

# W-8BEN ENTITY FORM TO CLAIM US TAX TREATY BENEFITS HOW TO COMPLETE THE FORM W-8BEN-E (COMPANY)

#### Please note:

- This guidance is only applicable when the company is satisfied following two conditions:
   1) At least 50% (by vote or value) of the company is held by Australian and/or U.S. persons;
   2) at least 50% of the gross income the company is being paid to Australian and/or U.S, persons as deductible payments.
- 2. The U.S. share CFD investor, who is not a U.S. person, should complete the form.
- 3. The form should be completed by the director of the company.
- 4. The form W-8BEN-E will be valid for a period starting on the date the form is signed and ending on the last date of the third succeeding calendar year.
- 5. Should any changes happen to your tax residency after the submission of the form, please declare the change to AETOS.
- 6. By following the requirement by the U.S. authority, the form should be completed with a handwritten signature, otherwise an electronic signature with a time and date stamp and the statement that the form has been signed electronically is also acceptable.
- 7. The form must be completed correctly without any amendments. Please use a new form instead if a mistake made.
- 8. All DATE should be put down in U.S. date format (MM-DD-YYYY).

#### Step 1: Determine the Chapter 4 Status (Line 5) for your company

#### 1) Is your company a Not For Profit (NFP)?

YES – check the box "Nonprofit organization" in line 5 and complete Part XXII as per request No – refer for Q(2);

# 2) Does your company perform business other than specified investments or personal services business?

YES - check the box "Passive NFFE" in line 5

No – refer to Q(3)

3) Were 50% or more of all assets held as passive investment assets (e.g. dividend/interests/rent/royalties)?

YES – check the box "Passive NFFE" in line 5

No – refer to (Q4)

4) Was 50% or more of the company's gross income derived from passive investments (e.g. dividends/interests/rent/royalties)?

YES – check the box "Passive NFFE" in line 5

No – check the box "Active NFFE" in line 5

#### Definition:

Active NFFE – When at least 50% of the gross income of a company is derived from its primary line of business;

Passive NFFE: When at least 50% of the gross income of a company is from passive sources of income and not from their direct line of business.

Passive sources of income include dividends, interests, rent, royalties and annuities etc.

#### (Continued on the next page)

AFSL:313016 ACN: 125113117



#### Step 2 Company – Passive Non-Financial Foreign Entity (NFFE)

#### • Page 1 – Part I

501(c), 892, 895, or 1443(b) (unless claiming treaty benefits) (see instructions for other exceptions) . W-8ECI or W-8EXP Any person acting as an intermediary (including a qualified intermediary acting as a qualified derivatives dealer) W-8IMY Part I Identification of Beneficial Owner 2 Country of incorporation or organization Name of organization that is the beneficial owner 
 Sector Country name 4 Chapter 3 Status (entity type) (Must check one box only): Corporation Partnership Simple trust Complex trust Tax-exempt organization Foreign Government - Controlled Entity Central Bank of Issue Private foundation Estate Foreign Government - Integral Part Grantor trust Disregarded entity 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. 🗌 Yes 🗌 No Chapter 4 Status (FATCA status) (See instructions for details and complete the certification below for the entity's applicable status.) Nonparticipating FFI (including an FFI related to a Reporting IGA Nonreporting IGA FFI. Complete Part XII. FFI other than a deemed-compliant FFI, participating FFI, or Foreign government, government of a U.S. possession, or foreign central bank of issue. Complete Part XIII. exempt beneficial owner). Participating FFI. International organization. Complete Part XIV. Reporting Model 1 FFI. Exempt retirement plans. Complete Part XV. Reporting Model 2 FFI. Entity wholly owned by exempt beneficial owners. Complete Part XVI. Registered deemed-compliant FFI (other than a reporting Model 1 Territory financial institution, Complete Part XVII. FFI, sponsored FFI, or nonreporting IGA FFI covered in Part XII). Excepted nonfinancial group entity, Complete Part XVIII. See instructions. Excepted nonfinancial start-up company. Complete Part XIX. Sponsored FFI. Complete Part IV. Excepted nonfinancial entity in liquidation or bankruptcy. Certified deemed-compliant nonregistering local bank. Complete Complete Part XX. Part V. 501(c) organization. Complete Part XXI. Certified deemed-compliant FFI with only low-value accounts. Nonprofit organization. Complete Part XXII. Complete Part VI. Publicly traded NFFE or NFFE affiliate of a publicly traded corporation. Complete Part XXIII. Certified deemed-compliant sponsored, closely held investment vehicle. Complete Part VII. Excepted territory NFFE. Complete Part XXIV. Certified deemed-compliant limited life debt investment entity. Active NFFE. Complete Part XXV. Complete Part VIII. Passive NFFE. Complete Part XXVI. Certain investment entities that do not maintain financial accounts. Complete Part IX. Excepted inte te FFI. Complet x vii Direct reporting NFFE. Owner-documented FFI. Complete Part X. Sponsored direct reporting NFFE. Complete Part XXVIII. Restrieted distributor. Complete Part XI.
 Account that is not a financial account.
Permanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address (other than a registered address). 6 Registered Address City or town, state or province. Include postal code where appropriate Country 7 Mailing address (if different from above) Postal address revir ce. Include postal code where appropriate Country

