



**UBS Asset Management (Australia) Ltd
Client Services contact details**

Phone

Within Australia: 1800 572 018 (free call)
International: +61 3 9046 4041

Email

ubs@unitregistry.com.au

Website

www.ubs.com/am-australia

Application Form

Please use this form if you are a new investor and wish to invest directly in a UBS Asset Management (Australia) Ltd Fund by making an initial application.

Indirect investors should contact their IDPS operator for instructions on how to apply.

1. Read and ensure you understand the Product Disclosure Statement (PDS) and the additional information booklet

The PDS and 'booklet' are available at www.ubs.com/au/en/asset_management/prices/pds-and-reports and/or from your financial advisor. The law prohibits any person passing this Application Form on to another person unless it is accompanied by a complete PDS. We will provide, on request and without charge, a paper or electronic copy of the current PDS and its incorporated documents.

2. Complete all relevant sections of this application form either:

- **online** - then print and sign in the relevant fields using a black pen; or
- **manually** - please write in BLOCK letters, using a black pen. If you make an error while completing this form, do not use correction fluid. Cross out your mistakes and initial your changes.

Individuals: complete section 1, section 2 and then section 5 onwards.

Companies: complete section 1, section 3 and then section 5 onwards.

Trusts/superannuation funds: if you are an individual trustee - complete section 1, section 2 and then section 4 onwards; if you are a trust with a company as a trustee – complete section 1, section 3 and then section 4 onwards.

Government bodies: complete section 1, section 3 and then section 5 onwards.

Partnerships/Associations/Co-opertives: complete section 1, section 3 and then section 5 onwards.

3. Certify and collect the identification documents

Please refer to section 10 'Identification and verification' and complete the relevant identification document attached to this Application Form.

4. Tell us your tax status

Please complete the Tax information form at www.ubs.com/au/en/asset_management/prices/forms.

5. Send your documents to us.

You can return your forms by post to the details below:

UBS Asset Management (Australia) Ltd
GPO Box 804
Melbourne VIC 3001

6. Transfer your application money to us.

Please refer to section 6 'Payment of application amount'.

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

Legal notices

UBS Asset Management (Australia) Ltd ABN [31 003 146 290], Australian Financial Services Licence [222605], is the Responsible Entity and issuer of this Application Form.

Your privacy is important to us. We will treat all personal information in accordance with UBS Asset Management (Australia) Ltd's Privacy Policy. A copy of the Privacy Policy can be obtained by calling 1800 572 018 or +61 3 9046 4041 or from UBS Asset Management (Australia) Ltd's website: www.ubs.com/au/en/asset_management/privacy-policy.html

Last updated: 21 April 2021

Section 1. Are you an existing investor?

No, complete section 2 onwards.

Yes, please complete the 'Additional Application Form' found at www.ubs.com/au/en/asset_management/prices/forms

Section 2. Individuals and sole traders

Please complete if you are investing individually, jointly or you are an individual or joint trustee.

Investor 1 – Personal Details

Title Full given names

Surname

Date of birth (DD/MM/YYYY)

Residential address (A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Postal address (if different to residential address)

A PO Box/RMB/Locked Bag is acceptable.

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Sole trader?

No Yes

If you are a sole trader, what is your business name?

Principal place of business

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Contact details

Home number (include country and area code)

Business number (include country and area code)

Mobile number (include country code)

Email address

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

ABN

Tax details — Australian residents

If you are an Australian resident for tax purposes please provide your

Tax File Number (TFN) or reason for exemption. If you are an Australian resident and 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

Tax details — Non Australian residents

If you are not an Australian resident for tax purposes, please indicate your country of residence for tax purposes.

Investor 2 – Personal Details

Title Full given names

Surname

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

Residential address (A PO Box is not acceptable)
Property/Building name (if applicable)

Unit/Level Street number

Street name

Suburb State

Post code Country

Postal address (if different to residential address)
A PO Box/RMB/Locked Bag is acceptable.

Property/Building name (if applicable)

Unit/Level Street number

Street name

Suburb State

Post code Country

Sole trader?
 No Yes

If you are a sole trader, what is your business name?

