



**Client Services contact details**

**Phone**

+61 3 9660 2652

**Email**

cooperinvestors\_transactions@unitregistry.com.au

## Application form

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

**Read and ensure you understand the Information Memorandum (IM).**

The IM is available at [www.cooperinvestors.com](http://www.cooperinvestors.com). The law prohibits any person passing this Application Form on to another person unless it is accompanied by a complete IM. We will provide on request and without charge a paper or electronic copy of the current IM 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.

**Sections to be completed**

- **Application form** – Refer to the matrix on page 3 and complete relevant sections of the form
- **Identification form** – Refer to the matrix on page 11 and complete appropriate form
- **Qualified Accountant's certificate** – Complete if investing under \$500,000. We can accept externally completed certificates too.
- **Tax information form** – All investors must complete

**Certify and collect the identification documents.**

Please refer to page 11 'Instructions: identification forms' and complete the relevant identification document attached to this Application Form.

**Send your documents to us.** You can return your forms by post to:

Cooper Investors Pty Limited  
GPO Box 804  
Melbourne VIC 3001

**Make your payment.**

Please refer to section 8 'Payment of application amount'. Your application cannot be processed until all relevant identification documents and cleared funds are received.

If you are applying to invest \$500,000 or more you will automatically be deemed a wholesale investor and no additional documentation is required.

If you are an Australian investor investing **less than \$500,000 additional documentation will be required to certify that you are a wholesale investor** in the form of:

- If you are not acquiring the product in connection with a business, a current qualified accountant's certificate issued within the preceding 2 years stating that the investor has net assets of least A\$2.5 million (which may include the net assets of a company or trust controlled by the investor) or gross income for each of the last two financial years of at least A\$250,000 (which may include the gross income of a company or trust controlled by the investor).

(Please see template certificate on page 27 of the application form should you require one)

OR

A statutory declaration that the proposed investor:

- Is a trustee of a superannuation fund within the meaning of the Superannuation Industry (Supervision) Act 1993 with net assets of at least A\$10,000,000, or
- Has or controls at least A\$10,000,000 (supporting evidence must be provided including a qualified accountant's certificate or other documentation as agreed with the Manager), or
- Is a large business (is a manufacturer and employs 100 or more people or otherwise a business employing 20 or more people), or
- Holds an Australian financial services licence, or
- Is a company or a trust (including a self-managed super fund) controlled by a person who has (or if controlled by more than one person each person has) a current qualified accountant's certificate issued within the preceding 2 years stating that the person has net assets of least A\$2.5 million (which may include the net assets of a company or trust controlled by the person) or gross income for each of the last two financial years of at least A\$250,000 (which may include the gross income of a company or trust controlled by the person).

OR

If the investor is a body corporate only:

- It is a listed entity, or
- It is an APRA regulated entity (and not a trustee of a superannuation fund, approved deposit fund, pooled superannuation trust or public sector superannuation scheme in each case within the meaning of the Superannuation Industry (Supervision) Act 1993),
- It is a body registered under the Financial Sector (Collection of Data) Act 2001, or
- It is a public authority, or
- It is an instrumentality or agency of the Crown in right of the Commonwealth of Australia, in right of a State or in right of a Territory, or
- It is a body corporate (or an unincorporated body) that carries on a business of investment in financial products, interests in land or other investments and for those purposes invests funds received (directly or indirectly) following an offer or invitation to the public within the meaning of s82 of the Corporations Act, the terms of which provide for the funds subscribed to be invested for those purposes, or
- Is a related body corporate of another body corporate who is a wholesale investor.

## Politically Exposed Persons (PEP)

Anti-money laundering (AML) and counter-terrorism financing (CTF) laws require CI to ask whether you are a PEP, a family member of a PEP or a close associate of a PEP. You will be required to answer the PEP question in the section applicable to you in this application form.

### Politically Exposed Persons (PEP)

PEP	A PEP is an individual who holds a prominent public position or function in a government body or an international organisation, including: Head of State or head of a country or government, government minister or equivalent senior politician, senior government official, judge of a federal or state court of Australia, or equivalent in a foreign country or international organisation, governor of a central bank or any other position that has comparable influence to the Governor of the Reserve Bank of Australia, senior foreign representative, ambassador, or high commissioner, high-ranking member of the armed forces, or board chair, chief executive, or chief financial officer of, or any other position that has comparable influence in, any State enterprise or international organisation
Family member of a PEP	A family member of a PEP includes the PEP's parents, spouse, de facto partner, a child and a child's spouse or de facto partner.
Close associate of a PEP	A person who is known to be a close associate of a PEP (having regard to information that is public or readily available) includes anyone who has joint beneficial ownership of a legal entity or legal arrangement, or sole beneficial ownership of a legal entity or legal arrangement that is known to exist for the benefit of a PEP.

