

# OtiraCapital

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## OTIRA GLOBAL EQUITIES FUND APPLICATION FORM

Date – October, 2019



## INVESTMENT CLASS

Hedged Class

UnHedged Class

## INVESTMENT AMOUNT

Application Amount A\$

Application Amount US\$

## INVESTOR CONTACT DETAILS

First Name

Last Name

Phone Number

Mobile Phone Number

Email

Street Address (not PO box)

Mailing Address (if different to the contact person's address above)

Please list below the bank account from which the electronic transfer of funds will be made. The bank account must be in the name of the investor. Distribution payments will be paid into this bank account.

## DISTRIBUTIONS

I/we elect to receive distributions by:

Distribution reinvestment

Pay to bank account (below)

If no election is made, distributions will be automatically reinvested in additional units in the same series. If you wish to change your election, you must notify Otira Capital in writing.

Bank account details (for distributions and redemptions, 3rd party details are not acceptable):

BSB

Account Number:

Account Name:

Name of Bank:

Banking Information: Please note that in cases where the name of the bank account is not in the same name as the investor as indicated above, documentary information must be provided detailing the reason for, and background to, such a "third party" payment request. Payments that do not originate from an account in the name of the investor, are subject to an approval process. Please note that supporting documentation on the relationship between the third party and investor will need to be provided. Should this not be to the satisfaction of the Administrator, the funds will be returned to the remitting party.

Additionally, as part of our compliance with the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Cth), the Regulations and Applicable Rules ("AML Law"), we require detailed verification of the investor's identity and the source of the payment of the application money. If your bank is unable to wire the funds as per the specifications mentioned, we will request your bank to confirm to us in writing that the funds were wired from a bank account held with them in the name of the investor. We reserve the right to request such information as is necessary to verify the identity of any investor.

## SIGNATURE AND DECLARATION

We request you to issue the units applied for and authorise you to register the applicant as the holder(s) of the units. I/we declare that the execution of this Application Form by me/us constitutes a representation by each applicant that:

- I/we have read and understood the Information Memorandum for the Otira Global Equities Fund ("Fund") as at the IM Date;
- this Application Form was detached from the Information Memorandum for the Fund;
- upon allotment of units in the Fund, I/we agree to be bound by the terms of the Information Memorandum and the Trust Deed, as amended from time to time;
- I/we understand that neither the repayment of capital nor the performance of the Fund is guaranteed by any person including Otira Capital Pty Ltd ("Otira Capital"), their directors, employees and agents;
- I am/we are a Wholesale Client;
- the details given in this Application Form and in the AML Supplement are true and correct and that I/we have the legal power to invest in accordance with this application;
- I/we authorise Otira Capital to apply the TFN or ABN provided in this Application Form and authorise it to be applied to all future applications and redemptions for units in the Fund, including reinvestments, unless I/we advise Otira Capital otherwise;
- I/we have read the section of the Information Memorandum titled "Privacy" and agree that Fund may collect, use disclose and handle personal information in the manner set out in that section;
- I/we agree to indemnify Otira Capital and any of their related bodies corporate against any loss, liability, damage, claim, cost or expense incurred as a result, directly or indirectly, of any of these declarations proving to be untrue or incorrect;
- in the case of joint applications, the joint applicants agree that unless otherwise expressly indicated on this Application Form, the units will be held as joint tenants and either investor is able to operate the account and bind the other investor for future transactions, including additional deposits and redemptions; and
- I/we acknowledge that Otira Capital is bound by AML Laws. By agreeing to these terms, I/we acknowledge that we are fully aware that in appropriate cases all communications and information concerning our activities with Otira Capital that are held by Otira Capital, may be disclosed to and reviewed by law enforcement agencies and regulatory authorities..

I/we agree that we will comply with all applicable AML Laws or taxation laws, including, but not limited to, the requirement to obtain satisfactory evidence of our identity. This includes the obligation to provide any information requested in order to allow Otira Capital with to comply with our obligations under these laws. Account operating instructions (if no selection is made, all individuals to sign will be assumed).

Any individual to sign

Any two individuals to sign

All individuals to sign

Other (please specify):

### SIGNATURE BY INDIVIDUAL OR JOINT APPLICANT(S)

Signature

Signature

Print Name

Print Name

Date

Date

## SIGNATURE OF CORPORATE APPLICANTS OR CORPORATE TRUSTEE APPLICANTS

EXECUTED BY:  
(if applicable)  
Company Name

As Trustee For

By its Directors / Secretary:

Signature

Signature

Position  
Director

Position  
Director

Print Name

Print Name

Date

Date

## SECTION 1: APPLICATION DETAILS

INVESTOR TYPE	GO TO
<b>Please indicate who is making the investment.</b>	
Individual/Joint Investors/ Sole Trader/ Individual Trustee	Section 1A
Company/Corporate Trustee	Section 1B
Trust/Superannuation Fund	Section 1C & 1A or 1B
Partnership	Section 1D & 1A

If you do not fall into any of the above categories, please contact the Administrator [InvestorServices@MainstreamGroup.com](mailto:InvestorServices@MainstreamGroup.com) or +61 2 8259 8550

### SECTION 1A - INDIVIDUAL / JOINT INVESTORS / SOLE TRADER / INDIVIDUAL TRUSTEE

#### INVESTOR A / INDIVIDUAL TRUSTEE

Full Name				Title (Mr/Mrs/Miss/Ms)
Date of Birth	Country of residence for tax purposes (not required for individual trustee or partner)			TFN or Exemption Code (not required for individual trustee or partner)
Full business name (if sole trader)				ABN
Residential Address (not PO box)				
Suburb	State	Country	Postcode	
Principal place of business (if sole trader)				
Suburb	State	Country	Postcode	
Are you a domestic or foreign Politically Exposed Person?				Yes No

## INVESTOR B / INDIVIDUAL TRUSTEE

Full Name

Title (Mr/Mrs/Miss/Ms)

Date of Birth

Country of residence for tax purposes  
(not required for individual trustee or partner)

TFN or Exemption Code  
(not required for individual trustee or partner)

Full business name (if sole trader)

ABN

Residential Address (not PO box)

Suburb

State

Country

Postcode

Principal place of business (if sole trader)

Suburb

State

Country

Postcode

Are you a domestic or foreign Politically Exposed Person?

