

# Application | Individual

## **Pengana Diversified Private Credit Fund- Class A**

Trustee: Pengana Capital Limited (ABN: 30 103 800 568, AFSL: 226566)

### **WHO SHOULD COMPLETE THIS FORM?**

Please use this form if you are a new investor and wish to invest in this fund by making an initial application.

## HOW TO COMPLETE THIS FORM

---

### Step 1 Before completing the application

Before submitting this form or completing the online application, please read and ensure you understand the Information Memorandum (IM) and any product guide and important information for New Zealand investors statement (if relevant).

The law prohibits any person passing this application form on to another person unless it is accompanied by a complete IM. Documents are available [here](#) or if you are unable to access the link or print the document, contact us on +61 2 8524 9900 or [clientservice@pengana.com](mailto:clientservice@pengana.com).

This application form must be accompanied by the IM, with all required documents attached.

---

### Step 2 Completing the application

#### Online applications:

You can skip the paperwork and complete the application online [here](#).

#### Manual applications:

Please complete the attached form, print, use black pen and write in BLOCK letters.

If you make an error do not use correction fluid, instead, cross out your error and initial your changes.

**Note:** Please ensure all fields are completed including those in **sections A and B**.

---

### Step 3 Identification and verification

Please refer to **section 2** and attach the relevant identification documents to this application form.

---

### Step 4 Tell us your foreign tax status

Please complete the **Global Tax Reporting (FATCA/CRS)** information in **section 9**.

---

### Step 5 Sign and send your documents to the below address

Please ensure you sign **section 11** of the form in accordance with the instructions provided.

Please return your forms by post to:

Pengana Capital Group  
GPO Box 804  
MELBOURNE VIC 3001

---

### Step 6 Make your payment

Please refer to **section 4** of the application form and follow the instructions on how to pay the application amount.

Your application cannot be processed until all relevant identification documents and cleared funds are received.

---

## IMPORTANT INFORMATION

- Please ensure all relevant fields are completed. If you do not complete all relevant sections your application may be rejected and returned to you for completion, resulting in a delay in processing your application
- If you have any questions as you complete this form, please refer to the FAQs at the end of this form, or contact us on +61 2 8524 9900 or [clientservice@pengana.com](mailto:clientservice@pengana.com).

## HOW DO YOU QUALIFY AS A WHOLESALE INVESTOR?

To qualify as a wholesale investor, please provide one of the following:

1. An accountant's certificate certifying that the proposed Unitholder has:
  - net assets of at least A\$2.5million, or
  - gross income for each of the last two financial years of at least \$250,000.

Two forms of accountant's certificates that are commonly used may be found on the following pages – the standard format and the extended wealth format (which should be used if the investment is to be made through the investor's trust or superannuation fund).

OR

2. Proof that the proposed Unitholder:
  - is a trustee of a superannuation fund within the meaning of the Superannuation Industry (Supervision) Act 1993 with net assets of at least A\$10 million (a certified copy of the trust deed and recent financial accounts to confirm that the fund holds at least A\$10 million),
  - controls at least A\$10 million including any amount held by an associate or under a trust that the investing entity manages (recent financial accounts to confirm that the Unitholder controls at least A\$10 million),
  - is a manufacturer and employs 100 or more people, or the investing entity is not a manufacturer and employs 20 or more people (signed confirmation by a director of the company to this effect),
  - holds an Australian financial services licence (licence number), or
  - is a 'professional investor' as otherwise defined in the Corporations Act.

Please contact Pengana if you need us to assist you in providing the appropriate documentation to certify that you are a Wholesale Investor.

**Note:** The certificate should be provided on an Accountant's letterhead provided no earlier than 2 years before the offer is made. Please contact Pengana if you require a word version of this certificate.

### CERTIFICATE UNDER SECTION 761G(7)(C) OF THE CORPORATIONS ACT - 'WEALTH TEST' CERTIFICATE FROM ACCOUNTANT PRACTICING IN AUSTRALIA

TO: Pengana Capital Limited  
Suite 1, Level 27  
Governor Phillip Tower  
1 Farrer Place  
Sydney, NSW 2000

I, of \_\_\_\_\_ certify as follows:

1. I am a qualified accountant for the purposes of the Corporations Act, being a member of the \*Institute of Chartered Accountants in Australia/Australian Society of Certified Practising Accountants/ National Institute of Accountants and am subject to, and comply with, that body's continuing education requirements.  
[\*Delete where not applicable]  
My membership designation from this professional body is \_\_\_\_\_  
I comply with this professional body's continuing professional education requirements.
2. I am giving this certificate in accordance with section 761G(7)(c) of the Corporations Act at the request of, and with reference to, \_\_\_\_\_ (Investor) and acknowledge that this certificate will be relied upon to make offers of financial products to the Investor.
3. Having reviewed the financial position of the Investor:
  - a. the Investor has net assets of at least A\$2.5 million; and / or
  - b. the Investor had a gross income for each of the last 2 financial years of at least A\$250,000 a year.[Delete (a) or (b) above if not applicable]
4. The financial service or product will not be used in connection with a business by the Investor.

Signature

Please print full name

Date (DD/MM/YYYY)

**Note:** The certificate should be provided on an Accountant's letterhead provided no earlier than 2 years before the offer is made. Please contact Pengana if you require a word version of this certificate.

**CERTIFICATE UNDER SECTION 761G(7)(CA) OF THE CORPORATIONS ACT AND REGULATION 7.6.02AB - EXTENDED WEALTH TEST  
CERTIFICATE FROM ACCOUNTANT PRACTICING IN AUSTRALIA**

TO: Pengana Capital Limited  
Suite 1, Level 27  
Governor Phillip Tower  
1 Farrer Place  
Sydney, NSW 2000

A. Name of company or trust i.e. name of investor. If investor is a Trustee, then insert the full name e.g. ABC Pty Ltd ATF XYZ trust

Address of Investor

Street Number & Name

Suburb

State

Postcode

Country

B. Name of person or entity who controls the company or trust which is the investor.

I certify that the [person or entity] whose details are set out immediately above at point B:

- has net assets of at least \$2.5million; or
- has a gross income for each of the last 2 financial years of at least \$250,000.

In addition, I certify that the [person or entity] whose details are set out above at point B, controls (within the meaning of section 50AA of the Corporations Act 2001) the company or trust (where applicable) whose details are set out above at point A.

I belong to [name of my professional body\*]

My membership designation from this professional body is

I comply with this body's continuing professional education requirements.

Signature of Accountant

Date certificate issued (DD/MM/YYYY)

\* NOTE: A qualified accountant in Australia must belong to one of the following professional bodies at the declared membership classification:

PROFESSIONAL BODY	DECLARED MEMBERSHIP CLASSIFICATIONS
The Institute of Chartered Accountants in Australia	CA, ACA and FCA
CPA Australia	CPA and FCPA
National Institute of Accountants in Australia	PNA, FPNA, MINA and FINA

## Section A: Investor details

If you are an existing investor, please provide your account number

☐ I/We confirm there are no changes to our identification documents previously provided and that these remain current and valid.

☐ I/We confirm there are no changes to the information in our previous application provided and that it remains current and valid.

What is the full legal name of the individual or sole trader that will hold title of the units?

Full name of account designation

Now complete **section B**.

## Section B: Are you investing using funds borrowed under a margin loan?

☐ No - go to **section 1**. ☐ Yes - if yes, please complete the details below

Name of margin lender

Name of borrower

Borrower's TFN

Loan number

If the person who will hold legal title to the units will be the borrower granting Power of Attorney to the margin lender or its nominee, please complete this form as an individual.

## 1. INDIVIDUALS & SOLE TRADERS

### 1.1 Investor details

Complete all details below in respect of the individual(s) or sole trader(s) that will hold legal title to the units.

#### Investor 1 - Personal details

Title

Given name(s)

Surname

Business name (if sole trader)

ABN (if any, for sole trader)

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

Occupation

**Residential address** (or, if you are a sole trader, principal place of business) - (A PO Box/RMB/Locked Bag is not acceptable)

Property/building name (if applicable)

Unit

Street number

Street name

Suburb

State

Postcode

Country

**Postal address** (if different to residential address) - (A PO Box/RMB/Locked Bag is not acceptable)

Property/building name (if applicable)

Unit  Street number  Street name

Suburb  State  Postcode  Country

**Contact details**

Home number (including country and area code)  Mobile number (including country code)

Email

This email address is the default address for all investor correspondence (such as transaction confirmations, statements, reports and other materials).

**Tax details - Australian residents**

If you do not provide your TFN or reason for exemption, you will be taxed at the highest marginal tax rate plus the Medicare levy.

TFN  Reason for exemption

**Investor 2 - Personal details** (only if there is more than one investor)

Title  Given name(s)  Surname

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

Occupation

Please provide your ABN (if any)

**Residential address** - (A PO Box/RMB/Locked Bag is not acceptable)

Property/building name (if applicable)

Unit  Street number  Street name

Suburb  State  Postcode  Country

**Postal address (if different to residential address)** - (A PO Box/RMB/Locked Bag is not acceptable)

Property/building name (if applicable)

Unit  Street number  Street name

Suburb  State  Postcode  Country

## Contact details

Home number (including country and area code)

Mobile number (including country code)

Email

All correspondence will be sent to the email address provided by **Investor 1**.

## Tax details - Australian residents

If you are an Australian resident for tax purposes, please provide your tax file number (TFN) or a reason for exemption. If you are an Australian resident and do not provide your TFN, or a reason for exemption, you will be taxed at the highest marginal tax rate plus the Medicare levy.

TFN

Reason for exemption

If there are more than two individuals, please complete a separate application form signed by each additional applicant and submit it together with this form.

If clarification is require please contact us on +61 2 8524 9900 or [clientservice@pengana.com](mailto:clientservice@pengana.com).

## 2. VERIFICATION PROCEDURE

If you cannot meet the requirements of **option A**, please follow the instructions in **option B**.

### OPTION A

**Provide a certified copy of one of the following:**

<b>Current Australian driver's licence</b> containing a photo of the person.	<input type="checkbox"/>
<b>Current Australian passport</b> (or an Australian passport that has expired within the preceding 2 years in acceptable).	<input type="checkbox"/>
<b>Current National Proof of Age card with photo</b> for the purpose of proving a person's age containing a photo of the person.	<input type="checkbox"/>
<b>Current National identity card</b> issued by a foreign government containing a photo and signature of the person.	<input type="checkbox"/>
<b>Current foreign driver's licence</b> with photo, accompanied by an English translation prepared by an accredited translator.	<input type="checkbox"/>
<b>Current foreign passport</b> containing a photo and signature accompanied by an English translation prepared by an accredited translator.	<input type="checkbox"/>

### OPTION B

**If you can't provide any document from option A, then please provide a certified copy of one document from group 1 and one document from group 2.**

#### GROUP 1

<b>Birth certificate or birth extract</b> issued by an Australian State or Territory.	<input type="checkbox"/>
<b>Foreign birth certificate</b> issued by a foreign government accompanied by an English translation prepared by an accredited translator.	<input type="checkbox"/>
<b>Australian Government issued citizenship certificate.</b>	<input type="checkbox"/>
<b>Current concession card or Health Care card</b> (issued by Centrelink). Please scan the front and the back.	<input type="checkbox"/>

#### GROUP 2

<b>Commonwealth, State or Territory Government</b> within the preceding 12 months and recording the provision of financial benefits.	<input type="checkbox"/>
<b>Australian Taxation Office</b> within the preceding 12 months and recording the debt payable to or by the individual by or to (respectively) the ATO.	<input type="checkbox"/>

Local Government or utilities provider within the preceding 3 months and recording the provision of services.

☐

\* Please see the FAQs at the end of this form for the meaning of certified copy.

### 3. INVESTMENT & DISTRIBUTION INSTRUCTIONS

Please specify your initial application amount.

Please also indicate your distribution choice below. If you do not make an election, distributions will be reinvested.

Fund names	Investment amount AUD\$	Distribution option (indicate (X) one option per fund)	
		Pay to my Australian Bank A/C	Reinvest (Default)
Pengana Diversified Private Credit Fund- Class A		<input type="checkbox"/>	<input type="checkbox"/>

**Note:** The minimum investment is \$500,000 for this fund. However, we may waive or vary the investment minimums. Please nominate one distribution option for each fund you are investing in. If no selection is made, distributions will be automatically re-invested.

#### 3.1 Source of funds (required)

Please indicate the source & origin of funds being invested

Savings	<input type="checkbox"/>
Superannuation contributions	<input type="checkbox"/>
Income from employment - regular and/or bonus	<input type="checkbox"/>
Normal course of business	<input type="checkbox"/>
Investment	<input type="checkbox"/>
Donation/gift	<input type="checkbox"/>
Inheritance	<input type="checkbox"/>
Sale of assets (e.g. shares, property)	<input type="checkbox"/>
Other <input type="text"/>	<input type="checkbox"/>



#### 4. PAYMENT OF APPLICATION AMOUNT

Select your payment method and complete the relevant section if applicable. All payments must be made in AUD.

☐ EFT ☐ Direct Debit ☐ BPAY® ☐ Cheque

EFT	Electronic Funds Transfer
Account name:	Pengana Capital Ltd Applications Trust Account
BSB:	083-001
Account number:	468 834 086
Your reference:	please use the full name of the investor for new investment and investor number for existing investment

#### Direct debit authority - Australian bank accounts only

You can allow us to deduct your application amount directly from your nominated financial institution account by completing the direct debit authority below. This debit will be made through the Bulk Electronic Clearing System (BECS) from your account held at the financial institution you have nominated below.

