

Mutual Limited

Mon-Fri 8.30am - 5pm <u>mutual@gendevelopmentservices.com.au</u> 1800 948 122

oplication Form

**Enquiries** 

# Application Form Mutual Cash Fund (MCTDF)

May 2022 | ARSN: 152 623 106

#### Instructions

- Please ensure you have read and understood the current PDS for the Mutual Cash Fund (MCTDF) ARSN 152 623 106 (Fund) before applying for units in the Fund. The PDS is available on our website, from your financial adviser or by contacting Mutual Limited (the Responsible Entity or the RE). The law prohibits any person passing this Application Form on to another person unless it is accompanied by a complete PDS. The PDS will be updated from time to time.
- Each applicant must complete both the Application Form and Mutual Identification Form. The Identification Form is included at the back of this application pack. In addition, supporting identity documents are required for verification purposes. More information will be provided throughout the Form.
- Applications may be rejected where changes have been made and not initialed by all parties, or where corrective tape has been used.
- All applicants should begin at Section 1 and complete the Form(s) in block capitals where possible.

Appl	ication checklist
	Application Form
	Identification Form (included in this application pack)
	Original certified identity documents
<b>&gt;</b>	Return forms and documents to: Post: Generation Development Group, GPO Box 263, Collins

Post: Generation Development Group, GPO Box 263, Collins Street West, Vic, 8007 Email : mutual@gendevelopmentservices.com.au

Section 1   Invest	or type	S	Section 2	Account set-up	
1.1 Confirm your inve	estor type by ticking <u>one</u> box			have an existing (op	en) account
Individual or jo	int investors	V	with Mutua	l Limited?	
provide the nam	nes of all investors		No - g	go to Section 3	
			Yes -	continue to 2.2	
		2	2.2 Tick <u>one</u>	relevant box	
			l am n	naking an investmer	nt for a different entity
Trust with indiv	vidual trustee/s		l woul	ld like to add this fur	nd to an existing
provide the nan	nes of the trustee(s) and the trus	t		unt (provide the inves	
				ification Form is still i	d to see if the Mutual required)
			l am r	naking an investmer	nt for the same entity or
Trust with corp	orate trustee			n(s), but would like	
provide the nan	nes of the trustee and the trust			per <b>designation requ</b>	
				or number and chose ct Mutual Limited to s	n designation below and see if the Mutual
			Identi	fication Form is still r	equired)
Company					
	ne of the company				
			Section 3	Investment deta	ils
Other entity			3.1 Investm		lf you do not select a
specify the type	ofentity				ons will be reinvested.
			Fund		Investment Amount
provide the nam	ne of the entity		Mutual Cas	sh	\$
	plated the application form y		Distributio	n preference	%
	pleted the application form, y e the relevant Mutual Identific		Pay to ban	k account	
Form:			Reinvest (D	Default Option)	
Investor Type	Mutual Identification Form	Page			
Individual or joint investors	Individual and joint investors	7-8	3.2 Please i	indicate the source o	f funds being invested
Trusts			Saving	gs	Superannuation
(including SMSFs)	Trusts and trustees	9-13	Invest	ment income	Donation/gift
Companies	Companies or	14-16	Inheri	tance	Normal course of business
companies	Incorporated Bodies		Comn	nission	Asset sale
Other entities (e.g. Associations)		048 122	Other		

#### Section 4 | Payment method

#### 4.1 Select payment method

Applications made by cheque will not be processed until the funds have cleared.

Cheque	Account Name: Sandhurst Trustees Limited acf MCTDF	i
EFT	Account Name: Sandhurst Trustees Limited acf MCTDF Reference: Investor name or number	<b>BSB:</b> 083-817 <b>Account Number</b> 11 595 9991

#### Section 5 | Bank details

5.1 Provide your bank details for withdrawals Include the full name of the account. We cannot make payments to third-parties. If you elected to receive your distributions to a bank account, payment will be made to these details.