## Identify what type of Investor you are

Please note the type of investor category you fall into and complete the relevant sections of the application form accordingly.

Investor Type	Section 1	Section 2	Section 3	Section 4	Section 5	Section 6	Section 7	Section 8	Section 9	Section 10	Section 11	Section 12
Individual(s) where investing jointly or as a sole trader	✓	✓			✓	✓	✓	✓	✓	✓	✓	✓
Australian Company	✓		✓		✓	✓	✓	✓	✓	✓	✓	✓
Foreign Company	✓		✓		✓	✓	✓	✓	✓	✓	✓	✓
Individual (s) acting as a Trustee(s) of a Trust or Superannuation Fund	✓			✓	✓	✓	✓	✓	✓	✓	✓	✓
Domestic (Australian) Company acting as a Corporate Trustee of a Trust or Superannuation Fund	✓			✓	✓	✓	✓	✓	✓	✓	✓	✓
Foreign Company: Acting as a Corporate Trustee(s) of a Trust	✓			✓	✓	✓	✓	✓	✓	✓	✓	✓

\*If the above categories do not apply to you, please contact our client services team on 03 9660 2652

## 1. Are you an existing investor?

No,

Yes, the account number is

**All investors are required to complete the application form regardless of any other accounts held with Cooper Investors.**

## 2. Individuals, sole traders and individual trustees

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)  
 /  /

### 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)  
 /  /

### 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.

**Verification procedure – individual investors, sole traders and individual trustees**

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. Companies and corporate trustees

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 – Australian and Foreign companies

#### 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

TFN

Superannuation fund registered with the Australian Tax Office

## 5. Investment details and distribution instructions

### Specify your initial application amount.

There is a minimum investment amount of \$500,000 per Fund.

Indicate your distribution choice below. If you do not make an election, distributions will be reinvested.

FUND NAME	INVESTMENT AMOUNT	INVESTMENT OPTION (indicate preference with an X)	
		Pay to my bank a/c	Reinvest
CI Australian Equities Fund (CI Aust Equities Fund Class1) APIR: CIP0005AU	AUD \$	<input type="checkbox"/>	<input type="checkbox"/>
Cooper Investors Asian Equities Fund APIR: CIP0004AU	AUD \$	<input type="checkbox"/>	<input type="checkbox"/>
Cooper Investors Endowment Fund APIR: CIP0006AU	AUD \$	<input type="checkbox"/>	<input type="checkbox"/>
CI Brunswick Fund APIR: CIP0002AU (currently closed, please contact <a href="mailto:clientrelations@cooperinvestors.com">clientrelations@cooperinvestors.com</a> for further information)	AUD \$	<input type="checkbox"/>	<input type="checkbox"/>
Cooper Investors Global Endowment Fund APIR: CIP7184AU	AUD \$	<input type="checkbox"/>	<input type="checkbox"/>

Please indicate the source and origin of funds being invested:

- Saving
  Normal course of business
  Donation / Gift  
 Inheritance
  Investments
  Superannuation Contribution  
 Asset Sale
  Other

## 6. Politically Exposed Persons

A "politically exposed person" (PEP) is an individual who holds a prominent public position or function in a government body or international organisation, both within and outside Australia. This definition also extends to their immediate family members or close associates. Please provide the name of anyone that is named in this application Form as a PEP or is an immediate family member or close associate of a PEP.

FULL NAME (S)

## 7. Financial institution account details

### Australian bank account details

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

Financial institution name

Branch name

Account name

BSB number

Account number

## 8. Payment of application amount

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

EFT      Account name:      NNL ANF Cooper Investors Pty Ltd – Coopers Applications Account  
BSB:                      083-043  
Account number:      71-918-7603  
Your reference:        [please use the name of the investor]

Direct debit      **We will debit your nominated bank account listed in Section 7.**  
**Please ensure that sufficient funds are available in the bank account prior to requesting a direct debit**

I/We,  request and authorise National Nominees Limited, User ID 327900 to arrange, through its own financial institution, a debit to your nominated account any amount National Nominees Limited has deemed payable by you.

This debit or charge will be made through the Bulk Electronic Clearing System (BECS) from your account held at the financial institution you have nominated below and will be subject to the terms and conditions of the Direct Debit Request Service Agreement.

By signing and/or providing us with a valid instruction in respect to your Direct Debit Request, you have understood and agreed to the terms and conditions governing the debit arrangements between you and National Nominees Limited as set out in this Request and in your Direct Debit Request Service Agreement.