By completing this section, you have understood and agreed to the terms and conditions governing the debit arrangements between you and Pengana Capital Ltd, as set out in this Request and in your Direct Debit Request Service Agreement, a copy of which is available on [www.pengana.com](http://www.pengana.com).

Financial institution name	Branch name (if applicable)
<input type="text"/>	<input type="text"/>
Account name	<input type="text"/>
BSB number	Account number
<input type="text"/>	<input type="text"/>

I/We request and authorise Pengana Capital Ltd ABN 30 103 800 568 (User ID 502729) to arrange, through its own financial institution, a debit to the nominated account as deemed payable by Pengana.

Signature of primary account holder

Please print full name

Date (DD/MM/YYYY)

 /  / 

Signature of joint account holder (if applicable)

Please print full name

Date (DD/MM/YYYY)

 /  /

## BPAY® - Telephone & internet banking

You can make your payment using telephone or internet banking.

You will need to quote the biller code and your account number (for reference) when making this payment.

If this is a new investment, we will notify you of your account number once this is available. Please make your payment within 14 days of this notification.

Contact your bank or financial institution to make this payment from your cheque, savings, debit or transaction account.

More info [www.bpay.com.au](http://www.bpay.com.au) ®Registered to BPAY Pty Ltd ABN 69 079 137 518

Fund name	BPAY® details
Pengana Diversified Private Credit Fund- Class A	Biller code 419002 Reference number [Account Number]

## Cheque

Please note we only accept Australian cheques. Please make your cheque payable to 'Pengana Capital Ltd Applications Trust Account'. Attach the cheque with your original application forms when posting. Please cross and write 'non-negotiable' on the cheque.

## 5. BANK ACCOUNT DETAILS

### Australian bank account details

Please provide your bank account details if you have selected to take your distribution in cash or wish to provide these details for future redemptions. We will only pay cash proceeds to a bank account in the name(s) of the investor(s). We will not make any payments into third party bank accounts.

Financial institution name

Branch name (if applicable)

Account name

BSB number

Account number

Please complete if you wish to provide foreign bank account details for future redemptions. We will only pay cash redemption proceeds to a bank account in the name(s) of the investor(s). We will not make any payments into third party bank accounts.

Please note that we do not pay cash distribution to foreign bank accounts. You must provide an Australian bank details in the above section if you elect to receive distribution in cash.

### Foreign bank account details

Financial institution name

Financial institution address

Account number

Account name

SWIFT/BIC

ABA/FED (US)

IBAN (Europe)

Due to the complexity of foreign bank accounts, we may need to contact you for more information.

## 6. COMMUNICATION

### Automatic online account access

Online access enables you to view details of your investments (account balance, investment details and account statements). We will send you the necessary registration details by post once your application is processed.

### Annual report options

The annual financial reports of the fund are available free on our website. If you would like to receive a copy by post or email, please contact us on +61 2 8524 9900 or [clientservice@pengana.com](mailto:clientservice@pengana.com). (This refers to annual reports only. This will not affect communication instructions regarding general correspondence for your fund).

### Opt out of fund updates

☐ You may receive information from us via mail, telephone, email or other electronic messaging service relating to market commentary, services or information that may be of interest to you. By providing us with your contact details you consent to being contacted by these methods for these purposes. Please indicate if you **do not** wish to receive updates and marketing information from us.

## 7. FINANCIAL ADVISER DETAILS

Use this section to tell us about your financial adviser. If you change your financial adviser, it's important to let us know in a timely way. If you would like your financial adviser to receive copies of your statements by email, please enter their email address below.

Adviser email address

### Operating your account

Do you want your financial adviser to be able to operate your account?

If the answer is "Yes", your financial adviser must provide ID and verification documentation as per section 8.3. If you want to give your adviser a view only access to the account, please select "No".

☐ No

☐ Yes

In general, an appointed financial adviser can do everything you can do with your investment, except appoint another person to operate your account. It is important to tell us promptly if you no longer wish your financial adviser to operate your account, or if your financial adviser changes - we will and OneVue will keep accepting their instructions until you or they advise us in writing that the appointment has terminated.

We may suspend or terminate their appointment for any reason considered reasonable, and may change the terms on which they operate your account.

You indemnify us from any loss you or we suffer as a result of the actions of your appointed financial adviser, and agree to ratify their actions if we ask.

**Notice to financial adviser:** by completing this section of the application form, you are confirming that you hold a current Australian Financial Services Licence (AFSL), or are otherwise authorised to advise on and arrange this product.

### Details

AFSL name

AFSL number

Adviser name

Authorised representative licence number

ABN

## Address

Property/building name						
Unit	Street number	Street name				
Suburb	State	Postcode	Country			
Phone	Mobile					

## Performance of investor identification & verification procedures

Please indicate below whether client identification and verification procedures have been performed.

- ☐ No - I have not performed the applicable customer identification procedure on this investor.
- ☐ Yes - I have completed the applicable customer identification procedure on this investor.

## Financial adviser declaration

**Notice to financial adviser:** please note that reliance on the KYC performed by the financial advisor is only acceptable if all the criteria below is met.

- ☐ I hold an AFSL in my own name or have been appointed as an authorised representative by the licensee.
- ☐ I am a reporting entity for AML/CTF purposes.
- ☐ The issuer has reasonable grounds to believe that it is appropriate to rely on the KYC procedure I have undertaken.
- ☐ I have attached the KYC documents to this form.

AFSL full legal entity name  AFSL number

Please print full name

Signature

## 8. AUTHORISED REPRESENTATIVE OF INVESTORS

Please complete this section if you wish to appoint an individual or individuals to act on your behalf in relation to your investment in the fund (this may include a margin lender or their nominee).

### 8.1 Agent details

#### Agent 1

Title	Given name(s)	Surname
Name of company by whom the agent is employed (if any)		Phone

Email

Signature

**Agent 2**

Title

Given name(s)

Surname

Name of company by whom the agent is employed (if any)

Phone

Email

Signature

If you wish to appoint more than two agents, please complete the details on a separate sheet and attach to this application form.

**8.2 How agents may act in relation to the account?**

Tick applicable

Each agent listed above may provide instructions in relation to the investment individually without the consent of the other

☐

All agents must act jointly to provide instructions in relation to the investment

☐

Other arrangement - please provide details

☐

**8.3 Verification procedure for authorised representatives who are individuals**

For each authorised representative, please provide verification documents in accordance with the verification procedure in section 2. In addition, please provide evidence of each authorised representative's authority to act on behalf of the investor. Please tick the document(s) you have provided.

**Verification documents - mandatory**

A certified copy of ID as per section 2

☐

**Authorised representative's authority - one of the following**

Certified copy of the authorising document (e.g. POA); or

☐

A certified copy of a guardianship order; or

☐

Other arrangement - please provide details below

☐

☐ I confirm that the document authorising each authorised representative is still valid and has not been revoked

## 9. GLOBAL TAX REPORTING REQUIREMENTS (FATCA/CRS)

### Why you need to complete this section?

The Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) are regulatory requirements that aim to deter tax evasion by US and other foreign taxpayers. The Australian and a number of other foreign Governments have an agreement which requires us to obtain certain information from investors, including taxation information. You may be liable to a penalty if you provide information that is false or misleading that is material. We may decide not to open an account without first receiving the required information. For more information, visit [www.ato.gov.au](http://www.ato.gov.au).

If you are unsure of any of the answers, please contact a legal or accounting professional.

### 9.1 Tax Residence - Individual/Sole Trader

#### HELP

#### Tell me about tax residence

You can be a resident of more than one country for tax purposes. Whether you are tax resident of a particular country for tax purposes is often based on the amount of time you spend in a country and the location of your residence and/or place of work. If you pay tax or have a tax liability somewhere, you are probably a tax resident there. Dual citizenship often brings dual tax residency. It depends on the country. For the US, tax residency can be as a result of citizenship or residency for tax purposes.

If you are unsure, ask someone who knows, usually your accountant.

#### 9.1.1 Individual - Investor 1

#### Are you a US resident for tax purposes?

☐

No

☐

Yes - please tell us your TIN.

#### HELP

#### What is a TIN?

This is short for Taxpayer Identification Number, an identification number issued or used by tax authorities. In Australia, the equivalent is the tax file number (TFN). For the US, it could for example be a US Social Security Number, a US Individual Taxpayer Identification Number or a US Employer Identification Number. In other countries, it may have a different name.

#### Are you a resident of any other country for tax purposes?

Other than the US or Australia

☐

No

☐

Yes - please tell us which ones, using the following table.

#### HELP

#### No TIN? Reasons we accept are:

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

Reason B: The entity/individual has not been issued with a TIN

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

	Country or jurisdiction of tax residency	TIN	No TIN? Which reason? If Reason B has been selected please provide an explanation. See above HELP box.
1			
2			
3			
4			

### 9.1.2 Individual - Investor 2

Are you a US resident for tax purposes?

☐ No ☐ Yes - please tell us your TIN.

#### HELP

This is short for Taxpayer Identification Number, an identification number issued or used by tax authorities. In Australia, the equivalent is the tax file number (TFN). For the US, it could for example be a US Social Security Number, a US Individual Taxpayer Identification Number or a US Employer Identification Number. In other countries, it may have a different name.

Are you a resident of any other country for tax purposes?

Other than the US or Australia

☐ No ☐ Yes - please tell us which ones, using the following table.

#### HELP

No TIN? Reasons we accept are:

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

Reason B: The entity/individual has not been issued with a TIN

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

	Country or jurisdiction of tax residency	TIN	No TIN? Which reason? If Reason B has been selected please provide an explanation. See above HELP box.
1			
2			
3			
4			

## 10. DECLARATIONS & ACKNOWLEDGMENTS

Please read the declarations below before signing this form. The required signature(s) are detailed at the bottom of this form.

When you apply to invest, you (the applicant) are telling us:

- to the best of your knowledge, all details in this application (including all related documents provided) are true, correct and complete you have received, read and understood the current IM. You agree to be bound by the constitution of the fund and the IM as supplemented, replaced or re-issued from time to time
- you are not bankrupt or a minor, and are authorised to sign this form
- you have received and accepted this offer in Australia
- you have read and understood the information relating to privacy in the IM
- you consent to the issuer disclosing your personal information to any of the issuer's service providers, in relation to any identification and verification that the issuer is required to undertake on me, as required under the AML/CTF Act. This shall include any information
  - o required by any third party document verification service provider, and/or
  - o provided to any third party document verification service provider
- you authorise us to apply the TFN or ABN included on this application form and authorise it to be applied to all further applications and redemptions in respect of any of our funds.

By applying to invest you also acknowledge that:

- monies deposited are not associated with crime, money laundering and/or financing terrorism. We may decide to delay or refuse any request or transaction, including by suspending the issue or redemption of units if we are concerned that the request or transaction may breach any obligation of, or cause us to commit or participate in an offence under any AML/CTF and Sanctions Law and FATCA/CRS obligations. We will incur no liability to you if we do so
- we may take other action we reasonably believe is necessary to comply with AML/CTF and Sanctions Law and FATCA/CRS obligations, including disclosing any information held about you to any of our related bodies corporate or service providers whether in Australia or outside Australia, or to any relevant Australian or foreign regulator, and
- we collect additional information about you from time to time, from you or from third parties, for the purposes of satisfying AML/CTF and Sanctions Law and FATCA/CRS obligations, and that any such information may be used and disclosed as described in the Pengana Capital privacy policy available online at <https://pengana.com/privacy/> or by contacting us.

### Important information

- nothing in this form is advice and any help provided is general guidance only. Seek professional advice to be sure of your answers
- it is a condition of investing that you keep your details (including tax detail) with us, up to date. We recommend that you review this tax information form at the end of the financial year and update your details if required. You must contact us when you learn new things about the matters in this form. Failing to update us can have tax and other consequences. You can update us by requesting and completing this form and emailing, faxing or posting it to our Administrator.

By completing and signing this form:

- you represent having read and understood this form
- you represent this form is complete and accurate
- if you have applied for but not received your TIN or GIIN, you undertake to inform us within 30 days of receiving it
- you undertake that if information in this form changes, you will tell us within 30 days
- you declare that to the best of my knowledge and belief the information provided in the Global Tax Reporting section is true and correct
- you agree to notify Pengana Capital of any changes to my tax residency or that of any beneficial owners or controlling person.



## 11. SIGNATURE(S)

### Investor 1

---

Signature

Date (DD/MM/YYYY)

/ / 

Given name(s)

Surname

### Investor 2

---

Signature

Date (DD/MM/YYYY)

/ / 

Given name(s)

Surname

### If signed under Power of Attorney

---

Attorneys must attach a certified copy of the Power of Attorney. The Attorney hereby certifies that he/she has not received notice of any limitation or revocation of his/her Power of Attorney and is also authorised to sign this form. Power of Attorney documents cannot be accepted by fax or email.