#### • Page 2 – Part 1

| Form W | V-8BEN-E (Rev. 10-2021)                               |                  |             |           |        | Page 2                           |
|--------|---|------------------|-------------|-----------|--------|----------------------------------|
| Pa     | Part I Identification of Beneficial Owner (continued) |                  |             |           |        |                                  |
| 8      | U.S. taxpayer identification number (TI               | N), if required  |             |           |        |                                  |
|        |   |                  |             |           |        |                                  |
| 9a     | GIIN  | b Foreign TIN    |             |           | c Cheo | k if FTIN not legally required ► |
| А      |   |                  | 3N no.      |           | U Onco |                                  |
| 10     | Reference number(s) (see instructions)                |                  | _           |           |        |                                  |
|        |   |                  | AET         | OS acct r | 10.    |                                  |
| Note:  | Please complete remainder of the form i               | ncluding signing | ine iomi in | Part XXX. |        |                                  |

#### (Continued on the next page)



### Step 2 Company – Passive Non-Financial Foreign Entity (NFFE)

Page 2 - Part III

| Part | rt III Claim of Tax Treaty Benefits (if applicable). (For   | chapter 3 purposes only.)  |
|------|---|--|
| 14   | eertify that (check all that apply):  | · · · · · · · · · · · · · · · · · · ·  |
| a    | treaty between the United States and that country.  | within the meaning of the income tax   |
| b    | in the beneficial entries actives the item (or items) of incente for  | which the treaty benefits are claimed, and, if applicable, meets the<br>fits. The following are types of limitation on benefits provisions that may<br>tions): |
|      | Government Company that n   | neets the ownership and base erosion test  |
|      | Tax-exempt pension trust or pension fund Company that n   | neets the derivative benefits test   |
|      | Other tax-exempt organization Company with a  | in item of income that meets active trade or business test   |
|      | Publicly traded corporation Favorable discre  | tionary determination by the U.S. competent authority received   |
|      | Subsidiary of a publicly traded corporation No LOB article i  | n treaty   |
|      | Other (specify A  | rticle and paragraph):   |
| С    | The beneficial owner is claiming treaty benefits for U.S. source div<br>or business of a foreign corporation and meets qualified resident s | /Idends received from a foreign corporation or interest from a U.S. trade tatus (see instructions).  |
| 15   | Special rates and conditions (if applicable - see instructions):  |  |
|      | The beneficial owner is claiming the provisions of Article and paragraph  | n  |
|      | 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 me  |  |
|      |   |  |
|      |   |  |
|      |   |  |
| •    | Page 7 – Part XXVI  |  |

# If a U.S. Person directly or indirectly owns more than 10% interest (by vote or value) in the company.

- No 40 b
- Yes 40 c

| weighted average of a | no percentage or passive | assets measured quartery) | lace managements for the | e deminion of passive moorney. |
|-----------------------|--------------------------|---------------------------|--------------------------|--------------------------------|

| Part ) | XXVI Passive NFFE   |
|--------|---|
| 40a    | 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      | 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      | 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, centrolling U.S. person) of the NFFE in Part XXIX.  |
|        | Form W-8BEN-E (Rev. 10-2021)  |
|        |   |

## Page 8 – Part XXX

#### Signed by the authorized representative(s) of the company

#### Please note: If you are unable to save an E-sign with a time&date stamp and the E-sign statement, the U.S. IRS requests a handwritten signature for the form instead.

#### 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 any withholding agent that can disburse or make payments of the income of which the entity on line 1 is the beneficial owner.