Yes

No

## SECTION 1B - COMPANY / CORPORATE TRUSTEE

Full Company Name (as registered by ASIC)

ACN/ARBN (if any)

TFN, ABN or exemption code (if any)

Country of residence for tax purposes

Country of formation, incorporation or registration

Name of regulator (if licensed by an Australian commonwealth, state or territory statutory regulator)

Licence details

If the company is registered as a proprietary company by ASIC or a private company by a foreign registration body, please provide the name of each directors of the company:

### DIRECTOR 1

Full Name

Address

Suburb

Postcode

State

Country

### DIRECTOR 2

Full Name

Address

Suburb

Postcode

State

Country

**DIRECTOR 3**

Full Name

Address

Suburb

Postcode

State

Country

If there are more directors, please provide the above details on a separate page and attach to this AML Supplement.

**Registered office address in Australia**

Address

Suburb

State

Country

Postcode

**Principal place of business**

Address

Suburb

State

Country

Postcode

**If an Australian company, registration status with ASIC:**

Proprietary company

Public company

**If a foreign company is registered with a foreign registration body, how is it registered:**

Proprietary company

Public company

Other (please specify) Name of the relevant foreign registration body

If a foreign company is not registered with a foreign registration body (or ASIC), please provide the company's full address in its company of formation or incorporation.

Foreign company identification number

Name of the market/exchange

Is the company listed?

No

Yes

Is the company a majority-owned subsidiary of an Australian listed company?

Name of the market/exchange

Yes

No



If the Company is an Australian Proprietary Company or a Foreign Private Company, please provide the details below for each individual who owns through one or more shareholdings more than 25% of the company's issued capital:

### SHAREHOLDER 1

Full Name

Address (not PO box)

Suburb

State

Postcode

Country

Are you a domestic or foreign Politically Exposed Person?

Yes

No

### SHAREHOLDER 2

Full Name

Address (not PO box)

Suburb

State

Postcode

Country

Are you a domestic or foreign Politically Exposed Person?

Yes

No

If there are more shareholders, please provide the above details on a separate page and attach to this AML Supplement.

## SECTION 1C - TRUST / SUPERANNUATION FUND

### Trust Details

Full Name of Trust/Superannuation Fund

Full business name of trustee (if any)

TFN, ABN or Exemption Code

Country of residence for tax purposes

Country in which the trust/superannuation fund was established

The full name of the settlor of the Trust

Unless:

- (a) the material asset contribution to the Trust by the settlor at the time the Trust is established is less than A\$10,000; or
- (b) the settlor is deceased; or
- (c) the Trust is:
  - (i) a registered managed investment scheme; or
  - (ii) a wholesale managed investment scheme which doesn't make small scale offerings; or
- (d) subject to Commonwealth statutory oversight; or
- (e) the trust is a government superannuation fund established by legislation.

### Type of Trust

Category A: Registered managed investment scheme          ARSN

Category B: Regulated Trust (e.g. self-managed superannuation fund)

ABN of Trust

Registration/licensing details

Name of regulator  
(e.g. ASIC, APRA, ATO)

Category C: Government  
superannuation fund

Name of the legislation  
establishing the fund

Category D: Other trust type

Trust description (e.g.  
family, unit, charitable)

### Complete if the trust falls under Category D

Do the terms of the trust identify the beneficiaries by reference to membership of a class?

Yes - Please provide details of membership class(es)  
(e.g. unitholders, family members of named person, charitable purposes)

No - Please provide full names of all company and individual beneficiaries below.

## Beneficiary Details

If the Trust is (a) a registered managed investment scheme; (b) a wholesale managed investment scheme which does not make small scale offerings; (d) subject to Commonwealth statutory oversight; or (e) government superannuation fund established by legislation it does not need to provide the following beneficiary details

### BENEFICIARY 1

Full Name

Address

### BENEFICIARY 2

Full Name

Address

Are you or any of the beneficiaries a domestic or foreign Politically Exposed Person?      Yes      No

If there are more beneficiaries, please provide the above details on a separate page and attach to this AML Supplement.

### Trustee details (all investors) insert full name and address of each trustee

#### TRUSTEE 1

Full Name of Trustee

Full business address of Trustee

#### TRUSTEE 2

Full Name of Trustee

Full business address of Trustee

If individual trustees, please complete *Section 1A* in respect of one of the individual trustees.

If corporate trustees, please complete *Section 1B* in respect of one of the corporate trustees.

If the trust is comprised of both individual trustees as well as corporate trustee, please either complete Section 1A in respect of one of the individual trustees, or complete Section 1B in respect of one of the corporate trustees.

## SECTION 1D – PARTNERSHIP

Full Name of partnership

Registered business name of partnership (if any)

Full address (PO box is not acceptable)

TFN, ABN or Exemption Code

Country of residence for tax purposes

Country in which the Partnership was established

Number of partners

Type of Partnership

Is the partnership regulated by a professional association?

Name of Association

Yes

Membership details

No - Please provide details below with respect to all the partners

### PARTNER 1

Full Name

Title (Mr/Mrs/Miss/Ms)

Residential Address (not PO box)

Are you a domestic or foreign Politically Exposed Person?

Yes

No

### PARTNER 2

Full Name

Title (Mr/Mrs/Miss/Ms)

Residential Address (not PO box)

Are you a domestic or foreign Politically Exposed Person?

Yes

No

If there are more partners, please provide their details on a separate page and attach to this AML Supplement.

## SECTION 1E – FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA) SELF-CERTIFICATION DECLARATION

### This section must be completed by all investors.

As a result of the signing of the inter-governmental agreement (IGA) between the Australian and United States (US) governments in relation to compliance with the FATCA, Otira Capital is required to provide the ATO with certain information about the following investors in the Fund:

- investors identified as US citizens or tax residents (information about corporations and trusts with US substantial owners or controlling persons will also be reported);
- investors who do not confirm their FATCA status; and
- certain financial institutions that do not meet their FATCA obligations (non-participating foreign financial institutions).

Otira Capital is not able to provide advice to individual investors and cannot determine the impact or compliance obligations of FATCA or the IGA for the investor's business or investment activities. Otira Capital strongly encourages investors to seek the advice of an experienced tax or legal advisor to determine what actions investors may need to take in completing the declaration below.

If you answer Yes to any of the questions below Otira Capital will contact you to get further information.

### INDIVIDUALS OR JOINT INVESTORS

Are you a United States (US) citizen, US taxpayer, or US resident for tax purposes?

No Proceed to next question

Yes You MUST provide a Taxpayer Identification Number (TIN) for each Applicant. Otira Capital will contact you for further information.

Applicants

Taxpayer Identification Number (TIN)

### COMPANIES

Are you a US Company for tax purposes (ie. a company established under US laws or, a US taxpayer etc)?

No Proceed to next question

Yes Otira Capital will contact you for further information

Are any of the shareholders or beneficial owners of the company a US citizen, US taxpayer or US resident for tax purposes?

No Proceed to next question

Yes List individuals and their capacity. Otira Capital will contact you for further information.

