

Investor Additional Details Part A

Form

1 July 2017

Complete this form to provide additional information to help enable the transfer of an investment into your name

Please:

- Refer to the 'Anti-Money Laundering Laws and Foreign Account Tax Compliance Act Information' document on our website australianunity.com.au before completing this Form. This document provides the definition of a 'Politically Exposed Person' and enables you to assess whether you need to complete a 'Beneficial Owner Information Form.'
- Use **BLOCK** letters and a black or blue pen to complete this Form.
- Indicate using an 'X' where appropriate. If a section does not apply to you, please indicate using 'N/A'.

Step 1 Account details									
New investor: Are you a r	new investor with Australian Unity?								
Yes - Go to Step 2 ar	nd complete all details								
No - See below									
Existing investor: Is the in	nvestment transfer to be in the same name as your existing account name?								
No - Go to Step 2 an	d complete all details								
Yes - Please specify	your existing account number and account name								
Account number									
Account name									
Investor TFN	or TFN exemption* or TFN exemption* *if exempt, please specify reason.								
If any of your details have	changed please provide them below, otherwise go to Step 5 .								
Step 2 Investor (transfe	eree) details								
What type of investment a	account? (Please indicate using an 'X'.)								
Individual Jo	oint Partnership Company Superannuation fund Trust Estate								
Investor 1 (individual/Jo	int/Partnership - Individual)								
Title	Mr Mrs Ms Miss Date of birth / / / / / / / / / / / / / / / / / / /								
Surname									
Given name(s)									
Occupation									
Email	State								
TFN	or TFN exemption* or TFN exemption* *If exempt, please specify reason. If due to pension or allowance, please state full name of benefit								
Country of residence for tax purposes (if outside of Australia)	(e.g. Age Pension).								
Are you a US Citizen or US tax resident?	If yes, please provide the child's Yes No Taxpayer Identification Number ('TIN')								

Are you a Politically Exposed Person?	Yes No
Please identify the source of your	Gainful employment Inheritance/gift Financial investments
investable assets or wealth	Business activity Superannuation savings Other – please specify
Investor 1 Residential add	ress (not a P.O. Box)
Unit	Street number Street number
Street name	
Suburb	State
Postcode	Country (if not Australia)
Investor 2 (Individual/Jo	oint/Partnership – Individual)
Title	Mr Mrs Ms Miss Date of birth / / / /
Surname	
Given name(s)	
Occupation	
Email	State
TFN	or TFN exemption* or TFN exemption* *If exempt, please specify reason. If due to pension or allowance, please state full name of benefit
Country of residence for tax purposes	(e.g. Age Pension).
(if outside of Australia)	
Are you a US Citizen or US tax resident?	Yes No If 'Yes', please provide your Taxpayer Identification Number ('TIN')
Are you a Politically Exposed Person?	Yes No
Please identify the source of your	Gainful employment Inheritance/gift Financial investments
investable assets or wealth	Business activity Superannuation savings Other – please specify
Investor 2 Residential add	Iress (not a P.O. Box)
Unit	Street number Street number
Street name	
Suburb	State
Postcode	Country (if not Australia)
Minor (Child under the a	age of 18 years)
Surname	
Given name(s)	
Is the child a US Citizen or US tax resident?	Yes No If 'Yes', please provide the child's Taxpayer Identification Number ('TIN')
Is the child a Politically Exposed person?	Yes No