Account name

 BSB
 Account number

 Financial institution name and branch name

 Additional information for foreign bank accounts

 SWIFT/BIC
 ABA/FED (US)

 IBAN (EU)

#### Section 6 | Power of Attorney

If you are acting as power of attorney or agent for the investor, complete your details below. You will need to supply the following along with the application:

- Originally certified POA or client agreement
- Mutual Identification Form for the POA/agent in addition to the Mutual Identification form for the investor.

Company or name		
Phone		
Email		
Postal address		
Select your preferred correspondence method:		
Email Post		

Section 7   Investor contact details	Section 8   Other contacts
Provide contact details for the investor(s). If you are an adviser, agent, or POA, <u>do not</u> complete your details in this section.	If you would like someone other than your financial adviser to receive copies of correspondence (e.g. your accountant or a family member), provide their details below <sup>3</sup> .
7.1 Investor contact	Company or name
Title Date of birth	Phone
Name	Email
Phone	Postal address
Email	
Postal address	Select your preferred correspondence method:
	Email Post
Select your preferred correspondence method:	Section 9   Adviser To be completed by your adviser.
	9.1 Advisor Details
7.2 Investor contact	Dealer group
Title Date of birth	Adviser name
Name	Email
Phone	Phone
Email	Address
Postal address	
	AFSL Authorised rep number
Select your preferred correspondence method:	
Email Post No correspondence <sup>2</sup>	Select your preferred correspondence method:
	Email No correspondence
	Adviser signature
	Adviser signature
	Name
	Date

<sup>2</sup> For security purposes, registration instructions will be sent by post to the address provided.

<sup>3</sup>You authorise Mutual to provide information and statements on the status of your investment to your nominated account contacts. Contacts cannot change your details or sign any instructions (such as redemptions) on your behalf.

Section 10   Your investment objectives	10.5 What is your anticipated frequency of withdrawals?
In relation to our Design and Distribution Obligations (DDO)	
under the Corporations Act, we seek the following information	Daily
about your attributes as an investor. Failure to complete	Weekly
the questions below may result in delays in processing your	Monthly
application.	
	Quarterly
10.1 What is your primary investment objective?	Annually or longer
Income distribution	
(receiving regular income from your investment)	10.6 Have you received advice prior to applying to
Capital preservation	invest in this Fund?
(preserving the value of your investment/preventing loss)	I/We have received personal advice in relation to my
	investment in this fund (Financial product advice that
Capital guaranteed	has been given to you by a person who has considered
(shielding your investment from any losse <b>s)</b>	one or more of your investment objectives)
Capital growth	I/We have received general advice in relation to my
(increased value of your investment over time)	investment in this fund (Financial product advice that
	has been given to you but has not been tailored to your
10.2 What is the intended use of this Fund in your	personal circumstances or investment objectives)
investment portfolio?	I/We have not received advice in relation to my
Solution/standalone	investment in this fund
(primary investment- 75%-100% of portfolio)	
Core component	
(large proportion - 25%-75% of portfolio)	Note: Acceptance of your application should not be taken
	as a representation or confirmation that an investment in
Satellite/small allocation	the Fund is, or is likely to be, consistent with your
(smaller proportion - 25% or less of portfolio)	intentions, objectives and needs as indicated in your
10.3 What is the intended investmenttimeframe?	responses to these questions.
Short term	Section 11   How did you hear about us?
(two years or less)	Please tick the relevant box and give more details if
Medium term	applicable:
(more than 2 years)	
Long term	Financial Adviser
(more than 8 years)	Investment Platform
	Google
10.4 What is your tolerance for risk/return?	
(How much of a loss you are willing to tolerate within	Word of Mouth
your portfolio when assessed against the possibility of	Other
greater returns)	
Low Medium High Very high	

#### Section 11 | Declaration

#### By signing this form, you acknowledge and declare:

- I/we have carefully read and understood the latest Product Disclosure Statement in its entirety and agree to be bound by the constitution of the Fund and the PDS as supplemented, replaced or re-issued from time to time.

