

Phone

Within Australia: 1300 730 032 International: +61 2 8823 2534

Email

perennial.transactions@unitregistry.com.au

Application Form

Perennial Trusts

Please use this form if you are a new investor and wish to invest in this Trust by making an initial application.

Read and ensure you understand the Product Disclosure Statement (PDS), Target Martket Determination (TMD) and the Additional Information Booklet (AIB).

The PDS, TMD and AIB are available at www.perennial.net.au or from your financial adviser. The law prohibits any person passing this Application Form on to another person unless it is accompanied by a complete PDS. We will provide on request and without charge a paper or electronic copy of the current PDS and its incorporated documents.

Complete all relevant sections of this application form either:

- online then print and sign in the relevant fields using a black pen; or
- manually please write in BLOCK letters, using a black pen. If you make an error while completing this form, do not use correction fluid. Cross out your mistakes and initial your changes.

Individuals: complete section 1, section 2 and then section 5 onwards.

Companies: complete section 1, section 3 and section 5 onwards.

Trusts/Superannuation funds:

- if you are an individual trustee complete section 1, section 2 and then section 4 onwards.
- if you are a trust with a company as a trustee complete section 1 and then section 3 onwards.

Certify and collect the identification documents.

Please refer to section 10 'Identification and verification' and complete the relevant identification document attached to this Application Form or at www.perennial.net.au/invest-with-us.

Tell us your tax status.

Please complete the Tax information form attached to this Application Form or at www.perennial.net.au/invest-with-us.

Send your documents to our Administrator.

You can return your forms by post to:

Perennial Trusts Registry Services GPO Box 804 Melbourne VIC 3001

Make your payment.

Please refer to section 6 'Payment of application amount'.

Your application cannot be processed until all relevant identification documents and cleared funds are received.

Perennial Investment Management Limited (PIML) ABN 13 108 747 637, AFSL 275101 is the responsible entity and issuer of this application form. Perennial Partners Limited ABN 90 612 829 160.

SECTION A: YOUR INVESTMENT OBJECTIVES

In relation to our Design and Distribution Obligations (DDO) under the Corporations Act, we seek the following information about your attributes as an investor. Questions A to E are optional. **Question F is mandatory**. Your attributes should be consistent with the PDS & TMD for the fund(s) you are investing in.

Consumer Attributes		
A. What is your primary Investment objective?		
Capital Growth (increased value of your investment over time)		
Capital preservation (preserving the value of your investment and preventing loss)		
Capital guaranteed (shielding your investment from any losses)		
Income distribution (receiving regular income from your investment)		
B. What is the intended use of this Fund in your investment portfolio?		
Solution /standalone (your primary investment - 75% - 100% of portfolio)		
Core component (a large proportion of your investment - 25% - 75% of portfolio)		
Satellite / small allocation (a small part of your investment - less than 25% of portfolio)		
C. What is the intended investment timeframe?		
Short term (two years or less) Medium term (more than 2 years) Long term (more than 8 years)		
D. What is your tolerance for risk / return? (How much of a loss you are willing to tolerate within your portfolio when assessed against the possibility of greater returns)		
Low Medium High Very High		
E. What is your anticipated frequency of withdrawals?		
Daily Weekly Monthly Quarterly Annually or longer		
F. Have you received advice prior to applying to invest in this Fund(s)? This question is mandatory. Please answer one of the questions l	below.	
I/We have received personal advice in relation to my investment in this fund (Financial product advice that has been given to you by a person who has considered one or more of your investment objectives)		
I/We have received general advice in relation to my investment in this fund (Financial product advice that has been given to you but has not been tailored to your personal circumstances or investment objectives)		
I/We have not received advice in relation to my investment in this fund		
Note: Acceptance of your application should not be taken as a representation or confirmation that an investment in the Fund is, or likely to be, consistent with your intentions, objectives and needs as indicated in your responses to these questions.	is	

1 Are you an existing investor?	
No, complete section 2 onwards.Yes, the account number is	Complete from section 5 onwards.
2 Individuals and sole traders	
Complete if you are investing individually, jointly or you are an individual or joint trustee.	Mobile number (include country code)
Investor 1 – Personal details	
	Email address
Title Full given names	This world address is the defect to address for all in order.
Surname	This email address is the default address for all investor correspondence (such as transaction confirmations, statements,
	reports and other material).
Date of birth (DD/MM/YYYY)	ABN
DD / MM / YYYY	
Residential address	Are you a sole trader?
A PO Box/RMB/Locked Bag is not acceptable.	No Yes
Property/Building name (if applicable)	If yes, what is your business name?
Unit Street number	Tax details — Australian residents
	If you are an Australian resident for tax purposes, please provide
Street name	your tax file number (TFN) or reason for exemption. If you are an Australian resident and do not provide your TFN, or reason for
Suburb State	exemption, you will be taxed at the highest marginal tax rate plus
Suburb State	the Medicare levy.
Postcode Country	TFN
	Descen for everytion
Postal address (if different to residential address)	Reason for exemption
A PO Box/RMB/Locked Bag is acceptable.	Tax details — Non Australian residents
Property/Building name (if applicable)	If you are not an Australian resident for tax purposes, please
	indicate your country of residence for tax purposes.
Unit Street number	
	Investor 2 – Personal details
Street name	Title Full given names
Suburb State	Surname
Postcode Country	
- Country	Date of birth (DD/MM/YYYY)
Contact details	
Home number (include country and area code)	Residential address
(model code)	A PO Box/RMB/Locked Bag is not acceptable.
Business number (include country and area code)	Property/Building name (if applicable)

Unit	Street number	Business number (include country and are	ea code)	
Street name		Mobile number (include country code)		
Suburb	State	Email address		
Postcode Count	ry	All correspondence will be sent to the adinvestor 1.	dress provided for	
Postal address (if differ	ent to residential address)	Tax details — Australian residents		
A PO Box/RMB/Locked	•	If you are an Australian resident for tax p	urposes, please provide	
Property/Building name		your tax file number (TFN) or reason for exemption. If you are an Australian resident and do not provide your TFN, or reason for		
rroperty/bulluring flame	(п аррпсаые)	exemption, you will be taxed at the highe		
Unit	Street number	the Medicare levy.	3	
	Street Hamber	TFN		
Street name				
Street name		Reason for exemption		
Suburb	State			
		Tax details — Non Australian residents		
Postcode Count	v	If you are not an Australian resident for to	ax nurnoses inlease	
	,	indicate your country of residence for tax		
Contact details				
Home number (include	country and area code)	If there are more than two individual inve	estors or trustees, please	
Home number (include	country and area code)	provide the full name, date of birth, and r		
		each on a separate sheet and attach to the	nis form.	
3 Companies				
3 Companies				
Complete if you are invecorporate trustee.	esting as a company or as a trust with a	Unit Street number		
•	ired to complete the relevant			
Identification Form.	ned to complete the relevant	Street name		
Company details			<u> </u>	
Full name of company (as registered by ASIC)	Suburb	State	
(and registered by viere,	Postsoids Country		
ACN or ABN (for foreign	companies, provide your Australian	Postcode Country		
Registered Body Number	er (ARBN) if you have one)			
		Postal address (if different to above)		
TFN		A PO Box/RMB/Locked Bag is acceptable		
		Property/Building name (if applicable)		
Country of registration (if a foreign company)			
		Unit Street number		
Registered office addre	ss			
	Bag is not acceptable. If you are a foreign	Street name		
	ress of your Australian registered agent (if			
	rite your principal place of business.	Suburb	State	
Name of Australian regi	stered agent (if applicable)			
		Postcode Country		
Property/Building name	(if applicable)			