Please identify the	Gainful employment	☐ Inheritance/gift	Financial investments
source of the child's investable assets	Business activity	Superannuation savings	Other – please specify
or wealth			
Superannuation Fund			
		olic sector superannuation scheme, an a	approved deposit fund or a pooled superannuation trust?
Yes No - You	u will need to complete the FATO	CA section contained in Part B of this F	form.
Name of entity			
A.R.B.N. or A.B.N.			
TFN		or TFN exemption*	exempt, please specify reason.
Name of custodian or trustee			
Country of residence for tax purposes (if outside of Australia)			
Country of incorporation or creation			
Contact person			
Email			
Please identify the source your investable assets or wealth	Gainful employment Business activity	☐ Inheritance/gift ☐ Superannuation savings	Financial investments Other – please specify
(Company/Trust/Estat	e/Partnership) - Corporate		
If you are applying as a Pa	artnership - Corporate, please ca	ll us on 13 29 39 before you complete th	nis section.
Name of entity			
A.R.B.N. or A.B.N.			
TFN		or TFN exemption*	exempt, please specify reason.
Name of custodian			
or trustee (if applicable) Country of residence for tax purposes			
(if outside of Australia) Country of incorporation or creation			
Contact person			
Email			
Please identify the	Gainful employment	☐ Inheritance/gift	Financial investments
source of your investable assets	Business activity	Superannuation savings	Other – please specify
or wealth			
Nature of business			

Registered business addre	ess (not a P.O. Box)						
Unit	Street number						
Street name							
Suburb	State						
Postcode	Country (if not Australia)						
Step 3 Mailing address							
Same as Investor 1 resid	dential address/business address OR						
Same as Investor 2 resi	dential address						
Otherwise complete maili	ng address details below:						
Unit	Street number P.O. Box						
Street name							
Suburb	State State						
Postcode	Country (if not Australia)						
Step 4 Contact details							
Contact name							
Phone (after hours)	Phone (business hours)						
Mobile	Facsimile						
Email							
Step 5 Payments from yo	pur investment						
Distributions							
How would you like your di	istributions to be paid?						
Reinvested 0	Credited to my nominated Australian financial institution account (details provied below).						
If left blank or no banking o	details are provided below, then your distributions will automatically be reinvested (where appropriate, if applicable).						
Your Australian financial institution account details (for distributions and withdrawals)							
You must be named on th	e Australian financial institution account for a payment to be made into that nominated account.						
Providing your nominated transaction requests that y	Australian financial institution account details means that you authorise the use of this information for all future payment ou initiate.						
Name of Australian financial institution							
Branch name							
Name of Account holder(s)							
Branch number (BSB)	Account number Account number						

If you do not have a financial adviser, please proceed to **Step 7**.

Advice fee payment ele	ection
	an advice fee deducted from your investment account? to your financial adviser' in the relevant PDS for further details.)
Yes, I request that the	relevant Responsible Entity deduct an ongoing advice fee of % on a monthly basis from my investment in the fund.
Step 6 Adviser arranger	nents (Adviser use only)
If you are an existing advis Otherwise, please complet	ser with us, please provide your name, Australian Unity adviser code and affix your adviser stamp below. e all details below.
Adviser's business name	
Adviser's title	Mr Mrs Ms Miss
Adviser's surname	
Adviser's given name(s)	
Telephone	Facsimile
Mobile	
Email	
Dealer Group/Licensee	
AU Adviser Code	AFS Licence No
Adviser mailing addres	s
Unit	Street number P.O. Box
Street name	
Suburb	State State
Postcode	Country (if not Australia)
Address stamp	

Investor identity verification declaration								
I certify in accordance with the FSC/FPA Industry Guidance Note 24 ('GN 24'), that I have: (Mark the appropriate box with an 'X'.)								
1. Collected, verified and retained the appropriate customer identification documentation to confirm the identity of investor(s) with this application to meet my obligations in respect of the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 ('AML/CTF laws') and agree to provide access to these records as required.								
or								
2. Attached a copy of the industry 'Customer Identification Form' which confirms that I have sighted and verified all of the documentation required to identify an investor under AML/CTF laws.								
or								
3. Attached a copy of the source documents from which I have identified the investor as required by the AML/CTF laws.								
If no box is marked, I agree that Option 1 applies.								
In addition, as the investor's financial adviser, I warrant and represent to Australian Unity that I, as applicable:								
• have followed and complied with GN 24 and any other applicable AML/CTF laws in identifying and verifying the investor(s) with this application;								
will continue to comply with GN 24;								
• will provide, upon request, original identification and verification records and details of the identification procedures adopted;								
• have kept a record of the investor's identification and verification and will retain these for a period of seven years after the investor/adviser relationship has ended;								
• will if requested update and re-verify the investor and provide any other additional information regarding the investor;								
• will not knowingly do anything to cause Australian Unity to breach AML/CTF laws and will notify Australian Unity if I become aware of anything that would cause Australian Unity to breach AML/CTF laws; and								
• confirm that the details provided in any identification and verification records are true and correct.								
Please note, Australian Unity reserves the right to reject any applicable GN 24 form attached to this Form for whatever reason (for example, if it has been incorrectly completed).								
Adviser signature								
X Date / / / /								
Step 7 Statements								
Your tax and distribution statements can be accessed from our website at australianunity.com.au								
If you wish to access your statements online and receive an email alert to notify you when your statements are available, please provide your email address at Section 2 and indicate using an 'X':								
Step 8 Annual report								
The Annual Report will be available from our website at australianunity.com.au								
f you wish to receive a printed copy of the Annual Report, please indicate using an 'X':								