Name

Capacity (director/shareholder/beneficial owner etc)

## TRUSTS

Is the trust a US trust for tax purposes (ie. established under US laws)?

No Proceed to next question

Yes Otira Capital will contact you for further information

Is/Are the trustee, any shareholders of the trustee, any beneficial owners of the trustee, any beneficiaries or any beneficial owner of the trust, a US citizen, US taxpayer or US resident for tax purposes?

No Proceed to next question

Yes List individuals and their capacity. Otira Capital will contact you for further information.

Name

Capacity (director/shareholder/beneficial owner etc)

## PARTNERSHIPS

Is the partnership a US partnership (ie. established under US laws, a US taxpayer etc)?

No Proceed to next question

Yes Otira Capital will contact you for further information

Is/Are any of the partners, any shareholders or Beneficial Owners of a partner, a US citizen, US taxpayer or US resident for tax purposes?

No Proceed to next question

Yes List individuals and their capacity. Otira Capital will contact you for further information.

Name

Capacity (eg partner of partnership)

## SECTION 1F – COMMON REPORTING STANDARD (CRS) TAX RESIDENCY SELF-CERTIFICATION

### This section must be completed by all investors.

To help protect the integrity of tax systems, governments around the world are introducing a new information gathering and reporting requirement for financial institutions. This is known as the Common Reporting Standard ('the CRS'). Under the CRS, Otira Capital is required to determine where you are 'tax resident' (this will usually be where you are liable to pay income taxes). Your information may be shared between different countries' tax authorities.

Completing this form will ensure that we hold accurate and up to date information about your tax residency. If your circumstances change and any of the information provided in this form becomes incorrect, please let us know immediately and provide an updated Self-Certification.

## INDIVIDUALS OR JOINT INVESTORS

### Part 1: Account Holder Identification

Account Holder Name                      Date of Birth (dd/mm/yyyy)                      Place and Country of Birth

Permanent Residence Address:

Number & Street    City/Town

State/Province/County                      Post Code                      Country

### Part 2: Declaration of Tax Residency

Please tick either (a) or (b) or (c) and complete as appropriate.

(a) I confirm that I am a U.S. citizen and/or resident in the U.S. for tax purposes (green card holder or resident under the substantial presence test) and my U.S. federal taxpayer identifying number (U.S. TIN) is as follows:

(b) I confirm that I was born in the U.S. (or a U.S territory) but am no longer a U.S. citizen as I have voluntarily surrendered my citizenship as evidenced by the attached documents.

(c) I confirm that I am not a U.S. citizen or resident in the U.S. for tax purposes.

I hereby confirm that I am, for tax purposes, resident in the following countries (indicate the tax reference number type and number applicable in each country).

Country/countries of tax residency	Tax reference number type	Tax reference number
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1.

2.

3.

Please indicate not applicable if jurisdiction does not issue or you are unable to procure a tax reference number or functional equivalent. If applicable, please specify the reason for non-availability of a tax reference number:

### Part 3: Declaration and Undertakings

I declare that the information provided in this form is, to the best of my knowledge and belief, accurate and complete. I undertake to advise the recipient promptly and provide an updated Self-Certification form within 30 days where any change in circumstances occurs which causes any of the information contained in this form to be inaccurate or incomplete. Where legally obliged to do so, I hereby consent to the recipient sharing this information with the relevant tax information authorities.

Signature:

Date: (dd/mm/yyyy):

\*The term "tax regulations" refers to regulations created to enable automatic exchange of information and include Foreign Account Tax Compliance Act, various Agreements to Improve International Tax Compliance entered into between the UK, the Crown Dependencies and the Overseas Territories, and the OECD Common Reporting Standard for Automatic Exchange of Financial Account Information, (as implemented in the relevant jurisdictions).



## ENTITIES - COMPANIES, TRUSTS and PARTNERSHIPS

(Please complete Parts 1-3 in BLOCK CAPITALS)

### Part 1 – Identification of Account Holder

A. Legal Name of Entity/Branch\*

B. Country of incorporation or organisation

C. Current Residence Address

Building/Apt/Suite/Number/Street\*

Town/City/Province/County/State\*

Country \*

Postal Code/ZIP Code

D. Mailing Address

*(please only complete if different from the address shown in Section C above)*

Building/Apt/Suite/Number/Street\*

Town/City/Province/County/State\*

Country \*

Postal Code/ZIP Code

**Part 2 – Entity Type\*** *Please provide the Account Holder's Status by ticking one of the following boxes in section 1.*

- 1.** (a) **Financial Institution – Investment Entity**  
i. An Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution (*Note: if ticking this box 1(a)(i), please also complete sections 3(a) and 3(b) below for Controlling Persons*).

ii. Other Investment Entity

(b) Financial Institution – Depository Institution, Custodial Institution or Specified Insurance Company

(c) Active NFE – a corporation the stock of which is regularly traded on an established securities market or a corporation which is a related entity of such a corporation

If ticking this box (Active NFE), please provide the name of an established securities market on which the stock is regularly traded:

If you are related to a publicly traded corporation, please provide the name of the corporation whose stock is publicly traded and with which you are related:

(d) Active NFE – a Government Entity or Central Bank

(e) Active NFE – an International Organisation

(f) Active NFE – other than (c)-(e) (See Appendix for definition of other Active NFEs)

(g) Passive NFE (Note: if ticking this box 1(g), please also complete sections 3 (a) and 3(b) below)

**2. Australian Retirement Fund**

Complete this section if the Entity is an Australian Retirement Fund (complying Self-Managed Superannuation Funds, APRA regulated super funds, government super funds or pooled superannuation trusts and entities wholly owned by an Australian retirement plan) *Tick box if you are an Australian Retirement Fund*

**3. Controlling Persons: If you have ticked section 1(a)(i) or 1(g) above, then please:**

i. Indicate the name of any Controlling Person(s) of the Account Holder:

ii. Complete "Controlling Person tax residency self-certification form" for each Controlling Person.\*

*Note: If there are no natural person(s) who exercise control of the Entity then the Controlling Person will be the natural person(s) who hold the position of senior managing official. (See definition of Controlling Person in Appendix)*

**Part 3 – Country of Tax Residence and related Taxpayer Identification Number (TIN) or equivalent\***

Please complete the following table indicating the Account Holder's tax residence country or countries (*i.e. where the entity is treated as a resident of the country for purposes of that country's income tax*) and the Account Holder's TIN (if any) for each country indicated. If the Account Holder is tax resident in more than three countries, please use a separate sheet. If the Account Holder is not tax resident in any jurisdiction (*e.g., because it is fiscally transparent*), please provide its place of effective management or the country in which its principal office is located on line 1.

