

## **AML/CTF Checklist**

Please provide appropriate identification documents below, in conjunction with your application form.

Certified copies of these documents will suffice. A 'certified copy' or 'certified extract' means a document that has been certified as a true copy of an original of that document. Where unable to provide at least one of these documents please contact the Trustee to discuss alternative verification procedures permitted by law.

TYPE OF PROSPECTIVE INVESTOR	IDENTIFICATION REQUIRED		
INDIVIDUALS / JOINT	At least one of the following ID documents in relation to each applicant:		
APPLICANTS / SOLE TRADER	<ul> <li>Current passport issued by the Australian Commonwealth (or current within the preceding two years provided not cancelled);</li> </ul>		
	<ul> <li>Current passport or similar document issued for the purpose of international travel that contains a photograph and signature of the person and is issued by a foreign government, UN or UN Agency (accompanied where relevant by English language translation by an accredited translator);</li> </ul>		
	<ul> <li>Driver's Licence (Australian State or Territory), or foreign country equivalent containing a photograph and signature of the holder (accompanied, where relevant, by English language translation by an accredited translator).</li> </ul>		
COMPANY	Australian Company		
	A current full company search of ASIC databases showing:		
	<ul><li>the full name of the company;</li></ul>		
	the ABN/ACN;		
	<ul><li>the registered office address of the company;</li></ul>		
	the principal place of business of the company.		
	Foreign Company		
	<ul> <li>Company's Certificate of Registration / Incorporation (issued by ASIC or by a Regulatory or Government Authority stating the company type (public or private) and Registration Number; or</li> </ul>		
	<ul> <li>Articles of Association stating the Company's name and type (public or private).</li> </ul>		
PARTNERSHIP	<ul> <li>Copy or relevant extracts of the partnership agreement, full name of partnership and any business name(s) used by the partnership; and</li> </ul>		
	<ul> <li>ID in relation to each of the partners in accordance with the identification requirements above.</li> </ul>		
TRUSTS /	Unregulated Trusts and Self-Managed Superannuation Funds		
SUPERANNUATION FUND	Copy of the trust deed (including any variations to the trust deed) confirming:		
	the full name of the trust;		
	the type of trust;		
	<ul> <li>the country where the trust was established; and</li> </ul>		
	the name of each beneficiary or class of beneficiary.		



## Trustees – all Trusts and Superannuation Funds

For each Trustee(s) who are natural persons, ID in accordance with the individual verification requirements above. If any of the Trustee(s) is a company, ID in accordance with the company verification requirements above. If the Trustees comprise of individuals and companies, then ID in accordance with the individual and company verification requirements above.

## Settlor – Unregulated Trusts

ID will be in accordance with the individual verification requirements above. This will only be required if the amount used to establish the Trust (settlement amount) was greater than \$10,000.

## BENEFICIAL OWNER(S) OF A TRUST / COMPANY / PARTNERSHIP

## Company and Unregulated Trust

You must provide details of each individual who (directly or indirectly):

- owns more than 25% of the Trust / issued capital of a company or partnership; or
- Controls the Trust / Company / partnership.

If neither of these apply we must collect details of the individual who holds the power to appoint or remove the Trustee of the Trust ('Appointer'). ID will be in accordance with the individual verification requirements above.

#### **POWER OF ATTORNEY**

Applications submitted under a power of attorney must be accompanied by an original certified copy of the power of attorney document and a specimen signature of the relevant attorney(s).



Please submit the completed form by email or post

> Apex Fund Services Pty Ltd GPO Box 4968 Sydney NSW 2001 E: registry@apexgroup.com Ph: 1300 133 451 W: www.apexgroup.com

# **Application Form**

This Application Form is to be completed by Investors who wish to apply for Units as part of the Offer made through this PDS for the Medallion Australian Equities Growth Fund dated 22 December 2022. You should read the PDS in full before completing this Application Form. It contains important information about the Offer and the Units.

## **ONLINE APPLICATION FORM**

Investors can apply for Units via an online application form that will be sent directly to the Unit Registry Administrator, Apex Fund Services Pty Ltd (ACN 118 902 891).

