

## Forms booklet

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# A step-by-step guide for completing the application form

The following information is a guide to assist you in completing the application form for investment in IOOF MultiSeries (collectively referred to throughout this forms booklet as 'MultiSeries' or 'Trust(s)').

#### Before you start:

**New investors** – only applicants wishing to apply for a **new investment** in IOOF MultiSeries must complete the application form. If you are an existing investor in one or more of the Trusts, you will generally not be required to complete the application form again, unless you are investing in a different name/capacity to your existing investment. See below instructions for existing investors.

**Existing investors** – wishing to apply for additional investments to their IOOF MultiSeries investment please complete the Additional investment instruction form located on page 27.

Existing investors – wishing to apply to switch (in part or in full) their investments from one Trust to another, please complete the switching instruction form located on page 31.

New investors will generally be required to complete all STEPS of the application form, except:

**Step 2** – which only requires certain sections completed depending on the type of investor you are

**Step 7** – which is optional.

Further information to help you complete each STEP is detailed below.

#### Step 1 – New investment application

- The application form is to be completed for new investments in IOOF MultiSeries only. Proof of identification must also be provided if you are a new investor to the IOOF group<sup>1</sup>. See Step 5 for further details.
- If you are an existing investor in any product within the IOOF group, please provide your investor or account number in this section.

Generally, existing investors who hold investments in other products within the IOOF group will not be required to complete the client identification and proof of identity requirements under *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* (AML/CTF Act), unless they are applying for investment under a different name to their existing accounts (eg as a trustee for a trust, or director of a company).

#### Step 2 – Investor details

 You will need to select which investor type you are applying as to identify which part of Step 2 you will need to complete. If you are applying as:

**Individual or Joint Investors** (or those investing as a Sole Trader) – Complete **PART A** 

Companies - Complete PART B

Trusts<sup>2</sup> – Complete PART C

Other3 - Complete PART B (a), (b) & (h) only

Note – If you have an adviser, the relevant FSC/FPA Identification Form will need to be completed for Companies and Trusts or those applying under the Other investor category and the FSC/FPA identification form for individuals will need to be completed in relation to the beneficial owners of the entity.

If you do not have a financial adviser you will need to complete an Additional Tax Information Form. The applicable forms can be obtained via our website www.ioof.com.au, or by contacting Investor Services on 1800 002 217 (+613 8614 4966 if calling from New Zealand).

- Please complete your name and address details as requested in the appropriate PART of Step 2.
- For non-resident investors, we will assume that all necessary government approvals have been obtained.
- You may nominate a password to allow easy access to your account information via the telephone.

Please be aware that where an investor is not an individual (for example, a company or trust) or where a representative is nominated, no account information will be provided via the telephone unless this password is quoted.

The following table provides examples to assist you in completing the investor details sections of Step 2, including who will need to sign the declaration. Note, all required sections of the application form need to be completed. The table on the following page provides the basic investor sections as an example.

<sup>1</sup> Additional client identification requirements may apply depending on the type of investor applying. Note for new applicants, certified copies of supporting proof of identity documents are to be returned with your Application Form. See Step 5.

<sup>2</sup> Trusts may include Trust with Corporate or Individual Trustees, Family or Charitable Trusts, Deceased Estates or accounts set up for a Minor Child.

<sup>3</sup> Other investors may include Partnerships, Associations (such as Incorporated/Unincorporated Club/Body), Registered Co-operatives, or Government Entities.

#### Investor details example

Investor Type	Example of investor details	Who signs Step 8?
Part A: individual or joint in	nvestors	
Individual Investor	Investor 1: Mr John Smith	Signatory 1: John Smith
Joint Investors <sup>4</sup>	Investor 1: Mr John Smith Investor 2: Ms Mary Smith	Signatory 1: John Smith Signatory 2: Mary Smith
Part B: companies (Note, 'OTHER INVESTOR' t	ypes must complete sub-sections (a), (b) and (h) of	PART B only)
Company	<ul> <li>(a) Company Details         Registered Name of Company/Entity –         XYZ Pty Ltd</li> <li>(b) List Directors         Director 1 – Mr Joe White         Director 2 or Company Secretary – Mr Frank Jones</li> <li>(h) Contact person<sup>5</sup>: Mr Joe White</li> </ul>	Signatory 1: Joe White (Company Director)  Signatory 2: Frank Jones (Second Company Director or Company Secretary if applicable)  Common seal required where applicable.
Incorporated/ Unincorporated Club/Body (Other investor type)	<ul> <li>(a) Name of company/entity         The District Bowls Club</li> <li>(b) List Directors         Director 1: Mr Fred Brown (Office holder)         Director 2: Mr James White (Second Office holder)</li> <li>(h) Contact Person<sup>5</sup>: Mr Fred Brown</li> </ul>	Signatory 1: Fred Brown (Office holder) Signatory 2: James White (Second Office holder)
Part C – trusts <sup>6</sup>		
Trust with a Corporate Trustee	<ul> <li>(a) Full Name of Trust     ABC Superannuation Fund</li> <li>(b) Full business name of the Trustee     ABC Pty Ltd</li> <li>(e) Details of Trustee/Contact Person     i – Corporate Trustee – ABC Pty Ltd     Contact Person<sup>5</sup>: Mr David Black</li> </ul>	Signatory 1: David Black (Company Director) Signatory 2: Tim Parker (Second Company Director or Company Secretary if applicable)
Trust with Individual Trustees	<ul> <li>(a) Full Name of Trust     Smith Superannuation Fund</li> <li>(b) Full Business Name of the Trustee     N/A</li> <li>(e) Details of Trustee(s)/Contact Person     i – Individual Trustee(s)     Trustee 1<sup>4</sup>: Mr John Smith     Trustee 2: Mrs Mary Smith     Trustee 3: Ms Helen Smith     Trustee 4: Mr Frank Smith</li> </ul>	Signatory 1: John Smith (Trustee 1) Signatory 2: Mary Smith (Trustee 2) Signatory 3: Helen Smith (Trustee 3) Signatory 4: Frank Smith (Trustee 4)
Deceased Estate (Other Trust type)	<ul> <li>(a) Full name of Trust</li></ul>	Signatory 1: Robert Brown (Executor 1 of estate) Signatory 2: Mary Brown (Executor 2 of estate if applicable)

The Responsible Entity is unable to accept investments by persons under the age of 18 years. Applications in respect of minors should be made by a parent or guardian. For investment on behalf of a minor, please complete PART C and select 'Other Trust Type'. The investment may be titled 'Name of parent/guardian' account for 'Name of minor' to be inserted under 'Full name of the Trust'.

<sup>4</sup> All correspondence will be forwarded to the address of Investor 1.

 $<sup>5 \</sup>quad \text{All correspondence regarding the account will be sent to the 'contact person'.} The contact person must be one of the signatories on the account.}$ 

 $<sup>6 \</sup>quad Trusts \ may \ include \ Trusts \ with \ Corporate \ or \ Individual \ Trustees, \ Other \ Trusts \ such \ as \ Family, \ Charitable \ Trusts, \ Deceased \ Estates \ or \ accounts \ set \ up \ for \ a \ Minor \ Child.$ 

<sup>7</sup> Trustee 1 must be nominated as the Identified Trustee (applicable for Trusts with Individual Trustees). All future correspondence will be sent to Trustee 1. The Identified Trustee must be one of the signatories on the account.

## Foreign Residents (including US residents or citizens) investor reporting requirements

The United States' (US) Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) are regimes legislated in a number of countries (including Australia) which require financial institutions, including IOOF, to identify and report information relating to investors who are, or who may be, a US resident or citizen and a resident of any other foreign jurisdiction for tax purposes. This information is required to be reported to the Australian Taxation Office who may share it with overseas counterparts.

#### Step 3: Initial investment details

- Please indicate the amount you would like to invest.
   The minimum initial investment amount for each
   Trust is \$25,000.
- Your investment may be made by cheque, BPAY or transfer from an existing IOOF investment or a combination of both options. If you are making the initial deposit by BPAY, a Customer Reference Number will be advised to you once your initial application has been received and an account has been set up. Cash cannot be accepted. Also ensure that you tick the appropriate box to indicate how you would like your distributions to be paid. Either:

Option A: Reinvested as additional units.

**Option B:** Deposited into your nominated Australian financial institution account.

If you choose Option B, you need to provide us with details of your Australian financial institution account.

If you do not nominate Option A or Option B, this will be taken as a direction to reinvest distributions as additional units in the Trust from which the income was derived (ie Option A)

Additional investments via BPAY®

- If you are an existing investor in a Trust, you may make an additional investment into that Trust using BPAY.
- If you wish to invest in a Trust in which you are not currently
  a unit holder, you will need to complete a new application
  form and send it to us, together with your cheque for the
  investment amount.
- To make additional investments using BPAY once your account has been established, you will need to have:
  - the Biller Code of the Trust (for further details, please see table below) and
  - your Customer Reference Number (CRN).

If you would like a CRN, please tick 'Yes' where required, in the application form or additional investment instruction form. If you already have a CRN, you do not need to complete an application form or an additional investment instruction form or provide us with any information to make an additional investment using BPAY. For further details on obtaining a CRN, see page 19.

Please contact your Australian financial institution to arrange BPAY through telephone or internet banking. Please note that BPAY is not available from all financial institutions.

Trust Name	B <sub>PAY</sub> Biller Code
IOOF MultiSeries 30	959510
IOOF MultiSeries 50	959528
IOOF MultiSeries 70	959957
IOOF MultiSeries 90	959536

## Step 4: Tax File Number or Australian Business Number notification or exemption

- If you would like us not to deduct tax at the highest marginal tax rate plus Medicare Levy from your income distribution, please provide us with your Tax File Number (TFN), Australian Business Number (ABN) or exemption information.
- An investor who is not an Australian resident, or who
  otherwise seeks to claim an exemption for tax purposes,
  may not need to provide a TFN or ABN to prevent us from
  withholding tax at the highest marginal tax plus Medicare
  Levy. We recommend you see an accountant or financial
  adviser for further information. If you seek to claim an
  exemption on this basis, please provide us with information
  concerning why you are entitled to claim an exemption.

