

APPLICATION AND DISCLOSURE CHECKLISTS

This Application Form relates to the Product Disclosure Statement (PDS) dated 29 April 2022 issued by Perpetual Trust Services Limited ABN 48 000 142 049, AFSL 236 648, for the offer of units in the Montaka Global Long Only Equities Fund (Managed Fund) (The Fund).

Terms defined in the PDS have the same meaning in this Application Form. The PDS contains important information about investing in The Fund, and you are advised to read the PDS before completing this Application Form.

NEW INVESTMENTS

Before you send The Fund Application and Disclosure forms, please ensure that you have correctly completed all items on the checklist below. Ensuring that all information and documentation is provided will help us process your application smoothly. If you have not been provided with the Identification Form with this application you can obtain this by emailing MGIM@MainstreamGroup.com, or by calling 1300 133 451.

This checklist section is provided for your records and is not required to process your application.

Note: Applications from US citizens or US residents who have an obligation to pay tax to the US tax authorities on their worldwide income will NOT be accepted.

Ensure that you are not:

- an individual who is a US citizen or US resident for tax purposes;
- an entity established in the US or US resident for tax purposes; or
- an entity with any Controlling Person/s* who is/are US citizens or residents of the US for tax purposes.

* A Controlling Person is any individual who directly or indirectly exercises control over the entity. For a company, this includes any beneficial owners controlling more than 25% of the shares of the company. For a Trust, this includes Trustees, Settlers or Beneficiaries. For a Partnership this includes any partners.

SUBMIT YOUR APPLICATION: ONLINE

You may complete your application online through the following link <https://montaka.mainstreamfs.com/apply>

OR BY POST

Post your original signed application form, identification forms and certified copies of your identification required to:

Mainstream Fund Services Unit Registry

GPO Box 4968
Sydney, NSW 2001
Australia

QUESTIONS

Contact Mainstream Investment Management

T: 1300 133 451
E: MGIM@MainstreamGroup.com

APPLICATION CHECKLIST

The following documents must be provided:

- Completed Application Form (pages A3 - A8), signed and dated on pages A7 - A8
- Cheque or confirmation of electronic funds transfer (EFT)
- Completed AML/CTF, FATCA and CRS Disclosure (pages A9- A18), signed and dated on pages A17 - A18
- Copies of certified identification documents

ADDITIONAL INVESTMENTS

If you are already an investor in this Fund and would like to make an additional investment, please complete the Additional Investment Form for Existing Investors on page A20.

You do not need to complete any other documentation.

APPLICATION FORM 29th April 2022

HOW TO COMPLETE THE APPLICATION FORM

PART 1 - INVESTMENT AMOUNT AND PAYMENT METHOD

Please complete dollar amount and payment details on page A3.

PART 2 - INVESTOR DETAILS

Investor Type	Complete Sections	Pages
<input type="checkbox"/> Individual Investor(s) (including where investing as Trustee(s) for another person)	A C D 1 - 4	A3 A4 A4 - A5
<input type="checkbox"/> Trust/Superannuation Fund (Individual Trustee(s))	A C D 1 - 4	A3 A4 A4 - A5
<input type="checkbox"/> Trust/Superannuation Fund (Corporate Trustee)	A, B C D 1 - 4	A3 - A4 A4 A4 - A5
<input type="checkbox"/> Company	A, B D 1 - 4	A3 - A4 A4 - A5

PART 3 - INVESTOR DECLARATION

Investor Type	Complete Sections	Pages
<input type="checkbox"/> Individual Investor(s)	A	A7
<input type="checkbox"/> All Other Investors	B	A8

PART 4 - ANTI-MONEY LAUNDERING AND COUNTER-TERRORISM FINANCING - FATCA AND CRS DECLARATION

Investor Type	Complete Sections	Pages
<input type="checkbox"/> Individual Investor(s) (including where investing as Trustee(s) for another person)	A & signature page	A9 A17
<input type="checkbox"/> Trust/Superannuation Fund (Individual Trustee(s))	E, F & signature page	A13 - A16 A17
<input type="checkbox"/> Trust/Superannuation Fund (Corporate Trustee)	C E, F & signature page	A11 A13 - A16 A18
<input type="checkbox"/> Company	C or D F & signature page	A11 - A13 A14 - A16 A18

APPLICATION FORM

PART 1 - INVESTMENT AMOUNT AND PAYMENT METHOD

I/We apply to invest in the Montaka Global Long Only Equities Fund (Managed Fund) ARSN 621 941 508

Cheque

Attached is a cheque made out to: "Montaka Global Long Only Equities Fund (Managed Fund)"

Amount

\$.

