

Application Form

Maple-Brown Abbott Funds

WHO SHOULD COMPLETE THIS FORM?

- Investors opening a new account with Maple-Brown Abbott (existing investors need to complete the Additional Application Form, which is available at maple-brownabbott.com/document-library)
- · Individuals or sole traders, investing on their own behalf
- Investments made by trustees of Self Managed Superannuation Funds (SMSF)
- Regulated & Unregulated Trusts
- Domestic & Foreign companies investing on their own behalf

Each applicant must complete the relevant section of the form and provide the identification documents required for verification purposes. All applicants should begin at section 1 and complete this Application Form and the relevant Customer Identification Form using capital letters.

HOW TO COMPLETE THIS FORM

Step 1 Before submitting this form, please read and ensure you have understood the Product Disclosure Statement (PDS) and the Additional Information Booklet (AIB) for the fund(s) you wish to invest in which is available at maple-brownabbott.com/document-library. If you are unable to access the link or print the document, contact us on 1300 097 995.

Units in a fund will only be issued following acceptance of a valid Application Form issued with the relevant PDS, with all required documents attached.

Online applications:

Please complete online and then print to sign using a black pen.

Manual applications:

Please print, use black pen and write in BLOCK letters. If you make an error do not use correction fluid, instead, cross out your error and initial your changes.

Note: Please ensure all relevant fields are completed.

Step 2 Collect and certify identification documents

Please complete the relevant Customer Identification Form:

- Individuals (including Joint Holdings or Sole Traders) (page 12)
- SMSFs (page 18)
- Trusts & Companies (page 22)

Step 3 Tell us your foreign tax status

Please complete the Global Tax Reporting (FATCA/CRS) information.

Step 4 Sign and send your documents to the below address.

Please ensure you sign all relevant section of the form in accordance with the instructions provided.

You can return your forms by post to:

Maple-Brown Abbott

GPO Box 804, Melbourne VIC 3001

Step 5 Make your payment

Please refer to section 4 of the Application Form and follow the instructions on how to pay the application amount.

Your application cannot be processed until all relevant identification documents and funds are received.

IMPORTANT INFORMATION

- Please ensure all relevant fields are completed. If you do not complete all relevant sections your application may be rejected and returned to you for completion, resulting in a delay in processing your application.
- If you have any questions as you complete this form, please refer to the FAQs at the end of this form, or contact us on 1300 097 995.

Section 1	Your investment ob	iectives
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The following questions may assist Maple-Brown Abbott in meeting its regulatory obligations by determining whether this financial product is being offered to the stated target market.

A. Was this investment made based on personal advice received from your financial adviser?	
Yes - please ensure that details of your financial adviser are completed in section 6	
No - please complete the questions below	
B. What is your primary investment objective in relation to this investment? (select only one option)	
Capital growth . You seek to invest in a product designed or expected to generate capital return over the investment timeframe. You prefer exposure to growth assets (such as shares or property) or otherwise seeks an investment return above the current inflation rate.	
Capital preservation. You seek to invest in a product designed or expected to have low volatility and minimise capital loss. You prefer exposure to defensive assets that are generally lower in risk and less volatile than growth investments (this may include cash or fixed income securities).	
Income distribution. You seek to invest in a product designed or expected to distribute regular and/or tax effective income. You prefer exposure to income-generated assets (this may include high dividend-yielding equities, fixed income securities and money market instruments).	
C. What is your investment timeframe in relation to this investment? (select only one option)	
Up to and including 2 years (i.e. Short term)	
More than 2 years but less than 5 years (i.e. Medium term)	
Equal to 5 years but less than 7 years (i.e. Medium to long term)	
Equal to 7 years or more (i.e. Long term)	

D. Under normal circumstances, within what period do you expect to be able to access your funds for this investment? (select only option)	y one
Within one week	
Within one month	
Within three months	
Within one year	
E. What percentage of your total investable assets are you directing into this fund (i.e. the total assets you have available for investable excluding your residential home)? (select only one option)	stment,
Solution/Standalone (up to 100%)	
Solution/Standalone (up to 100%) Major allocation (up to 75%)	
Major allocation (up to 75%)	
Major allocation (up to 75%) Core component (up tp 50%)	
Major allocation (up to 75%) Core component (up tp 50%) Minor allocation (up to 25%)	

Section 2 Investor details
What is the full legal name of the entity, individual or sole trader that will hold title of the units?
Full name of account designation

Section 3 | Investment details & Distribution instructions

Specify your initial application amount and indicate your distribution choice below.

Fund name	APIR	Fund IR minimum ¹	Investment	Distribution option ² (indicate (X) one option per fund)	
runa name	APIR	AUD\$	amount AUD\$	Pay to my bank a/c	Reinvest
Asian equities					
Asian Investment Trust	MPL0003AU	\$20,000			
Australian small companies					
Australian Small Companies Fund	MPL1241AU	\$20,000			
Australian value equities					
Australian Equity Trust	MPL0002AU	\$500,000			
Australian Share Fund - Wholesale	ADV0046AU	\$100,000			
Australian Value Opportunities Fund	MPL1039AU	\$20,000			
Global emerging markets					
Global Emerging Markets Equity Fund	MPL4768AU	\$20,000			
Global listed infrastructure					
Global Listed Infrastructure Fund	MPL0006AU	\$20,000			
Global Listed Infrastructure Fund - Hedged	MPL0008AU	\$20,000			
Multi-asset					
Diversified Investment Trust	MPL0001AU	\$20,000			
Sustainable					
Australian Sustainable Future Fund	MPL0544AU	\$20,000			

 $^{^1}$ Minimum investment amounts may be varied at our discretion and we may decline an application in the Fund(s) without giving a reason.

 $^{^{\}rm 2}\,\mbox{If}$ you do not make an election, distributions will be reinvested.

