

Client Services contact details

Phone

Within Australia: 02 8022 7487
International: +61 2 8022 7487

Email

daintree.transactions@unitregistry.com.au

Application Form

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

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

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

Complete all relevant sections of this application form either:

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

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

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

Trusts/Superannuation funds:

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

Certify and collect the identification documents.

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

Tell us your tax status.

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

Send your documents to our Administrator.

You can return your forms by post to:

Daintree Trusts
Registry Services
GPO Box 804
Melbourne VIC 3001

Make your payment.

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

Your application cannot be processed until all relevant identification documents and cleared funds are received. Your initial investment and additional investments may be made by either electronic funds transfer, cheque, direct debit or Bpay. Where a valid application for an initial investment or additional investment via EFT or cheque is received before 2pm on a Melbourne business day we will generally process the request using the unit price applying to the close of business that day. Where a valid application for an initial investment or additional investment is received before 2 pm, via Bpay on a Melbourne business day, we will generally process your request using the unit price applying to the following business day. PIML may, at its discretion accept amounts less than the minimum initial investment amount.

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 fund(s) you are investing in.

Consumer Attributes

A. What is your primary Investment objective?

- ☐ **Capital Growth** (increased value of your investment over time)
- ☐ **Capital preservation** (preserving the value of your investment and preventing loss)
- ☐ **Capital guaranteed** (shielding your investment from any losses)
- ☐ **Income distribution** (receiving regular income from your investment)

B. What is the intended use of this Fund in your investment portfolio?

- ☐ **Solution /standalone** (your primary investment - 75% - 100% of portfolio)
- ☐ **Core component** (a large proportion of your investment - 25% - 75% of portfolio)
- ☐ **Satellite / small allocation** (a small part of your investment - less than 25% of portfolio)

C. What is the intended investment timeframe?

- ☐ **Short term** (two years or less) ☐ **Medium term** (more than 2 years) ☐ **Long term** (more than 8 years)

D. What is your tolerance for risk / return? (How much of a loss you are willing to tolerate within your portfolio when assessed against the possibility of greater returns)

- ☐ **Low** ☐ **Medium** ☐ **High** ☐ **Very High**

E. What is your anticipated frequency of withdrawals?

- ☐ **Daily** ☐ **Weekly** ☐ **Monthly** ☐ **Quarterly** ☐ **Annually or longer**

F. Have you received advice prior to applying to invest in this Fund(s)? This question is mandatory. Please answer one of the questions below.

- ☐ I/We have received personal advice in relation to my investment in this fund (Financial product advice that has been given to you by a person who has considered one or more of your investment objectives)
- ☐ I/We have received general advice in relation to my investment in this fund (Financial product advice that has been given to you but has not been tailored to your personal circumstances or investment objectives)
- ☐ I/We have not received advice in relation to my investment in this fund

Note: Acceptance of your application should not be taken as a representation or confirmation that an investment in the Fund is, or is likely to be, consistent with your intentions, objectives and needs as indicated in your responses to these questions.

1 Are you an existing investor?

☐ No, complete section 2 onwards.

☐ Yes, the account number is Complete from section 5 onwards.

2 Individuals and sole traders

Complete if you are investing individually, jointly or you are an individual or joint trustee.

Investor 1 – Personal details

Title Full given names

Surname

Date of birth (DD/MM/YYYY)

DD / MM / YYYY

Residential address

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

Property/Building name (if applicable)

Unit Street number

Street name

Suburb State

Postcode Country

Postal address (if different to residential address)

A PO Box/RMB/Locked Bag is acceptable.

Property/Building name (if applicable)

Unit Street number

Street name

Suburb State

Postcode Country

Contact details

Home number (include country and area code)

Business number (include country and area code)

Mobile number (include country code)

Email address

This email address is the default address for all investor correspondence (such as transaction confirmations, statements, reports and other material).

ABN

Are you a sole trader?

☐ No ☐ Yes

If yes, what is your business name?

Tax details — Australian residents

If you are an Australian resident for tax purposes, please provide your tax file number (TFN) or reason for exemption. If you are an Australian resident and do not provide your TFN, or reason for exemption, you will be taxed at the highest marginal tax rate plus the Medicare levy.

TFN

Reason for exemption

Tax details — Non Australian residents

If you are not an Australian resident for tax purposes, please indicate your country of residence for tax purposes.

Investor 2 – Personal details

Title Full given names

Surname

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

Residential address

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

Property/Building name (if applicable)

Unit Street number

Street name

Suburb State

Postcode Country

Postal address (if different to residential address)

A PO Box/RMB/Locked Bag is acceptable.

Property/Building name (if applicable)

Unit Street number

Street name

Suburb State

Postcode Country

Contact details

Home number (include country and area code)

Business number (include country and area code)

Mobile number (include country code)

Email address

All correspondence will be sent to the address provided for investor 1.

Tax details — Australian residents

If you are an Australian resident for tax purposes, please provide your tax file number (TFN) or reason for exemption. If you are an Australian resident and do not provide your TFN, or reason for exemption, you will be taxed at the highest marginal tax rate plus the Medicare levy.

