Client Services contact details

Phone: 1300 730 032 (Australia)
Phone: +61 2 8823 2534 (International)
Email: perennial.transactions@unitregistry.com.au

Application (Wholesale) | Trust & Companies

Perennial Microcap Resources Trust
Perennial Future of Healthcare Fund

WHO SHOULD COMPLETE THIS FORM?

This application form is for domestic and foreign companies investing on their own behalf, and individuals, domestic and foreign companies investing in their capacity as trustee of a trust.
If you are a self-managed super fund (SMSF) please use the stand alone application form for SMSF.

HOW TO COMPLETE THIS FORM

Step 1	Before submitting this form, please read the Information Memorandum (IM), available here or by contacting us on 1300 730 032. Units in a trust will only be issued following acceptance of an application form issued with the relevant IM, with all required documents attached. Please print, use black pen and write in BLOCK letters. If you make an error do not use correction fluid, instead, cross out your error and initial your changes. **Note**: Please ensure all fields are completed including those in section A and B.
Step 2	**For identification and verification purposes please complete the following sections in accordance with your investment type.** If you are: • a regulated trust, complete sections 1, 2 and 3 (where applicable) • a regulated custodian, complete sections 1, 2 and 3 • an unregulated trust, complete sections 1, 2, 3 (where applicable) and 4 • a company acting on your own behalf, please complete section 3 and 4 (where applicable) • all investors must complete sections A to B and 13. Review the instructions in sections 1 to 4 to determine if you need to complete those sections
Step 3	Tell us your foreign tax status Please complete the Global Tax Reporting (FATCA/CRS) information in **section 13.**
Step 4	**Sign and send your documents to the below address.** Please ensure you sign **section 15** of the form in accordance with the instructions provided. You can return your forms by email or by post to: Perennial Trusts Registry Services GPO Box 804 Melbourne VIC 3001 perennial.transactions@unitregistry.com.au
Step 5	**Make your payment** Please refer to **section 4** and **5** of the application form and follow the instructions on how to pay the application amount. Your application cannot be processed until all relevant identification documents and cleared funds are received.

IMPORTANT INFORMATION

- Please ensure all fields are completed. If you do not complete all relevant sections your application may be rejected and returned to you for completion, resulting in a delay in processing your application.
- If you have any questions as you complete this form, please refer to the FAQs of this form, or contact us on 1300 730 032.

Section A: Investor details

What is the full legal name of the entity that will hold title to the units?

Full name of account designation

If you are an existing investor, please provide your account number ☐☐☐☐☐☐☐☐☐

☐ I/We confirm there are no changes to our identification documents previously provided and that these remain current and valid.

☐ I/We confirm there are no changes to the information in our previous application provided and that it remains current and valid.

1. TRUST

Please complete this section if you are:

- An individual acting in your capacity as trustee of a trust, or
- A company acting in your capacity as a trustee of a trust.

For guidance about when you may be acting as a trustee and for whom, please refer to the FAQs at the back of this form.

1.1 Trust details

Full name of trust. If the trust for which you act as a trustee does not have a name, please insert N/A

Type of trust

Business name (if any) of the trustee of the trust

Country in which the trust was established

Nature of business

1.2 Type of trust

1.2.1 Custodian

☐ No- go to 1.2.2.

☐ Yes - please complete the questions below

a.	Do you provide a custodial or depository service of the kind described in item 46 of table 1 in subsection 6(2) of the AML/CTF Act 2006 (Cth)? (ie to the underlying investor not your related body corporate)	☐	☐
b.	Do you hold an AFSL or are you exempt from the requirement to hold such license? If **Yes**, AFSL Number or specify the grounds for exemption	☐	☐
c.	Are you enrolled as a reporting entity with AUSTRAC, or do you satisfy one of the 'geographical link' tests in subsection 6(6) of the Anti-Money Laundering and Counter-Terrorism Financing Act (AML/CTF Act)?	☐	☐
d.	Have you carried out all applicable customer identification procedures (ACIP) and ongoing customer due diligence (OCDD) requirements in accordance with chapter 15 of the AML/CTF Rules in relation to your underlying customers? (including where you have relied on a member of your designated business group or an Authorised representative to perform the ACIP and OCDD)	☐	☐

If you have answered **Yes** to all questions in **1.2.1,** go to **section 2.** If not, please complete **1.2.2**.

Regulated trust

1.2.2 Registered MIS - is the trust for which you are the trustee a registered managed investment scheme?

☐ No - go to **1.2.3**

☐ Yes - please tell us the ARSN, then go to section 2.

1.2.3 Unregistered MIS - unregistered managed investment scheme (where the scheme is not registered by ASIC; has only wholesale clients and does not make small scale offering to which section 1012E of the Corporations Act applies)

☐ No - go to **1.2.4**

☐ Yes - please provide the ABN for the unregistered managed investment scheme, then go to 1.4.

Trust ABN or registration/licence number

1.2.4 Government superannuation fund - is the trust for which you are the trustee a government superannuation fund established by legislation?

☐ No - go to **1.2.5**

☐ Yes - please tell us the name of the Act that establishes the fund, then go to 1.4.

1.2.5 Other regulated trust (a trust registered and subject to the regulatory oversight of a commonwealth statutory regulator in relation to its activities as a trust)

Note: This includes registered charities with the ACNC**,** superannuation funds, approved deposit funds, pooled superannuation trusts, public sector superannuation schemes (within the meaning of the Superannuation Industry *(Supervision) Act 1993 (Cth)*). If you are an SMSF, please use the stand alone application form for SMSF.

☐ No - go to **1.3**

☐ Yes - please provide the details below, then go to **section 2**.

