

B#:	1139-13
Date:	July 9, 2013
То:	All Participants
Category:	Dividends
From:	International Services
Attention:	Operations, Reorg & Dividend Managers, Partners & Cashiers
Subject:	Tax Relief - Country: South Africa Nedbank CUSIP:63975K104 Record Date: 04/05/13 Payable Date: 04/18/13 Standard Tax Reclaim Cutoff date:09/01/2015 8:00 PM

Holders of Depositary Receipts (DRs) of **Nedbank** may be eligible to receive favorable or reduced withholding tax relief.

Questions regarding this Important Notice may be directed to GlobeTax at 212-747-9100.

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To ensure compliance with Internal Revenue Service Circular 230, you are hereby notified that: (a) any discussion of federal tax issues contained or referred to herein is not intended or written to be used, and cannot be used, for the purpose of avoiding penalties that may be imposed under the Internal Revenue Code; and (b) as a matter of policy, DTC does not provide tax, legal or accounting advice and accordingly, you should consult your own tax, legal and accounting advisor before engaging in any transaction.



Holders of Depositary Shares (DS) of **Nedbank** may be eligible to receive favorable or reduced withholding tax relief. Further details on eligibility, documentation, limitations, fees, charges and deadlines are included below.

All eligible holders will have the opportunity to receive accurate entitlement as outlined in the "Eligibility Matrix". The dividend was paid on pay date net of the full South African statutory withholding tax rate of 15% with the possibility to reclaim through the standard long form process.

DIVIDEND EVENT DETAILS			
COUNTRY OF ISSUANCE	SOUTH AFRICA		
ISSUE	Nedbank		
CUSIP#	63975K104		
DEPOSITARY	BNY MELLON		
DEPOSITARY SHARE RECORD DATE	4/5/2013		
DEPOSITARY SHARE PAY DATE	4/18/2013		
DEPOSITARY SHARE GROSS DIVIDEND RATE ON PAY DATE	TBD		
ORD GROSS DIVIDEND RATE ON PAY DATE	ZAR 4.12		
RATIO	1 ORD : 1 DS		
WHT RATE	15%		

CHARGES & DEADLINES					
FILING METHOD	BATCH / PAYMENT METHOD	DEPOSITARY SERVICE CHARGE	MINIMUM SERVICE CHARGE PER BENEFICIAL OWNER*	FINAL SUBMISSION DEADLINE (DOCUMENTATION)	
STANDARD LONG FORM	POST PAY DATE PAYMENT / CHECK	Up to \$0.01 per DEPOSITARY SHARE ("DS")	USD \$25.00	SEPTEMBER 1, 2015 8:00 P.M. EST	

^{*} A Custodial Fee (up to USD \$50.00) will be imposed, please contact GlobeTax as Agent for BNY Mellon for details.

ELIGIBILITY MATRIX					
RATE DESCRIPTION	RECLAIM RATE	ELIGIBLE RESIDENTS	DOCUMENTATION REQUIRED		
10% FAVORABLE	5%	CROATIA, ETHIOPIA, INDIA, IRAN, IRELAND (GOVERNMENT OF), MALAYSIA, MEXICO, NETHERLANDS, NIGERIA, SAUDI ARABIA, SEYCHELLES, TUNISIA, UNITED KINGDOM	1) COVER LETTER (APPENDIX A) 2) DTD(RR) (APPENDIX B) 3) PROOF OF RECORD DATE POSITION		
7.5% FAVORABLE	7.5%	SWITZERLAND	1) COVER LETTER (APPENDIX A) 2) DTD(RR) (APPENDIX B) 3) PROOF OF RECORD DATE POSITION		
5% FAVORABLE	10%	CHINA, MALTA	1) COVER LETTER (APPENDIX A) 2) DTD(RR) (APPENDIX B) 3) PROOF OF RECORD DATE POSITION		
0% EXEMPT	15%	CYPRUS, KUWAIT, OMAN, SEYCHELLES AND SEE EXEMPTIONS TABLE	1) COVER LETTER (APPENDIX A) 2) DTD(EX) (APPENDIX C) 3) PROOF OF RECORD DATE POSITION		

^{*} PLEASE NOTE THAT A NUMBER OF TAX TREATIES PROVIDE FOR TWO OR MORE WITHHOLDING TAX RATES AVAILABLE DEPENDING ON CERTAIN PERCENTAGE OF HOLDING (10% - 30%) CONDITIONS SPECIFIED IN THE RESPECTIVE TREATIES. IT IS THE RESPONSIBILITY OF THE INVESTOR TO CONSULT WITH THEIR OWN TAX ADVISORS WITH RESPECT TO THE REQUIREMENTS FOR APPLICATION OF FAVOURABLE WITHHOLDING TAX RATE.