Account name: OFS ARF Maple Brown Abbott Limited Applications Account BSB: 083-001 Account number: 76-381-0597 Your reference: please use the name of the investor BPAY® - Telephone & Internet Banking You can make your payment using telephone or internet banking. You will need to quote the biller code and your investor number (for reference) when making this payment. If this is your first application into a Maple-Brown Abbott Fund, we will notify you of your investor number once we have received your completed Application Form. Once you receive your investor number make your BPAY® payment immediately. Initial applications made by BPAY® will be processed once we receive your funds. We will not issue units until we receive the money from your financial institution. Although your BPAY® transaction is processed from your financial institution account immediately, your funds may take some time to be transferred to us from your financial institution. Typically, if your BPAY® request is made before your financial institution's cut-off time (usually Spm Sydney time), we will receive your funds the following Business Day. Contact your bank or financial institution to make this payment from your cheque, savings, debit or transaction account.	Savings		L
Commission Donation/gift Inheritance Normal course of business Sale of assets (e.g. shares, property) Other Section 4 Payment of application amount Select your payment method and complete the relevant section if applicable. All payments must be made in AUD. EFT BPAY® (poyment limit of \$250,000) EFT Electronic funds transfer Account name: OFS ARF Maple Brown Abbott Limited Applications Account BSB: 083-001 Account number: 76-381-0597 Your reference: please use the name of the investor BPAY® - Telephone 6 Internet Banking You can make your payment using telephone or internet banking. You will need to quote the biller code and your investor number (for reference) when making this payment. If this is your first application into a Maple-Brown Abbott Fund, we will notify you of your investor number once we have received your completed Applications Form. Once you receive your investor number make your BPAY® payment immediately. Initial applications made by BPAY® will be processed once we receive your funds. We will not issue units until we receive the money from your financial institution. Although your BPAY® transaction is processed from your financial institution account immediately, your funds out the other time to be transferred to us from your financial institution account immediately, your funds out the following Business Day. Part of the payment was a payment from your financial institution account immediately, your funds the following Business Day.	Investment		
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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	EFT Account name: BSB: Account number: Your reference: BPAY® - Telephone You can make your You will need to que If this is your first of	Electronic funds transfer OFS ARF Maple Brown Abbott Limited Applications Account 083-001 76-381-0597 please use the name of the investor 6 Internet Banking payment using telephone or internet banking. ote the biller code and your investor number (for reference) when making this payment. pplication into a Maple-Brown Abbott Fund, we will notify you of your investor number once we have received your	
More info www.bpay.com.au ®Registered to BPAY Pty Ltd ABN 69 079 137 518	EFT Account name: BSB: Account number: Your reference: BPAY® - Telephone You can make your You will need to que If this is your first of completed Applications your financial instite may take some time	Electronic funds transfer OFS ARF Maple Brown Abbott Limited Applications Account 083-001 76-381-0597 please use the name of the investor 6 Internet Banking payment using telephone or internet banking. the the biller code and your investor number (for reference) when making this payment. pplication into a Maple-Brown Abbott Fund, we will notify you of your investor number once we have received your investor. Once you receive your investor number make your BPAY® payment immediately. made by BPAY® will be processed once we receive your funds. We will not issue units until we receive the money froution. Although your BPAY® transaction is processed from your financial institution account immediately, your funde to be transferred to us from your financial institution. Typically, if your BPAY® request is made before your financial.	om nds
	EFT Account name: BSB: Account number: Your reference: BPAY® - Telephone You can make your You will need to que If this is your first of completed Applica nitial applications your financial instit may take some tim nstitution's cut-off	Electronic funds transfer OFS ARF Maple Brown Abbott Limited Applications Account 083-001 76-381-0597 please use the name of the investor 6 Internet Banking payment using telephone or internet banking. the the biller code and your investor number (for reference) when making this payment. pplication into a Maple-Brown Abbott Fund, we will notify you of your investor number once we have received your inno Form. Once you receive your investor number make your BPAY® payment immediately. made by BPAY® will be processed once we receive your funds. We will not issue units until we receive the money froution. Although your BPAY® transaction is processed from your financial institution account immediately, your funds to be transferred to us from your financial institution. Typically, if your BPAY® request is made before your financial time (usually 5pm Sydney time), we will receive your funds the following Business Day.	om nds

Fund name	BPAY® details
Maple-Brown Abbott Asian Investment Trust	Biller code: 310656 Reference number: Investor number
Maple-Brown Abbott Australian Equity Trust	Biller code: 310748 Reference number: Investor number
Maple-Brown Abbott Australian Share Fund - Wholesale	Biller code: 310714 Reference number: Investor number
Maple-Brown Abbott Australian Small Companies Fund	Biller code: 379974 Reference number: Investor number
Maple-Brown Abbott Australian Sustainable Future Fund	Biller code: 310631 Reference number: Investor number
Maple-Brown Abbott Australian Value Opportunities Fund	Biller code: 364992 Reference number: Investor number
Maple-Brown Abbott Diversified Investment Trust	Biller code: 310649 Reference number: Investor number
Maple-Brown Abbott Global Emerging Markets Equity Fund	Biller code: 379982 Reference number: Investor number
Maple-Brown Abbott Global Listed Infrastructure Fund	Biller code: 310672 Reference number: Investor number
Maple-Brown Abbott Global Listed Infrastructure Fund - Hedged	Biller code: 310680 Reference number: Investor number

Section 5 | Financial institution 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.

Australian bank account details

Financial institution name	Branch name
Account name	
BSB number	Account number

NZ bank account details	
Financial institution name	Financial institution address
Account number	Account name
SWIFT	
If you do not provide bank account details, distributions will be reinves	sted.
Section 6 Financial adviser details	
Use this section to tell us about your financial adviser. If you change <code>i</code> If you would like your financial adviser to receive copies of your states	
Adviser email address	
Operating your account	
No Yes - Please complete section 7 (Authorised Representative of Information	do with your investment, except appoint another person to operate your financial adviser to operate your account, or if your financial or they advise us in writing that the appointment has terminated. idered reasonable, and may change the terms on which they operate ions of your appointed financial adviser, and agree to ratify their ation form, you are confirming that you hold a current Australian
Details	
AFSL name	AFSL number
	7 to 2 hamsel
Adviser name	
Authorised representative licence number	ABN
Address	
Property/building name	
Unit Street number Street name	
Suburb State	Postcode Country

Phone		Mobile	
Signature		Advisor	stamp
Section 7 Aut	horised representative of investor		
	e appointed an entity as your authorised representativ		act on your behalf in relation to your investment in the ontact us on 1300 097 995 to obtain the relevant Customer
7.1 Authorised	representative details		
Authorised repre	esentative 1		
Title	Given name(s)		Surname
Mobile number (including country code)*		
Email*			
Signature			
Ath a.uiaa.d.ua	acceptative Q		
Authorised repre			
Title	Given name(s)		Surname
Mobile number (including country code)*		
Email*			
	nce will be sent to the first email address provided abo	ve.	
Signature			
If you wish to ap application form	point more than two authorised representatives, pleas n.	se complete	e the details on a separate sheet and attach to this
	uired. By providing this email address you agree to rec orts and other materials) by email.	ceive all inv	vestor correspondence (such as transaction confirmations,

7.2 How authorised representative may act in relation to the account?
Tick applicable
Each authorised representative listed above may provide instructions in relation to the investment individually without the consent of the other
All authorised representatives must act jointly to provide instructions in relation to the investment
Other arrangement - please provide details
7.3 Verification procedure for authorised representatives who are individuals
For each authorised representative, please provide verification documents in accordance with the verification procedure in section 2 of the Individual Customer Identification form. In addition, please provide evidence of each authorised representative's authority to act on behalf of the investor. Please tick the document(s) you have provided.
Verification documents - mandatory
A certified copy of ID as per the verification procedure in section 2 of the Individual Customer Identification Form
Authorised representative's authority - one of the following (not required for a Financial Adviser listed in Section 6)
Certified copy of the authorising document (e.g. POA); or
A certified copy of a guardianship order; or
Other arrangement - please provide details
I confirm that the document authorising each authorised representative is still valid and has not been revoked
Section 8 Communication
Automatic online account access
Online access enables you to view details of your investments (account balance, investment details and account statements). We will send you the necessary registration details by post once your application is processed.
Note: You may receive marketing material (e.g. market commentary, event invitations) from us, from time to time. Please indicate below if you do not wish to receive these communications.
Annual & semi-annual report
The annual and any semi-annual financial statements of the fund are available free on our website.
Marketing Material
You may receive information from us via mail, telephone, email or other electronic messaging service relating to market commentary, services or information that may be of interest to you. By providing us with your contact details you consent to being contacted by these methods for these purposes. Please indicate if you do not wish to receive marketing information from us.