- I/We acknowledge that investment in the Fund is subject to investment risk, including possible delays in repayment and loss of income or capital invested and that Mutual does not guarantee the performance of the Fund, nor any particular rate or return for the Fund, nor repayment of capital from the Fund.

- I /We acknowledge that application monies will be held in a non-interest-bearing account until applied to the Fund or returned to me/us.

- I/We authorise that Mutual can provide information on the status of my/our investment to my/our nominated financial adviser, agent or account contacts.

- Mutual Limited as RE is required to comply with the anti-money laundering laws and I/we undertake to provide them with such additional information or documentation as may be requested of me/us, from time to time, to ensure compliance with such requirements.

- Monies deposited or debited are not associated with crime, terrorism, money laundering or terrorism financing, nor will monies received from my/ our account have any such association.

- I/We have received and accepted the offer in the PDS in Australia and have legal power to invest.
- I/We am not a PEP (Politically Exposed Person).

- I//We have all regulatory approvals required in Australia and any other relevant jurisdiction to hold units.

- I/We understand that an investment in the Fund or the acquisition of units does not represent an investment in a deposit or other liability of Mutual Limited or its related entities.

- I/We have relied on my/our own independent investigation, enquiries and appraisals, and have obtained or have had the opportunity to obtain legal, accounting, tax and financial advice, in connection with the Fund before deciding to subscribe for units.

- If this Application Form is signed under power of attorney, I/we have no knowledge of the revocation of that power of attorney.

- If this is a joint application, our investment is as joint tenants, unless otherwise indicated on this application.

- If this is a joint application, each of us is able to operate our investment in the Fund and is able to bind the other(s) to any transaction including investments or withdrawals by any available method, unless otherwise indicated in this application.

- My/our personal information will be collected, used and disclosed on terms described in the PDS.

- I/We will provide Mutual Limited or its nominees any information that they reasonably require in order to enable Mutual to meet its compliance, reporting and other obligations under FATCA and CRS and all associated rules and regulations from time to time, and that Mutual or its agents may disclose such information to the ATO which may in turn disclose the information to the Internal Revenue Service of the USA.

- If I/we or our nominee have provided information about my/our status or designation under or for the purposes of FATCA (including, without limitation, USA residency or citizenship status and FATCA status as a particular entity type) and all associated rules and regulations, that information is true and correct and Mutual will treat that information as true and correct without any additional validation or confirmation being undertaken by Mutual except where it has a legal obligation to do so.

Section 12 | Signing instructions

#### **Companies and corporate trustees:**

As per the authorised signature list, or, two directors, or one director and one company secretary, except where the sole director is also the sole company secretary. Individual trustees: All trustees must sign.

Individual or joint holding: All investors must sign.

#### **Other entities:**

As per the authorised signatory list.

#### **Power of attorney:**

As set out in the POA agreement.

Plea	ise indicate who can sign future instructions:		
Such	n as transactions, including (but not limited to)	Signature	
addi	tional investments, withdrawals, and change of details.	Nome	
lf no	selection is made, a minimum of two signatures will	Name	
be r	equired. This selection does not apply for a POA or	Position	Date
indi	vidual investors.	(If Applicable)	
	Any one director/holder/trustee		
	Any two directors/holders/trustees	Signature	
	All signatures that appear below	Name	
	As per the authorised signature list supplied (you are obligated to keep this updated)	Position (If Applicable)	Date

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mutual@gendevelopmentservices.com.au 1800 948 122

Mutual Limited

## Investor Identification Form Individual and joint investors

- Complete this identification form in block letters.
- Complete details for each individual investing. If there are more than three individuals, complete an additional form.
- Make copies of your ID document(s) and arrange for them to be certified.
- Attach this form and your ID documents to your application form before you send it to us.
- If this form has been requested separately to your initial application, return to mutual@gendevelopmentservices.com.au