DESCRIPTION OF VARIOUS DOCUMENTATION					
DOCUMENT NAME	DESCRIPTION	ORIGINAL / COPY	SIGNATURE REQUIREMENT		
COVER LETTER (APPENDIX A)	LISTING OF BENEFICIAL OWNERS CERTIFYING POSITION ON RECORD DATE.	SCANNED DOCUMENTS ACCEPTABLE	FINANCIAL INSTITUTION		
DTD(RR) (APPENDIX B)	DIVIDEND TAX DECLARATION & UNDERTAKING TO BE MADE BY THE BENEFICIAL OWNER OF A DIVIDEND (REDUCED RATE OF TAX)	SCANNED DOCUMENTS ACCEPTABLE	BENEFICIAL OWNER		
DTD(EX) (APPENDIX C)	DIVIDEND TAX DECLARATION & UNDERTAKING TO BE MADE BY THE BENEFICIAL OWNER OF A DIVIDEND (EXEMPTION FROM TAX)	SCANNED DOCUMENTS ACCEPTABLE	BENEFICIAL OWNER		
PROOF OF RECORD DATE POSITION	DTCC POSITION PRINT OUT (DIVA SCREENSHOT)	SCANNED DOCUMENTS ACCEPTABLE	N/A		

*DTD(RR) AND DTD(EX) MAY BE COMPLETED AND SIGNED BY BROKER WITH A VALID POWER OF ATTORNEY. Warning and Disclaimer:

BNY Mellon will not be responsible for the truth or accuracy of any submissions received by it and, by following the procedures set forth herein or otherwise submitting any information, all submitting holders of DSs, and their agents, shall be agreeing to indemnify and hold harmless BNY Mellon and its agents for any and all losses, liabilities, fees and expenses (including reasonable fees and expenses of counsel) incurred by any of them in connection therewith or arising there from. BNY Mellon and its agents will be relying upon the truth and accuracy of any and all submissions received by them in connection with the tax relief process and shall hold submitting holders of DSs and their agents, liable and responsible for any losses incurred in connection therewith or arising there from. There is no guarantee that the applicable tax authorities or the applicable issuer will accept submissions for relief. Neither BNY Mellon nor its agents shall be responsible or liable to any holders of DSs in connection with any matters related to, arising from, or in connection with the tax relief process described herein.

EXEMPTION TABLE

Code	Description
Α	A company which is a resident of South Africa;
В	The Government, a provincial administration or a municipality;
С	A public benefit organization approved by the Commissioner in terms of section 30(3) (could be local or foreign, but must be approved);
D	A trust contemplated in section 37A (i.e. rehabilitation trust);
E	An institution, board or body contemplated in section 10(1)(cA) (ex. Water Board, Tribal Authority etc);
F	A fund contemplated in section 10(1)(d)(i) or (ii) (i.e. Pension/Provident/RA/Benefit Fund);
G	A person contemplated in section 10(1)(t) (ex. CSIR, SANRAL, ARMSCOR, Development Bank of SA etc);
Н	A shareholder in a registered micro business, as defined in the Sixth Schedule, paying that dividend, to the extent that the aggregate amount of dividends paid by that registered micro business to its shareholders during the year of assessment in which that dividend is paid does not exceed the amount of R200 000;
J	A person that is not a resident and the dividend is a dividend contemplated in paragraph (b) of the definition of 'dividend' in section 64D (i.e. nonresident company listed on JSE);
Υ*	Double Taxation Agreement;
Z^	Other International Agreement.

^{**}Codes A-J are for domestic, South African entity types only.

^{*}Code Y includes entities that are entitled for the 0% withholding (i.e. U.S. & foreign pension fund or government organization) provided that the exemption is stipulated within the applicable DTA.