**Please note**, under AML/CTF legislation disclosure of an ABN is required for those individual investors investing as sole traders. If applicable, please provide this information under **Step 2 – PART A**, the section headed "For Sole Traders Only".

#### **Step 5: Proof of identity requirements**

In accordance with with the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* (AML/CTF Act), new investors applying for financial products, such as IOOF MultiSeries, are required to supply proof of identity documentation to verify the applicant.

- Step 5 lists the types of proof of identity documents which can be provided for individual investor applicants and persons who have been nominated as a Representative or Power of Attorney.
- For non individual investor applicants (such as companies, trusts and partnerships) investors will need to refer to the separate 'Completing Proof of Identity' document. A copy of this document can be obtained from our website at www.ioof.com.au or by contacting Investor Services on 1800 002 217.

#### Step 6: Financial adviser details

- If you have appointed a financial adviser, your financial adviser needs to complete this section.
- Please note, if your financial adviser has already conducted the proof of identity check, the financial adviser must confirm having sighted and retained the necessary information on record by completing the 'Record of Proof of Identification' table in this Step, or attach a copy of the identification document to the Application Form. This table is only applicable for 'individual/sole trader' investors.

## Step 7: Representative facility (optional)

- If you wish to authorise another person to operate your account on your behalf, you need to complete this section.
- Please ensure you and your representative have read and understood the conditions relating to nomination of a representative outlined in the PDS, before completing this section.
- Both the investor(s) and the representative need to sign this section.
- Note, nominated representatives must provide proof of identification documents, as detailed in Step 5.

#### **Step 8: Applicant declaration**

- Please read the PDS in its entirety and then sign the applicant declaration section of the application form.
- We will not accept an application unless the correct signatory/signatories has/have signed this section (see Step 2).
- Please ensure that you also provide the necessary proof of identity documentation with your application form.
- If your application form is signed by your attorney, a
  certified copy of the relevant Power of Attorney, together
  with the necessary proof of identity documents for the
  Power of Attorney (as detailed in Step 5), must be enclosed
  with your application form.
- If joint investors are applying, all investors must sign.

#### Cheque and application details

Please complete your cheque made payable to 'IOOF Applications Trust Account - Applicant(s) Name' marked 'Not Negotiable'.

For example, if Robert Brown proposes to invest, the relevant cheque will be made payable as follows:

IOOF Applications Trust Account - Robert Brown.

Please send your completed application form and cheque(s) to:

IOOF MultiSeries Reply Paid 264 Melbourne VIC 8060

#### Additional investment instruction form

- If you are an existing investor in one or more of the MultiSeries range of Trusts and wish to apply for additional investments into your existing Trust(s), you will need to complete the additional investment instruction form to indicate the amount you wish to invest into which existing Trust(s).
- Note, if you are not an existing unit holder in any Trust(s), you will need to complete an application form to apply for initial investments into the new Trust.
- For additional investments, the minimum investment amount is \$5,000 for each Trust.

#### **Switching instruction form**

- If you are an existing investor in one or more Trusts within
  the MultiSeries range and wish to switch your investments
  from one Trust to another Trust, you will need to complete
  the switching instruction form to indicate the amount you
  wish to switch and from/to which Trust.
- The minimum switch amount is \$5,000. Note the minimum initial investment into any new Trust is \$25,000.

# (IOF)

## MUITISERIES

5 October 2021

### Application form

If you are investing in the Trusts via an Investor Directed Portfolio Service (IDPS) or master trust, you must complete the documents that the IDPS or master trust requires. **You do not need to fill out this form.** 

For assistance please contact Investor Services on 1800 002 217 (or +613 8614 4966 if calling from New Zealand)

This application form accompanies the IOOF MultiSeries Trusts Product Disclosure Statement (PDS) (and any Supplementary Product Disclosure Statement (SPDS)) that may be issued from time to time which provides important information about investing in the IOOF MultiSeries (Trusts). We recommend you read the PDS (and any SPDS) thoroughly before applying to invest in the Trusts. We will only consider applications for initial investments on receipt of this application form, issued together with this PDS (and any SPDS).

If you have received the PDS (and any SPDS) electronically, we can send you a paper copy including this application form free of charge upon request. Simply contact Investor Services on 1800 002 217 (or +613 8614 4966 if calling from New Zealand).

The investments offered in this PDS (and any SPDS) are only available to persons receiving the PDS (and any SPDS) and accepting the offer to invest within Australia or New Zealand. A person who gives another person access to the application form must at the same time and by the same means give the other person access to the PDS (and any SPDS). All words and phrases in this application form have the same meaning as given to them in the PDS (and any SPDS).

Please complete these instructions in BLACK INK using CAPITAL LETTERS (except for your email address) and ✓ boxes where provided.

#### Step 1: New investment application

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This application form is to k	be completed for new investments into IOOF MultiSeries.					
If you are an existing invest	stor with the IOOF group, please provide your investor/account number:					

**Note:** Generally existing investors who hold investments in other products within the IOOF group, will not be required to provide proof of identification requirements under AML/CTF, unless they are applying under a different name to their existing accounts (eg as joint investors, or in a family company name) or in a different capacity to their existing accounts (eg as trustee for a trust, or director of a company).

The minimum initial investment amount is \$25,000 for each Trust you choose to invest in.

#### **Step 2: Investor details**

You will need to complete certain sections of this application form depending on your investor type.

What part of Step 2 do you need to complete?

Complete <b>Part A</b> if you are:	Complete <b>Part B</b> if you are:	Complete <b>Part C</b> if you are:	Complete Part B (a), (b) and (h) only if you are:
an individual investor¹ or joint investors	a company	a trust with individual  Trustees or  a trust with a corporate  Trustee or  other trust <sup>2</sup>	other investor <sup>3</sup> then go straight to Step 3.
	have a financial adviser. If you do not	ories will also need to complete the relevan t have a financial adviser, an Additional Tax able form(s), please contact Investor Service our website www.ioof.com.au	Information Form will need to be

- 1 Individual investors include individuals acting for themselves or as sole traders.
- 2 Other trusts may include family or charitable trusts, deceased estates, or accounts set up for a minor child.
- 3 'Other investors' may include partnerships, associations (such as incorporated/unincorporated club/body), registered co-operatives and government entities.

### Part A – Individual/Joint Investors or Sole Traders

(a) Investor 1 (all notices	and c	orre	spor	nden	ice v	vill b	e fo	rwar	ded	to t	he ac	ddre	ss of	Inve	esto	r 1)							_				
Title (Dr/Mr/Mrs/Ms/Miss)		<u>_</u>					Sı	urnar	ne													<u></u>	Ļ	<u> </u>	<u> </u>	<u>_</u>	Ļ
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Australian Business Number (ABN)			- [				- [				- [																
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Are you a tax resident of an	other	cou	ntry	?			⁄es		N	0																	
Please answer both tax re	eside	ncy (	ques	tion	s as y	you	can	be a	tax	resio	dent (	of m	nore	thar	n on	e co	unti	y. If	you i	are (	only	a ta:	x re	 esider	nt of		
Australia and no other co																					•						

#### FOREIGN RESIDENTS ONLY – Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS)

Under FATCA and CRS laws, we are required to ask all investors to provide additional information about their tax residency. Tax residency rules differ by country. Whether an individual is a tax resident of a particular country is often (but not always) based on the amount of time a person spends in a country, the location of a person's residence or place of work. This information will be reported to the relevant tax authority within Australia and internationally.

For all countries where you are a tax resident please provide a TIN (Tax Identification Number) which is the number assigned by each country for the purposes of administering tax laws such as a Social Security Number in the US. If a TIN cannot be provided, please list one of the three reasons specified below (A, B or C) for not providing a TIN.

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IOOF <b>MultiSeries</b>   Application form		
Are you a tax resident of Australia?  Are you a tax resident of another country?  Ye		
Please answer both tax residency questions as you concern Australia and no other country please proceed to 'Se		ou are only a tax resident of
FOREIGN RESIDENTS ONLY – Foreign Account Tax	Compliance Act (FATCA) and Common Report	ing Standard (CRS)
Under FATCA and CRS laws, we are required to ask all in rules differ by country. Whether an individual is a tax resa person spends in a country, the location of a person's authority with Australia and internationally.  For all countries where you are a tax resident please profor the purposes of administering tax laws such as a Society.	sident of a particular country is often (but not alwaresidence or place of work. This information will be by the a TIN (Tax Identification Number) which is the	ays) based on the amount of time be reported to the relevant tax e number assigned by each countr
three reasons specified below (A, B or C) for not providi	ng a TIN.	
Country	TIN	Reason for no TIN (A,B or C)#
#Reasons for not providing a TIN		
Reason <b>A</b> – The country of tax residency does not issue	TINs to tax residents, OR	
Decree B Ve les estables de la tile TIN OD		

Reason  ${\bf B}$  – You have not been issued with a TIN, OR

Reason  ${\bf C}$  – The country of tax residency does not require the TIN to be disclosed.

#### **Security Password**

For security purposes and ea	sier a	acce	ss to	you	ır acı	cour	nt in	form	atio	n via	a the telephone, please provide a password:
Security password											

**Please note:** When a representative is nominated, no account information will be provided via the telephone unless this password is quoted.

### Part B – Companies or Other Investors

If you are investing as a:																										
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Are you residing overseas?					Vac		N	\ (If '\	10s' c	omn	loto	tha	000	rcas	c Inv	ıΔc†r	or Fo	rm :	a+ \^/\	i	oof	com	211)			

<sup>4</sup> **Other investors** may include partnerships, associations (such as incorporated/unincorporated club/body), registered co-operatives, government entities.