Section 1   Individual/joint applicant 1	Section 2   Individual/joint applicant 2
1A - Personal Details	2A - Personal Details
Title Date of birth   Surname	Title Date of birth   Surname
Given name	Given name
Residential address	Residential address
1B - Tax Information	2B - Tax Information
Without your TFN, or exemption, withholding tax may be deducted from your distributions.	Without your TFN, or exemption, withholding tax may be deducted from your distributions.
Are you an Australian tax resident?	Are you an Australian tax resident?
No	No
Yes, my TFN	Yes, my TFN
Are you a citizen or resident of the US, or any other foreign country for tax purposes?	Are you a citizen or resident of the US, or any other foreign country for tax purposes?
No <sup>1</sup>	No <sup>1</sup>
Yes, my TIN is:	Yes, my TIN is:
Country:	Country:

Mutual Identification Form

Section 3   Individual/joint applicant 3	Section 4   Declaration	
3A - Personal Information     Title   Date of birth   Surname   Given name   Residential address	<ul> <li>By completing and signing this form:</li> <li>you acknowledge that you have read and understood this form</li> <li>you confirm this form is complete and accurate</li> <li>if you have applied for but not received your TIN, you undertake to inform us within 30 days of receiving it</li> <li>you undertake that if information in this form changes, you will tell us within 30 days</li> <li>It is a condition of investing that you keep your details (including tax details) with us, up to date. You agree to update us if the information in this form changes.</li> </ul>	
3B - Tax Information	Signature	
Without your TFN, or exemption, withholding tax may be deducted from your distributions. Are you an Australian tax resident?	Name Date	
No	Signature	
Yes, my TFN	Name	
Are you a citizen or resident of the US, or any other foreign country for tax purposes?	Date	
No <sup>1</sup>	Signature	
Yes, my TIN is:	Name	
Country:	Date	

#### Section 5 | Identity documents

Each individual or joint investor must provide an originally certified copy of their passport or drivers license along with the Application Form and ID Form. Your photo, personal details and signature must be clear. All documents must be valid (not expired), with the exception of an Australian passport which may have expired in the preceding two years. Documents not meeting the requirements set out may be rejected which could delay your application. If you do not have the documents listed above, please contact our Client Services team. Please be advised that further documents may be requested before your application can be processed.

All documents must be originally certified, i.e. 'wet' signature. The certification must include the following information, or the documents may be rejected:

- Name and date
- Position and company
- Contact details
- Registration or license number, if any

#### Mon-Fri 8.30am - 5pm mutual@gendevelopmentservices.com.au 1800 948 122

Mutual Limited

## Investor IdentificationForm Trusts and trustees

- Complete this identification form in block letters.
- Corporate trustees complete sections 1-2 and 4-6, individual trustees complete sections 1 and 3-6.
- Make copies of your ID document(s) and arrange for them to be certified.
- Attach this form and your ID certified documents to your application form before you send it to us.
- If this form has been requested separately to your initial application, return to mutual@gendevelopmentservices.com.au

#### Section 1 | FATCA and CRS<sup>1</sup>

If you answer yes to any of the following questions, you must
complete the Tax Information Form, available by contacting Mutual
directly.

If you have any questions about the terminology, or are unsure of any of the answers, consult a legal or accounting professional.

Is the trust or trustee investing as, for, or on behalf of a US or any other foreign company or entity?

No

Yes - complete a Tax Information Form

Is the trust or trustee a 'financial institution'?

No

Yes - complete a Tax Information Form

Is the trust or trustee an Active Non Financial Entity (NFE)?

No

Yes - complete a Tax Information Form

Are any of the following individuals a US citizen or resident, or citizen or resident of any other foreign country for tax purposes?

- beneficiaries or individual trustees
- directors of the corporate trustee
- beneficial owners of the trust or trustee
- controlling persons of the trust or trustee

No

Yes - complete a Tax Information Form

Section 2 | Corporate trustee

2A - Details	
Full name of company	
ACN	
Nature of business	
Registered address	
Principal place of busin	ess:
Same as above	OR

#### 2B - Directors

Provide the full names of the directors of the company

**Mutual Identification Form** 

**Enquiries** 

<sup>1</sup> The Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) are regulatory requirements. The Australian Government has 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.