Contact person at company		Mobile number (include country code)		
Name Home number (include country and area code)		Email address		
Business number (include country and area code)		This email address is the default address for all investor correspondence (such as transaction confirmations, statements, reports and other material).		
4 Trusts or superannuation funds				
Please complete if you are investing as a trust or superannuation fund. Individuals and non-corporate trustee(s) must also complete sections 2. Corporate trustees must also complete section 3.		Trust or superannuation fund details Name of trust or superannuation fund		
Note : You are also required to complete the Identification Form - Trusts and Trustees.		ABN (applicable if you are a trust or a self-managed superannuation fund registered with the Australian Tax Office)		
		TFN		
5 Investment details and distribution instructions	S			
Specify your initial application amount.	or Truct	t however we may	waive or vary the investm	
There is typically a minimum investment amount of \$25,000 point indicate your distribution choice below. If you do not make an		·	be reinvested.	
	electio	·	be reinvested. DISTRIBUTIO (indicate prefere	N OPTION nce with an X)
Indicate your distribution choice below. If you do not make an	electic	on, distributions will INVESTMENT AMOUNT	be reinvested. DISTRIBUTIO	N OPTION
Indicate your distribution choice below. If you do not make an	electio	on, distributions will INVESTMENT AMOUNT	be reinvested. DISTRIBUTIO (indicate prefere	N OPTION nce with an X)
Indicate your distribution choice below. If you do not make an TRUST NAME Perennial Value Australian Shares Trust	AUD	on, distributions will INVESTMENT AMOUNT \$	be reinvested. DISTRIBUTIO (indicate prefere	N OPTION nce with an X)
Indicate your distribution choice below. If you do not make an TRUST NAME Perennial Value Australian Shares Trust Perennial Value Smaller Companies Trust	AUD AUD	INVESTMENT AMOUNT \$	be reinvested. DISTRIBUTIO (indicate prefere	N OPTION nce with an X)
Indicate your distribution choice below. If you do not make an TRUST NAME Perennial Value Australian Shares Trust Perennial Value Smaller Companies Trust Perennial Value Shares For Income Trust	AUD AUD	INVESTMENT AMOUNT \$ \$ \$	be reinvested. DISTRIBUTIO (indicate prefere	N OPTION nce with an X)
Indicate your distribution choice below. If you do not make an TRUST NAME Perennial Value Australian Shares Trust Perennial Value Smaller Companies Trust Perennial Value Shares For Income Trust Perennial Value Shares Wholesale Trust	AUD AUD AUD AUD	INVESTMENT AMOUNT \$ \$ \$ \$	be reinvested. DISTRIBUTIO (indicate prefere	N OPTION nce with an X)
Indicate your distribution choice below. If you do not make an TRUST NAME Perennial Value Australian Shares Trust Perennial Value Smaller Companies Trust Perennial Value Shares For Income Trust Perennial Value Shares Wholesale Trust Perennial Value Microcap Opportunities Trust	AUD AUD AUD AUD AUD AUD	INVESTMENT AMOUNT \$ \$ \$ \$ \$	be reinvested. DISTRIBUTIO (indicate prefere	N OPTION nce with an X)
Indicate your distribution choice below. If you do not make an TRUST NAME Perennial Value Australian Shares Trust Perennial Value Smaller Companies Trust Perennial Value Shares For Income Trust Perennial Value Shares Wholesale Trust Perennial Value Microcap Opportunities Trust Perennial Better Future Trust Perennial Strategic Natural Resources Trust We will only accept application funds in their base currency. Please indicate the source and origin of funds being invested:	AUD	INVESTMENT AMOUNT \$ \$ \$ \$ \$ \$	be reinvested. DISTRIBUTIO (indicate prefere) Pay to my bank a/c	N OPTION nce with an X)
Indicate your distribution choice below. If you do not make an TRUST NAME Perennial Value Australian Shares Trust Perennial Value Smaller Companies Trust Perennial Value Shares For Income Trust Perennial Value Shares Wholesale Trust Perennial Value Microcap Opportunities Trust Perennial Better Future Trust Perennial Strategic Natural Resources Trust We will only accept application funds in their base currency. Please indicate the source and origin of funds being invested: savings	AUD	INVESTMENT AMOUNT \$ \$ \$ \$ \$ \$ \$ \$	be reinvested. DISTRIBUTIO (indicate prefere) Pay to my bank a/c	N OPTION nce with an X)
Indicate your distribution choice below. If you do not make an TRUST NAME Perennial Value Australian Shares Trust Perennial Value Smaller Companies Trust Perennial Value Shares For Income Trust Perennial Value Shares Wholesale Trust Perennial Value Microcap Opportunities Trust Perennial Better Future Trust Perennial Strategic Natural Resources Trust We will only accept application funds in their base currency. Please indicate the source and origin of funds being invested:	AUD	INVESTMENT AMOUNT \$ \$ \$ \$ \$ \$ normal course asset sale	be reinvested. DISTRIBUTIO (indicate prefere) Pay to my bank a/c	Reinvest
Indicate your distribution choice below. If you do not make an TRUST NAME Perennial Value Australian Shares Trust Perennial Value Smaller Companies Trust Perennial Value Shares For Income Trust Perennial Value Shares Wholesale Trust Perennial Value Microcap Opportunities Trust Perennial Better Future Trust Perennial Strategic Natural Resources Trust We will only accept application funds in their base currency. Please indicate the source and origin of funds being invested: savings investment	AUD	INVESTMENT AMOUNT \$ \$ \$ \$ \$ \$ normal course asset sale	be reinvested. DISTRIBUTIO (indicate prefere Pay to my bank a/c	Reinvest

inheritance

Payment of application amount

Select your payment method and complete the relevant section if		Direct debit auth	ority – Australian bank accounts only		
applicable. All payn	icable. All payments must be made in AUD.		You can allow us to deduct your application amount directly from		
Electronic Funds Transfer (EFT) Direct debit Cheque EFT Account name: National Nominees Limited ANF Perennial Investment Management Ltd Application Account		direct debit autho Bulk Electronic Cle	inancial institution account by completing the ority below. This debit will be made through the earing System (BECS) from your account held at oution you have nominated below.		
		the terms and cor between you and Request and in yo	s section, you have understood and agreed to nditions governing the debit arrangements OneVue Fund Services Pty Ltd, as set out in this our Direct Debit Request Service Agreement, a available on www.onevue.com.au.		
		Financial institution			
BSB:	083-043				
Account number: 986145774 Your reference: [please use the name of the investor] BPAY – Telephone and internet banking You can make your payment using telephone or internet banking. You will need to quote the biller code and your account number (for reference) when making this payment. If this is a new investment, we will notify you of your account number once this is available. Please make your payment within 14 days of this notification.		Branch name			
				BSB number	Account number
		Account name			
		I/We request and	authorise OneVue Fund Services Pty Ltd ABN 18		
		107 333 308 (Use	r ID 411595) to arrange, through its own n, a debit to the nominated account as		
		Trust		Biller code	Reference number
Perennial Value Aus Trust	tralian Shares	29561	Your investor number	Please print full na	ame
Perennial Value Sma Companies Trust	aller	29819	Your investor number	·	
Perennial Value Sha	res For	00570	Your investor	Date (DD/MM/YY	YY)

		number
Perennial Value Australian Shares Trust	29561	Your investor number
Perennial Value Smaller Companies Trust	29819	Your investor number
Perennial Value Shares For Income Trust	29579	Your investor number
Perennial Value Shares Wholesale Trust	29686	Your investor number
Perennial Value Microcap Opportunities Trust	266312	Your investor number
Perennial Better Future Trust	249532	Your investor number
Perennial Strategic Natural Resources Trust	339317	Your investor number

Contact your bank or financial institution to make this payment from your cheque, savings, debit or transaction account.