Director/Officeholder/Partner	. 3		_																					
Title (Dr/Mr/Mrs/Ms/Miss)					Surna	me													L		<u>_</u>			
Given name(s)																								
Politically exposed persons are in organisation, either within or our															-								al	
Are you a politically exposed per	rson?		Yes	s [	No	(If 'y	es', o	comp	olete	the	Polit	tical	ly Ex	pos	ed P	'ersc	ns F	orm	ı at v	٧W٧	v.ioc	of.co	m.aı	T)
Are you residing overseas?			Yes	5 L	No	(If 'y	es', d	comp	olete	the	Ove	rsea	as Inv	/esto	or Fo	rm a	at w	WW.	ioof	.con	n.au)			
Director/Officeholder/Partner	4		_																	_				
Title (Dr/Mr/Mrs/Ms/Miss)					Surna	me												<u></u>	<u></u>	<u>_</u>	<u></u>	<u>_</u>		
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Politically exposed persons are in organisation, either within or our															_				-				al	
Are you a politically exposed per	rson?	L	Yes	5 L	No	(If 'y	es', d	comp	olete	the	Polit	tical	ly Ex	pos	ed P	'ersc	ns F	orm	ı at v	ΛWV	v.ioc	of.com	m.aı	J)
Are you residing overseas?			Yes	5 L	No	(If 'y	es', d	comp	olete	the	Ove	rsea	as Inv	/esto	or Fo	rm a	at w	WW.	ioof	.con	n.au)			
(c) Is the company regula	ated	l?																						
Yes	If ye	s, plea	se spe	ecify i	regulato	or:																		
Regulator (such as ASIC, APRA)																			L					
Licence number																								
No	If no	, go to	sub-	sectio	on (d)																			
(d) Is the company listed	wit	h the	e AS	X?																				
Yes																								
No																								
(e) Is the company a maj	ority	y ow	ned	sub	sidiar	y of	a li	iste	d c	omp	oan	y?												
Yes	If ye	s, plea	se pro	ovide	name c	of the	e list	ed co	omp	any:														
Listed company name																								
No	If no,	, go to	sub-s	sectio	on (f)																			
(f) Company type																								
Public																								
Private/Proprietary	lfap	oroprie	etary c	omp	any, coi	mple	te si	ub-se	ectio	n (g)	bel	OW.												

(g) Beneficial ownership – please list full names and addresses of shareholders /beneficial owners who own more than 25 per cent of the company.

To be completed for proprietary companies or if the company is **not** regulated, listed with the ASX, or, a majority owned subsidiary of a listed company.

Proceed to sub-section (h) if no individuals are identified in this section.

Proceed to sub-section (n)	THO	ma	IVIAU	IdIS (	are i	uem	ше	J IN	LMIS	sec	tion.																
Shareholder/beneficial	ow	nei	1																								
Title (Dr/Mr/Mrs/Ms/Miss)							Su	rnar	ne																		
Given name(s) Residential address (Note: PO Box not accepted)																											
Suburb																Sta	ate				Ро	stcc	ode				
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olitically exposed persons are individuals who occupy a prominent public position or function in a government body or international rganisation, either within or outside Australia. This definition also extends to their immediate family members and close associates.  The spot of the politically exposed person?  The spot of the politically exposed Persons Form at www.ioof.com.au)  The spot of the politically exposed Persons Form at www.ioof.com.au)  The spot of the politically exposed Persons Form at www.ioof.com.au)																											
re you residing overseas?  Yes  No (If 'yes', complete the Overseas Investor Form at www.ioof.com.au)																											
re you residing overseas?  Yes  No (If 'yes', complete the Overseas Investor Form at www.ioof.com.au)  hareholder/beneficial owner 2																											
Title (Dr/Mr/Mrs/Ms/Miss)	nareholder/beneficial owner 2  le (Dr/Mr/Mrs/Ms/Miss)  Surname																										
Given name(s) Residential address (Note: PO Box not accepted)	Ars/Ms/Miss) Surname dress																										
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Country																											
Politically exposed persons a organisation, either within or																		_				-				al	
Are you a politically exposed	pers	son?			Yes			No	(If 'ye	es', c	omp	lete	the	Poli	ticall	ly Ex	pos	ed P	erso	ns F	orm	at v	vww	'.ioof	.con	n.au	1)
Are you residing overseas?					Yes			No	(If 'ye	es', c	omp	lete	the	Ove	rsea	s Inv	esto)	or Fo	rm a	at w	∿w.i	oof	.com	.au)			
Shareholder/beneficial	ow	nei	3																								
Title (Dr/Mr/Mrs/Ms/Miss)							Su	rnar	ne																		
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Are you residing overseas?					Yes			No	(If 'ye	es', c	omp	lete	the	Ove	rsea	s Inv	esto	or Fo	rm a	at w	∧w.i	oof.	.com	.au)			

Shareholder/beneficial	ow	/nei	r <b>4</b>																								
Title (Dr/Mr/Mrs/Ms/Miss)							Su	ırnar	ne																		
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Politically exposed persons a organisation, either within or																		_								al	
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Are you residing overseas?					Yes			No	(If 'y	es', c	omp	olete	the	Ove	ersea	ıs In\	esto)	r Fo	rm a	at w	ww.i	oof.	com	ı.au)			
(h) Other beneficial ov	vne	ers																									
To be completed if there are	no ii	ndivi	idua	ls wl	no m	neet	the	requ	uiren	nent	of s	ub-s	ecti	on (	g)												
Please provide full details of i	ndiv	⁄idua	ıls w	ho c	lirect	tly o	r inc	direc	tly c	ontr	ol th	e co	mpa	any.													
This includes exercising contagreements, arrangements, identified then the most senion the company's behalf).	unde	ersta	ndir	ng ar	nd pr	acti	ces,	votir	ng ri	ghts	of 2	5 pe	er ce	nt o	r mc	re, c	r po	wer	of v	eto.	lf no	suc	h pe	ersor	n car	n be	١
Other beneficial owner	ther beneficial owner 1																										
iiven name(s)																											
iven name(s) esidential address																											
Suburb	esidential address Note: PO Box not accepted)																										
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Politically exposed persons a organisation, either within or																		_				-				al	
Are you a politically exposed	per	son?			Yes			No	(If 'y	es', c	omp	olete	the	Poli	tical	ly Ex	pos	ed P	erso	ns F	orm	at v	vwv	v.ioo	f.con	n.au)	
Are you residing overseas?					Yes			No	(If 'y	es', c	omp	olete	the	Ove	ersea	ıs In\	esto)	r Fo	rm a	at w	ww.i	oof.	com	ı.au)			
Other beneficial owner	2																										
Title (Dr/Mr/Mrs/Ms/Miss)							Su	ırnar	me																		
Given name(s)																											
Residential address (Note: PO Box not accepted)																											
Suburb State Postcode																											
Country State Postcode Country																											
Politically exposed persons are individuals who occupy a prominent public position or function in a government body or international organisation, either within or outside Australia. This definition also extends to their immediate family members and close associates.																											
Are you a politically exposed	per	son?			Yes	L		No	(If 'y	es', c	omp	olete	the	Poli	tical	ly Ex	pos	ed P	erso	ns F	orm	at w	/WW	v.ioo	f.con	n.au)	
Are you residing overseas?					Yes			No	(If 'y	es', c	omp	olete	the	Ove	ersea	ıs Inv	esto	r Fo	rm a	at w	ww.i	oof.	com	ı.au)			

#### Identification and tax residency requirements

If you are applying as a company, and have a financial adviser, please ensure you complete the relevant FSC/FPA Identification form, and a separate form for individuals who are beneficial owners (as applicable), or, an Additional Tax Information Form if you do not have a financial adviser. To obtain a copy of the relevant form(s) or if your details change at any time please contact Investor Services on 1800 002 217 (or +613 8614 4966 if calling from New Zealand) or visit our website (www.ioof.com.au).

#### (i) Contact Person

A Contact Person must be nominated for the account.

Title (Dr/Mr/Mrs/Ms/Miss)					Suri	nam	e L											Ļ	
Given name(s)																			
Mailing address (if different from above)																			
Suburb											State	e		P	ostco	ode [			
Phone (bh)									Phon	a (ah)									
							Ī											Ŧ	
Phone (mobile)							<u> </u>			Fax								$\frac{1}{1}$	
Email	D D		ММ	] /	Y	Y	Υ	Y											
Date of birth		' L	141	] ′	'	'						Gen	der	Ν	∕lale		Fer	male	

- All future notices and correspondence will be forwarded to the Contact Person
- The Contact Person must be one of the signatories on the account
- If the Contact Person is intended to have authority to transact on the account, on behalf of the company/entity, Step 7: Representative Facility must be completed. Conditions applying to the appointment of a representative are detailed in the PDS (and any SPDS).

#### **Security Password**

For security purposes and ea	sier	acce	ss to	you	ır acı	cour	nt inf	orm	atio	n via	ia the	e tele	phor	ne, p	lease	e pro	ovide	e a pa	asswo	ord:		
Security password																						

**Please note:** When a representative is nominated, no account information will be provided via the telephone unless this password is quoted.

Part B investor details (Companies or Other Investors) is now complete.

Please ensure all the relevant additional FSC/FPA Identification or Additional Tax Information forms have been completed under this section before proceeding.