<b>Translating documents by an accredited translator</b>	<p>In Australia an accredited translator means a professional translator accredited by the National Accreditation Authority for Translators and Interpreters at or above professional level.</p> <ul style="list-style-type: none"> <li>• NAATI (<a href="https://www.naati.com.au/">https://www.naati.com.au/</a>)</li> </ul> <p>In an overseas country, an accredited translator is a professional translator accredited by a NAATI equivalent authority. For these, escalate to the AML Compliance Officer for assistance.</p>
<b>Getting your copies certified</b>	Any document(s) requiring to be certified for verification purposes must be certified by an eligible person to be a true copy of the original document. Documents must be either certified on all pages or certified on the front page with a clear reference to the number of subsequent pages that are included.
<b>Example of certification</b>	<p>I certify that this is a true and correct copy of the original document</p> <p>Signature of Certifier</p> <p>Name of Certifier</p> <p>Capacity of certifier – e.g. Justice of the Peace</p> <p>Date of certification (DD/MM/YYYY)</p>
<b>List of occupations that can certify (from the Statutory Declaration Regulations 2018)</b>	<ul style="list-style-type: none"> <li>• Architect</li> <li>• Chiropractor</li> <li>• Dentist</li> <li>• Financial adviser or financial planner</li> <li>• Legal practitioner</li> <li>• Medical practitioner</li> <li>• Midwife</li> <li>• Migration agent registered under Division 3 of Part 3 of the Migration Act 1958</li> <li>• Nurse</li> <li>• Occupational therapist</li> <li>• Optometrist</li> <li>• Patent attorney</li> <li>• Pharmacist</li> <li>• Physiotherapist</li> <li>• Psychologist</li> <li>• Trade marks attorney</li> <li>• Veterinary surgeon.</li> </ul>
<b>List of persons who can certify</b>	<ul style="list-style-type: none"> <li>• 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)</li> <li>• a judge of a court</li> <li>• a magistrate</li> <li>• a chief executive officer of a Commonwealth court</li> <li>• a registrar or deputy registrar of a court</li> <li>• a Justice of the Peace</li> <li>• a notary public (for the purposes of the Statutory Declaration Regulations 2018)</li> <li>• a police officer</li> <li>• an agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public</li> <li>• 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</li> <li>• an Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955)</li> <li>• an officer with 2 or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 2018)</li> <li>• a finance company officer with 2 or more continuous years of service with one or more financial companies (for the purposes of the Statutory Declaration Regulations 2018)</li> <li>• an officer with, 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</li> <li>• a member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with 2 or more years of continuous membership.</li> </ul>

# Application | SMSF

## **Pengana Diversified Private Credit Fund- Class A**

Trustee: Pengana Capital Limited (ABN: 30 103 800 568, AFSL: 226566)

### **WHO SHOULD COMPLETE THIS FORM?**

Please use this form if you are a new investor and wish to invest in this fund by making an initial application.

## HOW TO COMPLETE THIS FORM

---

### Step 1 Before completing the application

Before submitting this form or completing the online application, please read and ensure you understand the Information Memorandum (IM) and any product guide and important information for New Zealand investors statement (if relevant).

The law prohibits any person passing this application form on to another person unless it is accompanied by a complete IM. Statements are available [here](#) or if you are unable to access the link or print the document, contact us on +61 2 8524 9900 or [clientservice@pengana.com](mailto:clientservice@pengana.com).

This application form must be accompanied by the IM, with all required documents attached.

---

### Step 2 Completing the application

#### Online applications:

You can skip the paperwork and complete the application online [here](#).

#### Manual applications:

Please complete the attached form, print, use black pen and write in BLOCK letters.

If you make an error do not use correction fluid, instead, cross out your error and initial your changes.

**Note:** Please ensure all fields are completed including those in **sections A and B**.

---

### Step 3 Identification and verification

Please refer to **section 2.3** and attach the relevant identification documents to this application form.

---

### Step 4 Tell us your foreign tax status

Please complete the **Global Tax Reporting (FATCA/CRS)** information in **section 9**.

---

### Step 5 Sign and send your documents to the below address

Please ensure you sign **section 11** of the form in accordance with the instructions provided.

Please return your forms by post to:

Pengana Capital Group  
GPO Box 804  
MELBOURNE VIC 3001

---

### Step 6 Make your payment

Please refer to **section 4** of the application form and follow the instructions on how to pay the application amount.

Your application cannot be processed until all relevant identification documents and cleared funds are received.

---

## IMPORTANT INFORMATION

- Please ensure all relevant fields are completed. If you do not complete all relevant sections your application may be rejected and returned to you for completion, resulting in a delay in processing your application
- If you have any questions as you complete this form, please refer to the FAQs at the end of this form, or contact us on +61 2 8524 9900 or [clientservice@pengana.com](mailto:clientservice@pengana.com).

## HOW DO YOU QUALIFY AS A WHOLESALE INVESTOR?

To qualify as a wholesale investor, please provide one of the following:

1. An accountant's certificate certifying that the proposed Unitholder has:
  - net assets of at least A\$2.5million, or
  - gross income for each of the last two financial years of at least \$250,000.

Two forms of accountant's certificates that are commonly used may be found on the following pages - the standard format and the extended wealth format (which should be used if the investment is to be made through the investor's trust or superannuation fund).

OR

2. Proof that the proposed Unitholder:
  - is a trustee of a superannuation fund within the meaning of the Superannuation Industry (Supervision) Act 1993 with net assets of at least A\$10 million (a certified copy of the trust deed and recent financial accounts to confirm that the fund holds at least A\$10 million),
  - controls at least A\$10 million including any amount held by an associate or under a trust that the investing entity manages (recent financial accounts to confirm that the Unitholder controls at least A\$10 million),
  - is a manufacturer and employs 100 or more people, or the investing entity is not a manufacturer and employs 20 or more people (signed confirmation by a director of the company to this effect),
  - holds an Australian financial services licence (licence number), or
  - is a 'professional investor' as otherwise defined in the Corporations Act.

Please contact Pengana if you need us to assist you in providing the appropriate documentation to certify that you are a Wholesale Investor.

**Note:** The certificate should be provided on an Accountant's letterhead provided no earlier than 2 years before the offer is made. Please contact Pengana if you require a word version of this certificate.

### CERTIFICATE UNDER SECTION 761G(7)(C) OF THE CORPORATIONS ACT - 'WEALTH TEST' CERTIFICATE FROM ACCOUNTANT PRACTICING IN AUSTRALIA

TO: Pengana Capital Limited  
Suite 1, Level 27  
Governor Phillip Tower  
1 Farrer Place  
Sydney, NSW 2000

I, of \_\_\_\_\_ certify as follows:

1. I am a qualified accountant for the purposes of the Corporations Act, being a member of the \*Institute of Chartered Accountants in Australia/Australian Society of Certified Practising Accountants/ National Institute of Accountants and am subject to, and comply with, that body's continuing education requirements.  
[\*Delete where not applicable]  
My membership designation from this professional body is \_\_\_\_\_  
I comply with this professional body's continuing professional education requirements.
2. I am giving this certificate in accordance with section 761G(7)(c) of the Corporations Act at the request of, and with reference to, \_\_\_\_\_ (Investor) and acknowledge that this certificate will be relied upon to make offers of financial products to the Investor.
3. Having reviewed the financial position of the Investor:
  - a. the Investor has net assets of at least A\$2.5 million; and / or
  - b. the Investor had a gross income for each of the last 2 financial years of at least A\$250,000 a year.[Delete (a) or (b) above if not applicable]
4. The financial service or product will not be used in connection with a business by the Investor.

Signature

Please print full name

Date (DD/MM/YYYY)

**Note:** The certificate should be provided on an Accountant's letterhead provided no earlier than 2 years before the offer is made. Please contact Pengana if you require a word version of this certificate.

**CERTIFICATE UNDER SECTION 761G(7)(CA) OF THE CORPORATIONS ACT AND REGULATION 7.6.02AB - EXTENDED WEALTH TEST  
CERTIFICATE FROM ACCOUNTANT PRACTICING IN AUSTRALIA**

TO: Pengana Capital Limited  
Suite 1, Level 27  
Governor Phillip Tower  
1 Farrer Place  
Sydney, NSW 2000

A. Name of company or trust i.e. name of investor. If investor is a Trustee, then insert the full name e.g. ABC Pty Ltd ATF XYZ trust

Address of Investor

Street Number & Name

Suburb

State

Postcode

Country

B. Name of person or entity who controls the company or trust which is the investor.

I certify that the [person or entity] whose details are set out immediately above at point B:

- has net assets of at least \$2.5million; or
- has a gross income for each of the last 2 financial years of at least \$250,000.

In addition, I certify that the [person or entity] whose details are set out above at point B, controls (within the meaning of section 50AA of the Corporations Act 2001) the company or trust (where applicable) whose details are set out above at point A.

I belong to [name of my professional body\*]

My membership designation from this professional body is

I comply with this body's continuing professional education requirements.

Signature of Accountant

Date certificate issued (DD/MM/YYYY)

\* NOTE: A qualified accountant in Australia must belong to one of the following professional bodies at the declared membership classification:

PROFESSIONAL BODY	DECLARED MEMBERSHIP CLASSIFICATIONS
The Institute of Chartered Accountants in Australia	CA, ACA and FCA
CPA Australia	CPA and FCPA
National Institute of Accountants in Australia	PNA, FPNA, MINA and FINA

## Section A: Investor details

If you are an existing investor, please provide your account number

☐ I/We confirm there are no changes to our identification documents previously provided and that these remain current and valid.

☐ I/We confirm there are no changes to the information in our previous application provided and that it remains current and valid.

What is the full legal name of the trust or superannuation fund that will hold title of the units?

Full name of account designation

Now complete **section B**.

## Section B: Are you investing using funds borrowed under a margin loan?

☐ No - go to **section 1**. ☐ Yes - if yes, please complete the details below

Name of margin lender

Name of borrower

Borrower's TFN

Loan number

If the person who will hold legal title to the units will be the borrower granting Power of Attorney to the margin lender or its nominee, please complete this form as an individual.

### 1. TRUST/FUND DETAILS

Full name of trust/superannuation fund

Full business name (if any) of the trustee in respect of the trust/superannuation fund

Country of establishment

Tax file number or exemption code

Australian Business Number (if any)

### 2. TRUSTEE DETAILS

Are you?

☐ Individual trustee ☐ Corporate trustee (complete **section 2.1 & 2.2**)

Individual trustee 1

Title

Given name(s)

Surname

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

**Residential address - (A PO Box/RMB/Locked Bag is not acceptable)**

Unit	Street number	Street name			
<input type="text"/>	<input type="text"/>	<input type="text"/>			
Suburb		State	Postcode	Country	
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	
Phone		Mobile			
<input type="text"/>		<input type="text"/>			
Email					
<input type="text"/>					

**Individual trustee 2**

Title	Given name(s)	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>
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"/>		

**Residential address - (A PO Box/RMB/Locked Bag is not acceptable)**

Unit	Street number	Street name			
<input type="text"/>	<input type="text"/>	<input type="text"/>			
Suburb		State	Postcode	Country	
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	
Phone		Mobile			
<input type="text"/>		<input type="text"/>			
Email					
<input type="text"/>					

**2.1 Corporate trustee details**

Full business name as registered by ASIC	ACN
<input type="text"/>	<input type="text"/>

**Registered Office Address - (PO Box is not acceptable)**

Unit	Street number	Street name			
<input type="text"/>	<input type="text"/>	<input type="text"/>			
Suburb		State	Postcode	Country	
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	

**Principal place of business (if any) (PO Box is not acceptable)**

Unit	Street number	Street name			
<input type="text"/>	<input type="text"/>	<input type="text"/>			
Suburb		State	Postcode	Country	
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	

**Contact Details**

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



## 2.2 What type of company is the corporate trustee?

**Public** (companies whose name does NOT include the word Pty or proprietary; generally listed companies),  
proceed to **section 2.3**.

☐

**Proprietary** (companies whose name ends with Proprietary Ltd or Pty Ltd; also known as private companies),  
proceed to **section 2.3**.

☐

Please complete the director details below if you are an Australian proprietary company. Do not complete for public companies.

### Directors details

How many directors are there?

Please provide below the full name of all the directors. If there are more than four directors, please complete the details on a separate sheet and attach to this application form.

#### Director 1

Title

Given name(s)

Surname

#### Director 2

Title

Given name(s)

Surname

#### Director 3

Title

Given name(s)

Surname

#### Director 4

Title

Given name(s)

Surname

## 2.3 Verification Procedure

A search of the ATO website showing that the trustee is a trustee of a SMSF registered with the ATO.

(This may be accessed at <https://superfundlookup.gov.au/>).

## 3. INVESTMENT AND DISTRIBUTION INSTRUCTIONS

Please specify your initial application amount.

Please also indicate your distribution choice below. If you do not make an election, distributions will be reinvested.

Fund names	Investment amount AUD\$	Distribution option (indicate (X) one option per fund)	
		Pay to my Australian Bank A/C	Reinvest (Default)
Pengana Diversified Private Credit Fund- Class A	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Note:** The minimum investment is \$500,000 for this fund. However, we may waive or vary the investment minimums. Please nominate one distribution option for each fund you are investing in. If no selection is made, distributions will be automatically re-invested.

### 3.1 Source of funds (required)

Please indicate the source & origin of funds being invested

Savings	<input type="checkbox"/>
Superannuation contributions	<input type="checkbox"/>
Income from employment - regular and/or bonus	<input type="checkbox"/>
Normal course of business	<input type="checkbox"/>
Investment	<input type="checkbox"/>
Donation/gift	<input type="checkbox"/>
Inheritance	<input type="checkbox"/>
Sale of assets (e.g. shares, property)	<input type="checkbox"/>
Other <input type="text"/>	<input type="checkbox"/>

### 4. PAYMENT OF APPLICATION AMOUNT

Select your payment method and complete the relevant section if applicable. All payments must be made in AUD.

