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Application | Trusts & Companies

Perennial Better Future Trust
Perennial Value Australian Shares Trust
Perennial Value Microcap Opportunities Trust
Perennial Value Smaller Companies Trust
Perennial Value Shares For Income Trust
Perennial Value Shares Wholesale Trust
Perennial Strategic Natural Resources Trust

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 Product Disclosure Statement (PDS), Target Market Determination (TMD) and the Additional Information Booklet (AIB), available here or if you are unable to access the link or print the document, contact us

Units in a trust will only be issued following acceptance of an application form issued with the relevant PDS, with all required documents attached.

Please complete using the editable PDF, sign and print or, 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 sections 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)
- if you are investing under a margin loan please complete section C, and proceed
- all investors must complete **sections A** to **C** 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 12.

Step 4 Sign and send your documents to our Administrator

Please ensure you sign section 14 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 7** 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.

Perennial Investment Management Limited (PIML) ABN 13 108 747 637, AFSL 275101 is the Responsible Entity and issuer of this Application Form.

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 trust(s) you are investing in.

Consumer Attributes				
A. What is your primary investment objective? (select only one option)				
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 trust in your investment portfolio? (select only one option)				
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? (select only one option)				
Short term (less than 2 years) Medium term (more than 2 years) Long term (more than 8 years)	ars)			
D. What is your tolerance for risk / return? (select only one option) (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? (select only one option)				
Daily Weekly Monthly Quarterly Annually or longer				
F. Have you received advice prior to applying to invest in this trust(s)? (select only one option)				
Yes - I/We have received personal advice in relation to my investment in this trust (financial product advice provided to you by a person who has considered one or more of your investment objectives).				
No - I/We have not received personal advice in relation to my investment in this trust.				
Note: Acceptance of your application should not be taken as a representation or confirmation that an investment in the trust is, or is likely to be, consistent with your intentions, objectives and needs as indicated in your responses to these questions.				

Section B: 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 docume	ents previously provided and that these remain current and valid.				
I/We confirm there are no changes to the information in our pre	evious application provided and that it remains current and valid.				
Section C: Are you investing using funds borrowed under a margin	loan?				
No - go to section 1 Yes - please complete the	details below				
Name of margin lender	Name of borrower				
Borrower's TFN	Loan number				
If the gaves who will held level title to the write will be the begreener					
If the person who will hold legal title to the units will be the borrower of please complete this form as as per the borrower's investor type.	granting power or attorney to the margin lender or its nominee,				
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					
Nature of Business					
1.2 Type of trust					
1.2.1 Custodian					
No - go to 1.2.2 .					
Yes - please complete the questions below.					

		No	Yes
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)		
lf you	have answered Yes to all questions in 1.2.1 , go to section 2 . If not, please complete 1.2.2 .		
Reg	ulated 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.		
Now	go to section 2 .		
	Unregistered MIS - unregistered managed investment scheme (where the scheme is not registered by ASIC; has only ts and does not make small scale offering to which section 1012E of the Corporations Act applies)	wholesal	9
	No - go to 1.2.4		
	Yes - please provide the ABN for the unregistered managed investment scheme.		
Trust	ABN or registration/licence number		
Now	go to 1.4 , then section 2 .		
	Government superannuation fund - is the trust for which you are the trustee a government superannuation fund esta gislation?	blished	
	No - go to 1.2.5		
	Yes - please tell us the name of the Act that establishes the fund		
Now	go to 1.4 , then section 2 .		
	Other regulated trust (a trust registered and subject to the regulatory oversight of a Commonwealth statutory regulat activities as a trust)	or in rela	ion
pub	e: This includes registered charities with the ACNC, superannuation funds, approved deposit funds, pooled superannu olic sector superannuation schemes (within the meaning of the Superannuation Industry (Supervision) Act 1993 (Cth)). SF, 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 t	he Trust's ABN or registration/licensing details
If you answered NO to any of the questions in 1.2 , then go to	1.3.	
1.3 Unregulated trusts		
All other unregulated trusts must complete this section. The unregistered charitable trusts, nominee and sub-custodian		
Trust ABN (if any)	Trust TF	N (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. No - please go to 1.3.2 Yes - please provide details of the class to which the bar Then go to Settlor details 1.3.3.		e.g. family members, unitholders, un-named charities).
1.3.2 Beneficiary details (specified beneficiaries) Please specify each beneficiary below (using the applicable is space for below, please complete the details in a separate Individual beneficiary 1	section for individua	s or companies). If there are more beneficiaries than there
Title Given name(s)		Surname
Individual beneficiary 2		
Title Given name(s)		Surname
Individual beneficiary 3 Title Given name(s)		Surname
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 Benef	ciary 3			
Company name		ACN		
Corporate Benef	ciary 4			
Company name		ACN		
Now go to 1.3.3 .				
1.3.3 Settlor det	ails			
	y be the person or entity that provided the applicant agreement. If not, the settlor may be the person or e			
	e name of the settlor of the trust (unless they are de was established was less than \$10,000).	ceased or th	ne material asset contribution to the trust by the so	ettlor at
Title	Given name(s)		Surname	
Related body cor	porate			
	Note : You do not have to complete t	his section i	f you are a regulated trust.	
1.4 Trust verific	cation procedures			
1.4.1 Did you ans	ewer 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 - pleas	e 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.			
	inregistered managed investment scheme which on ch s1012e of the Corporations Act applies (you answ			
A letter confirm	ng these details from an external lawyer or account	ant		
The relevant off	er document for the scheme in English			
For regulated G	overnment superannuation funds (you answered yes	1.2.4)		
An extract of the establishing legislation, sourced from a government website.				
Now go to section	on 2.			
1.4.3 Verification	procedure for non-regulated trusts			
	of the trust deed/will or if not reasonably available a tees, and settlor(s) where applicable; or	certified ext	ract * of the trust deed that includes the name	
A letter from an	accountant or solicitor verifying the name, existence	e 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
Margin loan
For Margin Lenders or Nominees of the Margin Lender, please provide a certified copy or certified extract of the Loan Agreement with the Borrower
*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
Surfulle Surfulle
Date of birth (DD/MM/YYYY) // // // Occupation