## Part C – Trusts (Trust with a Corporate Trustee or Individual Trustees)

a) Full name of the Trust	t																			
																				$\overline{}$
(b) Full business name (i	if any) of t	the tru	stee	in resr	nect	of th	் Tr	ust												
(b) I all basiless hame (i							T													
(c) Country of establishr	ment of Ti	rust																		
(d) Type of Trust (tick all  Managed Investment Sci  Registered (provide A  OR  Unregistered  Regulated Trust (such as a  Name of regulator (such as ASIC, APRA, ATO)  Registration number  Government superannua  Legislation under which	heme  RSN if registe  a Self Manag	ered)	rannua	ation Fu	nd)															
fund is established																				
Other Trust type (such as Please specify	family, chari	table, de	ceasec	l estate	or mir	nor chi	ld)													
Unregulated Trust For ur	nregulated Ti	rusts plea	ase list	the per	son(s)	who s	ettle	s the	e init	ial su	ım c	or ass	ets	to cre	eate	the	Trus	st.		
Full name of settlor(s)																				
Note for Trustees: • For Trusts with a Corpor Trustees, please complet Note, additional client ide Form – for a Regulated/U	e subsection entification is Inregulated	required Trust, as	low ar d unde applica	nd subse r AML/C able, ple	ection ETF leg ase co	(f), if a gislatic ontact	pplic n. To Inves	able obt	ain a Servi	cop	y of on 1	the 800 (	rele <sup>,</sup> 002	vant 217 (d	'FSC	:/FP/	A Ide	entifi	catio	I

• All trustees must sign the Applicant declaration in Step 8.

e) Details of Trustee(s	)/CC	HILC	aCt	Per	SOI	(CO	mpi	ete e	eitne	erı –	Corp	oora	te iri	uste	e O	K II -	- Ina	IVIA	uai i	ruste	ee(s)	only	y)				
i – Corporate Trustee		_																									
Company name		<u></u>																									
Contact Person⁵			1	1	1										ı				1	1							
Title (Dr/Mr/Mrs/Ms/Miss)		Ļ				I	Su	ırnar	me															<u></u>	<u></u>		
Given name(s)																											
Mailing address		Ļ													1						1				<u> </u>	<u></u>	
Suburb		L														Sta	ate				Po	stco	de			L	
Country		<u></u>											1					1					1		<u></u>	<u></u>	
Phone (bh)		<u></u>			1								Pho	ne (a	ah)			]							<u></u>		
Phone (mobile)		Ļ												F	ax										<u></u>		
Email						1																					
Date of birth	D	D	/	Μ	М	/	Υ	Υ	Υ	Υ							(	Gen	der		М	ale			Fem	ale	
ii – Individual Trustee(	s)																										
Please list all trustee(s), inclu	ding	nam	ne(s)	and	add	ress	(es):																				
Trustee 1 <sup>5</sup>					1														1			_					
Title (Dr/Mr/Mrs/Ms/Miss)		Ļ					Su	ırnar	me																<u></u>	<u></u>	
Given name(s)																											
This section must be comple	eted.	Not	e: PO	Э Во	x car	n on	ly be	pro	vide	ed u	nder	'Ma	iling	add	lress	'. 											
Residential address		L													1						1				<u></u>	<u></u>	
Suburb		<u></u>														Sta	ate				Po	stco	de			<u></u>	
Country Mailing address (if different from above)																									<u></u>	<u></u>	
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Politically exposed persons organisation, either within o																		_				-				ıl	
Are you a politically exposed	d per:	son?			Yes			No	(If 'y	es′, c	omp	olete	the	Poli	tical	ly Ex	pos	ed F	ersc)	ns F	orm	at v	vwv	ı.ioo	f.con	n.au)	)
Are you residing overseas?					Yes			No	(If 'y	es', c	omp	olete	the	Ove	ersea	ıs Inv	vesto	or Fo	orm a	at w	ww.i	oof.	com	ı.au)			

<sup>5</sup> All future notices and correspondence will be sent to the **identified trustee** (trustee 1 for individual trustees) or the **contact person** (corporate trustee). The identified trustee or the contact person must be a signatory on the account. If the identified trustee or the contact person is intended to have authority to transact on the account on behalf of all trustees/signatories, Step 7 'Representative Facility', must be completed. Conditions applying to the appointment of a representative as detailed in the PDS (and any SPDS).

Trustee 2					7																						
Title (Dr/Mr/Mrs/Ms/Miss)							Su	ırnar	ne																		
Given name(s)																											
Residential address (Note: PO Box not accepted)																											
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Politically exposed persons a organisation, either within or																										ıl	
Are you a politically exposed	per	son?			Yes			No	(If 'y	es', c	omp	olete	the	Pol	itical	y Ex	pose	d Pe	erso	ns F	orm	at w	/ww	.ioof	.con	n.au)	)
Are you residing overseas?					Yes			No	(If 'y	es', c	omp	olete	the	Ove	ersea	s Inv	esto/	r Foi	rm a	at w	ww.i	oof.	com	.au)			
Trustee 3				1	1									1	1								1				
Title (Dr/Mr/Mrs/Ms/Miss)							Su	ırnar	ne																		
Given name(s)																											
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organisation, either within or																						-					
Are you a politically exposed	per	son?			Yes	L	_	No	(If 'y	es', c	omp	olete	the	Pol	itical	y Ex	pose	d Pe	erso	ns F	orm	at w	/ww	.ioof	.con	n.au)	)
Are you residing overseas?					Yes			No	(If 'y	es', c	omp	olete	the	Ove	ersea	s Inv	esto/	r Foi	rm a	at w	ww.i	oof.	com	.au)			
Trustee 4																											
Title (Dr/Mr/Mrs/Ms/Miss)							Su	ırnar	ne																		
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Are you residing overseas?					Yes			No	(If 'y	es', c	omp	olete	the	Ove	ersea	s Inv	esto/	r Foi	rm a	at w	ww.i	oof.	com	.au)			
(f) Beneficiary details	<b>–</b> to	be d	com	plete	ed o	nly it	f′ <b>O</b> t	her	Trus	t ty	pe′ v	was s	selec	ted	in su	ıbse	ctior	(d)	on <sub>l</sub>	page	e 14.						
Do the terms of the Trust ide	ntify	the	ben	efici	iaries	s by	refe	rence	e to	men	nber	rship	of a	cla	ss?												
Yes								ails c itabl				ciary	mei	mbe	ershi	o cla	ss/es	(suc	ch a	s un	it hc	lder	s, fai	mily	mer	mbe	rs
Class of membership																											
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•					T		Π	Π		Т	П				Т												

Beneficiary 1																											
Title (Dr/Mr/Mrs/Ms/Miss)							Su	ırnar	ne																		
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Are you residing overseas?					Yes			No	(If 'ye	es', c	omp	olete	the	Ove	rsea	s Inv	/esto	or Fo	orm a	at wv	vw.i	oof.c	com.	.au)			
Beneficiary 2																											
Title (Dr/Mr/Mrs/Ms/Miss)							Su	ırnar	me																		
Given name(s)																											
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Country	L	1																						Ш.			
Politically exposed persons a organisation, either within or																		-								l	
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Are you residing overseas?					Yes			No	(If 'ye	es', c	omp	olete	the	Ove	rsea	s Inv	/esto	or Fo	orm a	at wv	vw.i	oof.c	om.	.au)			
Beneficiary 3																											
Title (Dr/Mr/Mrs/Ms/Miss)							Su	irnar	me																		
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Residential address (Note: PO Box not accepted)																											
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Country Politically exposed persons a	re in	divid	duals	wh	0 00	cup\	/an	rom	iner	nt pu	ıblic	pos	ition	or f	unct	ion	in a	aov	ernr	nent	boo	lv or	inte	rnat	iona		
organisation, either within or																		_				-					
Are you a politically exposed	pers	son?			Yes			No	(If 'ye	es', c	omp	olete	the	Poli	ticall	у Ех	pos	ed F	ersc	ns Fo	orm	at w	ww.	.ioof	.com	ı.au)	
Are you residing overseas?					Yes			No	(If 'ye	es', c	omp	olete	the	Ove	rsea	s Inv	/esto	or Fo	orm a	at wv	vw.i	oof.c	om.	.au)			
Beneficiary 4		ī																									
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Politically exposed persons a organisation, either within or																		-								ı	
Are you a politically exposed	pers	son?			Yes	L		No	(If 'ye	es', c	omp	olete	the	Poli	ticall	y Ex	pos	ed F	ersc	ns Fo	orm	at w	ww.	.ioof	.com	ı.au)	
Are you residing overseas?					Yes			No	(If 'ye	es', c	omp	olete	the	Ove	rsea	s Inv	esto/	or Fo	orm a	at wv	vw.i	oof.c	om.	.au)			

#### (g) Beneficial owners – to be completed for unregulated Trusts Please confirm the Trustees listed in sub-section (e) ii are beneficial owner(s) of the Trust. This includes control by acting as Trustee; or by means of trusts, agreements, arrangements, understandings and practices; or exercising control through the capacity to direct the Trustees; or the ability to appoint or remove the Trustees. No Trustee 1 Trustee 2 Yes Nο Trustee 3 Yes Trustee 4 Yes Please also provide full details of other individuals who directly or indirectly control the Trust. Other beneficial owner 1 Title (Dr/Mr/Mrs/Ms/Miss) Surname Given name(s) Residential address (Note: PO Box not accepted) Suburb State Postcode Country Politically exposed persons are individuals who occupy a prominent public position or function in a government body or international organisation, either within or outside Australia. This definition also extends to their immediate family members and close associates. Are you a politically exposed person? Yes No (If 'yes', complete the Politically Exposed Persons Form at www.ioof.com.au) No (If 'yes', complete the Overseas Investor Form at www.ioof.com.au) Are you residing overseas? Yes Other beneficial owner 2 Title (Dr/Mr/Mrs/Ms/Miss) Surname Given name(s) Residential address (Note: PO Box not accepted) Suburb State Postcode Country Politically exposed persons are individuals who occupy a prominent public position or function in a government body or international organisation, either within or outside Australia. This definition also extends to their immediate family members and close associates. re you a politically exposed person? No (If 'yes', complete the Politically Exposed Persons Form at www.ioof.com.au) No (If 'yes', complete the Overseas Investor Form at www.ioof.com.au) Are you residing overseas? Identification and tax residency requirements If you are applying as a trust, and have a financial adviser, please ensure you complete the relevant FSC/FPA Identification form, including a separate form for individuals who are beneficial owners (as applicable), or, an Additional Tax Information Form if you do not have a financial adviser. To obtain a copy of the relevant form or if your details change at any time please contact Investor Services on 1800 002 217 (or +613 8614 4966 if calling from New Zealand) **Security Password** For security purposes and easier access to your account information via the telephone, please provide a password:

**Please note:** When an investor is not an individual (eg a company or a trust) or when a representative is nominated, no account information will be provided via the telephone unless this password is quoted.

**IOOF Portfolio Online registration:** To register for IOOF Portfolio Online, please complete the online Application form via the Portfolio Online area of the IOOF website (www.ioof.com.au). You can only register for this service after you have received an investor number.

Security password

#### Step 3: Initial investment details

You can use this form to invest in one or more Trusts in the IOOF MultiSeries range. The minimum investment amount is \$25,000 for each Trust.

Name of Trust	Amount to be invested		uld you like e distributed?^
		OPTION A Reinvested as additional units (✔)	OPTION B#  Deposited  directly into  your nominated  financial  institution  account  (✓)
IOOF MultiSeries 30	\$ .		
IOOF MultiSeries 50	\$ .		
IOOF MultiSeries 70	\$ .		
IOOF MultiSeries 90	\$ .		
Total	\$ .		