The online application form includes the same application form details as listed in this PDS. Investors will be required to submit relevant

identity and AML/KYC documentation through the online application form. Please follow this link to complete the online application form: <a href="https://medallionfund.apexgroupportal.com/apply">https://medallionfund.apexgroupportal.com/apply</a>				
PAPER APE	PLICATION FORM			
Please comple	ete the following applicati	on form and return to the Unit Registry Administrator at registry@apexgroup.com		
APPLICATI	ON AMOUNT			
Trust Entitlem	ent Please note 100%	of your Application Amount should accompany this form.		
I/We apply for	\$AUD	of Units		
	Min. \$25,000			
APPLICATI	ON TYPE			

Min. \$25,000
APPLICATION TYPE
Please select the appropriate box  Individual Joint Sole Trader Company Trust Super Fund Partnership Other  SOURCE OF FUNDS
Please select the origin and source of funds being invested:  Savings Investment Superannuation contributions Commission Donation/Gift Inheritance  Normal course of business Asset sale Other
What is the purpose of this investment?  ☐ Savings ☐ Growth ☐ Retirement ☐ Business account ☐ Income
SECTION 1: INVESTOR DETAILS
Please complete this section in conjunction with the AML/CTF Checklist in the PDS. If the AML/CTF information requirements are not satisfied, then your application will not be accepted.

## A. Individual / Individual Trustee

Applicant 1						
Title	First name	Middle name	Last name			
Date of birt	Date of birth					
Residential	Residential address (Not PO Box) Street					
Suburb, Cit	ty or Town	State	Postcode			

continued on next page



Country (if not A	ustralia)			
Tax file number	or reason for exemption			
Country of resid	ence for tax purposes (if not Australia)			
Business name	(for sole trader)	ABN (if any) (for	sole trader)	
Phone (Work)		Phone (Home)		
Mobile		Occupation		
Applicant 2				
Title	First name	Middle name	Last name	
Date of birth				
Residential add	ress (Not PO Box) Street			
Suburb, City or	Town	State	Postcode	
Country (if not A	ustralia)			
Tax file number	or reason for exemption			
Country of resid	ence for tax purposes (if not Australia)			
Business name	(for sole trader)	ABN (if any) (for	sole trader)	
Phone (Work)		Phone (Home)		
Mobile		Occupation		
B. Compan	y / Corporate Trustee			
Full name of Co	mpany or Corporate Trustee			
Tax file number	or reason for exemption	ACN or ABN		
Business name	(if applicable)			
Registered offic	e address (not PO Box)* Street			
Suburb, City or	Town	State	Postcode	
Country (if not A	ustralia)			
Principal Place	of Business (not PO Box) Street			
Suburb, City or	Town	State	Postcode	
Country (if not A	ustralia)			
* For registered foreign companies this may be the name (care of) and address of the Company's local agent (if any).  Is this a   public company   a majority owned subsidiary of a public company or   private company.				
If this entity is a	<u>public company,</u> please provide details of	f the exchange on which it is listed:	:	
If this entity is a <u>majority owned subsidiary of a public company,</u> please provide the following details: Name of parent company:				
Details of the ex	change on which the parent company is l	isted:		

If this entity is a private company you must also provide details of the directors and beneficial owners on the next page.



### **Directors**

Director 1	Given Name	Surname
Director 2	Given Name	Surname
Director 3	Given Name	Surname
Director 4	Given Name	Surname

If there are more than four directors, please provide details on a separate sheet.

## **Beneficial Owners**

Please provide details of all individuals who are beneficial owners through one or more shareholdings of more than 25% of the issued capital of the company.

Beneficial owner 1	Given Name		Surname	Date of birth		
Residential address (not F	Residential address (not PO Box) Street					
Suburb		State	Postcode	Country		
Beneficial owner 2	Given Name		Surname	Date of birth		
Residential address (not F	PO Box) Street					
Suburb		State	Postcode	Country		
Beneficial owner 3	Given Name		Surname	Date of birth		
Residential address (not F	PO Box) Street					
Suburb		State	Postcode	Country		
Beneficial owner 4	Given Name		Surname	Date of birth		
Residential address (not PO Box) Street						
Suburb		State	Postcode	Country		
If there are more than four beneficial owners, please provide details on a separate sheet.						