Residential addre	ess - (A PO Box/RMB/Lock	ed Bag is not acce _l	otable)					
Unit	Street number	Street name						
Suburb			State		Postcode	Countr	ry	
Contact details								
	ncluding country and area	code)		Mobile n	umber (including	a country o	codeì	
					<u> </u>	<u> </u>		
Email								
All corresponden	ce will be sent to the ema	il address provided	bu Indivi e	dual truste	e 1.			
'			J					
2.3 Corporate	trustee details							
Corporate truste	e l							
Company name				ACN				
Nature of busines	SS							
Registered office	address - (A PO Box/RME	/Locked Baa is not	acceptal	bleì				
_	g name (if applicable)	3	<u>'</u>					
Unit	Street number	Street name						
Suburb			State		Postcode	Countr	rii	
Cuburb			Otate		Tostcode	Count	<u>'9</u>	
Corporate truste	e 2			401				
Company name				ACN				
Nature of busines	SS							
Registered office	address - (A PO Box/RME	/Locked Bag is not	acceptal	ole)				
Property/building	g name (if applicable)							
Unit	Street number	Street name						
Suburb			State		Postcode	Countr	ry	
Now go to sectio	n 3.							
5								

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 be	elow
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	
Full name of verifying officer Date of birth (DD/MM/YY) / / / / / / / / / / / / / / / / / /	
certified copy of your ID (see section 5) letter of appointment in company's letterhead signed by an authorised person I confirm I have: • Identified the authorised representatives or signatories of the above customer in accordance with requirements of the Anti-Mon 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 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)	ney

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	acceptab	ole)			
Property/building	g name (if applicable)						
Unit	Street number	Street name					
Suburb			State		Postcode	Country	
Principal place of	f business address (if diffe	erent to registered o	office add	lress) - (A F	PO Box/RMB/Lo	cked Bag is not ac	cceptable)
Property/building	g name (if applicable)						
Unit	Street number	Street name					
Suburb			State		Postcode	Country	
Postal address (i	f different to above) - (A P	O Box/RMB/Locked	Bag is no	t acceptal	ole)		
Unit	Street number	Street name					
Suburb			State		Postcode	Country	
ACN				ABN			
	for company or contact pe	erson)					
Name				Email			
Puoinaga numbar	r (include country and are	a aada)		Mobile pu	mber (include d	ountru oodo)	
Dusiness number	r (include country and are			WIODIIE IIU		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 PU BOX/RMB	Locked Bag is not accept	able.			
Unit	Street number	Street name			
Suburb			State	Postcode	Country (if not Australia)
Postal address	(if different to above) - (A	PΩ Box/RMB/Locke	d Baa is not acce	entable)	
Unit	Street number	Street name	a 2 ag 10 1.01 a 00	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		Carocinamo			
Outrout			Oberte	Destred	Occurrence ("Const. Accepted by)
Suburb			State	Postcode	Country (if not Australia)
	s (for company or contact	person)			
Name			Email		
Business numb	er (include country and ar	ea code)	Mobil	e number (include d	country code)
2.2 Tuno of o	omnanu				
3.3 Type of c	-				
Are you a publi	c company or a private/pr	oprietary company'	?		
Private/pi	roprietary company - plea:	se go to 3.4			
Dublic co	mnanu nlagga ga ta 3 E				
Public col	mpany – please go to 3.5 .				
3.4 Private/F	Proprietary company				
Please complete		w if you are an Aust	ralian proprietarı	y company or a fore	ign private company. Do not complete for
Directors detai	ls				
	ctors are there?				
		 :he directors. If ther	e are more than f	our directors, pleas	e complete the details on a separate sheet
	his 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 .					
110W go to 3.0 .					