Electronic Funds Transfer (EFT) Name: "Montaka Global Long Only Equities Fund (Managed Fund) Application Account"

BSB: Account number:

Amount

Date of transfer: DD/MM/YYYY

\$. / /

Reference used:

PART 2 - INVESTOR DETAILS

A – INVESTOR/TRUSTEE/DIRECTOR OF COMPANY OR CORPORATE TRUSTEE 1

Title: Given name:

Surname:

Date of birth: (DD/MM/YYYY)¹
 / /

Email:

INVESTOR/TRUSTEE/DIRECTOR OF COMPANY OR CORPORATE TRUSTEE 2

Title: Given name:

Surname:

Date of birth: (DD/MM/YYYY)¹
 / /

Email:

Information required from Australian resident Investors ONLY for tax purposes (TFN and/or ABN)

TFN

ABN

TFN Exemption

Information required from Australian resident Investors ONLY for tax purposes (TFN and/or ABN)

TFN

ABN

TFN Exemption

¹ Date of birth required for individual investors as well as for each individual trustee of a self-managed super fund or family trust.

APPLICATION FORM

B – COMPANY/FUND/SUPERANNUATION FUND OR OTHER INCORPORATED BODIES

Name:

ABN: TFN:

C – AS TRUSTEE FOR (NAME OF TRUST/INDIVIDUAL IF INVESTING AS A TRUSTEE)

Name:

ABN: TFN:

D1 – CONTACT DETAILS

Work phone number:³ Home number:³
+ () + ()

Mobile number:
+ ()

Nominate your primary contact

Please nominate below the primary contact for communication from Montaka Global 130/30 Fund relating to your investment.

- Investor 1/Trustee /Director 1 of Company or Corporate Trustee Joint (please note both contacts from section A)
 Investor 2/Trustee 2/Director 2 of Company or Corporate Trustee Adviser (as noted in section E if applicable)

³ New Zealand investors, please ensure you include the relevant area/city codes.

D2 – RESIDENTIAL ADDRESS FOR INDIVIDUALS OR REGISTERED BUSINESS ADDRESS FOR COMPANIES (MANDATORY)

Street:

Suburb:

State:

Postcode:

Country:⁴

⁴ For company, insert country of incorporation (if not Australia).

APPLICATION FORM

D3 – POSTAL ADDRESS (IF DIFFERENT)

Street:

Suburb:

State:

Postcode:

Country:⁵

⁵ For company, insert country of incorporation (if not Australia).

D4 – NOMINATED FINANCIAL INSTITUTION FOR DISTRIBUTIONS AND REDEMPTION PAYMENTS

Proceeds can only be paid to Australian bank accounts, and cannot be paid to third party accounts.

Name of Financial Institution:

Street address of Financial Institution:

Suburb:

State:

Postcode:

Country:

Branch (BSB) no:

Account no:

Account name:

DISTRIBUTION ELECTION

Distributions will be automatically reinvested unless you opt to receive the distribution to be paid to your nominated bank account.

I elect the distribution to be credited by electronic funds transfer (EFT) into my nominated Australian Financial Institution account.

ONLINE ACCESS?

Do you wish to have online access to your investor details?

Yes

No

APPLICATION FORM

E – ADVISER CONTACT DETAILS (OPTIONAL)

Adviser name:

Dealer group:

Primary contact person:

Work phone number:

Mobile number:

PLACE ADVISER STAMP HERE

Email:

Street of adviser:

Suburb:

State:

Postcode:

ADVISER ONLINE ACCESS?

Do you wish for your adviser to have online access to your investor details?

