

Application form

Cor Capital Fund

APIR Code: COR0001AU

ARSN 609 666 042

(the Fund)

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

1. Read and ensure you understand the Product Disclosure Statement (PDS).

The PDS is available at www.corcapital.com.au or from your financial adviser. The law prohibits any person passing this Application Form on to another person unless it is accompanied by a complete PDS. We will provide on request and without charge a paper or electronic copy of the current PDS and any document which updates the PDS.

2. Complete all relevant sections of this application form online, then print and sign in the relevant fields using a black pen. If completing the form manually, please write in block letters, using a black pen. If you make an error while completing this form, do not use correction fluid. Cross out your mistakes and initial your changes.

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

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

Trusts/superannuation funds:

- if you are an individual trustee - complete section 1, section 2, section 4 and then section 5 onwards.
- if you are a trust with a company as a trustee - complete section 1, section 3 and then section 4 onwards.

3. Certify and provide the identification documents.

Please refer to section 10 'Identification and verification' and complete the relevant identification document attached to this Application Form or at www.corcapital.com.au.

4. Tell us your tax status.

Please complete the Tax information form attached to this Application Form or at www.corcapital.com.au.

5. Send your documents to our Administrator.

You can return your forms by post to:

Cor Capital Fund

GPO Box 804

Melbourne VIC 3001

6. Make your payment.

Please refer to section 6 'Payment of Application Amount'.

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

Legal notices

This Application Form relates to the Product Disclosure Statement (PDS) dated 3 August 2016 relating to units in the Fund. The PDS contains important information about investing in the Fund and you should read it before applying for units.

OneVue RE Services Limited ABN 94 101 103 011 AFSL 223271 (**OneVue**) is the issuer of units in the Fund.

OneVue is committed to ensuring the confidentiality and security of your personal information. We and our unit registry (OneVue Fund Services Pty Limited) handle your personal information in accordance with the Privacy Act 1988 and our respective privacy policies, which can be accessed at www.onevue.com.au.

Paper application forms should always be accompanied by a paper copy of the current PDS. Electronic application forms (such as downloaded and emailed copies) should always be attached to the current PDS (in the same file). If the PDS is missing, do not complete this form. Instead, contact us or your financial adviser and you will be sent the current PDS. Prior to its completion and signing, this application form must not be handed to any person unless accompanied by the PDS and any supplementary PDS.

Complete all relevant sections of this application form online, then print and sign in the relevant fields using a black pen. If completing the form 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.

1. Do you have an existing investment in the Cor Capital Fund operated by OneVue?

No, complete section 2 onwards.

Yes, the account number is

Please complete from section 5 onwards

2. Individuals

Please 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)
 / /

Usual occupation

Residential address

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

Property name/building name (if applicable)

Unit Street number

Street name

Suburb State

Post code Country

Postal address (if different to residential address)

A PO Box/RMB/Locked Bag is acceptable.

Property name/building name (if applicable)

Unit Street number

Street name

Suburb State

Post code 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).

Sole trader?

No Yes

If you are a sole trader, what is your business name

ABN

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)

Usual occupation

Residential address

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

Property name/building name (if applicable)

Unit Street number

Street name

Suburb State

Post code Country

If there are more individual trustees, write the full name and address of each trustee down on a piece of paper and attach to this form.

Postal address (if different to residential address)

A PO Box/RMB/Locked Bag is acceptable.

Property name/building name (if applicable)

Unit Street number

Street name

Suburb State

Post code 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.

3. Companies

Please complete if you are investing as a company or as a trust with a company as trustee.

Note: You are still required to complete the required Identification Form.

Company details

Full name of company (as registered by ASIC if incorporated in Australia)

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

Australian Tax File Number (TFN)

Country of residency (if a foreign company)

If you are a foreign company and have appointed a local agent, what is their name?

Registered office address

A PO Box/RMB/Locked Bag is not acceptable. If you are a foreign company that is registered in Australia write your registered Australian address.