Section 9 | Declarations & Acknowledgments

By signing this application form:

- I/We acknowledge that I/we have received, read in full and understood the current PDS including the AIB for the fund(s) I/we have selected and agree to be bound by the terms of the PDS and the terms of the relevant Constitution(s), each as supplemented, amended, replaced or re-issued from time to time
- I/We acknowledge that I/we have read and understand the target market determination for the fund and I/we consider the level of risk associated with holding an investment in the fund is appropriate for my/our individual risk and return profile
- I/We acknowledge that Maple-Brown Abbott Limited does not guarantee the capital value or the investment performance of any fund
- I/We acknowledge that investments in the fund(s) are subject to investment risks, including possible delays in repayment and loss of
 income and principal invested
- I/We acknowledge that I/we have read the section in the AIB titled 'Protecting your privacy' and agree that Maple-Brown Abbott may
 collect, use, disclose, and handle my/our personal information in the manner set out in that section
- I/We declare that all the details given on this Application Form are true and correct, and the relevant customer identification has been included
- I am/we are aware that failure to provide all necessary information and identification may delay the processing of my/our application
- I/We warrant that I/we am/are not a United States citizen(s) or a resident(s) of the United States for taxation purposes (US Person), nor do I/we act on behalf of or for the benefit of any US Person unless otherwise disclosed and I/we agree to promptly notify Maple-Brown Abbott if I/we become a US Person
- I/We will provide all identification and verification materials that may be required at any time for the purposes of complying with the Anti-Money Laundering and Counter-Terrorism Financing Rules Instrument 2007 (AML/CTF Act)
- I/We will provide any representations that Maple-Brown Abbott may require at any time for the purposes of complying with its
 ongoing obligations under the United States of America legislation Foreign Account Tax Compliance Act 2010 or corresponding
 Australian legislation
- I/We acknowledge that the appointment of an authorised representative is governed by the terms set out in the AIB
- I/We acknowledge and agree that any information accessed by an online portal about my/our investment may not be reliable, accurate or secure, and should not be relied on when making investment decisions. To the extent permitted by law we are not liable for any error on any such online portal
- I/We confirm that, if I am/we are applying for units on behalf of another person, I/we have notified Maple-Brown Abbott that I/we are acting as a trustee or agent (as applicable) of the beneficial owner(s) and of the identity of the beneficial owner(s)
- I/We confirm that, if I am/we are natural person(s), I am/we are at least 18 years of age.

Section 10 | Signature(s) Please refer below to the signature requirements based on the investor type. **Investor Type** Signature Requirement Individual (including Joint Holding or Sole Trader) All investors must sign All individual trustee(s) must sign Individual Trustee(s) Two (2) directors, or a director and a company secretary. If signed by authorised Trusts / Companies representative(s), the requirement is as per their delegation. Signature 2 Signature 1 Signature Signature Date (DD/MM/YY) Date (DD/MM/YY) Full name Full name Capacity Capacity Investor 1 Investor 2 Director Director Company Secretary Company Secretary Trustee (individual) Trustee (individual) **Authorised Representative Authorised Representative** Signature 3 Signature 4 Signature Signature Date (DD/MM/YY) Date (DD/MM/YY) Full name Full name Capacity Capacity Investor 3 Investor 4 Director Director Company Secretary Company Secretary Trustee (individual) Trustee (individual) **Authorised Representative Authorised Representative**



Individual Customer Identification Form

1. INVESTOR DETAILS					
Complete all details below in respect of the individual(s) or sole	e trader(s) that will l	nold legal title to th	e units.		
Investor 1 - Personal details					
Title Given name(s)		Surname			
Business name (if sole trader)					
ABN (if any, for sole trader)					
Date of birth (DD/MM/YYYY) / / / / / / / / Occupation					
Residential address (or, if you are a sole trader, principal place	of business) - (A PO	D 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 not acceptable)					
Property/building name (if applicable)					
Unit Street number Street name					
Suburb	State	Postcode	Country		
Contact details Home number (including country and area code) Mobile number (including country code)*					
Email*					

*This field is required. By providing this email address you agree to receive all investor correspondence (such as transaction confirmations, statements, reports and other materials) by email.

Tax details - Australian residents

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

TFN			Reason	for exemption	
Investor 2 - Pe	rsonal details (only if there	is more than one investo	r)		
Title	Given name(s)			Surname	
Date of birth (D	DD/MM/YYYY)				
Occupation					
Discourse	ADM ((f and)				
Please provide	your ABN (if any)				
Posidential add	dress - (A PO Box/RMB/Loc	kad Bag is not googstable	റി		
	ing name (if applicable)	ked bag is not acceptable			
Unit	Street number	Street name			
Suburb		St	ate	Postcode	Country
	(if different to residential	address) - (A PO Box/RME	3/Locked Bag i	is not acceptable)	
Property/buildi	ing name (if applicable)				
Unit	Street number	Street name			
					_
Suburb		St	ate	Postcode	Country
Contact details					
Home number	(including country and are	a code)	Mobile n	number (including o	country code)*
Email*					
All corresponde	ence will be sent to the firs	t email address provided	above.		

*This field is required. By providing this email address you agree to receive all investor correspondence (such as transaction confirmations, statements, reports and other materials) by email.

Tax details - Australian residents If you are an Australian resident for tax purposes, please provide your tax file number (TFN) or a reason for exemption. If you are an Australian resident and do not provide your TFN, or a reason for exemption, you will be taxed at the highest marginal tax rate plus the Medicare levy. TFN Reason for exemption If there are more than two individuals, please complete a separate Individual Customer Identification Form signed by each additional applicant and submit it together with this form. 2. VERIFICATION PROCEDURE If you cannot meet the requirements of option A, please follow the instructions in option B. **OPTION A** Provide a certified copy* of one of the following: Current Australian Driver's Licence containing a photo of the person (scan the front and back) Current Australian Passport or an Australian Passport that has expired within the preceding 2 years is acceptable Current Australian State or Territory Government Identity Card showing the person's date of birth, photo and signature Current Foreign Government Identity Card showing the person's date of birth, photo and signature** Current Foreign Driver's Licence showing the person's date of birth, photo and signature** Current Foreign Passport showing the person's date of birth, photo and signature** **OPTION B** If you can't provide any document from option A, then please provide a certified copy* of one document from group 1 and one document from group 2. **GROUP 1** Birth Certificate or birth extract issued by an Australian State or Territory Australian Government issued Citizenship Certificate Current Pensioner Concession Card or Health Care Card issued by Centrelink (scan the front and back) **GROUP 2** Commonwealth, State or Territory Government Notice within the preceding 12 months and recording the provision of financial Australian Taxation Office Notice within the preceding 12 months and recording the debt payable to or by the individual by or to (respectively) the ATO Local Government or Utilities Provider Statement within the preceding 3 months and recording the provision of services

If the investor is below the age of 18, please contact us on 1300 097 995.

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

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

3. GLOBAL TAX REPORTING REQUIREMENTS (FATCA/CRS)

Why you need to complete this section?