<input type="checkbox"/> EFT	<input type="checkbox"/> Direct Debit	<input type="checkbox"/> BPAY®	<input type="checkbox"/> Cheque
------------------------------	---------------------------------------	--------------------------------	---------------------------------

<b>EFT</b>	<b>Electronic Funds Transfer</b>
Account name:	Pengana Capital Ltd Applications Trust Account
BSB:	083-001
Account number:	468 834 086
Your reference:	please use the full name of the investor for new investment and investor number for existing investment

#### Direct debit authority - Australian bank accounts only

You can allow us to deduct your application amount directly from your nominated financial institution account by completing the direct debit authority below. This debit will be made through the Bulk Electronic Clearing System (BECS) from your account held at the financial institution you have nominated below.

By completing this section, you have understood and agreed to the terms and conditions governing the debit arrangements between you and Pengana Capital Ltd, as set out in this Request and in your Direct Debit Request Service Agreement, a copy of which is available on [www.pengana.com](http://www.pengana.com).

Financial institution name	Branch name (if applicable)
<input type="text"/>	<input type="text"/>
Account name	<input type="text"/>
BSB number	Account number
<input type="text"/>	<input type="text"/>

I/We request and authorise Pengana Capital Ltd ABN 30 103 800 568 (User ID 502729) to arrange, through its own financial institution, a debit to the nominated account as deemed payable by Pengana.

Signature of primary account holder

Please print full name

Date (DD/MM/YYYY)

Signature of joint account holder (if applicable)

Please print full name

Date (DD/MM/YYYY)

**BPAY® - Telephone & internet banking**

You can make your payment using telephone or internet banking.

You will need to quote the biller code and your account number (for reference) when making this payment.

If this is a new investment, we will notify you of your account number once this is available. Please make your payment within 14 days of this notification.

Contact your bank or financial institution to make this payment from your cheque, savings, debit or transaction account.

More info [www.bpay.com.au](http://www.bpay.com.au) ®Registered to BPAY Pty Ltd ABN 69 079 137 518

Fund name	BPAY® details
Pengana Diversified Private Credit Fund- Class A	Biller code 419002 Reference number [Account Number]

**Cheque**

Please note we only accept Australian cheques. Please make your cheque payable to 'Pengana Capital Ltd Applications Trust Account'. Attach the cheque with your original application forms when posting. Please cross and write 'non-negotiable' on the cheque.

## 5. BANK ACCOUNT DETAILS

### Australian bank account details

Please provide your bank account details if you have selected to take your distribution in cash or wish to provide these details for future redemptions. We will only pay cash proceeds to a bank account in the name(s) of the investor(s). We will not make any payments into third party bank accounts.

Financial institution name

Branch name (if applicable)

Account name

BSB number

Account number

Please complete if you wish to provide foreign bank account details for future redemptions. We will only pay cash redemption proceeds to a bank account in the name(s) of the investor(s). We will not make any payments into third party bank accounts.

Please note that we do not pay cash distribution to foreign bank accounts. You must provide an Australian bank details in the above section if you elect to receive distribution in cash.

### Foreign bank account details

Financial institution name

Financial institution address

Account number

Account name

SWIFT/BIC

ABA/FED (US)

IBAN (Europe)

Due to the complexity of foreign bank accounts, we may need to contact you for more information.

## 6. COMMUNICATION

### Automatic online account access

Online access enables you to view details of your investments (account balance, investment details and account statements). We will send you the necessary registration details by post once your application is processed.

### Annual report options

The annual financial reports of the fund are available free on our website. If you would like to receive a copy by post or email, please contact us on +61 2 8524 9900 or [clientservice@pengana.com](mailto:clientservice@pengana.com). (This refers to annual reports only. This will not affect communication instructions regarding general correspondence for your fund).

### Opt out of fund updates

☐

You may receive information from us via mail, telephone, email or other electronic messaging service relating to market commentary, services or information that may be of interest to you. By providing us with your contact details you consent to being contacted by these methods for these purposes. Please indicate if you **do not** wish to receive updates and marketing information from us.

## 7. FINANCIAL ADVISER DETAILS

Use this section to tell us about your financial adviser. If you change your financial adviser, it's important to let us know in a timely way. If you would like your financial adviser to receive copies of your statements by email, please enter their email address below.

Adviser email address

## Operating your account

Do you want your financial adviser to be able to operate your account?

If the answer is "Yes", your financial adviser must provide ID and verification documentation as per section 8.3. If you want to give your adviser a view only access to the account, please select "No".

☐ No

☐ Yes

In general, an appointed financial adviser can do everything you can do with your investment, except appoint another person to operate your account. It is important to tell us promptly if you no longer wish your financial adviser to operate your account, or if your financial adviser changes - we will and OneVue will keep accepting their instructions until you or they advise us in writing that the appointment has terminated.

We may suspend or terminate their appointment for any reason considered reasonable, and may change the terms on which they operate your account.

You indemnify us from any loss you or we suffer as a result of the actions of your appointed financial adviser, and agree to ratify their actions if we ask.

**Notice to financial adviser:** by completing this section of the application form, you are confirming that you hold a current Australian Financial Services Licence (AFSL), or are otherwise authorised to advise on and arrange this product.

## Details

AFSL name

AFSL number

Adviser name

Authorised representative licence number

ABN

## Address

Property/building name

Unit

Street number

Street name

Suburb

State

Postcode

Country

Phone

Mobile

## Performance of investor identification & verification procedures

Please indicate below whether client identification and verification procedures have been performed.

☐ No - I have not performed the applicable customer identification procedure on this investor.

☐ Yes - I have completed the applicable customer identification procedure on this investor.

## Financial adviser declaration

**Notice to financial adviser:** please note that reliance on the KYC performed by the financial advisor is only acceptable if all the criteria below is met.

- ☐ I hold an AFSL in my own name or have been appointed as an authorised representative by the licensee.
- ☐ I am a reporting entity for AML/CTF purposes.
- ☐ The issuer has reasonable grounds to believe that it is appropriate to rely on the KYC procedure I have undertaken.
- ☐ I have attached the KYC documents to this form.

AFSL full legal entity name

AFSL number

Please print full name

Signature

## 8. AUTHORISED REPRESENTATIVE OF INVESTORS

Please complete this section if you wish to appoint an individual or individuals to act on your behalf in relation to your investment in the fund (this may include a margin lender or their nominee).

### 8.1 Agent details

#### Agent 1

Title

Given name(s)

Surname

Name of company by whom the agent is employed (if any)

Phone

Email

Signature

#### Agent 2

Title

Given name(s)

Surname

Name of company by whom the agent is employed (if any)

Phone

Email

Signature

If you wish to appoint more than two agents, please complete the details on a separate sheet and attach to this application form.

## 8.2 How agents may act in relation to the account?

Tick applicable

Each agent listed above may provide instructions in relation to the investment individually without the consent of the other

☐

All agents must act jointly to provide instructions in relation to the investment

☐

Other arrangement - please provide details

☐

## 8.3 Verification procedure for authorised representatives who are individuals

For each authorised representative, please provide verification documents. In addition, please provide evidence of each authorised representative's authority to act on behalf of the investor. Please tick the document(s) you have provided.

### Verification documents - mandatory

A certified copy of ID

☐

### Authorised representative's authority - one of the following

Certified copy of the authorising document (e.g. POA); or

☐

A certified copy of a guardianship order; or

☐

Other arrangement - please provide details below

☐

☐ I confirm that the document authorising each authorised representative is still valid and has not been revoked

## 9. GLOBAL TAX REPORTING REQUIREMENTS (FATCA/CRS)

### Why you need to complete this section?

The Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) are regulatory requirements that aim to deter tax evasion by US and other foreign taxpayers. The Australian and a number of other foreign Governments have an agreement which requires us to obtain certain information from investors, including taxation information. You may be liable to a penalty if you provide information that is false or misleading that is material. We may decide not to open an account without first receiving the required information. For more information, visit [www.ato.gov.au](http://www.ato.gov.au).

If you are unsure of any of the answers, please contact a legal or accounting professional.

### 9.1 Regulated Superannuation Funds

Are you a regulated superannuation fund?

☐ I am the trustee of a regulated superannuation fund, (this includes a self-managed superannuation fund)

#### HELP

**Regulated superannuation fund** means self-managed superannuation funds, APRA regulated superannuation funds, Australian Government or semi-government superannuation funds and pooled super trusts.

## 10. DECLARATIONS & ACKNOWLEDGMENTS

Please read the declarations below before signing this form. The required signature(s) are detailed at the bottom of this form.

When you apply to invest, you (the applicant) are telling us:

- to the best of your knowledge, all details in this application (including all related documents provided) are true, correct and complete you have received, read and understood the current IM. You agree to be bound by the constitution of the fund and the IM as supplemented, replaced or re-issued from time to time
- you are not bankrupt or a minor, and are authorised to sign this form
- you have received and accepted this offer in Australia
- you have read and understood the information relating to privacy in the IM
- you consent to the issuer disclosing your personal information to any of the issuer's service providers, in relation to any and verification that the issuer is required to undertake on me, as required under the AML/CTF Act. This shall include any information identification
  - o required by any third party document verification service provider, and/or
  - o provided to any third party document verification service provider
- you authorise us to apply the TFN or ABN included on this application form and authorise it to be applied to all further applications and redemptions in respect of any of our funds.

By applying to invest you also acknowledge that:

- monies deposited are not associated with crime, money laundering and/or financing terrorism. We may decide to delay or refuse any request or transaction, including by suspending the issue or redemption of units if we are concerned that the request or transaction may breach any obligation of, or cause us to commit or participate in an offence under any AML/CTF and Sanctions Law and FATCA/CRS obligations. We will incur no liability to you if we do so
- we may take other action we reasonably believe is necessary to comply with AML/CTF and Sanctions Law and FATCA/CRS obligations, including disclosing any information held about you to any of our related bodies corporate or service providers whether in Australia or outside Australia, or to any relevant Australian or foreign regulator, and
- we collect additional information about you from time to time, from you or from third parties, for the purposes of satisfying AML/CTF and Sanctions Law and FATCA/CRS obligations, and that any such information may be used and disclosed as described in the Pengana Capital privacy policy available online at <https://pengana.com/privacy/> or by contacting us.

### Important information

- nothing in this form is advice and any help provided is general guidance only. Seek professional advice to be sure of your answers
- it is a condition of investing that you keep your details (including tax detail) with us, up to date. We recommend that you review this tax information form at the end of the financial year and update your details if required. You must contact us when you learn new things about the matters in this form. Failing to update us can have tax and other consequences. You can update us by requesting and completing this form and emailing, faxing or posting it to our Administrator.

By completing and signing this form:

- you represent having read and understood this form
- you represent this form is complete and accurate
- if you have applied for but not received your TIN or GIIN, you undertake to inform us within 30 days of receiving it
- you undertake that if information in this form changes, you will tell us within 30 days
- you declare that to the best of my knowledge and belief the information provided in the Global Tax Reporting section is true and correct
- you agree to notify Pengana Capital of any changes to my tax residency or that of any beneficial owners or controlling person.



## 11. SIGNATURE(S)

For individual trustees, at least the primary trustee must sign this section. For Australian corporate trustee we require the signature(s) of either a sole director, or two directors, or one director and the company secretary.

### Signature 1

Signature

Date (DD/MM/YY)   /   /

Full name

#### Capacity

Director ☐

Company Secretary ☐

Trustee (individual) ☐

### Signature 2

Signature

Date (DD/MM/YY)   /   /

Full name

#### Capacity

Director ☐

Company Secretary ☐

Trustee (individual) ☐

### Signature 3

Signature

Date (DD/MM/YY)   /   /

Full name

#### Capacity

Director ☐

Company Secretary ☐

Trustee (individual) ☐

### Signature 4

Signature

Date (DD/MM/YY)   /   /

Full name

#### Capacity

Director ☐

Company Secretary ☐

Trustee (individual) ☐

### If signed under Power of Attorney

Attorneys must attach a certified copy of the Power of Attorney. The Attorney hereby certifies that he/she has not received notice of any limitation or revocation of his/her Power of Attorney and is also authorised to sign this form. Power of Attorney documents cannot be accepted by fax or email.

<b>Translating documents by an accredited translator</b>	<p>In Australia an accredited translator means a professional translator accredited by the National Accreditation Authority for Translators and Interpreters at or above professional level.</p> <ul style="list-style-type: none"> <li>• NAATI (<a href="https://www.naati.com.au/">https://www.naati.com.au/</a>)</li> </ul> <p>In an overseas country, an accredited translator is a professional translator accredited by a NAATI equivalent authority. For these, escalate to the AML Compliance Officer for assistance.</p>
<b>Getting your copies certified</b>	Any document(s) requiring to be certified for verification purposes must be certified by an eligible person to be a true copy of the original document. Documents must be either certified on all pages or certified on the front page with a clear reference to the number of subsequent pages that are included.
<b>Example of certification</b>	<p>I certify that this is a true and correct copy of the original document</p> <p>Signature of Certifier</p> <p>Name of Certifier</p> <p>Capacity of certifier – e.g. Justice of the Peace</p> <p>Date of certification (DD/MM/YYYY)</p>
<b>List of occupations that can certify (from the Statutory Declaration Regulations 2018)</b>	<ul style="list-style-type: none"> <li>• Architect</li> <li>• Chiropractor</li> <li>• Dentist</li> <li>• Financial adviser or financial planner</li> <li>• Legal practitioner</li> <li>• Medical practitioner</li> <li>• Midwife</li> <li>• Migration agent registered under Division 3 of Part 3 of the Migration Act 1958</li> <li>• Nurse</li> <li>• Occupational therapist</li> <li>• Optometrist</li> <li>• Patent attorney</li> <li>• Pharmacist</li> <li>• Physiotherapist</li> <li>• Psychologist</li> <li>• Trade marks attorney</li> <li>• Veterinary surgeon.</li> </ul>
<b>List of persons who can certify</b>	<ul style="list-style-type: none"> <li>• 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)</li> <li>• a judge of a court</li> <li>• a magistrate</li> <li>• a chief executive officer of a Commonwealth court</li> <li>• a registrar or deputy registrar of a court</li> <li>• a Justice of the Peace</li> <li>• a notary public (for the purposes of the Statutory Declaration Regulations 2018)</li> <li>• a police officer</li> <li>• an agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public</li> <li>• 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</li> <li>• an Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955)</li> <li>• an officer with 2 or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 2018)</li> <li>• a finance company officer with 2 or more continuous years of service with one or more financial companies (for the purposes of the Statutory Declaration Regulations 2018)</li> <li>• an officer with, 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</li> <li>• a member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with 2 or more years of continuous membership.</li> </ul>

# Application | Trusts & Companies

## Pengana Diversified Private Credit Fund

Trustee: Pengana Capital Limited (ABN: 30 103 800 568, AFSL: 226566)

### WHO SHOULD COMPLETE THIS FORM?

Please use this form if you are a new investor and wish to invest in this fund by making an initial application.