#### Important note:

For any initial deposit equal to or more than \$2 million you must also complete the High Threshold Transaction form available at www.ioof.com.au

#### ^ Please note:

- If you do not select a distribution method this will be taken as a direction to reinvest your income distribution as additional units in the Trust from which the income was derived.
- If you select Option B and a payment is rejected by your financial institution, this will be taken as a direction to reinvest that income distribution and all future income distributions as additional units in the Trust from which the income was derived.

#### # Income distribution account details

Only complete the section below if you have selected to have your distribution paid directly into your nominated financial institution account, and you have not previously provided us with your financial institution account details, or if you wish to change your nominated financial institution account.

Financial institution																
Branch																
Account name																
BSB		_			A	ccoi	ınt r	num	ber							

#### Alternative ways of adding to your investment – BPAY facility (optional)

Additional investments can be easily made to your existing investment via BPAY. Further information on utilising the BPAY facility is included on page 3 of this forms booklet.

If you would like to set up your account for future BPAY investments directly through your nominated financial institution account, please tick the box below:

L I/'	We would like to	receive a Custome	er Reference Number	(CRN)	for making	additional ir	nvestments u	ising Bray
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The BPAY biller code for each Trust is listed in this forms booklet on page 3.

Investor 1

## Step 4: Tax file number (TFN) or Australian business number (ABN) notification or exemption

Important information regarding your TFN or ABN:

- Collection of your TFN or ABN information is authorised by law, and their use and disclosure are regulated by tax laws and the IOOF Group Privacy Policy.
- Quotation of your TFN or ABN is not compulsory<sup>7</sup> and it is not an offence if you decide not to provide us with this information.
- If you do not provide us with your TFN or ABN, tax will be deducted from your investment earnings at the highest marginal tax rate plus Medicare Levy and forwarded to the Australian Taxation Office (ATO).
- If you are exempt from quoting your TFN or ABN, you must indicate this below or tax will be deducted from your investment earnings.
- An investor who is not an Australian resident for tax purposes is not required to provide a TFN or ABN.

For more information about the use of TFN or ABN, please contact the ATO.

An ABN may be used as an alternative to a TFN if your investment is undertaken in the course of a business or an enterprise. If you are investing on behalf of a superannuation fund, please use the TFN of the superannuation fund.

I/We authorise the use of this TFN or ABN in respect of the investment for which I/we are applying.

investor r																		
TEN <b>OR</b> ABN																		
OR I authorise IISL to use th	e TFI	N or	ABN	l alre	ady	helc	d on	file.										
OR I am not an Australian re OR	:side	nt fo	or ta:	x pui	pos	es.												
I claim an exemption fro	m q	uotir	ng r	ny TF	N o	r AB	N.										 	
Reason for exemption																		
Investor 2																		
TFN <b>OR</b> ABN																		
OR I authorise IISL to use th OR I am not an Australian re OR							d on	file.										
I claim an exemption fro	m q	uoti	ng r	ny TF	-N o	r AB	N.											
Reason for exemption																		

<sup>7</sup> Note, under AML/CTF legislation, disclosure of an ABN is required for those individual investors investing as sole traders. If applicable, please provide this information under Step 2 – PART A, 'For Sole Traders Only'.

#### **Step 5: Proof of identity requirements**

In accordance with the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* (AML/CTF Act), your application cannot be processed unless this section is completed and you may be requested to provide additional information and documentation to facilitate IISL's compliance with AML/CTF legislation). AML/CTF legislation obligates IISL to verify the identity of each of its investors before providing financial services to them.

Please note, generally existing investors within the IOOF group, do not need to provide the proof of identity listed below.

#### Individual investor applicants

If you are a new individual investor in IOOF MultiSeries, making a new investment application, you will need to provide originals or original certified copies of one or more of the following documents. The proof of identity documents are required to be submitted with your application form.

Type of investor (please ✓ appropriate box)	Proof of identity – please provide the relevant document(s).
(a) Individuals acting for themselve  Note, for joint invest necessary proof of ic required for each inv  OR  Individuals acting as a sole trader	equivalent, containing a photograph of the individual). Please copy front and back of licence.  entity is  Australian passport (an Australian passport that has expired within the preceding 2 years.
(b) Individuals who have been nominated as a Representative or Power of Attorney	Either one of the following documents:  • For verification of the identity of a nominated representative or Power of Attorney, refer to the proof of identity requirements listed in Section (a) above.  Please note:  • Where a Power of Attorney has been granted, a certified copy of the Power of Attorney must be provided.

<sup>\*</sup>Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.

#### Who can certify your documents?

The 'Completing Proof of Identity' document provides a list of persons authorised to certify copies of original documents. To obtain a copy please contact Investor Services on 1800 002 217 (or +613 8614 4966 if calling from New Zealand). Alternatively, you can download a copy from our website at www.ioof.com.au.

#### All non-individual investor applicants (eg companies, trusts, partnerships and other types of investors)

When completing the relevant FSC/FPA Identification form(s), the identification requirements are included in these forms (if you have a financial adviser). An Additional Tax Information Form must be completed if you do not have a financial adviser. As a guide you can refer to the proof of identity requirements included in the 'Completing Proof of Identity' document. To obtain a copy please contact Investor Services on 1800 002 217 (or +613 8614 4966 if calling from New Zealand). Alternatively, you can download a copy from our website at www.ioof.com.au

#### Step 6: Financial adviser details (financial adviser to complete, if applicable)

We will only register a financial adviser who:

- holds a current Australian Financial Services (AFS) Licence
- is an authorised representative of a current AFS Licensee.

#### Financial adviser details

Dealer group																										
License name																										
Financial adviser name																										
Financial adviser number													AFS r	licer numl												
If you are a new financial adv	viser*	f ple	ase a	ılso c	ompl	ete th	e foll	owir	ng d	etail	5:															
		_																								
Business name	L	<u></u>					<u> </u>														_			ᆜ		
Business address	L	<u></u>																								
Suburb															Sta	tο				Por	stco	de				
Mailing address (if different from above)															510						100					
(ii diii circii circii da ove)																										
Suburb		<u> </u>	Щ		_										Sta	te			_	Pos	stco	de		$\square$		
Phone (bh)		L											Phoi (a	ne   ah)										Щ		
Fax													Phoi nobi													
Email																										
* An email notifying you of your	new	finan	icial a	dvise	rnumb	er will	be for	ward	ed to	your	offic	e shc	ortly a	fter r	eceip	t of t	nis ap	plica	ition.							
Declaration by financ	ial a	adv	iser																							
In submitting this application	า forı	m:																								
<ul> <li>I declare that I hold a current AFS</li> </ul>			Licen	ice <b>C</b>	<b>OR</b> I ar	n a re	prese	ntat	ive o	or an	aut	horis	sed r	epre	esen	tativ	e no	min	ated	to a	act c	on be	≗half	· of		
<ul> <li>I confirm that I have prov PDS (and any SPDS)</li> </ul>	ided	the	appl	icant	t with	all the	e nec	essa	ıry ir	nform	natio	on co	once	rnin	g th	eir ch	nose	n in	vestr	men	ıt, in	clud	ing t	:he		
<ul> <li>I consent to provide IISL a AML/CTF Act Part 7.2)</li> </ul>	icces	s to	all pr	roof	of ide	ntifica	ition	reco	rds f	for th	ne pi	urpc	ses	of th	is ap	plica	atior	if re	eque	estec	ıq) b	ursua	ant t	o the	ā	
<ul> <li>I confirm that I have conc</li> </ul>	lucte	ed th	ne rel	evar	it cust	omer	iden	tifica	ation	n pro	ced	ures	in lir	ne w	ith t	he o	bliaa	atior	ns un	nder	the	: AMI	L/CT	F Ac	t. an	d
I have attached a																										
Please note: Compulsory	whe	re:																								
<ul> <li>initial contribution is e</li> </ul>			or ma	ore th	nan \$1	2 milli	on or																			
<ul> <li>the applicant is a Polit</li> </ul>																										
the applicant is not re	-					-																				

I have completed and signed the relevant FSC/FPA identification form(s), which is attached to this Application (and retained

I have sighted and retained a certified copy of the applicant's identification document(s) recorded in the following 'Record of proof

a certified copy of the applicant's identification document(s)), OR

of identity' table (please complete the table and declaration below).

OR

Document issuer  Issue date  Expiry date  Document number  Accredited English translation  For further information on the types of proc which is located on our website at www.ioo  Signature  Dealer stamp  For assistance, financial advisers can constitute to the process of the	of.com.au. <sup>-</sup>	N. N. Hity which This doc			/ Si	ghteo	nd retaine		ase refer	N/A to th	ie 'Com	-	/ [ / [ ] /	Sight	ted	copy	me
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For further information on the types of process which is located on our website at www.ioo gnature  gnature  For assistance, financial advisers can complete the process of	of.com.au. <sup>-</sup>	ity which	n can be a		d or veri	fied ar	nd retaine		ase refer ed to cer	to th	ie 'Com	-	proof	f of id	entity	r' docu	me
which is located on our website at www.ioo gnature  ealer stamp  For assistance, financial advisers can co tep 7: Representative	of.com.au. <sup>-</sup>	This doc							ed to cer			-				r' docu	me
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For assistance, financial advisers can c	contact lı												1	/			
For assistance, financial advisers can c	contact lı																
For assistance, financial advisers can c	contact li																
tep 7: Representative	contact li																
		Investo	r Service	es on 1	800 00	)2 217	' (+613 8	3614 4	4966 if	callir	ng fror	n Nev	v Zea	land	)		
Power of Attorney	facili	ity (c	ption	al)													
If this application is signed under a Pc	ower of A	Attorne	y, you d	o not	need t	o con	nplete t	his se	ection.								
you wish to nominate a representative	e please (	comple	ete all se	ctions	below	/.											
omination of representative																	
We nominate the following person as		represe	ntative:														
tle (Dr/Mr/Mrs/Ms/Miss)			Surnar	ne L													
ven name(s)																	
esidential address																	
ıburb									State			Po	ostco	de			Ī
none (bh)						-	hone (a	ah)									Ī
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ate of birth  elationship to investor	/ M N	<u> </u>										IV	iale				

Representative signature

#### Investor(s) authority to nominate a representative

I/We:

- have read the conditions applying to the appointment of a representative in the PDS (and any SPDS) and agree to those conditions
- release, discharge and agree to indemnify IISL and any other related body corporate within the IOOF group and any investment management company appointed to manage investment assets of the Trusts against any and all losses, liabilities, actions, proceedings, accounts, claims and demands, (whether authorised by me/us or not) arising from the appointment of or exercise of powers by the representative
- agree that a payment made to my/our representative in accordance with the requests or instructions of the representative shall be to the complete satisfaction of the obligation of IISL to the extent of the payment, notwithstanding any fact or circumstance, including that the payment was requested, made or received without my/our knowledge or authority
- agree that if the payment is made in accordance with the request or instructions of the representative, I/we shall have no claim in relation to the payment against IISL or any other related body corporate within the IOOF group nor any investment management company appointed to manage the investment assets of the Trusts or in which the Trusts invest
- understand and acknowledge that I/we are bound by the actions of my/our representative in relation to the operation of my/our investments in the Trusts and
- authorise IISL to continue to follow instructions regarding this authority, until further notice in writing to cancel this authority is received by IISL.