Provide name of regulator (eg ASIC, APRA, ATO & ACNC)

Provide the trust's ABN or registration/licensing details

1.3 Unregulated trusts

All other unregulated trusts must complete this section. This includes family trusts, testamentary trusts, discretionary trusts, other unit trusts, deceased estates and unregistered charitable trusts, along with nominee and sub-custodian entities that do not qualify as a custodian under **1.2.1**.

Note: You do not have to complete this section if you are a regulated trust.

Trust ABN (if any)

Trust TFN (if any)

Now go to **1.3.1.**

1.3.1 **Beneficiary details** (class of beneficiaries)

Do the terms of the trust describe the beneficiaries by reference to members of a class?

☐ No - please go to **1.3.2**

☐ Yes - please provide details of the class to which the beneficiaries belong (e.g. family members, unitholders, un-named charities). Then go to Settlor details **1.3.3**.

For a nominee or sub-custodian

The **beneficiary** is the person or entity for whom the applicant holds its interests in the trust. This may be specified in the trust or relationship agreement between the applicant and the person or entity that appointed the applicant as nominee/sub-custodian

1.3.2 **Beneficiary details** (specified beneficiaries)

Please specify each beneficiary below (using the applicable section for individuals or companies). If there are more beneficiaries than there is space for below, please complete the details in a separate sheet and attach to this application form.

Individual beneficiary 1

Title | Given name(s) | Surname

Individual beneficiary 2

Title | Given name(s) | Surname

Individual beneficiary 3

Title | Given name(s) | Surname

Individual beneficiary 4

Title | Given name(s) | Surname

Corporate Beneficiary 1

Company name | ACN

Corporate Beneficiary 2

Company name | ACN

Corporate Beneficiary 3

Company name | ACN

Corporate Beneficiary 4

Company name | ACN

Now go to **1.3.3**.

1.3.3 Settlor details

The **settlor** may be the person or entity that provided the applicant with funds to make the investment and may be specified in the trust or relationship agreement. If not, the settlor may be the person or entity that appointed the applicant as nominee or sub-custodian.

Please provide the name of the settlor of the trust (unless they are deceased or the material asset contribution to the trust by the settlor at the time the trust was established was less than $10,000).

Title | Given name(s) | Surname

Related body corporate

Note: You do not have to complete this section if you are a regulated trust.

1.4 Trust verification procedures

1.4.1 Did you answer yes to all of the questions in 1.2.1 or any of the questions in 1.2.2 - 1.2.5?

☐ No - please go to **1.4.3**

☐ Yes - please go to **1.4.2**.

1.4.2 Verification procedure for regulated trusts

Please provide a copy of the document(s) as set out below.

For trustees of unregistered managed investment scheme which only has wholesale clients and does not make small scale offerings to which s1012e of the Corporations Act applies (you answered yes **1.2.3**)	
A letter confirming these details from an external lawyer or accountant	☐
The relevant offer document for the scheme in english	☐
For regulated Government superannuation funds (you answered yes **1.2.4**)	
An extract of the establishing legislation, sourced from a government website.	☐

Now go to **section 2.**

1.4.3 Verification procedure for non-regulated trusts

Trust deed A certified copy of the trust deed/will or if not reasonably available a certified extract * of the trust deed that includes the name of the trust, trustees, and settlor(s) where applicable; or	☐
A letter from an accountant or solicitor verifying the name, existence of the trust and the name of the settlor(s) where applicable	☐

Letter of compliance for nominees and sub-custodians

If you have relied on the ACIP and OCDD performed by a member of your designated business group in respect to the underlying investor, please attach a signed AML/CTF compliance letter from the entity that has appointed you ☐

*Please see the FAQs at the back of this form for the meaning of certified copy and certified extract.

Now go to **section 2.**

2. TRUSTEE DETAILS

For **Australian regulated trusts**, identification information is required for only **ONE** of the trustees, even if the trust has multiple trustees.

For **unregulated trusts**, please provide:

- Identification information for **ALL** trustees. If there are multiple Trustees, complete **section 2** on another application form and attach it to the main application form.
- If you are an individual trustee, in respect of **ONE** trustee complete **section 4.b and 5**
- If you are a corporate trustee, in respect of **ONE** trustee complete **section 3 and 4**.

2.1 Type of trustee

☐ The trustees are all individuals - go to **2.2**.

☐ The trustees are all companies - go to **2.3**.

2.2 Individual trustee(s) details

Individual trustee 1

Title | Given name(s) | Surname

Date of birth (DD/MM/YYYY) ☐☐/☐☐/☐☐☐☐ Occupation

Residential address - (A PO Box/RMB/Locked Bag is not acceptable)

Unit | Street number | Street name

Suburb | State | Postcode | Country

Contact details

Home number (including country and area code) | Mobile number (including country code)

Email (default address for all investor correspondence)

Individual trustee 2

Title | Given name(s) | Surname

Date of birth (DD/MM/YYYY) ☐☐/☐☐/☐☐☐☐ Occupation

Residential address - (A PO Box/RMB/Locked Bag is not acceptable)

Unit | Street number | Street name

Suburb | State | Postcode | Country

Contact details

Home number (including country and area code) | Mobile number (including country code)

Email

All correspondence will be sent to the email address provided by **Individual trustee 1**.
If you wish to receive correspondence directly to your email address,please check this box ☐

2.3 Corporate trustee details

Corporate trustee 1

Company name | ACN

Nature of business

Registered office address - (A PO Box/RMB/Locked Bag is not acceptable)

Property/building name (if applicable)

Unit | Street number | Street name

Suburb | State | Postcode | Country

Corporate trustee 2

Company name | ACN

Nature of business

Registered office address - (A PO Box/RMB/Locked Bag is not acceptable)

Property/building name (if applicable)

Unit | Street number | Street name

Suburb | State | Postcode | Country

Now go to **section 3**.

