



Mutual Limited

Enquiries

Mon-Fri 8.30am - 5pm

mutual@gendevelopmentservices.com.au 1800 948 122

Application Form

Mutual Cash

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.

Application checklist

- ☐ Application Form
- ☐ Identification Form (included in this application pack)
- ☐ Original certified identity documents



Return forms and documents to:

Post: Generation Development Group, GPO Box 263, Collins Street West, Vic, 8007

Email : mutual@gendevelopmentservices.com.au

Section 1 | Investor type

1.1 Confirm your investor type by ticking one box

☐ Individual or joint investors
provide the names of all investors

☐ Trust with individual trustee/s
provide the names of the trustee(s) and the trust

☐ Trust with corporate trustee
provide the names of the trustee and the trust

☐ Company
provide the name of the company

☐ Other entity
specify the type of entity

provide the name of the entity

Once you have completed the application form, you are required to complete the relevant Mutual Identification Form:

Investor Type	Mutual Identification Form	Page
Individual or joint investors	Individual and joint investors	7-8
Trusts (including SMSFs)	Trusts and trustees	9-13
Companies	Companies or Incorporated Bodies	14-16
Other entities (e.g. Associations)	Other entities	Contact: 1800 948 122

Section 2 | Account set-up

2.1 Do you have an existing (open) account with Mutual Limited?

☐ No - go to Section 3

☐ Yes - continue to 2.2

2.2 Tick one relevant box

☐ I am making an investment for a different entity

☐ I would like to add this fund to an existing account (provide the investor number below and contact Mutual Limited to see if the Mutual Identification Form is still required)

☐ I am making an investment for the same entity or person(s), but would like another investor number **designation required** (provide the investor number and chosen designation below and contact Mutual Limited to see if the Mutual Identification Form is still required)

Section 3 | Investment details

3.1 Investment details

Minimum investment is \$20,000. If you do not select a distribution preference, distributions will be reinvested.

Fund	Investment Amount
Mutual Cash	\$
Distribution preference	%
Pay to bank account	
Reinvest (Default Option)	

3.2 Please indicate the source of funds being invested

☐ Savings ☐ Superannuation

☐ Investment income ☐ Donation/gift

☐ Inheritance ☐ Normal course of business

☐ Commission ☐ Asset sale

☐ 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

☐

EFT

Account Name:
Sandhurst Trustees
Limited acf MCTDF

BSB:
083-817

Account Number:
11 595 9991

Reference:
Investor name or number

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

Provide contact details for the investor(s).

If you are an adviser, agent, or POA, do not complete your details in this section.

7.1 Investor contact

Title Date of birth

Name

Phone

Email

Postal address

Select your preferred correspondence method:

☐ Email ☐ Post ☐ No correspondence²

7.2 Investor contact

Title Date of birth

Name

Phone

Email

Postal address

Select your preferred correspondence method:

☐ Email ☐ Post ☐ No correspondence²

Section 8 | Other contacts

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 below³.

Company or name

Phone

Email

Postal address

Select your preferred correspondence method:

☐ Email ☐ Post

Section 9 | Adviser

To be completed by your adviser.

9.1 Advisor Details

Dealer group

Adviser name

Email

Phone

Address

AFSL Authorised rep number

Select your preferred correspondence method:

☐ Email ☐ Post ☐ No correspondence

Adviser signature

Adviser signature

Name

Date

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

³ 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

In relation to our Design and Distribution Obligations (DDO) under the Corporations Act, we seek the following information about your attributes as an investor. Failure to complete the questions below may result in delays in processing your application.

10.1 What is your primary investment objective?

- ☐ Income distribution
(receiving regular income from your investment)
- ☐ Capital preservation
(preserving the value of your investment/preventing loss)
- ☐ Capital guaranteed
(shielding your investment from any losses)
- ☐ Capital growth
(increased value of your investment over time)

10.2 What is the intended use of this Fund in your investment portfolio?

- ☐ Solution/standalone
(primary investment- 75%-100% of portfolio)
- ☐ Core component
(large proportion - 25%-75% of portfolio)
- ☐ Satellite/small allocation
(smaller proportion - 25% or less of portfolio)

10.3 What is the intended investment timeframe?

- ☐ Short term
(two years or less)
- ☐ Medium term
(more than 2 years)
- ☐ Long term
(more than 8 years)

10.4 What is your tolerance for risk/return?

(How much of a loss you are willing to tolerate within your portfolio when assessed against the possibility of greater returns)

- ☐ Low ☐ Medium ☐ High ☐ Very high

10.5 What is your anticipated frequency of withdrawals?

- ☐ Daily
- ☐ Weekly
- ☐ Monthly
- ☐ Quarterly
- ☐ Annually or longer

10.6 Have you received advice prior to applying to invest in this Fund?

- ☐ I/We have received personal advice in relation to my investment in this fund (Financial product advice that has been given to you by a person who has considered one or more of your investment objectives)
- ☐ I/We have received general advice in relation to my investment in this fund (Financial product advice that has been given to you but has not been tailored to your personal circumstances or investment objectives)
- ☐ I/We have not received advice in relation to my investment in this fund

Note: Acceptance of your application should not be taken as a representation or confirmation that an investment in the Fund is, or is likely to be, consistent with your intentions, objectives and needs as indicated in your responses to these questions.