TFN

Reason for exemption

Tax details — Non Australian residents

If you are not an Australian resident for tax purposes, please indicate your country of residence for tax purposes.

If there are more than two individual investors or trustees, please provide the full name, date of birth, and residential address of each on a separate sheet and attach to this form.

3 Companies

Complete if you are investing as a company or as a trust with a corporate trustee.

Note: You are also required to complete the relevant Identification Form.

Company details

Full name of company (as registered by ASIC)

ACN or ABN (for foreign companies, provide your Australian Registered Body Number (ARBN) if you have one)

TFN

Country of residency (if a foreign company)

Registered office address

A PO Box/RMB/Locked Bag is not acceptable. If you are a foreign company, write the address of your Australian registered agent (if you have one) or else write your principal place of business.

Name of Australian registered agent (if applicable)

Property/Building name (if applicable)

Unit Street number

Street name

Suburb State

Postcode Country

Postal address (if different to above)

A PO Box/RMB/Locked Bag is acceptable.

Property/Building name (if applicable)

Unit Street number

Street name

Suburb State

Postcode Country

Contact person at company

Name

Home number (include country and area code)

Business number (include country and area code)

Mobile number (include country code)

Email address

This email address is the default address for all investor correspondence (such as transaction confirmations, statements, reports and other material).

4 Trusts or superannuation funds

Please complete if you are investing as a trust or superannuation fund. Individuals and non-corporate trustee(s) must also complete sections 2. Corporate trustees must also complete section 3.

Note: You are also required to complete the Identification Form - Trusts and Trustees.

Trust or superannuation fund details

Name of trust or superannuation fund

ABN (applicable if you are a trust or a self-managed superannuation fund registered with the Australian Tax Office)

TFN

5 Investment details and distribution instructions**Specify your initial application amount.**

There is typically a minimum investment amount of \$25,000 for the Daintree Core Income Trust and Daintree Hybrid Opportunities Fund (Managed Fund) and \$10,000 for the Daintree High Income Trust, however we may waive or vary the minimum investments.

| TRUST NAME | INVESTMENT AMOUNT \$AUD | Distribution preference (indicate preference with an X) | |
|--|----------------------------|--|----------|
| | | Pay to my bank a/c | Reinvest |
| Daintree Core Income Trust | AUS \$ | | |
| Daintree High Income Trust | AUS \$ | | |
| Daintree Hybrid Opportunities Fund (Managed Fund) | AUS \$ | | |

| TRUST NAME | INVESTMENT AMOUNT \$NZD | Distribution preference (indicate preference with an X) | |
|----------------------------|----------------------------|--|----------|
| | | Pay to my bank a/c | Reinvest |
| Daintree Core Income Trust | NZD \$ | | |
| Daintree High Income Trust | NZD \$ | | |

We will only accept application funds in their base currency.

Please indicate the source and origin of funds being invested:

☐ savings☐ investment☐ superannuation contributions☐ commission☐ donation/gift☐ inheritance☐ normal course of business☐ asset sale☐ other – write the source and origin of funds below:

6 Payment of application amount – AUD

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

☐ Electronic Funds Transfer (EFT)

☐ Direct debit

☐ BPAY®

☐ Cheque

EFT

Account name: National Nominees Limited ANF Perennial Investment Management Ltd Application

BSB: 083-043

Account number: 986145774

Your reference: [please use the name of the investor]

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 OneVue Fund Services Pty Ltd, as set out in this Request and in your Direct Debit Request Service Agreement, a copy of which is available on www.onevue.com.au.

Financial institution name

Branch name

BSB number Account number

Account name

I/We request and authorise OneVue Fund Services Pty Ltd ABN 18 107 333 308 (User ID 411595) to arrange, through its own financial institution, a debit to the nominated account as deemed payable by OneVue.

Signature of primary account holder

Please print full name

Date (DD/MM/YYYY)

Signature of joint account holder (if applicable)

Please print full name

Date (DD/MM/YYYY)

BPAY – telephone and internet banking

You can make your payment using telephone or internet banking.

You will need to quote the biller code and your account number (for reference) when making this payment. Biller codes are listed below.

| FUND | BPAY DETAILS |
|---|--|
| Daintree Core Income Trust | Biller code 269274 Reference number [AccountNumber] |
| Daintree High Income Trust | Biller code 81257 Reference number [AccountNumber] |
| Daintree Hybrid Opportunities Fund (Managed Fund) | Biller code 354662 Reference number [AccountNumber] |

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

More info: www.bpay.com.au

® Registered to BPAY Pty Ltd ABN 69 079 137 518.

Cheque

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

7 Payment of application amount – NZD

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

☐ Electronic Funds Transfer (EFT)

☐ Cheque

EFT

Account name: National Nominees Limited ANF Perennial Investment Management Limited Application Account

BSB: 02-0108

Account number: 0422600-000

Your reference: [please use the name of the investor]

Cheque

If investing by cheque, please make payable to 'NNL ANF PIML: NZD Application Account A/C Applicant Name', marked 'Not Negotiable'.