## C. Partnerships

Full Name of Partnership

Business Name (if applicable)

Tax file number or reason for exemption

Country of Establishment

Registered Office Address (not PO Box) Street

Suburb, City or Town State Postcode

Mobile

Partner :	1			
Title	First name	Middle name	Last name	
Date of birth	1			
Residential	address (not PO Box) Street			
Suburb		State	Postcode	
Country (if r	not Australia)			
Tax file number or reason for exemption				
Country of residence for tax purposes (if not Australia)				
Phone (Wor	rk)	Phone (Home)		



## **Regulation Information**

Is the Partnership regulated by a Prof	fessional Body?			
Yes. Provide the following de	tails:			
Association name				
Association website				
Partner's membership number / re	ference			
☐ No. You must provide details	of each partner. If there a	are more than two pa	artners, please provide	details on a different sheet.
Partner 2				
Title First name	Mi	ddle name	La	st name
Date of birth				
Residential address (Not PO Box)	Street			
Suburb, City or Town		State		Postcode
Country (if not Australia)				
Tax file number or reason for exemp	tion			
Country of residence for tax purpose	es (if not Australia)			
Phone (Work)		Phone (Hor	me)	
Mobile				
D. Trust / Superannuatior	n Funds			
Full name of trust / Superannuation f	fund			
Tax file number or reason for exemp	tion			
Country where trust was established				
Full name (if any) of trustee (s)				
Please ensure that you complete Se	ctions A and/or B (as appro	priate) for each Trus	ee.	
Regulated Trust				
If the Investment is via a Regulated <sup>*</sup> Persons.	Trust or SMSF, select and c	complete one of the fo	ollowing 3 options and th	en go to section E - Politically Exposed
Self-Managed Superannuati	on Fund	ABN		
Registered Managed Investr	ment Scheme	ARSN		
Other Regulated Trust	Name of regulator		Registration/licen	sing details
Unregulated Trust If the Investment is via a Unregulated details.	d Trust, select the Type of l	Jnregulated Trust and	d provide Beneficiary de	tails, Settlors details and Beneficial Owner
Type of Unregulated Trust				
☐ Unit Trust ☐ Dis	cretionary Trust	Charitable Trust	☐ Testamentary Tro	ust Other



**Beneficiary Details** 

Do the terms of the trust identify the beneficiaries by reference to membership of a class?					
Yes. Provide details of membership classes (unitholders, family members of named person, charitable organisations).					
No. Please complete the	following:				
Beneficiary 1 Given Nat	me	Surn	ame		
Beneficiary 2 Given Na	me	Surn	ame		
Beneficiary 3 Given Na	me	Surn	ame		
If there are more than three b	eneficiaries please provide detai	ls on a separate sheet.			
Settlor Details for Unr	regulated Trust				
	ount used to establish the trust wa	as greater than \$10,000 unless the	e Settlor is deceased.		
The full name of the Settlor					
Beneficial Owner(s) /	Controller of the Trust				
·	ch individual who (directly or in	directly):			
<ul><li>Owns more than 25%</li><li>Controls the trust.</li></ul>	of the trust; or				
	any individual who holds the powe	er to appoint or remove the trustee	of the trust ('Appointer').		
Beneficial owner 1	Given Name	Surname	Date of birth		
Residential address (not PO I	Box) Street				
Suburb	State	Postcode	Country		
Beneficial owner 2	Given Name	Surname	Date of birth		
Residential address (not PO I	Box) Street				
Suburb	State	Postcode	Country		
Beneficial owner 3	Given Name	Surname	Date of birth		
Residential address (not PO I	Box) Street				
Suburb	State	Postcode	Country		
If there are more than three beneficial owners please provide details on a separate sheet.					
E. Politically Exposed Person (PEP)					
_	Is the investor a Politically Exposed Person?				
No					
Yes. Provide a description of the PEP's Position:					



This certification must be completed by all investors to declare their FATCA and CRS status. Please refer to explanations of FATCA terms before completing this form. The Trustee, Licensee and Investment Manager are unable to provide you with tax or professional advice in respect of FATCA or CRS and we strongly encourage you to seek the advice of an experienced tax or professional adviser in relation to completing this form.