#### Corporate investors

This nomination must be signed either:

- under common seal
- by two directors or a director and company secretary or
- by the sole director (where applicable).

If not signing under common seal, please state your title, eg Director, Company Secretary or Sole Director and Company Secretary.

Signatory 1											_	ate	D	D	/	M	M	/	Υ	Υ	Υ	Υ
Title (such as Director/Sole			T	T		T	T	Ι		_	L	ale						I				
Director/Company Secretary)																						
Full name																						
Cimmatama 2 / Control																						
<b>Signatory 2</b> (for joint investors or additional trustees, if applicable)											D	ate	D	D	/	М	М	/ [	Υ	Υ	Υ	Υ
Title (such as Director/Sole Director/Company Secretary)																						
Full name																						
ruii name												l										
<b>Signatory 3</b> (for additional Trustees if applicable)											D	ate	D	D	/	Μ	M	/	Υ	Υ	Υ	Υ
Title (if applicable)		_	 +	+		_	<u> </u>		<u> </u>	_						$\sqsubseteq$		=				
Full name																						
										1												
														ı	ı							
<b>Signatory 4</b> (for additional Trustees if applicable)											Г	ate		D	/	Μ	Μ	/	Υ	Υ	Υ	
nastees ii applicable,										_								i				
Title (if applicable)																						
Full name																						
ruii name										1												
Common seal																						
(of company) if required																						

All investors must also sign the applicant declaration in Step 8

#### **Step 8: Applicant declaration**

I/We wish to invest in the IOOF MultiSeries range of Trusts as described in the PDS (and any SPDS). I/We have personally received the PDS (and any SPDS) or paper print out of the electronic version of the PDS (and any SPDS) accompanied by, or attached to, this application form before applying for an investment in the Trust(s).

#### I/We declare that:

- all details in this application form are true and correct
- I/we have received and accepted this offer in Australia or New Zealand
- I/we acknowledge that I/we will promptly advise my/our financial adviser and/or IISL<sup>1</sup> if any of my/our details change at any time
- I/we certify that I/we am/are the applicant(s) named in Step 2
  of this application form OR I/we am/are authorised to provide
  information and complete this application form on their behalf (ie
  by way of Power of Attorney)
- I/we am/are aware that information provided about me/us and my/our accounts will be provided to the relevant tax authority within Australia and internationally
- I/we agree to provide any information that may be required for the identification purposes of AML/CTF, FATCA and CRS laws (as applicable).

I/We confirm that I/we have read and understood:

- that an investment made in the IOOF MultiSeries range of Trusts does not represent an investment in IISL, nor any related body corporate within the IOOF group, nor any investment management company appointed to manage the investment assets of the Trusts
- that neither IISL nor any related body corporate within the IOOF group, nor any investment management company appointed to manage the investment assets of the Trusts guarantees the performance of any Trust or the return or repayment of capital or income
- the PDS (and any SPDS) in full and on becoming a unitholder, I/we agree to be bound by the provisions of the PDS (and any SPDS) and the constitution of the relevant Trust in the IOOF MultiSeries range
- that investments in the Trusts are subject to investment risks including possible delays in repayment and loss of income and principal invested.

Target Market Confirmation (mandatory)
I/We declare that:
I/We have received personal financial advice in relation to the IOOF MultiSeries range of Trusts  OR
I/We have reviewed and understand the Target Market Determination for the IOOF MultiSeries Trust(s) I have selected and confirm that the Trust(s) meet(s) my objectives, financial situation and needs
Please note: if your investment objective(s), intended use, investment timeframe and/or investment risk profile are inconsistent with those of the IOOF MultiSeries Trust(s) you have selected, then we suggest you seek financial advice that takes into account your personal circumstances.

#### AML/CTF, FATCA and CRS

- I/We have provided the appropriate documents, as outlined in the 'Completing Proof of Identity' document on www.ioof. com.au, that may be required for the purposes of the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (AML/CTF Act)\*.
- I/We confirm that I/we have correctly indicated any applicable foreign or United States tax residency status, for Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) laws in Part A of this Application form and during the customer identification process.
- If I/we are an applicant under Part B or Part C of this application form I/we confirm that I/we have correctly declared our identification and tax residency information in the FSC/FPA Identification forms (if investing with the assistance of a financial adviser) or the Additional Tax Information Form (if investing without the assistance of a financial adviser).
- If I/we previously have opened an IOOF product and my/our adviser has not conducted the customer identification procedure under AML/CTF, FATCA and CRS laws in conjunction with this application, I/we confirm that I/we are not a foreign resident or US citizen(s) or resident(s)) for tax purposes, or are not purchasing this product on behalf of another foreign resident, and/or US citizen or resident for tax purposes.
- \* Proof of identity requirements are generally not required for existing investors within the IOOF group as detailed in the PDS.

#### **Privacy**

Information (including my/our personal information) provided to IISL is used for the purpose of opening an investment account and for other related purposes. IISL may disclose my/our personal information to its related bodies corporate, a person with whom I/ we have a joint investment, my/our financial adviser, professional advisers, businesses that have referred me/us to IISL, banks and other financial institutions, or to provide me/us with information about other products or services that may be of interest to me/us.

IISL is required to collect my/our personal information under the *Corporations Act 2001*, the AML/CTF, FATCA and CRS laws. If I/we do not provide all of the requested information, IISL may not be able to action my/our request. To verify my/our identity for Know Your Customer (KYC) purposes, IISL may also solicit personal information about me/us from reliable identity verification service providers.

My/Our personal information will be handled in accordance with the IOOF Group Privacy Policy. The Privacy Policy contains information about how I/we may access or correct my/our personal information held by IISL and how I/we may complain about a breach of the Australian Privacy Principles. I/We may request a copy of the Privacy Policy by contacting IISL on 1800 002 217 (+613 8614 4966 if calling from New Zealand) or at www.ioof.com.au/privacy.

#### Marketing material

If you **do not** agree to IISL or any related body corporate within the IOOF group using your personal information for the purposes of marketing the products and services of the IOOF group from time to time, then please tick this box:

#### **Financial report**

A financial report is available online at www.ioof.com.au by 30 September each year, detailing the financial position of the Trusts at the financial year ending 30 June. Alternatively, you may choose to receive a hard copy of the financial report by ticking this box:

#### **Power of Attorney**

If your application is signed under a Power of Attorney, please enclose a certified copy of the Power of Attorney and the proof of identity documents required in Step 5 ('Proof of identity requirements') with your application form. If signed under Power of Attorney, the attorney certifies that he/she has not received notice of revocation of that power.

#### **Corporate investors**

This application form must be signed either:

- under common seal
- by two directors or a director and company secretary or
- by the sole director (where applicable).

#### Important reminder – Identification and tax residency requirements

(Only if you are a Company, Trust, or Other type of investor eg Partnerships and Associations)

If you have a financial adviser and are investing as Company, Trust or Other Investor, you will need to complete and return with your application form, the additional FSC/FPA Identification Form relevant to your investor type.

If I do not have a financial adviser you will need to complete the relevant Additional Tax Information Form if you are investing as a Company, Trust or Other investor. Refer to the separate 'Completing Proof of Identity' document to help you understand what you will need to provide us relevant to your investor type.

All relevant forms can be downloaded from our web site at www.ioof.com.au, or alternatively you can request a copy from Investor Services on 1800 002 217 (or +613 8614 4966 if calling from New Zealand). If nominating a representative, please note additional proof of identity is required to be provided with this application form. Please refer to Step 7 'Representative Facility'.

If not signing under common seal, please state your title, eg Director, Company Secretary or Sole Director and Company Secretary. Signatory 1 Date Title (such as Director/Sole Director/Company Secretary) Full name Signatory 2 Date Title (such as Director/Sole Director/Company Secretary) Full name Signatory 3 (for additional Trustees if applicable) Title (if applicable) Full name Signatory 4 (for additional Date Trustees if applicable) Title (if applicable) Full name Common seal

(of company) if required

# (IOF)

## MULTISERIES

5 October 2021

#### Additional investment instruction form

If you are investing in the Trusts via an Investor Directed Portfolio Service (IDPS) or master trust, you must complete the documents that the IDPS or master trust requires. **You do not need to fill out this form.** 

For assistance please call Investor Services on 1800 002 217 (or +613 8614 4966 if calling from New Zealand).

Complete this form if you wish to make an additional investment into one or more of your existing investments in the IOOF MultiSeries.

#### Important information

- Please complete these instructions in BLACK INK using CAPITAL LETTERS (except for your email address) and ✓ boxes where provided.
- The minimum additional investment amount is \$5,000 for each Trust.
- If this instruction has previously been made through a nominated representative or under a Power of Attorney, please complete **PART A** or **PART B** (as applicable) as well as the 'Nominated representative or Power of Attorney' section below.