Property name/building name (if applicable)

Unit Street number

Street name

Suburb State

Post code Country

Postal address (if different to above)

A PO Box/RMB/Locked Bag is acceptable.

Property name/building name (if applicable)

Unit Street number

Street name

Suburb State

Post code 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).

If there are more corporate trustees, write the full name and address of each trustee down on a piece of paper and attach to this form.

4. Trusts or superannuation funds

Please complete if you are investing as a trust or superannuation fund. Individual or joint trustee(s) must also complete sections 2, while corporate trustees must also complete section 3.

Note: You are still required to complete the required Identification Form.

Trust or superannuation fund details

Name of trust or superannuation fund

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

Australian Tax File Number (TFN)

5. Investment details

Please specify your initial application amount:

A\$

6. Payment of application amount

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

I am making my payment by:

- EFT
 Cheque
 Direct Debit

EFT

Account name: OneVue P/L ATF Cor Capital Fund
Application Account
BSB: 083-001
Account number: 677 825 266
Your reference: [please use the name of the investor]

Cheque

Please make cheques payable to: OneVue P/L ATF Cor Capital Fund Application Account

Direct debit authority – Australian bank accounts only

You can allow us to deduct your application amount directly from your nominated financial institution account by completing the direct debit authority below. This debit will be made through the Bulk Electronic Clearing System (BECS) from your account held at the financial institution you have nominated below.

By completing and signing this section, you have understood and agreed to the terms and conditions governing the debit arrangements between you and OneVue Fund Services Pty Ltd, as set out in this Request and in your Direct Debit Request Service Agreement, a copy of which is available on www.onevue.com.au.

Financial institution name

Branch name

BSB number Account number

Account name (no third party accounts)

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

7. Distribution instructions

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

- Pay to my nominated financial institution account (please complete section 8)
 Reinvest

8. Financial institution account details

Please provide the Australian financial institution account details in order to receive your distribution payments and/or future redemption payments. Payments will only be made to an account held in the name of the investor/s. Payments will not be made into third party accounts.

Financial institution name

Branch name

BSB number Account number

Account name

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.

Annual and semi-annual report options

The annual and any semi-annual financial statements of the Fund are available free on our website. If you would like to receive a copy by post or email, please indicate below. (This refers to annual and semi-annual reports only. This will not affect communication instructions regarding general correspondence for your fund)

- By email By post

Marketing material

- Please ensure no marketing material is sent to me

10. Identification and verification

Please tick one box only:

- I have not before invested in the Cor Capital Fund operated by OneVue and will complete the relevant investor identification forms located at the end of this application form.
 I am already an investor in the Cor Capital Fund operated by OneVue. There is no need to complete the investor identification forms located at the end of this application form.

Identification and verification

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

11. 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. You can also use this section to authorise us to pay your financial adviser their fees. 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 name/building name (if applicable)

Unit Street number

Street name

Suburb State

Post code Country

Postal address (if different to above)

Property name/building name (if applicable)

Unit Street number

Street name

Suburb State

Post code Country

Contact details

Business number (include country and area code)

Mobile number (include country code)

Adviser signature

12. Acknowledgements

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

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

13. Signatures

Signing instructions

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. If more than two signatures are required, please attach an additional page with the full names of each account holder, their signatures, and date.