2C - Type of company	Beneficial owner/controlling person of the trustee 1
Tick all that apply and answer the corresponding questions:	Tick one: Beneficial owner Controlling person
Listed company, or a majority-owned subsidiary of a listed company Name the exchange/market and company code	Title Date of birth Date of birth
Regulated company (e.g. AFSL holder) <i>Name the regulator</i>	Given name Residential address
Provide the license number	Are you an Australian tax resident?          No       Yes, my TFN is:
Foreign company Country of formation	Beneficial owner/controlling person of the trustee 2         Tick one:       Beneficial owner         Controlling person
Provide the ARBN if the company is ASIC registered	Title Date of birth
Identification number issued by local registration body	Given name
Private company	Residential address
Public company, not listed or regulated	
If you did not tick boxes 1 or 2, go to section 2D. If you ticked boxes 1 or 2, go to section 4	Are you an Australian tax resident?
2D - Beneficial owners of the trustee	Beneficial owner/controlling person of the trustee 3
<ul> <li>For unregulated and unlisted companies, we require the name and address of:</li> <li>each beneficial owner - e.g. any person who owns through one or more shareholdings more than 25% of the issued capital of the company; and</li> <li>any persons who are entitled to exercise 25% or more of the company's voting rights or persons who ultimately</li> </ul>	Tick one: Beneficial owner Controlling person   Title Date of birth Date   Surname Given name   Residential address
control (directly or indirectly) the company ('controlling persons').	
Please list their details in the next column. If there are more than three of these individuals, please write down their details on a separate piece of paper and initial it before submitting it along with this form.	Are you an Australian tax resident?

Section 3   Individual trustees	Section 4   Trust
Complete the details of the individual trustees. If there are more than three trustees, complete their details	<b>4A - Type of Trust</b> Name of trust
on a separate piece of paper and initial it before submitting italong with this form.	
Individual trustee 1	
Title Date of birth	TFN or exemption code <sup>2</sup>
Surname	
Given name	Confirm the type of trust (tick one)
Residential address	Superannuation fund
	Provide the ABN and go to Section 5
Are you an Australian tax resident?	Unregulated (e.g. family, discretionary, unit, charitable)
No Yes, my TFN is:	Confirm type of trust and go to Section 4B
Individual trustee 2	Registered managed investment scheme
Title Date of birth	Provide the ARSN and go to Section 5
Surname	
Given name	Government superannuation fund
Residential address	Name the Act establishing the fund and go to Section 5
	Trust regulated by a foreign body
Are you an Australian tax resident?	Name the regulator and country and go to Section 4B
No Yes, my TFN is:	
Individual trustee 3	Other regulated trust Provide the ABN/license number and regulator, and go to
Title Date of birth	Section 5
Surname	
Given name	
Residential address	
Are you an Australian tax resident?	
No Yes, my TFN is:	

4B - Trust details	Beneficial owner/controlling person of the trust 1
Complete this section if you are an unregulated trust (e.g. family	Tick one: Beneficial owner Controlling person
or discretionary trust), or a foreign trust	
Do the terms of the trust identify the beneficiaries by	Title Date of birth
reference to membership of a class? (e.g. family members)	Surname
Yes	Given name
Provide the name of the class(es)	Residential address
No	
Provide the full names of the beneficiaries	Are you an Australian tax resident?
	No Yes, my TFN is:
	Beneficial owner/controlling person of the trust 2
	Tick one: Beneficial owner Controlling person
If applicable, provide the name of the appointer of the trust (not all trusts have an appointer)	Title Date of birth
	Surname
If applicable, provide the name of the settlor	Given name
(not required if the material asset at the time the trust was established was less than \$10,000, or if the settlor is deceased)	Residential address
Section 4C - Beneficial owners of the trust	Are you an Australian tax resident?
We require the name and address of the:	No Yes, my TFN is:
<ul><li>Beneficial owners of the trust</li><li>Controlling persons of the</li></ul>	
trust	Beneficial owner/controlling person of the trust 3
If the beneficial owners or controlling persons of the trust are also the individual trustees, beneficial owners,	Tick one: Beneficial owner Controlling person
or controlling persons of the corporate trustee, and	Title Date of birth
their details have already been provided in this form,	Surname
tick this box and confirm their name and position	
below and go to Section 5.	Given name
	Residential address
	Are you an Australian tax resident?
If details of the beneficial owners or controlling persons have	No Yes, my TFN is:
not been provided previously in this form, complete their	

Mutual Limited

details in the next column.