#### lagree that I will submit a new form within 30 days if any certification on this form becomes incorrect.

| ✓ I ce | rtify th | It I have the capacity to sign for the entity identified ( | on line 1 of t           | is form.  |            |                   |
|--------|----------|--|--------------------------|-----------|------------|-------------------|
| Sign H | lere     | Quan Yuan Digitally signed by Qu                           | uan Yuan<br>3:59 +11'00' | Quan Yuan |            | 11-04-2021        |
|        |          | Signature of individual authorized to sign for beneficia   | al owner                 |           | Print Name | Date (MM-DD-YYYY) |
|        |          |  |                          |           |            |                   |

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



# Step 2 Company – Active Non-Financial Foreign Entity (NFFE)

### • Page 1 – Part 1

| Art I Identification of Beneficial Owner Name of organization that is the beneficial owner                 | 2 Country of incorporation or organization  |
|--|---|
| name of company  | Country name  |
| Name of disregarded entity receiving the payment (if applicable, see in                                    |   |
|  |   |
| Simple trust     Tax-exempt organization     Co       Central Bank of Issue     Private foundation     Est | <ul> <li>plete the certification below for the entity's applicable status.)</li> <li>Nonreporting IGA FFI. Complete Part XII.</li> <li>Foreign government, government of a U.S. possession, or fore central bank of issue. Complete Part XIII.</li> <li>International organization. Complete Part XIV.</li> <li>Exempt retirement plans. Complete Part XV.</li> <li>Entity wholly owned by exempt beneficial owners. Complete Part</li> </ul> |
| Permanent residence address (street, apt. or suite no., or rural route). Do r                              | not use a P.O. box or in-care-of address (other than a registered address   |
| istered Address  |   |
| City or town, state or province. Include postal code where appropriate                                     | e. Country  |
| Mailing address (if different from above)  |   |
| tal address  | 0   |
| City or town, state or province. Include postal code where appropriate                                     | e. Country  |

### • Page 2 – Part 1

| Form V | V-8BEN-E (Rev. 10-2021)                 |                 |           |           |             | Page 2                            |
|--------|---|-----------------|-----------|-----------|-------------|-----------------------------------|
| Pa     | rt I Identification of Benefi           | cial Owner (c   | ontinued) |           |             |                                   |
| 8      | U.S. taxpayer identification number (TI | N), if required |           |           |             |                                   |
|        |   |                 |           |           |             |                                   |
| 9a     | GIIN                                    | b Foreign TIN   | 1         |           | c Cheo      | ck if FTIN not legally required ► |
|        |   | A               | BN no.    |           | • • • • • • |                                   |
| 10     | Reference number(s) (see instructions)  |                 | _         |           |             |                                   |
|        |   |                 | AET       | OS acct r | 10.         |                                   |

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

### (Continued on the next page)



#### Step 2 Company – Active Non-Financial Foreign Entity (NFFE)

• Page 2 – Part III

| 14 | <ul> <li>certify that (check all that apply):</li> <li>The beneficial owner is a resident of countril</li> </ul> |   |  |  |  |
|----|--|---|--|--|--|
| а  | treaty between the United States and that co   |   |  |  |  |
| b  | The beneficial owner derives the item (or  | items) of income for which the treaty benefits are claimed, and, if applicable, meets th<br>with limitation on benefits. The following are types of limitation on benefits provisions that ma |  |  |  |
|    | Government   | Company that meets the ownership and base erosion test  |  |  |  |
|    | Tax-exempt pension trust or pension fund   | Company that meets the derivative benefits test   |  |  |  |
|    | Other tax-exempt organization  |   |  |  |  |
|    | Publicly traded corporation  | Favorable discretionary determination by the U.S. competent authority received  |  |  |  |
|    | Subsidiary of a publicly traded corporation  | No LOB article in treaty  |  |  |  |
|    |  | Other (specify Article and paragraph):  |  |  |  |
| C  | <b>,</b>   | its for U.S. source dividends received from a foreign corporation or interest from a U.S. trad<br>ts qualified resident status (see instructions).  |  |  |  |
| 15 | Special rates and conditions (if applicable-see  | e instructions):  |  |  |  |
|    | The beneficial owner is claiming the provisions of   | f 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   | e beneficial owner meets to be eligible for the rate of withholding:  |  |  |  |

#### Page 7 - Part XXV

# Part XXV Active NFFE

#### 39 🗹 I certify that

- 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).

#### • Page 8 – Part XXX

Signed by the authorized representative(s) of the company

# Please note: If you are unable to save an E-sign with a time&date stamp and the E-sign statement, the U.S. IRS requests a handwritten signature for the form instead.

#### 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 any withholding agent that can disburse or make payments of the income of which the entity on line 1 is the beneficial owner.