Principal place of business

Property/Building name (if applicable)

Unit/Level Street number

Street name

Suburb State

Post code Country

Contact details

Home number (include country and area code)

Business number (include country and area code)

Mobile number (include country code)

Email address

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

ABN

Tax details — Australian residents

If you are an Australian resident for tax purposes please provide your Tax File Number (TFN) or reason for exemption. If you are an Australian resident and 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

Tax details — Non Australian residents

If you are not an Australian resident for tax purposes, please indicate your country of residence for tax purposes.

If there are more than two individual investors or trustees, please provide the full name, date of birth, and residential address of each on a separate sheet and attach to this form.

Section 3. Companies/Government Body/Partnership/Association/Co-operative

Please complete if you are investing as a company or as a trust with a corporate trustee.

Note: You are also required to complete the relevant Identification Form.

Company details

Full name of company (as registered by ASIC)

ACN or ABN (for foreign companies, provide your Australian Registered Body Number (ARBN) if you have one)

Australian Tax File Number (TFN)

Country of residency (if a foreign company)

Registered office address (A PO Box is not acceptable)

If you are a foreign company, write the address of your Australian registered agent (if you have one) or else write your principal place of business.

Name of Australian registered agent (if applicable)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Postal address (if different to above)

A PO Box/RMB/Locked Bag is acceptable.

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Contact person at company

Name

Home number (include country and area code)

Business number (include country and area code)

Mobile number (include country code)

Email address

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

Section 4. Trusts or superannuation funds

Please complete if you are investing as a trust or superannuation fund. Individuals and non-corporate trustee(s) must also complete sections 2 and 3. Corporate trustees must also complete sections 2 and 4.

Note: You are also required to complete the Identification Form - Trusts & Trustees.

Trust or superannuation fund details

Name of trust or superannuation fund

ABN (applicable if you are a trust or a self-managed superannuation fund registered with the Australian Tax Office)

Australian Tax File Number (TFN)

Section 5. Investment details and distribution instructions

Please specify your initial application amount.

There is typically a minimum investment amount of \$10,000 per Fund, however, we may waive or vary the investment minimums.

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

Fund name	APIR code	Investment amount	Income distribution option	
			Pay to my bank a/c	Reinvest as additional units
Equities		AUD	(indicate preference with X)	
UBS Australian Share Fund	SBC0817AU	\$		
UBS Australian Small Companies Fund	UBS0004AU	\$		
UBS Australian Small Companies SIV Fund (Significant Investor Visa)	UBS0063AU	\$		
UBS Emerging Markets Equity Fund	UBS8018AU	\$		
UBS Microcap Fund	UBS0057AU	\$		
UBS International Share Fund	SBC0822AU	\$		
Property Securities and Infrastructure				
UBS Clarion Global Infrastructure Securities Fund	UBS0064AU	\$		
UBS Clarion Global Property Securities Fund	HML0016AU	\$		
UBS Property Securities Fund	SBC0816AU	\$		
Fixed Income and cash				
UBS Australian Bond Fund	SBC0813AU	\$		
UBS Cash Fund	SBC0811AU	\$		
UBS Short-Term Fixed Income Fund	SBC0812AU	\$		
UBS Diversified Fixed Income Fund	SBC0007AU	\$		
UBS Income Solution Fund	UBS0003AU	\$		
UBS International Bond Fund	SBC0819AU	\$		
Multi-asset				
UBS Balanced Investment Fund	SBC0815AU	\$		
UBS Defensive Investment Fund	SBC0814AU	\$		
UBS Tactical Beta - Balanced	UBS0041AU	\$		
UBS Tactical Beta - Conservative	UBS0036AU	\$		
UBS Tactical Beta - Growth	UBS0037AU	\$		

Please indicate the source and origin of funds being invested:

savings

investment

superannuation contributions

commission

donation/gift

inheritance

normal course of business

asset sale

other – write the source and origin of funds below:

Section 6. Payment of application amount

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

I am making my payment by:

Electronic Funds Transfer (EFT)

Cheque

 BPAY®

Direct Debit

EFT

Account name: National Nominees Ltd OCA
UBS Application Account

BSB: 083-043

Account number: 860406676

Your reference: [please use the name of the investor]

Cheque

Please make your cheque payable to: National Nominees Limited
ANF UBS Asset Management (Australia) Ltd

Please cross and write 'not negotiable' on Australian cheques only.