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	
Name to 22	
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 subjregulatory 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 3.9 Yes - please provide details of the regulator and licence number below	
Regulator Licence number	
New series 2.0	
Now go to 3.8.	
3.8 Verification procedures for regulated companies	
If you have answered Yes to 3.6, please provide evidence of being a majority or wholly owned subsidiary of a listed company by providing a copy of one or more of the following:	
ASIC company extract	
company annual statement	
certified company share structure	
a public document issued by the relevant company	
3.9 Verification process for all other company types	
Please provide evidence of beneficial ownership by providing 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 o	of trustee)		
You must complete this section if you are an unregulated company and you have	ve answered no to:		
• 3.5 (you are an Australian domestic listed company)			
3.6 (you are a majority-owned subsidiary of an Australian listed compan	~		
 3.7 (you are a company that is licensed and subject to the regulatory over State or Territory statutory regulator). 	ersight of a Commonwealth,		
You are exempt from completing section 4 if you are a regulated company or:	Lancaca and the Committed and the United States		
 You are a foreign listed company or a wholly owned subsidiary of a listed disclosure requirements that ensure transparency of beneficial ownersh 			
Listed company name	Market/exchange		
A beneficial owner is an individual who ultimately owns (directly or indirectly) 25 indirectly) the customer (see FAQs). If you cannot identify any beneficial owners			
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 please complete 4.2.1 .	t identify any beneficial owner owning 25% or more,
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	
V	
You must complete this section if you are an unregulated trust. The beneficial (directly or indirectly) the operations of the trust and has power to appoint or r	
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 t	trustees)
Please provide the details of the individual who directly or indirectly controls 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 add	lress - (A PO Box/RMB/I	Locked Bag is not acce	eptable)			
Unit	Street number	Street name				
Suburb			State	Postcode	Country	
Please follow of the corpora		ure in section 5 , unless	s the individual is al	ready providing t	the ID as a trustee or beneficial ow	ner
5. VERIFICAT	ION PROCEDURE FOR II	NDIVIDUAL TRUSTEE, E	BENEFICIAL OWNER	(S), SENIOR MAN	NAGING OFFICIAL AND APPOINTOR	
	ct of an individual truste				on 4 . You may also need to comple quirements of option A , please follo	
OPTION A						
Provide a cert	ified copy* of one of the	e following:				
Current Austro	alian Driver's Licence c	ontaining a photo of th	e person (scan the	front and back)		
Current Austro	alian Passport or an Au	stralian Passport that	has expired within t	he preceding 2 ι	years	
Current Austro	alian State or Territory	Government Identity C	ard showing the pe	rson's date of bir	rth, photo and signature	
Current Foreig	ın Government Identity	Card showing the pers	son's date of birth, p	hoto and signat	ure**	
Current Foreig	ın Driver's Licence shov	wing the person's date	of birth, photo and s	signature**		
Current Foreig	ın Passport showing the	e person's date of birth	, photo and signatu	ıre**		
OPTION B						
	ovide any document fro from group 2.	om option A, then pleas	se provide a certifie	d copy* of one d	ocument from group 1 and	
GROUP 1						
Birth Certifica	te or Birth Extract issu	ed by an Australian Sto	ate or Territory			
Australian Gov	vernment issued Citizer	nship Certificate				
Current Conce	ession or Health Care C	ard issued by Centreli	nk (scan the front a	nd back)		
GROUP 2						
Commonwealt benefits	h, State or Territory Go	vernment Notice within	n the preceding 12 i	months and reco	ording the provision of financial	
Australian Tax or to (respecti		nin the preceding 12 m	onths and recording	g the debt payab	ole to or by the individual by	
Local Governn	nent or Utilities Provide	er Statement within the	preceding 3 month	ns and recording	the provision of services	
If the investor is	s below the age of 18, p	lease contact us on 13	300 730 032			
*Please see the	FAQs at the end of this	s form for the meaning	of certified copy.			
**If the docume translator.	nt is written in a langud	age other than English,	it must be accomp	anied by an Eng	lish translation prepared by an acc	redited