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.

Please indicate who can sign future instructions:

Such as transactions, including (but not limited to) additional investments, withdrawals, and change of details. If no selection is made, a minimum of two signatures will be required. This selection does not apply for a POA or individual investors.

- ☐ Any one director/holder/trustee
- ☐ Any two directors/holders/trustees
- ☐ All signatures that appear below
- ☐ As per the authorised signature list supplied (*you are obligated to keep this updated*)

Signature

Name

Position
(If Applicable)

Date

Signature

Name

Position
(If Applicable)

Date



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
<div>1A - Personal Details</div> <div>Title <input type="text"/> Date of birth <input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/></div> <div>Surname <input type="text"/></div> <div>Given name <input type="text"/></div> <div>Residential address <input type="text"/> <input type="text"/> <input type="text"/></div>	<div>2A - Personal Details</div> <div>Title <input type="text"/> Date of birth <input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/></div> <div>Surname <input type="text"/></div> <div>Given name <input type="text"/></div> <div>Residential address <input type="text"/> <input type="text"/> <input type="text"/></div>
<div>1B - Tax Information</div> <div>Without your TFN, or exemption, withholding tax may be deducted from your distributions.</div> <div>Are you an Australian tax resident?</div> <div><input type="checkbox"/> No</div> <div><input type="checkbox"/> Yes, my TFN <input type="text"/></div> <div>Are you a citizen or resident of the US, or any other foreign country for tax purposes?</div> <div><input type="checkbox"/> No¹</div> <div><input type="checkbox"/> Yes, my TIN is: <input type="text"/></div> <div>Country: <input type="text"/></div>	<div>2B - Tax Information</div> <div>Without your TFN, or exemption, withholding tax may be deducted from your distributions.</div> <div>Are you an Australian tax resident?</div> <div><input type="checkbox"/> No</div> <div><input type="checkbox"/> Yes, my TFN <input type="text"/></div> <div>Are you a citizen or resident of the US, or any other foreign country for tax purposes?</div> <div><input type="checkbox"/> No¹</div> <div><input type="checkbox"/> Yes, my TIN is: <input type="text"/></div> <div>Country: <input type="text"/></div>

¹ If you do not have a TIN, please state the reason. We may contact you for further information. Foreign residents without a TIN may not be accepted into the Fund.

Section 3 | Individual/joint applicant 3

3A - Personal Information

Title Date of birth

Surname

Given name

Residential address

3B - Tax Information

Without your TFN, or exemption, withholding tax may be deducted from your distributions.

Are you an Australian tax resident?

☐ No

☐ Yes, my TFN

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

☐ No¹

☐ Yes, my TIN is:

Country:

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 TIN, 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.

Signature

Name

Date

Signature

Name

Date

Signature

Name

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

¹If you do not have a TIN, please state the reason. We may contact you for further information. Foreign residents without a TIN may not be accepted into the Fund.



Mutual Limited

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Mutual Identification Form

Trust and trustees

Investor Identification Form 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@gendevservices.com.au

Section 1 | FATCA and CRS¹

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

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 business:

☐ Same as above OR

2B - Directors

Provide the full names of the directors of the company

¹ 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

Tick all that apply and answer the corresponding questions:

- ☐ Listed company, or a majority-owned subsidiary of a listed company

Name the exchange/market and company code

- ☐ Regulated company (e.g. AFSL holder) Name the regulator

Provide the license number

- ☐ Foreign company
Country of formation

Provide the ARBN if the company is ASIC registered

Identification number issued by local registration body

- ☐ Private company

- ☐ 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

2D - Beneficial owners of the trustee

For unregulated and unlisted companies, we require the name and address of:

- 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
- 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').

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.

Beneficial owner/controlling person of the trustee 1

Tick one: ☐ Beneficial owner ☐ Controlling person

Title Date of birth

Surname

Given name

Residential address

Are you an Australian tax resident?

☐ No ☐ Yes, my TFN is:

Beneficial owner/controlling person of the trustee 2

Tick one: ☐ Beneficial owner ☐ Controlling person

Title Date of birth

Surname

Given name

Residential address

Are you an Australian tax resident?

☐ No ☐ Yes, my TFN is:

Beneficial owner/controlling person of the trustee 3

Tick one: ☐ Beneficial owner ☐ Controlling person

Title Date of birth

Surname

Given name

Residential address

Are you an Australian tax resident?