8 Financial institution account details

Australian bank account details

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

Financial institution name

Branch name

BSB number

Account number

Account name

Foreign bank account details

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

Financial institution name

Financial institution address

Account number

Account name

SWIFT/BIC

ABA/FED (US)

IBAN (Europe)

Due to the complexity of foreign bank accounts, we may need to contact you for more information.

9 Regular savings plan – Australian Bank accounts only

I/We would like to establish a regular savings plan: ☐ Yes

Monthly investment amount: \$AUD
(minimum \$200 per month)

Please complete the direct debit request in section 6 'Payment of application amount' above.

If this request is received within 5 days of when Regular Savings Plans are due to run, this Regular Savings Plan instruction will be applied on the following month.

10 Communication

Automatic online account access

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

You may receive market commentary, event invitations etc from us, from time to time. Please indicate if you do not wish to receive these communications.

Annual and semi-annual report options

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).

☐ By email ☐ By post

Marketing material

☐ You may receive market commentary, event invitations etc from us, from time to time. Please indicate if you do not wish to receive these communications.

11 Identification and verification

Please tick one box only:

- ☐ I have not previously invested in any PIML Trusts and will complete the relevant investor identification forms located at the end of this application form.
- ☐ I am an existing investor in a PIML Trusts and am not required to complete the investor identification forms located at the end of this application form.

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

12 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.

Email address

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.

Financial adviser details

Dealer group name

Adviser name

AFSL number Authorised representative number (if any)

Address

Property/Building name (if applicable)

Unit Street number

Street name

Suburb

State

Postcode Country

Postal address (if different to above)

Property/Building name (if applicable)

Unit

Street number

Street name

Suburb State

Postcode

Country

Contact details

Business number (include country and area code)

Mobile number (include country code)

Adviser signature

☐ Please select if you would like to receive an XPLAN data feed

13 Declarations and acknowledgments

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

- you have received, read and understood the current PDS
- monies deposited are not associated with crime, terrorism, money laundering or terrorism financing, nor will monies received from your account have any such association
- you are not bankrupt or a minor
- you agree to be bound by the constitution of the Trust and the PDS as supplemented, replaced or re-issued from time to time, and
- you consent to the handling of your personal information in accordance with the Privacy Act 1988 and relevant privacy policies.

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

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

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

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

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

Signature of investor 1, director or authorised signatory

Please print full name

Date (DD/MM/YYYY)

 / /

Company officer (please indicate company capacity)

- ☐ Director
- ☐ Sole director and company secretary
- ☐ Authorised signatory

Signature of investor 2, director/company secretary or authorised signatory

Please print full name

Date (DD/MM/YYYY)

 / /

Company officer (please indicate company capacity)

- ☐ Director
- ☐ Company secretary
- ☐ Authorised signatory

If you are investing jointly or are a joint trustee, please indicate whether a single investor can operate your account.

If more than one investor, all investors are required to sign this initially and provide certified identification where required.

- ☐ Yes ☐ No

Client Services contact details**Phone**

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International: +61 2 8022 7487

Email

daintree.transactions@unitregistry.com.au

Instructions: identification forms

| | |
|---|--|
| Which form? | <p>There are three forms that follow: one each for individuals, companies and trustees.</p> <p>Choose the form that is applicable to you.</p> <p>If you are a partnership, an association, a co-operative or a Government body, then contact us and we will send a more appropriate form to you.</p> |
| Copies or originals? | <p>This form asks you to send us certain documents. Please send us certified copies, not originals. We will keep what you send to us.</p> |
| Certifying copies | <p>You must have someone certify the copies you send to us. The following people can be the certifier:</p> <p>You must certify the copies you send to us by one of the following certifiers:</p> <ul style="list-style-type: none">• a Justice of the Peace• a Notary public (for the purposes of the Statutory Declaration Regulations 1993)• an agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public• a permanent employee of the Australian Postal Corporation with 2 or more years of continuous service who is employed in an office supplying postal services to the public• an officer with, or authorised representative of, a holder of an Australian financial services licence, having 2 or more continuous years of service with one or more licensees• an officer with 2 or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 1993)• a finance company officer with 2 or more continuous years of service with one or more finance companies (for the purposes of the Statutory Declaration Regulations 1993)• a member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with 2 or more years of continuous membership• a person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described)• a Judge of a court• a magistrate• a chief executive officer of a Commonwealth court• a registrar or deputy registrar of a court• a Police officer• an Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955). |
| What should the person certifying write? | <p>"I [name] of [address] being [capacity e.g. Justice of the Peace] certify this and the following [x] pages as a true copy of the original document." Each page should be initialed by the person certifying your documents.</p> |
| Not in English? | <p>Documents not in English must be accompanied by an English translation prepared by an accredited translator.</p> |

Client Services contact details

Phone

Within Australia: 02 8022 7487

International: +61 2 8022 7487

Email

daintree.transactions@unitregistry.com.au

Identification form – Individuals

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

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

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

1 Personal details

Title Full given names

Surname

Date of birth (DD/MM/YYYY)

 / /

Usual occupation

Please indicate the source and origin of funds being invested:

☐

savings

☐

investment

☐

superannuation contributions

☐

commission

☐

donation/gift

☐

inheritance

☐

normal course of business

☐

asset sale

☐

other – write the source and origin of funds below

2 Verification procedure – individual investor

Please provide a certified copy of one document from Group 1 or if you can't, a certified copy of two documents from Group 2 for each individual applicant.