More info: www.bpay.com.au

®Registered to BPAY Pty Ltd ABN 69 079 137 518

Cheque

Please print full name

Date (DD/MM/YYYY)

/ MM /

Please make payable to 'NNLOCA ANF Perennial Investment Management Ltd Application Account A/C Applicant Name', marked 'Not Negotiable'.

Signature of joint account holder (if applicable)

Financial institution account details

Australian bank account details Foreign bank account details Please provide your bank account details if you have selected to Please complete if you wish to provide details for future take your distribution in cash or wish to provide these details for redemptions. We will only pay cash proceeds to a bank account in future redemptions. We will only pay cash proceeds to a bank the name(s) of the investor(s). We will not make any payments account in the name(s) of the investor(s). We will not make any into third party bank accounts. payments into third party bank accounts. Financial institution name Financial institution name Financial institution address Branch name Account number BSB number Account number Account name Account name SWIFT/BIC ABA/FED (US) IBAN (Europe) Due to the complexity of foreign bank accounts, we may need to contact you for more information. Regular savings plan – Australian Bank accounts only I/We would like to establish a regular savings plan: Yes Monthly investment amount: \$AUD (minimum \$200 per month) Please complete the direct debit request in section 6 'Payment of application amount' above. If this request is received within 5 days of when Regular Savings Plans are due to run, this Regular Savings Plan instruction will be applied on the following month. Communication Automatic online account access Annual and semi-annual report options Online access enables you to view details of your investments The annual and any semi-annual financial statements of the Trust are available free on our website. If you would like to receive a (account balance, investment details and account statements). We copy by post or email, please indicate below. (This refers to annual will send you the necessary registration details by post once your and semi-annual reports only. This will not affect communication application is processed. instructions regarding general correspondence for your Trust). You may receive market commentary, event invitations etc from By email By post us, from time to time. Please indicate if you do not wish to receive these communications. Marketing material You may receive market commentary, event invitations etc from us, from time to time. Please indicate if you do not wish to receive these communications.

Identification and verification 10

Please tick one box only: I have not previously invested in any PIML Trusts and will complete the relevant investor identification forms located at the end of this application form.

I am an existing investor in a PIML Trusts and am not required to complete the investor identification forms located at the end of this application form.

We can put in place arrangements with dealer groups that means that we can rely on the investor identification undertaken by your financial adviser who should contact us for details.

Financial adviser details Use this section to tell us about your financial adviser. If you Postal address (if different to above) change your financial adviser, it's important to let us know in a timely way. If you would like your financial adviser to receive Property/Building name (if applicable) copies of your statements by email, please enter their email address below. Unit Street number **Email address** Street name Notice to financial adviser: by completing this section of the application form, you are confirming that you hold a current Suburb State Australian Financial Services Licence (AFSL), or are otherwise authorised to advise on and arrange this product. Postcode Country Financial adviser details Dealer group name Contact details Adviser name Business number (include country and area code) AFSL number Authorised representative number (if any) Mobile number (include country code) **Address** Adviser signature Property/Building name (if applicable) Unit Street number Please select if you would like to receive an XPLAN data feed Street name

State

12 Declarations and acknowledgments

Country

When you apply to invest, you (the applicant) are telling us:

- you have received, read and understood the current PDS
- monies deposited are not associated with crime, terrorism, money laundering or terrorism financing, nor will monies received from your account have any such association
- you are not bankrupt or a minor

Suburb

Postcode

- you agree to be bound by the constitution of the Trust and the PDS as supplemented, replaced or re-issued from time to time, and
- you consent to the handling of your personal information in accordance with the Privacy Act 1988 and relevant privacy policies.

13 Signing instructions

Individual — where the investment is in one name, the sole investor must sign.

Joint Holding — where the investment is in more than one name, all investors must sign. If more than two signatures are required, please attach an additional page with the full names of each account holder, their signatures, and date.

Companies — where the company has a sole director who is also the sole company secretary, this form must be signed by that person. If the company (pursuant to section 204A of the Corporations Act 2001) does not have a company secretary, a sole director can also sign alone. Otherwise this form must be signed by a director jointly with either another director or a company secretary. Please indicate the capacity in which the form is signed.

Trust — the trustee(s) must sign this form. Trustee(s) signing on behalf of the trust confirm that the trustee(s) is/are acting in accordance with such designated powers and authority under the trust deed.

Power of Attorney — if signing under a Power of Attorney and you have not already lodged the Power of Attorney document, please attach a certified copy of the Power of Attorney annotated with the following: I/We attest that the Power of Attorney has not been rescinded or revoked and that the person who gave the Power of Attorney is still living.

Signature of investor i, director or authorised signatory
Please print full name
Date (DD/MM/YYYY) DD / MM / YYYYY
Company officer (please indicate company capacity) Director
Sole director and company secretary
Authorised signatory
Signature of investor 2, director/company secretary or authorised signatory
Please print full name
Date (DD/MM/YYYY) / / / /
Company officer (please indicate company capacity) Director
Company secretary
Authorised signatory
If you are investing jointly or are a joint trustee, please indicate whether a single investor can operate your account.
If more than one investor, all investors are required to sign this initially and provide certified identification where required.
Yes No

Phone

Within Australia: 1300 730 032 International: +61 2 8823 2534

Email

perennial.transactions@unitregistry.com.au

Instructions: identification forms

Which form?	There are three forms that follow: one each for individuals, companies and trustees.
	Choose the form that is applicable to you.
	If you are a partnership, an association, a co-operative or a Government body, then contact us and we will send a more appropriate form to you.
Copies or originals?	This form asks you to send us certain documents. Please send us certified copies, not originals. We will keep what you send to us.
Certifying copies	You must have someone certify the copies you send to us. The following people can be the certifier:
	You must certify the copies you send to us by one of the following certifiers: • a Justice of the Peace
	a Notary public (for the purposes of the Statutory Declaration Regulations 1993)
	an agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
	a permanent employee of the Australian Postal Corporation with 2 or more years of continuous service who is employed in an office supplying postal services to the public
	• an officer with, or authorised representative of, a holder of an Australian financial services licence, having 2 or more continuous years of service with one or more licensees
	• an officer with 2 or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 1993)
	a finance company officer with 2 or more continuous years of service with one or more finance companies (for the purposes of the Statutory Declaration Regulations 1993)
	a member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with 2 or more years of continuous membership
	a person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described)
	a Judge of a court
	a magistrate
	a chief executive officer of a Commonwealth court
	a registrar or deputy registrar of a court
	a Police officer
	 an Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular FeesAct 1955).
What should the person certifying write?	"I [name] of [address] being [capacity e.g. Justice of the Peace] certify this and the following [x] pages as true copy of the original document." Each page should be initialed by the person certifying your documents.
Not in English?	Documents not in English must be accompanied by an English translation prepared by an accredited translator.