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

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

3.1 Tax Residence - Individual/Sole Trader

HELP

Tell me about tax residence

3.1.1 Individual - Investor 1

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.

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

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

Are you a US resident for tax purposes?
No No
Yes - please tell us your 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.
Are you a resident of any other country for tax purposes?
Other than the US or Australia
No No
Yes - please tell us which ones, using the following table.
HELP
No TIN? Reasons we accept are:
Reason A: The country of tax residency does not issue TINs to its tax residents

	Country or jurisdiction of tax residency	TIN	No TIN? Which reason? If Reason B has been selected please provide an explanation. See above HELP box.			
1						
2						
3						
4						
3.1.2	Individual - Investor 2					
Are y	ou a US resident for tax purposes?					
	No Yes - please tell us your	TIN.				
the	s is short for Taxpayer Identification Numbe	or example be a US Social Security	or used by tax authorities. In Australia, the equivalent is Number, a US Individual Taxpayer Identification Number t name.			
Are y	ou a resident of any other country for tax	purposes?				
	than the US or Australia					
	No Yes - please tell us which ones, using the f	ollowing table.				
	HELP					
	TIN? Reasons we accept are: Ison A: The country of tax residency does r	not issue TINs to its tax residents				
	son B: The entity/individual has not been i son C: The country of tax residency does i					
	Country or jurisdiction of tax residency	TIN	No TIN? Which reason? If Reason B has been selected please provide an explanation. See above HELP box.			
1						
2						
3						
4						

THIS IS THE END OF THIS SECTION. PLEASE ENSURE YOU HAVE COMPLETED ALL SECTIONS.



SMSF Customer Identification Form

1. TRUST/FUND DETAILS	
Full name of trust/superannuation fund	
Full business name (if any) of the trustee in respect of the trust/superant	nuation fund
Country of establishment	
Tax file number or exemption code	Australian Business Number (if any)
2. TRUSTEE DETAILS	
Note: A Self-managed Super Fund (SMSF) must have a minimum of two individual or corporate. Where the trustee is corporate, all members of than four (4) trustees, please complete section 2 of another application	the SMSF are directors of the corporate trustee. If there are more
How many trustees does the SMSF have?	
Type of trustee	
Individual trustee (complete section 2.1) Corporate to	ustee (complete section 2.2 & 2.3)
2.1 Individual trustee(s) details	
Individual trustee 1	
Title Given name(s)	Surname
Date of birth (DD/MM/YYYY)	
Residential address - (A PO Box/RMB/Locked Bag is not acceptable)	
Unit Street number Street name	
Suburb State	Postcode Country
Phone	Mobile number (including country code)*
Email*	

Individual trustee	2			
Title	Given name(s)		Surname	
Date of birth (DD/	/MM/YYYY) / / /			
Residential addre	ess - (A PO Box/RMB/Locked Bag	is not acceptable)		
Unit	Street number Stree	et name		
Suburb		State	Postcode	Country
Phone		Mobile	number (including c	ountru codo)*
Phone		Mobile	number (including d	ountry code)
Email*				
to distribute house to a	2			
Individual trustee				
Title	Given name(s)		Surname	
Date of birth (DD/	/MM/YYYY)			
Date of Siltin (BB)	, , , ,			
Residential addre	ess - (A PO Box/RMB/Locked Bag	is not acceptable)		
Unit	Street number Stree	et name		
Suburb		State	Postcode	Country
Dhana		Mobile	aumhar (in aludina a	
Phone		Mobile i	number (including c	ountry code)
Email*				
Individual trustee	: 4			
Title	Given name(s)		Surname	
		,		
D . (1:11 (DD)	MANAGO (1)			
Date of birth (DD/	(MM/YYYY) / / / / /			
		is not acceptable)		
Residential addre	ess - (A PO Box/RMB/Locked Bag			
	ess - (A PO Box/RMB/Locked Bag	is not acceptable) et name		
Residential addre	ess - (A PO Box/RMB/Locked Bag	et name	Doobood-	Country
Residential addre	ess - (A PO Box/RMB/Locked Bag		Postcode	Country
Residential addre	ess - (A PO Box/RMB/Locked Bag	et name	Postcode	Country

Phone	Mobile number (including country code)*
Email*	
*This field is required. By providing this email address you agree to statements, reports and other materials) by email.	to receive all investor correspondence (such as transaction confirmations,
2.2 Corporate trustee details	
Full business name as registered by ASIC	ACN
Registered Office Address - (PO Box is not acceptable)	
Unit Street number Street name	
Suburb St	State Postcode Country
Principal place of business (if any) (PO Box is not acceptable)	
Unit Street number Street name	
Suburb St	State Postcode Country
Contact person at trustee	
Title Given name(s)	Surname
Date of birth (DD/MM/YYYY)	
Residential address - (A PO Box/RMB/Locked Bag is not acceptable	ıle)
Unit Street number Street name	
Suburb St	State Postcode Country
Phone	Mobile
Email*	

*This field is required. By providing this email address you agree to receive all investor correspondence (such as transaction confirmations, statements, reports and other materials) by email.

2.3 What	type of company is the corporate trust	zee?
Public (com	npanies whose name does NOT include	the word Pty or proprietary; generally listed companies)
Proprietary	(companies whose name ends with Pr	oprietary Ltd or Pty Ltd; also known as private companies)
Please comp	plete the director details below if you a	re an Australian proprietary company. Do not complete for public companies.
Directors de	tails	
How many d	irectors are there?	
	de below the full name of all the directory of this application form.	ors. If there are more than four directors, please complete the details on a separate sheet
Director 1		
Title	Given name(s)	Surname
Email*		Mobile number (including country code)*
Director 2		
Title	Given name(s)	Surname
Email*		Mobile number (including country code)*
Director 3		
Title	Given name(s)	Surname
Email*		Mobile number (including country code)*
Director 4		
Title	Given name(s)	Surname
		Sumano
Email*		Mobile number (including country code)*
		masile marries (mercaning additing added)

3. GLOBAL TAX REPORTING REQUIREMENTS (FATCA/CRS)

Why you need to complete this section?

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

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

21	Dean	lated	Superc	annuation	Funde
J.L	Regu	lluteu	ouperd	annuation	runus

Are you a regulated superannuation fund?
I am the trustee of a regulated superannuation fund (this includes a self-managed superannuation fund)
HELP
Regulated superannuation fund means self-managed superannuation funds, APRA regulated superannuation funds, Australian
Government or semi-government superannuation funds and pooled super trusts.

THIS IS THE END OF THIS SECTION. PLEASE ENSURE YOU HAVE COMPLETED ALL SECTIONS.