[^]Code Z includes entities that has an international agreement (i.e. supranational)

FREQUENTLY	ASKED QUESTIONS (FAQs)
	ACITED QUEUIIONO	

QUESTION	ANSWER
WHERE DO I SEND THE DOCUMENTATION?	SCANNED PAPERWORK MAY BE SENT TO SOUTHAFRICA@GLOBETAX.COM.
WHEN IS THE DEADLINE?	RELEVANT DEADLINES ARE LISTED ON PAGE 3 UNDER CHARGES AND DEADLINES.
I'M A CUSTODIAN / BROKER, CAN I SIGN THE DIVIDEND TAX FORM ON BEHALF OF THE INVESTOR?	YES, AS LONG AS A VALID POWER OF ATTORNEY IS ALSO ENCLOSED.
HOW DO I KNOW IF MY CLIENT QUALIFIES FOR AN EXEMPTION OR REDUCED TAX BASED ON PERCENTAGE OF OWNERSHIP?	THE INVESTOR WILL HAVE TO CONSULT WITH THEIR TAX ADVISOR.
DOES THE BENEFICIARY'S NAME ON THE DIVIDEND TAX FORM NEED TO MATCH THE POA?	YES, THE BENEFICIARY'S NAME ON BOTH DOCUMENTS SHOULD BE IDENTICAL.
HOW LONG DOES IT TAKE FOR STANDARD RECLAIMS TO BE PAID?	WE ESTIMATE IT TAKES APPROXIMATELY SIX (6) MONTHS FOR LONG FORM CLAIMS TO BE PAID
DOES THE LONG FORM PROCESS HAVE A MINIMUM POSITION REQUIRMENT PER BENEFICIAL OWNER?	NO, THERE IS A MINIMUM FEE OF \$25.00 PER BENEFICIAL OWNER WHICH MAY BE WAIVED ON AN EXCEPTIONAL BASIS FOR CLIENTS RECLAIMING LESS THAN \$50. IN SUCH INSTANCES A FEE OF 50% OF THE RECLAIMED AMOUNT WILL BE APPLIED.
WHAT IS THE STATUTE OF LIMITATIONS FOR FILING SOUTH AFRICAN RECLAIMS?	IT IS THREE (3) YEARS FROM THE LOCAL MARKET PAY DATE. CLAIMS RECEIVED AFTER OUR SUBMISSION DEADLINE WILL BE FILED ON A BEST EFFORT BASIS.
IS THIS LONG FORM PROCESS OFFERED BY BNY MELLON AN OPTIONAL PROCESS?	YES, THIS IS A DISCRETIONARY, OPTIONAL SERVICE, HOWEVER, IN THE SOUTH AFRICAN MARKET; THE SOUTH AFRICAN CUSTODIANS WILL NOT ACCEPT CLAIMS FROM ANYONE EXCEPT THOSE PROCESSED THROUGH BNY MELLON.
IS THIS LONG FORM PROCESS FREE OF CHARGE?	NO. THIS TAX RECLAIM ASSISTANCE SERVICE IS WHOLLY VOLUNTARY AND DISCRETIONARY AND OUTSIDE THE TERMS AND CONDITIONS OF ANY APPLICABLE DEPOSIT AGREEMENT. FEES WILL BE CHARGED FOR THIS ASSISTANCE SERVICE OF UP TO \$0.01 PER DEPOSITARY SHARE WITH A MINIMUM OF \$25.00. RECLAIMS RECEIVED POST DEADLINE CANNOT BE ASSURED AND MAY BE SUBJECT TO A CUSTODIAL FEE AND ANY OTHER CHARGES, FEES OR EXPENSES PAYABLE BY OR DUE TO BNY MELLON OR ITS AGENTS, INCLUDING THE CUSTODIAN OR AUTHORITIES. IN ADDITION, CHARGES MAY APPLY TO ANY LONG FORM CLAIMS REJECTED OR NOT ACCEPTED BY THE CUSTODIAN OR AUTHORITIES. FEES PAID TO BNY MELLON MAY BE SHARED WITH ITS AGENTS.