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Email

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Identification form – Individuals

Complete this form if you have not previously invested in a PIML Trust. A separate form is required for each investor in the case of joint holdings. If you make an error while completing this form, do not use correction fluid. Cross out your mistakes and initial your changes.

If you are a trustee, do NOT complete this form. Complete the Identification form – Trusts and Trustees instead.

- 1. Please complete this identification form in BLOCK letters and using a black pen.
- 2. Make copies of your ID document(s) and arrange for them to be certified. Please refer to the 'Instructions' page for more information on getting your documents certified.
- 3. Include this identification form and certified copies of your ID documents with your initial application form when you send it to us.

1 Personal details	
Title Full given names Surname Date of birth (DD/MM/YYYY) Usual occupation	Please indicate the source and origin of funds being invested: savings investment superannuation contributions commission donation/gift inheritance normal course of business asset sale other – write the source and origin of funds below
 Verification procedure – individual investor Please provide a certified copy of one document from Group 1 or if individual applicant. 	you can't, a certified copy of two documents from Group 2 for each
Group 1	Group 2
Australian driver's licence showing your photo, and please copy the front and back foreign driver's licence showing your date of birth, signature and photo Australian passport a passport that has expired within the preceding two years is acceptable, and please copy the pages which identify you foreign passport showing your signature and photo, and please copy the pages which identify you Australian State or Territory Government issued ID card showing your date of birth, signature and photo foreign Government issued ID card showing your date of birth, signature and photo.	If you can't provide anything from Group 1, then provide a certified copy of one of the following: Australian or foreign government issued birth certificate Australian or foreign government issued citizenship certificate Centrelink pension or health card please copy the front and back. PLUS provide a certified copy of one of the following: a Government issued notice one which shows your name and residential address, not more than 12 months old a rates or utilities notice one which shows your name and residential address, not more than 3 months old ATO notice one which shows any debt owing to the ATO, your name and residential address, not more than 12 months old.
3 Signature	
Please print full name Date (DD/MM/YYYY)	

Phone

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Email

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Identification form – Australian and Foreign companies

Complete this form if you are a company investing for the first time with a PIML Trust. If you make an error while completing this form, do not use correction fluid. Cross out your mistakes and initial your changes.

If you are a trustee, do NOT complete this form. Complete the Identification form – Trusts and Trustees instead.

- 1. Please complete this identification form in BLOCK letters and using a black pen.
- 2. Make copies of your ID document(s) and arrange for them to be certified. Please refer to the 'Instructions' page for more information on getting your documents certified.
- 3. Include this identification form and certified copies of your ID documents with your initial application form when you send it to us.

1 Company details	
1.1 General information Full name of company	Registered in country of formation?
Nature of business	No Yes – name of regulator/exchange
1.2 Australian companies Principal place of business (if different to registered office address). A PO Box/RMB/Locked Bag is not acceptable.	Identification number issued by foreign registration body If you are a foreign company registered in Australia write your
Property/Building name (if applicable)	principal place of business in Australia or the full name and address of your Australian agent.
Unit Street number	If you are a foreign company not registered in Australia write your registered business address in country of formation or principal place of business if there is not a registered address.
Street name	A PO Box/RMB/Locked Bag is not acceptable Property/Building name (if applicable)
Suburb State	[]
Postcode Country	Unit Street number
	Street name
Please provide us with certified copies of:	
an ASIC search	Suburb State
1.3 Foreign companies	Postcode Country (if not Australia)
Country of formation	essanty (in net riastralia)
	Please provide us with certified copies of one of the following:
Registered in Australia?	an ASIC or foreign regulator search
No Yes – what is the ARBN	an ASIC or foreign regulator certificate of registration.
2 Company type	
Please complete the section below for public companies (section	Director 1
2.1) or private companies (section 2.2) as applicable.	Title Full given names
2.1 Public company Are you a public company?	
No Yes	Surname
If yes, please proceed to section 3.	Director 2
2.2 Private company	Title Full given names
Are you a private company?	
No Yes	Surname
If yes, please complete the director details section below if you are a private Australian company or a private foreign company. Do not complete for public companies.	Director 3
Director details	Title Full given names
How many directors are there?	
Provide the full name of each director.	Surname

Director 4	If there are more directors, please provide their name on a	
Title Full given names	separate sheet and attach to this form.	
Surname		
3 Regulated/Listed companies		
Are you an Australian listed company?	Are you a regulated company?	
No Yes – please provide name of market/exchange	One that which is licensed by an Australian Commonwealth, State	
Market/exchange	or Territory statutory regulator.	
	No Yes – please provide details of the regulator and	
Are you a majority-owned subsidiary of an Australian listed	licence number	
company?	Regulator	
No Yes – please provide name of listed company	Licence number	
and market/exchange	Licence number	
Company		
Market/Exchange	If you answered yes to any of these questions, please provide us with a certified copy of one of the following and sign the form at	
Will kely Exchange	the end. For you, this form is then complete.	
	an ASIC search	
	a search of the licence or other records of the relevant	
	regulator	
	a public document issued by the company	
	a search of the relevant market/exchange	
4 Non-regulated/non-listed companies		
If you answered no to all the questions in section 3, please fill in the sections 4.1, 4.2 and 4.3 below.	Usual occupation/Nature of business	
4.1 Beneficial owner details	Paridadish addays (Parists and affine addays	
Provide details of all beneficial owners who are individuals who,	Residential address/Registered office address A PO Box/RMB/Locked Bag is not acceptable	
through one or more shareholdings, ultimately own 25% or more of the company's issued BLOCK or who control (whether directly	Property/Building name (if applicable)	
or indirectly) the company and either the date of birth or full		
residential address of each beneficial owner.	Unit Street number	
DEFINITION		
Control: includes control as a result of, or by means of, trusts,	Street name	
agreements, arrangements, understandings and practices, whether or not having legal or equitable force and whether or		
not based on legal or equitable rights, and includes exercising	Suburb State	
control through the capacity to determine decisions about	Postcode Country	
financial and operating policies.	- Country	
Beneficial owner 1	Beneficial owner 2	
Title Full given names	Title Full given names	
	Tail given names	
Surname/Company name	Surname/Company name	
Date of hirth (DD/MM/VVVV)		