BPAY – telephone and internet banking

You can make your payment using telephone or internet banking.

You will need to quote the Fund biller code and your investor number when making your payment. **Biller codes are listed below.**

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

®Registered to BPAY Pty Ltd ABN 69 079 137 518

Fund BPAY® biller codes

If you'd like to make a payment to this Fund	Your BPAY® Biller code	Reference number
UBS Australian Bond Fund	269340	your Investor Number
UBS Australian Share Fund	270058	your Investor Number
UBS Australian Small Companies Fund	269407	your Investor Number
UBS Balanced Investment Fund	269332	your Investor Number
UBS Cash Fund	269415	your Investor Number
UBS Short-Term Fixed Income Fund	269357	your Investor Number
UBS Clarion Global Infrastructure Securities Fund	269365	your Investor Number
UBS Clarion Global Property Securities Fund	270041	your Investor Number
UBS Defensive Investment Fund	270033	your Investor Number
UBS Diversified Fixed Income Fund	270017	your Investor Number
UBS Emerging Markets Equity Fund	290304	your Investor Number
UBS Income Solution Fund	269126	your Investor Number
UBS International Bond Fund	269456	your Investor Number
UBS International Share Fund	269449	your Investor Number
UBS Microcap Fund	269431	your Investor Number
UBS Property Securities Fund	269423	your Investor Number
UBS Tactical Beta Fund - Balanced	269399	your Investor Number
UBS Tactical Beta Fund - Conservative	269381	your Investor Number
UBS Tactical Beta Fund - Growth	269373	your Investor Number

Section 7. Financial institution 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.

Name of Australian bank or financial institution

Branch name

BSB number

Account number

Account name (no third party accounts)

Section 8. Regular savings plan

I/We would like to establish a Regular savings plan: Yes

I/We elect to invest the below set amount on a monthly basis:

Fund name

Monthly investment amount AUD (minimum \$1,000 per month)

Please complete the Direct Debit Request in section 6 'Payment of application amount' above.

Section 9. Regular income plan

I/We would like to establish a Regular income plan: Yes

I/We elect to withdraw the below set amount on a monthly basis:

Fund name

Monthly income amount AUD (minimum \$1,000 per month)

Regular monthly income will be paid to the bank account nominated under section 7 'Financial Institution account details' above.

Section 10. 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 and semi-annual report options

The annual and any semi-annual financial statements of the Fund are available free on our website. If you would like to receive a copy by

post or email, please indicate below (this refers to annual and semi-annual reports only. This will not affect communication instructions regarding general correspondence for your Fund).

By email By post

Marketing material

Please ensure **NO** marketing material is sent to me.

Section 11. 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. You can also use this section to authorise us to pay your financial adviser their fees. If you would like your financial adviser to receive copies of your statements by email please enter their email address below.

Email address

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.

Financial adviser details

Dealer group name

Advisor name

AFSL number

Authorised representative number (if any)

Section 11. Financial adviser details (continued)

ABN

--	--	--	--	--	--	--	--	--	--

Address

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Postal address (if different to above)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Contact details

Business number (include country and area code)

Mobile number (include country code)

Adviser signature

Initial advice fee* – I/We direct the Responsible Entity to pay the following fee out of my initial investment for the Fund to the adviser detailed above.

0.00% 1.1% 2.2% 3.3%

Other % (max 3.3%)

* This initial advice fee applies to this application only. If you make additional contributions, you will need to specify any advice fee you agree to pay your adviser in your instructions.

Ongoing advice fee – I/We direct the Responsible Entity to redeem a sufficient number of units at the end of each quarter to pay the following fee to the adviser above provided that the fund is liquid (as defined in the Corporations Act). Only the following options are permitted. Please note that each payment is considered a redemption and generally, capital gains tax calculations will be required. Please refer to the taxation summary in the additional information booklet for further information on tax consequences.

0.00% 0.275%pa 0.55%pa 0.825%pa

1.1%pa Other % (max 1.1%)

Section 12. Declarations and acknowledgments

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

- monies deposited are not associated with crime, terrorism, money laundering or terrorism financing, nor will monies received from your account have any such association,
- you are not bankrupt,
- you agree to be bound by the constitution of the Fund and the PDS as supplemented, replaced or re-issued from time to time, and,
- you consent to the handling of your personal information in accordance with the Privacy Act 1988 and relevant privacy policies.