### Signing Instructions:

- Individual investor: Where the investment is in one name, the investor must sign.
- Joint investors: Where the investment is in more than one name, all investors must sign. All subsequent instructions will require the signature of all joint investors.
- Company: Must sign either: (a) where the company has a sole director who is also the sole company secretary, this form must be signed by that person. or (b) by two directors or director and company secretary; or (c) by a sole director/sole secretary (where applicable). Please state your name & role in the company beneath your signature (e.g. Director, Secretary, Sole Director). Please provide a signatory list (if applicable)
- Trusts: 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 (POA): If signed under a POA, please ensure that you have provide us an original certified copy of the POA agreement as well as an originally certified copy of the attorney's driver's licence, passport or other photo identification which confirms their name, address and contains their signature must be attached to this form. The attorney certifies that they have not received notice of revocation of that power.

Signature of bank account holder (if signing for a company, sign and print full name and capacity for signing eg. director)

Address

  

Date (DD/MM/YYYY)

 /  / 

Signature of bank account holder (if signing for a company, sign and print full name and capacity for signing eg. director)

Address

  

Date (DD/MM/YYYY)

 /  /



## 9. 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.

### 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.

Please add me or my authorised nominee to the following distribution lists:

- Weekly Unit Price Reports  
 Monthly Performance Report  
 Quarterly Commentary Reports

## 10. Financial adviser details

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

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

## 11. Declarations and acknowledgments

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

- you have received, read and understood the current IM
- 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 Fund and the IM 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.

## 12. Signing instructions

**Individual** — Where the investment is in one name, the investor must sign.

**Joint Holding** — Where the investment is in more than one name, all investors must sign. All subsequent instructions will require the signature of all joint investors.

**Companies** — Must sign either: (a) where the company has a sole director who is also the sole company secretary, this form must be signed by that person. or (b) by two directors or director and company secretary; or (c) by a sole director/sole secretary (where applicable). Please state your name & role in the company beneath your signature (e.g. Director, Secretary, Sole Director). Please provide a signatory list (if applicable)

**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 (POA):** If signed under a POA, please ensure that you have provide us an original certified copy of the POA agreement as well as an originally certified copy of the attorney's driver's licence, passport or other photo identification which confirms their name, address and contains their signature must be attached to this form. The attorney certifies that they have not received notice of revocation of that power.

### Signing Authority:

**Please tick to indicate signing requirements for future instructions (e.g. withdrawals, change of account details, etc.)**

- Only one investor required to sign
- All investors must sign

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

**Client Services contact details****Phone**

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**Email**

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# Identification forms

## Instructions

**Which form?**

There are two forms that follow: one for companies and one for trusts. Choose the form that applicable to you.

The matrix below highlights the section of this form that are applicable to each investor type.

Investor Type	Identification form - Australian and Foreign companies	Identification form - Trusts and Trustees
Domestic (Australian) Company	✓	
Foreign Company	✓	
Foreign Company: Acting as a Corporate Trustee(s) of a Trust		✓
Trust: Individual(s) acting as a Trustee(s) of a Trust or Superannuation Fund		✓
Trust: Domestic (Australian) Company acting as a Corporate Trustee of a Trust or Superannuation Fund		✓

Individual(s) & Sole Traders do not need to fill out an identification form.

If you are a partnership, an association, a co-operative or a Government body, please contact us and we will send you the relevant form.

**Copies or originals?**

This form asks you to send us certain documents. Please send us certified copies, not originals. We will keep what you send to us.

The person who is authorised to certify documents must sight the original and the copy and ensure both documents are identical. Documents must be either certified on all pages, or certified on the front page with a clear reference to the number of subsequent pages that are included.

The certification must include the following details:

- Certified True Copy' written/stamped on the document, in original ink;
- Signature of certifying party in original ink;
- Printed Name of certifying party;
- Qualification of certifying party;
- Date of certification.

Individuals are not permitted to certify their own documents.