Yes

No

APPLICATION FORM

PART 3 - INVESTMENT DECLARATION

DECLARATION

I/we declare and agree each of the following

- I/we have read the current PDS to which this application applies and have received and accepted the offer in it.
- My/our application is true and correct.
- I am/we are bound by any terms and conditions contained in the current PDS and the provisions of the constitution of The Fund as amended from time to time.
- I/we have legal power to invest.
- If this is a joint application, each of us agrees that our investment is as joint tenants. Each of us is able to operate the account and bind the other to any transaction including investments or withdrawals by any available method.
- If investing as trustee on behalf of a super fund or trust, I/we confirm that I am/we are acting in accordance with my/our designated powers and authority under the relevant trust deed. In the case of a super fund, I/we also confirm that it is a complying fund under the Superannuation Industry (Supervision) Act 1993.
- I/we acknowledge that none of Perpetual Trust Services Limited ABN 48 000 142 049 or any of their related entities, officers or employees or any related company or any of the appointed service providers including the investment manager and custodian guarantee the repayment of capital or the performance of The Fund or of any particular rate of return by The Fund.
- I/we agree to the Anti-Money Laundering and Counter-Terrorism Financing statements contained in the PDS. I/we agree to provide further information or personal details to Perpetual Trust Services Limited and the Unit Registry if required to meet their obligations under any Anti-Money Laundering and Counter-Terrorism law and regulations, and acknowledge that processing of my/our application may be delayed and will be processed at the unit price applicable for the business day on which all required information has been received and verified.
- I/we have read and understood the privacy disclosure as detailed in the PDS. I/we consent to my/our personal information being collected, held, used and disclosed in accordance with the privacy disclosure. I/we consent to Perpetual Trust Services Limited disclosing this information to my/our financial adviser (named in this form) for units in The Fund. Where the financial adviser no longer acts on my/ our behalf, I/we will notify Perpetual Trust Services Limited of the change.
- If I/we have appointed an authorised representative, I/we release, discharge and indemnify Perpetual Trust Services Limited from any loss, expense, action or other liability which may be suffered by, brought against me/us or Perpetual Trust Services Limited for any action or omissions by the authorised representative whether authorised by me/us or not.
- I/we certify that the information provided in the separate ID forms, including information relating to tax-related requirements, is reasonable based on verifiable documentation.
- I/we received and accepted this offer in Australia or New Zealand.
- I/we acknowledge and agree that Perpetual Trust Services Limited may be required to pass on my/ our personal information or information about my/our investment to the relevant regulatory authorities, including for compliance with Anti-Money Laundering and Counter-Terrorism law and regulations as well as any tax-related requirements for tax residents of other countries.

Additional declaration and agreement for New Zealand investors:

- I/we understand that the PDS is not a product disclosure statement under New Zealand law and that there are likely to be differences between the information provided in the PDS compared to a product disclosure statement under New Zealand law.
- I/we have read and understand the "Information for New Zealand Investors" in the current PDS.

A – INVESTOR/TRUSTEE 1

Signature:

X

Print name:

Capacity:

Date: (DD/MM/YYYY)

//

INVESTOR/TRUSTEE 2

Signature:

X

Print name:

Capacity:

Date: (DD/MM/YYYY)

//

APPLICATION FORM

B – SIGNATURE OF CORPORATE APPLICANTS OR CORPORATE TRUSTEE APPLICANTS

Executed by: Company name:

As trustee for: (if applicable) By its directors

Signature:

Signature:

Print name:

Print name:

Capacity (Director/Secretary):

Capacity (Director/Secretary):

Date: (DD/MM/YYYY)

Date: (DD/MM/YYYY)

ACCOUNT SIGNING AUTHORITY

If you do not tick one of the below options, all future instructions must be signed by all signatories or as otherwise permitted by law.

- Signatory 1 AND 2 Either Signatory 1 OR 2 Signatory 1 ONLY Signatory 2 ONLY
 Allow other authorised signatories (you must provide a certified copy of all authorised signatories)

DISCLOSURE

PART 4

- ANTI-MONEY LAUNDERING AND COUNTER-TERRORISM FINANCING
- FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA)
- COMMON REPORTING STANDARD (CRS)

WE NEED TO KNOW WHO YOU ARE

We require certain information about you to enable Perpetual Trust Services to fulfill its obligations under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Commonwealth). We also require that you make disclosures under the FATCA and CRS global tax compliance regulations. If you don't provide all the information we need, we may not be able to process your application or may need to redeem your units at some time in the future. We will take appropriate steps to verify the information you give us, as required by law. To do this, we may disclose your information to various government agencies in Australia and overseas. Take time to read the section headed Privacy in the PDS before submitting this form.

THE INFORMATION WE NEED

1. All Investors must sign the declaration and acknowledgement at the end of this form.

If you are:

- An individual/s investing on your own behalf - **complete section A**
- An individual investing as a sole trader - **complete sections A and B**
- An individual investing as a trustee of a trust, including on behalf of a minor child/children or another adult - **complete sections A, E and F**
- A company investing on your own behalf - **complete section C or D (as appropriate) and F**
- A company investing as a trustee (Corporate trustee) - **complete sections C or D (as appropriate) E and F**

NOTE: If you are investing in another capacity - please let us know.

2. To help us identify you, you must also provide certified copies of documents.

Please ensure that a certified copy:

- includes the statement 'I certify this to be a true copy of the original document'; AND
- is signed by an eligible certifier (please refer to page A19 of this form). The certifier must state their qualification or occupation to confirm their eligibility to certify the document.

Provide information in block letters.