If a TIN is unavailable, please provide the appropriate reason A, B or C as defined below:

**Reason A** - The country where the Account Holder is liable to pay tax does not issue TINs to its residents

**Reason B** - The Account Holder is unable to obtain a TIN or equivalent number (If this reason is selected, please explain why the Account Holder is unable to obtain a TIN in the below table)

**Reason C** - No TIN is required. (Note. Only select this reason if the authorities of the country of tax residence entered below do not require the TIN to be disclosed)

Country of tax residence	TIN	If no TIN available, enter Reason A,B or C
1.		
2.		
3.		

Please explain in the following boxes why the Account Holder is unable to obtain a TIN if you selected Reason B on the previous page.

1.

2.

3.

#### **Part 4 – Declaration and Signature\***

I acknowledge that the information provided on this form and information regarding the Account Holder may be reported to the tax authorities of the country in which this/these account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the Account Holder may be a tax resident where those countries (or tax authorities in those countries) have entered into Agreements to exchange financial account information.

I certify that I am authorised to sign for the Account Holder in respect of all the account(s) to which this form relates.

**I declare that all statements made in this declaration are, to the best of my knowledge and belief, correct and complete.**

I agree to advise the Financial Institution within 30 days of any change in circumstances which affects the tax residence status of the Account Holder identified in Part 1 of this form or causes the information contained herein to become incorrect (including any changes to the information on controlling persons identified in Part 2 question 2a), and to provide a suitably updated self-certification reflecting such change in circumstances.

Signature: \*

Print Name: \*

Date: \*

Note: Please indicate the capacity in which you are signing the form (for example 'Authorised Officer'). If signing under a power of attorney please also attach a copy of the power of attorney.

Capacity: \*

## CONTROLLING PERSONS

When the Unit Holder is a Passive Entity (for example, certain trusts or investment vehicles) we need those individuals identified as having ultimate control of the Entity to complete this Form. These Individuals are termed 'controlling persons.

### PLEASE COMPLETE PARTS 1-3

#### Part 1 – Identification of the Controlling Person

##### A. Name of Controlling Person:

Family Name or Surname(s):\*

Title:

First or Given Name:\*

Middle Name(s):

##### B. Current Residence Address:

Building/Apt/Suite/Number/Street\*

Town/City/Province/County/State\*

Country \*

Postal Code/ZIP Code

##### C. Mailing Address:

(please only complete if different from the address shown in Section B above)

Building/Apt/Suite/Number/Street\*

Town/City/Province/County/State\*

Country \*

Postal Code/ZIP Code

D. Date of Birth:\*( YYYY-MM-DD)

E. Place of Birth (City/Country):

F. Please enter the legal name of the Controlled Entity of which you are a Controlling Person:  
Legal Name of Controlled Entity

**Part 2 – Country of Residence For Tax Purposes and related Taxpayer Identification Number (TIN) or equivalent\***

Please complete the following table indicating:

- (i) in which country or countries the Controlling Person is resident for tax purposes;
- (ii) the Controlling Person’s TIN for each country indicated; and,
- (iii) if the Controlling Person is a tax resident in a country that is a Reportable Jurisdiction(s) then please also complete **Part 3 “Type of Controlling Person”**.

If the Controlling Person is a tax resident in more than three countries please use a separate sheet.

If a TIN is unavailable, please provide the appropriate reason A, B or C, as defined below:

- Reason A** - The country where the Controlling Person is liable to pay tax does not issue TINs to its residents
- Reason B** - The Controlling Person is unable to obtain a TIN or equivalent number (If this reason is selected, please explain why the Controlling Person is unable to obtain a TIN in the below table)
- Reason C** - No TIN is required because the tax residence jurisdiction that issued the TIN does not require a Financial Institution to collect and report the TIN.

Country of tax residence	TIN	If no TIN available, enter Reason A, B or C
1.		
2.		
3.		

Please explain in the following boxes why the Account Holder is unable to obtain a TIN if you selected Reason B above.

- 1.
- 2.
- 3.

### Part 3 – Type of Controlling Person

Please only complete this Part if the Controlling Person is a tax resident in one or more Reportable Jurisdictions.

**A.** If the Controlled Entity is an entity other than a trust (or similar legal arrangement), please select among the following types:

Owner (direct or indirect)

Controlling Person by other means

Senior Management Official

**B.** If the Controlled Entity is a trust, please select among the following types:

Settlor

Trustee

Protector

Beneficiary

Other (please specify):

**C.** If the Controlled Entity is a legal arrangement other than a trust, please select among the following types:

Settlor

Trustee

Protector

Beneficiary

Other (please specify):

## Part 4 – Declaration and Signature\*

**1. I declare that all statements made in this declaration are, to the best of my knowledge and belief, correct and complete.**

2. I acknowledge that the information contained in this form and information regarding the Controlling Person, as well as financial information (e.g., account balance or value, the amount of income or gross proceeds received) respecting the Financial Account(s) to which the Form is applied may be reported to the tax authorities of the country in which this/these account(s) is/are maintained and exchanged with tax authorities of another country or countries in which [I/the Controlling Person] may be a tax resident pursuant to a legal agreement between the competent authorities of these countries on the automatic exchange of information on Financial Accounts under the Common Reporting Standard (CRS).

3. If there is a change in circumstances that affects the tax residence status of the Account Holder or causes the information contained herein to become incorrect or incomplete, I understand that I am obligated to inform the fund manager of the change in circumstances within 30 days of its occurrence and to provide a suitably updated CRS self-certification.

4. I certify that I am the Controlling Person or am authorised to sign for the Controlling Person, of all the account(s) held by the entity Account Holder to which this form relates.

Signature: \*

Print Name: \*

Date: \*

Note: If you are not the Controlling Person, please indicate the capacity in which you are signing the form. If signing under a power of attorney please also attach a copy of the power of attorney.

Capacity: \*

Note: The following selected definitions are provided to assist you with the completion of this form. If you have any questions about substantive tax principles, please contact your tax adviser or the applicable tax authority.

**"Account Holder"** - A legal entity is an "Account Holder" when its name is listed or identified as the holder of a Financial Account. This is regardless of whether such entity is a flow-through entity for tax purposes. Thus, for example, if a trust is listed as the holder or owner of the Account, the trust is the Account Holder, rather than the trustee, the grantors, the settlors or the beneficiaries. Similarly, if a partnership is listed as the holder or owner of the account, the partnership is the Account Holder, rather than any of the partners. A person, other than a Financial Institution, holding a Financial Account for the benefit of another person as an agent, a custodian, a nominee, a signatory, an investment advisor, an intermediary, or as a legal guardian, is not treated as the Account Holder. In these circumstances that other person is the Account Holder.

