
Participating Foreign Financi	al Institution (in a non-Intergovernmental Agreement jurisdiction).						
Non-Participating Foreign Financial Institution (in a non - Intergovernmental Agreement jurisdiction).							
Financial Institution resident	in the USA or in a US Territory.						
Exempt Beneficial Owner (the Organisation).	nis includes a Botswana registered retirement scheme, a Botswana Governmental Organisation, or an International						
Deemed Compliant Foreign F	Deemed Compliant Foreign Financial Institution (this includes Non-Profit Organisations and Financial Institutions with a Local Client Base).						
If you are a financial institution th	at has obtained a Global Intermediary Identification Number (GIIN), kindly provide the GIIN number below:						
If your organisation is not a Finan	cial Institution, please specify below:						
Active Non-Financial Entity	sai institution, piease specify below.						
Passive Non-Financial Entity							
	ganisation is a US tax resident and not a specified US person:						
	n on a recognised stock exchange.						
	nber of the same expanded affiliated group as a regularly traded corporation on a recognised stock exchange.						
A government entity.							
Any bank as defined in section	on 581 of the U.S. Internal Revenue Code.						
A retirement plan under sect	ion 7701(a)(37) or exempt organisation under section 501(a) of the U.S. Internal Revenue Code.						
OR any other exclusion							
2. Details of contact Capacity/Position Title Dr Mr	Mrs Ms Other (Please specify)						
Title Di IVII	Wils Wils Other (Flease specify)						
First name(s)							
Surname							
Citizenship							
Physical address							
Village/Town/City	Postal code						
Date of birth	Country of birth						
Omang / Passport Number (if foreign national):							
Expiry date							
11.110 0	(dd/mm/yyyy)						
If US Citizen, please provide your social security number							
Email address							
Telephone (office)							
Mobile							
Fax							

3. Investor Banking Deta All fields are mandatory	ils					
Bank account name						
Name of bank		Account nu	ımber			
Branch name		6-digit branch	code			
Type of account Current	Savings					
4. Declaration of Controll	ling Persons					
The Organization hereby confirms owner(s) of the Organization thro the spaces provided below, or if the organization through the organization thro	ugh ownership in the interm	ediate or ultimate hol	ding companies. F			
Full Name	Physical Address	Date of Birth	Nationality	Controller Type	(%) of Ownership	
				.,,,,,	- CWIII CICIII P	
Anti – Money Laundering	and Counter Terroris	t Financing Requ	irements Che	ck List		
Before we can enter into a transac (2022) as well as the Non-Bank F Entity, as well as the identities of	inancial Institutions Regulate	ory Authority (NBFIRA) requires that we	verify both the id	dentity of the Legal	
We also require certain informat establish residency, citizenship, c	· .				•	
1. Natural Persons						
The following documents must b	e submitted for all beneficia	l owners and controlli	ng persons.			
Certified copy of identity document (ID), e.g. Omang; or						
Certified copy of Passport (if foreign national).						
Proof of physical address						
Please ensure that documents cle	arly show your Full names, S	urname, ID number an	d issue date.			
Please note that below are consid	ered as Controlling Persons:					
 Any member with a shareholding or Voting rights of 10% or more Directors Management Signatories Trustees 						

For Trusts, the following are considered as Controlling Persons:

- Settlors
- Founders
- Trustees
- Protector (if any)

	2. Companies
	a. Public Listed Company
	Certificate of incorporation
F	Certificate of name change (if applicable)
	Proof of operating address
	Proof of banking details (stamped)
F	Organogram showing ownership and control structure of the company.
	Directors Resolution of Authorised Signatories with specimen signatures on a company letterhead
F	Proof of registration with BURS for income tax and VAT
Ε	Tax exemption certificate (if applicable)
	Latest audited financial statements (if not available on BSE or company website)
	Confirmation of the nature of business (Regulatory licenses and /or AFS may be used)
	Company Constitution
	Form C- Completed by all signatories
_	Form C- Completed by all directors.
	Form C- Completed by all shareholders with 10% shareholding or more.
F	Proof of identity for all signatories (certified)
Ē	Proof of identity for all directors (certified)
Ē	Proof of identity for all shareholders with 10% shareholding or more
	Proof of residential address of all authorised signatories
	Proof of residential address of all directors
	Proof of residential address of all shareholders with a 10% shareholding or more
	b. Private Unlisted Company
	Certificate of incorporation
	Certificate of Name change (if applicable)
	Proof of operating address
	Proof of banking details (stamped)
	Organogram showing ownership and control structure of the Private Company.
	Directors Resolution of Authorised Signatories with specimen signatures on a company letterhead
_	Proof of registration with BURS for Income tax and VAT (if applicable)
_	Tax exemption certificate (if applicable)
	Latest audited financial statements
	Confirmation of the nature of the business. (Regulatory licenses and /or AFS may be used)
	Company constitution
	Form C - completed by all signatories
	Form C - completed by all directors
	Form C - completed by all shareholders with 10% shareholding or more
	Proof of identity for all authorised signatories (certified)
	Proof of identity for all directors (certified)
	Proof of identity for all shareholders with a 10% shareholding or more (certified)
	Proof of residential address of all authorised signatories
	Proof of residential address of all directors
	Proof of residential address of all shareholders with a 10% shareholding or more
	3. Close Corporations
	Certificate of Incorporation
	Amended Certificate of Incorporation (if applicable)
	Proof of operating address
	Latest audited financial statements
	Proof of banking details (stamped)
	Ownership structure
	Proof of registration with BURS for Income tax and VAT (if applicable)
	Proof of tax exemption (if applicable)
	Proof of regulation (if applicable)
	Resolution of Authorized Signatories with specimen signatures
	Form C - completed by all signatories
	Form C - completed by all directors
	Form C - completed by all shareholders with 10% shareholding or more
	Proof of identity for all authorized signatories (certified)
	Proof of identity for all directors (certified)
	Proof of identity for all shareholders with a 10% shareholding or more (certified)
	Proof of residential address of all authorised signatories
L	Proof of residential address of all directors
	Proof of residential address of all shareholders with a 10% shareholding or more