Date of birth (DD/MM/YYYY)	Residential address/Registered office address A PO Box/RMB/Locked Bag is not acceptable
DD / MM / YYYY	
Usual occupation/Nature of business	Property/Building name (if applicable)
	Link Christ murch or
Residential address/Registered office address	Unit Street number
A PO Box/RMB/Locked Bag is not acceptable	Charles and
Property/Building name (if applicable)	Street name
	Suburb State
Unit Street number	State
	Destands Country
Street name	Postcode Country
Suburb State	Verification procedure - beneficial owners
	Please provide a certified copy of one document from Group 1 or
Postcode Country	if you can't, a certified copy of two documents from Group 2 for
	each individual applicant.
Develorial access 2	Group 1
Beneficial owner 3	Provide a certified copy of one of these:
Title Full given names	Australian driver's licence
	showing your photo, and please copy the front and back
Surname/Company name	
	foreign driver's licence
Date of birth (DD/MM/YYYY)	showing your date of birth, signature and photo
DD / MM / YYYY	Australian passport
Usual occupation/Nature of business	a passport that has expired within the preceding two years is
Usual occupation/Nature of business	acceptable, and please copy the pages which identify you
	foreign passport
Residential address/Registered office address	showing your signature and photo, and please copy the
A PO Box/RMB/Locked Bag is not acceptable	pages which identify you
Property/Building name (if applicable)	Australian State or Territory Government issued ID card
	showing your date of birth, signature and photo
Unit Street number	¬ ¬
	foreign Government issued ID card
Street name	showing your date of birth, signature and photo.
	Group 2
Suburb State	If you can't provide anything from Group 1, then provide a
	certified copy of one of the following:
Postcode Country	Australian or foreign government issued birth certificate
Beneficial owner 4	Australian or foreign government issued citizenship
	certificate
Title Full given names	Centrelink pension or health card
Surnamo (Company namo	please copy the front and back.
Surname/Company name	PLUS provide a certified copy of one of the following:
Data of hinth (DD/MMAAAAA	
Date of birth (DD/MM/YYYY)	a Government issued notice
	one which shows your name and residential address, not more than 12 months old
Usual occupation/Nature of business	
	a rates or utilities notice
	one which shows your name and residential address, not more
	than 3 months old

one which shows any debt owing to the ATO, your name and residential address, not more than 12 months old. For each corporate beneficial owner please provide: a completed Identification form – Australian and Foreign companies, plus any relevant identification.	Residential address/Registered office address A PO Box/RMB/Locked Bag is not acceptable Property/Building name (if applicable)	
For each corporate beneficial owner please provide: a completed Identification form – Australian and Foreign	A PO Box/RMB/Locked Bag is not acceptable	
a completed Identification form – Australian and Foreign		
companies, plas any relevant lacitations.		
4.2 Voting rights	Unit Street number	
If there are any other individuals, who have not been listed above in section 4.1, and who are entitled, either directly or indirectly, to		
exercise 25% or more of the company's voting rights, please	Street name	
provide their name, date of birth, and residential address on a separate sheet and attach to this form.		
·	Suburb	State
4.3 Senior Managing Official details If the company does not have any beneficial owners, please	Postcodo Country	
provide the details of the Senior Managing Official (or equivalent).	Postcode Country	
Title Full given names		
	DEFINITION	
Surname	Senior managing official: an individual who make	ces, or
	participates in making, decisions that affect the	
Date of birth (DD/MM/YYYY)	substantial part of the company, or that may sign the company's financial standing.	nincantly affect
DD / WINI / TTTT		
5 Cincin in the single		
5 Signing instructions		
Where the company has a sole director who is also the sole company (pursuant to section 204A of the Corporations Act 2001) alone. Otherwise this form must be signed by a director jointly wit	does not have a company secretary, a sole director of	an also sign
capacity in which the form is signed.		
Signature of director 1		
Please print full name		
Date (DD/MM/YYYY)		
DD / MM / YYYY		
Company officer (please indicate company capacity)		
Director		
Sole director and company secretary		
Signature of director 2/company secretary		
Please print full name		
Data (DD (MANA) AAAAA		
Date (DD/MM/YYYY) DD / MM / YYYYY		
DD / MM / YYYY		
Company officer (please indicate company capacity) Director		
Director Sole director and company secretary		

Phone

Within Australia: 1300 730 032 International: +61 2 8823 2534

Email

perennial.transactions@unitregistry.com.au

Identification form – Trusts and Trustees

Complete this form if you have not previously invested in a PIML Trust. If you make an error while completing this form, do not use correction fluid. Cross out your mistakes and initial your changes.

- 1. Please complete this identification form in BLOCK letters and using a black pen.
- 2. Make copies of your ID document(s) and arrange for them to be certified. Please refer to the 'Instructions' page for more information on getting your documents certified.
- 3. Include this identification form and certified copies of your ID documents with your initial application form when you send it to us.

1 Trust details	
Full name of trust	Please indicate the source and origin of funds being invested:
	savings
Business name (if any)	investment
Country in that the trust was established	superannuation contributions
	commission
	donation/gift
	inheritance
	normal course of business
	asset sale
	other – write the source and origin of funds below:
2 Type of trust	
2.1 Regulated trusts	2.2 Non-regulated trusts
This includes complying superannuation funds and SMSFs	Including family discretionary trusts, family and other unit trusts, deceased estates and charitable trusts (but not including self-
Superannuation fund - or another type of trust registered and regulated by an Australian Commonwealth statutory regulator	managed super funds)
No Yes	Is the trust a non-regulated trust?
If yes, please tell us:	No Yes
The trust's ABN	If yes, please specify the type of trust
The regulator if not APRA or the ATO	Please provide full name, address and date of birth of all beneficial owners who are individuals who own 25% or more of
Any license number	the trust income or assets or who control (whether directly or
Any licence number	indirectly) the trust and either the date of birth or full residential address of each beneficial owner:
Registered managed investment scheme	DEFINITION
No Yes	Control: includes control as a result of, or by means of, trusts,
If yes, please tell us the ARSN	agreements, arrangements, understandings and practices,
	whether or not having legal or equitable force and whether or not based on legal or equitable rights, and includes exercising
Government superannuation fund	control through the capacity to determine decisions about
No Yes	financial and operating policies.
If yes, please tell us the name of the Act that regulates the trust	Beneficial owner 1
If you answered yes to any of these questions, then please provide	Title Full given names
a certified copy of one of the following:	
superannuation funds	Surname/Company name
go to www.abn.business.gov.au, select the 'Super Fund Lookup' option and print out the results for your super fund	Data of high (DD/MM 00000
registered managed investment schemes	Date of birth (DD/MM/YYYY)
an ASIC search of the scheme	Usual occupation/Nature of business
Government superannuation funds	Osaar occupation mature or business
an extract of the establishing legislation.	Residential address
	A PO Box/RMB/Locked Bag is not acceptable
	Property/Building name (if applicable)

Unit Street number		Postcode	Country	
Street name		Beneficial ov	vner 4	
		Title	Full given names	
Suburb	State			
		Surname/Co	mpany name	
Postcode Country				
		Date of birth	(DD/MM/YYYY)	
Beneficial owner 2		DD / N	1M / YYYY	
Title Full given names		Usual occupa	ation/Nature of business	
Surname/Company name		Residential a	ddress	
			MB/Locked Bag is not accept	table
Date of birth (DD/MM/YYYY)		Property/Bui	lding name (if applicable)	
DD / MM / YYYY				
Usual occupation/Nature of business		Unit	Street number	
Residential address		Street name		
A PO Box/RMB/Locked Bag is not acceptable				
Property/Building name (if applicable)		Suburb		State
Unit Street number		Postcode	Country	
Street name		─ Please provie	de the name of all beneficia	aries that are not
		beneficial ov		
Suburb	State	If the trust de	eed describes the beneficiar	ies by reference to
			class please provide details	
Postcode Country			belong e.g. family members a separate sheet and attach	
			·	to this form.
Beneficial owner 3		Beneficiary 1		
Title Full given names		Title	Full given names	
Surname/Company name		Surname		
Date of birth (DD/MM/YYYY)		Beneficiary 2	2	
DD / MM / YYYY		Title	Full given names	
Usual occupation/Nature of business				
		Surname		
Residential address				
A PO Box/RMB/Locked Bag is not acceptable		Beneficiary 3	}	
Property/Building name (if applicable)		Title	Full given names	
repersy, commission of the separation				
Unit Street number		Surname		
Street name				
Suburb	State			

