

TFN / ABN NOTIFICATION

Use this form to notify us of your Australian Tax File Number (TFN), Australian Business Number (ABN), your tax status or tax exemption. Please complete in black or blue pen and use CAPITAL letters.

Fund Name:

1. Investor Details

Investor Name:

Investor Number:

Contact Details

Contact name: Contact phone:

Contact email:

2. Taxation details

Where the investment in the fund is held jointly by 2 or more unitholders taxation details for each unitholder need to be provided and this form needs to be completed for each unitholder.

Name:												
Are you a resident of Australia for taxation purposes? (Select <input checked="" type="checkbox"/> one of the following options)												
<input type="checkbox"/> Yes - please complete the below												
<input type="checkbox"/> No – please provide country of residence: _____												
TFN / ABN:												
Please indicate to whom this TFN or ABN belongs (Select <input checked="" type="checkbox"/> one of the following options):												
<input type="checkbox"/> Individual <input type="checkbox"/> Company <input type="checkbox"/> Trust or Superannuation Fund <input type="checkbox"/> Other – please specify: _____												
Exemption Number (if applicable):												

Please note: You are not obliged to provide either your TFN or ABN but if you do not provide either your TFN or ABN and unless you claim a TFN exemption, the Responsible Entity / Trustee will be required to deduct tax at the highest marginal tax rate (plus Medicare levy). By inserting the ABN and signing this form, you declare that the investment in the above fund is made in the course or furtherance of your enterprise. Collection of TFN information is authorised and its use and disclosure are strictly regulated by the tax and privacy laws.

3. Authorisation

I/we instruct Link Fund Solutions (LFS) to effect this request in accordance with the completed instructions set out above. I/we acknowledge that any personal information I/we provide to LFS will be collected and handled in accordance with Link Fund Solutions' privacy policy, a copy of which can be found at www.linkfundsolutions.com or posted / emailed to us if we contact LFS on +612 9547 4311 or LFS_registry@linkgroup.com. By submitting this form or any other paperwork relating to my/our investment I/we consent to my/our personal information being collected and handled by the unit registry in accordance with that policy.

Signature		Signature	
Print Name		Print Name	
Title (circle)	Individual / Sole Director/ Director/ Trustee	Title (circle)	Individual / Sole Director/ Director/ Trustee
Date		Date	

Please note it's up to the investor to ensure White Outsourcing have been notified of authorised signatories on this account. Where we cannot match the signature to the initial application form or signatory list provided there maybe delays in processing of this request.

4. Completed Form

Please return the completed form to:

- scan and email this request to LFS_registry@linkgroup.com or
- Please post this completed form to:

Link Fund Solutions
Attention: Unitholder Services
GPO Box 5482
Sydney NSW 2001

If you have any questions about this form please contact us on (02) 9547 4311 or LFS_registry@linkgroup.com.