#### hat I will submit a new form within 30 days if any certification on this form becomes incorrect.

| I certify the second | at I have the capacity to sign for the entity identified on line 1 of     | this form. |            |                   |
|---|---|------------|------------|-------------------|
| Sign Here   | Quan Yuan Digitally signed by Quan Yuan Date: 2021.11.04 11:53:59 +11'00' | Quan Yuan  |            | 11-04-2021        |
|   | Signature of individual authorized to sign for beneficial owner           |            | Print Name | Date (MM-DD-YYYY) |

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

AETOS CAPITAL GROUP PTY LTD

AFSL:313016 ACN: 125113117



## Step 2 Company – Not for Profit (NFP)

# • Page 1 – Part I

| - / 11 / 1 | person acting as an interm                                       | colary (moleculty a quantee intermediary ac  | ung ao a quannot                             | ou uonvanvoo uoanory  |         |
|------------|--|--|--|---|---------|
| Par        | t I Identification   | n of Beneficial Owner  |  |   | ┱       |
| 1          | Name of organization tha   |  |  | 2 Country of incorporation or organization  |         |
| Full na    | ame of company   |  |  | Country name  |         |
| 3          |  | ity receiving the payment (if applicable, see  | instructions)                                | · · ·   |         |
|            |  |  |  |   |         |
| 4          | Chapter 3 Status (entity t<br>Simple trust                       |  | orporation                                   | Partnership Foreign Government - Controlled   | Entity  |
|            | Central Bank of Issue  | e Private foundation Es  | state  | Foreign Government - Integral Par   | rt      |
|            | Grantor trust  | Disregarded entity   | ternational organ                            | anization   |         |
|            | If you entered disregarded enti                                  | ty, partnership, simple trust, or grantor trust above, is  | the entity a hybrid m                        | making a treaty claim? If "Yes," complete Part III. 🗌 Yes 🗌   | No      |
| 5          | Nonparticipating FFI   | (including an FFI related to a Reporting IGA<br>med-compliant FFI, participating FFI, or<br>vner). | Nonrepo<br>Foreign<br>central b<br>Internati | ification below for the entity's applicable status.)<br>sorting IGA FFI. Complete Part XII.<br>n government, government of a U.S. possession, or for<br>bank of issue. Complete Part XIII.<br>tional organization. Complete Part XIV.<br>t retirement plans. Complete Part XV.<br>wholly owned by exempt beneficial owners. Complete Part | -       |
|            | Registered deemed-<br>FFI, sponsored FFI, o<br>See instructions. | compliant FFI (other than a reporting Model<br>or nonreporting IGA FFI covered in Part XII).       | 1 Territory<br>Excepte<br>Excepte            | ry financial institution. Complete Part XVII.<br>ted nonfinancial group entity. Complete Part XVIII.<br>ted nonfinancial start-up company. Complete Part XIX  |         |
|            | Sponsored FFI. Com   | -  |  | ted nonfinancial entity in liquidation or bankruptcy.<br>ete Part XX.   |         |
|            | Part V.  | mpliant nonregistering local bank. Complete  | ,  |   |         |
|            |  | mpliant FFI with only low-value accounts.  | ✓ Nonprof                                    | organization. Complete Part XXI.<br>ofit organization. Complete Part XXII.<br>y traded NFFE or NFFE affiliate of a publicly traded  |         |
|            | Certified deemed-co<br>vehicle. Complete Pa                      | mpliant sponsored, closely held investment<br>art VII.   |  | ation. Complete Part XXIII.<br>ted territory NFFE. Complete Part XXIV.  |         |
|            | Certified deemed-com<br>Complete Part VIII.                      | npliant limited life debt investment entity.   |  | NFFE. Complete Part XXV.<br>e NFFE. Complete Part XXVI.   |         |
|            | Certain investment en<br>Complete Part IX.                       | tities that do not maintain financial accounts.  |  | ted inter-affiliate FFI. Complete Part XXVII.<br>reporting NFFE.  |         |
|            | Owner-documented   | FFI. Complete Part X.  | Sponsor                                      | ored direct reporting NFFE. Complete Part XXVIII.   |         |
|            | Restricted distributo  |  |  | nt that is not a financial account.   |         |
| 6          |  | ess (street, apt. or suite no., or rural route). Do  | not use a P.O. b                             | box or in-care-of address (other than a registered addre  | ess).   |
| Regist     | tered Address  |  |  |   |         |
|            | City or town, state or pro                                       | vince. Include postal code where appropriat  | te.  | Country   |         |
| 7          | Mailing address (if differe                                      | nt from above)   |  |   |         |
| Postal     | address  |  |  |   |         |
|            | Citv or town, state or pro                                       | vince. Include postal code where appropriat  | te.  | Country   |         |
| For Pa     | aperwork Reduction Act N   | Notice, see separate instructions.   | Cat. No.                                     | D. 59689N Form W-8BEN-E (Rev. 1)  | 0-2021) |