3. COMPANY DETAILS

Please complete this section if you are:

- A company investing on your own behalf, or
- A corporate trustee.

Full legal name of company as registered by ASIC

ACN

Nature of business

Do you have an authorised signatories list (ASL)? ☐ No ☐ Yes - For the ASL to be valid, please provide all the requirements below

A certified copy of the ASL with the full name, position and signature of each authorised representative	☐
A certified copy of the authorising document (e.g. Power of Attorney)	☐
Please tick to confirm the authorising document or Power of Attorney is still valid and it has not been revoked	☐

Do you have a verifying officer? ☐ No ☐ Yes - Please provide all of the following

Full name of verifying officer

Date of birth (DD/MM/YY) ☐☐/☐☐/☐☐☐☐

Verifying officer residential address

☐ certified copy of your ID (see **section 5**)

☐ letter of appointment in company's letterhead signed by a Director/Secretary/ Trustee/ Partner or other person authorised to sign on behalf of the Customer

I confirm I have:

- Identified the authorised representatives or signatories of the above customer in accordance with requirements of the Anti-Money Laundering and Counter-Terrorism Financing (AML/CTF) Act and Rules and have provided with this form the full name and signature of each authorised representative or signatory (ASL).
- collected the following details from each authorised representative or signatory:
  - o full name of authorised representative/signatory
  - o title of the position/role held by the authorised representative/signatory with the customer
  - o a copy of the authorised representative/signatory's signature; and
  - o evidence of the authorised representative/signatory's authorisation to act on behalf of the customer
- made a record of the above details for each authorised representative/signatory which will be retained by the customer.

Signature of Verifying Officer

Date (DD/MM/YY)

☐☐/☐☐/☐☐☐☐

If you are an Australian company, go to 3.1.

If you are a foreign company, go to 3.2.

3.1 Australian company

Registered office address - (A PO Box/RMB/Locked Bag is not acceptable)

Property/building name (if applicable)

Unit | Street number | Street name

Suburb | State | Postcode | Country

Principal place of business address (if different to registered office address) - (A PO Box/RMB/Locked Bag is not acceptable)

Property/building name (if applicable)

Unit | Street number | Street name

Suburb | State | Postcode | Country

Postal address (if different to above) - (A PO Box/RMB/Locked Bag is not acceptable)

Unit | Street number | Street name

Suburb | State | Postcode | Country

ACN | ABN

Contact details (for company or contact person)

Name | Email

Business number (include country and area code) | Mobile number (include country code)

Now go to **3.3.**

3.2 Foreign company

Country of formation

Registered in Australia? ☐ No ☐ Yes - please provide below the ARBN

Registered in country of formation? ☐ No ☐ Yes - Name of foreign registration body and identification number (if any)

If you are a foreign company registered in Australia, please provide your principal place of business in Australia, or the full name and address of your Australian authorised representative.

If you are not registered in Australia, please provide either the full address of the company as registered by the foreign registration body **or** the principal place of business in the country of formation.

A PO Box/RMB/Locked Bag is not acceptable.

Unit | Street number | Street name

Suburb | State | Postcode | Country (if not Australia)

Postal address (if different to above) - (A PO Box/RMB/Locked Bag is not acceptable)

Unit | Street number | Street name

Suburb | State | Postcode | Country (if not Australia)

Contact details (for company or contact person)

Name | Email

Business number (include country and area code) | Mobile number (include country code)

3.3 Type of company

Are you a public company or a private/proprietary company?

☐ Private/proprietary company – please go to **3.4**

☐ Public company – please go to **3.5**.

3.4 Private/Proprietary company

Please complete the director details below if you are an Australian proprietary company or a foreign private company. Do not complete for public companies.

Directors details

How many directors are there? ☐

Please provide below the full name of all the directors. If there are more than four directors, please complete the details on a separate sheet and attach to this application form.

Director 1

Title | Given name(s) | Surname

Director 2

Title | Given name(s) | Surname

Director 3

Title | Given name(s) | Surname

Director 4

Title | Given name(s) | Surname

Now go to **3.6**.

3.5 Public company

Are you an Australian listed company?

☐ No – please go to **3.6** ☐ Yes – please provide name of the market/exchange on which the company is listed

Listed company name

Market/exchange

Now go to **3.8.**

3.6 Majority owned subsidiary of an Australian public listed company

Are you a majority-owned subsidiary of an Australian publicly listed company?

☐ No – please go to **3.7**

☐ Yes – please provide name of the parent listed company and the market/exchange on which the company is listed

Listed company name

Market/exchange

Now go to **3.8**.

3.7 Regulated company

This only includes companies that are licensed by an Australian Commonwealth, State or Territory statutory regulator and are subject to regulatory oversight for example, Australian Financial Services Licensees (AFSL), Australian Credit Licensees (ACL) and Registrable Superannuation Entity (RSE) Licensees.

Are you a regulated company?

☐ No – please go to **3.8** ☐ Yes – please provide details of the regulator and licence number below, then go to **Section 6**

Regulator

Licence number

Now go to **3.8**.

3.8 Verification procedures for regulated companies

Please provide a copy of one or more of the following:	
ASIC or Foreign Company extract	☐
Company Annual Statement	☐
Certified Company Share Structure	
A public document issued by the relevant company	☐

4. BENEFICIAL OWNER

4A Beneficial owner of a company (including a company acting in the capacity of trustee)

You must complete this section, unless you meet the exemption criteria, you are only exempt from completing **Section 4** if you answer yes to any one of the following:

- **3.5** (you are an Australian domestic listed company)
- **3.6** (you are a majority-owned subsidiary of an Australian listed company)
- **3.7** (you are a company that is licensed and subject to the regulatory oversight of a Commonwealth, State or Territory statutory regulator).