#### SECTION 2: APPLICANT'S TAX RESIDENCY AND CLASSIFICATION - FATCA AND CRS

#### What are FATCA & CRS?

The U.S. Foreign Account Tax Compliance Act (FATCA) and the Common Reporting Standard (CRS) are two ways in which a large number of governments are seeking the same thing - to improve global tax compliance. Both require financial institutions to capture relevant information on

- FATCA promotes cross border tax compliance by U.S. taxpayers, by implementing an international standard for the automatic exchange of information related to those taxpayers. Australia has entered into an inter-governmental agreement (IGA) with the U.S. to implement FATCA in Australia, to be administered through the ATO. The AUS-USA FATCA IGA requires the ATO to obtain detailed account information for U.S. citizens and/or taxpayers on an annual basis. The effect of this is that, to satisfy their FATCA obligations, relevant Australian financial institutions must identify any U.S. taxpayers and report those taxpayers' financial account data to the ATO.
- CRS is a global reporting standard, developed by the OECD, for the automatic exchange of information (AEoI). Its goal is to allow tax authorities to obtain a clearer understanding of financial assets held abroad by their residents, for tax purposes. Over 88 countries (refer to OECD link in section IV for participating jurisdictions) have agreed to share information on residents' assets and incomes in accordance with defined reporting standards. Once again, this means that financial institutions around the globe must provide tax authorities with taxpayer financial account data, and the financial institutions must therefore collect this information from their customers and pass it on.

## I. Individual & Joint Investors

Please provide details for each individual. If there are more than 2 individuals please provide their details on a separate page.

#### EATCA

TATCA		
1. Are you a U.S. citizen or U.S. reside	ent for tax purposes?	
Yes. Provide your Name & U.S. Ta	xpayer Identification Number (TIN) below and continue to question	n 2:
Individual 1	Individual 2	
Full Name	Full Name	
TIN	TIN	
No. Continue to question 2.		
CRS		
2. Are you a tax resident of any cour	itry outside Australia?	
No. Skip to section 3 - Distribution	Payment Details.	
	to to section 3. If resident is in more than one jurisdiction please income on a separate piece of paper).	clude details for all jurisdictions below (if more than 2
Individual 1		
Country of Tax Residence	Tax Identification Number (TIN or equivalent)	Reason Code if no TIN provided
1		
2		
Individual 2		
Country of Tax Residence	Tax Identification Number (TIN or equivalent)	Reason Code if no TIN provided
1		
2		

continued on next page



a) Reporting IGA FFI or Participating FFI

Provide entity's GIIN and continue to question 5:

Please submit the completed form by email or post Apex Fund Services Pty Ltd GPO Box 4968 Sydney NSW 2001 E: registry@apexgroup.com Ph: 1300 133 451

W: www.apexgroup.com If TIN or equivalent is not provided, please provide reason from the following options: Reason A: The country/jurisdiction where the entity is resident does not issue TINs to its residents Reason B: The entity is otherwise unable to obtain a TIN or equivalent number (Please explain why the entity is unable to obtain a TIN). Reason C: No TIN is required. (Note: Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction) II. Superannuation Funds Full legal name of the Superannuation Fund 3. Are you an Australian Retirement Fund? (refer to FATCA status definitions) Yes. Skip to section 3 - Distribution Payment Details. No. Continue to section III. III. Entities (Company, Trust, Partnership, Association etc.) Full legal name of the Entity **FATCA** 4. Select only ONE of the following three FATCA categories that best describes the entity and provide the information requested. 4.1 U.S. person as defined under FATCA and U.S. Internal Revenue Code. This includes but is not limited to company, trust or partnership that is established under the laws of a U.S. and is considered a U.S. resident for tax purposes. (a) U.S. federal tax classification. Please confirm entity's U.S. federal tax classification below ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate Single-member LLC Limited liability company - C Corporation Limited liability company - S corporation Other. Please provide detail: Limited liability company - Partnership (b) Are you exempt from FATCA reporting? Yes. Please provide your FATCA exemption code: No. Please provide your US TIN: 4.2 Financial institution (FFI). Select one of the options from (a) to (e) to confirm which type of FFI is applicable to your circumstances

continued on next page



TIN issued by such jurisdiction)

Please submit the completed form by email or post Apex Fund Services Pty Ltd GPO Box 4968 Sydney NSW 2001 E: registry@apexgroup.com Ph: 1300 133 451