I/We have read the product disclosure statement relating to the Fund (including the Additional Information Booklet) and declare that I/we were physically in Australia at the time of making the application.

I/We declare that statements made in this Application Form are, to the best of my/our knowledge and belief, true, correct and complete.

I/We agree to be bound by the terms and conditions of the Fund's product disclosure statement and the relevant Constitution pursuant to which the relevant Fund was established as amended from time to time.

I/We agree to inform UBS Asset Management (Australia) Ltd of any changes that affects the tax residence status of the Account Holder identified above or causes the information contained in this Application Form and all associated documentation to become

incorrect or incomplete (including any changes to the information on the Controlling Persons identified above) within 30 days.

I/We confirm that I/we am/are tax resident only in the jurisdiction(s) I/ we have listed in this this Application Form and in no other jurisdiction.

I/We acknowledge that:

- I/we are 18 years of age or over.
- This Application Form was included in, or accompanied by the Fund's product disclosure statement (including the Additional Information Booklet), which I/we have read and understood.
- None of UBS Asset Management (Australia) Ltd, any division of UBS AG, or National Australia Bank Limited guarantees the performance of the Fund or the return or payment of capital or income.
- Investing in the Fund is subject to investment risk, including possible delays in repayment and loss of income and principal invested.
- I/we agree to provide UBS Asset Management (Australia) Ltd with any information that may be required for the purposes of AML/CTF law.
- I/we agree to provide UBS Asset Management (Australia) Ltd on request with any information and/or documentation requested for the purposes of its obligations under the intergovernmental agreement (IGA) entered into between the Australian and

U.S. governments in relation to the U.S. Foreign Account Tax Compliance Act (FATCA) on 28 April 2014.

- I/we also agree to promptly notify UBS Asset Management (Australia) Ltd if a change in my/our circumstances means that any of the information or documentation provided is no longer correct.
- Joint applicants or signatories who allow either investors or signatories to give instructions in relation to an investment in the Fund will bind other investors or signatories for all transactions in connection with the investment, including changes to account details.
- If I/we move overseas and change our address to a non-Australian address I/we will no longer be able to make additional investments, switch between funds or reinvest my/our dividend distributions.
- My/our investment in the Fund does not represent deposits or other liabilities of UBS AG or other member company of the UBS AG group.

In the event of fraud taking place in respect of my/our units, I/we agree to release, discharge and indemnify UBS Asset Management (Australia) Ltd from and against all actions, proceedings, accounts, claims, costs, demands, charges and expenses, losses and liabilities (however they arise) to the extent permitted by law, suffered by me/us or suffered by or brought against me/us, in respect of any written instructions provided to UBS Asset Management (Australia) Ltd.

- If any tax residence(s) listed in this Application Form is/are located outside of the jurisdiction in which the Fund has its tax residence, the information contained in this Application Form and information regarding the relevant investment(s) (including the account balance or value and the total amount of any payments of dividends, interest, other income and gross proceeds made or credited to the account) may be reported by UBS Asset Management (Australia) Ltd under its obligations as a Reporting Financial Institution to the relevant tax authorities.

Section 13. Signatures

Signing instructions

Individual — where the investment is in one name, the sole investor must sign.

Joint Holding — where the investment is in more than one name, all investors must sign. If more than two signatures are required, please attach an additional page with the full names of each account holder, their signatures, and date.

Companies — where the company has a sole director who is also the sole company secretary, this form must be signed by that person. If the company (pursuant to section 204A of the Corporations Act 2001) does not have a company secretary, a sole director can also sign alone. Otherwise this form must be signed by a director jointly with either another director or a company secretary. Please indicate the capacity in which the form is signed.

Trust — the trustee(s) must sign this form. Trustee(s) signing on behalf of the trust confirm that the trustee(s) is/are acting in accordance with such designated powers and authority under the trust deed.