OR

☐ You are a foreign listed company

OR

☐ You are a wholly owned subsidiary of a listed company in a financial market that is subject to disclosure requirements that ensure transparency of beneficial ownership.

A beneficial owner is an individual who ultimately owns (directly or indirectly) 25% or more of the customer, or controls (directly or indirectly) the customer (see FAQs).

If you cannot identify any beneficial owners, please go to the fallback procedure at **4.2**.

Please provide details of your beneficial owner(s) below (see FAQs for guidance).

4.1 Beneficial owner(s) details

Beneficial owner 1

Title | Given name(s) | Surname

Residential address - (A PO Box/RMB/Locked Bag is not acceptable)

Date of birth (DD/MM/YYYY) ☐☐/☐☐/☐☐☐☐ Occupation

Beneficial owner 2

Title | Given name(s) | Surname

Residential address - (A PO Box/RMB/Locked Bag is not acceptable)

Date of birth (DD/MM/YYYY) ☐☐/☐☐/☐☐☐☐ Occupation

Beneficial owner 3

Title | Given name(s) | Surname

Residential address - (A PO Box/RMB/Locked Bag is not acceptable)

Date of birth (DD/MM/YYYY) ☐☐/☐☐/☐☐☐☐ Occupation

Beneficial owner 4

Title | Given name(s) | Surname

Residential address - (A PO Box/RMB/Locked Bag is not acceptable)

Date of birth (DD/MM/YYYY) / / | Occupation

4.2 Fallback procedure

If you are a company (investing on your behalf) or corporate trustee and cannot identify any beneficial owner owning 25% or more, please complete **4.2.1**.

4.2.1 Senior managing official

Please provide the details of the senior managing official (or equivalent) (please see FAQs for the meaning of 'senior managing official')

Title | Given name(s) | Surname

Date of birth (DD/MM/YYYY) / /

Company Title

Residential address - (A PO Box/RMB/Locked Bag is not acceptable)

Unit | Street number | Street name

Suburb | State | Postcode | Country

4B BENEFICIAL OWNER OF THE TRUST

You must complete this section if you are an unregulated trust. The beneficial owner of a trust is an individual who controls (directly or indirectly) the operations of the trust and has power to appoint or remove the trustee(s) of the trust.

You are exempt from completing this section if:

- You are a custodian and the beneficial owner is the underlying investor(s). If not, complete **4.2.2**.

4.2.2 Beneficial owner of the trust (individual with power to appoint or remove trustees)

Please provide the details of the individual who directly or indirectly controls the Trust. If this is confirmed to be the same individual as the trustee, he/she must be listed again below to confirm the trust's beneficial owner.

Title | Given name(s) | Surname

Date of birth (DD/MM/YYYY) / /

Company title

Residential address - (A PO Box/RMB/Locked Bag is not acceptable)

Unit	Street number	Street name

Suburb	State	Postcode	Country

Please follow the verification procedure in **section 5**, unless the individual is already providing the ID as a trustee or beneficial owner of the corporate trustee.

5. VERIFICATION PROCEDURE FOR INDIVIDUAL TRUSTEE, BENEFICIAL OWNER(S), SENIOR MANAGING OFFICIAL AND APPOINTOR

Please complete the below verification procedure in respect of each individual identified in **section 4**. You may also need to complete the below in respect of an individual trustee if directed to do so under **2.2**. If you cannot meet the requirements of **option A**, please follow the instructions in **option B**.

OPTION A

Provide a certified copy* of one of the following:

Current Australian Driver's Licence containing a photo of the person (scan the front and back)	☐
Current Australian Passport or an Australian Passport that has expired within the preceding 2 years	☐
Current Australian State or Territory Government Identity Card showing the person's date of birth, photo and signature	☐
Current Foreign Government Identity Card showing the person's date of birth, photo and signature**	☐
Current Foreign Driver's Licence showing the person's date of birth, photo and signature**	☐
Current Foreign Passport showing the person's date of birth, photo and signature**	☐

OPTION B

If you can't provide any document from option A, then please provide a certified copy* of one document from group 1 and one document from group 2.

GROUP 1

Birth Certificate or Birth Extract issued by an Australian State or Territory	☐
Australian Government issued Citizenship Certificate	☐
Current Concession or Health Care Card issued by Centrelink (scan the front and back)	☐

GROUP 2

Commonwealth, State or Territory Government Notice within the preceding 12 months and recording the provision of financial benefits	☐
Australian Taxation Office Notice within the preceding 12 months and recording the debt payable to or by the individual by or to (respectively) the ATO	☐
Local Government or Utilities Provider Statement within the preceding 3 months and recording the provision of services	☐

If the investor is below the age of 18, please contact us on 1300 730 032

*Please see the FAQs at the end of this form for the meaning of certified copy.

**If the document is written in a language other than English, it must be accompanied by an English translation prepared by an accredited translator.

6. INVESTMENT DETAILS & DISTRIBUTION INSTRUCTIONS

Trust name	APIR	Trust Minimum AUD$	Investment amount AUD$	Distribution option (indicate (X) one option per trust)	
				Pay to my bank a/c	Reinvest
Perennial Microcap Resources Trust	WPC0911AU	25,000		☐	☐
Perennial Future of Healthcare Fund	AUS9268AU	20,000		☐	☐

Note: We will only accept applications in their base currency. The minimum investment is $20,000 - $25,000 (please refer to the IM of the product you are making your investment). However, we may waive or vary the investment minimums. Please nominate one distribution option. If no selection is made, distributions will be automatically re-invested.