**"Active NFE" - an NFE that meets any of the criteria listed below:**

- a)** less than 50% of the NFE's gross income for the preceding calendar year or other appropriate reporting period is passive income and less than 50% of the assets held by the NFE during the preceding calendar year or other appropriate reporting period are assets that produce or are held for the production of passive income;
- b)** the stock of the NFE is regularly traded on an established securities market or the NFE is a Related Entity of an Entity the stock of which is regularly traded on an established securities market;
- c)** the NFE is a Governmental Entity, an International Organisation, a Central Bank, or an Entity wholly owned by one or more of the foregoing;
- d)** substantially all of the activities of the NFE consist of holding (in whole or in part) the outstanding stock of, or providing financing and services to, one or more subsidiaries that engage in trades or businesses other than the business of a Financial Institution;
- e)** the NFE is not yet operating a business and has no prior operating history, (a "startup NFE") but is investing capital into assets with the intent to operate a business other than that of a Financial Institution, This exception is limited to 24 months from the date of the initial organisation of the NFE;
- f)** the NFE was not a Financial Institution in the past five years, and is in the process of liquidating its assets or is reorganising with the intent to continue or recommence operations in a business other than that of a Financial Institution;
- g)** the NFE primarily engages in financing and hedging transactions with, or for, Related Entities that are not Financial Institutions, and does not provide financing or hedging services to any Entity that is not a Related Entity, provided that the group of any such Related Entities is primarily engaged in a business other than that of a Financial Institution; or
- h)** the NFE meets all of the following requirements for a "non-profit NFE" :
  - i)** is established and operated in its jurisdiction of residence exclusively for religious, charitable, scientific, artistic, cultural, athletic, or educational purposes; or it is established and operated in its jurisdiction of residence and it is a professional organisation, business league, chamber of commerce, labour organisation, agricultural or horticultural organisation, civic league or an organisation operated exclusively for the promotion of social welfare;
  - ii)** is exempt from income tax in its jurisdiction of residence;
  - iii)** has no shareholders or members who have a proprietary or beneficial interest in its income or assets;
  - iv)** the applicable laws of the NFE's jurisdiction of residence or the NFE's formation documents do not permit any income or assets of the NFE to be distributed to, or applied for the benefit of, a private person or non-charitable Entity; and



v) the applicable laws of the NFE's jurisdiction of residence or the NFE's formation documents require that, upon the NFE's liquidation or dissolution, all of its assets be distributed to a Governmental Entity or other non-profit organisation, or escheat to the government of the NFE's jurisdiction of residence or any political subdivision.

**"Control"** – is generally exercised by the natural person(s) who ultimately has a controlling ownership interest (typically on the basis of a certain percentage (e.g. 25%)) in the Entity. Where no natural person(s) exercises control through ownership interests, the Controlling Person(s) of the Entity will be the natural person(s) who exercises control of the Entity through other means. Where no natural person(s) is/are identified as exercising control of the Entity (for example where no underlying person has control of greater than 25% of the entity) then under the CRS the Reportable Person is deemed to be the natural person who holds the position of senior managing official.

**"Controlling Person(s)"** – a natural person who exercises control over an entity. Where that entity is treated as a Passive Non-Financial Entity ("Passive NFE") then a Financial Institution is required to determine whether or not these Controlling Persons are Reportable Persons. This definition corresponds to the term "beneficial owner" of an entity as described in the Financial Action Task Force (FATF) recommendations. In the case of a trust, the Controlling Person(s) are the settlor(s), the trustee(s), the protector(s) (if any), and the beneficiary(ies) or class(es) of beneficiaries, regardless of whether or not any of them exercises control over the activities of the trust. In addition, any other natural person(s) exercising ultimate effective control over the trust (including through a chain of control or ownership) is a Controlling Person of a trust.

**"Entity"**- a legal person or a legal arrangement, such as a corporation, organisation, partnership, trust or foundation. This term covers any person other than an individual (i.e. a natural person).

**"Financial Institution"** – a Custodial Institution, a Depository Institution, an Investment Entity, or a Specified Insurance Company.

**"Investment Entity"** – includes two types of Entities:

(i) an Entity that primarily conducts as a business one or more of the following activities or operations for or on behalf of a customer:

- Trading in money market instruments (cheques, bills, certificates of deposit, derivatives, etc.); foreign exchange; exchange, interest rate and index instruments; transferable securities; or commodity futures trading;
- Individual and collective portfolio management; or
- Otherwise investing, administering, or managing Financial Assets or money on behalf of other persons.

However, such activities or operations do not include rendering non-binding investment advice to a customer.

(ii) an Entity managed by another Financial Institution is any Entity the gross income of which is primarily attributable to investing, reinvesting, or trading in Financial Assets where the entity is managed by another entity that is a Depository Institution, a Custodial Institution, a specified Insurance Company of an Investment Entity described in (i) above.

**"Participating Jurisdiction"** – a jurisdiction with which an agreement is in place pursuant to which it will provide the information set out in the CRS.

**"Passive NFE"** – under the CRS any: (i) NFE that is not an Active NFE; and (ii) Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution.

**"Related Entity"** – An Entity is related to another Entity if either Entity controls the other Entity or the two Entities are under common control. For this purpose, control includes direct or indirect ownership of more than 50% of the vote and value in an Entity.

**"Reportable Account"** – an account held by one or more Reportable Persons or by a Passive NFE with one or more Controlling Persons that is/are a Reportable Person(s).

**“Reportable Jurisdiction”** - a Participating Jurisdiction with which an obligation to provide financial account information is in place.

**“Reportable Jurisdiction Person”** – an Entity that is tax resident in a Reportable Jurisdiction(s) by reference to local laws in the country where the Entity is established, incorporated or managed. An Entity such as a partnership, limited liability partnership or similar legal arrangement that has no residence for tax purposes shall be treated as resident in the jurisdiction in which its place of effective management is situated. If an Entity certifies that it has no residence for tax purposes it should complete the form stating the address of its principal office. Dual resident Entities may rely on the tiebreaker rules contained in tax conventions (if applicable) to determine their residence for tax purposes.

**“Reportable Person”** – is a “Reportable Jurisdiction Person”, other than:

- a corporation the stock of which is regularly traded on one or more established securities markets;
- any corporation that is a Related Entity of a corporation described immediately above;
- a Governmental Entity;
- an International Organisation;
- a Central Bank; or
- a Financial Institution (except for an Investment Entity that is not a Participating Jurisdiction Financial Institution, which is treated as a Passive NFE’.)

