

PROTECTOR INFORMATION FORM

A. TRUST DETAILS

Name of Trust

B. PROTECTOR DETAILS

Full Name

Residential Address

Jurisdiction of Tax Residence

Email Address

Taxpayer Identification Number

C. DECLARATION

I do solemnly and sincerely declare that:

1. I am the current Protector of the above named trust of which is the current trustee.
2. I have been advised of and agree to provide information to the Trustee (as may be requested) that may be required in order to comply with the record keeping requirements in the Tax Administration Act 1994, the Anti-Money Laundering and Countering Financing of Terrorism Act 2009 and Regulations, and the Automatic Exchange of Information/Common Reporting Standard requirements. This may include, but not be limited to:
 - a. Information relating to the source of funds settled on the Trust
 - b. Information relating to any assets and/or liabilities held by the Trust or any entity owned by the Trust
 - c. Information relating to any distributions made or to be made from the Trust (or any entity owned by the Trust)
 - d. Information on the annual financial performance of any assets owned by the Trust (or any entity owned by the Trust)
 - e. Up-to-date personal information on the Settlor, Beneficiaries, Protector and any director or nominee shareholder of any entity owned by the Trust.

I am aware that the full text of the above mentioned legislation can be found at <http://www.legislation.govt.nz/> and have been given the opportunity to view this and to take advice, if necessary, on obligations which may arise in accordance with this legislation prior to signing this declaration.

I do solemnly and sincerely declare that the above is true and correct, and make this solemn declaration consciously believing the same to be true.

Protector Signature

Full Name

Date (DD/MM/YYYY)

Witness Signature

Full Name

Date (DD/MM/YYYY)

Occupation

Residential Address