W: www.apexgroup.com

(b) Sponsored FFI or Trustee Documented Trust. Please complete details of the Sponsoring entity or Trustee below and continue to question 5.				
Name of Sponsoring entity	or Trustee:			
GIIN of Sponsoring entity	or Trustee:			
(c) FFI that does not need to re	egister (e.g. Non-Reportinç	g IGA FFI). Please complete deta	ails below and continue to question 5.	
FATCA status:				
GIIN (if applicable):				
<ul><li>☐ (d) Non-participating FFI. Note</li><li>☐ (e) Exempt Beneficial Owner. C</li></ul>	*	will be reported to ATO and IRS.	Continue to question 5.	
4.3 Non-Financial Foreign Entity (NFFE) circumstances  (a) Active NFFE. Continue to qu	estion 5.		n type of NFFE is applicable to your	
Provide details of each of the	ng persons (refer to FATCA e controlling U.S. persons	definitions) who are U.S. citizen	s or U.S. residents for tax purposes. ontrolling U.S. persons please provide	
US Person 1		US Person 2		
☐ Controlling Person ☐ Beneficiary ☐ Ti	rustee 🗌 Owner	☐ Controlling Person ☐	Beneficiary Trustee Owner	
☐ Director ☐ Other – please specify		☐ Director ☐ Other -	- please specify	
Full Name		Full Name		
Residential address (PO box is not acceptable)		Residential address (PO box	is not acceptable)	
U.S. Taxpayer Identification Number (TIN)		U.S. Taxpayer Identification I	Number (TIN)	
CRS 5. Are you a tax resident of any other country of	outside of Australia?			
<ul><li>☐ No. Continue to question 6.</li><li>☐ Yes.</li></ul>				
Provide details below and continue to question 0 2 jurisdictions please provide them on a separat		one jurisdiction please include de	tails for all jurisdictions below (if more than	
Country of Tax Residence	Tax Identification Number	er (TIN or equivalent)	Reason Code if no TIN provided	
1				
2				
If TIN or equivalent is not provided, please provide  ■ Reason A: The country/jurisdiction where the  ■ Reason B: The entity is otherwise unable to o	entity is resident does not	issue TINs to its residents.	entity is unable to obtain a TIN).	

Reason C: No TIN is required. (Note: Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the



						vv. www.apexgi	oup.com
6. Are	you a Financial Inst	titution for the p	urposes of CRS?				
	Yes. Continue to q	_	•				
	No. Skip to question	on 8.					
7 Ares	vou an Investment	Entity (Financial	Institution) located in a	Non-Participating Jurisdi	ction for CRS nurnoses a	nd managed by another	
	ncial Institution?	Litercy (1 manetal	mstrution, rocated in a	non i ai deipading jurisur	ection for CRS purposes an	in managed by another	
	Yes. Continue to q	uestion 9					
	No.						
8. Are	you an Active Non-l	Financial Entity (	Active NFE)?				
	Specify the type of	Active NFE below	and then skip to section 3	- Distribution Payment Deta	ils.		
			E's gross income from the sets held for the production		passive income and less that	an 50% of its assets during the	
	Corporation t	hat is regularly tra	ded or a related entity of a	regularly traded corporation			
	Governmenta	al Entity, Internatio	nal Organisation or Central	Bank			
	No. You are a Pas	sive Non-Financia	l Entity (Passive NFE). Co	ntinue to question 9.			
9. Cont	rolling Persons - D	oes one or more	of the following apply to	o vou:			
or r	nore of the share on ou are a trust, is ar	capital) a tax res ny natural persoi	ident of any country out	side of Australia? ector, beneficiary, settlor		I owners who ultimately own	
	No. Continue to s	ection 3 - Distribu	ution Payment Details.				
	Yes. Complete de	etails below for the	ese persons and continue	e to section 3 - Distribution	Payment Details.		
1		Oate of Birth	Residential Address	Country of Tax Residence	Tax Identification Number (TIN) or equivalent	Reason Code if no TIN provided	
1							
2							
If TIN o	r equivalent is not pason A: The countr	provided, please py/jurisdiction wh	*	ollowing options: t does not issue TINs to it		s unable to obtain a TIN).	

Reason C: No TIN is required. (Note: Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction).