CONTACT DETAILS			
PRIMARY CONTACT	JONATHAN STAAKE		
DOMESTIC PHONE (U.S.)	1-800-915-3536		
DOMESTIC FAX (U.S.)	1-800-985-3536		
INTERNATIONAL PHONE	1-212-747-9100		
INTERNATIONAL FAX	1-212-747-0029		
EMAIL ADDRESS	JONATHAN_STAAKE@GLOBETAX.COM		
COMPANY	BNY MELLON in C/O GLOBETAX		
STREET ADDRESS	90 BROAD STREET, 16 TH FLOOR		
CITY/STATE/ZIP	NEW YORK, NY 10004		
ADDITIONAL CONTACTS	SARAH MARTIN		

APPENDIX A – COVER LETTER REQUIRED FOR SOUTH AFRICAN TAX RELIEF PROCESS THIS DOCUMENT MUST BE PREPARED ON THE FINANCIAL INSTITUTION'S LETTERHEAD

GlobeTax as Agent for BN 90 Broad Street, 16th Floo	or			Date:		
New York, NY 10004 - 220 Attn: Depositary Services		a				
Re: Withholding Certificati	on for Nedba	nk ; Cusip#: 639 ′	75K104			
Enclosed please find with						
obtain a reduced or favora AND DTC PARTICIPANT	r Number) h	nereby represen	it and warrant that	each benefic	cial owner cited	below held the
respective amount of shar		_		-		
Below is the list of benefic Proof of residence docum information is as follows:						
Name of Beneficial Owner		te Address y / State / Zip)	Country of Residence	DS(s) Held	ORD(s) Held	Tax Rate
Owner	(Street / Cit	y / State / Zip)	Residence	пеіа	пеіа	rax Rate
		7	Total DS(s) Held:			
(with a minimum of \$25.00), an in connection with the tax recla other distribution or by billing or payable whether or not a succe Agents. We hereby agree that in additional approval by the applicable cust professional advice on these more we declare that we have perfor beneficial owners.	im process, or to r otherwise in BN essful reduction in on to statutory and todian and the ap- latters and has ear ir knowledge that	tax authorities or req Y Mellon's discretion rate or reclamation d documentation rec plicable tax regulato xpressly disclaimed a each of the benefici	gulators (which fees, ch n). We hereby agree that is obtained. We hereby quirements and the dedu irs, and that BNY Mellor any liability whatsoever ial owners identified abo	arges or expens at any such fees, agree that fees uction of fees, tan is not providing for any loss how ove are eligible for	es may be deducted charges or expense paid to BNY Mellon x reclaim benefits we any legal, tax, according from the preferential ra	d from the dividend or a es may be due and a may be shared with its will be subject to review a counting or other or in reliance hereto.
We will be fully liable for any ar associated therewith. BNY Mel Mellon and the custodian in proliability for, and we shall indemine and all loss, liability,	lon shall not be lia ocessing such cla	able for the failure to ims, we expressly a	secure any refund. In ogree that BNY Mellon a	consideration of the notice of	the assistance of BN affiliates shall not ha	NY ave any
We ask that BNY Mellon apply to behalf. Please contact the unde should you have any questions						
CONTACT INFO						
SIGNATORY NAME:						
POSITION:						
TELEPHONE #:						
E-MAIL ADDRESS:						
SIGNATURE:						

Notes on completion of this form

- This form is to be completed by the beneficial owner of a dividend qualifies for a reduction in the dividend tax rate.

 In order to qualify for a Reduction, this declaration and written undertaking should be submitted

 To be completed by a beneficial non-resident shareholder that qualifies for a reduced taxation rate, based on the applicable Double Taxation Agreement (DTA) with South Africa.

 Should a client sign on behalf of the beneficial shareholder, then a signed Power of Attorney must be accompanied with this form. 2