Email copies of the relevant customer identification documents are not accepted

**Certifying copies**

You must have someone certify the copies you send to us. The following people can be the certifier: You must certify the copies you send to us by one of the following certifiers:

**Legal**

- a person who is enrolled on the roll of 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 Public Notary / a Justice of the Peace

**Post Office**

- 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

**Finance corporations (bank, building society, credit union)**

- a bank / building society / credit union / finance company officer with two or more continuous years of service
- an officer with, or authorised representative of, a holder of an Australian Financial Services Licence, having two or more continuous years of service with one or more licensees

**Accountant**

- a fellow of the National Tax Accountants' Association; or
- a member of any of the following:
  - a) Chartered Accountants Australia and New Zealand;
  - b) the Association of Taxation and Management Accountants;
  - c) CPA Australia;
  - d) the Institute of Public Accountants

**Other**

- Police officer / Pharmacist / Medical practitioner / Veterinarian.
- 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).
- an architect
- a financial adviser or financial planner
- a midwife
- a migration agent registered under Division 3 of Part 3 of the Migration Act 1958
- an occupational therapist
- an engineer who is:
  - (a) a member of Engineers Australia, other than at the grade of student; or
  - (b) a Registered Professional Engineer of Professionals Australia; or
  - (c) registered as an engineer under a law of the Commonwealth, a State or Territory; or
  - (d) registered on the National Engineering Register by Engineers Australia

**For a full list of Authorised persons, please refer to Statutory Declarations Regulations 2018 at <https://www.legislation.gov.au/Details/F2018L01296>**

<b>What should the person certifying write?</b>	"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 initialled by the person certifying your documents.
<b>Not in English?</b>	Documents not in English must be accompanied by an English translation prepared by an accredited translator.

**Client Services contact details**

**Phone**

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**Email**

cooperinvestors\_transactions@unitregistry.com.au

## Identification form – Australian and Foreign companies

**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.

Include this identification form and certified copies of your ID documents with your initial application

## 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, incorporation or registration

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 and principal place of business if it is not the same.

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. Please go to the Tax Information form.

- 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 shares or who control (whether directly or indirectly) the company and either the date of birth or full residential address of each beneficial owner.

**HELP**

**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)  
 /  /

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)  
 /  /

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)  
 /  /

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.

#### 4.2 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)  
 /  /

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

#### HELP

**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)  
 /  /

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)  
 /  /

Company officer (please indicate company capacity)

- Director  
 Company secretary

**Client Services contact details**

**Phone**

+61 3 9660 2652

**Email**

cooperinvestors\_transactions@unitregistry.com.au

## Identification form – Trusts and Trustees

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

No  Yes

If yes, please specify the type of trust

Is the trustee a custodian for the purposes of AML/CTF law?

No  Yes

If yes, please complete section

If no, 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:

### 1.1 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](http://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.

**Non-regulated trusts**

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

#### HELP

**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)

DD / MM / YYYY

Usual occupation/Nature of business

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**

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**

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

**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

### HELP

**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**

### HELP

**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, or you are a custodian for the purposes of AML/CTF laws.

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

## 2. Trustee details

### 2.1 Verification procedure – individual

trustee Title Full given names

Surname

Date of birth (DD/MM/YYYY)

Usual occupation

#### 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 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.

## 2.2 Verification procedure – corporate trustees

### 2.2.1. General information

Full name of corporate trustee

Nature of business

ACN

### 2.2.2. Australian corporate trustee

Place of business (and registered office address if different)

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

Property/Building name (if applicable)

Unit

Street number

Street name

Suburb

State

Postcode

Country

### 2.2.3 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.

### Company type

Please complete the section below for public companies (2.2.4 (a)) or private companies (section 2.2.4 (b)) as applicable.

#### 2.2.4 (a) Public company

Are you a public company?

No  Yes

If yes, please proceed to section 2.2.5

#### 2.2.4 (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.

### 2.2.5 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

### 2.2.6 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.

#### 2.2.6 (a) Beneficial owner details

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

##### 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

#### 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.

#### 2.2.6 (b) 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)

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

**HELP**

**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).

**3. Custodians**

Only complete this section if you are acting in the capacity of a trustee and providing a custodial or depository service of the kind described in item 46 of table 1 in subsection 6(2) of the AML/CTF Act.

**Do you hold an Australian Financial Services Licence?**

No  Yes, AFSL number:

If no, are you exempt under the *Corporations Act 2001* from the requirement to hold such a licence?

No  Yes - please specify the basis for exemption:

**Are your name and enrolment details entered on the Reporting Entities Roll?**

No  Yes

If no, do you satisfy one of the 'geographical link' tests in subsection 6(6) of the AML/CTF Act?

No  Yes - please specify which test:

**Have you carried out all applicable customer identification procedures and ongoing customer due diligence requirements in accordance with Chapter 15 of the AML/CTF Rules in relation to your underlying customers?**

No  Yes

**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

# Qualified Accountants Certificate (template certificate if needed)

## Client details

Name

Address

Contact details

ACN/ABN details (if applicable)

## Qualified Accountant details

Name

Address

Contact details

CA/ CPA/ NIA Membership Number

Date (DD/MM/YYYY)

 /  / 

I certify that as at the date of this certificate the following is true and correct, in every particular:

I am a qualified accountant within the meaning of section 9 of the Corporations Act 2001 (Cwlth).<sup>1</sup> This certificate is given at the request of the Client whose name and address are set out above in relation to the provision of financial products or services proposed to be made by Cooper Investors Pty Ltd ("CI") to the Client.