Beneficiary 4	Name of trust settlor	
Title Full given names		
Surname	DEFINITION	
Please provide the name of the appointor of the trust, if applicable	Settlor : this is the person that creates the trust. The settlor may be, for example, your accountant or solicitor.	
DEFINITION Appointor: the appointor has the power to appoint or remove the trustees of the trust. Not all trusts have an appointor.	Note: you do not need to provide the name of the trust settlor if they are deceased, or the material asset at the time the trust was established was less than \$10,000. If you are a non-regulated trust, please provide us with certified copies of one of the following: Trust deed or an extract of the trust deed showing the full name of the trust and any named trust settlor Other documentation confirming the full name of the trust and the name of the trust settlor	
3 Trustee details		
3.1 Verification procedure – individual trustee Title Full given names	Group 2 If you can't provide anything from Group 1, then provide a certified copy of one of the following:	
Surname	Australian or foreign government issued birth certificate	
Date of birth (DD/MM/YYYY) DD / / / / / / / / / / / / /	Australian or foreign government issued citizenship certificate Centrelink pension or health card please copy the front and back.	
Please provide a certified copy of one document from Group 1 or if you can't, a certified copy of two documents from Group 2 for each individual applicant.	a Government issued notice one which shows your name and residential address, not more than 12 months old	
Group 1 Provide a certified copy of one of these: Australian driver's licence showing your photo, and please copy the front and back	a rates or utilities notice one which shows your name and residential address, not more than 3 months old	
foreign driver's licence showing your date of birth, signature and photo	ATO notice one which shows any debt owing to the ATO, your name and residential address, not more than 12 months old.	
Australian passport a passport that has expired within the preceding two years is acceptable, and please copy the pages which identify you	For each corporate beneficial owner please provide: a completed Identification form – Australian and Foreign companies, plus any relevant identification.	
foreign passport showing your signature and photo, and please copy the pages which identify you	3.2 Verification procedure – company trustees3.2.1. General informationFull name of company trustee	
Australian State or Territory Government issued ID card showing your date of birth, signature and photo	Nature of business	
foreign Government issued ID card showing your date of birth, signature and photo.	ACN	

Place of business (if different to registered office address) Please complete the section below for public companies (3.2.4 (a)) A PO Box/RMB/Locked Bag is not acceptable. or private companies (section 3.2.4 (b)) as applicable. Property/Building name (if applicable) 3.2.4 (a) Public company Are you a public company? No Yes Unit Street number If yes, please proceed to section 3.2.5 Street name 3.2.4 (b) Private company Are you a private company? Suburb State Yes No If yes, please complete the director details section below if you are Postcode a private Australian company or a private foreign company. Do Country not complete for public companies. **Director details** 3.2.3 Foreign company trustee How many directors are there? Country of formation Provide the full name of each director: Registered in Australia? Director 1 No Yes Title Full given names If yes, please provide the ARBN Surname Registered in that country? Director 2 No Yes Title Full given names If yes, please provide the name of regulator/exchange Surname Identification number issued by foreign registration body Director 3 Registered business address in country of formation Title Full given names A PO Box/RMB/Locked Bag is not acceptable Property/Building name (if applicable) Surname Unit Street number Director 4 Street name Title Full given names Surname Suburb State If there are more directors, please provide their name on a Postcode Country (if not Australia) separate sheet and attach to this form. 3.2.5 Regulated/Listed companies Please provide us with certified copies of one of the following: Are you an Australian listed company? an ASIC or foreign regulator search Yes - please provide name of No market/exchange an ASIC or foreign regulator certificate of registration. Market/Exchange

3.2.4 Company type

3.2.2. Australian company trustee

Are you a majority-owned subsidiary of an Australian listed company?	Suburb State
No Yes – please provide name of listed company	Postcode Country
Company and market/exchange	
N. 1.45 1	Beneficial owner 2
Market/Exchange	Title Full given names
Are you a regulated company?	Surname/Company name
One which is licensed by an Australian Commonwealth, State or	D (1::1/ /DD // 41/00000
Territory statutory regulator.	Date of birth (DD/MM/YYYY)
No Yes – please provide details of the regulator and licence number	DD / WIWI / YYYY
Regulator	Usual occupation/Nature of business
Regulator	
Licence number	Residential address A PO Box/RMB/Locked Bag is not acceptable
If you answered yes to any of these questions, please provide us	Property/Building name (if applicable)
with a certified copy of one of the following and sign the form at	Charact manufacture
the end. For you, this form is then complete.	Unit Street number
an ASIC search	Street name
a search of the licence or other records of the relevant	Sueet name
regulator	Suburb State
a multiple de grand travel by the granders	State
a public document issued by the company	Postcode Country
a search of the relevant market/exchange	- steeds - steeds
3.2.6 Non-regulated/non-listed companies	Beneficial owner 3
If you answered no to all the questions in section 3.2.5, please fill	
in the sections 3.2.6 (a), (b) and (c) below.	Title Full given names
3.2.6 (a) Beneficial owner details	Surname/Company name
Provide details of all deneficial owners (i.e. company shareholders)	Surname, company hame
who, through one of more shareholdings, own 25% or more of the company's issued BLOCK.	Date of birth (DD/MM/YYYY)
Beneficial owner 1	DD / MM / YYYY
	Usual occupation/Nature of business
Title Full given names	Osaan occupation, Nature of Basiness
Surrama/Company name	Residential address
Surname/Company name	A PO Box/RMB/Locked Bag is not acceptable
Date of birth (DD/MM/YYYY)	Property/Building name (if applicable)
DD /MM / VVVV	Virginia 7
Have been stire (Network of Inventory	Unit Street number
Usual occupation/Nature of business	
	Street name
Residential address A PO Box/RMB/Locked Bag is not acceptable	
•	Suburb State
Property/Rilliding name (it applicable)	State
Property/Building name (if applicable)	
	Postcode Country
Unit Street number	