Step 1: Investor	det	tail	ls																				
Account number																							
Part A – Individual	Inv	est	or	or	Joi	nt l	lnv	est	or	S													
Investor 1 (all the notes an	nd co	orres	spor	nden	ce w	ill b	e for	war	ded	to th	ne ad	ddre	ss of	flnve	esto	r 1)							
Title (Dr/Mr/Mrs/Ms/Miss)							Su	ırnar	me														
Given name(s)																							
Mailing address															1								
Suburb						1					1					Sta	ate		Pos	stco	de		
Date of birth	D	D	/	Μ	М	/	Υ	Υ	Υ	Υ													
Investor 2 (if applicable)																							
Title (Dr/Mr/Mrs/Ms/Miss)							Su	ırnar	ne														
Given name(s)																							
Mailing address															1								
Suburb			L													Sta	ate		Pos	stco	de		
Date of birth	D	D	/	М	М	/	Υ	Υ	Υ	Υ													

Part B –Non-individ	lual	inv	/es	tor	<b>S</b> (e	g co	mpa	anie	s, tru	ists,	partr	nersh	nips,	asso	ociati	ions,	regi	ster	ed co	o-op	erati	ves,	gov	ernn	nent	enti	ities)
Name of Entity/Company																											
Name of Trust (if applicable)																											
Name of contact pers	on c	or ic	der	ıtifi	ed	tru	ste	e^																			
Title (Dr/Mr/Mrs/Ms/Miss)							Sı	urna	ime																		
Given name(s)																											
Mailing address		_						<u>_</u>		<u>_</u>					<u> </u>						1				<u></u>		
Suburb		_						Ļ		<u>_</u>	<u> </u>					St	ate				Pc	stco	de				
Date of birth	D	D	/	Μ	Μ	/	Υ	Υ	Υ	Υ																	
^ As previously nominated for th	ne IOOF	F Mu	ltiSer	ies ad	ccou	nt pro	ovide	ed.																			
Nominated represe	ntati	ive	or	pov	wei	r <b>of</b>	att	tor	ney	۸۸																	
Title (Dr/Mr/Mrs/Ms/Miss)								Su	rnam	ie [																	
Given name(s)																											
^^ As previously nominated in	ı writing	g an	d acc	.epte	d by	IISL a	s aut	thori	ty to a	act or	n the	IOOF	Mul	tiSeri	es aco	coun	t prov	/idec	l.								

#### Step 2: Additional investment instruction

Please specify the additional investment(s) you would like to make to your existing investment in the IOOF MultiSeries Trust(s):

Name of Trust	Amount to be invested
IOOF MultiSeries 30	\$
IOOF MultiSeries 50	\$
IOOF MultiSeries 70	\$
IOOF MultiSeries 90	\$ .
Total	\$ .

#### Please note:

For any additional investment equal to or more than \$2 million you must also complete the High Threshold Transaction form available at www.ioof.com.au

Please make your cheque(s) payable to 'IOOF Applications Trust Account - Applicant(s) Name' marked 'Not Negotiable'.

**Post to:** IOOF MultiSeries, Reply Paid 264, Melbourne, VIC 8060 **Enquiries:** 1800 002 217 (or +613 8614 4966 if calling from New Zealand)

**Fax:** 1800 558 539

#### Alternative ways of adding to your investment – BPAY facility (optional)

Additional investments can be easily made to your existing investment via BPAY. Further information on utilising the BPAY facility is included on page 3 of this forms booklet.

If you would like to set up your account for future BPAY investments directly through your nominated financial institution account, please tick the box below:

I/We would like to receive a Customer Reference Number (CRN) for making additional investments using BPAY.

The BPAY biller codes for each IOOF MultiSeries are detailed below:

Name of Trust	BPAY Biller code
IOOF MultiSeries 30	959510
IOOF MultiSeries 50	959528
IOOF MultiSeries 70	959957
IOOF MultiSeries 90	959536

#### Step 3: Financial adviser details (if applicable)

#### Financial adviser details

Dealer group															
Licensee name															
				Ť	İ			Ì	Ì	Ì					
Financial adviser name						AFS									
Financial adviser number						n	ium	ber L							
Dealer stamp															

For assistance, financial advisers can contact Investor Services on 1800 002 217 (+613 8614 4966 if calling from New Zealand)

#### **Step 4: Investor declaration**

I/We wish to add to my existing investment in the Trust(s) as detailed in this additional investment instruction form.

I/We confirm that I/we have personally received the PDS (and any SPDS) or paper print out of the electronic version of the current PDS (and any SPDS) for the Trust(s) in which I/we are requesting to invest.

I/We confirm that I/we have read and understood:

- that an investment made in the Trusts does not represent an investment in IOOF Investment Services Ltd (IISL), ABN 80 007 350 405, AFS Licence No. 230703, nor any related body corporate within the IOOF group, nor any investment management company appointed to manage the investment assets of the Trusts
- that neither IISL nor any related body corporate within the IOOF group, nor any investment management company appointed to manage the investment assets of the Trusts, guarantees the performance of any Trust or the return or repayment of capital or income
- that I/we agree to be bound by the provisions of the PDS (and any SPDS) and the constitution of the relevant Trust in the IOOF range
- that investments in the Trusts are subject to investment risks including possible delays in repayment and loss of income and principal invested.

#### **Privacy**

I/We understand, that:

- IISL is required to collect my/our personal information under the Corporations Act 2001 and the Anti-Money Laundering and Counter Terrorism Financing Act 2006
- information provided to IISL is used for the purpose of operating my/our investment account and for other related purposes as detailed in the PDS (and any SPDS) and the IOOF Group Privacy Policy available at www.ioof.com.au/privacy
- IISL may disclose my/our personal information to internal and external parties as described in the PDS (and any SPDS)
- if I/we do not provide all of the information requested in this application form, IISL may not be able to action my/our request
- the IOOF Group Privacy Policy contains information about how I/we may access or correct the personal information held by IISL and how I/we may complain about a breach of the Australian Privacy Principles.

#### Who needs to sign?

All original investors registered on the account must sign this section unless previous authority has been provided in writing and accepted by IISL, such that:

- a single joint investor can sign on behalf of a joint investor account
- a representative nominated to act and operate on the account can sign on your behalf\* or
- a Power of Attorney can sign on your behalf\*, in which case a certified copy of the Power of Attorney must have been previously provided to IISL and retained on file for us to process your additional investment.
- \* If signed by a nominated representative or Power of Attorney, please ensure that the 'Nominated Representative or Power of Attorney' section in Step 1 is completed.

#### **Corporate investors**

This additional investment instruction form must be signed either:

- by the representative previously nominated for your IOOF MultiSeries account or
- under common seal
- by two directors or a director and company secretary or
- by the sole director (where applicable).

If not signing under common seal, please state your title, eg Director, Company Secretary or Sole Director and Company Secretary. Signatory 1 Date Title (such as Director/Sole Director/Company Secretary) Full name Signatory 2 (for joint investors or additional trustees, if applicable) Title (such as Director/Sole Director/Company Secretary) Full name Signatory 3 (for additional Date Trustees if applicable) Title (if applicable) Full name Signatory 4 (for additional Trustees if applicable) Date Title (if applicable) Full name



## MULTISERIES

5 October 2021

### Switching instruction form

If you are investing in the Trusts via an Investor Directed Portfolio Service (IDPS) or master trust, you must complete the documents that the IDPS or master trust requires. **You do not need to fill out this form.** 

For assistance please call Investor Services on 1800 002 217 (or +613 8614 4966 if calling from New Zealand).

Complete this form if you wish to switch your investment from one Trust to another Trust, within the IOOF MultiSeries range.

#### Important information

- Please complete these instructions in BLACK INK using CAPITAL LETTERS (except for your email address) and ✓ boxes where provided.
- The minimum switch amount is \$5,000 for each Trust. You must maintain a minimum balance of \$25,000 in each Trust.
- Switching operates as a withdrawal of units in one Trust and the investment of units in another Trust and therefore may have taxation implications. Please contact your financial or taxation adviser for more information.
- If this instruction has previously been made through a nominated representative or under a Power of Attorney please complete **PART A** or **PART B** (as applicable) as well as the 'Nominated Representative or Power of Attorney' section below.

#### **Step 1: Investor details** Account number Part A – Individual Investor or Joint Investors **Investor 1** (all notices and correspondence will be sent to the address of Investor 1) Title (Dr/Mr/Mrs/Ms/Miss) Surname Given name(s) Mailing address Suburb Postcode State Date of birth Investor 2 (if applicable) Title (Dr/Mr/Mrs/Ms/Miss) Surname Given name(s) Mailing address Suburb State Postcode Date of birth

Part B – Non-indivi	dua	al ir	ıve	sto	ors (	eg c	omp	oani	es, ti	rusts	, pai	rtne	rship	os, a	SSOC	iatic	ns (	such	as i	ncor	pora	ated	/uni	ncor	pora	ted	
club/body, registered co-ope	erativ	es, c	jove	rnm	ent e	entit	ies)																				
Name of Entity/Company																											
Name of Trust																											
Name of contact pers	on	or i	nde	enti	fied	l trı	uste	ee^	,						ı	ı		ı	ı							ı	ı
Title (Dr/Mr/Mrs/Ms/Miss)							Sui	nan	ne																		
Given name(s)																							L		<u></u>		
Mailing address																											
Suburb																Sta	ate				Po	stco	de				
Date of birth	D	D	/	M	Μ	/	Υ	Υ	Υ	Υ																	
^ As previously nominated for th	ne IOC	OF Mu	ıltiSe	ries a	ccoun	t pro	vide	d.																			
Nominated represe	nta	tive	or	po	wer	of	atto	orn	ey^	۸																	
Title (Dr/Mr/Mrs/Ms/Miss)								Surr	name	2																	
Given name(s)																											
^^ As previously nominated in	writir	ng an	d acc	epte	d by II	SL as	auth	ority	to a	ct on t	the I	OOF	Multi	Serie	es acc	ount	prov	ided									

#### **Step 2: Switching instruction**

Please indicate which Trust(s) you wish to be switched out of and into which Trust(s) you wish to invest.