## HOW TO COMPLETE THIS FORM

---

### Step 1 Before completing the application

Before submitting this form or completing the online application, please read and ensure you understand the Information Memorandum (IM) and any product guide and important information for New Zealand Investors Statement (if relevant).

The law prohibits any person passing this Application Form on to another person unless it is accompanied by a complete IM. Statements are available [here](#) or if you are unable to access the link or print the document, contact us on +61 2 8524 9900 or [clientservice@pengana.com](mailto:clientservice@pengana.com).

This application form must be accompanied by the IM, with all required documents attached.

---

### Step 2 Completing the application

#### Online applications:

You can skip the paperwork and complete the application online [here](#).

#### Manual applications:

Please complete the attached form, print, use black pen and write in BLOCK letters. If you make an error do not use correction fluid, instead, cross out your error and initial your changes.

**Note:** Please ensure all fields are completed including those in **sections A - B and 12**.

---

### Step 3 Identification and verification

Please refer to **section 5** and attach the relevant identification documents to this application form.

---

### Step 4 Sign and send your documents

Please ensure you sign **section 14** of the form in accordance with the instructions provided.

Please return your forms by post to:

Pengana Capital Group  
GPO Box 804  
MELBOURNE VIC 3001

---

### Step 5 Make your payment

Please refer to **section 7** of the application form and follow the instructions on how to pay the application amount.

Your application cannot be processed until all relevant identification documents and cleared funds are received.

---

## IMPORTANT INFORMATION

- Please ensure all relevant fields are completed. If you do not complete all relevant sections your application may be rejected and returned to you for completion, resulting in a delay in processing your application
- If you have any questions as you complete this form, please refer to the FAQs at the end of this form, or contact us on +61 2 8524 9900 or [clientservice@pengana.com](mailto:clientservice@pengana.com).

## HOW DO YOU QUALIFY AS A WHOLESALE INVESTOR?

To qualify as a wholesale investor, please provide one of the following:

1. An accountant's certificate certifying that the proposed Unitholder has:
  - net assets of at least A\$2.5million, or
  - gross income for each of the last two financial years of at least \$250,000.

Two forms of accountant's certificates that are commonly used may be found on the following pages - the standard format and the extended wealth format (which should be used if the investment is to be made through the investor's trust or superannuation fund).

OR

2. Proof that the proposed Unitholder:
  - is a trustee of a superannuation fund within the meaning of the Superannuation Industry (Supervision) Act 1993 with net assets of at least A\$10 million (a certified copy of the trust deed and recent financial accounts to confirm that the fund holds at least A\$10 million),
  - controls at least A\$10 million including any amount held by an associate or under a trust that the investing entity manages (recent financial accounts to confirm that the Unitholder controls at least A\$10 million),
  - is a manufacturer and employs 100 or more people, or the investing entity is not a manufacturer and employs 20 or more people (signed confirmation by a director of the company to this effect),
  - holds an Australian financial services licence (licence number), or
  - is a 'professional investor' as otherwise defined in the Corporations Act.

Please contact Pengana if you need us to assist you in providing the appropriate documentation to certify that you are a Wholesale Investor.

**Note:** The certificate should be provided on an Accountant's letterhead provided no earlier than 2 years before the offer is made. Please contact Pengana if you require a word version of this certificate.

### CERTIFICATE UNDER SECTION 761G(7)(C) OF THE CORPORATIONS ACT - 'WEALTH TEST' CERTIFICATE FROM ACCOUNTANT PRACTICING IN AUSTRALIA

TO: Pengana Capital Limited  
Suite 1, Level 27  
Governor Phillip Tower  
1 Farrer Place  
Sydney, NSW 2000

I, of \_\_\_\_\_ certify as follows:

1. I am a qualified accountant for the purposes of the Corporations Act, being a member of the \*Institute of Chartered Accountants in Australia/Australian Society of Certified Practising Accountants/ National Institute of Accountants and am subject to, and comply with, that body's continuing education requirements.  
*[\*Delete where not applicable]*  
My membership designation from this professional body is \_\_\_\_\_  
I comply with this professional body's continuing professional education requirements.
2. I am giving this certificate in accordance with section 761G(7)(c) of the Corporations Act at the request of, and with reference to, \_\_\_\_\_ (Investor) and acknowledge that this certificate will be relied upon to make offers of financial products to the Investor.
3. Having reviewed the financial position of the Investor:
  - a. the Investor has net assets of at least A\$2.5 million; and / or
  - b. the Investor had a gross income for each of the last 2 financial years of at least A\$250,000 a year.*[Delete (a) or (b) above if not applicable]*
4. The financial service or product will not be used in connection with a business by the Investor.

Signature

Please print full name

Date (DD/MM/YYYY)

**Note:** The certificate should be provided on an Accountant's letterhead provided no earlier than 2 years before the offer is made. Please contact Pengana if you require a word version of this certificate.

**CERTIFICATE UNDER SECTION 761G(7)(CA) OF THE CORPORATIONS ACT AND REGULATION 7.6.02AB - EXTENDED WEALTH TEST  
CERTIFICATE FROM ACCOUNTANT PRACTICING IN AUSTRALIA**

TO: Pengana Capital Limited  
Suite 1, Level 27  
Governor Phillip Tower  
1 Farrer Place  
Sydney, NSW 2000

A. Name of company or trust i.e. name of investor. If investor is a Trustee, then insert the full name e.g. ABC Pty Ltd ATF XYZ trust

Address of Investor

Street Number & Name

Suburb

State

Postcode

Country

B. Name of person or entity who controls the company or trust which is the investor.

I certify that the [person or entity] whose details are set out immediately above at point B:

- has net assets of at least \$2.5million; or
- has a gross income for each of the last 2 financial years of at least \$250,000.

In addition, I certify that the [person or entity] whose details are set out above at point B, controls (within the meaning of section 50AA of the Corporations Act 2001) the company or trust (where applicable) whose details are set out above at point A.

I belong to [name of my professional body\*]

My membership designation from this professional body is

I comply with this body's continuing professional education requirements.

Signature of Accountant

Date certificate issued (DD/MM/YYYY)

\* NOTE: A qualified accountant in Australia must belong to one of the following professional bodies at the declared membership classification:

PROFESSIONAL BODY	DECLARED MEMBERSHIP CLASSIFICATIONS
The Institute of Chartered Accountants in Australia	CA, ACA and FCA
CPA Australia	CPA and FCPA
National Institute of Accountants in Australia	PNA, FPNA, MINA and FINA

## Section A: Investor details

If you are an existing investor, please provide your account number

☐ I/We confirm there are no changes to our identification documents previously provided and that these remain current and valid.

☐ I/We confirm there are no changes to the information in our previous application provided and that it remains current and valid.

What is the full legal name of the trust or company that will hold title of the units?

Full name of account designation

## Section B: Are you investing using funds borrowed under a margin loan?

☐ No - go to **section 1**. ☐ Yes - if yes, please complete the details below

Name of margin lender

Name of borrower

Borrower's TFN

Loan number

If the person who will hold legal title to the units will be the borrower granting Power of Attorney to the margin lender or its nominee, please complete this form as an individual.

## 1. TRUST

Please complete this section if you are:

- An individual acting in your capacity as trustee of a trust, or
- A company acting in your capacity as a trustee of a trust.

For guidance about when you may be acting as a trustee and for whom, please refer to the FAQs at the back of this form.

### 1.1 Trust details

Full name of trust. If the trust for which you act as a trustee does not have a name, please insert N/A

Type of trust

Business name (if any) of the trustee of the trust

Country in which the trust was established

Nature of business

## 1.2 Type of trust

### 1.2.1 Custodian

- ☐ No - go to **1.2.2**
- ☐ Yes - please complete the questions below, then go to **1.4**.

	No	Yes
a. Do you provide a custodial or depository service of the kind described in item 46 of table 1 in subsection 6(2) of the AML/CTF Act 2006 (Cth)? (i.e. to the underlying investor not your related body corporate)	<input type="checkbox"/>	<input type="checkbox"/>
b. Do you hold an AFSL or are you exempt from the requirement to hold such license? If <b>Yes</b> , AFSL Number or specify the grounds for exemption <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Are you enrolled as a reporting entity with AUSTRAC, or do you satisfy one of the 'geographical link' tests in subsection 6(6) of the Anti-Money Laundering and Counter-Terrorism Financing Act (AML/CTF Act)?	<input type="checkbox"/>	<input type="checkbox"/>
d. Have you carried out all applicable customer identification procedures (ACIP) and ongoing customer due diligence (OCDD) requirements in accordance with chapter 15 of the AML/CTF Rules in relation to your underlying customers? (including where you have relied on a member of your designated business group or an Agent to perform the ACIP and OCDD)	<input type="checkbox"/>	<input type="checkbox"/>

If you have answered Yes to all questions in **1.2.1**, go to **1.4.2**. If not, please complete **1.2.2**.

### Regulated trust

#### 1.2.2 Registered MIS - is the trust for which you are the trustee a registered managed investment scheme?

- ☐ No - go to **1.2.3**
- ☐ Yes - please tell us the ARSN.

Now go to **1.4**, then **section 2**.

#### 1.2.3 Unregistered MIS - unregistered managed investment scheme (where the scheme is not registered by ASIC; has only wholesale clients and does not make small scale offering to which section 1012E of the Corporations Act applies)

- ☐ No - go to **1.2.4**
- ☐ Yes - please provide the ABN for the unregistered managed investment scheme.

Trust ABN or registration/licence number

Now go to **1.4**, then **section 2**.

#### 1.2.4 Government superannuation fund - is the trust for which you are the trustee a government superannuation fund established by legislation?

- ☐ No - go to **1.2.5**
- ☐ Yes - please tell us the name of the Act that establishes the fund

Now go to **1.4**, then **section 2**.



**1.2.5 Other regulated trust** (a trust registered and subject to the regulatory oversight of a Commonwealth statutory regulator in relation to its activities as a trust)

**Note:** This includes registered charities with the ACNC, superannuation funds, approved deposit funds, pooled superannuation trusts, public sector superannuation schemes (within the meaning of the Superannuation Industry (*Supervision*) Act 1993 (*Cth*)). If you are an SMSF, please use the stand alone application form for **SMSF**.

- ☐ No - go to **1.3**
- ☐ Yes - please provide the details below, then go to **1.4**, then go to **section 2**.

Provide name of regulator (eg ASIC, APRA, ATO & ACNC)

Provide the Trust's ABN or registration/licensing details

If you answered NO to any of the questions in **1.2**, then go to **1.3**.

**1.3 Unregulated trusts**

All other unregulated trusts must complete this section. This includes family trusts, discretionary trusts, unregistered charitable trusts, nominee and sub-custodian entities that do not qualify as a custodian under **1.2.1**.

Trust ABN (if any)

Trust TFN (if any)

Now go to **1.3.1**.

**1.3.1 Beneficiary details** (class of beneficiaries)

Do the terms of the trust describe the beneficiaries by reference to members of a class?

- ☐ No - please go to **1.3.2**
- ☐ Yes - please provide details of the class to which the beneficiaries belong (e.g. family members, unit holders, un-named charities). Then go to Settlor details **1.3.3**.

For a nominee or sub-custodian

The **beneficiary** is the person or entity for whom the applicant holds its interests in the Fund. This may be specified in the Trust or Relationship Agreement between the applicant and the person or entity that appointed the applicant as nominee/sub-custodian.

**1.3.2 Beneficiary details** (specified beneficiaries)

Please specify each beneficiary below (using the applicable section for individuals or companies). If there are more beneficiaries than there is space for below, please complete the details in a separate sheet and attach to this application form.

**Individual beneficiary 1**

Title

Given name(s)

Surname

**Individual beneficiary 2**

Title

Given name(s)

Surname

**Individual beneficiary 3**

Title	Given name(s)	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Individual beneficiary 4**

Title	Given name(s)	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Corporate Beneficiary 1**

Company name	ACN
<input type="text"/>	<input type="text"/>

**Corporate Beneficiary 2**

Company name	ACN
<input type="text"/>	<input type="text"/>

**Corporate Beneficiary 3**

Company name	ACN
<input type="text"/>	<input type="text"/>

**Corporate Beneficiary 4**

Company name	ACN
<input type="text"/>	<input type="text"/>

Now go to **1.3.3**.