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

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

Power of Attorney — if signing under a Power of Attorney and you have not already lodged the Power of Attorney 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 investor 1, director or authorised signatory

Please print full name

Date (DD/MM/YYYY)

 / /

Company officer (please indicate company capacity)

- Director
 Sole director and company secretary
 Authorised signatory

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

Please print full name

Date (DD/MM/YYYY)

 / /

Company officer (please indicate company capacity)

- Director
 Company secretary
 Authorised signatory

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

Yes No

Client Services contact details
Phone
+61 3 9225 5273
Email
contact@corcapital.com.au

Instructions: identification forms

Cor Capital Fund
APIR Code: COR0001AU
ARSN 609 666 042
(the **Fund**)

Which form?	There are three forms which follow: one each for individuals, companies and trustees. Choose the form which is applicable to you. If you are a partnership, an incorporated association, a co-operative or a Government body, then contact us and we will send a more appropriate form to you.
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.
Certifying copies	<p>You must have someone certify the copies you send to us. The following people can be the certifier:</p> <p>your financial adviser so long as they are an officer with, or authorised representative of, a holder of an Australian financial services licence (or foreign equivalent), having 2 or more continuous years of service with one or more licensees, or</p> <p>your accountant so long as they are a member of the Institute of Chartered Accountants in Australia, CPA Australia or the Australian National Institute of Accountants (or foreign equivalent) with 2 or more years of continuous membership, or</p> <p>your lawyer so long as they are a person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court, of Australia or foreign country, as a legal practitioner (however described), or</p> <p>an Australian justice of the peace, notary public or a police officer or foreign equivalent, or</p> <p>a post office worker so long as they are in charge of a Post Office or are a permanent employee with 2 or more years of continuous service, or</p> <p>a bank or financial institution officer so long as they are an officer with 2 or more continuous years of service with one or more financial institutions or companies, or</p> <p>a consular officer so long as they are a consular officer or diplomatic officer, or</p> <p>a judge, magistrate, chief executive officer of a court, or registrar or deputy registrar of a court.</p>
What should the person certifying write?	"I [name] of [address] being [capacity e.g. Justice of the Peace] certify this and the following [x] pages as a true copy of the original document." Each page should be initialed by the person certifying your documents.
Not in English?	Documents not in English must be accompanied by an English translation prepared by an accredited translator (contact us if you need guidance on accredited translators).

Client Services contact details
Phone
+61 3 9225 5273
Email
contact@corcapital.com.au

Identification form – Individuals

Cor Capital Fund
APIR Code: COR0001AU
ARSN 609 666 042
(the **Fund**)

Please complete this form if you have not invested previously in the Cor Capital Fund operated by OneVue. A separate form is required for each investor in the case of joint holdings. If you make an error while completing this form, do not use correction fluid. Cross out your mistakes and initial your changes.

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

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

Legal notices

OneVue RE Services Limited ABN 94 101 103 011 AFSL 223271 (**OneVue**) is the issuer of units in the Fund.

OneVue is committed to ensuring the confidentiality and security of your personal information. We and our unit registry (OneVue Fund Services Pty Limited) handle your personal information in accordance with the Privacy Act 1988 and our respective privacy policies, which can be accessed at www.onevue.com.au.

1. Personal details

Title Full given names

Surname

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

Please select the source and origin of funds being invested:

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

2. Verification procedure – individual investor

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

Group 1

Provide a certified copy of one of these:

- Australian driver's licence**
showing your photo, and please copy the front and back **OR**
- foreign driver's licence**
showing your date of birth, signature and photo **OR**
- Australian passport**
a passport that has expired within the preceding two years is acceptable, and please copy the pages which identify you **OR**
- foreign passport**
showing your signature and photo, and please copy the pages which identify you **OR**
- Australian State or Territory Government issued ID card**
showing your date of birth, signature and photo **OR**
- 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 OR**
- Australian or foreign government issued citizenship certificate OR**
- 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 **OR**
- a rates or utilities notice**
one which shows your name and residential address, not more than 3 months old **OR**
- ATO notice**
one which shows any debt owing to the ATO, your name and residential address, not more than 12 months old.

3. Signature

Signature

Date (DD/MM/YYYY)
 / /

Client Services contact details

Phone

+61 3 9225 5273

Email

contact@corcapital.com.au

Identification form – Australian & Foreign companies

Cor Capital Fund

APIR Code: COR0001AU

ARSN 609 666 042

(the **Fund**)

Please complete this form if you are a company investing for the first time with the Cor Capital Fund operated by OneVue. 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 & Trustees instead.