#### • Page 2 – Part 1

| Form W  | V-8BEN-E (Rev. 10-2021)                               |                  |             |           |                               | Page 2                         |
|---------|---|------------------|-------------|-----------|-------------------------------|--------------------------------|
| Par     | Part I Identification of Beneficial Owner (continued) |                  |             |           |                               |                                |
| 8       | U.S. taxpayer identification number (TI               | N), if required  |             |           |                               |                                |
|         |   |                  |             |           |                               |                                |
| 9a      | GIIN  | b Foreign TIN    |             |           | c Cheo                        | k if FTIN not legally required |
| ABN no. |   |                  |             | C Offee   | akin hin hot legally required |                                |
| 10      | 10 Reference number(s) (see instructions)             |                  |             |           |                               |                                |
|         | AETOS acct no.  |                  |             |           |                               |                                |
| Note:   | Please complete remainder of the form i               | ncluding signing | the form in | Part XXX. |                               |                                |

# (Continued on the next page)



### Step 2 Company – Not for Profit (NFP)

#### Page 2 – Part III

| 14 I certify that (check all that apply):  |                         |   |
|--|-------------------------|---|
| a 🗹 The beneficial owner is a resident of <u>coun</u>  |                         | within the meaning of the income tax  |
| treaty between the United States and that of   |                         |   |
|  | with limitation on ben  | <ul> <li>which the treaty benefits are claimed, and, if applicable, meets the<br/>efits. The following are types of limitation on benefits provisions that may<br/>tions):</li> </ul> |
| Government   | Company that r          | neets the ownership and base erosion test   |
| Tax-exempt pension trust or pension fund   | Company that i          | neets the derivative benefits test  |
| Other tax-exempt organization  | Company with            | an item of income that meets active trade or business test  |
| Publicly traded corporation  | Favorable discr         | etionary determination by the U.S. competent authority received   |
| Subsidiary of a publicly traded corporation  | No LOB article          | n treaty  |
|  | Other (specify A        | rticle and paragraph):  |
| c The beneficial owner is claiming treaty ben<br>or business of a foreign corporation and me |                         | vidends received from a foreign corporation or interest from a U.S. trade<br>tatus (see instructions).  |
| 15 Special rates and conditions (if applicable-s   | ee instructions):       |   |
| The beneficial owner is claiming the provisions  | of Article and paragrap | h   |
| of the treaty identified on line 14a above to clair  | na                      | % rate of withholding on (specify type of income):  |
| Explain the additional conditions in the Article t   | ne beneficial owner me  | ets to be eligible for the rate of withholding:   |
|  |                         |   |

#### Page 7 – Part XXII

#### Part XXII Nonprofit Organization

36 I certify that the entity identified in Part I is a nonprofit organization that meets the following requirements.

- The entity is established and maintained in its country of residence exclusively for religious, charitable, scientific, artistic, cultural or educational purposes;
   The entity is exempt from income tax in its country of residence;
- . The entity has no shareholders or members who have a proprietary or beneficial interest in its income or assets;

 Neither the applicable laws of the entity's country of residence nor the entity's formation documents permit any income or assets of the entity to be distributed to, or applied for the benefit of, a private person or noncharitable entity other than pursuant to the conduct of the entity's charitable activities or as payment of reasonable compensation for services rendered or payment representing the fair market value of property which the entity has purchased; and

 The applicable laws of the entity's country of residence or the entity's formation documents require that, upon the entity's liquidation or dissolution, all of its assets be distributed to an entity that is a foreign government, an integral part of a foreign government, a controlled entity of a foreign government, or another organization that is described in this part or escheats to the government of the entity's country of residence or any political subdivision thereof.

#### • Page 8 – Part XXX

Signed by the authorized representative(s) of the company

# Please note: If you are unable to save an E-sign with a time&date stamp and the E-sign statement, the U.S. IRS requests a handwritten signature for the form instead.

#### 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 any withholding agent that can disburse or make payments of the income of which the entity on line 1 is the beneficial owner.

Hagree that I will submit a new form within 30 days if any certification on this form becomes incorrect.

| <ul> <li>I certify the</li> </ul> | n <mark>at I have the capacity to sign for the entity identified on line 1 of</mark> | this form. |            |                   |
|-----------------------------------|--|------------|------------|-------------------|
| Sign Here                         | Quan Yuan Digitally signed by Quan Yuan Date: 2021.11.04 11:53:59 +11'00'            | Quan Yuan  |            | 11-04-2021        |
|                                   | Signature of individual authorized to sign for beneficial owner                      |            | Print Name | Date (MM-DD-YYYY) |

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

AETOS CAPITAL GROUP PTY LTD



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