Name of Trust	Switch from my existing Trust(s)	Switch to the following Trust(s)		uld you like e distributed?*
	(\$ or %)	(\$ or %)	OPTION A Reinvested as additional units (✔)	OPTION B* Deposited directly into your nominated financial institution account (  //)
IOOF MultiSeries 30				
IOOF MultiSeries 50				
IOOF MultiSeries 70				
IOOF MultiSeries 90				
Total				

#### \*Please note:

- Only complete if you wish to switch to a new Trust (in which you currently do not hold units) OR if you wish to change your current distribution instructions relating to your existing Trust(s).
- If you have selected to switch to a new Trust (in which you currently do not hold units) and do not select a distribution method, this will be taken as a direction to reinvest your income distribution as additional units in the Trust from which the income was derived.
- If you select Option B and a payment is rejected by your financial institution, this will be taken as a direction to reinvest that income distribution and all future income distributions as additional units in the Trust from which the income was derived.

#### # Income distribution account details

Only complete the section below if you have selected to have your distribution paid directly into your nominated financial institution account, and you have not previously provided us with your financial institution account details, or if you wish to change your nominated financial institution account.

Financial institution																			
Branch																			
Account name																			
BSB				_ [				A	Accoi	unt r	num	ber							
Step 3: Financial	ad	lvi	SAN	· de	ta	ilc	(if a	nnli	-ahl	۵۱									
Step 3. i maneiai		I V I.	<i></i>	ac	···	113	(II a	ppiid	.abi	<b>C</b> )									
Dealer group																			
3 1									Τ										_

Eicensee name

Financial adviser name

Financial adviser number

AFS licence
number

Dealer stamp

For assistance, financial advisers can contact Investor Services on 1800 002 217

#### **Step 4: Investor declaration**

I/We wish to switch investments in the Trusts as described in this switching instruction form. I/We confirm that I/we have personally received the IOOF MultiSeries PDS (and any SPDS) or paper print out of the electronic version of the current PDS (and any SPDS) before applying for a switch/investment in the Trusts.

I/We declare that:

- all details in this switching instruction form are true and correct and I/we undertake to inform IISL of any changes to the information supplied as and when they occur
- the investor details to be registered against any investments into a new Trust(s) (of which I/we did not previously hold units), will be set up identically to the investor details registered on my/our existing Trust(s) account from which the switch is being processed and
- I/we have previously provided my TFN or ABN (or exemption) in respect of existing investments in the Trusts, and agree to IISL utilising my existing TFN or ABN information (or exemption) for the purposes of switches/investments into any new Trust(s).

I/We confirm that I/we have read and understood:

- that an investment made in the Trusts does not represent an investment in IOOF Investment Services Ltd (IISL),
   ABN 80 007 350 405, AFS Licence No. 230703, nor any related body corporate within the IOOF group, nor any investment management company appointed to manage the investment assets of the Trusts
- that neither IISL nor any related body corporate within the IOOF group, nor any investment management company appointed to manage the investment assets of the Trusts, guarantees the performance of any Trust or the return or repayment of capital or income
- the PDS (and any SPDS) in full and on becoming a unitholder, I/we agree to be bound by the provisions of the PDS (and any SPDS) and the constitution of the relevant Trust in the IOOF MultiSeries range
- that investments in the Trusts are subject to investment risks including possible delays in repayment and loss of income and principal invested.

Target Market Confirmation (mandatory)												
I/We declare that:												
I/We have received personal financial advice in relation to the IOOF MultiSeries range of Trusts  OR												
I/We have reviewed and understand the Target Market Determination for the IOOF MultiSeries Trust(s) I have selected and confirm that the Trust(s) meet(s) my objectives, financial situation and needs												
Please note: if your investment objective(s), intended use, investment timeframe and/or investment risk profile are inconsistent with those of the IOOF MultiSeries Trust(s) you have selected, then we suggest you seek financial advice that takes into account your personal circumstances.												

#### **Privacy**

I/We understand, that:

- IISL is required to collect my/our personal information under the Corporations Act 2001 and the Anti-Money Laundering and Counter Terrorism Financing Act 2006.
- information provided to IISL is used for the purpose of operating my/our investment account and for other related purposes as detailed in the PDS (and any SPDS) and IOOF Group Privacy Policy available at www.ioof.com.au/privacy
- IISL may disclose my/our personal information to internal and external parties as described in the PDS (and any SPDS)
- if I/we do not provide all of the information requested in this application form, IISL may not be able to action my/our request
- the IOOF Group Privacy Policy contains information about how I/we may access or correct the personal information held by IISL and how I/we may complain about a breach of the Australian Privacy Principles.

#### **Financial report**

A financial report is available online at www.ioof.com.au by 30 September each year detailing the financial position of the Trusts at the financial year ending 30 June. Alternatively, you may choose to receive a hard copy of the financial report by ticking this box:

#### Who needs to sign?

All original investors registered on the account must sign this section unless previous authority has been provided in writing and accepted by IISL, such that:

- a single joint investor can sign on behalf of a joint investor account
- a representative nominated to act and operate on the account can sign on your behalf\*, or
- a Power of Attorney can sign on your behalf\*, in which case a certified copy of the Power of Attorney must have been previously provided to IISL and retained on file for us to process your switch.
- If signed by a nominated representative or Power of Attorney, please ensure that the 'Nominated Representative or Power of Attorney' section in Step 1 is completed.

#### Who needs to sign?

(Note this does not apply to non-individual investors eg companies, trusts, partnerships, associations (such as incorporated/unincorporated club/body, registered co-operatives, government entities)

If each investor is able to operate the account and bind the other joint investor(s) for future transactions (including additional investments, switches and withdrawals) please tick this box:

#### **Corporate investors**

This switching instruction form must be signed either:

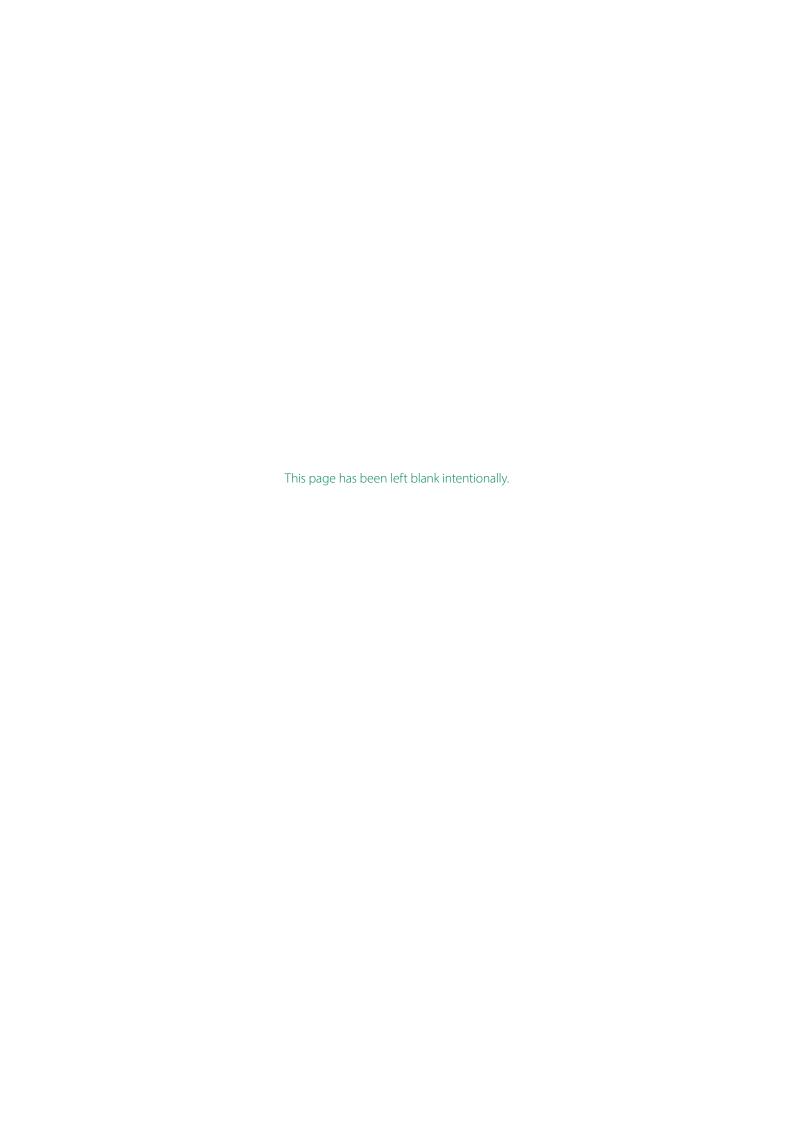
- by the representative previously nominated for your IOOF MultiSeries account
- under common seal
- by two directors or a director and company secretary or
- by the sole director (where applicable).

If not signing under common seal, please state your title, eg Director, Company Secretary or Sole Director and Company Secretary.

													1	·													
Signatory 1																D	ate	D	D	/	M	M	/	Υ	Υ	Υ	Υ
Title (such as Director/Sole Director/Company Secretary)																											
Full name																											
<b>Signatory 2</b> (for joint investors or additional trustees, if applicable)																D	ate	D	D	/	М	M	/	Υ	Υ	Υ	Υ
Title (such as Director/Sole Director/Company Secretary)																											
Full name															1												
<b>Signatory 3</b> (for additional Trustees if applicable)		1		T			T		T		T	T	T	T		D	ate	D	D	/	M	M	/	Υ	Υ	Υ	Υ
Title (if applicable)																											
Full name															1												
<b>Signatory 4</b> (for additional Trustees if applicable)																D	ate	D	D	/	M	M	/	Υ	Υ	Υ	Υ
Title (if applicable)																											
Full name																											
Common seal (of company) if required																											



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## How to contact us

#### **Responsible Entity**

IOOF Investment Services Ltd ABN 80 007 350 405 AFS Licence No: 230703

#### **Registered Office**

161 Collins Street
Melbourne VIC 3000

#### **Postal address**

GPO Box 264 Melbourne VIC 3001

#### Telephone

1800 002 217

or +613 8614 4966 if calling from New Zealand)

#### Fax

1800 558 539

#### Email

investorservicesemails@ioof.com.au

#### Website

www.ioof.com.au