Legal notices

OneVue RE Services Limited ABN 94 101 103 011 AFSL 223271 (**OneVue**) is the issuer of units in the Fund.

OneVue is committed to ensuring the confidentiality and security of your personal information. We and our unit registry (OneVue Fund Services Pty Limited) handle your personal information in accordance with the Privacy Act 1988 and our respective privacy policies, which can be accessed at www.onevue.com.au.

1. Company details

1.1 General information

Full name of company

Please select the source and origin of funds being invested:

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

1.2 Australian companies

Place of business (if different to registered office address).

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

Property name/building name (if applicable)

Unit Street number

Street name

Suburb State

Post code Country

1.3 Foreign companies

Country of formation

Registered in Australia?

- No Yes - what is the ARBN:

Registered in country of formation?

- No Yes - name of regulator/exchange:

Identification number issued by foreign registration body

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

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

A PO Box/RMB/Locked Bag is not acceptable

Property name/building name (if applicable)

Unit Street number

Street name

Suburb State

Post code Country (if not Australia)

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

- an ASIC or foreign regulator search OR
- 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

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 write down details on a piece of paper and attach this to your form.

Verification details - company type

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

- an ASIC search OR
- your certificate of registration issued by ASIC

3. Regulated/listed companies

Are you an Australian listed company?

- No Yes - name of market/exchange

Market/exchange
[]

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

- No Yes - name that listed company and its 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 - name the regulator and your 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 OR
- a search of the licence or other records of the relevant regulator OR
- a public document issued by the company OR
- 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 capital 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
[]

Date of birth (DD/MM/YYYY)
[DD] / [MM] / [YYYY] OR

Residential address.
A PO Box/RMB/Locked Bag is not acceptable.
Property name/building name (if applicable)
[]

Unit Street number
[] []

Street name
[]

Suburb State
[] []

Post code Country
[] []

We will assume that you hold the same percentage of the company's issued capital as you do voting rights in the company, unless you specify otherwise:

[] [] . [] %

Beneficial owner 2

Title Full given names
[] []
Surname
[]

Date of birth (DD/MM/YYYY)
[DD] / [MM] / [YYYY] OR

Residential address
A PO Box/RMB/Locked Bag is not acceptable.
Property name/building name (if applicable)
[]

Unit Street number
[] []

Street name
[]

Suburb State
[] []

Post code Country

We will assume that you hold the same percentage of the company's issued capital as you do voting rights in the company, unless you specify otherwise:

. %

Beneficial owner 3

Title Full given names

Surname

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

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

Property name/building name (if applicable)

Unit Street number

Street name

Suburb State

Post code Country

We will assume that you hold the same percentage of the company's issued capital as you do voting rights in the company, unless you specify otherwise:

. %

Beneficial owner 4

Title Full given names

Surname

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

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

Property name/building name (if applicable)

Unit Street number

Street name

Suburb State

Post code Country

We will assume that you hold the same percentage of the company's issued capital as you do voting rights in the company, unless you specify otherwise:

. %

Verification procedure - beneficial owners

For each individual beneficial owner 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.

Group 1

Provide a certified copy of one of these:

- Australian driver's licence**
showing your photo, and please copy the front and back **OR**
- foreign driver's licence**
showing your date of birth, signature and photo **OR**
- Australian passport**
a passport that has expired within the preceding two years is acceptable, and please copy the pages which identify you **OR**
- foreign passport**
showing your signature and photo, and please copy the pages which identify you **OR**
- Australian State or Territory Government issued ID card**
showing your date of birth, signature and photo **OR**
- 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 OR**
- Australian or foreign government issued citizenship certificate OR**
- 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 **OR**
- a rates or utilities notice**
one which shows your name and residential address, not more than 3 months old **OR**
- 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:

- an **ASIC search OR**
- a **certificate of registration** issued by the ASIC

4.2 Voting rights

If there are any other individuals, who have not been listed above in section 4.1, and who are entitled, either directly or indirectly, to exercise 25% or more of the company's voting rights, please write down their full names on a piece of paper and attach to this form.