Group 1

Provide a certified copy of one of these:

☐

Australian driver's licence

showing your photo, and please copy the front and back

☐

foreign driver's licence

showing your date of birth, signature and photo

☐

Australian passport

a passport that has expired within the preceding two years is acceptable, and please copy the pages which identify you

☐

foreign passport

showing your signature and photo, and please copy the pages which identify you

☐

Australian State or Territory Government issued ID card

showing your date of birth, signature and photo

☐

foreign Government issued ID card

showing your date of birth, signature and photo.

Group 2

If you can't provide anything from Group 1, then provide a certified copy of one of the following:

☐

Australian or foreign government issued birth certificate

☐

Australian or foreign government issued citizenship certificate

☐

Centrelink pension or health card

please copy the front and back.

PLUS provide a certified copy of one of the following:

☐

a Government issued notice

one which shows your name and residential address, not more than 12 months old

☐

a rates or utilities notice

one which shows your name and residential address, not more than 3 months old

☐

ATO notice

one which shows any debt owing to the ATO, your name and residential address, not more than 12 months old.

3 Signature

Signature

Please print full name

Date (DD/MM/YYYY)

 / /

Client Services contact details

Phone

Within Australia: 02 8022 7487

International: +61 2 8022 7487

Email

daintree.transactions@unitregistry.com.au

Identification form – Australian and Foreign companies

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

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

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

1 Company details

1.1 General information

Full name of company

Nature of business

1.2 Australian companies

Principal place of business (if different to registered office address).

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

Property/Building name (if applicable)

Unit

Street number

Street name

Suburb

State

Postcode

Country

Please provide us with certified copies of:

☐ an ASIC search

1.3 Foreign companies

Country of formation

Registered in Australia?

☐ No ☐ Yes – what is the ARBN

Registered in country of formation?

☐ No ☐ Yes – name of regulator/exchange

Identification number issued by foreign registration body

If you are a foreign company registered in Australia write your principal place of business in Australia or the full name and address of your Australian agent.

If you are a foreign company not registered in Australia write your registered business address in country of formation or principal place of business if there is not a registered address.

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit

Street number

Street name

Suburb

State

Postcode

Country (if not Australia)

Please provide us with certified copies of one of the following:

☐ an ASIC or foreign regulator search

☐ an ASIC or foreign regulator certificate of registration.

2 Company type

Please complete the section below for public companies (section 2.1) or private companies (section 2.2) as applicable.

2.1 Public company

Are you a public company?

☐ No ☐ Yes

If yes, please proceed to section 3.

2.2 Private company

Are you a private company?

☐ No ☐ Yes

If yes, please complete the director details section below if you are a private Australian company or a private foreign company. Do not complete for public companies.

Director details

How many directors are there?

Provide the full name of each director.

Director 1

Title

Full given names

Surname

Director 2

Title

Full given names

Surname

Director 3

Title Full given names

Surname

Director 4

Title Full given names

Surname

If there are more directors, please provide their name on a separate sheet and attach to this form.

3 Regulated/Listed companies**Are you an Australian listed company?**
☐ No ☐ Yes – please provide name of market/exchange

Market/exchange

Are you a majority-owned subsidiary of an Australian listed company?
☐ No ☐ Yes – please provide name of listed company and market/exchange

Company

Market/Exchange

Are you a regulated company?

One that which is licensed by an Australian Commonwealth, State or Territory statutory regulator.

☐ No ☐ Yes – please provide details of the regulator and licence number

Regulator

Licence number

If you answered yes to any of these questions, please provide us with a certified copy of one of the following and sign the form at the end. For you, this form is then complete.

- ☐ an ASIC search
- ☐ a search of the licence or other records of the relevant regulator
- ☐ a public document issued by the company
- ☐ a search of the relevant market/exchange

4 Non-regulated/non-listed companies

If you answered no to all the questions in section 3, please fill in the sections 4.1, 4.2 and 4.3 below.

4.1 Beneficial owner details

Provide details of all beneficial owners who are individuals who, through one or more shareholdings, ultimately own 25% or more of the company's issued BLOCK or who control (whether directly or indirectly) the company and either the date of birth or full residential address of each beneficial owner.

DEFINITION

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.

Beneficial owner 1

Title Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)

Usual occupation/Nature of business

Residential address/Registered office address

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit

Street number

Street name

Suburb

State

Postcode

Country

Beneficial owner 2

Title Full given names

Surname/Company name

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

Usual occupation/Nature of business

Residential address/Registered office address

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit Street number

Street name

Suburb State

Postcode Country

Beneficial owner 3

Title Full given names

Surname/Company name

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

Usual occupation/Nature of business

Residential address/Registered office address

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit Street number

Street name

Suburb State

Postcode Country

Beneficial owner 4

Title Full given names

Surname/Company name

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

Usual occupation/Nature of business

Residential address/Registered office address

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit Street number

Street name

Suburb State

Postcode Country

Verification procedure - beneficial owners

Please provide a certified copy of one document from Group 1 or if you can't, a certified copy of two documents from Group 2 for each individual applicant.