Part A				
Withholding agent details				
Registered name		Dividends tax reference nu	ımber	
Standard Bank's client details				
Client safe custody account number		Client name		
Part B				
Beneficial owner (Investor)				
Name and Surname/registered name				
Name of entity				
Individual Listed compa	any	South African Governme	ent, Provincial Administra	tion, Municipalities
Trust (any type) Unlisted com	pany	Retirement Fund (Pension	on, Provident, Benefit, R	etirement Annuity etc)
Other (if selected please provide a description	on/explanation of nature	of the entity/person below) ID Number/Passport Numb Registration Number	per/	
South African income tax reference number		Date if Birth/Date of		
		Inception (YYYY-MM-DD)		
Physical address				
			P	ostal code
Postal address (if different)	stal code	Country in which resident for tax purposes		
Part C	star code	resident for tax purposes		
Reduced rate				
Please provide the following details for all share	res held in respect of w	which a reduced rate of tax	vis annlicable:	
	•	reasons the beneficial		December to the latter we
No Registered Company Name/ Issuer Name	owner meets the re	quirements of the DTA	Event record date	Record date holdings
1				
2				
3				
4				
5				
Declaration				
Declaration in terms of sections 64FA(2)(a), 646	G(3)(i) or 64H(3)(i) of th	e Act:		
I,(full n	ames in print please), th	e undersigned hereby decla	are that all the relevant re	equirements in terms of
Article of the Agreement for date between the Republic of South Africa and the of the Act (whichever is applicable), have been me	country of residence of		ed above, as well as sect	ions 64FA, 64G or 64H
%	and that dividends par	d of the shares specified as	ove are increiore subject	it to a readoca rate or
Signature (d	uly authorised to do so)	Date (YYYY-MM-DD)		
Signature (d Capacity of signatory (if not the Beneficial Owner)	uly authorised to do so)	Date (YYYY-MM-DD)		
Capacity of signatory (if not the Beneficial Owner) Undertaking in terms of section 64FA(2)(b), 640	G(3)(ii) or 64H(3)(ii) of t	he Act		
Capacity of signatory (if not the Beneficial Owner) Undertaking in terms of section 64FA(2)(b), 640	G(3)(ii) or 64H(3)(ii) of t	he Act	forthwith inform the Withl	nolding Agent in writing
Capacity of signatory (if not the Beneficial Owner) Undertaking in terms of section 64FA(2)(b), 640 I, (full na should the circumstances of the beneficial owner r	G(3)(ii) or 64H(3)(ii) of t	he Act e undersigned undertake tot tion above change.	forthwith inform the Withl	nolding Agent in writing

Notes on completion of this form

- This form is to be completed by the beneficial owner of dividends in order to be exempt from dividends tax. In order to qualify for an exemption, this declaration and written undertaking should be submitted
- 3
- Part B is to be completed by the person entitled to the benefit of the dividend attaching to a share(s).

 Should a client sign on behalf of the beneficial shareholder, then a signed Power of Attorney must be accompanied with this form.

Part A	
Withholding agent details	
Registered name	Dividends tax reference number
Standard Bank's client details	
Client safe custody account number	Client name
Part B	
Beneficial owner (Investor)	
Name and Surname/registered name	
Name of person/Entity	
Individual isted company	South African overnment, Provincial Administration, Municipalities
Trust (any type) Inlisted company	Retirement und (Pension, Provident, Benefit, Retirement Annuity etc)
ther (if selected please provide a description/explanation of nature	ID Number/Passport Number/
South African income	Registration Number Date of Birth/Date of
tax reference number	Inception (YYYY-MM-DD)
Physical address	Postal code
Postal address (if different)	Country in which
Part C	resident for tax purposes
Exemption	
Please indicate the reason why the beneficial owner is exempt from o	dividends tax
A company which is a resident in South Africa	A fund contemplated in section ()(d)(i) or (ii) (i.e. Pension/
The overnment, a provincial administration or a municipality (of the	Provident/Retirement Annuity/Benefit und) A person contemplated in section ()(t) (ex. CSIR, SANRA ,
Republic of South Africa)	ARMSC R, Development Bank of SA etc)
A public benefit organi ation approved by the Commissioner in terms of section ()	A shareholder in a registered micro business, as defined in the Sixth Schedule, paying that dividend, to the extent that the aggregate amount of dividends paid by that registered micro business to its shareholders during the year of assessment in which that dividend is paid does not exceed the amount of R
A trust contemplated in section A (i.e. rehabilitation trust)	A person that is not a resident and the dividend is a dividend
An institution, board or body contemplated in section ()(cA) (ex. ater Board, Tribal Authority etc)	section D (i.e. non-resident company listed on S).
Double taxation agreement - exemption Y	ther international agreement - exemption
ther (if selected please provide a description/explanation of nature	of the entity/person below)
Declaration	
	(a)(aa) of the Act , the undersigned hereby declare that dividends paid to the beneficial owner asset in specie, from the dividends tax in terms of the paragraph of section
Signature (duly authorised to do so)	Date (YYYY-MM-DD)
Undertaking in terms of sections 64FA(1)(a)(ii), 64G(2)(a)(bb) or 64H(3	
I, (full names in print p in writing should the circumstances of the beneficial owner referred to in the	lease), the undersigned undertake to forthwith inform the ithholding Agent ne declaration above change.
Signature (duly authorised to do so)	Date (YYYY-MM-DD)
Capacity of Signatory	