#### Section 5 | Declaration

By completing and signing this form:

- You acknowledge that you have read and understood this form.
- You confirm this form is complete and accurate.
- You undertake that if information in this form changes, you will tell us within 30 days.
- It is a condition of investing that you keep your details (including tax details) with us, up to date. You must update us if the information in this form changes.

Signature	
Name	
Position	
Date	
Signature	
Name	
Position	
Date	

#### Section 6 | Supporting documents

Documents must be provided from both Part A and Part B.

All documents must be legible, and photos must be clear. Photo ID must be government issued. All documents must be valid (not expired).

All documents must be originally certified<sup>1</sup>, i.e., 'wet' signature. The certification must include the following:

- Name and date
- Position and company
- Contact details
- Registration or license number, if any

Further documents may be requested before your application can be processed. Documents not meeting the requirements set out may be rejected.

#### Part A - Trust

For superannuation funds, registered managed investment schemes and other regulated trusts (except for foreign trusts):

 A printout of a search conducted on the relevant regulator's website verifying the trust. (e.g. superfundlookup.gov.au) or an original certified copy of the trust deed or deed extract and any deed variations (if applicable).

For unregulated or foreign trusts, such as family, discretionary, unit or charitable trusts:

An original certified copy of the trust deed or deed extract and any deed of variations (if applicable).

**Note:** Deed extracts must contain at least the name of the trust, the trustees and the schedule containing the names of each beneficiary or details of the class of beneficiaries.

#### Part B - Trustee

#### Individual trustee

Each individual must provide an originally certified copy of their passport or drivers license

#### Corporate trustee

#### For unlisted and unregulated companies:

- · Company extract within three months of issue
- Originally certified photo ID document for each of the beneficial owners and controlling persons
- Originally certified photo ID document for the signatories
- *Optional* Originally certified authorised signatory list, with originally certified photo ID document for the certifier if the certifier is internal (a signatory cannot be the certifier)

#### For listed or regulated companies:

- Certificate of incorporation
- Originally certified authorised signatory list, with originally certified photo ID document for the certifier if the certifier is internal (a signatory cannot be the certifier)

#### **Foreign companies**

Mutual may request additional documents for foreign companies. Please contact Mutual if you would like more information.

**Mutual Identification Form** 

### Enquiries

Mon-Fri 8.30am - 5pm mutual@gendevelopmentservices.com.au 1800 948 122

Mutual Limited

## Investor Identification Form Companies or Incorporated Bodies

- This form is for Australian and foreign companies who are not acting in the capacity of trustee. Trustees should complete the Trust and Trustees Identification Form.
- Make copies of your ID document(s) and arrange for them to be certified.
- Complete this identification form in block letters.
- Attach this form and your ID certified documents to your application form before you send it to us.
- If this form has been requested separately to your initial application, return to mutual@gendevelopmentservices.com.au

Section 1   FATCA and CRS <sup>1</sup>	Section 2   Company information
If you answer yes to any of the following questions, you must	2A- Details
complete the Tax Information Form, available by contacting Mutual	
directly.	Full name of company
If you have any questions about the terminology, or are unsure of	
any of the answers, consult a legal or accounting professional.	
	ACN
Is the investing entity investing as, for, or on behalf of a US or	
any other foreign company or entity?	Nature of business
No	Registered address
Yes - complete a Tax Information Form	
Is the investing entity a 'financial institution'?	
	Principal place of business:
No	
Yes - complete a Tax Information Form	Same as above OR provide address below
Is the investing entity an Active Non Financial Entity (NFE)?	
No	
Yes - complete a Tax Information Form	
Are any of the following individuals a US citizen or	
resident, or citizen or resident of any other foreign country for tax purposes?	2B -Directors
beneficiaries or individual trustees	Provide the full names of the directors of the compar
<ul> <li>directors of the corporate trustee</li> </ul>	
beneficial owners of the trust or trustee	
controlling persons of the trust or trustee	
No	
Yes - complete a Tax Information Form	L

<sup>1</sup> The Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) are regulatory requirements. The Australian Government has 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.