**1.3.3 Settlor details**

All other unregulated trusts must complete this section. This includes family trusts, discretionary trusts, unregistered charitable trusts, nominee and sub-custodian entities that do not qualify as a custodian under **1.2.1**.

Please provide the name of the settlor of the trust (unless they are deceased or the material asset contribution to the trust by the settlor at the time the trust was established was less than \$10,000).

Title	Given name(s)	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>

Related body corporate

**Note:** You do not have to complete this section if you are a regulated trust.

**1.4 Trust verification procedures****1.4.1 Did you answer yes to all of the questions in 1.2.1 or any of the questions in 1.2.2 - 1.2.5?**

- ☐ No - please go to **1.4.3**
- ☐ Yes - please go to **1.4.2**

#### 1.4.2 Verification procedure for regulated trusts

Please provide a copy of the document(s) as set out below.

##### For custodians (you answered yes to all of the questions in 1.2.1)

A search of the register maintained by ASIC showing your AFSL or showing that you are an authorised representative of an AFSL holder (not applicable if you are exempt from holding an AFSL). ☐

##### For trustees of registered managed investment schemes (you answered yes 1.2.2)

A search of ASIC's registers showing that the scheme is registered. ☐

##### For trustees of unregistered managed investment scheme which only has wholesale clients and does not make small scale offerings to which s 1012E of the Corporations Act applies (you answered yes 1.2.3)

A search of the register maintained by the ATO ☐

A letter confirming these details from an external lawyer or accountant ☐

The relevant offer document for the scheme in English ☐

##### For regulated Government superannuation funds (you answered yes 1.2.4)

An extract of the establishing legislation, sourced from a government website. ☐

##### For other regulated trusts (you answered yes 1.2.5)

A search of the ASIC, ATO, ACNC or relevant regulators website (example 'Super Fund Lookup' at [www.abn.business.gov.au](http://www.abn.business.gov.au)) ☐

Now go to **section 2**.

#### 1.4.3 Verification procedure for non-regulated trusts

##### Trust deed

A certified copy of the trust deed or if not reasonably available a certified extract \* of the trust deed that includes the name of the trust, trustees, and settlor(s) where applicable. ☐

##### Letter of compliance for nominees and sub-custodians

If you have relied on the ACIP and OCDD performed by a member of your designated Business Group in respect to the underlying investor, please attach a signed AML/CTF compliance letter from the entity that has appointed you. ☐

##### Margin loan

For Margin Lenders or Nominees of the Margin Lender, please provide a certified copy or certified extract of the Loan Agreement with the Borrower. ☐

\* Please see the FAQs at the back of this form for the meaning of certified copy and certified extract.

Now go to **section 2**.

## 2. TRUSTEE DETAILS

### 2.1 Type of trustee

☐ The trustees are all individuals - go to **2.2**, then go to **section 5**.

☐ The trustees are all companies - go to **2.3**, then go to **section 3**.

### 2.2 Individual trustee 1

Title

Given name(s)

Surname

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

Occupation

**Residential address - (A PO Box/RMB/Locked Bag is not acceptable)**

Unit  Street number  Street name

Suburb  State  Postcode  Country

**Contact details**

Phone  Mobile

Email\*

**Individual trustee 2**

Title  Given name(s)  Surname

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

Occupation

**Residential address - (A PO Box/RMB/Locked Bag is not acceptable)**

Unit  Street number  Street name

Suburb  State  Postcode  Country

**Contact details**

Phone  Mobile

Email

\* This email address is the default address for all investor correspondence (such as transaction confirmations, statements, reports and other materials)

If you are an individual trustee of an unregulated trust (ie you completed **1.3**), please complete the beneficial owner in **section 4**.

Then in respect of one of the individual trustees, provide an ID document as specified in **section 5**.

**2.3 Corporate trustee**

**Corporate trustee 1**

Company name  ACN

**Corporate trustee 2**

Company name  ACN

**Note:** You must select one of the trustees listed above and complete **section 3** of this form as though that trustee is the applicant.

Now go to **section 3**.

### 3. COMPANY DETAILS

Please complete this section if you are:

- A company investing on your own behalf, or
- A corporate trustee.

Full legal name of company as registered by ASIC

ACN

Nature of business

Do you have an authorised signatories list (ASL)? ☐ No ☐ Yes - For the ASL to be valid, please provide all the requirements below

A certified copy of the ASL with the full names and signatures of each agent.

☐

A certified copy of the authorising document or Power of Attorney.

☐

Please tick to confirm the authorising document or Power of Attorney is still valid and it has not been revoked.

☐

Do you have a verifying officer? ☐ No ☐ Yes - Please provide all of the following

Full name of verifying officer

Date of birth (DD/MM/YY)  /  /

Verifying officer residential address

☐ certified copy of your ID (see **section 5**)

☐ letter of appointment signed by the directors of the company, and

☐ by ticking this box you confirm the verifying officer has verified the identity of the signatories in accordance with the AML/CTF requirements and has kept relevant records.

If you are an Australian company, go to **3.1**.

If you are a foreign company, go to **3.2**.

#### 3.1 Australian company

**Registered office address** - (A PO Box/RMB/Locked Bag is not acceptable)

Property/building name (if applicable)

Unit

Street number

Street name

Suburb

State

Postcode

Country

**Principal place of business address (if different to registered office address) - (A PO Box/RMB/Locked Bag is not acceptable)**

Property/building name (if applicable)

Unit  Street number  Street name

Suburb  State  Postcode  Country

**Postal address (if different to above) - (A PO Box/RMB/Locked Bag is not acceptable)**

Unit  Street number  Street name

Suburb  State  Postcode  Country

ACN  ABN

**Contact person at company**

Phone  Mobile

Email

Now go to **3.3**.

**3.2 Foreign company**

Country of formation

Registered in Australia? ☐ No ☐ Yes - please provide below the ARBN

Registered in country of formation? ☐ No ☐ Yes - Name of foreign registration body and identification number (if any)

If you are a foreign company registered in Australia, please provide your principal place of business in Australia, or the full name and address of your Australian agent.

If you are not registered in Australia, please provide either the full address of the company as registered by the foreign registration body **or** the principal place of business in the country of formation.

**A PO Box/RMB/Locked Bag is not acceptable.**

Unit  Street number  Street name

Suburb  State  Postcode  Country

**Postal address (if different to above) - (A PO Box/RMB/Locked Bag is not acceptable)**

Unit	Street number	Street name			
<input type="text"/>	<input type="text"/>	<input type="text"/>			
Suburb	State	Postcode	Country		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		

**Contact person at company**

Name	Email
<input type="text"/>	<input type="text"/>
Business number (include country and area code)	Mobile number (include country code)
<input type="text"/>	<input type="text"/>

**3.3 Type of company**

Are you a public company or a private/proprietary company?

- ☐ Private/proprietary company – please go to **3.4**.
- ☐ Public company – please go to **3.5**.

**3.4 Private/Proprietary company**

Please complete the director details below if you are an Australian proprietary company or a foreign private company. Do not complete for public companies.

**Directors details**

How many directors are there?

Please provide below the full name of all the directors. If there are more than four directors, please complete the details on a separate sheet and attach to this application form.

**Director 1**

Title	Given name(s)	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Director 2**

Title	Given name(s)	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Director 3**

Title	Given name(s)	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Director 4**

Title	Given name(s)	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>

Now go to **3.6**.

**3.5 Public company**

Are you an Australian listed company?

- ☐ No – please go to **3.6** ☐ Yes – please provide name of the market/exchange on which the company is listed

Listed company name	Market/exchange
<input type="text"/>	<input type="text"/>

Now go to **3.8**.

### 3.6 Majority owned subsidiary of an Australian public listed company

Are you a majority-owned subsidiary of an Australian publicly listed company?

☐

No - please go to 3.7

☐

Yes - please provide name of the parent listed company and the market/exchange on which the company is listed

Listed company name

Market/exchange

Now go to 3.8.

### 3.7 Regulated company

This only includes companies that are licensed by an Australian Commonwealth, State or Territory statutory regulator and are subject to regulatory oversight for example, Australian Financial Services Licensees (AFSL), Australian Credit Licensees (ACL) and Registrable Superannuation Entity (RSE) Licensees.

Are you a regulated company?

☐

No - please go to 3.9.

☐

Yes - please provide details of the regulator and licence number below

Regulator

Licence number

Now go to 3.8.

### 3.8 Verification procedures for regulated companies

If you have answered Yes to 3.6, please provide evidence of being a majority or wholly owned subsidiary of a listed company by providing a copy of one or more of the following:

ASIC company extract

☐

company annual statement

☐

certified company share structure

☐

a public document issued by the relevant company

☐

### 3.9 Verification process for all other company types

Please provide a full company extract from ASIC or foreign regulator

☐



## 4. BENEFICIAL OWNER

### A. Beneficial owner of a company (including a company acting in the capacity of trustee)

You must complete this section if you are an unregulated company and you have answered no to:

- **3.5** (you are an Australian domestic listed company)
- **3.6** (you are a majority-owned subsidiary of an Australian listed company)
- **3.7** (you are a company that is licensed and subject to the regulatory oversight of a Commonwealth, State or Territory statutory regulator).

You are exempt from completing **section 4** if you are a regulated company or:

- You are a foreign listed company or a wholly owned subsidiary of a listed company in a financial market that is subject to disclosure requirements that ensure transparency of beneficial ownership.

Listed company name

Market/exchange

A beneficial owner is an individual who ultimately owns (directly or indirectly) 25% or more of the customer, or controls (directly or indirectly) the customer (see FAQs). If you cannot identify any beneficial owners, please go to the fallback procedure at **4.2**.

Please provide details of your beneficial owner(s) below (see FAQs for guidance).

#### 4.1 Beneficial owner(s) details

##### Beneficial owner 1

Title

Given name(s)

Surname

Residential address - (A PO Box/RMB/Locked Bag is not acceptable)

Date of birth (DD/MM/YYYY)

##### Beneficial owner 2

Title

Given name(s)

Surname

Residential address - (A PO Box/RMB/Locked Bag is not acceptable)

Date of birth (DD/MM/YYYY)

##### Beneficial owner 3

Title

Given name(s)

Surname

Residential address - (A PO Box/RMB/Locked Bag is not acceptable)

Date of birth (DD/MM/YYYY)

##### Beneficial owner 4

Title

Given name(s)

Surname

**Residential address** - (A PO Box/RMB/Locked Bag is not acceptable)

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

#### 4.2 Fallback procedure

If you are a company (investing on your behalf) or corporate trustee and cannot identify any beneficial owners, please complete **4.2.1**.

##### 4.2.1 Senior managing official

Please provide the details of the senior managing official (or equivalent) (please see FAQs for the meaning of 'senior managing official')

Title  Given name(s)  Surname

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

Company Title

**Residential address** - (A PO Box/RMB/Locked Bag is not acceptable)

Unit  Street number  Street name

Suburb  State  Postcode  Country

#### 4B BENEFICIAL OWNER OF THE TRUST

You must complete this section if you are an unregulated trust. The beneficial owner of a trust is an individual who controls (directly or indirectly) the operations of the trust and has power to appoint or remove the trustee(s) of the trust.

You are exempt from completing this section if:

- You are a custodian and the beneficial owner is the underlying investor(s). If not, complete **4.2.2**.

##### 4.2.2 Beneficial owner of the trust (individual with power to appoint or remove trustees)

Please provide the details of the individual who holds the power to appoint or remove the trustees of the trust.

Title  Given name(s)  Surname

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

Company title

**Residential address** - (A PO Box/RMB/Locked Bag is not acceptable)

Unit  Street number  Street name

Suburb  State  Postcode  Country

## 5. VERIFICATION PROCEDURE FOR INDIVIDUAL TRUSTEE, BENEFICIAL OWNER(S), SENIOR MANAGING OFFICIAL AND APPOINTOR

Please complete the below verification procedure in respect of each individual identified in **section 4**. You may also need to complete the below in respect of an individual trustee if directed to do so under **2.2**. If you cannot meet the requirements of **option A**, please follow the instructions in **option B**.

### OPTION A

Provide a certified copy of one of the following:

Current Australian driver's licence containing a photo of the person.	<input type="checkbox"/>
Current Australian passport (or an Australian passport that has expired within the preceding 2 years in acceptable).	<input type="checkbox"/>
Current National Proof of Age card with photo for the purpose of proving a person's age containing a photo of the person.	<input type="checkbox"/>
Current National identity card issued by a foreign government containing a photo and signature of the person.	<input type="checkbox"/>
Current foreign driver's licence with photo, accompanied by an English translation prepared by an accredited translator.	<input type="checkbox"/>
Current foreign passport containing a photo and signature accompanied by an English translation prepared by an accredited translator.	<input type="checkbox"/>

### OPTION B

If you can't provide any document from option A, then please provide a certified copy of one document from group 1 and one document from group 2.

#### GROUP 1

Birth certificate or birth extract issued by an Australian State or Territory.	<input type="checkbox"/>
Foreign birth certificate issued by a foreign government accompanied by an English translation prepared by an accredited translator.	<input type="checkbox"/>
Australian Government issued citizenship certificate.	<input type="checkbox"/>
Current concession card or Health Care card (issued by Centrelink). Please scan the front and the back.	<input type="checkbox"/>

#### GROUP 2

Commonwealth, State or Territory Government within the preceding 12 months and recording the provision of financial benefits.	<input type="checkbox"/>
Australian Taxation Office within the preceding 12 months and recording the debt payable to or by the individual by or to (respectively) the ATO.	<input type="checkbox"/>
Local Government or utilities provider within the preceding 3 months and recording the provision of services.	<input type="checkbox"/>

\* Please see the FAQs at the end of this form for the meaning of certified copy.