Trusts & Companies Customer Identification Form

Please complete this section if you are: • An individual acting in your capacity as trustee of a trust, or • A company acting in your capacity as a trustee of a trust. For guidance about when you may be acting as a trustee and for whom, please refer to the FAQs at the back of this form.		
1.1 Trust details		
Full name of trust. If the trust for which you act as a trustee does not have a name, please insert N/A		
Type of trust		
Business name (if any) of the trustee of the trust Country in which the trust was established		
Nature of business		
1.2 Type of trust		
1.2.1 Custodian		
1.2.1 Custodian No - go to 1.2.2		_
1.2.1 Custodian	No	Yes
1.2.1 Custodian No - go to 1.2.2	No	Yes
1.2.1 Custodian No - go to 1.2.2 Yes - please complete the questions below. Do you provide a custodial or depository service of the kind described in item 46 of table 1 in subsection 6(2)	No	Yes
No - go to 1.2.2 Yes - please complete the questions below. Do you provide a custodial or depository service of the kind described in item 46 of table 1 in subsection 6(2) of the AML/CTF Act 2006 (Cth)? (i.e. to the underlying investor not your related body corporate) Do you hold an AFSL or are you exempt from the requirement to hold such license? If Yes, AFSL Number or	No	Yes
No - go to 1.2.2 Yes - please complete the questions below. Do you provide a custodial or depository service of the kind described in item 46 of table 1 in subsection 6(2) of the AML/CTF Act 2006 (Cth)? (i.e. to the underlying investor not your related body corporate) Do you hold an AFSL or are you exempt from the requirement to hold such license? If Yes, AFSL Number or specify the grounds for exemption Are you enrolled as a reporting entity with AUSTRAC, or do you satisfy one of the 'geographical link' tests in	No	Yes

Regulated trust				
1.2.2 Registered MIS - is the trust for which you are the trustee a registered m	anaged investment scheme?			
No - go to 1.2.3				
Yes - please tell us the ARSN.				
Now go to section 2.				
1.2.3 Unregistered MIS - unregistered managed investment scheme (where the scheme is not registered by ASIC; has only wholesale clients and does not make small scale offering to which section 1012E of the Corporations Act applies)				
No - go to 1.2.4				
Yes - please provide the ABN for the unregistered managed investment	scheme.			
Trust ABN or registration/licence number				
Now go to 1.4 , then section 2 .				
1.2.4 Government superannuation fund - is the trust for which you are the tru by legislation?	stee a government superannuation fund established			
No - go to 1.2.5				
Yes - please tell us the name of the Act that establishes the fund				
Now go to 1.4, then section 2.				
1.2.5 Other regulated trust (a trust registered and subject to the regulatory over to its activities as a trust)	ersight of a Commonwealth statutory regulator in relation			
Note: This includes registered charities with the ACNC, superannuation fund public sector superannuation schemes (within the meaning of the Superann SMSF, please use the stand alone application form for SMSF.				
No - go to 1.3				
Yes - please provide the details below, then go to section 2 .				
Provide name of regulator (eg ASIC, APRA, ATO & ACNC) Provide	de the Trust's ABN or registration/licensing details			
If you answered NO to all of the questions in 1.2, then go to 1.3.				
Unregulated trusts				
1.3 All other unregulated trusts - this includes family trusts, testamentary tru nominee and sub-custodian entities that do not qualify as a custodian under 1.				
Trust ABN (if any) Trust	TFN (if any)			
Now go to 1.3.1 .				

1.3.1 Beneficiary details (class of ben	eficiaries)	
Do the terms of the trust describe the	beneficiaries by reference to members o	of a class?
No - please go to 1.3.2		
	ne class to which the beneficiaries belonç	g (e.g. family members, unit holders, un-named charities). Ther
go to Settlor details 1.3.3 .		
For a nominee or sub-custodian		
The beneficiary is the person or enti	ity for whom the applicant holds its intere	ests in the Fund.
1.3.2 Beneficiary details (specified be		
	w (using the applicable section for individu ne details in a separate sheet and attach	uals or companies). If there are more beneficiaries than there to this application form.
Individual beneficiary 1	·	•
Title Given name(s)		Surname
Individual beneficiary 2		
Title Given name(s)		Surname
Individual beneficiary 3		
Title Given name(s)		Surname
Individual beneficiary 4		
Title Given name(s)		Surname
Corporate Beneficiary 1		
Company name	ACN	
Corporate Beneficiary 2	101	
Company name	ACN	
Company name	ACN	
Company name	AGN	
Corporate Beneficiary 4 Company name	ACN	
	, AGN	
1.3.3 Settlor details		
The settlor may be the person or en	tity that provided the applicant with fund	s to make the investment and may be specified in the trust
		appointed the applicant as nominee or sub-custodian.

	he name of the settlor of the trust (unless they are deceased o st was established was less than \$10,000).	r the material asset contribution to the trust by the set	ttlor at
Title	Given name(s)	Surname	
Related body co	rporate		
1.4 Trust verifi	cation procedures		
1.4.1 Did you an	swer yes to any of the questions in 1.2.2 -1.2.5?		
No - please	e go to 1.4.3		
Yes - pleas	se go to 1.4.2 .		
1.4.2 Verification	n procedure for regulated trusts		
Please provide a	copy of the document(s) as set out below.		
	unregistered managed investment scheme which only has who E of the Corporations Act applies (you answered yes in 1.2.3)	plesale clients and does not make small scale offering	s
A letter confirm	ing these details from an external lawyer or accountant		
The relevant of	fer document for the scheme in English		
For regulated G	overnment superannuation funds (you answered yes in 1.2.4)		
An extract of th	e establishing legislation, sourced from a government website.		
Now go to sectio	n 2.		
1.4.3 Verification	n procedure for unregulated trusts		
Trust deed			
	of the trust deed/will or if not reasonably available a certified stees, and settlor(s) where applicable; or	extract * of the trust deed that includes the name	
A letter from an	accountant or solicitor verifying the name, existence of the tro	ust and the name of the settlor(s) where applicable	
•	iance for nominees and sub-custodians		
	ed on the ACIP and OCDD performed by a member of your design attach a signed AML/CTF compliance letter from the entity the		
*Please see the I	FAQs at the back of this form for the meaning of certified copy	and certified extract.	
Now go to sectio	n 2.		

2. TRUSTEE DETAILS

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

For unregulated trusts, please provide:

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

2.1 Type of trust	ee					
The trustee	es are all individuals - go to 2	2.2.				
The trustee	e is a company - go to 2.3 .					
2.2 Individual tr	ustee details					
Individual truste	e 1					
Title	Given name(s)			Surname		
Date of birth (DD	/MM/YYYY)/	/		Occupation		
Residential addr	ess - (A PO Box/RMB/Locked	d Bag is not accep	table)			
Unit	Street number	Street name				_
					•	
Suburb			State	Postcode	Country	
Contact details						
Phone			Mobi	ile number (including	country code)*	
Email*						
Individual truste	e 2					
Title	Given name(s)			Surname		
Date of birth (DD	/MM/YYYY) /			Occupation		
Residential addr	ess - (A PO Box/RMB/Locked	d Bag is not accep	table)			
Unit	Street number	Street name				
			.			
Suburb			State	Postcode	Country	