Section 2   continued	Section 3   continued
2C - Company Type	Beneficial owner/controlling person 1
Tick all that apply and answer the corresponding questions          1       Listed company, or a majority-owned subsidiary of a listed company         Name the exchange/market and company code	Tick one:    Beneficial owner    Controlling person      Title    Date of birth    Image: Controlling person      Surname    Image: Controlling person
2 Regulated company Name the regulator	Residential address
Provide the license number	Are you an Australian tax resident?
3 Foreign company Country of formation	Beneficial owner/controlling person 2         Tick one:       Beneficial owner
Identification number issued by registration body	Title Date of birth
ARBN (if registered with ASIC)	Surname Given name
<ul> <li>Private company</li> <li>Public company, not listed or regulated</li> </ul>	Residential address
If you did not tick boxes 1 or 2, go to section 3. If you ticked boxes 1 or 2, go to section 4	Are you an Australian tax resident?           No         Yes, my TFN is:
<ul> <li>Section 3 Beneficial owners</li> <li>For unregulated and unlisted companies, we require the name and address of: <ul> <li>each beneficial owner- e.g. any person who owns through one or more shareholdings more than 25% of the issued capital of the company; and</li> <li>any persons who are entitled to exercise 25% or more of the company's voting rights or persons who ultimately control (directly or indirectly) the company ('controlling persons')</li> </ul> </li> </ul>	Beneficial owner/controlling person 3         Tick one:       Beneficial owner       Controlling person         Title       Date of birth       Image: Controlling person         Surname       Image: Controlling person         Given name       Image: Controlling person         Residential address       Image: Controlling person
Please list their details in the next column. If there are more than three of these individuals, please write down their details on a separate piece of paper and initial it before submitting it	Are you an Australian tax resident?

along with this form.

#### Section 4 | Declaration

By completing and signing this form:

- You acknowledge that you have read and understood this form.
- You confirm this form is complete and accurate.
- If you have applied for but not received your TFN, 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.
- It is a condition of investing that you keep your details (including tax details) with us, up to date. You agree to update us if the information in this form changes.

Please indicate the capacity in which the form is signed. The form must be signed by two directors, or one director and the company secretary, except in the case there is a sole director.

Signature	
Name	
Position	
Date	
Signature	
Name	
Position	
Date	

#### Section 5 | Supporting documents

All documents must be legible, and photos must be clear. Photo ID must be government issued. All documents must be valid (not expired), with the exception of an Australian passport which may have expired in the preceding two years. Documents in a foreign language must be translated and the translation must be originally certified.

All documents must be originally certified<sup>1</sup>, i.e., 'wet' signature. The certification must include the following:

- Name and date
- Position and company
- Contact details
- Registration or license number, if any

Documents not meeting the requirements set out may be rejected. Further documents may be requested before your application can be processed.

#### For unlisted and unregulated companies:

- Company extract within 3 months of issue
- Original certified photo ID document for each of the beneficial owners and controlling persons
- Original certified photo ID document for the signatories certifier if they're internal (note: a signatory cannot be the certifier)
- *Optional* Original certified authorised signatory list, with originally certified photo ID document for the certifier if the certifier is internal (a signatory cannot be the certifier)

#### For listed or regulated companies:

- Certificate of incorporation
- Original certified authorised signatory list, with originally certified photo ID document for the certifier if the certifier is internal (a signatory cannot be the certifier)

#### Foreign companies

Mutual may request additional documents for foreign companies. Please contact Mutual if you would like more information.