4.3 Director details

Provide the full name of the senior managing official (or equivalent) of the company, if any.

Title Full given names

Surname

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 - director details

If you are unable to provide details of the beneficial owners in 4.1 above, please provide an **ASIC company extract** showing the name of the senior managing official, as provided in this section 4.3.

5. Signatures

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 9225 5273
Email
contact@corcapital.com.au

Identification form – Trusts & Trustees

Cor Capital Fund
APIR Code: COR0001AU
ARSN 609 666 042
(the **Fund**)

Please complete this form if you have not invested previously in the Cor Capital Fund operated by OneVue. If you make an error while completing this form, do not use correction fluid. Cross out your mistakes and initial your changes.

1. Complete the relevant sections of this identification form in block letters and using a black pen.
2. Make copies of your ID document(s) as applicable and arrange for them to be certified. Please refer to the 'Forms' section of our website for more information on getting your documents certified.
3. Include this identification form and certified copies of the ID documents with your initial application form when you send it to us.

Legal notices

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OneVue is committed to ensuring the confidentiality and security of your personal information. We and our unit registry (OneVue Fund Services Pty Limited) handle your personal information in accordance with the Privacy Act 1988 and our respective privacy policies, which can be accessed at www.onevue.com.au.

1. Trust details

Full name of trust

Business name (if any)

Country in which the trust was established

Please select the source and origin of funds being invested:

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

2. Type of trust

2.1 Regulated trusts

This includes complying super funds and SMSFs

Super 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 which regulates the trust

If you answered yes to any of these questions, then please provide us with certified copies of one of the following:

- super funds**

go to www.abn.business.gov.au, select the "Super Fund Lookup" option and print out the results for your super fund **OR**

- registered managed investment schemes**
an ASIC search of the scheme **OR**

- Government superannuation funds**
an extract of the establishing legislation.

2.2 Non-regulated trusts

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

Are you a non-regulated trust?

- No Yes

If yes, please specify the type of trust

Please provide full names 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:

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

Date of birth (DD/MM/YYYY)

 / / OR

Residential address

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

Property name/building name (if applicable)

Unit

Street number

Street name

Suburb

State

Post code

Country

Beneficial owner 2

Date of birth (DD/MM/YYYY)

 / / OR

Residential address

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

Property name/building name (if applicable)

Unit

Street number

Street name

Suburb

State

Post code

Country

Beneficial owner 3

Date of birth (DD/MM/YYYY)

 / / OR

Residential address

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

Property name/building name (if applicable)

Unit

Street number

Street name

Suburb

State

Post code

Country

Beneficial owner 4

Date of birth (DD/MM/YYYY)

 / / OR

Residential address

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

Property name/building name (if applicable)

Unit

Street number

Street name

Suburb

State

Post code

Country

If there are any other direct beneficiaries of the trust who are not beneficial owners, write down their names on a piece of paper and attach to this form.

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

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 the settlor is deceased, or has made an asset contribution of less than \$10,000 to the trust, at the time the trust was established.

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

Trust deed

or an extract of the trust deed showing the full name of the trust and any named trust settlor

Other documentation

confirming the full name of the trust and the name of the trust settlor

3. Trustee details

3.1 Verification procedure - individual trustee

Title Full given names

Surname

Date of birth (DD/MM/YYYY)

/ /

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

Group 1

Provide a certified copy of one of these:

- Australian driver's licence**
showing your photo, and please copy the front and back **OR**
- foreign driver's licence**
showing your date of birth, signature and photo **OR**
- Australian passport**
a passport that has expired within the preceding two years is acceptable, and please copy the pages which identify you **OR**
- foreign passport**
showing your signature and photo, and please copy the pages which identify you **OR**
- Australian State or Territory Government issued ID card**
showing your date of birth, signature and photo **OR**
- 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 OR**
- Australian or foreign government issued citizenship certificate OR**
- 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 **OR**
- a rates or utilities notice**
one which shows your name and residential address, not more than 3 months old **OR**
- ATO notice**
one which shows any debt owing to the ATO, your name and residential address, not more than 12 months old.