INVESTOR DETAILS¹

Section A – INDIVIDUAL / JOINT INVESTOR 1

Title: Given name:

Surname:

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

Occupation:

Residential address:

State: Post code:

INDIVIDUAL / JOINT INVESTOR 2

Title: Given name:

Surname:

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

Occupation:

Residential address:

State: Post code:

¹ If you are an individual or joint individuals investing as a trustee on behalf of another individual such as a child/children, or an incapacitated adult, copy this page and also complete this section for the individual beneficial owner/s.

DISCLOSURE

Are you a tax resident of any other country outside of Australia?

- Yes. Provide details below. If resident in more than one jurisdiction please include details for all jurisdictions.
- No. See identification requirements below and sign on page A17.

1 Country of tax residence:

Specify tax identification number (TIN) or equivalent:

Reason code if no TIN provided:

2 Country of tax residence:

Specify tax identification number (TIN) or equivalent:

Reason code if no TIN provided:

3 Country of tax residence:

Specify tax identification number (TIN) or equivalent:

Reason code if no TIN provided:

Are you a tax resident of any other country outside of Australia?

- Yes. Provide details below. If resident in more than one jurisdiction please include details for all jurisdictions.
- No. See identification requirements below and sign on page A17.

1 Country of tax residence:

Specify tax identification number (TIN) or equivalent:

Reason code if no TIN provided:

2 Country of tax residence:

Specify tax identification number (TIN) or equivalent:

Reason code if no TIN provided:

3 Country of tax residence:

Specify tax identification number (TIN) or equivalent:

Reason code if no TIN provided:

If TIN or equivalent is not provided, please provide a reason from the following options:

- **Reason A:** The country/jurisdiction where the entity is resident does not issue TINs to its residents
- **Reason B:** The entity is otherwise unable to obtain a TIN or equivalent number (please explain why the entity is unable to obtain a TIN below if you have selected this reason)
- **Reason C:** No TIN is required. (Note: Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction)

If Reason B has been selected above, explain why you are not required to obtain a TIN.

1

2

3

4

SUPPORTING DOCUMENTATION REQUIRED

Supplied documents must show name and either residential address and/or date of birth.

- Original or certified copy of primary photographic identification document; OR
- Original or certified copy of primary non-photographic identification document AND original or certified copy of secondary identification document

(Examples could be a certified copy of your passport or drivers licence. See Definitions on page A19 for further examples.)

If you are signing under a power of attorney, please provide a certified copy of primary photographic identification document or a certified copy of primary non-photographic identification document AND certified copy of secondary identification document for each attorney, together with a certified copy of the power of attorney and specimen signature(s) of the attorney(s) if not displayed in the document.

THOSE INVESTING AS INDIVIDUAL OR JOINT INVESTORS MAY PROCEED TO SIGN THE DECLARATION AT PAGE A17.

DISCLOSURE

Section B – SOLE TRADER

Full business name:

Full address of principal place of business:

ABN (if any):

Section C – AUSTRALIAN COMPANY

Company name:

Full address of principal place of business: Street:

Suburb:

State:

Postcode:

Does the organisation have an ABN? Yes No. Exemption:

ABN : TFN :

Company ACN : Company is registered by ASIC as: Proprietary company Public company

Is the company a listed public company or a majority owned subsidiary of a listed public company?

No. Yes. Name of exchange

Is the company licensed by a Commonwealth, State or Territory statutory regulator?

Regulated company (subject to the supervision of a Commonwealth, State or Territory statutory regulator beyond that provided by ASIC as a company registration body. Examples include Australian Financial Services Licensees (AFSL); Australian Credit Licensees (ACL); or Registrable Superannuation Entity (RSE) Licensees).

Not Licensed Licensed - please provide name of regulator and licence number in space below:

For proprietary companies that are not licensed, please provide the name of ALL directors.

Name:

Name:

For ALL beneficial owners who own, hold or control (directly or indirectly) 25% or more of the issued capital of the unregulated proprietary company, please provide each person's name, address and date of birth. If there are no 25% or more beneficial owners, then please provide the name, address and date of birth of the controlling person who is empowered to make operating, financial and policy decisions e.g. Managing Director:

Name:

Residential address:

Date of birth: (DD/MM/YYYY)

 / / / / / /

DISCLOSURE

SUPPORTING DOCUMENTATION REQUIRED

Supplied documents must show the full company name.

- Copy of an Annual Statement issued by ASIC (issued in last 12 months); OR
- Copy of a Full Company Search from ASIC (issued in last 3 months); OR
- Copy of certificate of incorporation.

Note that each individual beneficial owner listed above must provide a certified copy of primary photographic identification document or a certified copy of primary non-photographic identification document AND certified copy of secondary identification document.

