

MTN Zakhele Futhi (RF) Limited ("MTNZF")

(Registration number 2016/268837/06)

(Incorporated in South Africa)

INDEPENDENT TRADING PROCESS BEE VERIFICATION TERMS ACCEPTANCE FORM (BLACK PEOPLE AND BLACK GROUPS)

(This is the Verification Form (Black Groups and Black People) to be completed for purposes of the BEE Verification Process in respect of the Independent Trading Process.)

Instructions

- 1) You must fill in and complete this Independent Trading Process BEE Verification Terms Acceptance Form (Black People and Black Groups) (this "**Form**") manually in CAPITAL LETTERS and BLACK INK.
- 2) PART A of this Form must be filled in and completed by Black People only.
- 3) PART B of this Form must be filled in and completed by Black Groups only.
- 4) Specific meanings (definitions) have been given to some words and phrases in this Form. These words and phrases start with a capital letter. The only defined words that do not always have a capital letter are the words "**you**", "**we**" and "**us**". A list of defined words and phrases, and also the meanings we have given them, is contained in the document titled "**MTNZF Interpretation and Definitions**" ("**Definitions Schedule**"), which is available on the MTNZF Website (<https://www.mtnzakhelefuthi.co.za>) or can be requested from the MTNZF Call Centre (083 900 6838). Sometimes the definitions of a word or phrase can also be found in the body of this Form (in the same way that we have defined this Independent Trading Process BEE Verification Terms Acceptance Form (Black People and Black Groups) as this "**Form**" in paragraph 1 above). The words and phrases that have been defined will have the same meaning wherever they are used in this Form.
- 5) If you make changes or corrections to the information that you fill or complete in this Form, you must put your full signature next to those changes and corrections.
- 6) When you give this Form to MTNZF, you must also give the following Supporting Documents:
 - 6.1 if you are a Black Person, the green bar-coded South African identity document, the South African smart identity card (front and back required) or valid passport showing your South African identity number ("**ID Document**") of the Black Person;
 - 6.2 if you are a Black Group and if you have not already provided this, an Authorising Resolution (a version of which is set out in Schedule 1 at the end of this Form) and the ID Document of the Authorised Representative.
- 7) After you have submitted this Form the BEE Verification Agent may request additional Supporting Documents from you.
- 8) You must fill in and complete this Form manually and give it (properly completed and signed), together with the Supporting Documents referred to in paragraph 6 above, to MTNZF by email, post or hand delivery. The email, post and hand delivery details are:

Email: SSA-MTNZFVerification@nedbank.co.za;

Postal address: MTN Zakhele Futhi Scheme Administration
PO Box 1144
Johannesburg
2000;

Hand delivery: MTN Zakhele Futhi Scheme Administration
5th Floor, Block D
135 Rivonia Road

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Sandown, Sandton

2196.

- 9) Any Supporting Documents delivered by hand or by post must be originals or certified copies. Any Supporting Documents sent by email or other electronic means must be certified copies.
- 10) Copies must be certified by a Commissioner of Oaths and can, for example, be certified at any South African Police Station.
- 11) If you have any questions regarding the contents of this Form, please contact the MTNZF Call Centre.

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PART A - TO BE FILLED IN AND COMPLETED BY BLACK PEOPLE ONLY

BLACK PERSON DETAILS

Full names and surname:												
Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Rev												
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female												
Identity number:												

CONTACT DETAILS FOR BLACK PERSON

Email address:		
Cell phone number:		
Office phone number:		
Home phone number:		
Postal address:		
		Postal code:
Residential address:		
		Postal code:

DETAILS OF PARENT/GUARDIAN IF THE BLACK PERSON IS A MINOR OR IF THE PERSON SIGNING THIS FORM IS SIGNING IN A REPRESENTATIVE CAPACITY

Capacity: <input type="checkbox"/> Birth parent of minor <input type="checkbox"/> Legal guardian	<input type="checkbox"/> Other (Please specify below) _____
Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Prof <input type="checkbox"/> Dr <input type="checkbox"/> Rev	
Full names:	
Identity number:	
Email address:	
Cell phone number:	
Office phone number:	
Home phone number:	
Residential address:	
	Postal code:
Postal address:	
	Postal code:

**MTN ZAKHELE FUTHI (RF) LIMITED
INDEPENDENT TRADING PROCESS BEE VERIFICATION TERMS ACCEPTANCE FORM (BLACK PEOPLE AND BLACK GROUPS)**

AGREEMENT TO THE INDEPENDENT TRADING PROCESS VERIFICATION TERMS AND CONDITIONS

You must agree to the Independent Trading Process Verification Terms and Conditions.

If you are applying to MTNZF for BEE Verification, then you need to, as part of the BEE Verification Process, agree to the Independent Trading Process Verification Terms and Conditions by completing and signing this Form.