#### IV. EXPLANATIONS

#### Common Terms

Financial institution (also referred to as Foreign financial institution or "FFI" under FATCA) - an entity created or organised outside of the U.S. and includes:

- Depository institution entity that accepts deposits in the ordinary course of banking or similar business (banks, credit unions), or
- Custodial institution entity that holds financial assets for the account of others as a substantial portion of its business (brokers, custodians),
- Investments entity -means any entity that conducts as a business (or is managed by an entity that conducts as a business) one or more of the following activities or operations for or on behalf of a customer:
  - trading in money market instruments (cheques, bills, certificates of deposit, derivatives, etc.); foreign exchange; exchange; interest rate and index instruments; transferable securities; or commodity futures tradina:
  - individual and collective portfolio management; or
  - otherwise investing, administering, or managing funds or money on behalf of other persons.

Non-Financial Foreign Entity ("NFFE") - any non-U.S. entity that is not a financial institution. NFFE can be either Active NFFE or Passive NFFE (refer below for more details)

U.S. citizen or U.S. resident for tax purposes – includes:

- anyone born in the U.S. (who hasn't renounced their citizenship)
- anyone living in the U.S.
- a green card holder
- U.S. passport holder
- U.S. companies, trusts or partnerships

Controlling Persons - means the natural persons who exercise control over an Entity. In the case of a trust, such term means the settlor, the trustees, the protector (if any), the beneficiaries or class of beneficiaries, and any other natural person exercising ultimate effective control over the trust, and in the case of a legal arrangement other than a trust, such term means persons in equivalent or similar positions. The term "Controlling Persons" shall be interpreted in a manner consistent with the Financial Action Task Force Recommendations

GIIN - Global Intermediary Identification Number is an IRS registration number for financial institutions

TIN - is U.S. Taxpayer Identification Number and may include Social Security Number (SSN) or Employer Identification Number (EIN).

IGA - Agreement between the Government of Australia and the Government of the United States of America to Improve International Tax Compliance and to Implement FATCA.

Australian Retirement Fund

- Any plan, scheme, fund, trust, or other arrangement operated principally to administer or provide pension, retirement, superannuation, or death benefits that is a superannuation entity or public sector superannuation scheme (including an exempt public sector superannuation scheme) as defined in the Superannuation Industry (Supervision) Act 1993, or a constitutionally protected fund as defined in the Income Tax Assessment Act 1997
- A pooled superannuation trust as defined in the Income Tax Assessment
- Any Entity that is wholly owned by, and conducts investment activities, accepts deposits from, or holds financial assets exclusively for or on behalf of, one or more plans, schemes, funds, trusts, or other arrangements referred to in subparagraphs (1) or (2) of this paragraph.

#### **FATCA Status**

FATCA status refers to entity classification under FATCA and may include:

- 1. Active NFFE any NFFE that meets following criteria:
- NFFE where less than 50% of income is passive income (i.e. dividends, interest, annuities etc.) and less than 50% of its assets produce passive
- Entity's stock is regularly traded on established securities market (e.g. entity listed on ASX) or affiliated group of such entity; or
- Entity organised in U.S. Territory and owned by its residents; or
- Foreign government; or
- International organisation; or
- Foreign Central Bank of Issue: or
- Any other specifically identified class of entities, including those posing a low risk of tax evasion, as determined by the IRS (e.g. start-up entities, entities in liquidation, not-for profit entities etc.)
- 2. Passive NFFE with controlling U.S. persons any NFFE that is not an Active NFFE or is not a withholding foreign partnership or trust and has controlling U.S. persons.
- Passive NFFE with no controlling U.S. persons any NFFE that is 3. not an Active NFFE or is not a withholding foreign partnership or trust and where none of the entity's controlling persons are U.S. persons.
- Participating FFI an FFI that enters into an agreement with the IRS to undertake certain due diligence, withholding and reporting requirements for U.S. account holders in accordance with FATCA and is generally able to provide GIIN.
- Exempt Beneficial Owner this is non-reporting entity under FATCA and may include:
- the Australian Government, State and local governments and local authorities and their wholly owned agencies or instrumentalities, including certain named entities:
- International, intergovernmental and supranational organisations;
- Reserve Bank of Australia and its subsidiaries;
- Complying Australian superannuation funds (including self-managed super
- Investment entity wholly owned by exempt beneficial owners;
- Non-Reporting IGA FFI this is non-reporting entity (certified or registered deemed-compliant FFI) under FATCA and may include
- Financial institution with Australian client base (must satisfy all condition listed in paragraph III. A of Annex II of the IGA, including at least 98% of the U.S. dollar value of all account balances must be held by Australian
- Small local banks that meet criteria listed in the IGA;
- Financial Institution that is not an Investment Entity with only Low-Value Accounts (i.e. with value of U.S.\$ 50,000 or less) and with total assets of no more than U.S.\$50 million:
- Qualified credit card issuer (with customer deposits of U.S.\$50,000 or less);
- Trustee-Documented Trust A trust established under the laws of Australia to the extent that the trustee of the trust is a Reporting U.S. Financial Institution, Reporting Model 1 FFI, or Participating FFI and reports all information required to be reported pursuant to the Agreement with respect to all U.S. Reportable Accounts of the trust;
- Sponsored investment entity an investment entity established in Australia that has a Sponsoring entity;
- Certain Investment Manager and Investment Advisors;
- Certain Collective Investment Vehicles that meet criteria listed in the IGA.
- Non-Participating FFI an entity that does not comply with FATCA and generally will not fall into any of the below categories:
  - Participating FFI; or
  - Reporting FFI; or
  - **Exempt Beneficial Owner**