Section D – FOREIGN COMPANY

Full company name:

Is the company registered by ASIC? Yes No. In which country was the company formed, incorporated or registered? (If Australia, please write N/A)

Is the company registered by a foreign registration body? Yes. Please provide registration body in space below No.

For proprietary companies provide details of **ALL** individuals who are beneficial owners through one or more shareholdings of more than **25%** of the company's issued capital (for regulatory requirements). If there are no individuals who meet the requirement of beneficial owners, provide the name of individuals who directly or indirectly control the company.

Name:	Residential address:	Date of birth: (DD/MM/YYYY)
<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"/>	<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"/>	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Full address of the company's (a) registered office in Australia (if registered by ASIC); (b) registered office in the company's country of registration (if registered by a foreign registration body); OR (c) principle place of business in company's country of formation or incorporation (if not registered by a foreign registration body)

If the company is registered with ASIC (a) the full address of the company's principle place of business in Australia (if any); OR (b) the full name and address of the company's local agent in Australia (if any)

The ARBN issued to the company by ASIC (if any) :

Any identification number issued to the company by a foreign registration body upon the company's formation, incorporation or registration (if any)

If registered (by ASIC or a foreign registration board) is the company a: Private company Public company Other please specify:

If registered as a private company, name of each director: Name:

If licensed (by ASIC or a registration body), name of regulator and license number

DISCLOSURE

SUPPORTING DOCUMENTATION REQUIRED

Supplied documents must show the full company name:

- Certified copy of certificate of incorporation; OR
- Certified copy of certificate of registration by ASIC or relevant foreign registration body

Note that each individual beneficial owner listed above must provide a certified copy of primary photographic identification document or a certified copy of primary non-photographic identification document AND certified copy of secondary identification document.

Section E – INVESTING AS A TRUST (COMPLETE FOR ALL TRUST TYPES)

Full name of trust:

Full business name (if any) of the trustee in respect of the trust:

Type of trust?:

- Public unit trust
 Private discretionary trust
 Private unit trust
 Registered managed investment scheme⁶
 Charity registered with ACNC
 Unregistered managed investment scheme⁶
 Self-managed superannuation fund⁷
 Registrable superannuation entity⁷
 Government superannuation fund established by legislation
 Other type of trust - please provide details below:

⁶ As defined by the Corporations Act 2001 (Commonwealth) ⁷As described by the Superannuation Industry (Supervision) Act 1993 (Cth)

In which country was the trust established?

For trusts other than an Australian registered managed investment scheme, regulated trust (e.g. SMSF or complying superannuation fund) registered charity or government superannuation trust, do the terms of the trust identify the beneficiaries by reference to membership of a class?

- Yes No

If yes, provide details of membership class (e.g. unitholders, family members of named person, charitable person); otherwise list the beneficiaries:

Name:

Name:

- I have included additional beneficiaries on the notes page.

For trusts other than an Australian registered managed investment scheme, regulated trust (e.g. SMSF or complying superannuation fund) or government superannuation trust, provide details of ALL beneficial owners (for regulatory requirements). Note a beneficial owner includes the appointor of the trust (i.e. the person who appoints or removes the trustee(s), the settlor of the trust, and beneficiaries with at least a 25% interest in the trust):

Name:

Residential address:

Date of birth: DD/MM/YYYY

<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"/>	<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"/>	<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

DISCLOSURE

SUPPORTING DOCUMENTATION REQUIRED

For an Australian registered managed investment scheme: — Copy of an ASIC search of the scheme

For a government superannuation fund: — Name of the Act which regulates the trust and certified extract of the establishing legislation

All other trusts: — Certified copy or certified extract of trust deed; OR

— Notice (such as notice of assessment) issued to the trust by the ATO within the last 12 months

Please note:

- For at least ONE individual trustee, provide a certified copy of **primary photographic identification document** or a certified copy of **primary non-photographic identification document AND certified copy of secondary identification document**
- Corporate trustees must also provide a certified copy of certificate of incorporation or certificate of registration by ASIC or relevant foreign registration body
- Each individual beneficial owner listed in this Section E must provide a certified copy of **primary photographic identification document** or a certified copy of **primary non-photographic identification document AND certified copy of secondary identification document**
- If a settlor of a trust did not settle \$10,000 or more on establishment of the trust or if the settlor is deceased (refer to the trust deed), you do not need to provide the certified documents in respect of the settlor.

Section F – GLOBAL TAX STATUS DECLARATION FOR COMPANIES AND TRUSTS (FATCA AND CRS)

This is mandatory for all Company and Trusts.

We are unable to accept your application without this information. If you are unsure about how to complete this form speak to your financial adviser or accountant. Definitions can be found at www.montaka.com/facta_crs.