	4. Partnerships
	Founding Statement and/or Partnership Agreement
	Proof of operating address for the Partnership
L	Resolution of Authorized Signatories with specimen signatures
L	Proof of registration and registration number of the partnership
L	Proof of banking details (Stamped)
F	Proof of registration with BURS for Income tax and VAT (if applicable)
L	Proof of tax exemption (if applicable)
H	Ownership/Partnership structure
H	Proof of Identity of all Partners (certified)
H	Proof of identity for all beneficial owners (certified)
H	Proof of identity for all controlling persons (certified) Proof of identity for all authorised signatories (certified)
	Proof of residential address of all Partners
	Proof of residential address of all beneficial owners
	Proof of residential address of all controlling persons
	Proof of residential address of all authorised signatories
	Form C – completed by all Partners
	Form C – completed by all beneficial owners
	Form C – completed by all controlling persons
	Form C – completed by all authorized signatories
	5. Trusts
	a. Inter Vivos
	Certificate of registration with the Registrar of Trusts
	Trust Deed
	Proof of physical address
	Proof of banking details (stamped)
	Resolution of authorized signatories with specimen signatures
	Proof of registration with BURS for Income tax and VAT (if applicable)
	Proof of tax exemption (if applicable)
	Latest audited financial statements
	Statement of Accounts (AFS may be used)
	For Settlers, Founders, Trustees, Beneficiaries, Signatories and Protectors, please provide the following for each person: Certified proof of identity Proof of physical address (recent utility bill) Proof of association with the trust Completed Form C b. Testamentary, Curatorship and Trusts by Court Order Certificate of registration with the Registrar of Trusts
	Last Will and Testament or Trust Deed
	Letters of Authority (stamped by the Master of the High Court)
	Resolution of authorized signatories with specimen signatures
	Proof of banking details (stamped)
	Proof of registration with BURS for Income tax and VAT (if applicable)
	Proof of tax exemption (if applicable)
	Latest audited financial statements
	Statement of Accounts (AFS may be used)
	For Settlers, Founders, Trustees, Beneficiaries, Signatories and Protectors, please provide the following for each person: Certified proof of identity Proof of physical address (recent utility bill) Proof of association with the trust Completed Form C
	6. Other Legal Entities Proof of principal activities
	a. Unions, Associations, Medical Schemes, Clubs, Churches, etc. Founding document or Constitution Proof of operating/physical address Proof of banking details (stamped) Members Resolution of Authorised Signatories with specimen signatures Proof of Identity of all persons authorised to act on behalf of the Legal Entity (certified) Proof of residential address for all persons authorised to act on behalf of the legal entity
	b. Metshelo
	Founding Statement
	Proof of banking details (stamped)
	Members resolution of authorised signatories with specimen signatures
	Proof of Identity of all members of the Motshelo (certified)
	Proof of residential address of all members of the Motshelo
	Form C - completed by the Chairperson and all Authorised Signatories of the Motshelo