**“Resident for tax purposes”** – generally means resident for tax purposes in a particular jurisdiction if, under the laws of that jurisdiction (including tax conventions), it pays or should be paying tax therein by reason of his domicile, residence, place of management or incorporation, or any other criterion of a similar nature, and not only from sources in that jurisdiction. An Entity such as a partnership, limited liability partnership or similar legal arrangement that has no residence for tax purposes shall be treated as resident in the jurisdiction in which its place of effective management is situated. For additional information on tax residence, please contact your tax adviser or use the OECD AEOI Portal containing information on tax residence in Participating Jurisdictions.

**“Specified Insurance Company”** – any Entity that is an insurance company (or the holding company of an insurance company) that issues, or is obligated to make payments with respect to, a Cash value Insurance Contract or an Annuity contract.

**“TIN”** – the Taxpayer Identification Number or a functional equivalent in the absence of a TIN. A TIN is a unique combination of letters or numbers assigned by a jurisdiction to an individual or an Entity and used to identify the individual or Entity for the purposes of administering the tax laws of such jurisdiction. Some jurisdictions do not issue a TIN. However, these jurisdictions often utilise some other high integrity number with an equivalent level of identification (a “functional equivalent”). Examples of that type of number include, for Entities, a Business/company registration code/number.

### **When the Unit Holder is a Passive Entity**

Regulations based on the OECD Common Reporting Standard (“CRS”)] require Financial Institutions (“FIs”) to Collect certain information about an Account Holder’s tax residence status, and if applicable, the tax residence status of each natural person that is a Controlling Person. Please note that we may be legally required to report information provided in this form and other financial information about the financial account(s) to which this Form relates to the tax authorities in the country in which the account(s) are maintained. In turn, the local tax authorities may exchange the reported information with the tax authorities in the country or countries in which you are a tax resident.

Please provide a separate Form for each Controlling Person of an Account Holder that is (1) a Passive Non-financial Entity (NFE) or (2) an Investment Entity located in Non-Participating Jurisdiction managed by another Financial Institution. The term “Controlled Entity” will be used in this Form to refer to either of these two types of Entities.

Do not use this Form for providing a self-certification for an individual that is an Account Holder. Instead, use the “CRS Self-certification Form for Individuals”. Also, do not use this Form for providing a self-certification for an Entity that is an Account Holder. Instead, use the “CRS Self-certification Form for Entities”.

Definitions of selected terms can be found in the Appendix to this Form.

This Form may be completed either by the Account Holder or the Controlling Person. If you are completing this Form on behalf of a Controlling Person, please state the "capacity" in which you are signing this form in Part 4. For example, you may be the Passive NFE Account Holder or may be completing the form under a power of attorney.

Items marked with an asterisk (\*) indicate required information. This form is intended to request information only where such request is not prohibited by local law.

This form will remain valid unless there is a change in circumstances relating to the Controlling Person's tax residence status or other mandatory information included on this form. You must notify us within 30 days of any change in circumstances that makes the information in this self-certification incorrect or incomplete, and provide an updated self-certification.

Please note that this self-certification form is for CRS purposes only. Its completion is not a substitute for the completion any IRS Form W-9, Form W-8 or self-certification that may otherwise be required for FATCA or other U.S. tax purposes.

If you have any questions about determining tax residence in any particular country, please contact a tax adviser or the local tax authority.

**Note:** The following selected definitions are provided to assist you with the completion of this form. If you have any questions about the tax principles that affect the tax residence status of an individual who is a Controlling Person, please contact a tax adviser or the applicable tax authority. Further details can be found within the OECD Common Reporting Standard for Automatic Exchange of Financial Account Information (the CRS), the associated Commentary to the CRS, and domestic guidance.

**"Account Holder"** – A legal entity is an "Account Holder" when its name is listed or identified as the holder of a Financial Account. This is regardless of whether such entity is a flow-through entity for tax purposes. Thus, for example, if a trust is listed as the holder or owner of the Account, the trust is the Account Holder, rather than the trustee, the grantors, the settlors or the beneficiaries. Similarly, if a partnership is listed as the holder or owner of the account, the partnership is the Account Holder, rather than any of the partners. A person, other than a Financial Institution, holding a Financial Account for the benefit of another person as an agent, a custodian, a nominee, a signatory, an investment advisor, an intermediary, or as a legal guardian, is not treated as the Account Holder. In these circumstances that other person is the Account Holder.

**"Control"** – is generally exercised by the natural person(s) who ultimately has a controlling ownership interest (typically on the basis of a certain percentage (e.g. 25%)) in the Entity. Where no natural person(s) exercises control through ownership interests, the Controlling Person(s) of the Entity will be the natural person(s) who exercises control of the Entity through other means. Where no natural person(s) is/are identified as exercising control of the Entity (for example where no underlying person has control of greater than 25% of the entity) then under the CRS the Reportable Person is deemed to be the natural person who holds the position of senior managing official.

**"Controlling Person(s)"** – a natural person who exercises control over an entity. Where that entity is treated as a Passive Non-Financial Entity ("Passive NFE") then a Financial Institution is required to determine whether or not these Controlling Persons are Reportable Persons. This definition corresponds to the term "beneficial owner" of an entity as described in the Financial Action Task Force (FATF) recommendations. In the case of a trust, the Controlling Person(s) are the settlor(s), the trustee(s), the protector(s) (if any), and the beneficiary(ies) or class(es) of beneficiaries, regardless of whether or not any of them exercises control over the activities of the trust. In addition, any other natural person(s) exercising ultimate effective control over the trust (including through a chain of control or ownership) is a Controlling Person of a trust.

**Controlling Persons of a Partnership** – any natural person who exercises control through direct or indirect ownership of the capital or profits of the partnership, voting rights in the partnership, or who otherwise exercises control over the management of the partnership or similar arrangement.

**Controlling Persons of a Trust** – the settlor(s), the trustee(s), the protector(s) (if any), the beneficiary(ies) or class(es) of beneficiaries, and any other natural person(s) exercising ultimate effective control over the trust (including through a chain of control or ownership). The settlor(s), the trustee(s), the protector(s) (if any), and the beneficiary(ies) or class(es) of beneficiaries, must always be treated as Controlling Persons of a trust, regardless of whether or not any of them exercises control over the activities of the trust. In the case of a legal arrangement other than a trust, such term means persons in equivalent or similar positions.

**“Entity”** – a legal person or a legal arrangement, such as a corporation, organisation, partnership, trust or foundation. This term covers any person other than an individual (i.e. a natural person).

**“Financial Account”** – an account maintained by a Financial Institution and includes: Depository Accounts; Custodial Accounts; Equity and debt interests in certain Investment Entities; Cash Value Insurance Contracts; and Annuity Contracts.

