

## ARDAN : The Beneficiary Trust Form walkthrough-

**Specified US Person** means a US citizen or tax resident individual who has a US residential/ correspondence address or who either holds a US Passport, a US Green Card or who was born in the US and has not yet renounced their US citizenship.

More information on US FATCA can be found at: [www.irs.gov/Businesses/Corporations/Foreign-Account-Tax-Compliance-Act-FATCA](http://www.irs.gov/Businesses/Corporations/Foreign-Account-Tax-Compliance-Act-FATCA).

If you choose Yes to being a Specified US Person, you must provide us with your US Taxpayer Identification Number (TIN) or US Social Security Number (SSN).

If you choose No but you have a US residential/correspondence address, hold a US Passport, a US Green Card or you were born in the US, you will need to provide us with documentary evidence that you are in the process of or have renounced your US Citizenship.

Ardan International Limited can accept a certified copy of your DS-4083 form (also known as CLN - Certificate of Loss of Nationality) and/or a certified copy of your passport in which you are obtaining new citizenship.

For new applicant, provide the date of application.

If this is for an existing client, enter their account number here

Ensure all details are filled. If this is joint account, enter the details for the second applicant.

(Use Emirates ID no. as TIN).

Please tick the appropriate option.

### Part A

#### (i) Portfolio account details

Account number (the portfolio account)

Or Application dated

(if no portfolio account number has yet been issued)

#### Portfolio account owner (Relevant Person)

Full name

Date of birth (dd/mm/yyyy)

Country of birth

Country of residence for tax purposes

Tax Identification Number (TIN)

If unavailable, provide a functional equivalent (e.g. National Insurance Number, Social Security Number, resident registration number)

Are you a Specified US person?

 Yes  No

If you tick "Yes", please confirm your US TIN or SSN.

#### Joint portfolio account owner (Relevant Person)

 Yes  No

The definition of a Specified US Person can be found in the Important Notes section above.

Up to 4 trustees can be provided. Ensure that client appoints at least 1.

Trustee must not be a minor.

Joint Owner cannot nominee as the Trustee.

## Part A continued

### (ii) Declaration of Trust and appointment of trustees

As owner(s) of the portfolio account detailed in Part A of this trust deed, I/We nominate and appoint:

|  | Trustee 1   | Trustee 2  |
|--|---|--|
| Title (please tick)  | <input checked="" type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss | <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss |
|  | <input type="text"/> Other (in full)  | <input type="text"/> Other (in full)   |
| Full name  | <input type="text" value="Thomas Smith"/>   | <input type="text"/>   |
| Current residential address and postcode (in full)   | <input type="text" value="Villa 1, Street 1, Jebel Ali Gardens, Dubai, UAE"/>                     | <input type="text"/>   |
| Date of birth (dd/mm/yyyy)   | <input type="text" value="01011989"/>   | <input type="text"/>   |
| Country of birth   | <input type="text" value="United Arab Emirates"/>   | <input type="text"/>   |
| Country of residence for tax purposes  | <input type="text" value="United Arab Emirates"/>   | <input type="text"/>   |
| Tax Identification Number (TIN)  | <input type="text" value="784-1994-1234567-2"/>   | <input type="text"/>   |
| If unavailable, provide a functional equivalent (e.g. National Insurance Number, Social Security Number, resident registration number) |   |  |
| Are you a Specified US person?   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                               | <input type="checkbox"/> Yes <input type="checkbox"/> No                               |
| If you tick "Yes", please confirm your US TIN or SSN.  | <input type="text"/>  | <input type="text"/>   |

The definition of a Specified US Person can be found in the Notes section on Page 2.

To be the owner of my/our portfolio account and receive all portfolio account benefits from the date of the Relevant Event before the maturity or surrender of the portfolio account and instruct Ardan International Limited to:

- Treat the Trustee(s) as the owner of the portfolio account;
- Accept such instructions from the Trustee(s) in respect of the portfolio account as if they were the original owner; and
- Pay any/all portfolio account value or benefits to the Trustee(s):

(iii) For the beneficiaries named in Part B(i) of this document or the contingent named beneficiaries persons in B(ii) in the event that none of the named beneficiaries are alive at the time of the relevant event together with such classes of persons named in the Schedule at such time and in such shares as the trustees shall see fit.