Contact details	Mahila mumhan (inaludina anumhuu anda)*
Phone	Mobile number (including country code)*
Email*	
All correspondence will be sent to the first email address provided ab	ove.
*This field is required. By providing this email address you agree to restatements, reports and other materials) by email.	eceive all investor correspondence (such as transaction confirmations,
2.3 Corporate trustee details	
Corporate trustee 1	
Company name	ACN
Registered office address - (A PO Box/RMB/Locked Bag is not accept	able)
Property/building name (if applicable)	
Unit Street number Street name	
Suburb State	e Postcode Country
Now go to section 3 .	
3. COMPANY DETAILS	
Note: You must complete this section as though Corporate trustee :	I listed above is the applicant
Please complete this section if you are: • A company investing on your own behalf, or • A corporate trustee.	riisted above is the applicant.
Full legal name of company as registered by ASIC	ACN
Nature of business	
Nuture of business	
Do you have an authorised signatories list (ASL)?	Yes - For the ASL to be valid, please provide all the requirements below
A certified copy of the ASL with the full name, position and signature	e of each authorised representative
A certified copy of the authorising document (e.g. Power of Attorney	
Please tick to confirm the authorising document or Power of Attorne	ey is still valid and it has not been revoked

Do you have a verifying officer? No Yes - Please provide all of the following
Full name of verifying officer
Date of birth (DD/MM/YY)
verifying officer residential address
certified copy of your ID (see section 5)
letter of appointment in company's letterhead signed by an authorised person
confirm I have:
 Identified the authorised representatives or signatories of the above customer in accordance with requirements of the AML/CTF Act and have provided with this form the full name and signature of each authorised representative or signatory (ASL). collected the following details from each authorised representative or signatory: full name of authorised representative/signatory title of the position/role held by the authorised representative/signatory with the customer a copy of the authorised representative/signatory's signature; and evidence of the authorised representative/signatory's authorisation to act on behalf of the customer
 made a record of the above details for each authorised representative/signatory which will be retained by the customer.
Signature of Verifying Officer
Date (DD/MM/YY)
you are an Australian company, go to 3.1 .
you are a foreign company, go to 3.2 .
3.1 Australian company
egistered office address - (A PO Box/RMB/Locked Bag is not acceptable)
roperty/building name (if applicable)
nit Street number Street name
State Fostered Country
rincipal place of business address (if different to registered office address) - (A PO Box/RMB/Locked Bag is not acceptable)
roperty/building name (if applicable)
nit Street number Street name
uburb State Postcode Country

Unit	Street number	Street name	i Bag is not accep	otablej	
Suburb			State	Postcode	Country
ACN			ABN		
Contact person	at company				
Name					
Phone			Mobile)	
Email*					
	uired. By providing this e orts and other materials)		ee to receive all i	nvestor correspond	lence (such as transaction confirmations,
Now go to 3.3.					
3.2 Foreign co	ompany				
Country of form	ation				
Registered in Au	stralia? No	Yes - please provide	below the ARBN		
Registered in co	untry of formation?	No Yes - Nar	ne of foreign regi	stration body and i	dentification number (if any)
	gn company registered in authorised representa		ovide your princi	pal place of busines	ss in Australia, or the full name and address
	gistered in Australia, plec ce of business in the cou		full address of th	ne company as regi	stered by the foreign registration body or
A PO Box/RMB/I	ocked Bag is not accept	able.			
Unit	Street number	Street name			
Suburb			State	Postcode	Country
Postal address (if different to registered	office address) - (A P	O Box/RMB/Lock	ed Bag is not accep	otable)
Unit	Street number	Street name			
Suburb			State	Postcode	Country

Contact persor	n at company	
Name		
Phone (include	country and area code)	Mobile (include country code)
Email*		
	quired. By providing this email address you agree to ports and other materials) by email.	receive all investor correspondence (such as transaction confirmations,
Now go to 3.3.		
3.3 Type of c	company	
Are you a publi	ic company or a private/proprietary company?	
Private/pi	roprietary company – please go to 3.4	Public company - please go to 3.5 .
3.4 Private/F	Proprietary company	
Please complete		proprietary company or a foreign private company. Do not complete for
How many dire	ctors are there?	
Please provide sheet and attac	below the full name of all the directors. If there are achieved to this application form.	more than four directors, please complete the details on a separate
Director 1 Deta		
Title	Given name(s)	Surname
Email*		Mobile number (including country code)*
Director 2 Deta	nile	
Title	Given name(s)	Surname
Email*		Mobile number (including country code)*
Director 3 Deta	nile	
Title	Given name(s)	Surname
Email*		Mobile number (including country code)*
Director 4 Deto		Surnama
Title	Given name(s)	Surname
Email*		Mobile number (including country code)*
Liliuli		Mobile Humber (including country code)

^{*}This field is required. By providing this email address you agree to receive all investor correspondence (such as transaction confirmations, statements, reports and other materials) by email.

3.5 Public company	
Are you an Australian listed company?	
No - please go to 3.6 Yes - please provide name of the market/exchange on which the company is listed	
Listed company name Market/exchange	
Now go to 3.8.	
3.6 Majority owned subsidiary of an Australian public listed company	
Are you a majority-owned subsidiary of an Australian publicly listed company?	
No - please go to 3.7	
Yes – please provide name of the parent listed company and the market/exchange on which the company is listed	
Listed company name Market/exchange	
New rate 20	
Now go to 3.8.	
3.7 Regulated company	
This only includes companies that are licensed by an Australian Commonwealth, State or Territory statutory regulator and are subjregulatory oversight for example, Australian Financial Services Licensees (AFSL), Australian Credit Licensees (ACL) and Registrable Superannuation Entity (RSE) Licensees.	
Are you a regulated company?	
No - please go to 3.9 Yes - please provide details of the regulator and licence number below	
Regulator Licence number	
Now go to 3.8.	
3.8 Verification procedures for regulated companies	
If you have answered Yes to 3.6, please provide evidence of being a majority or wholly owned subsidiary of a listed company by providing a copy of one or more of the following:	
ASIC company extract	
company annual statement	
certified company share structure	
a public document issued by the relevant company	
3.9 Verification process for all other company types	
Please provide evidence of beneficial ownership by providing a copy of one or more of the following:	
ASIC or foreign company extract	
company annual statement	
certified company share structure	
a public document issued by the relevant company	

4. BENEFICIAL OWNER

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

You must complete this section if you are an unregulated company and you have answered no to:

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

You are exempt from completing section 4 if you are a regulated company or:

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

Market/exchange Listed company name

A beneficial owner is an individual who ultimately owns (directly or indirectly) 25% or more of the customer, or controls (directly or indirectly) the customer (see FAQs). If you cannot identify any beneficial owners, please go to the fallback procedure at 4.2.