(i) an Entity that primarily conducts as a business one or more of the following activities or operations for or on behalf of a customer:

- Trading in money market instruments (cheques, bills, certificates of deposit, derivatives, etc.); foreign exchange; exchange, interest rate and index instruments; transferable securities; or commodity futures trading;
- Individual and collective portfolio management; or
- Otherwise investing, administering, or managing Financial Assets or money on behalf of other persons.

However, such activities or operations do not include rendering non-binding investment advice to a customer.

(ii) an Entity managed by another Financial Institution is any Entity the gross income of which is primarily attributable to investing, reinvesting, or trading in Financial Assets where the entity is managed by another entity that is a Depository Institution, a Custodial Institution, a specified Insurance Company of an Investment Entity described in (i) above.

**“Participating Jurisdiction”** – a jurisdiction with which an agreement is in place pursuant to which it will provide the information set out in the CRS.

**“Passive NFE”** – under the CRS any: (i) NFE that is not an Active NFE; and (ii) Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution.

**“Related Entity”** – An Entity is related to another Entity if either Entity controls the other Entity or the two Entities are under common control. For this purpose, control includes direct or indirect ownership of more than 50% of the vote and value in an Entity.

**“Reportable Account”** – an account held by one or more Reportable Persons or by a Passive NFE with one or more Controlling Persons that is/are a Reportable Person(s).

**“Reportable Jurisdiction”** – A jurisdiction (i) with which an agreement is in place pursuant to which there is an obligation to provide financial account information set forth in the Common Reporting Standard, and (ii) which is identified in a published list.

**“Reportable Person”** – an individual (or entity) that is a tax resident of a Reportable Jurisdiction under the laws of that jurisdiction. The Account Holder will normally be the “Reportable Person”; however, in the case of an Account Holder that is a Passive NFE or an Investment Entity located in a Non-participating jurisdiction and is managed by another Financial Institution, a Reportable Person also includes any Controlling Persons who are tax resident in a Reportable Jurisdiction.

**“TIN”** – the Taxpayer Identification Number or a functional equivalent in the absence of a TIN. A TIN is a unique combination of letters or numbers assigned by a jurisdiction to an individual or an Entity and used to identify the individual or Entity for the purposes of administering the tax laws of such jurisdiction. Some jurisdictions do not issue a TIN. However, these jurisdictions often utilise some other high integrity number with an equivalent level of identification (a “functional equivalent”). Examples of that type of number include, for Entities, a Business/company registration code/number.

## SECTION 2 - IDENTIFICATION DOCUMENTS - ALL INVESTORS

To comply with our obligations under AML Law, we must collect certain information, supported by original or certified copies of relevant documents, about each investor. Documents written in a language other than English must be accompanied by an English translation prepared by an accredited translator.

In order to verify the signature(s) on the Application Form, as well as the authority for all future requests, please provide a list of authorised signatories (including specimen signatures), or for individual investors/ trustees, a certified copy of a driver's licence or passport.

AML CATEGORY	AML CHECKS
INDIVIDUAL	Application Form Certified passport/photo ID Certified proof of address (if not included in photo ID) Sophisticated Investor letter (if applicable)
AUSTRALIAN PRIVATE/ NOMINEE COMPANY	Application Form Full ASIC extract, or alternative legal document listing directors, beneficial owners Sophisticated Investor letter (if applicable) Certified Authorised Signatory List (if applicable) Certified documents as per investor type for all directors, and all beneficial owners owning over 25 %
PRIVATE/NOMINEE COMPANY (DOMICILED OUTSIDE AUSTRALIA)	Application Form Certified copy of the Certificate of Incorporation Certified copy of Memorandum and Articles of Association/Constitution Certified Register of Members Certified Register of Directors Certified Authorised signatory list Sophisticated Investor letter (if applicable) Certified documents as per investor type for all directors, and all beneficial owners owning over 25 %
PRIVATE/NOMINEE COMPANY (REGULATED)	Application Form Documentary evidence of regulated status Certified Authorised Signatory List AML letter on company letterhead if acting in a nominee capacity Sophisticated Investor letter (if applicable)
LISTED COMPANY	Application Form Documentary evidence of listing Certified Authorised Signatory List AML letter on company letterhead if acting in a nominee capacity Sophisticated Investor letter (if applicable)
PARTNERSHIP	Application Form Certified copy of partnership agreement Certified copies of identification documents for all partners owning over 25% Sophisticated Investor letter (if applicable)
TRUST/FOUNDATION/ SUPERANNUATION FUND	Application Form Certified copy of trust deed (extracts showing information on trustee or beneficiaries) Certified copies of identification documents for trustee whose details have been completed in Part 1A or Part 1B Certified copies of identification documents for beneficial owners (>25%) Sophisticated Investor letter (if applicable)
FUND/CHARITY	Application Form Certified Authorised Signatory List and properly authorised mandate of persons completing the form to act on behalf of the Investor. Documentary evidence of regulated status of IM otherwise provide all documentation required as per IM investor type AML letter on company letterhead from Fund Administrator Sophisticated Investor letter (if applicable)

## SECTION 3 - CERTIFIED COPY OF AN ORIGINAL DOCUMENT

Certified copy means a document that has been certified as a true copy of an original document.

Certified extract means an extract that has been certified as a true copy of some of the information contained in a complete original document by one of the persons described in the sub-paragraphs below.

The certifier should sign the copy (printing his/her name underneath) and clearly indicate his/her position or capacity, and include a contact address and phone number. The certifier must indicate that the document is a true copy of the original document.

People who can certify documents or extracts are:

A person who, under a law in force in a State or Territory, is currently licensed or registered to practice the following occupations:

- Chiropractor;
- Dentist;
- Legal practitioner;
- Medical practitioner;
- Nurse;
- Optometrist;
- Patent/Trademarks attorney;
- Pharmacist;
- Physiotherapist;
- Psychologist; and
- Veterinary surgeon.
- a lawyer - a person who is enrolled on the roll of the Supreme Court of a State or Territory, or High Court of Australia, as a legal practitioner (however described);
- a person listed in Part 2 of Schedule 2 of the Statutory Declarations Regulations 1993, which includes but is not limited to:
  - a judge of a court;
  - a magistrate;
  - a chief executive officer of a Commonwealth court;
  - a registrar or deputy registrar of a court;
  - a Justice of the Peace;
  - a notary public (for the purposes of the Statutory Declaration Regulations 1993);
  - a police officer;
  - a postal agent - an agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public;
  - the post office - a permanent employee of The Australian Postal Corporation with 2 or more years of continuous service who is employed in an office supplying postal services to the public;
  - an Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955);
  - an officer at a bank, building society, credit union or finance company with 2 or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 1993);
  - a member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accountants or the National Institute of Accountants; and
  - a teacher employed on a full-time basis at a school or tertiary education institution.
- an officer or authorised representative of a holder of an Australian financial services licence, having 2 or more continuous years of service with one or more licensees.