**Client must appoint a minimum of one beneficiary. Ensure all fields are filled.**

**Trustee can nominate as beneficiary.**

**\*Ensure that the % shares in total will be 100% for all your beneficiaries.**

## Part B

### i) The Named Beneficiaries and the Appropriate Shares

The Named Beneficiaries and the Appropriate Shares means:

|                            | Beneficiary 1   | Beneficiary 2          |
|----------------------------|---|------------------------|
| Full name                  | <input type="text" value="Thomas Smith"/>                                     | <input type="text"/>   |
| Residential address        | <input type="text" value="Villa 1, Street 1, Jebel Ali Gardens, Dubai, UAE"/> | <input type="text"/>   |
| Date of birth (dd/mm/yyyy) | <input type="text" value="01011989"/>   | <input type="text"/>   |
| Appropriate Share          | <input type="text" value="100"/> %  | <input type="text"/> % |
|                            | <b>Beneficiary 3</b>  | <b>Beneficiary 4</b>   |
| Full name                  | <input type="text"/>  | <input type="text"/>   |
| Residential address        | <input type="text"/>  | <input type="text"/>   |
| Date of birth (dd/mm/yyyy) | <input type="text"/>  | <input type="text"/>   |
| Appropriate Share          | <input type="text"/> %  | <input type="text"/> % |

The death of a Named Beneficiary under Part B (i) will increase the shares of the remaining beneficiaries.

### (ii) Contingent Named Beneficiaries and the Appropriate Shares means;

|                            | Beneficiary 1          | Beneficiary 2          |
|----------------------------|------------------------|------------------------|
| Full name                  | <input type="text"/>   | <input type="text"/>   |
| Residential address        | <input type="text"/>   | <input type="text"/>   |
| Date of birth (dd/mm/yyyy) | <input type="text"/>   | <input type="text"/>   |
| Appropriate Share          | <input type="text"/> % | <input type="text"/> % |

The death of a Named Contingent Beneficiary under Part B (ii) will increase the shares of the remaining Named Contingent Beneficiaries.

Kindly note all forms must be signed in wet signature or for Digi-signature should be thru docusign/adobe with summary/final audit report.

Please ensure that the email ID thru docusign/adobe should appear with referral agent registered email.

Client must provide their full name and sign. If joint account, make sure it is signed by both.

Applicant must have a witness to sign here.

Trustee(s) must sign

Trustee must have a witness to sign here.

**Part D**

Executed as a deed by:

|                   | <b>Portfolio account owner</b>   | <b>Joint portfolio account owner (if applicable)</b>   |
|-------------------|--|--|
| Full name         | John Smith   |  |
| Signature         |  |  |
| Date (dd/mm/yyyy) | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |

Witnessed by:  
Any witness must be over 18 years old and not party to the trust.

|                     | <b>Witness</b>   | <b>Witness</b>   |
|---------------------|--|--|
| Full name           | William George   |  |
| Residential address | Apartment 101, ABC Building, Damac Hills, Dubai, UAE   |  |
| Witness's signature |  |  |
| Date (dd/mm/yyyy)   | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |

Executed as a deed by:

|           | <b>Trustee 1</b> | <b>Trustee 2</b> |
|-----------|------------------|------------------|
| Full name | Thomas Smith     |                  |
| Signature |                  |                  |

Witnessed by:  
Any witness must be over 18 years old and not party to the trust.

|                     | <b>Witness</b>   | <b>Witness</b>   |
|---------------------|--|--|
| Full name           | William George   |  |
| Residential address | Apartment 101, ABC Building, Damac Hills, Dubai, UAE   |  |
| Signature           |  |  |
| Date (dd/mm/yyyy)   | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |

6