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

4.1 Beneficial o	wner(s) details			
Beneficial owner	1			
Title	Given name(s)	Surname		
Residential addre	ess - (A PO Box/RMB/Locked Bag is not acceptable)			
Date of birth (DD/	/MM/YYYY) / / / / / / / / / / / / / / / / /			
Beneficial owner	2			
Title	Given name(s)	Surname		
Residential addre	ess - (A PO Box/RMB/Locked Bag is not acceptable)			
Date of birth (DD/	(MM/YYYY) / / / / / / / / / / / / / / / / /			
Beneficial owner	3			
Title	Given name(s)	Surname		
Residential address - (A PO Box/RMB/Locked Bag is not acceptable)				
Date of birth (DD/	/MM/YYYY) / / / / / / / / / / / / / / / / /			
Beneficial owner	4			
Title	Given name(s)	Surname		

Residential address - (A PO Box/RMB/Locked Bag is not acceptable)
Date of birth (DD/MM/YYYY) / / / / / / / / / / / / / / / / /
4.2 Fallback procedure
If you are a company (investing on your behalf) or corporate trustee and cannot identify any beneficial owners, please complete 4.2.1.
4.2.1 Senior managing official
Please provide the details of the senior managing official (or equivalent) (please see FAQs for the meaning of 'senior managing official') Title Given name(s) Surname
Date of birth (DD/MM/YYYY) / / / / / Company Title
Residential address - (A PO Box/RMB/Locked Bag is not acceptable)
Unit Street number Street name
Suburb State Postcode Country
4B Beneficial owner of the trust
You must complete this section if you are an unregulated trust. The beneficial owner of a trust is an individual who controls (directly or indirectly) the operations of the trust and has power to appoint or remove the trustee(s) of the trust. You are exempt from completing this section if: You are a custodian and the beneficial owner is the underlying investor(s). If not, complete 4.2.2.
4.2.2 Beneficial owner of the trust (individual with power to appoint or remove trustees)
Please provide the details of the individual who directly or indirectly controls the Trust. If this is confirmed to be the same individual as trustee, he/she must be listed again below to confirm the trust's beneficial owner.
Title Given name(s) Surname
Date of birth (DD/MM/YYYY) / / / / /
Company title
Residential address - (A PO Box/RMB/Locked Bag is not acceptable)
Unit Street number Street name
Suburb State Postcode Country
Please follow the verification procedure in section 5 , unless the individual is already providing the ID as a trustee or beneficial owner of the corporate trustee.

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

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

OPTION A

Provide a certified copy* of one of the following:	
Current Australian Driver's Licence containing a photo of the person (scan the front and back)	
Current Australian Passport or an Australian Passport that has expired within the preceding 2 years is acceptable	
Current Australian State or Territory Government Identity Card showing the person's date of birth, photo and signature	
Current Foreign Government Identity Card showing the person's date of birth, photo and signature**	
Current Foreign Driver's Licence showing the person's date of birth, photo and signature**	
Current Foreign Passport showing the person's date of birth, photo and signature**	
OPTION B	
If you can't provide any document from option A, then please provide a certified copy* of one document from group 1 and one document from group 2.	
GROUP 1	
Birth Certificate or birth extract issued by an Australian State or Territory	
Australian Government issued Citizenship Certificate	
Current Pensioner Concession Card or Health Care Card issued by Centrelink (scan the front and back)	
GROUP 2	
Commonwealth, State or Territory Government Notice within the preceding 12 months and recording the provision of financial benefits	
Australian Taxation Office Notice within the preceding 12 months and recording the debt payable to or by the individual by or to (respectively) the ATO	
Local Government or Utilities Provider Statement within the preceding 3 months and recording the provision of services	
If the investor is below the age of 18, please contact us on 1300 097 995.	

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

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

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

Why you need to complete this section?

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

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

HELP

Tell me about tax residence

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

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

6.1 Companies and non-superannuation trusts					
6.1.1 Are you a specified US person for tax purposes?					
No					
Yes - please tell us your 1	TIN				
6.1.2 Are you a resident of an	y other country for tax purpo	oses? Other than the US	or Australia.		
No					
Yes - please tell us which	ones, using the following tal	ole			
No TIN? Reasons we accept are: Reason A: The country of tax residency does not issue TINs to its tax residents Reason B: The entity/individual has not been issued with a TIN Reason C: The country of tax residency does not require the TIN to be disclosed					
Country or jurisdiction of	of tax residency	TIN	No TIN? Which reason? If Reason B has been selected please provide an explanation. See above HELP box.		
1					
2					
3					
4					
6.1.3 Are you a financial institution? Be careful - "Financial Institution" is broadly defined - see HELP box No Yes - please tell us your GIIN* - see HELP box.					

HELP

What is a Financial Institution?

For further details about a Financial Institution, please refer to the ATO's AEOI Guidance - https://www.ato.gov.au/general/international-tax-agreements/in-detail/international-arrangements/automatic-exchange-of-information---crs-and-fatca/?page=2#2_Financial_institutions.

HELP

What is a GIIN?

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

Please refer to https://www.irs.gov/businesses/corporations/fatca-registration-and-ffi-list-giin-composition-information.

Where to now?	
I ticked yes and completed my GIIN - go to 6.1.4 . I ticked yes and I am a Managed Investment Entity in a non-CRS participating jurisdiction - If no, proceed to question 6.1.4 . I ticked yes but did not write a GIIN - please tick below why you did not write a GIIN - then go to 6.1.4 .	
Exempted financial institution	
Deemed compliant financial institution	
Exempt beneficial owner	
Non-participating financial institution	
Non-reporting IGA financial institution	
Sponsored financial institution - their GIIN is	
Other	
6.1.4 Are you a public company listed on a stock exchange or a related entity of a publicly listed company or a governmental entity? No Yes - this form is now complete.	
6.1.5 Are you active or passive?	
I am an 'active' non financial entity - this form is now complete.	
I am a 'passive' non financial entity - go to section 6.1.6 .	

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.

6.1.6 Do you have any controlling persons who are resident of another country or jurisdiction of tax residency for tax purposes?								
I am passive, and yes I do have controlling persons who are resident of a country or jurisdiction other than Australia for tax purposes								
Complete the controlling persons details in the table below - then go to section 11 and 12 of the application form. If there is not enough room in the table, please copy the page and attach it to your completed form.								
I am passive, but no I do not have controlling persons who are resident of a country or jurisdiction other than Australia for tax purposes. It would be unusual to think of no-one. Please read the HELP box. If you are sure - go to section 11 and 12 of the application form.								
HELP Controlling persons Controlling persons are natural persons who exercise control over an entity. For trusts, the settlor(s), the trustee(s), the protector(s) (if any), and the beneficiary(ies) or class(es) of beneficiaries, must always be treated as Controlling Persons of a trust, regardless of whether or not any of them exercises control over the trust for FATCA/CRS purposes. For companies, controlling persons generally include any person who holds (directly or indirectly) more than 25% of the shares in the company and any person who has the power to influence decisions about the company's financial and operating policies, such as senior managing officials or directors.								
Controlling perso	n l							
Title	Given name(s)			Surname				
Date of birth (DD/	/MM/YYYY) /	City and country	y of birth					
Residential address								
Unit	Street number	Street name						
Suburb			State	Postcode	Country			

	Country or jurisdiction of tax residency	TIN	No TIN? Which reason? If Reason B has been selected please provide an explanation. See 6.1.2 HELP box.			
1						
2						
3						
4						
Contr	Controlling person 2					
			Surname			
Date	Date of birth (DD/MM/YYYY) City and country of birth					
Residential address						
Unit	Street number Street name					
0		Obsta	Destands Occurrent			
Subui	ro	State	Postcode Country			
	Country or jurisdiction of tax residency	TIN	No TIN? Which reason? If Reason B has been selected please provide an explanation. See 6.1.2 HELP box.			
1	Country or jurisdiction of tax residency	TIN				
1 2	Country or jurisdiction of tax residency	TIN				
	Country or jurisdiction of tax residency	TIN				
2	Country or jurisdiction of tax residency	TIN				
3 4	Country or jurisdiction of tax residency olling person 3 Given name(s)					
2 3 4 Contr	olling person 3 Given name(s)		please provide an explanation. See 6.1.2 HELP box.			
2 3 4 Contr	olling person 3 Given name(s)		please provide an explanation. See 6.1.2 HELP box.			
2 3 4 Contr	olling person 3 Given name(s) of birth (DD/MM/YYYY) cential address		please provide an explanation. See 6.1.2 HELP box.			
2 3 4 Contr Title Date of the control of the contro	olling person 3 Given name(s) of birth (DD/MM/YYYY) ential address Street number St	ity and country of birth	please provide an explanation. See 6.1.2 HELP box. Surname			
2 3 4 Contribute Date of Resid	olling person 3 Given name(s) of birth (DD/MM/YYYY) ential address Street number St	ity and country of birth	please provide an explanation. See 6.1.2 HELP box.			