6. INVESTMENT DETAILS & DISTRIBUTION INSTRUCTIONS

Specify your initial application amount.

There is typically a minimum investment amount of \$25,000 per trust, however, we may waive or vary the investment minimums. Indicate your distribution choice below. If you do not make an election, distributions will be reinvested. Please refer to the IM of the trust you are making your investment in.

Tweet name		ADID	Trust	Investment	Distribution (indicate (X) one	
Trust name		APIR	Minimum AUD\$	amount AUD\$	Pay to my bank a/c	Reinvest
Perennial Value Au	ustralian Shares Trust	I0F0200AU	25,000			
Perennial Better F	uture Trust	WPC5600AU	25,000			
Perennial Value Mi	crocap Opportunities Trust	WPC3982AU	25,000			
Perennial Value Si	maller Companies Trust	IOF0214AU	25,000			
Perennial Value SI	nares For Income Trust	IOF0078AU	25,000			
Perennial Value St	nares Wholesale Trust	IOF0206AU	25,000			
Perennial Strategi	c Natural Resources Trust	WPC3240AU	25,000			
Note: We will only a	ccept applications in their base currency	J.				
Please indicate the	source and origin of funds being investe	d				
Savings						
Investment						
Superannuation c	ontributions					
Commission						
Donation/gift						
Inheritance						
Normal course of b	pusiness					
Sale of assets (e.g	. shares, property)					
Other						
7 DAY(45) T OF A	DDI IOATION AMOUNT					
	PPLICATION AMOUNT nt method and complete the relevant sec	tion if applicable	All naumonto	must he made in	ALID	
		don'ii applicable.	1	must be mude in	AUD.	
EFT	Direct debit		BPAY®			
EFT	Electronic Funds Transfer					
Account name:	Perennial Investment Management Limi	ted - Applications	Account			
BSB:	342 - 011					
Account number:	691649-002					
Your reference:	[please use the name of the investor and	d investor numbe	r]			

Direct debit authority - Australian bank accounts only

You can allow us to deduct your application amount directly from your nominated financial institution account by completing the direct debit authority below. This debit will be made through the Bulk Electronic Clearing System (BECS) from your account held at the financial institution you have nominated below.

By completing this section, you have understood and agreed to the terms and conditions governing the debit arrangements between you and Perennial Investment Management Limited, as set out in this request and in your Direct Debit Request Service Agreement, available here. Financial institution name Branch name Account name BSB number Account number I/We request and authorise Perennial Investment Management Limited ABN 13 108 747 637 (User ID 653095) to arrange, through its own financial institution, a debit to the nominated account as deemed payable by our administrator. Signature of primary account holder Full name Date (DD/MM/YYYY) Signature of joint account holder (if applicable) Full name Date (DD/MM/YYYY) BPAY® - Telephone & Internet Banking You can make your payment using telephone or internet banking. Trust **BPAY** details You will need to quote the biller code and your account number Biller code [insert] (for reference) when making this payment. [Trust name] PAY Reference number [account number] If this is a new investment, we will notify you of your account number Contact your bank or financial institution to make this payment once this is available. Please make your payment within 14 days of this notification. 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 Value Australian Shares Trust	Biller code: 216804 Reference number: Investor number
Perennial Value Microcap Opportunities Trust	Biller code: 216846 Reference number: Investor number
Perennial Better Future Trust	Biller code: 216861 Reference number: Investor number
Perennial Value Smaller Companies Trust	Biller code: 216903 Reference number: Investor number
Perennial Value Shares For Income Trust	Biller code: 216911 Reference number: Investor number
Perennial Value Shares Wholesale Trust	Biller code: 216929 Reference number: Investor number
Perennial Strategic Natural Resources Trust	Biller code: 216887 Reference number: Investor number