☐ No ☐ Yes, my TFN is:

Section 3 | Individual trustees

Complete the details of the individual trustees.

If there are more than three trustees, complete their details on a separate piece of paper and initial it before submitting it along with this form.

Individual trustee 1

Title Date of birth

Surname

Given name

Residential address

Are you an Australian tax resident?

☐ No ☐ Yes, my TFN is:

Individual trustee 2

Title Date of birth

Surname

Given name

Residential address

Are you an Australian tax resident?

☐ No ☐ Yes, my TFN is:

Individual trustee 3

Title Date of birth

Surname

Given name

Residential address

Are you an Australian tax resident?

☐ No ☐ Yes, my TFN is:

Section 4 | Trust

4A - Type of Trust

Name of trust

TFN or exemption code²

Confirm the type of trust (tick one)

☐ Superannuation fund
Provide the ABN and go to Section 5

☐ Unregulated (e.g. family, discretionary, unit, charitable)
Confirm type of trust and go to Section 4B

☐ Registered managed investment scheme
Provide the ARSN and go to Section 5

☐ Government superannuation fund
Name the Act establishing the fund and go to Section 5

☐ Trust regulated by a foreign body
Name the regulator and country and go to Section 4B

☐ Other regulated trust
Provide the ABN/license number and regulator, and go to Section 5

²Without a TFN, or exemption, withholding tax + medicare levy may be deducted from your distributions.

4B - Trust details

Complete this section if you are an unregulated trust (e.g. family or discretionary trust), or a foreign trust

Do the terms of the trust identify the beneficiaries by reference to membership of a class? (e.g. family members)

☐ Yes
Provide the name of the class(es)

☐ No
Provide the full names of the beneficiaries

If applicable, provide the name of the appointer of the trust
(not all trusts have an appointer)

If applicable, provide the name of the settlor
(not required if the material asset at the time the trust was established was less than \$10,000, or if the settlor is deceased)

Section 4C - Beneficial owners of the trust

We require the name and address of the:

- Beneficial owners of the trust
- Controlling persons of the trust

☐ If the beneficial owners or controlling persons of the trust are also the individual trustees, beneficial owners, or controlling persons of the corporate trustee, and their details have already been provided in this form, tick this box and confirm their name and position below and go to Section 5.

If details of the beneficial owners or controlling persons have not been provided previously in this form, complete their details in the next column.

Beneficial owner/controlling person of the trust 1

Tick one: ☐ Beneficial owner ☐ Controlling person

Title Date of birth

Surname

Given name

Residential address

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

Title Date of birth

Surname

Given name

Residential address

Are you an Australian tax resident?

☐ No ☐ Yes, my TFN is:

Beneficial owner/controlling person of the trust 3

Tick one: ☐ Beneficial owner ☐ Controlling person

Title Date of birth

Surname

Given name

Residential address

Are you an Australian tax resident?

☐ No ☐ Yes, my TFN is:

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 certified¹, 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 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:

- Originally certified company extract
- 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 Limited

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Mutual Identification Form

Companies or Incorporated Bodies

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 CRS¹

If you answer yes to any of the following questions, you must complete the Tax Information Form

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

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

- directors of the company
- beneficial owners of the company
- controlling persons of the company

- ☐ No
- ☐ Yes - complete a Tax Information Form

Section 2 | Company information

2A- Details

Full name of company

ACN

Nature of business

Registered address

Principal place of business:

☐ Same as above OR provide address below

2B -Directors

Provide the full names of the directors of the company

¹ 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

2C - Company Type

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

- 2 ☐ Regulated company

Name the regulator

Provide the license number

- 3 ☐ Foreign company

Country of formation

Identification number issued by registration body

ARBN (if registered with ASIC)

- 4 ☐ Private company

- 5 ☐ Public company, not listed or regulated

If you did not tick boxes 1 or 2, go to section 3.

If you ticked boxes 1 or 2, go to section 4

Section 3 | Beneficial owners

For unregulated and unlisted companies, we require the name and address of:

- 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
- 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')

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.

Section 3 | continued

Beneficial owner/controlling person 1

Tick one: ☐ Beneficial owner ☐ Controlling person

Title Date of birth

Surname

Given name

Residential address

Are you an Australian tax resident?

☐ No ☐ Yes, my TFN is:

Beneficial owner/controlling person 2

Tick one: ☐ Beneficial owner ☐ Controlling person

Title Date of birth

Surname

Given name

Residential address

Are you an Australian tax resident?

☐ No ☐ Yes, my TFN is:

Beneficial owner/controlling person 3

Tick one: ☐ Beneficial owner ☐ Controlling person

Title Date of birth

Surname

Given name

Residential address

Are you an Australian tax resident?

☐ No ☐ Yes, my TFN is:

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', 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:

- Original certified company extract
- 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.