7. Pension/Provident Funds A copy of a registration document reflecting the Fund's Registration Number Resolution of Authorised Signatories with specimen signatures Proof of operating address Proof of banking details (Stamped) Proof of registration with BURS for Income tax and VAT (if applicable) Proof of tax exemption (if applicable) Confirmation of any beneficial owners with 10% or more of the fund Proof of Identity of all persons authorised signatories (certified) Proof of physical address of all authorised signatories Proof of physical address of all Trustees to the Fund Form C - completed by all authorised signatories Form C - completed by all Trustees to the Fund	
8. Government Entity Act of Parliament Certificate of name change (if applicable) Proof of operating address Proof of banking details (stamped) Directors Resolution of Authorised Signatories with specimen signatures Proof of registration with BURS for Income tax and VAT Latest audited financial statements Proof of registration with BURS for Income tax and VAT (if applicable) Proof of tax exemption (if applicable) Proof of identity of all authorised signatories Proof of identity of all directors Proof of physical address of all authorised signatories Proof of physical address of all directors Form C - completed by all authorised signatories Form C - completed by all directors	
9. Discretionary Financial Services Providers and Brokers a. Onboarding a Broker / Financial Services Provider Certificate of incorporation / Certificate of registration Proof of banking details (stamped) A copy of brokerage license and Annexures reflecting the Broker/FSP number Resolution of Authorised Signatories for the Broker/FSP with specimen signatures Proof of Identity of all persons authorised to act on behalf of the Broker/FSP Proof of residential address of all persons authorised to act on behalf of the entity	
10. We may require additional documents if: You are not a Botswana citizen or Botswana registered entity We are unable to verify your information You are tax resident outside of Botswana	
a. These may include: Proof of physical/operating address Proof of banking details (stamped) Proof of source of funds	
11. Documents that we accept as proof of address: Utility bill in the entity's name (Council Rates and Taxes, Water, Electricity) Telecommunications contract statement in the entity's name Wi-Fi provider statement in the entity's name Letter from the Rental company on a letterhead (stamped) BURS document (excluding assessments or e-filing documents) which displays physical address. Copy of lease or rental agreement which displays physical address (it is acceptable to only accept the first and last page of the lease aglease period & address is reflected on these pages) Police Affidavit A letter from the company secretary (stamped)	greement if the

Declaration and Signature

I certify that the information i have provided above is true and correct.

Signatory			_	(dd/mm/yyyy)		_	
Authorised Signature			=				
Name of Authorised Signatory			Date -	(alaliana hana)	Capacity		
Authorised Signature			_	(dd/mm/yyyy)			
Name of Authorised Signatory			Date		Capacity		
Authorised Signature			_	(dd/mm/yyyy)			
FOR OFFICE USE ON	ILY						
Checked by		Receiv	Received by			Reviewed by	
Name & S	ignature	Name & S	Signature			Name & Signature	

Disclaimer

Collective investment schemes are generally medium to long-term investments. Please note that past performances are not necessarily an accurate determination of future performances, and that the value of investments / units / unit trusts may go down as well as up. A schedule of fees and charges and maximum commissions is available from Bifm Unit Trusts (Pty), a registered and approved Manager in Collective Investment Undertakings (ClUs) in Botswana. Additional information of the proposed investment, including brochures, application forms and annual or quarterly reports, can be obtained from the Manager, free of charge. Collective investments are calculated on a net asset value basis, which is the total market value of all assets in the portfolio including any income accruals and less any deductible expenses such as audit fees, brokerage and service fees. Actual investment performance of the portfolio and the investor will differ depending on the initial fees applicable, the actual investment date, and the date of reinvestment of income as well as dividend withholding tax. Forward pricing is used. The Manager does not provide any guarantee either with respect to the capital or the return of a portfolio. The performance of the portfolio depends on the underlying assets and variable market factors. International investments or investments in foreign securities could be accompanied by additional risks such as potential constraints on liquidity and repatriation of funds, macroecomonic risk, political risk, foreign exchange risk, tax risk, settlement risk. Bifm Unit Trusts (Pty) Ltd offices plot 66458, Fairgrounds Office Park, Block A, Ground Floor.

Form C **Additional information required for KYC**



Important information

- This form must be completed by all parties stated in the Application Form.
- Each person is required to complete the sections below. In the event that more than one page is required, copies of this section can be made and must accompany the fully completed application form.
- Documents must be provided as stated in the Application Form.

Personal details				
Title Dr Mr	Mrs Ms	Other (Please specify)		
First name(s)				
Surname				
Capacity				
Residential address				
Country				Postal code
Date of birth			C	Country of birth
	(dd/mm/yyyy)			
Omang / Passport Number (if foreign national):				
Expiry date				
		(dd/mm/yy	yyy)	
Country of issue				
If US Citizen, please provide your social security number				
Email address				
Contact number(s)				
Primary country of tax residen	ce			
Tax Identification Number				
		er than your primary country of resic r each country of tax residency.	dence?	Yes No
Country of tax residence		Tax Identification Number	OR	Reason Tax Number not Applicable
			\dashv	
Declaration and sig	nature		_	
I certify that the information I h	nave provided above	e is true and correct.		
Authorised signatory			Date s	signed
Authorised signatory acting on	behalf of the Lega	l Entity.		(dd/mm/yyyy)