The Client is a person who has, or the Client is a company or trust controlled by a person who has:

- net assets of at least A\$2.5 million (which may include the net assets of a company or trust controlled by the Client); or
- gross income for each of the last 2 financial years of at least A\$ 250,000 a year (which may include the gross income of a company or trust controlled by the Client).

This certificate is given to CI for the purposes of section 761G(7)(c) of the Corporations Act.

Or

- The Client is an individual or a company that has or controls gross assets of at least A\$10 million (including any assets held by an associate (as such term is defined in the Corporations Act) or under a trust that the Client manages).

Please print full name

Signature

1. For the purposes of the Corporations Act, a "qualified accountant" means a person who:
- a. is a member of CPA Australia ("CPAA") who is entitled to use the post-nominals "CPA" or "FCPA", and is subject to and complies with CPAA's continuing professional education requirements;
  - b. is a member of The Institute of Chartered Accountants in Australia ("ICAA"), who is entitled to use the post-nominals "CA", "ACA" or "FCA", and is subject to and complies with the ICAA's continuing professional education requirements;
  - c. is a member of the National Institute of Accountants ("NIA"), who is entitled to use the post-nominals "PNA", "FPNA", "MNIA" or "FNIA", and is subject to and complies with the NIA's continuing professional education requirements; or
  - d. (i) is a member of the:
    - American Institute of Certified Public Accountants;
    - Association of Certified Chartered Accountants (United Kingdom);
    - Canadian Institute of Chartered Accountants;
    - Institute of Chartered Accountants of New Zealand;
    - The Institute of Chartered Accountants in England and Wales;
    - The Institute of Chartered Accountants in Ireland;
    - The Institute of Chartered Accountants in Scotland; and(ii) has at least three years of practical experience in accounting or auditing; and
  - (iii) is resident in the same country (being a country other than Australia) as the Client.

# 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.

### HELP

#### Tell me about tax residence

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

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

## 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

### HELP

**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

### HELP

#### 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**

HELP

**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 HELP 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

HELP

What is a TIN?

See HELP 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 HELP box above
1.			
2.			
3.			
4.			

6. Are you a 'financial institution'?

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

- Not relevant - I wrote my TIN in question 4 ► go to **question 6**
- No ► go to **question 7**
- Yes – **please tell us your GIIN – see HELP 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**

HELP

What is a GIIN?

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

HELP

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](http://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.

HELP

What is 'active' and 'passive'?

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

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

Generally, you will be an active NFE if:

- your stock (or a related entity's stock) is regularly traded on established securities market
- less than 50% of your gross income for the previous reporting period was passive income and less than 50% of your assets during that period produce or were held to produce passive income
- you are a Governmental entity, an international organisation, a central bank or an entity wholly owned by one of the above
- you are exempt from income tax in your residential jurisdiction and were established and operated exclusively for religious, charitable, scientific, artistic, athletic or educational purposes and meet certain other specific criteria, 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 **HELP** box.  
 If you're sure ► go to **Section 4 Signatures**.

**HELP**

**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
<input type="text"/>	<input type="text"/>
Surname	
<input type="text"/>	
Date of birth (DD/MM/YYYY)	
<input type="text"/>	<input type="text"/>
City and country of birth	
<input type="text"/>	
Residential address	
Number	Street name
<input type="text"/>	<input type="text"/>
Suburb/City	State
<input type="text"/>	<input type="text"/>
Postcode/Zip	Country
<input type="text"/>	<input type="text"/>

**Controlling person**

Title	Given names
<input type="text"/>	<input type="text"/>
Surname	
<input type="text"/>	
Date of birth (DD/MM/YYYY)	
<input type="text"/>	<input type="text"/>
City and country of birth	
<input type="text"/>	
Residential address	
Number	Street name
<input type="text"/>	<input type="text"/>
Suburb/City	State
<input type="text"/>	<input type="text"/>
Postcode/Zip	Country
<input type="text"/>	<input type="text"/>

1.			
2.			
3.			
4.			

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

[Redacted]	
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

[Redacted]	
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

[Redacted]	
1.	
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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

[Redacted]	
1.	
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**Important information**

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

It is a condition of investing that you keep your details (including tax 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)