Group 1

Provide a certified copy of one of these:

- ☐ **Australian driver's licence**
showing your photo, and please copy the front and back
- ☐ **foreign driver's licence**
showing your date of birth, signature and photo
- ☐ **Australian passport**
a passport that has expired within the preceding two years is acceptable, and please copy the pages which identify you
- ☐ **foreign passport**
showing your signature and photo, and please copy the pages which identify you
- ☐ **Australian State or Territory Government issued ID card**
showing your date of birth, signature and photo
- ☐ **foreign Government issued ID card**
showing your date of birth, signature and photo.

Group 2

If you can't provide anything from Group 1, then provide a certified copy of one of the following:

- ☐ **Australian or foreign government issued birth certificate**
- ☐ **Australian or foreign government issued citizenship certificate**

☐ **Centrelink pension or health card**
please copy the front and back.

PLUS provide a certified copy of one of the following:

☐ **a Government issued notice**
one which shows your name and residential address, not more than 12 months old

☐ **a rates or utilities notice**
one which shows your name and residential address, not more than 3 months old

☐ **ATO notice**
one which shows any debt owing to the ATO, your name and residential address, not more than 12 months old.

For each corporate beneficial owner please provide:

☐ a completed Identification form – Australian and Foreign companies, plus any relevant identification.

4.2 Voting rights

If there are any other individuals, who have not been listed above in section 4.1, and who are entitled, either directly or indirectly, to exercise 25% or more of the company's voting rights, please provide their name, date of birth, and residential address on a separate sheet and attach to this form.

4.3 Senior Managing Official details

If the company does not have any beneficial owners, please provide the details of the Senior Managing Official (or equivalent).

Title Full given names

Surname

Date of birth (DD/MM/YYYY)

DD / MM / YYYY

Company title

Residential address/Registered office address

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit

Street number

Street name

Suburb

State

Postcode

Country

DEFINITION

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

5 Signing instructions

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

Signature of director 1

Please print full name

Date (DD/MM/YYYY)

DD / MM / YYYY

Company officer (please indicate company capacity)

☐ Director

☐ Sole director and company secretary

Signature of director 2/company secretary

Please print full name

Date (DD/MM/YYYY)

DD / MM / YYYY

Company officer (please indicate company capacity)

☐ Director

☐ Company secretary

Client Services contact details

Phone

Within Australia: 02 8022 7487

International: +61 2 8022 7487

Email

daintree.transactions@unitregistry.com.au

Identification form – Trusts and Trustees

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

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

1 Trust details

Full name of trust

Business name (if any)

Country in that the trust was established

Please indicate the source and origin of funds being invested:

☐

savings

☐

investment

☐

superannuation contributions

☐

commission

☐

donation/gift

☐

inheritance

☐

normal course of business

☐

asset sale

☐

other – write the source and origin of funds below:

2 Type of trust

2.1 Regulated trusts

This includes complying superannuation funds and SMSFs

Superannuation fund - or another type of trust registered and regulated by an Australian Commonwealth statutory regulator

☐ No ☐ Yes

If yes, please tell us:

The trust's ABN

The regulator if not APRA or the ATO

Any licence number

Registered managed investment scheme

☐ No ☐ Yes

If yes, please tell us the ARSN

Government superannuation fund

☐ No ☐ Yes

If yes, please tell us the name of the Act that regulates the trust

If you answered yes to any of these questions, then please provide a certified copy of one of the following:

- ☐ **superannuation funds**
go to www.abn.business.gov.au, select the 'Super Fund Lookup' option and print out the results for your super fund
- ☐ **registered managed investment schemes**
an ASIC search of the scheme
- ☐ **Government superannuation funds**
an extract of the establishing legislation.

2.2 Non-regulated trusts

Including family discretionary trusts, family and other unit trusts, deceased estates and charitable trusts (but not including self-managed super funds)

Is the trust a non-regulated trust?

☐ No ☐ Yes

If yes, please specify the type of trust

Please provide full name, address and date of birth of all beneficial owners who are individuals who own 25% or more of the trust income or assets or who control (whether directly or indirectly) the trust and either the date of birth or full residential address of each beneficial owner:

DEFINITION

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.

Beneficial owner 1

Title Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)

Usual occupation/Nature of business

Residential address

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit Street number

Street name

Suburb State

Postcode Country

Beneficial owner 2

Title Full given names

Surname/Company name

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

Usual occupation/Nature of business

Residential address

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit Street number

Street name

Suburb State

Postcode Country

Beneficial owner 3

Title Full given names

Surname/Company name

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

Usual occupation/Nature of business

Residential address

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit Street number

Street name

Suburb State

Postcode Country

Beneficial owner 4

Title Full given names

Surname/Company name

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

Usual occupation/Nature of business

Residential address

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit Street number

Street name

Suburb State

Postcode Country

Please provide the name of all beneficiaries that are not beneficial owners.