Beneficial owner 4	PLUS provide a certified copy of one of the following:
Title Full given names	a Government issued notice
	one which shows your name and residential address, not
Surname/Company name	more than 12 months old
	a rates or utilities notice
Date of birth (DD/MM/YYYY)	one which shows your name and residential address, not
DD / MM / YYYY	more than 3 months old
Usual occupation/Nature of business	ATO notice
	one which shows any debt owing to the ATO, your name and
Residential address	residential address, not more than 12 months old.
A PO Box/RMB/Locked Bag is not acceptable	For each corporate beneficial owner please provide:
Property/Building name (if applicable)	a completed Identification form – Australian and Foreign
	companies, plus any relevant identification.
Unit Street number	3.2.6 (b) Voting rights
	If there are any other individuals, who have not been listed above
Street name	in section 3.2.6 (a), and who are entitled, either directly or
	indirectly, to exercise 25% or more of the company's voting rights, please write down their full names on a piece of paper and attach
Suburb State	to this form.
	3.2.6 (c) Senior Managing Official details
Postcode Country	If the company does not have any beneficial owners, please
	provide the details of the Senior Managing Official (or equivalent).
Verification procedure - beneficial owners	Title Full given names/Full company name
Please provide a certified copy of one document from Group 1 or	
if you can't, a certified copy of two documents from Group 2 for	Surname
each individual applicant.	
Group 1	Date of birth (DD/MM/YYYY)
Provide a certified copy of one of these:	DD / MM / YYYY
Australian driver's licence	Nature of business
showing your photo, and please copy the front and back	Nature of Business
foreign driver's licence	Commental
showing your date of birth, signature and photo	Company title
Australian passport a passport that has expired within the preceding two years is	
acceptable, and please copy the pages which identify you	Residential address A PO Box/RMB/Locked Bag is not acceptable
foreign passport	·
showing your signature and photo, and please copy the	Property/Building name (if applicable)
pages which identify you	Linite Charact mounth on
Australian State or Territory Government issued ID card	Unit Street number
showing your date of birth, signature and photo	Street name
showing your date of birth, signature and photo.	Sirect name
Group 2	Suburb State
·	State
If you can't provide anything from Group 1, then provide a certified copy of one of the following:	Postcode Country
	- Country
Australian or foreign government issued birth certificate	
Australian or foreign government issued citizenship certificate	
Centrelink pension or health card please copy the front and back.	

DEFINITION

Senior managing official: an individual who makes, or participates in making, decisions that affect the whole, or a substantial part of the company, or that may significantly affect the company's financial standing.

Verification procedure - senior managing official details

If you are unable to provide details of beneficial owners in 3.2.6 (a) above, please provide documentation showing the name of the senior managing official, as provided in this section 3.2.6 (c).

4 Signing instructions

Individual Trustee: where the investment has one individual trustee, the trustee must sign.

Multiple trustees: where the investment has more than one individual trustee, all trustees must sign.

Corporate trustee: where the company has a sole director who is also the sole company secretary, this form must be signed by that person. If the company (pursuant to section 204A of the Corporations Act 2001) does not have a company secretary, a sole director can also sign alone. Otherwise this form must be signed by a director jointly with either another director or a company secretary. Please indicate the capacity in which the form is signed.

Trust: the trustee(s) must sign this form. Trustee(s) signing on behalf of the trust confirm that the trustee(s) is/are acting in accordance with such designated powers and authority under the trust deed.

Power of Attorney: if signing under a Power of Attorney and you have not already lodged the Power of Attorney with us, please attach a certified copy of the Power of Attorney. I/We attest that the Power of Attorney has not been rescinded or revoked and that the person who gave the Power of Attorney is still living.

Signature of trustee 1, director or authorised signatory
Please print full name
Date (DD/MM/YYYY)
DD / MM / YYYY
Company officer (please indicate company capacity)
Director
Sole director and company secretary
Authorised signatory
Signature of trustee 2, director/company secretary or authorised signatory
Please print full name
Date (DD/MM/YYYY)
DD / MM / YYYY
Company officer (please indicate company capacity)
Director
Company secretary
Authorised signatory

Phone

Within Australia: 1300 730 032 International: +61 2 8823 2534

Email

perennial.transactions@unitregistry.com.au

Tax information form

Why you need to complete this form

The Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) are regulatory requirements that aim to deter tax evasion by US and other foreign taxpayers. The Australian and a number of other foreign Governments have an agreement which requires us to obtain certain information from investors, including taxation information. You may be liable to a penalty if you provide information that is false or misleading in a material particular. We may decide not to open an account without first receiving the required information. For more information, visit ato.gov.au.

If you are unsure of any of the answers, please contact a legal or accounting professional.

Which sections of the form should you complete?

Superannuation funds, testamentary trusts, registered charities - Section 1

Individuals - Section 2

Companies and other trusts - Section 3

- Corporate trustee Section 3
- Individual trustee Section 2

What if more than one person is applying?

Each individual investor will need to complete a copy of this form.

DEFINITION

Tell me about tax residence

You can be a resident of more than one country for tax purposes. Whether you are tax resident of a particular country for tax purposes is often based on the amount of time you spend in a country and the location of your residence and/or place of work. If you pay tax or have a tax liability somewhere, you are probably a tax resident there. Dual citizenship often brings dual tax residency. It depends on the country. For the US, tax residency can be as a result of citizenship or residency for tax purposes.

is the tax file number (TFN). For the US, it could for example be a US Social Security Number, a US Individual Taxpayer Identification Number or a US Employer Identification Number. In other countries,

Section 1 Superannuation funds and other special trusts Are you a superannuation or other special type of trust? **DEFINITION** I am the trustee of a regulated superannuation fund, or this includes a self-managed superannuation fund Regulated superannuation fund: means self-managed I am a trustee of a testamentary trust, or superannuation funds, APRA regulated superannuation funds, Australian Government or semi-government superannuation funds I am a trustee of a registered charity and pooled super trusts. Where to now? Testamentary trust: this is a trustee of a trust set up in a deceased's I ticked a box ▶ go to **Section 4 Signatures** I did not tick a box ▶ go to Section 2 if you are an individual, or Section 3 if you are a company or another type of trust Section 2 **Individuals** Do not complete **Section 2** if you are a non-superannuation trustee or you are a company ▶ complete **Section 3** instead. Are you a US resident for tax purposes? DEFINITION No ▶ go to question 3 What is a TIN? Yes – please tell us your TIN ▶ go to question 3 This is short for Taxpayer Identification Number, an identification number issued or used by tax authorities. In Australia, the equivalent TIN

it may have a different name.

3. Are you a resident of any other country Other than the US or Australia. No ▶ go to Section 4 Signatures Yes − please tell us which ones, using the ▶ then go to Section 4 Signatures		DEFINITION No TIN? Reasons we accept are: #1 This country does not issue TINs #2 I have asked for a TIN, but have not yet been given one – you must tell us when received #3 The laws of this country do not require me to disclose my TIN #4 I have an exemption under the laws of this country from holding a TIN – write a code or give us details	
Country 1. 2. 3. 4.	TIN	No TIN? Which reason? See Definition box above	
Section 3 Companies and non-s	uperannuation tru	ısts	
4. Are you a US resident for tax purposes? No ▶ go to question 5 Yes – please tell us your TIN ▶ then g		DEFINITION What is a TIN? See Definition box on the previous page.	
5. Are you a resident of any other country	for tax purposes?		
Other than the US or Australia. No ▶ go to question 6 Yes – please tell us which ones, using the following table ▶ then go to question 6			
Country	TIN	No TIN? Which reason? See Definition box above	
1. 2.			
3.			
4.			