#### Further information about FATCA & CRS can found at:

http://www.irs.gov/fatca

http://treasury.gov.au/Policy-Topics/Taxation/Tax-Treaties/HTML/Intergovernmental-Agreement

http://www.aph.gov.au/About\_Parliament/Parliamentary\_Departments/Parliamentary\_Library/pubs/rp/rp1314/QG/FATCA

http://www.oecd.org/tax/automatic-exchange/international-framework-for-the-crs/

http://www.oecd.org/tax/automatic-exchange/international-framework-for-the-crs/MCAA-Signatories.pdf



Third Contact Name:

Fourth Contact Name:

**Accountant/Financial Contact Name:** Accountant/Financial Contact Email: Please submit the completed form by email or post Apex Fund Services Pty Ltd GPO Box 4968 Sydney NSW 2001 E: registry@apexgroup.com Ph: 1300 133 451

			w. www.apexgroup.com					
SECTION 3: DISTRIBUTION PAYMENT DETAILS								
	Please make depos	sits to the following account						
BSE	3 Number							
Acc	count Name							
Acc	count Number							
	Please reinvest my distribution payment							
SE	CTION 4: METH	OD OF PAYMENT						
Plea	ase select payment op	otion below.						
	Please ensure the ame	ount you pay is net of any tax	tes or bank fees which may be levied by your bank in connection with your application.					
	When depositing funds by direct deposit, please include the following reference: 'YOUR NAME OR INVESTING ENTITY' to enable your function identified.							
If paying by cheque, all cheques are payable to Apex Fund Services.								
	\$AUD DIRECT DEPO	OSIT:						
	Bank: Account name: BSB: Account number:	NATIONAL AUSTRALIA Medallion Australian Equit 082-401 309 773 706						
	CHEQUE: Full Amount:	\$AUD						
	CTION 5: REPO		eive communications about your investment:					
Name:			Email Address:					
Mol	pile:							
Secondary Contact Name:			Secondary Contact Email:					

If you would like copies of the correspondence emailed to your Financial Adviser, and if you authorise your Financial Adviser to access your investment information (in respect of all your investments) on the Investor Portal, please have your Financial Adviser complete the section on the next page.

Third Contact Email:

Fourth Contact Email:



## **SECTION 6: MARKETING PREFERENCES**

Please select your marketing preferences below in order and other business updates from Sanlam Investments (A	to receive communications regarding new investment opportunities, events australia) Pty Ltd
Marketing to Advisor Only	
Marketing to Advisor and Investor	
SECTION 7: ADVISER USE ONLY	
By providing your adviser details, you certify that you are	appropriately authorised to provide financial services in relation to this product.
ADVISER'S CONTACT DETAILS	
Dealer Group	Dealer Group AFSL
Adviser Firm	Adviser Firm AFSL
Adviser Name	Authorised Representative Number
Adviser email address	Adviser contact phone number
Please provide <u>certified copies</u> of the identification docum Form.	entation specified in the AML section under the relevant investor type with this Application
Adviser Stamp or Signature	



#### **DECLARATION AND SIGNING**

By completing, signing and lodging this Application Form, you acknowledge and agree that:

You have read in full and understood the PDS to which this Application Form relates, including understanding the risks set out in the PDS.