Step 9 Declarations and investor signature(s)

I/We agree and acknowledge:

- to be bound by the terms and conditions of the fund's Product Disclosure Statement ('PDS') current at the time; and Constitution (as amended from time to time);
- none of the entities mentioned throughout the fund's PDS and the Investor Additional Details Form guarantee the performance of the fund, payment of interest or any return of capital;
- that monies invested in the fund do not represent investments in Australian Unity Funds Management Limited, Australian Unity Property Limited or Australian Unity Mortgage Investments Limited, nor with a member of the Australian Unity Group;
- the investment is subject to investment risk including possible delays in repayment, loss of income or principal invested;
- Australian Unity Limited and its related bodies corporate may offer products and services appropriate for my/our needs and interests.
 I/We consent to my/our information being disclosed between those entities and to its use for direct marketing (subject to my/our right of opt-out by calling 13 29 39), product management and development and for other related purposes;
- Australian Unity Funds Management Limited, Australian Unity Property Limited or Australian Unity Mortgage Investments Limited (as applicable)
 may give information relating to my/our account and investment in that account to my/our financial adviser whose stamp appears on the Investor
 Additional Details Form;
- if this application is signed under a Power of Attorney, the Attorney verifies that no notice of revocation of that power has been received at the date of completing this Investor Additional Details Form;
- for all account types other than individual and joint accounts, that the Investor Additional Details Form is signed in accordance with the governing rules and/or constituent documents;
- all of the information provided in this Investor Additional Details Form is complete and accurate to the best of my/our ability/abilities;
- I/We will provide any supporting or additional information which might be required in order to process the request to transfer the investment, or subsequently, as a consequence of my/our holding the investment;
- I/We agree that any advice fee nominated in **Step 5** of the Investor Additional Details Form Part A will be deducted from my/our investment through the redemption of units in my/our investment;
- I/We have no reason to suspect that the monies used to fund this transfer, or any subsequent contributions into the investment, is or will be derived from or related to any money laundering, terrorism financing or other illegal activities;
- the information provided for meeting US Foreign Account Tax Compliance Act ('FATCA') requirements (where applicable) is true and correct and that I/we will provide all necessary co-operation and assistance in order for me/us to comply with obligations under Australian legislation designed to give effect to the FATCA agreement between Australia and the United States;
- by providing my/our email address at **Step 2**, the relevant Responsible Entity may use this address to provide me/us, where permitted by law or regulation, with information via email about my/our investment, including to satisfy any continuous disclosure requirements; and
- my/our personal information will be collected, used and disclosed by AUI in accordance with its Privacy Policy and in accordance with the law.

Who signs below		
If the account is held for one or more individuals	THEN	those individuals sign.
If the account is held for a partnership	THEN	all partners or those authorised to sign on behalf of the partnership.
If the account is held for a company or corporate partnership or corporate trustee	THEN	two directors; or a director and a company secretary; or if there is a single director, by that director. By signing as a single director investor confirms that the company is a single director company.
If the account is held for a superannuation fund or trust	THEN	the trustee(s), 'as trustee(s) for'

Investor 1								
Capacity	Individual	Joint	Director	Partner	Trustee	Other		
Surname								
Given name(s)								
Investor signature	X				Common S	Seal (if applicable)		
Date		//						

Investor 2							
Capacity: Surname:	Individual	Joint	Director	Partner	Trustee	Other:	
Given name(s):							
Investor signature:	X				Common S	Seal (if applicable)	
Date:		/					
Submitting your Investor	or Additional D	etails Form					

Corporate partnership, company, superannuation fund, trust, unincorporated body or estate applications please also complete Part B on page 9.