Section F1 – REGULATED SUPERANNUATION FUND

Are you a regulated superannuation fund, retirement or pension fund such as a Self-Managed Super Fund (SMSF)?

- Yes, you have now completed this section. Please sign page A17 No, you must complete Section F and sign on page A17

Section F2 – TAX STATUS

You must tick ONE of the 5 Tax Status boxes below (if you are a Financial Institution, please provide all the requested information below for box 1)

1. A Financial Institution (A custodial or depository institution, an investment entity or a specified insurance company for FATCA/CRS purposes)
Provide the Company's or Trusts Global Intermediary Identification Number (GIIN), if applicable

If the Company or Trust is a Financial Institution but does not have a GIIN, provide its FATCA status (select ONE of Trustee's GIIN below) the following):

- Deemed Compliant Financial Institution Excepted Financial Institution Exempt Beneficial Owner

- Non Reporting IGA Financial Institution (If a Trustee Documented Trust provide the Trustee's GIIN below)

- Non-Participating Financial Institution US Financial Institution Other (describe the FATCA status in the box below)

ALL Financial Institutions, please answer the question below:

Is the Financial Institution an Investment Entity located in a Non-Participating or ATO non-committed CRS Jurisdiction and managed by another Financial Institution?

CRS Participating Jurisdictions are on the OECD website at <http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/crs-by-jurisdiction>.

- Yes, proceed to section F4 (Foreign Controlling Persons). No, please sign on page A18

2. Australian or Foreign Public Listed Company, Majority Owned Subsidiary of an Australian or Foreign Public Listed company (Public listed companies or majority owned subsidiaries of Australian or Foreign listed companies that are not Financial Institutions as described above, or a company that is an Australian Registered Charity)

DISCLOSURE

3. Australian ACNC Registered Charity or Deceased Estate
4. An Active Non-Financial Entity (NFE) or Foreign Charity
 (Active NFEs include entities where, during the previous reporting period, less than 50% of their gross income was passive income (e.g. dividends, interests and royalties) and less than 50% of assets held produced passive income. For other types of Active NFEs, refer to Section VIII in the Annexure of the OECD 'Standard for Automatic Exchange of Financial Account Information' at www.oecd.org.)
5. Other
 (Entities that are not previously listed - Passive Non-Financial Entities). Please provide details below:

Section F3 – COUNTRY OF TAX RESIDENCE

Is the Company or Trust a Tax resident of a country other than Australia? Yes No

If yes, please provide the Company's and/or Trust's country of tax residence and tax identification number (TIN) or equivalent below. If the Company and/or Trust is a tax resident of more than one other country, please list all relevant countries below.

A TIN is the number assigned by each country for the purposes of administering tax laws. This is the equivalent of a Tax File Number in Australia or an Employer Identification Number in the US. If a TIN is not provided, please list one of the three reasons specified (A, B or C) for not providing a TIN.

Country	TIN	If no TIN , list reason A, B or C
1		
2		
3		

If there are more countries, provide details on a separate sheet and tick this box

Reason A: The country of tax residency does not issue TINs to tax residents

Reason B: The Company or Trust has not been issued with a TIN

Reason C: The country of tax residency does not require the TIN to be disclosed

If Reason B is selected above, explain why you are not required to obtain a TIN:

1

2

3

Section F4 – FOREIGN CONTROLLING PERSONS AND BENEFICIAL OWNERS (PASSIVE NFE'S)

Is any natural person that exercises control over you (for companies, this would include directors or beneficial owners who ultimately own 25% or more of the share capital) a tax resident of any country outside of Australia or a citizen of the USA?

If you are a trust, is any natural person including trustee, protector, beneficiary, settlor or any other natural person exercising ultimate effective control over the trust a tax resident of any country outside of Australia or a citizen of the USA??

Yes. Complete details below No. You have completed this section

1. Name:

Date of birth: (DD/MM/YYYY)

/

 /

Residential Address (if not already provided):

Country of Tax Residence:

TIN or equivalent

Reason Code if no TIN provided

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DISCLOSURE

2. Name: Date of birth: (DD/MM/YYYY) / /

Residential Address (if not already provided):

Country of Tax Residence:	TIN or equivalent	Reason Code if no TIN provided
<input type="text"/>	<input type="text"/>	<input type="text"/>

3. Name: Date of birth: (DD/MM/YYYY) / /

Residential Address (if not already provided):

Country of Tax Residence:	TIN or equivalent	Reason Code if no TIN provided
<input type="text"/>	<input type="text"/>	<input type="text"/>

4. Name: Date of birth: (DD/MM/YYYY) / /

Residential Address (if not already provided):

Country of Tax Residence:	TIN or equivalent	Reason Code if no TIN provided
<input type="text"/>	<input type="text"/>	<input type="text"/>

5. Name: Date of birth: (DD/MM/YYYY) / /

Residential Address (if not already provided):

Country of Tax Residence:	TIN or equivalent	Reason Code if no TIN provided
<input type="text"/>	<input type="text"/>	<input type="text"/>

If there are more than 5 controlling persons, please list them on a separate sheet and tick this box.