	INSTITUTION ACCOUNT DETAIL	

Australi	an ban	k account d	letail	s
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Financial institution name	Branch name
Account name	
BSB number	Account number
Foreign bank account details	
	Financial institution address
Foreign bank account details Financial institution name	Financial institution address
	Financial institution address Account name
Financial institution name	
Financial institution name	

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. Note: You may receive marketing material (e.g. market commentary, event invitations) from us, from time to time. Please indicate if you do not wish to receive these communications. The annual and any semi-annual financial statements of the trust are available free on our website. If you would like to receive a copy by post or email, please indicate below. (This refers to annual and semi-annual reports only. This will not affect communication instructions regarding general correspondence for your trust). Bu email Bu post **Marketing Material** You may receive information from us via mail, telephone, email or other electronic messaging service 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 contacted 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. 10. FINANCIAL ADVISER DETAILS 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 complete section 12 (Authorised representative of investor). 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 - Iress and OneVue 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 numbe	er	
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	ate Po	stcode	Country
Phone	Mobile		
Contact details			
Business number (include country and area code)	Mobile numb	er (include cou	ntry code)
Adviser signature			
Financial adviser declaration			
Notice to financial adviser : please note that reliance on the KYC below is met.	performed by the f	inancial advisor	r is only acceptable if all the criteria
I hold an AFSL in my own name or have been appointed as a	n authorised repre	sentative by the	e licensee.
I am a reporting entity for AML/CTF purposes.			
The issuer has reasonable grounds to believe that it is appro	oriate to rely on th	e KYC procedur	e I have undertaken.
I have attached the KYC documents to this form.			
AFSL full legal entity name	AFSL numbe	er	
Please print full name			
Signature			

11. 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.

11.1 Agent's	details		
Agent 1			
Title	Given name(s)		Surname
Agent's phone	number		
Email			
Agent's signed	WIFE.		
Agent's signat	ure		
Agent 2			
Title	Given name(s)		Surname
Agent's phone	number		
Email			
A			
Agent's signat	ure		
If you wish to	appoint more than two agents, please complete the c	 details on a sep	arate sheet and attach to this application form.
11 0 Haw sw	thorised representatives may act in relation to the a	t0	
		ccount?	
Please tick a			
Each authori consent of th	sed representative listed above may provide instructi e other	ions in relation	to the investment individually without the
All authorise	d representatives must act jointly to provide instructi	ons in relation	to the investment
Other arrang	ement - please provide details below		

11.3 Verification procedure for authorised representatives who are individuals
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.
12. 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.
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.
12.1 Companies and non-superannuation trusts
12.1.1 Are you a specified US person for tax purposes?
No No
Yes - please tell us your TIN

12.1.2	2 Are you a resident of any other country f	for tax purposes? Other than the US	S or Australia.
	No		
	Yes - please tell us which ones, using the fo	ollowing table	
Red Red	.P TIN? Reasons we accept are: ason A: The country of tax residency does r ason B: The entity/individual has not been is ason C: The country of tax residency does r	ssued with a TIN	
	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			
	No Yes - please tell us your GIIN* - see HELP be	ox.	
For Inte	at is a Financial Institution? further details about a Financial Institution	•	idance - <u>https://www.ato.gov.au/General/</u> cchange-of-informationCRS-and-FATCA/
This find	at is a GIIN? s stands for Global Intermediary Identificat ancial institutions and sponsoring entities fo	or purposes of identifying their regi to the IRS GIIN Composition Informo	, issued by US tax authorities (the IRS) to non US stration with the IRS under US tax laws (called FATCA). Ition - Please refer to https://www.irs.gov/businesses/
	re to now?		
	ed yes and completed my GIIN - go to 13.1. 4		diation. If no proceed to supertise 10.1 /
	ed yes and I am a Managed Investment Ent ed yes but did not write a GIIN – please tick		
TUCK	ea ges bat ala not write a ollin - piease tick	below wing god did not write d Gill	- trien go to 13.1.4 .

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
12.1.4 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 .
12.1.5 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.
If you are unsure whether you are an active or passive NFE, please get advice.