You will promptly notify the Trustee and the Investment Manager of any change to the information you have previously provided to the Trustee or the Investment Manager, including any changes which result in a person or entity controlling, owning or otherwise holding an interest in the Proposed Fund.

You consent to the Trustee and the Investment Manager disclosing any information it has in compliance with its obligations under the US Foreign Account Tax Compliance Act ('FATCA') and the OECD Common Reporting Standards for Automatic Exchange of Financial Account Information ('CRS') and any related Australian law and guidance implementing the same. This may include disclosing information to the Australian Taxation Office, who may in turn report that information to the relevant tax authorities as required.

The details you have inserted into the Application Form are complete and accurate and where applicable reflects your tax status for purposes of FATCA/CRS.

You acknowledge that the collection of your personal information may be required by the Financial Transaction Reports Act 1988, the Corporations Act 2001, the Income Tax Assessment Act 1936, the Income Tax Assessment Act 1997, the Taxation Administration Act 1953, the FATCA and CRS (includes any related Australian law and guidance) and the Anti-Money Laundering and Counter-Terrorism Financing Act 2006.

You will provide the Trustee and the Investment Manager with all additional information and assistance that the Trustee and the Investment Manager may request in order for the Trustee and the Investment Manager to comply with the AML/CTF Law, FATCA and CRS.

You will be bound by the Trust Deeds and the terms on which the Units are being issued (as explained in the PDS).

If you are sole signatory signing on behalf of a company, you confirm that you are signing as sole director and sole secretary of the company or as duly authorised representative or agent of the company.

If you are investing as a trustee, on behalf of a superannuation fund or a trust, you confirm that you are acting in accordance with your designated powers and authority under the trust deed. In the case of a superannuation fund, you also confirm that it is a complying fund under the Superannuation Industry (Supervision)

If you sign this Application Form under a power of attorney, then a certified copy of the power of attorney is submitted with this Application Form, which as at the date of this application, has not been revoked.

No person or entity controlling, owning or otherwise holding an interest in the Applicant is a United States citizen or resident of the United States for taxation purposes.

You are over the age of 18.

You have made an offer for Units in the Proposed Fund and that offer cannot be revoked.

You acknowledge that an updated PDS will not be reissued after the establishment of the Trust Deeds and the Proposed Fund, unless there is a material change to the PDS.

We may accept or reject this application in whole or in part.

You may not be allocated any Units, and the Trustee has absolute discretion to allocate Units as it sees fit.

You have had the opportunity to seek independent professional advice regarding the legal, taxation and financial implications of investing in the Units and in the Proposed Fund generally.

You have not relied on any statements or representations made by anybody (including the Trustee, Investment Manager, Licensee or their officers, employees or agents) prior to applying, other than those representations made in this PDS.

Monies invested in the Proposed Fund do not represent an investment in or a deposit of or other liability of the Trustee, Licensee or Investment Manager and an investment is subject to investment risk, including possible delays in the repayment and loss of income and capital investment.

You have provided all documentation requested for AML/CTF investor identification purposes.

If your investment is via a trust that is not a registered managed investment scheme or a government superannuation fund and you have not provided details of the name of each beneficiary or class of beneficiary, you certify that the trust is an unregistered managed investment scheme that only has wholesale clients as beneficiaries and does not make small scale offerings under section 1012E of the Corporations Act.

If an adviser's details are provided on Section 6 of the Application Form, the Trustee, Investment Manager and Unit Registry Administrator are authorised to provide information directly to that adviser and their AFSL.

I/We confirm that I/we have read and understood the privacy section contained in the PDS.



## **PLEASE NOTE**

Trustee

This Application Form must not be handed out or used unless accompanied by the PDS. If received through electronic means, you declare you received the Application Form accompanied by or attached to a print out or paper copy of this PDS. Units will only be issued on receipt of an Application Form issued together with the PDS. Name of Applicant #1 Signature Applicant #1 DD/MM/YYYY Position of applicant (if applicable) Sole Director Director Trustee Name of Applicant #2 Signature Applicant #2 (if joint applicants, then both applicants must sign) DD/MM/YYYY Position of applicant (if applicable) Company Secretary (for company investments only) Director