If TIN or equivalent is not provided, please provide reason from the following options:

Reason A: The country/jurisdiction where the entity is resident does not issue TINs to its residents

Reason B: The entity is otherwise unable to obtain a TIN or equivalent number (please explain why the entity is unable to obtain a TIN below if you have selected this reason)

Reason C: No TIN is required. (Note: Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction)

If Reason B is selected above, explain why you are not required to obtain a TIN:

1

2

3

4

5

DISCLOSURE

INVESTMENT DECLARATION

DECLARATION

I/we declare and agree each of the following:

- I/We declare that I am/we are not commonly known by any other names different from those disclosed in this Application.
- I/We declare any documents or information whatsoever used for verification purposes in support of my/our Application are complete and correct.
- I/We agree to give further information or personal details to the Unit Registry or its agents if required to meet its obligations under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Cth) and other legislation and regulations including FATCA and CRS.

ACKNOWLEDGMENT

- I/We acknowledge that it may be a criminal offence to knowingly provide false, forged, altered or falsified documents or misleading information or documents when completing an Application for units in The Fund.
- I/We acknowledge that this Application, once signed by me/us, holds me/us to a number of representations and warranties, among other things, relating to matters which Perpetual Trust Services must seek confirmation of in order to comply with the provisions of the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Cth) and global tax compliance including FATCA and CRS requirements. Appropriate steps to verify information may be taken, and information may be disclosed to government agencies in Australia and overseas. If information required is not provided, the application may not be accepted or units may be redeemed.
- I/We undertake to provide updated FATCA/CRS self-certification information within 30 days of a change in circumstances which causes the information to become incorrect.

A – INDIVIDUAL / JOINT APPLICANT

 X

Print name:

As trustee (if applicable):

Date: (DD/MM/YYYY)

 / /

A – INDIVIDUAL / JOINT APPLICANT

 X

Print name:

As trustee (if applicable):

Date: (DD/MM/YYYY)

 / /

DISCLOSURE

B – SIGNATURE OF CORPORATE APPLICANTS OR CORPORATE TRUSTEE APPLICANTS

Executed by:

Company name:

As trustee for (if applicable):

By its directors:

Signature:

Print name:

Capacity (Director/Secretary):

Date: (DD/MM/YYYY)

 / /

By its directors:

Signature:

Print name:

Capacity (Director/Secretary):

Date: (DD/MM/YYYY)

 / /

**THANK YOU FOR YOUR APPLICATION.
WE INVITE YOU TO REVIEW THE APPLICATION CHECKLIST ON PAGE A1**

DISCLOSURE DEFINITIONS

DEFINITIONS FOR THE PURPOSE OF CLIENT IDENTIFICATION

Primary photographic identification document

- means any of the following

- (1) a licence or permit issued under a law of a State or Territory or equivalent authority of a foreign country for the purpose of driving a vehicle that contains a photograph of the person in whose name the document is issued;
- (2) a passport issued by the Commonwealth;
- (3) a passport or a similar document issued for the purpose of international travel, that:
 - (a) contains a photograph and the signature of the person in whose name the document is issued;
 - (b) is issued by a foreign government, the United Nations or an agency of the United Nations; and
 - (c) if it is written in a language that is not understood by the person carrying out the verification — is accompanied by an English translation prepared by an accredited translator;
- (4) a card issued under a law of a State or Territory for the purpose of proving the person's age which contains a photograph of the person in whose name the document is issued;
- (5) a national identity card issued for the purpose of identification, that:
 - (a) contains a photograph and the signature of the person in whose name the document is issued;
 - (b) is issued by a foreign government, the United Nations or an agency of the United Nations; and
 - (c) if it is written in a language that is not understood by the person carrying out the verification — is accompanied by an English translation prepared by an accredited translator.