When you complete and sign this Form, you are confirming and agreeing that you have read, understand and agree to the Independent Trading Process Verification Terms and Conditions.

It is important that you read and understand the Independent Trading Process Verification Terms and Conditions. If you do not have a copy of the Independent Trading Process Verification Terms and Conditions, you can get a copy of these and other documents referred to in those Independent Trading Process Verification Terms and Conditions (including the Privacy Policy):

- on the MTNZF Website (<https://www.mtnzakhelefuthi.co.za>);
- by asking through the Call Centre (083 900 6838); or
- by asking in an email to SSA-MTNZFVerification@nedbank.co.za.

SIGNATURE SECTION:

By signing below you confirm that:

- you have chosen the Independent Trading Process;
- you have read, understand and agree to the Independent Trading Process Verification Terms and Conditions;
- you are aware of, understand and agree to the limits, exclusions, liabilities, risks and promises in the Independent Trading Process Verification Terms and Conditions;
- you have the required capacity and authority to accept the Independent Trading Process Terms and Conditions; and
- once you have signed this Form, you will not be able to claim later that the details that you have included in this Form and in your Supporting Documents were not true and correct when you gave us this Form or the Supporting Documents. MTN and/or MTNZF or other persons may also have claims and rights against you because of the details that you put in this Form, and providing false information could be a criminal offence.

Signature:		Day	Month	Year
Name:				
Capacity:	<p>If you are signing this Form on behalf of a Black Person, please indicate which capacity, for example, a legal guardian or parent of a Minor or in any other representative capacity identified in the list of Supporting Documents</p> <p>_____</p> <p>(insert capacity)</p>			

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Signature		Day	Month	Year
Name:				
Capacity/office held:	<p>Authorised Representative</p> <p>If you are not signing as the Authorised Representative of the Black Group but in a different capacity, please state this different capacity below. If you do not state this different capacity below, we will treat this as you signing as the Authorised Representative.</p> <p>Other capacity (if any):</p> <p>_____</p>			

Authorising Resolution for Black Groups

Resolutions of the directors, trustees, partners or members of

_____ (_____)

Black Group name

Black Group registration number

(the "**Black Group**")

RESOLUTIONS

The directors, trustees, members or partners ("**we**") have been given the required notice and have agreed on ("**resolved**") the following:

Resolution 1

Purchasing, holding, selling and/or transferring MTNZF Shares

We agree (resolve) that the Black Group be and is authorised to do all things and sign all documents in respect of MTN Zakhele Futhi (RF) Limited ("**MTNZF**") regarding the purchasing, holding, selling and/or transferring of, or otherwise taking any action in relation to, the ordinary shares in MTNZF ("**MTN ZF Shares**"), including but not limited to (and to the extent applicable):

- applying to MTNZF for confirmation that the Black Group is eligible to become a holder (owner) of MTNZF Shares, and to complete, sign and implement all forms, documents and agreements for (and related to) such application process ("**Application Process**");
- applying to MTNZF to be verified to buy and/or sell and/or give/take transfer of MTNZF Shares, and to complete, sign and implement all forms, documents and agreements for (and related to) such verification process ("**BEE Verification Process**"); and
- otherwise engaging with, or issuing instructions to MTNZF, any of its service providers and/or any third parties rendering services to the Black Group, from time to time, in respect of the buying, holding, selling and/or transferring of, or otherwise taking any action in relation to, MTNZF Shares (including, but not limited to any action in relation to any corporate action affecting the Black Group's holding of MTNZF Shares).

Resolution 2

Appointment of Authorised Representative

We appoint _____ (insert name),

with ID number _____ (insert ID number),

as "**Authorised Representative**" of the Black Group.

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We agree (resolve) that the Authorised Representative is allowed to do the following, for the Black Group:

- do all such things and sign all such documents, necessary to give effect to or incidentally required for the Application Process;
- do all such things and sign all such documents, necessary to give effect to or incidentally required for the BEE Verification Process; and
- otherwise engage with, or issue instructions to MTNZF, any of its service providers and/or any third parties rendering services to the Black Group, from time to time, in respect of the buying, holding, selling and/or transferring of, or otherwise taking any action in relation to, MTNZF Shares (including, but not limited to any action in relation to any corporate action affecting the Black Group's holding of MTNZF Shares).

Full name _____

Signature _____

ID number _____

Date _____

Full name _____

Signature _____

ID number _____

Date _____

Full name _____

Signature _____

ID number _____

Date _____

Certification that the extract and signatures are true and accurate

I certify (promise) that:

- 1) the above are the signatures of all the directors, trustees, partners or members of the Black Group needed to pass this resolution; and
- 2) the above is a true extract of the original resolution.

Name: _____

Capacity: _____

(Company secretary; director; trustee; managing partner or authorised member)

Date: _____