12.1.6 Do you have any controlling perso	ns who are resident	of another country o	r 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 copy the page and attach it to your comp		then go to section 14	and 15. If there is not enough room in the table, please			
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 .						
treated as Controlling Persons of a trust purposes. For companies, controlling persons gen	he protector(s) (if ar t, regardless of whet erally include any p	ny), and the beneficion ther or not any of the erson who holds (dire	ory(ies) or class(es) of beneficiaries, must always be mexercises control over the trust for FATCA/CRS ectly or indirectly) more than 25% of the shares in the ompany's financial and operating policies, such as senior			
Controlling person 1						
Title Given name(s)			Surname			
Date of birth (DD/MM/YYYY)	City and countr	y of birth				
Residential address						
Unit Street number	Street name					
Suburb		State	Postcode Country			
Country or jurisdiction of tax reside	ency	TIN	No TIN? Which reason? If Reason B has been selected please provide an explanation. See 13.1.2 HELP box.			
1						
2						
			ار مار			
3						
/.						

Contr	olling person 2			
Title	Given name(s)		Surname	
Date	of birth (DD/MM/YYYY)	City and country of birth		
Resid	ential address			
Unit	Street number	Street name		
Subu	rb	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				
			1	
2				
3				
4				
Controlling person 3 Title Given name(s) Surname				
Date	Date of birth (DD/MM/YYYY) City and country of birth			
	ential address			
Unit	Street number	Street name		
Subu	rb	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				

Contr	oiling person 4		
Title	Given name(s)		Surname
Date	of birth (DD/MM/YYYY) C	ity and country of birth	
Resid	ential address		
Unit	Street number S	treet name	
Subu	rb	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			

13. 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:

- to the best of your knowledge, all details in this application (including all related documents provided) are true, correct and complete
- you understand that this application form does not form part of the PDS;
- you have received, read and understood the current PDS, TMD and AIB. You agree to be bound by the constitution of the trust, and the PDS as supplemented, replaced or re-issued from time to time.
- you have completed Section A of this application form relating to Consumer Attributes, and confirm that your investment objectives
 are consistent with those of the trust(s) for which you are investing in.
- you are not bankrupt or a minor, and are authorised to sign this form
- you have received and accepted this offer in Australia
- you have read and understood the information relating to privacy in the PDS and AIB and consent to my/our personal information being collected, used and disclosed in accordance with the PDS, AIB and the Responsible Entity's privacy policy;
- if investing as trustee, on behalf of a superannuation fund or trust, that you are acting in accordance with your designated powers and authority as under the applicable trust deed.
- · you are not a 'politically exposed person or organisation' for the purposes of any AML/CTF laws
- I consent to the issuer disclosing my personal information to any issuer's service providers, in relation to any identification and verification that the issuer is required to undertake on me, as required under the AML/CTF Act. This shall include any information:
 - o required by any third party document verification service provider, and/or
 - o provided to any third party document verification service provider.

By applying to invest you also acknowledge that:

- the Responsible Entity reserves the right to not accept any application form in its absolute discretion
- monies deposited are not associated with crime, money laundering and/or financing terrorism. We may decide to delay or refuse any
 request or transaction, including by suspending the issue or redemption of units. If we are concerned that the request or transaction
 may breach any obligation of, or cause us to commit or participate in an offence under any AML/CTF and Sanctions Law and FATCA/
 CRS obligations, we will incur no liability to you if we do so
- we may take other action we reasonably believe is necessary to comply with AML/CTF and Sanctions Law and FATCA/CRS
 obligations, including disclosing any information held about you to any of our related bodies corporate or service providers whether
 in Australia or outside Australia, or to any relevant Australian or foreign regulator, and
- we collect additional information about you from time to time, from you or from third parties, for the purposes of satisfying AML/CTF and Sanctions Law and FATCA/CRS obligations, and that any such information may be used and disclosed as described in the Perennial Investment Management Limited privacy policy available online at www.perennial.net.au or by contacting us.
- investments in the trust(s) are subject to investment risk, including possible delays in repayment and loss of income and capital invested.

Important information

- nothing in this form is advice and 'help' 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 detail) 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 and emailing 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
- 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

14. 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 2
Signature	Signature
Date (DD/MM/YY)	Date (DD/MM/YY)
Full name	Full name
Capacity	Capacity
Individual trustee 1	Individual trustee 2
Director	Director
Company Secretary	Company Secretary
Authorised Representative	Authorised Representative
Signature 3	Signature 4
Signature	Signature
Date (DD/MM/YY)	Date (DD/MM/YY)
Full name	Full name
Capacity	Capacity
Individual trustee 3	Individual trustee 4
Director	Director
Company Secretary	Company Secretary
Authorised Representative	Authorised Representative

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.

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. In the
 context of margin lending, a nominee may hold interests on trust for the borrower who has borrowed money from the
 margin lender.
- 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: 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.

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 advisor 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 that 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 and
- 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.