Primary non-photographic identification document

- means any of the following

- (1) a birth certificate or birth extract issued by a State or Territory;
- (2) a citizenship certificate issued by the Commonwealth;
- (3) a citizenship certificate issued by a foreign government that, if it is written in a language that is not understood by the person carrying out the verification, is accompanied by an English translation prepared by an accredited translator;
- (4) a birth certificate issued by a foreign government, the United Nations or an agency of the United Nations that, if it is written in a language that is not understood by the person carrying out the verification, is accompanied by an English translation prepared by an accredited translator;
- (5) a pension card issued by Centrelink that entitles the person in whose name the card is issued, to financial benefits.

Secondary identification document

- means any of the following

- (1) a notice that:
 - (a) was issued to an individual by the Commonwealth or a State or Territory within Australia, within the preceding twelve months;
 - (b) contains the name of the individual and their residential address; and
 - (c) records the provision of financial benefits to the individual under a law of the Commonwealth or a State or Territory (as the case may be);
- (2) a notice that:
 - (a) was issued to an individual by the Australian Taxation Office;
 - (b) contains the name of the individual and their residential address; and
 - (c) records a debt payable to or by the individual by or to (respectively) the Commonwealth under a Commonwealth law relating to taxation;
- (3) a notice that:
 - (a) was issued to an individual by a local government body or utilities provider within the preceding three months;
 - (b) contains the name of the individual and their residential address; and
 - (c) records the provision of services by that local government body or utilities provider to that address or to that person;

(4) in relation to a person under the age of 18, a notice that:

- (a) was issued to a person by a school principal within the preceding three months;
- (b) contains the name of the person and their residential address; and
- (c) records the period of time that the person attended at the school.

New Zealand Investors — you may submit in place of the secondary identification documents listed above, a document of equivalency (e.g. A notice issued by the New Zealand Inland Revenue to you in the last 12 months, containing your name and residential address, and that records a debt payable to you).

The following list of people that can certify Identification Documents

Certified copy

- means a document that has been certified as a true copy of an original document by one of the following persons:

- a person who, under a law in force in a State or Territory, is currently licensed or registered to practise in the following occupations:
 - Chiropractor – Dentist – Legal practitioner – Medical practitioner – Nurse – Optometrist – Patent attorney – Pharmacist – Physiotherapist – Psychologist – Trade marks attorney – Veterinary surgeon;
- a person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described);
- Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public;
- an officer with, or authorised representative of, a holder of an Australian financial services licence, having 2 or more years of continuous service with one or more licensees;
- an officer with, or credit representative of, a holder of an Australian credit licence, having 2 or more years of continuous service with one or more licensees;
- Australian Consular Officer or Australian Diplomatic Officer (within the meaning of the Consular Fees Act 1955);
- Bank officer with 2 or more continuous years of service;
- Building society officer with 2 or more years of continuous service;
- Chief executive officer of a Commonwealth Court;
 - Clerk of a court;
 - Fellow of the National Tax Accountants' Association, Institute of Chartered Accountants Australia or CPA Australia, with 2 or more years of continuous membership;
 - Finance company officer with 2 or more years of continuous service;
 - Judge of a court;
 - Justice of the Peace;
 - Magistrate;
 - Member of the Association of Taxation and Management Accountants;
 - Member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accountants or the National Institute of Accountants;
 - Person before whom a statutory declaration may be made under the law of the State or Territory in which the declaration is made
 - Police officer;
 - Registrar, or Deputy Registrar, of a court;
 - Teacher employed on a full-time basis at a school or tertiary education institution;

New Zealand Investors — Where the above persons are specified as an Australian person or a member of an Australian association or group, a person of equivalency in New Zealand (e.g. a person officially enrolled as a solicitor in New Zealand or a chartered accountant in New Zealand) can certify identification documents.

ADDITIONAL INVESTMENT FORM 29th April 2022

Please use this form if you are already an investor in the Montaka Global Long Only Equities Fund (Managed Fund) and wish to make an additional investment. For initial investments go to page A3.

INVESTOR DETAILS

Investor Number:

Name:

Company/Fund/Super Fund Name:

ADDITIONAL INVESTMENT DETAILS

Please tick the box beside your chosen payment method and complete the required details.

Cheque

Attached is a cheque made out to: "Montaka Global Long Only Equities Fund (Managed Fund)"

Amount

\$.

Electronic Funds Transfer (EFT)

Name: "Montaka Global Long Only Equities Fund (Managed Fund) Application Account"

BSB: Account number:

Reference used:

Amount

\$.

Date of Transfer: DD/MM/YYYY

/ /

INVESTOR CONFIRMATION

Signature:

Print name:

Capacity (Director/Secretary):

Date: (DD/MM/YYYY)

/ /

POST THIS PAGE WITH ACCOMPANYING PAYMENT TO:

Mainstream Fund Services Unit Registry
GPO BOX 4968
SYDNEY, NSW, 2001
AUSTRALIA