If the trust deed describes the beneficiaries by reference to member of a class please provide details of, the class to which the beneficiaries belong e.g. family members, unit holders, un-named charities on a separate sheet and attach to this form.

Beneficiary 1

Title Full given names

Surname

Beneficiary 2

Title Full given names

Surname

Beneficiary 3

Title Full given names

Surname

Beneficiary 4

Title Full given names

Surname

Please provide the name of the **appointor** of the trust, if applicable

DEFINITION

Appointor: the appointor has the power to appoint or remove the trustees of the trust. Not all trusts have an **appointor**.

Name of trust settlor

DEFINITION

Settlor: this is the person that creates the trust. The settlor may be, for example, your accountant or solicitor.

Note: you do not need to provide the name of the trust settlor if they are deceased, or the material asset at the time the trust was established was less than \$10,000.

If you are a non-regulated trust, please provide us with certified copies of one of the following:

- ☐ **Trust deed**
or an extract of the trust deed showing the full name of the trust and any named trust settlor
- ☐ **Other documentation**
confirming the full name of the trust and the name of the trust settlor

3 Trustee details

3.1 Verification procedure – individual trustee

Title Full given names

Surname

Date of birth (DD/MM/YYYY)

/ /

Usual occupation

Please provide a certified copy of one document from Group 1 or if you can't, a certified copy of two documents from Group 2 for each individual applicant.

Group 1

Provide a certified copy of one of these:

- ☐ **Australian driver's licence**
showing your photo, and please copy the front and back
- ☐ **foreign driver's licence**
showing your date of birth, signature and photo
- ☐ **Australian passport**
a passport that has expired within the preceding two years is acceptable, and please copy the pages which identify you
- ☐ **foreign passport**
showing your signature and photo, and please copy the pages which identify you
- ☐ **Australian State or Territory Government issued ID card**
showing your date of birth, signature and photo
- ☐ **foreign Government issued ID card**
showing your date of birth, signature and photo.

Group 2

If you can't provide anything from Group 1, then provide a certified copy of one of the following:

- ☐ **Australian or foreign government issued birth certificate**
- ☐ **Australian or foreign government issued citizenship certificate**
- ☐ **Centrelink pension or health card**
please copy the front and back.

PLUS provide a certified copy of one of the following:

- ☐ **a Government issued notice**
one which shows your name and residential address, not more than 12 months old
- ☐ **a rates or utilities notice**
one which shows your name and residential address, not more than 3 months old
- ☐ **ATO notice**
one which shows any debt owing to the ATO, your name and residential address, not more than 12 months old.

For each corporate beneficial owner please provide:

- ☐ a completed Identification form – Australian and Foreign companies, plus any relevant identification.

3.2 Verification procedure – company trustees

3.2.1. General information

Full name of company trustee

Nature of business

ACN

3.2.2. Australian company trustee

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

Property/Building name (if applicable)

Unit Street number

Street name

Suburb State

Postcode Country

3.2.3 Foreign company trustee

Country of formation

Registered in Australia?

☐ No ☐ Yes

If yes, please provide the ARBN

Registered in that country?

☐ No ☐ Yes

If yes, please provide the name of regulator/exchange

Identification number issued by foreign registration body

Registered business address in country of formation

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit Street number

Street name

Suburb State

Postcode Country (if not Australia)

Please provide us with certified copies of one of the following:

☐ an ASIC or foreign regulator search

☐ an ASIC or foreign regulator certificate of registration.

3.2.4 Company type

Please complete the section below for public companies (3.2.4 (a)) or private companies (section 3.2.4 (b)) as applicable.

3.2.4 (a) Public company

Are you a public company?

☐ No ☐ Yes

If yes, please proceed to section 3.2.5

3.2.4 (b) Private company

Are you a private company?

☐ No ☐ Yes

If yes, please complete the director details section below if you are a private Australian company or a private foreign company. Do not complete for public companies.

Director details

How many directors are there?

Provide the full name of each director:

Director 1

Title Full given names

Surname

Director 2

Title Full given names

Surname

Director 3

Title Full given names

Surname

Director 4

Title Full given names

Surname

If there are more directors, please provide their name on a separate sheet and attach to this form.

3.2.5 Regulated/Listed companies

Are you an Australian listed company?

☐ No ☐ Yes – please provide name of market/exchange

Market/Exchange

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

☐ No ☐ Yes – please provide name of listed company and market/exchange

Company

Market/Exchange

Are you a regulated company?

One which is licensed by an Australian Commonwealth, State or Territory statutory regulator.

☐ No ☐ Yes – please provide details of the regulator and licence number

Regulator

Licence number

If you answered yes to any of these questions, please provide us with a certified copy of one of the following and sign the form at the end. For you, this form is then complete.