Please indicate the source and origin of funds being invested

Savings	☐
Investment	☐
Superannuation contributions	☐
Commission	☐
Donation/gift	☐
Inheritance	☐
Normal course of business	☐
Sale of assets (e.g. shares, property)	☐
Other	☐

7. PAYMENT OF APPLICATION AMOUNT

Select your payment method and complete the relevant section if applicable. All payments must be made in AUD.

☐ **EFT** ☐ **BPAY®**

EFT	Electronic Funds Transfer
Account name:	Perennial Investment Management Limited - Applications Account
BSB:	342 - 011
Account number:	691649-002
Your reference:	[please use the name of the investor and investor number]

BPAY® – Telephone & 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.

Trust	BPAY details
[Trust name]	Biller code [insert] Reference number [account 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

Trust name	BPAY® details
Perennial Microcap Resources Trust	Biller code: 216895 Reference number: Investor number
Perennial Future of Healthcare Fund	Biller code: 445031 Reference number: Investor number

8. FINANCIAL INSTITUTION ACCOUNT DETAILS

Australian bank account details

Please provide your bank account details if you have selected to take your distribution in cash or wish to provide these details for future redemptions. We will only pay cash proceeds to a bank account in the name(s) of the investor(s). We will not make any payments into third party bank accounts.

Financial institution name

Branch name

Account name

BSB number

Account number

Foreign bank account details

Financial institution name

Financial institution address

Account number

Account name

SWIFT/BIC

ABA/FED (US)

IBAN (Europe)

9. WHOLESALE INVESTOR CERTIFICATION

Investment in the trust is restricted to wholesale investors. Please tick the appropriate box and provide the requested evidence.

☐ I am investing $500,000 or more in units

☐ I am currently certified by an accountant as a wholesale investor (provide a copy of the current accountant's certification - i.e. less than two years old)

☐ I am a professional investor - e.g. an Australian financial services licensee; an APRA regulated body; or control $10m or more in assets (provide evidence of meeting one of these requirements)

10. COMMUNICATION

Automatic online account access

Online access enables you to view details of your investments (account balance, investment details and account statements). We will send you the necessary registration details by post once your application is processed.

Annual report options

The annual financial statements of the trust are available free on our website. If you would like to receive a copy by email, please indicate below.

☐ Yes

Marketing materials

☐ You may receive information from us via email relating to market commentary, services or information that may be of interest to you. By providing us with your contact details you consent to being contact by these methods for these purposes. Please indicate if you do not wish to receive marketing information from us or any companies within our group.

11. FINANCIAL ADVISER DETAILS

Unless you check the box below to opt out of allowing your financial adviser access to information about your investment in the trust, copies of all documentation you receive in respect of your investments will be provided to your financial adviser.

☐ I do not want my financial adviser to receive any information in regard to my investment in the trust.

(If you have checked the box above you do not need to complete any further information in this Section).

Use this section to tell us about your financial adviser. If you change your financial adviser, it's important to let us know in a timely way. If you would like your financial adviser to receive copies of your statements by email, please enter their email address below.

Adviser email address

Operating your account

Do you want your financial adviser to be able to operate your account?

☐ No

☐ Yes- Please provide details below

In general, an appointed financial adviser can do everything you can do with your investment, except appoint another person to operate your account. It is important to tell us promptly if you no longer wish your financial adviser to operate your account, or if your financial adviser changes – We will keep accepting their instructions until you or your adviser inform us in writing that the appointment has terminated.

We may suspend or terminate their appointment for any reason considered reasonable, and may change the terms on which they operate your account.

You indemnify us from any loss you or we suffer as a result of the actions of your appointed financial adviser, and agree to ratify their actions if we ask.

Notice to financial adviser: by completing this section of the application form, you are confirming that you hold a current Australian Financial Services Licence (AFSL), or are otherwise authorised to advise on and arrange this product.

Details

AFSL holder name

AFSL number

Adviser name

Advisor code or Authorised representative number

ABN

Postal address (if different to above) - (A PO Box/RMB/Locked Bag is not acceptable

Property/building name

Unit

Street number

Street name

Suburb

State

Postcode

Country

Phone

Mobile

Contact details

Business number (include country and area code)

Mobile number (include country code)

Adviser signature

12. AUTHORISED REPRESENTATIVE OF INVESTOR

Please complete this section if you wish to appoint an individual or individuals to act on your behalf in relation to your investment in the trust. If you have appointed an entity as your authorised representative, please contact us on 1300 730 032 to obtain the relevant KYC form.

12.1 Agent's details

Agent 1

Title

Given name(s)

Surname

Agent's phone number

Email

Agent's signature

Agent 2

Title

Given name(s)

Surname

Agent's phone number

Email

Agent's signature

If you wish to appoint more than two agent's please complete the details on a separate sheet and attach to this application form.

12.2 How authorised representatives may act in relation to the account?

Please tick as applicable

Each authorised representative listed above may provide instructions in relation to the investment individually without the consent of the other	☐
All authorised representatives must act jointly to provide instructions in relation to the investment	☐
Other arrangement – please provide details below	☐

12.3 How authorised representatives may act in relation to the account?

For each authorised representative, please provide verification documents in accordance with the verification procedure in **section 5**. In addition, please provide evidence of each authorised representative's authority to act on behalf of the investor. Please tick the document(s) you have provided.

Verification documents - mandatory

A certified copy of ID as per **section 2**	☐

Authorised representative's authority - one of the following (not required for a financial adviser listed in **Section 11**)

Certified copy of the authorising document (e.g. POA); or	☐
A certified copy of a guardianship order; or	☐
Other arrangement – please provide details	☐

☐ I confirm that the document authorising each authorised representative is still valid and has not been revoked.

13. TAX INFORMATION - GLOBAL TAX REPORTING REQUIREMENTS (CRS/FATCA)

Why you need to complete this section?