6. Are you a 'financial institution'?
Be careful – financial Institution is broadly defined – see Definition box
Not relevant - I wrote my TIN in question 4 ▶ go to question 7
No ▶ go to question 7
Yes – please tell us your GIIN – see Definition box
GIIN
Where to now?
I ticked YES and completed my GIIN > go to question 7
I ticked YES but did not write a GIIN – tell us below why you did not write a GIIN ▶ then go to question 7
Excepted Financial Institution
Deemed Compliant Financial Institution
Exempt Beneficial Owner
Non-participating Financial Institution
Non-reporting IGA Financial Institution
Sponsored financial institution – their GIIN is
GIIN
7. Are you a public company listed on a stock exchange?
No ▶ go to question 8
Yes ▶ go to Section 4 Signatures
8. Are you 'active' or 'passive'?
I am an 'active' non financial entity ▶ go to Section 4 Signatures
I am a 'passive' non financial entity ▶ go to question 9

DEFINITION

What is a GIIN?

This stands for Global Intermediary Identification Number. GIINs are 19 digits long, issued by US tax authorities (the IRS) to non US financial institutions and sponsoring entities for purposes of identifying their registration with the IRS under US tax laws (called FATCA).

DEFINITION

What is a financial institution?

This includes:

- an investment entity any entity that conducts certain activities or operations for or on behalf of a customer, including:
 - 'trading in money market instruments' and other relevant instruments
 - 'individual and collective portfolio management'
 - 'investing, administering, or managing funds or money on behalf of other persons'.

However, any trading, investing, administering or managing of financial assets on behalf of other persons must be done as a business. Note that financial assets does not include direct interests in real property.

An entity is also an investment entity if it is managed by another investment entity, depository institution, custodial institution or other prescribed entity and its gross income is primarily attributable to investing reinvesting or trading in financial assets.

So, as general rules:

- managed investment schemes are investment entities
- trusts with professional corporate trustees (and often professional corporate investment managers) often are investment entities, such as unregistered (wholesale) managed investment schemes
- discretionary family trusts are not usually investment entities, even if they have someone managing the trust's assets for them.

The ATO gives some help in this, and it's worth seeking advice if you are unsure: ato.gov.au/General/International-tax-agreements/Indetail/International-arrangements/FATCA-detailed-quidance

2. a depository institution

you accept deposits in the ordinary course of a banking or similar business e.g. a bank

3. a custodial institution

a substantial portion of your business (20% or more of gross income) has been held in financial assets for the account of others for the previous three years or since the establishment of the entity e.g. a custodian

4. certain prescribed entities

e.g. types of insurance companies that have cash value products or annuities.

DEFINITION

What is 'active' and 'passive'?

A non-financial entity (NFE) is any entity that is not a financial institution as defined above.

You will be a passive NFE if you are not an active NFE.

Generally, you will be an active NFE if:

- your stock (or a related entity's stock) is regularly traded on established securities market
- less than 50% of your gross income for the previous reporting period was passive income and less than 50% of your assets during that period produce or were held to produce passive income
- you are a Governmental entity, an international organisation, a central bank or an entity wholly owned by one of the above
- you are exempt from income tax in your residential jurisdiction and were established and operated exclusively for religious, charitable, scientific, artistic, athletic or educational purposes and meet certain other specific criteria, or
- you have not been a financial institution in the past five years and are in the process of liquidating your assets or reorganising with the intent to recommence operations other than as a financial institution.

If you are unsure whether you are an Active or Passive NFE, please get advice.

 9. Do you have any 'controlling persons' who are resident of another country for tax purposes? I am passive, and YES I do have controlling persons who are resident of another country for tax purposes Complete the controlling persons details in the table below then go to Section 4 Signatures. If there is not enough room in the table, please copy the page and attach it to your completed form. I am passive, but NO I do not have controlling persons who are resident of another country for tax purposes It would be unusual to think of no-one. Please read the 	Controlling persons Controlling persons are natural persons who exercise control over an entity. For trusts, controlling persons includes any trustees, settlors, beneficiarie classes of beneficiaries or any other person who has the power to effectively control the trust. For companies, controlling persons generally include any person who holds (directly or indirectly) more than 25% of the shares in the company and any person who has the power to influence decisions about the company's financial and operating policies, such as senior managing officials or directors.
Definition box. If you're sure ▶ go to Section 4 Signatures. Controlling person Title Given names	Controlling person Title Given names
Surname	Surname
Date of birth (DD/MM/YYYY) DD / MM / VYYY City and country of birth	Date of birth (DD/MM/YYYY) DD / MM / YYYYY City and country of birth
Residential address Number Street name	Residential address Number Street name
Suburb/City State Postcode/Zip Country	Suburb/City State Postcode/Zip Country
Country of tax residence TIN No TIN? Which reason? See Definition at questions 3 or 5 1. 2. 3. 4.	Country of tax residence TIN No TIN? Which reason? See Definition at questions 3 or 5 1. 2. 3. 4.

Controlling person	Controlling person
Title Given names	Title Given names
Surname	Surname
Date of birth (DD/MM/YYYY)	Date of birth (DD/MM/YYYY)
DD / MM / VVVV	
City and an art of thirds	City and an article (High
City and country of birth	City and country of birth
Residential address	Residential address
Number Street name	Number Street name
Suburb/City State	Suburb/City State
Postcode/Zip Country	Postcode/Zip Country
Country of tax TIN No TIN? Which	Country of the TINI NA
Country of tax TIN No TIN? Which residence reason?	Country of tax TIN No TIN? Which residence reason?
See Definition at	See Definition at
questions 3 or 5	questions 3 or 5
2.	2.
3.	3.
4.	4.
Controlling person	Controlling person
Title Given names	Title Given names
Surname	Surname
Date of birth (DD/MM/YYYY)	Date of birth (DD/MM/YYYY)
Jac of Bilat (BB) (Milly 1111)	DD /MM / YYYY
DD / MIMI / YYYY	City and country of birth
City and country of birth	City and codinty of birtin
Residential address	Residential address Number Street name
Number Street name	Number Street name
Suburb/City State	Suburb/City State
Postcode/Zip Country	Postcode/Zip Country
Country of toy TIN No TING Which - 2	Country of tax TIN No TIN? Which reason?
Country of tax residence TIN No TIN? Which reason? See Definition at	residence See Definition at
questions 3 or 5	questions 3 or 5
1. 2.	1. 2.
3.	3.

4.

4.

Section 4 Signatures

Important information

Nothing in this form is advice (and any 'definition' is general guidance only). Seek professional advice to be sure of your answers.

It is a condition of investing that you keep your details (including tax details) with us, up to date. We recommend that you review this tax information form at the end of the financial year and update your details if required. You must contact us when you learn new things about the matters in this form. Failing to update us can have tax and other consequences. You can update us by requesting and completing this form again and emailing, faxing or posting it to our Administrator.

By completing and signing this form:

- you represent having read and understood this form
- you represent this form is complete and accurate
- if you have applied for but not received your TIN or GIIN, you undertake to inform us within 30 days of receiving it
- you undertake that if information in this form changes, you will tell us within 30 days.

How to sign

Individual: sign in the left box, and have someone witness in the right box. If you are investing jointly, you need a separate form for each individual.

Company: two directors, or a director and a secretary sign, or if you are a sole director company, that sole director signs in the left box and a witness in the right box.

and a withess in the right box.	
Signature	Signature
Please print full name	Please print full name
Date (DD/MM/YYY)	Date (DD/MM/YYY)