3.2 Verification procedure - company trustees

3.2.1. General information

Full name of company trustee

3.2.2. Australian company trustee

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

Property name/building name (if applicable)

Unit Street number

Street name

Suburb State

Post code Country

3.2.3 Foreign company trustee

Country of formation

Registered in Australia?

No Yes

If yes, what is the ARBN

Registered in that country?

No Yes

If yes, what is 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 name/building name (if applicable)

Unit Street number

Street name

Suburb State

Post code Country (if not Australia)

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

- an **ASIC or foreign regulator search OR**
- an **ASIC or foreign regulator certificate of registration.**

3.2.4 Company type

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

3.2.4 (a) Public company

Are you a public company?

No Yes

3.2.4 (b) Private company

Are you a private company?

No Yes

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

Director details

How many directors are there?

Provide the full name of each director:

Director 1

Title Full given names

Surname

Director 2

Title Full given names

Surname

Director 3

Title Full given names

Surname

Director 4

Title Full given names

Surname

If there are more directors, please write down details on a piece of paper and attach this to your form.

Verification details - company type

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

- an ASIC search OR
- your certificate of registration issued by ASIC

3.2.5 Regulated/listed companies

Are you an Australian listed company?

No Yes - name of market/exchange

Market/exchange

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

No Yes - name that listed company and its 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 - name the regulator and your 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 OR
- a search of the licence or other records of the relevant regulator OR
- a public document issued by the company OR
- a search of the relevant market/exchange

3.2.6 Non-regulated/non-listed companies

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

3.2.6 (a) Beneficial owner details

Provide details of all beneficial owners who are individuals who, through one or more shareholdings, ultimately own 25% or more of the company's issued capital 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

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

Residential address
A PO Box/RMB/Locked Bag is not acceptable.
Property name/building name (if applicable)

Unit Street number

Street name

Suburb State

Post code Country

We will assume that you hold the same percentage of the company's issued capital as you do voting rights in the company, unless you specify otherwise:

. %

Beneficial owner 2

Title Full given names

Surname

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

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

Property name/building name (if applicable)

Unit Street number

Street name

Suburb State

Post code Country

We will assume that you hold the same percentage of the company's issued capital as you do voting rights in the company, unless you specify otherwise:

. %

Beneficial owner 3

Title Full given names

Surname

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

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

Property name/building name (if applicable)

Unit Street number

Street name

Suburb State

Post code Country

We will assume that you hold the same percentage of the company's issued capital as you do voting rights in the company, unless you specify otherwise:

. %

Beneficial owner 4

Title Full given names

Surname

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

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

Property name/building name (if applicable)

Unit Street number

Street name

Suburb State

Post code Country

We will assume that you hold the same percentage of the company's issued capital as you do voting rights in the company, unless you specify otherwise:

. %

Verification procedure - beneficial owners

For each individual beneficial owner 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.

Group 1

Provide a certified copy of one of these:

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

Group 2

- Australian or foreign government issued birth certificate OR
- Australian or foreign government issued citizenship certificate OR
- 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 **OR**
- a **rates or utilities notice**
one which shows your name and residential address, not more than 3 months old **OR**
- 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:

- an **ASIC search** OR
- a **certificate of registration** issued by the ASIC

3.2.6 (b) Voting rights

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

3.2.6 (c) Director details

Provide the full name of the senior managing official (or equivalent) of the company, if any.