## 6. INVESTMENT DETAILS AND DISTRIBUTION INSTRUCTIONS

Please specify your initial application amount.

Please also indicate your distribution choice below. If you do not make an election, distributions will be reinvested.

Fund names	Investment amount AUD\$	Distribution option (indicate (X) one option per fund)	
		Pay to my Australian Bank A/C	Reinvest (Default)
Pengana Diversified Private Credit Fund- Class A	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Note:** The minimum investment is \$500,000 for this fund. However, we may waive or vary the investment minimums. Please nominate one distribution option for each fund you are investing in. If no selection is made, distributions will be automatically re-invested.

Please indicate the source and origin of funds being invested

Savings	<input type="checkbox"/>
Investment	<input type="checkbox"/>
Superannuation contributions	<input type="checkbox"/>
Commission	<input type="checkbox"/>
Donation/gift	<input type="checkbox"/>
Inheritance	<input type="checkbox"/>
Normal course of business	<input type="checkbox"/>
Sale of assets (e.g. shares, property)	<input type="checkbox"/>
Other <input type="text"/>	<input type="checkbox"/>

## 7. PAYMENT OF APPLICATION AMOUNT

Select your payment method and complete the relevant section if applicable. All payments must be made in AUD.

☐ EFT ☐ Direct Debit ☐ BPAY® ☐ Cheque

EFT	Electronic Funds Transfer
Account name:	Pengana Capital Ltd Applications Trust Account
BSB:	083-001
Account number:	468 834 086
Your reference:	please use the full name of the investor for new investment and investor number for existing investment

### Direct debit authority - Australian bank accounts only

You can allow us to deduct your application amount directly from your nominated financial institution account by completing the direct debit authority below. This debit will be made through the Bulk Electronic Clearing System (BECS) from your account held at the financial institution you have nominated below.

By completing this section, you have understood and agreed to the terms and conditions governing the debit arrangements between you and Pengana Capital Ltd, as set out in this Request and in your Direct Debit Request Service Agreement, a copy of which is available on [www.pengana.com](http://www.pengana.com).

Financial institution name

Branch name (if applicable)

Account name

BSB number

Account number

I/We request and authorise Pengana Capital Ltd ABN 30 103 800 568 (User ID 502729) to arrange, through its own financial institution, a debit to the nominated account as deemed payable by Pengana.

Signature of primary account holder

Please print full name

Date (DD/MM/YYYY)

Signature of joint account holder (if applicable)

Please print full name

Date (DD/MM/YYYY)

## BPAY® - Telephone & internet banking

---

You can make your payment using telephone or internet banking.

You will need to quote the biller code and your account number (for reference) when making this payment.

If this is a new investment, we will notify you of your account number once this is available. Please make your payment within 14 days of this notification.

Contact your bank or financial institution to make this payment from your cheque, savings, debit or transaction account.

More info [www.bpay.com.au](http://www.bpay.com.au) ®Registered to BPAY Pty Ltd ABN 69 079 137 518

---

Fund name	BPAY® details
Pengana Diversified Private Credit Fund- Class A	Biller code 419002 Reference number [Account Number]

## Cheque

---

Please note we only accept Australian cheques. Please make your cheque payable to 'Pengana Capital Ltd Applications Trust Account'. Attach the cheque with your original application forms when posting. Please cross and write 'non-negotiable' on the cheque.

## 8. BANK ACCOUNT DETAILS

### Australian bank account details

Please provide your bank account details if you have selected to take your distribution in cash or wish to provide these details for future redemptions. We will only pay cash proceeds to a bank account in the name(s) of the investor(s). We will not make any payments into third party bank accounts.

Financial institution name

Branch name (if applicable)

Account name

BSB number

Account number

Please complete if you wish to provide foreign bank account details for future redemptions. We will only pay cash redemption proceeds to a bank account in the name(s) of the investor(s). We will not make any payments into third party bank accounts.

Please note that we do not pay cash distribution to foreign bank accounts. You must provide an Australian bank details in the above section if you elect to receive distribution in cash.

### Foreign bank account details

Financial institution name

Financial institution address

Account number

Account name

SWIFT/BIC

ABA/FED(US)

IBAN (Europe)

Due to the complexity of foreign bank accounts, we may need to contact you for more information.

## 9. COMMUNICATION

### Automatic online account access

Online access enables you to view details of your investments (account balance, investment details and account statements). We will send you the necessary registration details by post once your application is processed.

### Annual report options

The annual financial reports of the fund are available free on our website. If you would like to receive a copy by post or email, please contact us on +61 2 8524 9900 or [clientservice@pengana.com](mailto:clientservice@pengana.com). (This refers to annual reports only. This will not affect communication instructions regarding general correspondence for your fund).

## Opt out of fund updates

☐ You may receive information from us via mail, telephone, email or other electronic messaging service relating to market commentary, services or information that may be of interest to you. By providing us with your contact details you consent to being contacted by these methods for these purposes. Please indicate if you **do not** wish to receive updates and marketing information from us.

## 10. FINANCIAL ADVISER DETAILS

Use this section to tell us about your financial adviser. If you change your financial adviser, it's important to let us know in a timely way. If you would like your financial adviser to receive copies of your statements by email, please enter their email address below.

Adviser email address

## Operating your account

Do you want your financial adviser to be able to operate your account?

If the answer is "Yes", your financial adviser must provide ID and verification documentation as per section 11.3. If you want to give your adviser a view only access to the account, please select "No".

☐ No

☐ Yes

In general, an appointed financial adviser can do everything you can do with your investment, except appoint another person to operate your account. It is important to tell us promptly if you no longer wish your financial adviser to operate your account, or if your financial adviser changes - we will and OneVue will keep accepting their instructions until you or they advise us in writing that the appointment has terminated.

We may suspend or terminate their appointment for any reason considered reasonable, and may change the terms on which they operate your account.

You indemnify us from any loss you or we suffer as a result of the actions of your appointed financial adviser, and agree to ratify their actions if we ask.

**Notice to financial adviser:** by completing this section of the application form, you are confirming that you hold a current Australian Financial Services Licence (AFSL), or are otherwise authorised to advise on and arrange this product.

## Details

AFSL name

AFSL number

Authorised representative number (if any)

ABN

## Address

**Postal address** (if different to above) - (A PO Box/RMB/Locked Bag is not acceptable)

Property/building name

Unit

Street number

Street name

Suburb

State

Postcode

Country

Phone

Mobile



### Contact details

Business number (include country and area code)

Mobile number (include country code)

Adviser signature

### Performance of investor identification & verification procedures

Please indicate below whether client identification and verification procedures have been performed.

☐

No - I have not performed the applicable customer identification procedure on this investor.

☐

Yes - I have completed the applicable customer identification procedure on this investor.

### Financial adviser declaration

**Notice to financial adviser:** please note that reliance on the KYC performed by the financial advisor is only acceptable if all the criteria below is met.

☐

I hold an AFSL in my own name or have been appointed as an authorised representative by the licensee.

☐

I am a reporting entity for AML/CTF purposes.

☐

The issuer has reasonable grounds to believe that it is appropriate to rely on the KYC procedure I have undertaken.

☐

I have attached the KYC documents to this form.

AFSL full legal entity name

AFSL number

Please print full name

Signature

## 11. AUTHORISED REPRESENTATIVE OF INVESTORS

Please complete this section if you wish to appoint an individual or individuals to act on your behalf in relation to your investment in the fund.

### 11.1 Agent details

#### Agent 1

Title

Given name(s)

Surname

Name of company by whom the agent is employed (if any)

Agent's phone number

Email

Agent's signature

Agent 2

Title

Given name(s)

Surname

Name of company by whom the agent is employed (if any)

Agent's phone number

Agent's signature

## 11.2 How agents may act in relation to the account?

Please tick as applicable

Each agent listed above may provide instructions in relation to the investment individually without the consent of the other.

☐

All agents must act jointly to provide instructions in relation to the investment.

☐

Other arrangement - please provide details below

☐

## 11.3 Verification procedure for authorised representatives who are individuals

For each authorised representative, please provide verification documents in accordance with the verification procedure in section 5. In addition, please provide evidence of each authorised representative's authority to act on behalf of the investor. Please tick the document(s) you have provided.

### Verification documents - mandatory

A certified copy of ID as per section 5

☐

### Authorised representative's authority - one of the following

Certified copy of the authorising document (e.g. POA); or

☐

A certified copy of a guardianship order; or

☐

Other arrangement - please provide details below

☐

☐ I confirm that the document authorising each authorised representative is still valid and has not been revoked

## 12. TAX INFORMATION - GLOBAL TAX REPORTING REQUIREMENTS (CRS/FATCA)

### Why you need to complete this section?

The Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) are regulatory requirements that aim to deter tax evasion by US and other foreign taxpayers. The Australian and a number of other foreign Governments have an agreement which requires us to obtain certain information from investors, including taxation information. You may be liable to a penalty if you provide information that is false or misleading in a material particular. We may decide not to open an account without first receiving the required information. For more information, visit [www.ato.gov.au](http://www.ato.gov.au).

If you are unsure of any of the answers, please contact a legal or accounting professional.

## HELP

Tell me about tax residence

You can be a resident of more than one country for tax purposes. Whether you are tax resident of a particular country for tax purposes is often based on the amount of time you spend in a country and the location of your residence and/or place of work. If you pay tax or have a tax liability somewhere, you are probably a tax resident there. Dual citizenship often brings dual tax residency. It depends on the country. For the US, tax residency can be as a result of citizenship or residency for tax purposes.

If you are unsure, ask someone who knows, usually your accountant.

## 12.1 Companies and non-superannuation trusts

### 12.1.1 Are you a specified US person for tax purposes?

- ☐ No
- ☐ Yes - please tell us your TIN

### 12.1.2 Are you a resident of any other country for tax purposes? Other than the US or Australia.

- ☐ No
- ☐ Yes - please tell us which ones, using the following table

## HELP

No TIN? Reasons we accept are:

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

Reason B: The entity/individual has not been issued with a TIN

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

	Country or jurisdiction of tax residency	TIN	No TIN? Which reason? If Reason B has been selected please provide an explanation. See above HELP box.
1			
2			
3			
4			

### 12.1.3 Are you a financial institution?

Be careful - financial Institution is broadly defined - see **HELP** box

- ☐ No
- ☐ Yes - please tell us your GIIN - see **HELP**

## HELP

### What is a Financial Institution?

For further details about a Financial Institution, please refer to the ATO's AEOI Guidance - [https://www.ato.gov.au/general/international-tax-agreements/in-detail/international-arrangements/automatic-exchange-of-information---crs-and-fatca/?page=2#2\\_Financial\\_institutions](https://www.ato.gov.au/general/international-tax-agreements/in-detail/international-arrangements/automatic-exchange-of-information---crs-and-fatca/?page=2#2_Financial_institutions).

## HELP

### What is a GIIN?

This stands for Global Intermediary Identification Number. GIINs are 19 digits long, issued by US tax authorities (the IRS) to non US financial institutions and sponsoring entities for purposes of identifying their registration with the IRS under US tax laws (called FATCA).

For further details about the GIIN please refer to the IRS GIIN Composition Information - <https://www.irs.gov/businesses/corporations/fatca-registration-and-ffi-list-giin-composition-information>.

## Where to now?

I ticked **yes** and completed my GIIN - go to **12.1.4**.

I ticked **yes** and I am a Managed Investment Entity in a non-CRS participating jurisdiction - If no, proceed to question **12.1.4**.

I ticked **yes** but did not write a GIIN - please tick below why you did not write a GIIN - then go to **12.1.4**.

Exempted financial institution	<input type="checkbox"/>
Deemed compliant financial institution	<input type="checkbox"/>
Exempt beneficial owner	<input type="checkbox"/>
Non-participating financial institution	<input type="checkbox"/>
Non-reporting IGA financial institution	<input type="checkbox"/>
Sponsored financial institution - their GIIN is	<input type="text"/>
Other	<input type="text"/>

## 12.1.4 Are you a public company listed on a stock exchange or a related entity of a publicly listed company or a governmental entity?

- ☐ No
- ☐ Yes - then go to **section 13** and **14**.

## 12.1.5 Are you active or passive?

- ☐ I am an 'active' non financial entity. Please tell us what type of active NFE you are below - then go to **section 13** and **14**.
- ☐ I am a 'passive' non financial entity.

## HELP

### What is active and passive?

A non-financial entity (NFE) is any entity that is not a financial institution as defined above.

You will be a passive NFE if you are not an active NFE.

Generally, you will be an active NFE if:

- ☐ your stock (or a related entity's stock) is regularly traded on established securities market less than 50% of your gross income for the previous reporting period was passive income and less than 50% of your assets during that period produce or were held to produce passive income.
- ☐ you are a Governmental entity, an international organisation, a central bank or an entity wholly owned by one of the above.
- ☐ you are exempt from income tax in your residential jurisdiction and were established and operated exclusively for religious, charitable, scientific, artistic, athletic or educational purposes and meet certain other specific criteria.
- ☐ you have not been a financial institution in the past five years and are in the process of liquidating your assets or reorganising with the intent to recommence operations other than as a financial institution.

If you are unsure whether you are an active or passive NFE, please get advice.

### 12.1.6 Do you have any controlling persons who are resident of another country or jurisdiction of tax residency for tax purposes?

- ☐ I am passive, and **yes** I do have controlling persons who are resident of a country or jurisdiction other than Australia for tax purposes

Complete the **controlling persons details** in the table below - then go to **section 13** and **14**. If there is not enough room in the table, please copy the page and attach it to your completed form.