- 2. Certain types of entities may also be required to provide information and identification documents in relation to their Beneficial Owners. Refer to the document 'Anti-Money Laundering Laws and Foreign Account Tax Compliance Act Information' on our website australianunity.com.au to assess whether you will be required to complete the 'Beneficial Owner Information' Form.
- 3. Sign the Investor Additional Details Form.
- 4. Where identity verification as required by Anti-Money Laundering laws has not been undertaken by a financial adviser, please enclose the additional documentation outlined in the document 'Anti-Money Laundering Laws and Foreign Account Tax Compliance Act Information' on our website australianunity.com.au
- 5. Mail the completed Form and original certified copies of identification documents (where required) to (no stamp required):

Australian Unity

Reply Paid 64466 South Melbourne VIC 3205



Investor Additional Details Part B

Form

10 July 2017

Complete this form to provide additional information to help enable the transfer of an investment into your name

Additional information required for special account types

Please:

- Complete all relevant sections below as incomplete applications may not be accepted. Ensure that you also complete all relevant sections in Part A.
- Use **BLOCK** letters and a black or blue pen to complete this Form.
- Indicate using an 'X' where appropriate. If a section does not apply to you, please indicate using 'N/A'.
- Refer to the 'Anti-Money Laundering Laws and Foreign Account Tax Compliance Act Information' document on our website australianunity.com.au before completing this Form. This document provides the definition of a Politically Exposed Person ('PEP') and enables you to assess whether you need to complete a 'Beneficial Owner Information Form'.

Step 1 Account details	5												
What type of investment Please also complete the			0	estor type. Not e	e that all fi	elds that app	ply to you	r accoui	nt typ	e are n	nanda	tory.	
Company	Superar	nnuation fund		Trust		Estate			Par	tnersh	ip - Co	rporate	
Please note: If you wish we may require from you		ssociation, C	o-operative o	r Government	Body, pleas	se call us on	13 29 39 fc	or details	of the	e addit	ional ir	nformati	on
Company/Corporate t	rustee/Executor	r (if applicab	e)/Partnersh	ip-Corporate									
*Individuals signing this a company please provide proprietary company or a	the names and F	PEP status of	all directors. If	you are applyir	ng as a Corp	orate Partne							
Director 1's full name*													
Are you a Politically Exposed Person?	Yes	No											
Are you a US Citizen or US tax resident?	Yes	No If Ye	s, please provi	de your Taxpay	ver Identifica	ation Numbe	er (TIN)						
Director 2's full name*													
Are you a Politically Exposed Person?	Yes	No											
Are you a US Citizen or US tax resident?	Yes	No If Ye	s, please provi	de your Taxpay	ver Identifica	ation Numbe	er (TIN)						
Director 3's full name*													
Are you a Politically Exposed Person?	Yes	No											
Are you a US Citizen or US tax resident?	Yes	No If Ye	s, please provi	de your Taxpay	ver Identifica	ation Numbe	er (TIN)						
Director 4's full name*													$\overline{}$
Are you a Politically Exposed Person?	Yes	No											
Are you a US Citizen or US tax resident?	Yes	No If Ye	s, please provi	de your Taxpay	ver Identifica	ation Numbe	er (TIN)						