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 www.ato.gov.au.

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

13.1 Regulated Superannuation Funds

Are you a regulated superannuation fund?

☐ I am the trustee of a regulated superannuation fund. Now go to Section 14.

☐ I am NOT the trustee of a regulated superannuation fund. Now go to 13.2

13.2 Companies and Non-Superannuation Trusts

13.2.1 Are you a specified US person for tax purposes?

☐ No

☐ Yes - please tell us your **TIN**

Are you an Australian resident for tax purposes?

☐ No

☐ Yes - please tell us your **TFN**

HELP

No TIN? Reasons we accept are:

Reason A: The country of tax residency does not issue TINs to its tax residents

Reason B: The entity/individual has not been issued with a TIN

Reason C: The country of tax residency does not require the TIN to be disclosed

13.2.2 Are you a resident of any other country for tax purposes? Other than the US or Australia?

☐ No

☐ Yes - please tell us which ones, using the following table

HELP

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.

If you are unsure, ask someone who knows, usually your accountant.

	Country or jurisdiction of tax residency	TIN	**No TIN? Which reason?** If **Reason B** has been selected please provide an explanation. See above **HELP** box.
1			
2			
3			
4			

Please tell us your explanation to selection of Reason B

13.2.3 Are you a financial institution?

Be careful - financial Institution is broadly defined - see **HELP** box

☐ No

☐ Yes - please tell us your **GIIN*** - see **HELP** box.

HELP

What is a Financial Institution?
For further details about a Financial Institution, please refer to the ATO's AEOI Guidance - https://www.ato.gov.au/General/International-tax-agreements/In-detail/International-arrangements/Automatic-exchange-of-information---CRS-and-FATCA/#BK_2Financialinstitutions

HELP

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).

For further details about the GIIN please refer to the IRS GIIN Composition Information - Please refer to https://www.irs.gov/businesses/corporations/fatca-registration-and-ffi-list-giin-composition-information.

Where to now?

I ticked **yes** and completed my **GIIN** - go to **13.2.4**.

I ticked **yes** and I am a Managed Investment Entity in a non-CRS participating jurisdiction - If no, proceed to question **13.2.6**.

I ticked **yes** but did not write a GIIN – please tick below why you did not write a **GIIN** - then go to **13.2.4**.

Exempted financial institution	☐
Deemed compliant financial institution	☐
Exempt beneficial owner	☐
Non-participating financial institution	☐
Non-reporting IGA financial institution	☐
Sponsored financial institution - their GIIN is	☐
Other	☐

13.2.4 Are you a public company listed on a stock exchange or a related entity of a publicly listed company or a governmental entity?

☐ No

☐ Yes - then go to **section 14** and **15**.

13.2.5 Are you active or passive?

☐ I am an 'active' non financial entity. Please tell us what type of active NFE you are below - then go to **section 14** and **15**.

☐ I am a 'passive' non financial entity.

HELP

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.

☐ 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.

☐ Other (please provide an explanation)

If you are unsure whether you are an active or passive NFE, please get advice.

13.2.6 Do you have any controlling persons who are resident of another country or jurisdiction of tax residency for tax purposes?

☐ I am passive, and **yes** I do have controlling persons who are resident of a country or jurisdiction other than Australia for tax purposes

Complete the **controlling persons details** in the table below - then go to **section 14** and **15**. 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 a country or jurisdiction other than Australia for tax purposes. It would be unusual to think of no-one. Please read the **HELP** box. If you are sure - go to **section 14** and **15**.

HELP

Controlling persons

Controlling persons are natural persons who exercise control over an entity.

For trusts, the settlor(s), the trustee(s), the protector(s) (if any), and the beneficiary(ies) or class(es) of beneficiaries, must always be treated as Controlling Persons of a trust, regardless of whether or not any of them exercises control over the trust for FATCA/CRS purposes.

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.

Controlling person 1

Title | Given name(s) | Surname

Date of birth (DD/MM/YYYY) | City and country of birth

Residential address

Unit | Street number | Street name

Suburb | State | Postcode | Country

	Country or jurisdiction of tax residency	**TIN**	**No TIN? Which reason?** If **Reason B** has been selected please provide an explanation. See **13.1.2 HELP** box.
1			
2			
3			
4			

Controlling person 2

Title | Given name(s) | Surname

Date of birth (DD/MM/YYYY) | City and country of birth

Residential address

Unit | Street number | Street name

Suburb | State | Postcode | Country

	Country or jurisdiction of tax residency	**TIN**	**No TIN? Which reason?** If **Reason B** has been selected please provide an explanation. See **13.1.2 HELP** box.
1			
2			
3			
4			

Controlling person 3

Title | Given name(s) | Surname

Date of birth (DD/MM/YYYY) | City and country of birth

Residential address

Unit | Street number | Street name

Suburb | State | Postcode | Country

	Country or jurisdiction of tax residency	TIN	**No TIN? Which reason?** If **Reason B** has been selected please provide an explanation. See **13.1.2 HELP** box.
1			
2			
3			
4			

Controlling person 4

Title | Given name(s) | Surname

Date of birth (DD/MM/YYYY) | City and country of birth

Residential address

Unit | Street number | Street name

Suburb | State | Postcode | Country

	Country or jurisdiction of tax residency	TIN	**No TIN? Which reason?** If **Reason B** has been selected please provide an explanation. See **13.1.2 HELP** box.
1			
2			
3			
4			

14. DECLARATIONS & ACKNOWLEDGMENTS

Please read the declarations below before signing this form. The required signature(s) are detailed at the bottom of this form. When you apply to invest, you (the applicant) are telling us that I/we:

- declare that I/we have read and understood the IM of the trust and agree to be bound by its terms and conditions as they apply to the trust and agree to be bound by the constitution of the trust (both as amended from time to time).
- declare that I/we am/are not bankrupt or a minor, and I/we am/are authorised to sign this form.
- agree to the collection, disclosure and use of my/our personal information in accordance with Perennial Investment Management Limited's Privacy Policy, the Privacy section of the IM or otherwise as required by law.
- consent to my/our information being disclosed to the related entities of Perennial Investment Management Limitedfor the purposes of administration of the trust, direct marketing of potential investment opportunities (subject to my/our right of opt-out at any time), product management and development, and for other reasonable purposes.
- agree to the verification of my/our identity and provide any further information or documentation required by Perennial Investment Management Limited to comply with its obligations under laws relating to anti-money laundering and counter-terrorism or any other law, including Australian and overseas taxation legislation.
- represent and covenant that the funds I/we are investing are not the proceeds of crime or money laundering, nor connected with the financing of terrorism and are not in breach of laws relating to anti-money laundering and counter-terrorism, in Australia or elsewhere.
- agree that Perennial Investment Management Limited may in its absolute discretion determine not to issue units to me/us, may cancel any units that have been issued to me/us.
- understand that Perennial Investment Management Limited needs time to determine whether to accept identification and verification documents (and to consider whether additional information is required) and acknowledge that even if all the information requested has been provided and received prior to the cut- off time, the processing of the application may be postponed or delayed pending acceptance in which case the application will be processed at the unit price applicable for the Business Day on which all information has been received and verified.
- acknowledge that none of the Custodian, Perennial Investment Management Limited nor any of their subsidiaries, directors, associates or any other person guarantee the repayment of capital or the performance of the trust and that an investment in the trust is subject to risks including possible delays in repayment of capital, possible loss of capital invested and possible loss of income.
- declare that I/we have received this IM personally, or a print-out of it, accompanied by or attached to this application form before signing the application form.
- declare that all information provided in the application form or any other information provided in support of the application is true and correct and undertake to inform Perennial Investment Management Limited of any changes to the information supplied as and when they occur.
- declare that if I/we are signing under a power of attorney, the power of attorney has not been revoked.
- acknowledge that this IM does not constitute an offer in any jurisdiction in which, or to any person for whom, it would be unlawful to make the offer and I/we are in a jurisdiction in which the offer may be lawfully made.
- declare that I/we have the legal power to invest in the trust and by making this application. I/we will not contravene any law, regulation, authorisation or the relevant constitution or constituent documents of the investor
- acknowledge that if I/we use electronic instructions (online or email facility), I/we:
    - release, discharge and agree to indemnify Perennial Investment Management Limited and its agents, including the registrar and their respective officers from and against all losses, liabilities, actions, proceedings, accounts, claims and demands arising from instructions received under the facility;
    - agree that a payment made in accordance with the conditions of the facility shall be in complete satisfaction of all obligations to me/us for a payment, notwithstanding it was requested, made or received without my/our knowledge or authority.
- Declare that I am/we are a Wholesale, Sophisticated or Professional Investor (as defined in the Corporations Act 2001 (Cth);

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
- you declare that to the best of your knowledge and belief the information provided in the Global Tax Reporting section is true and correct
- you agree to notify Perennial Investment Management Limited of any changes to your tax residency or that of any beneficial owners or controlling person.

15. SIGNATURE(S)

For individual trustees, all trustees to sign. For companies or corporate trustee, the signature(s) of either a sole director, or two directors, or one director and the company secretary.

Signature 1

Signature

Date (DD/MM/YY) ☐☐/☐☐/☐☐☐☐

Full name

Capacity	
Individual trustee 1	☐
Director	☐
Company Secretary	☐
Agent	☐

Signature 2

Signature

Date (DD/MM/YY) ☐☐/☐☐/☐☐☐☐

Full name

Capacity	
Individual trustee 2	☐
Director	☐
Company Secretary	☐
Agent	☐

Signature 3

Signature

Date (DD/MM/YY) ☐☐/☐☐/☐☐☐☐

Full name

Capacity	
Individual trustee 3	☐
Director	☐
Company Secretary	☐
Agent	☐

Signature 4

Signature

Date (DD/MM/YY) ☐☐/☐☐/☐☐☐☐

Full name

Capacity	
Individual trustee 4	☐
Director	☐
Company Secretary	☐
Agent	☐

If signed under Power of Attorney

Attorneys must attach a certified copy of the power of attorney. The attorney hereby certifies that he/she has not received notice of any limitation or revocation of his/her power of attorney and is also authorised to sign this form.