- ☐ I am passive, but no I do not have controlling persons who are resident of a country or jurisdiction other than Australia for tax purposes. It would be unusual to think of no-one. Please read the **HELP** box. If you are sure - go to **section 13** and **14**.

## HELP

### Controlling persons

Controlling persons are natural persons who exercise control over an entity.

For trusts, 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 trust for FATCA/CRS purposes.

For companies, controlling persons generally include any person who holds (directly or indirectly) more than 25% of the shares in the company and any person who has the power to influence decisions about the company's financial and operating policies, such as senior managing officials or directors.

### Controlling person 1

Title	Given name(s)	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of birth (DD/MM/YYYY)	City and country of birth
<input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>

### Residential address

Unit	Street number	Street name		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Suburb	State	Postcode	Country	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

	Country or jurisdiction of tax residency	TIN	No TIN? Which reason? If Reason B has been selected please provide an explanation. See 12.1.2 HELP box.
1			
2			
3			
4			

#### Controlling person 2

Title  Given name(s)  Surname

Date of birth (DD/MM/YYYY)  /  /  /  City and country of birth

#### Residential address

Unit  Street number  Street name

Suburb  State  Postcode  Country

	Country or jurisdiction of tax residency	TIN	No TIN? Which reason? If Reason B has been selected please provide an explanation. See 12.1.2 HELP box.
1			
2			
3			
4			

#### Controlling person 3

Title  Given name(s)  Surname

Date of birth (DD/MM/YYYY)  /  /  /  City and country of birth

#### Residential address

Unit  Street number  Street name

Suburb  State  Postcode  Country

	Country or jurisdiction of tax residency	TIN	No TIN? Which reason? If Reason B has been selected please provide an explanation. See 12.1.2 HELP box.
1			
2			
3			
4			

Controlling person 4

Title

Given name(s)

Surname

Date of birth (DD/MM/YYYY)

City and country of birth

Residential address

Unit

Street number

Street name

Suburb

State

Postcode

Country

	Country or jurisdiction of tax residency	TIN	No TIN? Which reason? If Reason B has been selected please provide an explanation. See 12.1.2 HELP box.
1			
2			
3			
4			

### 13. DECLARATIONS & ACKNOWLEDGMENTS

Please read the declarations below before signing this form. The required signature(s) are detailed at the bottom of this form.

When you apply to invest, you (the applicant) are telling us:

- to the best of your knowledge, all details in this application (including all related documents provided) are true, correct and complete
- you have received, read and understood the current IM. You agree to be bound by the constitution of the fund, the IM as supplemented, replaced or re-issued from time to time
- you are not bankrupt or a minor, and are authorised to sign this form
- you have received and accepted this offer in Australia
- you have read and understood the information relating to privacy in the IM
- you consent to the issuer disclosing your personal information to any issuer's service providers, in relation to any identification and verification that the issuer is required to undertake on me, as required under the AML/CTF Act. This shall include any information:
  - o required by any third party document verification service provider, and/or
  - o provided to any third party document verification service provider.

By applying to invest you also acknowledge that:

- monies deposited are not associated with crime, money laundering and/or financing terrorism. We may decide to delay or refuse any request or transaction, including by suspending the issue or redemption of units. If we are concerned that the request or transaction may breach any obligation of, or cause us to commit or participate in an offence under any AML/CTF and Sanctions Law and FATCA/CRS obligations, we will incur no liability to you if we do so
- we may take other action we reasonably believe is necessary to comply with AML/CTF and Sanctions Law and FATCA/CRS obligations, including disclosing any information held about you to any of our related bodies corporate or service providers whether in Australia or outside Australia, or to any relevant Australian or foreign regulator, and
- we collect additional information about you from time to time, from you or from third parties, for the purposes of satisfying AML/CTF and Sanctions Law and FATCA/CRS obligations, and that any such information may be used and disclosed as described in the Pengana Capital privacy policy available online at <https://pengana.com/privacy/> or by contacting us.

#### Important information

- nothing in this form is advice and 'help' is general guidance only. Seek professional advice to be sure of your answers
- it is a condition of investing that you keep your details (including tax detail) with us, up to date. We recommend that you review this tax information form at the end of the financial year and update your details if required. You must contact us when you learn new things about the matters in this form. Failing to update us can have tax and other consequences. You can update us by requesting and completing this form and emailing, faxing or posting it to our Administrator.

By completing and signing this form:

- you represent having read and understood this form
- you represent this form is complete and accurate
- if you have applied for but not received your TIN or GIIN, you undertake to inform us within 30 days of receiving it
- you undertake that if information in this form changes, you will tell us within 30 days.
- you declare that to the best of my knowledge and belief the information provided in the Global Tax Reporting section is true and correct
- you agree to notify Pengana Capital of any changes to my tax residency or that of any beneficial owners or controlling person.



## 14. SIGNATURE(S)

A certified copy of the power of attorney must be attached. For an Australian corporate trustee we require the signature(s) of either a sole director, or two directors, or one director and the company secretary.

### Signature 1

Signature

Date (DD/MM/YY)

Given name(s)

Surname

#### Capacity

Director ☐

Company secretary ☐

Primary trustee (individual) ☐

### Signature 2

Signature

Date (DD/MM/YY)

Given name(s)

Surname

#### Capacity

Director ☐

Company secretary ☐

Primary trustee (individual) ☐

### Signature 3

Signature

Date (DD/MM/YY)

Given name(s)

Surname

#### Capacity

Director ☐

Company secretary ☐

Primary trustee (individual) ☐

### Signature 4

Signature

Date (DD/MM/YY)

Given name(s)

Surname

#### Capacity

Director ☐

Company secretary ☐

Primary trustee (individual) ☐

### If signed under Power of Attorney

Attorneys must attach a certified copy of the Power of Attorney. The Attorney hereby certifies that he/she has not received notice of any limitation or revocation of his/her Power of Attorney and is also authorised to sign this form. Power of Attorney documents cannot be accepted by fax or email.

<b>What should a trust deed extract include?</b>	<p>An extract of the trust deed should include the following information:</p> <ul style="list-style-type: none"> <li>• the full name (if any) of the trust;</li> <li>• the full name of the trustee(s), and</li> <li>• the full name of the settlor of the trust (unless the material asset contribution to the trust by the settlor at the time the trust is established is less than \$10,000 or the settlor is deceased).</li> </ul>
<b>Who is a senior managing official?</b>	<p>A senior managing official is an individual who makes, or participates in making, decisions that affect the whole, or a substantial part of the company, or that may significantly affect the company's financial standing.</p>
<b>Who is a beneficial owner?</b>	<p>A beneficial owner is an individual who ultimately owns (directly or indirectly) 25% or more of the customer, or controls (directly or indirectly) the Customer. Control includes control as a result of, or by means of, trusts, agreements, arrangements, understandings and practices, whether or not having legal or equitable force and whether or not based on legal or equitable rights, and includes exercising control through the capacity to determine decisions about financial and operating policies.</p> <p>Information that may assist you in determining your beneficial owner includes (as relevant):</p> <ul style="list-style-type: none"> <li>• a certificate of incorporation of a company with ASIC/and or an annual statement including the amendments submitted to ASIC</li> <li>• a trust deed</li> <li>• a partnership agreement</li> <li>• the constitution and/or certificate of information for an incorporated association, or</li> <li>• the constitution of a registered co-operative.</li> </ul>
<b>Determining the beneficial owner of a trust</b>	<p>A beneficial owner of a trust may include:</p> <ul style="list-style-type: none"> <li>• any individual shareholder who holds the legal title to 25% or more of the issued shares in the trustee;</li> <li>• directors of the trustee (if they own or control the trustee)</li> <li>• company secretary of the trustee (if they own or control the trustee), and/or</li> <li>• any other individual who has the power to appoint or remove the trustee as the trustee of the trust.</li> </ul> <p>For a nominee that has been appointed by a related body corporate to hold interests in the fund on trust, the nominee agreement may specify the beneficial owner. This may be (but is not necessarily) the person that appointed the nominee.</p> <p>For a foreign company making an investment as a custodian under a single trust with multiple beneficiaries, the trust document under which the custodian is appointed may specify the beneficial owner/s.</p> <p>For a foreign company making an investment acting as a custodian for multiple trusts with multiple underlying investors, each trust document with each underlying investor may specify the beneficial owner/s.</p>
<b>Guidance on types of trusts</b>	<p>You will be the trustee of a trust if you are an individual or a company that will hold interests in the fund on trust for another person or persons (known as the beneficiary). It is important to carefully consider who is the beneficiary of the trust for which you are the trustee, keeping in mind that the beneficiary may hold its interest on trust for someone else (i.e. there may be layers of trust relationships down to the underlying investor).</p> <p>Trustees may include:</p> <ul style="list-style-type: none"> <li>• <b>Trustees of a managed investment scheme:</b> Managed investment schemes are a type of trust. The trustee of a managed investment scheme is generally a company. If the managed investment scheme is registered with ASIC, the trustee is known as the responsible entity.</li> <li>• <b>Custodians or nominees:</b> These are companies that provide custodial or depository services. In the context of managed investment schemes, custodians or nominees may hold interests on trust for the responsible entity of the scheme. The responsible entity for the scheme then holds interests on trust for the investors in that scheme. In the context of margin lending, a nominee may hold interests on trust for the borrower who has borrowed money from the margin lender.</li> <li>• <b>Trustees of self - managed super funds:</b> SMSFs are a type of trust. The trustee of an SMSF may be a company or two to six individuals. If the trustee is a company, there can be one to six members (or beneficiaries) of the SMSF and each member of the SMSF must be a director of the company trustee. If the trustees are individuals, there can be two to six members (or beneficiaries) of the SMSF and each of those members must be a trustee.</li> <li>• <b>Trustees of retail super funds:</b> Retail super funds are a type of trust. The trustee of a retail super fund is a company.</li> <li>• <b>Trustees of family trusts:</b> The trustee of a family trust may be one or more individuals or a company or other type of entity. The trustee holds money or property for the beneficiaries of the family trust.</li> <li>• <b>Trustees of charitable trusts:</b> Some charities are structured as trusts. Trustees of charitable trusts are commonly individuals (for example, a board of trustees) or a company. Other charities may be structured as companies or associations.</li> <li>• <b>Trustees of deceased estates and testamentary trusts:</b> Testamentary trusts are discretionary trusts established in wills, that allow the trustees of each trust to decide, from time to time, which of the nominated beneficiaries (if any) may receive the benefit of the distributions from that trust for any given period.</li> </ul>

<b>Where to find trust relationship details?</b>	<p>This will depend on the type of trust in respect of which you are acting as a trustee.</p> <p>For example, some investors act as a nominee or sub-custodian for a related body corporate that acts as a custodian. In this scenario, the investor may look to the relationship agreement with the relevant related body corporate to find details of the trust relationship that may exist between the investor and the related body corporate. The person or entity that appoints a nominee to act as a trustee may be the related body corporate.</p>
<b>Translating documents by an accredited translator</b>	<p>In Australia an accredited translator means a professional translator accredited by the National Accreditation Authority for Translators and Interpreters (NAATI) at or above professional level.</p> <ul style="list-style-type: none"> <li>• NAATI (<a href="https://www.naati.com.au/">https://www.naati.com.au/</a>)</li> </ul> <p>In an overseas country, an accredited translator is a professional translator accredited by a NAATI equivalent authority. For these, escalate to the AML compliance officer for assistance.</p>
<b>Getting your copies or extracts certified</b>	<p>Any document(s) requiring certification for verification purposes must be certified by an eligible person to be a true copy of the original document. Documents must be either certified on all pages or certified on the front page with a clear reference to the number of subsequent pages that are included.</p>
<b>Example of certification</b>	<p>I certify that this is a true and correct copy of the original document</p> <p>Signature of Certifier</p> <p>Name of Certifier</p> <p>Capacity of certifier – e.g. Justice of the Peace</p> <p>Date of certification (DD/MM/YYYY)</p>
<b>List of occupations that can certify (from the Statutory Declaration Regulations 2018)</b>	<ul style="list-style-type: none"> <li>• Architect</li> <li>• Chiropractor</li> <li>• Dentist</li> <li>• Financial advisor or financial planner</li> <li>• Legal practitioner</li> <li>• Medical practitioner</li> <li>• Midwife</li> <li>• Migration agent registered under Division 3 of Part 3 of the Migration Act 1958</li> <li>• Nurse</li> <li>• Occupational therapist</li> <li>• Optometrist</li> <li>• Patent attorney</li> <li>• Pharmacist</li> <li>• Physiotherapist</li> <li>• Psychologist</li> <li>• Trade marks attorney</li> <li>• Veterinary surgeon</li> </ul>
<b>List of persons that can certify</b>	<ul style="list-style-type: none"> <li>• 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);</li> <li>• a judge of a court</li> <li>• a magistrate</li> <li>• a chief executive officer of a Commonwealth court</li> <li>• a registrar or deputy registrar of a court</li> <li>• a Justice of the Peace</li> <li>• a notary public (for the purposes of the Statutory Declaration Regulations 2018)</li> <li>• a police officer</li> <li>• an agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public</li> <li>• 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</li> <li>• an Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955)</li> <li>• an officer with 2 or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 2018)</li> <li>• a finance company officer with 2 or more continuous years of service with one or more financial companies (for the purposes of the Statutory Declaration Regulations 2018)</li> <li>• an officer with, 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 and</li> <li>• a member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with 2 or more years of continuous membership.</li> </ul>