Individual trustee/individual executor (if applicable) * If more than four individual trustees exist for the trust, please call us on 13 29 39 before you complete Part B Trustee 1's full name* Are you a Politically No Yes Exposed Person? Are you a US Citizen If Yes, please provide your Taxpayer Identification Number (TIN) No Yes or US tax resident? Trustee 2's full name* Are you a Politically No Yes Exposed Person? Are you a US Citizen No If Yes, please provide your Taxpayer Identification Number (TIN) Yes or US tax resident? Trustee 3's full name* Are you a Politically No Yes Exposed Person? Are you a US Citizen No If Yes, please provide your Taxpayer Identification Number (TIN) Yes or US tax resident? Trustee 4's full name* Are you a Politically Nο Yes Exposed Person? Are you a US Citizen If Yes, please provide your Taxpayer Identification Number (TIN) Nο Yes or US tax resident? Trust beneficiary details * Please specify the beneficiaries of the trust. If more than four beneficiaries exist for the trust, please call us on 13 29 39 before you complete Part B. Beneficiary 1's full name* Are you a Politically No Exposed Person? Are you a US Citizen If Yes, please provide your Taxpayer Identification Number (TIN) Yes No or US tax resident? Beneficiary 2's full name* Are you a Politically No Yes Exposed Person? Are you a US Citizen No If Yes, please provide your Taxpayer Identification Number (TIN) Yes or US tax resident? Beneficiary 3's full name Are you a Politically No Yes Exposed Person? Are you a US Citizen No If Yes, please provide your Taxpayer Identification Number (TIN) Yes or US tax resident? Beneficiary 4's full name* Are you a Politically No Exposed Person? Are you a US Citizen No If Yes, please provide your Taxpayer Identification Number (TIN) or US tax resident?

US Foreign Account Tax Compliance Act ('FATCA') Questionnaire

To be completed by all 'non-individual' account types other than complying superannuation funds*

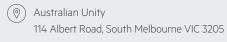
1. Are you a US Company*, US Trust*, or US Partnership^?

*Complying superannuation funds, exempt public sector superannuation schemes, approved deposit funds or pooled superannuation trusts do not need to complete this section.

*US Company - A company organised in or und *US Trust - A trust under the authority of Unite *US Partnership - A partnership organised in or	d States courts and the substantial decisions are con	trolled by a US citizen or resident.
Yes (Please go to question 1.1)	No (Please go to question 2)	
1.1 Are you an exempt payee for US tax purpo	ses?	
Yes No	If No, please provide your Taxpayer Identification	Number (TIN)
If you have completed question 1.1, Part B is con	mplete. Please remember to include it with Part A of	the Application Form.
2. Are you an Australian Financial Instit	ution ('AFI') or Other Partner Jurisdiction Fir	nancial Institution ('FI')?
In answering this question, it is anticipated that All other entities should answer 'No'.	AFIs and FIs will have an awareness of the FATCA re	egime and should be able to complete this question.
Yes (Please go to question 2.1)	No (Please go to question 3)	
2.1 Please provide your Global Intermediary Id	lentification Number ('GIIN'), if applicable	
If you do not have a GIIN, please provide your F	ATCA status:	
Non-reporting IGA FFI	Exempt Beneficial Owner	Non-participating FFI
Deemed Compliant FFI	Excepted FFI	GIIN applied for but not yet issued
If you have completed question 2.1, Part B is co	mplete. Please remember to include it with Part A of	the Application Form.
3. Do any of the following apply to you? (tic	k all that apply)	
Less than 50% of our income in the previous	us financial year is passive income#	
*Passive Income – includes rental income and	income not generated from active participation, suc	ch as interest, dividends, trust distributions or royalties.
Less than 50% of our assets held in the pre	evious financial year produce passive income#	
Our stock is regularly traded on an establis on an established securities market	hed securities market or more than 50% of our stock	is controlled by a non financial entity regularly traded
Our entity is a government body, agency o	r instrumentality	
Our entity is exempt from tax in our jurisdie	ction of residence - if ticked, why?	

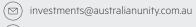
Please note: If you have not selected any of the check boxes in question 3 above, you will need to complete the 'Beneficial Owner Information Form', which is available on our website australianunity.com.au or by calling our Investor Services team on 13 29 39.

Contact us



(f) australianunity.com.au

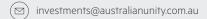
Investor Services





03 8682 5057

Adviser Services



(S) 1800 649 033

03 8682 5057