	Country or jurisdiction of tax residency	TIN	No TIN? Which reason? If Reason B has been selected please provide an explanation. See 6.1.2 HELP box.				
1							
2							
3							
4							
Control Title	Controlling person 4 Title Given name(s) Surname						
Date	Date of birth (DD/MM/YYYY) City and country of birth						
Resid	Residential address						
Unit	Street number S	treet name					
Subu		State	Postcode Country				
Suburb		Ottate	- Odding				
	Country or jurisdiction of tax residency	TIN	No TIN? Which reason? If Reason B has been selected please provide an explanation. See 6.1.2 HELP box.				
1							
2							
3							
4							

FAQs

What should a trust deed extract include?

An extract of the trust deed should include the following information:

- the full name (if any) of the trust;
- the full name of the trustee(s), and
- the full name of the settlor of the trust.

Who is a senior managing official'?

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

Who is a 'beneficial owner'?

A beneficial owner is an individual who ultimately owns (directly or indirectly) 25% or more of the customer, or controls (directly or indirectly) the Customer. Control includes control as a result of, or by means of, trusts, agreements, arrangements, understandings and practices, whether or not having legal or equitable force and whether or not based on legal or equitable rights, and includes exercising control through the capacity to determine decisions about financial and operating policies.

Information that may assist you in determining your beneficial owner includes (as relevant):

- a certificate of incorporation of a company with ASIC/and or an annual statement including the amendments submitted to ASIC
- a trust deed
- a partnership agreement
- the constitution and/or certificate of information for an incorporated association, or
- the constitution of a registered co-operative.

Determining the beneficial owner of a trust

A beneficial owner of a trust may include:

- any individual shareholder who holds the legal title to 25% or more of the issued shares in the trustee;
- directors of the trustee (if they own or control the trustee)
- · company secretary of the trustee (if they own or control the trustee), and/or
- any other individual who has the power to appoint or remove the trustee as the trustee of the trust.

For a nominee that has been appointed by a related body corporate to hold interests in the fund on trust, the nominee agreement may specify the beneficial owner. This may be (but is not necessarily) the person that appointed the nominee.

For a foreign company making an investment as a custodian under a single trust with multiple beneficiaries, the trust document under which the custodian is appointed may specify the beneficial owner/s.

For a foreign company making an investment acting as a custodian for multiple trusts with multiple underlying investors, each trust document with each underlying investor may specify the beneficial owner/s.

Guidance on types of trusts

You will be the trustee of a trust if you are an individual or a company that will hold interests in the fund on trust for another person or persons (known as the beneficiary). It is important to carefully consider who is the beneficiary of the trust for which you are the trustee, keeping in mind that the beneficiary may hold its interest on trust for someone else (i.e. there may be layers of trust relationships down to the underlying investor).

Trustees may include:

- Trustees of a managed investment scheme: Managed investment schemes are a type of trust. The trustee of a managed investment scheme is generally a company. If the managed investment scheme is registered with ASIC, the trustee is known as the responsible entity.
- Custodians or nominees: These are companies that provide custodial or depository services. In the context of
 managed investment schemes, custodians or nominees may hold interests on trust for the responsible entity of the
 scheme. The responsible entity for the scheme then holds interests on trust for the investors in that scheme.
- Trustees of self managed super funds: SMSFs are a type of trust. The trustee of an SMSF may be a company or two to six individuals. If the trustee is a company, there can be one to six members (or beneficiaries) of the SMSF and each member of the SMSF must be a director of the company trustee. If the trustees are individuals, there can be two to six members (or beneficiaries) of the SMSF and each of those members must be a trustee.
- Trustees of retail super funds: Retail super funds are a type of trust. The trustee of a retail super fund is a company.
- Trustees of family trusts: The trustee of a family trust may be one ore more individuals or a company or other type of
 entity. The trustee holds money or property for the beneficiaries of the family trust.
- Trustees of charitable trusts: Some charities are structured as trusts. Trustees of charitable trusts are commonly
 individuals (for example, a board of trustees) or a company. Other charities may be structured as companies or
 associations.
- Trustees of deceased estates and testamentary trusts: Testamentary trusts are discretionary trusts established in
 wills, that allow the trustees of each trust to decide, from time to time, which of the nominated beneficiaries (if any)
 may receive the benefit of the distributions from that trust for any given period.

Translating documents by an accredited translator

In Australia an accredited translator means a professional translator accredited by the National Accreditation Authority for Translators and Interpreters (NAATI) at or above professional level.

• NAATI (https://www.naati.com.au/)

In an overseas country, an accredited translator is a professional translator accredited by a NAATI equivalent authority. For these, escalate to the AML compliance officer for assistance.

Getting your copies or extracts certified

Any document(s) requiring certification for verification purposes must be certified by an eligible person to be a true copy of the original document. Documents must be either certified on all pages or certified on the front page with a clear reference to the number of subsequent pages that are included.

Example of certification

I certify that this is a true and correct copy of the original document

Signature of Certifier Name of Certifier

Capacity of certifier - e.g. Justice of the Peace

Date of certification (DD/MM/YYYY)

List of occupations that can certify (from the Statutory Declaration Regulations 2018)

- Architect
- Chiropractor
- Dentist
- Financial advisor or financial planner
- Legal practitioner
- Medical practitioner
- Midwife
- Migration authorised representative registered under Division 3 of Part 3 of the Migration Act 1958
- Nurse
- Occupational therapist
- Optometrist
- Patent attorney
- Pharmacist
- Physiotherapist
- Psychologist
- Trade marks attorney
- Veterinary surgeon

List of persons that can certify

- a person who is enrolled on the roll of the Supreme Court of a State or Territory or the High Court of Australia, as a legal practitioner (however described);
- a judge of a court
- a magistrate
- a chief executive officer of a Commonwealth court
- a registrar or deputy registrar of a court
- a Justice of the Peace
- a notary public (for the purposes of the Statutory Declaration Regulations 2018)
- a police officer
- an authorised representative of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
- a permanent employee of the Australian Postal Corporation with 2 or more years of continuous service who is employed in an office supplying postal services to the public
- an Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955)
- an officer with 2 or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 2018)
- a finance company officer with 2 or more continuous years of service with one or more financial companies (for the purposes of the Statutory Declaration Regulations 2018)
- an officer with, or authorised representative of, a holder of an Australian financial services licence, having 2 or more
 continuous years of service with one or more licensees and
- a member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with 2 or more years of continuous membership.