Title Full given names/Full company name

Surname

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 - director details

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

4. Signatures

Signing instructions

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 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 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

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 many other foreign Governments (through their tax offices) have an agreement which means we must ask you, and you must answer, these questions. Information we gather is reported to the Australian Taxation Office (**ATO**) and in turn to global tax authorities. 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**

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**

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.

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

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

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.			

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 7
- No ► go to question 7
- Yes – please tell us your GIIN – see HELP box

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

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:

- **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 entity that is an investment entity.

An investment entity is generally only capable of including a trust if the trust's gross income is primarily attributable to investing, reinvesting, or trading in financial assets and the trust is managed by an entity that is a financial institution in its own right or otherwise is primarily conducting a business of trading, investing, managing or administering financial assets on behalf of other persons.

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

- **a depository institution**
you accept deposits in the ordinary course of a banking or similar business e.g. a bank
- **a custodial institution**
a substantial portion of your business (20 per cent plus of gross income) is held in financial assets for the account of others e.g. a custodian
- **certain prescribed entities**
e.g. types of insurance companies that have cash value products or annuities.

HELP

What is 'active' and 'passive'?

- **If you are answering this question, then relevant tax laws categorise you as a 'non-financial entity'.**
- **We require less information from active non-financial entities, and more information from passive non-financial entities.**
- **Please tell us if you are active or passive.**
- **You are active if you are not passive.**
- **Passive: because our income and assets are mostly passive.** During the previous financial year, 50% or more of our gross income was passive income and 50% or more of our assets during that financial year were assets that produced or were held for the production of passive income. Passive assets are assets such as equities and debt securities that produce investment income such as dividends, interests, royalties and annuities.
- **Passive: because we are not really a business.** We are established and operated exclusively for: religious, charitable, scientific, artistic, cultural, athletic, or educational purposes; as a professional organisation, business league, chamber of commerce, labour organisation, agricultural or horticultural organisation, civic league; or as an organisation operated exclusively for the promotion of social welfare.
- **Passive: because we are exempt from Australian income tax.**
- **Other categories of passive?** They exist but are less common.

Get advice if you are unsure.

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 the natural persons who:
 - are residents of another country for tax purposes, and
 - exercise **practical control** over you.
- When thinking about control, start by thinking about the people who have ownership interests:
 - if you are a **company**, think first about shareholders
 - if you are a **discretionary trust**, list the beneficiaries who were paid a distribution this financial year
 - if you are trustee of a **deceased estate**, the executor is usually the person in control
 - if you are **another type of trust** (perhaps a unitised investment trust), think first about the unit holders or beneficiaries, and also consider the role of any 'settlor'.
- For companies, use 25% as a touchstone – if a person holds 25% of more of the issued capital or voting rights, best to list them.
- For trusts (other than discretionary trusts), law requires that you list all beneficiaries, and also requires that you drill down through the chain of control or ownership to find the natural persons that ultimately control the trust.
- Where no natural persons exercise control through ownership, consider who might exercise control through other means – directors and perhaps senior managing officials.

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

Post code/Zip Country

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

Controlling person

Title Given names

Surname

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

City and country of birth

Residential address
Number Street name

Suburb/City State

Post code/Zip Country

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

Controlling person

Title Given names

Surname

Date of birth (DD/MM/YYYY)

City and country of birth

Residential address

Number Street name

Suburb/City

State

Post code/Zip Country

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

Controlling person

Title Given names

Surname

Date of birth (DD/MM/YYYY)

City and country of birth

Residential address

Number Street name

Suburb/City

State

Post code/Zip Country

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

Controlling person

Title Given names

Surname

Date of birth (DD/MM/YYYY)

City and country of birth

Residential address

Number Street name

Suburb/City

State

Post code/Zip Country

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

Controlling person

Title Given names

Surname

Date of birth (DD/MM/YYYY)

City and country of birth

Residential address

Number Street name

Suburb/City

State

Post code/Zip Country

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

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)