



Ausbil Investment Management Limited

Client Services contact details

Phone

1800 287 245 or 02 9259 0200

Email

ausbil\_transactions@unitregistry.com.au

Website

www.ausbil.com.au

## Tax File Numbers, Australian Business Numbers or Exemptions

Use this form if you are an existing investor and wish to update your Tax File Number (TFN), Australian Business Number (ABN) or advise of a reason for exemption.

Please complete all sections in BLOCK letters and 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.

1. **Please ensure that you have completed the following:**

- written your investor number and investor name as it appears on your latest statement
- completed the tax section relevant to you
- signed the form as per the 'Acknowledgements and signatures' in section 5.

2. **Send your documents to us.**

You can return your form by post, fax or email according to the details below:

Send by post: Ausbil Investment Management Limited  
GPO Box 804  
Melbourne VIC 3001

Fax to: 1300 072 387

Scan and email to: ausbil\_transactions@unitregistry.com.au

Please include your investor number in the subject line of your email.

## 1 Investor details

Investor number

Investor name

## 2 Tax File Numbers, Australian Business Numbers or exemptions

### Individuals

Please provide your Australian 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

### Companies

Please provide your Australian Business Number (ABN)

### Trusts or superannuation funds

Please provide the below information which is applicable to you.

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

TFN

Australian Registered Scheme Number (ARSN) (applicable if your trust is registered with ASIC)

## 3 Facsimile Indemnity

If you are instructing us via facsimile (including applications, withdrawal requests and switching requests) you acknowledge the following conditions:

- We will process your facsimile instructions if it has been received by us in full. We bear no responsibility for any loss or delay that may be incurred from a transmission not being received by us. A facsimile receipt confirmation from the sender's facsimile machine is not evidence that the facsimile has been received.

- We bear no responsibility for any fraudulently completed facsimile transactions and will not compensate you for any losses. For instance, you uphold the risk that a facsimile may be sent by someone who knows your account details.

## 4 Foreign Account Tax Compliance Act (FATCA)

The Fund is registered as a Reporting Australian Financial Institution in accordance with the intergovernmental agreement entered into between the Australian and United States (US) governments regarding FATCA on 28 April 2014 (IGA). As a Reporting Australian Financial Institution, due diligence will be carried out on prospective investors in the Fund and on existing unit holders. Prospective investors (including existing unit holders applying for additional units) will be required to supply us with certain information and/or documentation when applying for units. Existing unit holders will be required to supply us with certain information and/or documentation on request. Information regarding certain unit holders and their unit holdings in the Fund will be reported to the Australian Taxation Office (ATO). Generally, information will be reported to the ATO in respect of unit holders who are:

- U.S. citizens or residents,
- certain types of U.S. entities, or
- certain types of non-U.S. entities that are controlled by one or more U.S. citizens or residents.

We are also expected to report to the ATO the details of any payments we make to 'Non-participating Financial Institutions', as such term is defined in the IGA. If you are an existing unit holder and you do not provide us with the necessary documentation upon request we may be obliged to report information in respect of you and your unit holding in the Fund to the ATO. If you are a new investor (including an existing unit holder applying for additional units) and you do not supply us with the necessary information and/or documentation on request, we may not issue units to you. Alternatively, we may report information regarding you and your unit holding in the Fund to the ATO. As per the IGA, the ATO will share information reported to it by Australian financial institutions with the U.S. Internal Revenue Service. For additional information on how our due diligence and reporting obligations under the IGA may affect you, please consult your tax adviser.

This form must be signed by all authorised signatories (eg. For a joint account, both signatories must sign this form).

By executing this Form and I/we agree with, and represent and warrant to Ausbil that:

- All details in this Form are complete, true and correct;
- I/we have read and understood the Product Disclosure Statement (PDS) and Additional Information Guide (AIG) for the applicable fund(s) and agree to be bound by them (as updated from time to time);
- I agree to be bound by the constitution(s) for those fund(s) (as amended from time to time);
- That acceptance of my/our application for units in any fund(s) will be at the sole discretion of Ausbil and that Ausbil has the right to reject any application;
- I/we have legal power to sign this Form and invest in the fund(s) and have complied with all applicable laws in doing so (including those relating to superannuation and tax);
- Sole signatories signing on behalf of a company confirm that they are signing as sole director of the company;
- If acting as a trustee or custodian, I/we confirm that I/we am/are acting in accordance with my/our designated powers and authority under the trust deed or custody agreement;
- If the Form is signed by an attorney, the attorney declares that he/she has not received notice of revocation of appointment and has provided a certified copy of the Power of Attorney to Ausbil;
- I/we are aware of the risks involved with investing in the fund(s) and have not relied on any representation (whether oral or written) from Ausbil or any other persons in connection with the fund(s);
- It is my/our responsibility to seek independent investment, financial, legal or taxation advice as to the suitability of the fund(s) to my/our circumstances;
- I/we understand that my/our investment in the fund(s) is subject to investment risks, including possible delays in repayment and loss of income and principal;
- I/we understand that none of Ausbil or its related entities or associates guarantees the performance of the fund(s), repayment of capital, rate of return or amount of any distribution;
- I/we will not knowingly do anything to put Ausbil in breach of AML/CTF Laws and I will notify Ausbil if I/we are aware of anything that may put Ausbil in breach of AML/CTF Laws.
- I/we are not aware and have no reason to suspect that the application monies or proceeds of investment in the fund(s) are derived from or will be used in connection with money laundering, terrorism financing or any other illegal activities;
- If requested, I/we will provide additional information and comply with all reasonable requests by Ausbil to enable it to comply with AML/CTF Laws;

- That personal information about me/us may be collected, used and disclosed in accordance with Ausbil's Privacy Policy and the privacy statements included in the PDS, including for marketing purposes;
- I/we will promptly advise Ausbil if event or circumstances occurs which would cause these representations and warranties to be incorrect or misleading or if I/we are in breach of any agreement or undertaking; and
- I/we indemnify Ausbil against any losses or liabilities incurred by it as a result of a breach by me/us of any agreement, representation or warranty.

I/we agree that the above agreements, representations, warranties are given on the date this Form is signed and repeated on each day thereafter until I/we cease to have an investment in the fund(s).

#### By completing and signing this form, you:

- authorise us to act according with the instructions on this form
- acknowledge that the instructions on this form supersede and have priority over all previous instructions received by us, and
- agree to indemnify us from and against all losses, costs, expenses, claims, actions or proceedings brought against us in connection with following your instructions on this form.

#### Who needs to sign this form

**Individual** – where the investment is in one name, the account holder must sign.

**Joint Holding** – where the investment is in more than one name, all of the account holders must sign.

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

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

**Power of Attorney** – if you have not already lodged the Power of Attorney with us, please attach an original certified copy of the Power of Attorney document that includes Certificate of Witness and Statement of Acceptance and original Certified Identification Document of the Power of Attorney. I/we attest that the Power of Attorney has not been rescinded or revoked and that the Donor is still living.

**Signature of investor 1, director or authorised signatory**

Please print full name

Date (DD/MM/YYYY)

  /   /    

Company officer (please indicate company capacity)

- Director  
 Sole director and company secretary  
 Authorised signatory

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

Please print full name

Date (DD/MM/YYYY)

  /   /    

Company officer (please indicate company capacity)

- Director  
 Company secretary  
 Authorised signatory