- ☐ an ASIC search
- ☐ a search of the licence or other records of the relevant regulator
- ☐ a public document issued by the company
- ☐ a search of the relevant market/exchange

3.2.6 Non-regulated/non-listed companies

If you answered no to all the questions in section 3.2.5, please fill in the sections 3.2.6 (a), (b) and (c) below.

3.2.6 (a) Beneficial owner details

Provide details of all deneficial owners (i.e. company shareholders) who, through one of more shareholdings, own 25% or more of the company's issued BLOCK.

Beneficial owner 1

Title Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)

Usual occupation/Nature of business

Residential address

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit Street number

Street name

Suburb State

Postcode Country

Beneficial owner 2

Title Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)

Usual occupation/Nature of business

Residential address

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit Street number

Street name

Suburb State

Postcode Country

Beneficial owner 3

Title Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)

Usual occupation/Nature of business

Residential address

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit Street number

Street name

Suburb State

Postcode Country

Beneficial owner 4

Title Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)

DD / MM / YYYY

Usual occupation/Nature of business

Residential address

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit Street number

Street name

Suburb State

Postcode Country

Verification procedure - beneficial owners

Please provide a certified copy of one document from Group 1 or if you can't, a certified copy of two documents from Group 2 for each individual applicant.

Group 1

Provide a certified copy of one of these:

- ☐ **Australian driver's licence**
showing your photo, and please copy the front and back
- ☐ **foreign driver's licence**
showing your date of birth, signature and photo
- ☐ **Australian passport**
a passport that has expired within the preceding two years is acceptable, and please copy the pages which identify you
- ☐ **foreign passport**
showing your signature and photo, and please copy the pages which identify you
- ☐ **Australian State or Territory Government issued ID card**
showing your date of birth, signature and photo
- ☐ **foreign Government issued ID card**
showing your date of birth, signature and photo.

Group 2

If you can't provide anything from Group 1, then provide a certified copy of one of the following:

- ☐ **Australian or foreign government issued birth certificate**
- ☐ **Australian or foreign government issued citizenship certificate**
- ☐ **Centrelink pension or health card**
please copy the front and back.

PLUS provide a certified copy of one of the following:

- ☐ **a Government issued notice**
one which shows your name and residential address, not more than 12 months old
- ☐ **a rates or utilities notice**
one which shows your name and residential address, not more than 3 months old
- ☐ **ATO notice**
one which shows any debt owing to the ATO, your name and residential address, not more than 12 months old.

For each corporate beneficial owner please provide:

- ☐ a completed Identification form – Australian and Foreign companies, plus any relevant identification.

3.2.6 (b) Voting rights

If there are any other individuals, who have not been listed above in section 3.2.6 (a), and who are entitled, either directly or indirectly, to exercise 25% or more of the company's voting rights, please write down their full names on a piece of paper and attach to this form.

3.2.6 (c) Senior Managing Official details

If the company does not have any beneficial owners, please provide the details of the Senior Managing Official (or equivalent).

Title Full given names/Full company name

Surname

Date of birth (DD/MM/YYYY)

DD / MM / YYYY

Nature of business

Company title

Residential address

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit Street number

Street name

Suburb State

Postcode Country

DEFINITION

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

Verification procedure - senior managing official details

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

4 Signing instructions

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

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

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

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

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

Signature of trustee 1, director or authorised signatory

Please print full name

Date (DD/MM/YYYY)

 / /

Company officer (please indicate company capacity)

- ☐ Director
- ☐ Sole director and company secretary
- ☐ Authorised signatory

Signature of trustee 2, director/company secretary or authorised signatory

Please print full name

Date (DD/MM/YYYY)

 / /

Company officer (please indicate company capacity)

- ☐ Director
- ☐ Company secretary
- ☐ Authorised signatory

Client Services contact details

Phone

Within Australia: 02 8022 7487
International: +61 2 8022 7487

Email

daintree.transactions@unitregistry.com.au

Tax information form

Why you need to complete this form

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

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

Which sections of the form should you complete?

Superannuation funds, testamentary trusts, registered charities – **Section 1**

Individuals – **Section 2**

Companies and other trusts – **Section 3**

- Corporate trustee – **Section 3**
- Individual trustee – **Section 2**

What if more than one person is applying?

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

DEFINITION

Tell me about tax residence

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

Section 1 Superannuation funds and other special trusts

1. Are you a superannuation or other special type of trust?

- ☐ I am the trustee of a regulated superannuation fund, or this includes a self-managed superannuation fund
- ☐ I am a trustee of a **testamentary trust**, or
- ☐ I am a trustee of a **registered charity**

Where to now?

I ticked a box ► go to **Section 4 Signatures**

I did not tick a box ► go to **Section 2** if you are an individual, or **Section 3** if you are a company or another type of trust

DEFINITION

Regulated superannuation fund: means self-managed superannuation funds, APRA regulated superannuation funds, Australian Government or semi-government superannuation funds and pooled super trusts.

Testamentary trust: this is a trustee of a trust set up in a deceased's will.

Section 2 Individuals

Do not complete **Section 2** if you are a non-superannuation trustee or you are a company ► complete **Section 3** instead.