FAQs

What should a trust deed extract include?	An extract of the trust deed should include the following information: • the full name (if any) of the trust; • the full name of the trustee(s), and • the full name of the settlor of the trust.
Disclosure Certificates for Trusts	The AML Rules allow a reporting entity to request that a customer provide a 'disclosure certificate' to verify KYC information about a trust, but only in certain circumstances, including • the reporting entity has determined that the information cannot otherwise be reasonably obtained or verified • the information to be provided or verified is reasonably required under the AML/CTF program applying to the reporting entity • the reporting entity has applied the relevant procedures and requirements in its AML/CTF program, but has been unable to obtain or verify the information. The disclosure certificate must: • contain the the full name of the trustee(s) and the full name of the entity that appointed the trustee(s) (if this information is already disclosed in the application form you do not need to repeat it in the disclosure certificate) • contain the full name of the appropriate officer • contain certification by the appropriate officer that the information contained in the disclosure certificate is true, accurate and complete; to the best of their knowledge and belief • contain the date of certification by the appropriate officer • The nominee has been duly appointed and the purpose for the appointment as the nominee. Appropriate officers include any authorised signatory, director or company secretary. In these circumstances we will accept a disclosure certificate on the letterhead of the parent company appointing the nominee or sub-custodian, stating the full name of the appointed entity and the capacity in which they have been appointed. That may not necessarily be formally in a trust capacity, but in a capacity which gives rise to a trustee relationship.
Who is a senior managing official?	A senior managing official is 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.
Who is a 'beneficial owner'?	A beneficial owner is an individual who ultimately owns (directly or indirectly) 25% or more of the customer, or controls (directly or indirectly) the Customer. Control includes control as a result of, or by means of, trusts, 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 control through the capacity to determine decisions about financial and operating policies. Information that may assist you in determining your beneficial owner includes (as relevant): • a certificate of incorporation of a company with ASIC/and or an annual statement including the amendments submitted to ASIC • a trust deed • a partnership agreement • the constitution and/or certificate of information for an incorporated association, or • the constitution of a registered co-operative.
Determining the beneficial owner of a trust	A beneficial owner of a trust may include: • any individual shareholder who holds the legal title to 25% or more of the issued shares in the trustee; • directors of the trustee (if they own or control the trustee) • company secretary of the trustee (if they own or control the trustee), and/or • any other individual who has the power to appoint or remove the trustee as the trustee of the trust. For a nominee that has been appointed by a related body corporate to hold interests in the fund or trust, the nominee agreement may specify the beneficial owner. This may be (but is not necessarily) the person that appointed the nominee. For a foreign company making an investment as a custodian under a single trust with multiple beneficiaries, the trust document under which the custodian is appointed may specify the beneficial owner/s. For a foreign company making an investment acting as a custodian for multiple trusts with multiple underlying investors, each trust document with each underlying investor may specify the beneficial owner/s.

Guidance on types of trusts	You will be the trustee of a trust if you are an individual or a company that will hold interests in the fund or trust for another person or persons (known as the beneficiary). It is important to carefully consider who is the beneficiary of the trust for which you are the trustee, keeping in mind that the beneficiary may hold its interest on trust for someone else (i.e. there may be layers of trust relationships down to the underlying investor). Trustees may include: • **Trustees of a managed investment scheme:** Managed investment schemes are a type of trust. The trustee of a managed investment scheme is generally a company. If the managed investment scheme is registered with ASIC, the trustee is known as the responsible entity. • **Custodians or nominees**: These are companies that provide custodial or depository services. In the context of managed investment schemes, custodians or nominees may hold interests on trust for the responsible entity of the scheme. The responsible entity for the scheme then holds interests on trust for the investors in that scheme. • **Trustees of self - managed super funds:** SMSFs are a type of trust. The trustee of an SMSF may be a company or two to six individuals. If the trustee is a company, there can be one to six members (or beneficiaries) of the SMSF and each member of the SMSF must be a director of the company trustee. If the trustees are individuals, there can be two to six members (or beneficiaries) of the SMSF and each of those members must be a trustee. • **Trustees of retail super funds:** Retail super funds are a type of trust. The trustee of a retail super fund is a company. • **Trustees of family trusts:** The trustee of a family trust may be one ore more individuals or a company or other type of entity. The trustee holds money or property for the beneficiaries of the family trust. • **Trustees of charitable trusts:** Some charities are structured as trusts. Trustees of charitable trusts are commonly individuals (for example, a board of trustees) or a company. Other charities may be structured as companies or associations. • **Trustees of deceased estates and testamentary trusts:** An estate refers to all an individual's assets upon their death. When a person dies, their assets may be held in trust for distribution to the beneficiaries. These trusts may also be known as testamentary trusts. The trustee may be, for example, an executor, a solicitor or an accountant. Testamentary trusts are discretionary trusts established in wills, that allow the trustees of each trust to decide, from time to time, which of the nominated beneficiaries (if any) may receive the benefit of the distributions from that trust for any given period.
Where to find trust relationship details?	This will depend on the type of trust in respect of which you are acting as a trustee **For example**, some investors act as a nominee or sub-custodian for a related body corporate that acts as a custodian. In this scenario, the investor may look to the relationship agreement with the relevant related body corporate to find details of the trust relationship that may exist between the investor and the related body corporate. The person or entity that appoints a nominee to act as a trustee may be the related body corporate.
Translating documents by an accredited translator	In Australia an accredited translator means a professional translator accredited by the National Accreditation Authority for Translators and Interpreters (NAATI) at or above professional level. • NAATI (https://www.naati.com.au/) In an overseas country, an accredited translator is a professional translator accredited by a NAATI equivalent authority. For these, escalate to the AML compliance officer for assistance.
Getting your copies or extracts certified	Any document(s) requiring certification for verification purposes must be certified by an eligible person to be a true copy of the original document. Documents must be either certified on all pages or certified on the front page with a clear reference to the number of subsequent pages that are included.
Example of certification	I certify that this is a true and correct copy of the original document Signature of Certifier Name of Certifier Capacity of certifier – e.g. Justice of the Peace Date of certification (DD/MM/YYYY)

List of occupations that can certify (from the Statutory Declaration Regulations 2018)	• Architect • Chiropractor • Dentist • Financial adviser or financial planner • Legal practitioner • Medical practitioner • Midwife • Migration authorised representative registered under Division 3 of Part 3 of the Migration Act 1958 • Nurse • Occupational therapist • Optometrist • Patent attorney • Pharmacist • Physiotherapist • Psychologist • Trade marks attorney • Veterinary surgeon.
List of persons who can certify	• 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 Justice of the Peace • a notary public (for the purposes of the Statutory Declaration Regulations 2018) • a police officer • an authorised representative 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 Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955) • an officer with 2 or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 2018) • a finance company officer with 2 or more continuous years of service with one or more financial companies (for the purposes of the Statutory Declaration Regulations 2018) • 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 • 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.