## 11. SOPHISTICATED OR PROFESSIONAL INVESTOR CERTIFICATE

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### To: Otira Capital Pty Ltd. Please:

Complete Section 1; and

Complete Section 2 – either complete Option B and have signed by your accountant OR complete Option A; and

Sign and date Section 3

### SECTION 1: INVESTOR DETAILS

#### INVESTOR A / INDIVIDUAL TRUSTEE

Full given name(s) or Company name

Surname

Residential address if an individual or company registered office address (PO Box is NOT acceptable)

Suburb

State

Country

Postcode

Telephone

Email

I acknowledge that:

- (a) This Certificate is given to Otira Capital Pty Ltd to determine whether it is able to make certain offers of securities to me in compliance with the Corporations Act 2001;
- (b) offers of securities made to me by Otira Capital Pty Ltd may be made on the basis of this certificate;
- (c) I may be required to observe certain selling restrictions in Australia in relation to securities offered to me as a registered Sophisticated Investor;
- (d) If I have completed Section 2 Option A, Otira Capital Pty Ltd is authorised to send the renewal certificate to my certified accountant on my behalf; and
- (e) I may only act as principal

## SECTION 2: CERTIFICATION

### OPTION A: PROFESSIONAL INVESTOR CATEGORY

#### I certify that I am (tick whichever box is applicable):

A person who controls at least A\$10 million (including any amount held by an associate or under a trust that the person manages) for the purpose of investment in securities; or

A person who is a licensed or exempt dealer and is acting as principal. License No: \_\_\_\_\_ OR

A regulated superannuation fund, an approved deposit fund, a pooled superannuation trust, or a public sector superannuation scheme within the meaning of the Superannuation Industry (Supervision) Act 1993 if the fund, trust or scheme has net assets of at least \$10 million.

Details of the Managed Fund or Superannuation Fund/ Trust/Scheme (block letters please):

Name

Street address

Suburb

State

Country

Postcode

Telephone

Email

NOTE: Otira Capital Pty Ltd may require additional independent verification of your professional investor status.



## OPTION B: QUALIFIED ACCOUNTANT'S\* CERTIFICATION

Details of the Qualified Accountant\*:

Accountant's name

Name of firm

Street address

Suburb

Postcode

State

Country

Telephone

Email

I certify that the following is true and correct in every particular:

- (a) I am a qualified accountant\* within the meaning of section 9 of the Corporations Act 2001;
- (b) This certificate is given at the request of the investor described in Section 1 of this certificate ("Investor");
- (c) This certificate is given for the purpose of section 708(8)(c) of the Corporations Act 2001; and
- (d) The Investor has: Net assets of at least A\$2.5 million; or  
A gross income for each of the last 2 financial years of at least A\$250,000 a year.

Signature

Name and title of Signatory (block letters please)

Date

\* "Qualified accountant" means a member of a professional body that is approved by ASIC in writing for the purpose of the definition. ASIC has indicated that it will approve any member of:

- (a) The Australian Society of Certified Practising Accountants ("ASPCA"), who is entitled to use the post-nominals "CPA" or "FCPA", and is subject to and complies with the ICAA's continuing professional development requirements;
- (b) The Institute of Chartered Accountants in Australia ("the ICAA"), who is entitled to use the post-nominals of "CA", "ACA" or "FCA", and is subject to and complies with the ICAA's continuing professional education requirements; or
- (c) The National Institute of Accountants ("the NIA"), who is entitled to use the post-nominals "MNIA" or "FNIA", and it subject to and complies with NIA's continuing professional education requirements.

### SECTION 3: INVESTOR'S SIGNATURE

I declare that I have read and understood this form, and that the information set out is true and correct.  
Please sign below:

Signature

Name and title of Signatory (block letters please)

Date

### POST THIS FORM

Please return the completed certificate to the postal address provided below:

*Mail:*

Mainstream Fund Services  
Attention: Registry (Singapore)  
GPO BOX 4968  
Sydney NSW 2001

*Email:*

InvestorServices@mainstreamgroup.com



## DECLARATION AND AUTHORISATION

Please make sure you have completed the section above.

In signing, I/we authorise that these instructions be made on my/our behalf and acknowledge that this form is provided on the basis that the Trustee will affect it according to the terms and conditions of the current IM and the Application Form for the Fund that is current as at the date of this Additional Application Form.

Signature

Name and title of Signatory (block letters please)

Date

Signature

Name and title of Signatory (block letters please)

Date

### POST AND EMAIL THIS FORM TO:

The cheque and accompanying additional application form is to be mailed to:

Mainstream Fund Services  
Attn: Registry (Singapore)  
GPO Box 4968  
Sydney NSW 2001

The withdrawal request form is to be scanned and emailed to:

[investorservices@mainstreamgroup.com](mailto:investorservices@mainstreamgroup.com)

NOTE: No investment will be allocated to an investor until both funds, and a valid application form and identification documents (where applicable), have been received by the Administrator.

# WITHDRAWAL REQUEST FORM – OTIRA GLOBAL EQUITIES FUND

Investor Number

Investor Name

## CONTACT DETAILS

Contact name

Contact number

## FULL OR PARTIAL WITHDRAWAL

Please indicate if you would like to withdraw the total amount of your investment or a partial amount. Please note that a minimum withdrawal amount of A\$5,000 applies.

Full withdrawal

Partial withdrawal, please complete the following information:

Series

Total number of units to be withdrawn

OR

Total amount to be withdrawn

A\$

When making withdrawals from the Fund, you may:

- nominate which series of Units in the Fund you want to withdraw first by completing the table set out above. Different series of Units will have different accrued Performance Fees attached; or
- nominate the total amount you wish to withdraw from the Fund. In which case, Otira Capital will process withdrawal applications on the basis that the oldest Units are withdrawn first.

## DECLARATION AND AUTHORISATION

Please make sure you have completed the 'Full or Partial Withdrawal' section above.

- In signing, I/we authorise that these instructions be made on my/our behalf and acknowledge that this form is provided on the basis that the Responsible Entity will affect it accordingly to the terms and conditions of the applicable current IM.

Signature

Name and title of Signatory (block letters please)

Date

Signature

Name and title of Signatory (block letters please)

Date

**POST AND EMAIL THIS FORM TO:**

The withdrawal request form is to be mailed to:

Mainstream Fund Services  
Attn: Registry (Singapore)  
GPO Box 4968  
Sydney NSW 2001

The withdrawal request form is to be scanned and emailed to:

[Investorservices@mainstreamgroup.com](mailto:Investorservices@mainstreamgroup.com)