2. Are you a US resident for tax purposes?

- ☐ No ► go to **question 3**
- ☐ Yes – please tell us your TIN ► go to **question 3**

TIN

DEFINITION

What is a TIN?

This is short for Taxpayer Identification Number, an identification number issued or used by tax authorities. In Australia, the equivalent is the tax file number (TFN). For the US, it could for example be a US Social Security Number, a US Individual Taxpayer Identification Number or a US Employer Identification Number. In other countries, it may have a different name.

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

- ☐ No ► go to **Section 4 Signatures**
- ☐ Yes – please tell us which ones, using the following table.
► then go to **Section 4 Signatures**

DEFINITION

No TIN? Reasons we accept are:

- #1 This country does not issue TINs
- #2 I have asked for a TIN, but have not yet been given one – **you must tell us when received**
- #3 The laws of this country do not require me to disclose my TIN
- #4 I have an exemption under the laws of this country from holding a TIN – **write a code or give us details**

| Country | TIN | No TIN? Which reason? See Definition box above |
|---------|-----|---|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |

Section 3 Companies and non-superannuation trusts

4. Are you a US resident for tax purposes?

- ☐ No ► go to **question 5**
- ☐ Yes – **please tell us your TIN** ► then go to **question 5**

TIN

DEFINITION

What is a TIN?

See Definition box on the previous page.

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

- ☐ No ► go to **question 6**
- ☐ Yes – **please tell us which ones**, using the following table ► then go to **question 6**

| Country | TIN | No TIN? Which reason? See Definition box above |
|---------|-----|--|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |

6. Are you a 'financial institution'?

Be careful – financial Institution is broadly defined – see Definition box

☐ Not relevant - I wrote my TIN in question 4 ► go to **question 7**

☐ No ► go to **question 7**

☐ Yes – **please tell us your GIIN – see Definition box**

GIIN

Where to now?

I ticked **YES** and completed my GIIN ► go to **question 7**

I ticked **YES** but did not write a GIIN – tell us below why you did not write a GIIN ► then go to **question 7**

☐ Excepted Financial Institution

☐ Deemed Compliant Financial Institution

☐ Exempt Beneficial Owner

☐ Non-participating Financial Institution

☐ Non-reporting IGA Financial Institution

☐ Sponsored financial institution – their GIIN is

GIIN

7. Are you a public company listed on a stock exchange?

☐ No ► go to **question 8**

☐ Yes ► go to **Section 4 Signatures**

8. Are you 'active' or 'passive'?

☐ I am an 'active' non financial entity ► go to **Section 4 Signatures**

☐ I am a 'passive' non financial entity ► go to **question 9**

DEFINITION

What is a GIIN?

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

DEFINITION

What is a financial institution?

This includes:

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

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

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

So, as general rules:

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

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

2. **a depository institution**

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

3. **a custodial institution**

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

4. **certain prescribed entities**

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

DEFINITION

What is 'active' and 'passive'?

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

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

Generally, you will be an active NFE if:

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

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

9. Do you have any 'controlling persons' who are resident of another country for tax purposes?

☐ I am passive, and **YES** I do have controlling persons who are resident of another country for tax purposes

Complete the **controlling persons details** in the table below

► then go to **Section 4 Signatures**.

If there is not enough room in the table, please copy the page and attach it to your completed form.

☐ I am passive, but **NO** I do not have controlling persons who are resident of another country for tax purposes
It would be unusual to think of no-one. Please read the **Definition** box. If you're sure ► go to **Section 4 Signatures**.

DEFINITION

Controlling persons

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

For trusts, controlling persons includes any trustees, settlors, beneficiaries, classes of beneficiaries or any other person who has the power to effectively control the trust.

For companies, controlling persons generally include any person who holds (directly or indirectly) more than 25% of the shares in the company and any person who has the power to influence decisions about the company's financial and operating policies, such as senior managing officials or directors.

Controlling person

Title Given names

Surname

Date of birth (DD/MM/YYYY)

 / /

City and country of birth

Residential address

Number Street name

Suburb/City

State

Postcode/Zip Country

Controlling person

Title Given names

Surname

Date of birth (DD/MM/YYYY)

 / /

City and country of birth

Residential address

Number Street name

Suburb/City

State

Postcode/Zip Country

| Country of tax residence | TIN | No TIN? Which reason? See Definition at questions 3 or 5 |
|--------------------------|-----|---|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |

| Country of tax residence | TIN | No TIN? Which reason? See Definition at questions 3 or 5 |
|--------------------------|-----|---|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |

Controlling person

Title Given names

Surname

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

City and country of birth

Residential address
Number Street name

Suburb/City State

Postcode/Zip Country

| Country of tax residence | TIN | No TIN? Which reason? See Definition at questions 3 or 5 |
|--------------------------|-----|---|
| 1. | | |
| 2. | | |
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| 1. | | |
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| 4. | | |

Important information

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

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

By completing and signing this form:

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

How to sign

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

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

Signature

Please print full name

Date (DD/MM/YYYY)

Signature

Please print full name

Date (DD/MM/YYYY)