Power of Attorney — if signing under a Power of Attorney and you have not already lodged the Power of Attorney document, please attach an original certified copy of the Power of Attorney annotated with the following: I/We attest that the Power of Attorney has not been rescinded or revoked and that the person who gave the Power of Attorney is still living.

Signature of investor 1, director or authorised signatory

Please print full name

Date (DD/MM/YYYY)

Company officer (please indicate company capacity)

- Director
 Sole director and company secretary
 Authorised signatory

Signature of investor 2, director/company secretary or authorised signatory

Please print full name

Date (DD/MM/YYYY)

Company officer (please indicate company capacity)

- Director
 Company secretary
 Authorised signatory

If you are investing jointly or are a joint trustee, please indicate whether a single investor can operate your account.

Yes No

Original certified ID attached

Phone

Within Australia: 1800 572 018 (free call)
International: +61 3 9046 4041

Email

ubs@unitregistry.com.au

Website

www.ubs.com/am-australia

Instructions: Identification forms

Which form?

There are five forms that follow: one each for Individuals, Companies, Trustees, Government bodies and Partnerships/Associations/Registered co-operatives.

Choose the form that is applicable to you.

Copies or originals?

This form asks you to send us certain documents. Please send us original certified copies, not the original document. We will keep what you send to us.

Certifying copies

You must have someone certify the copies you send to us. The following people can be the certifier:

- a Justice of the Peace
- a Notary public (for the purposes of the Statutory Declaration Regulations 1993)
- an agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
- a permanent employee of the Australian Postal Corporation with 2 or more years of continuous service who is employed in an office supplying postal services to the public
- an 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
- an officer with 2 or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 1993)
- a finance company officer with 2 or more continuous years of service with one or more finance companies (for the purposes of the Statutory Declaration Regulations 1993)
- 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
- 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)
- a Judge of a court
- a magistrate
- a chief executive officer of a Commonwealth court
- a registrar or deputy registrar of a court
- a Police officer
- an Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955).

What should the person certifying write?

"I [name] of [address] being [capacity e.g. Justice of the Peace] certify this and the following [x] pages as a true copy of the original document." Each page should be initialed by the person certifying your documents.

Not in English?

Documents not in English must be accompanied by an English translation prepared by an accredited translator. Contact us if you need guidance on accredited translators.

If you have any questions relating to your investments in the Funds, please call Client Services on 1800 572 018 (Australia wide) or internationally on +61 3 9046 4041.

Phone

Within Australia: 1800 572 018 (free call)
International: +61 3 9046 4041

Email

ubs@unitregistry.com.au

Website

www.ubs.com/am-australia

Identification form – Individuals

Please complete this form if you have not previously invested in one of UBS Asset Management’s Funds. A separate form is required for each investor in the case of joint holdings.

If you are a trustee, do NOT complete this form. Complete the Identification form – Trusts and Trustees found on page 18.

1. Please complete all sections in BLOCK letters, using a black pen. If you make an error while completing this form, do not use correction fluid. Cross out your mistakes and initial your changes.
2. Make copies of your ID document(s) and arrange for them **to be certified**. Please refer to the ‘Instructions’ on page 9 for more information on getting your documents certified.
3. Include this identification form and original certified copies of your ID documents with your initial application form when you send it to us.

Legal notices

UBS Asset Management (Australia) Ltd ABN [31 003 146 290], Australian Financial Services Licence [222605], is the Responsible Entity and issuer of this Application Form.

Your privacy is important to us. We will treat all personal information in accordance with UBS Asset Management (Australia) Ltd’s Privacy Policy. A copy of the Privacy Policy can be obtained by calling 1800 572 018 or +61 3 9046 4041 or from UBS Asset Management (Australia) Ltd’s website: www.ubs.com/au/en/asset_management/privacy-policy.html

1. Individuals

Personal details

Title Full given names

Surname

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

Town or city of birth

Country of birth

Full business name (for sole traders only)

Usual occupation

Residential address (A PO Box is not acceptable).
Property/Building name (if applicable)

Unit/Level Street number

Street name

Suburb State

Post code Country

Postal address (if different to residential address)
A PO Box/RMB/Locked Bag is acceptable.

Property/Building name (if applicable)

Unit/Level Street number

Street name

Suburb State

Post code Country

Verification procedure – individual investor

Please provide a original certified copy of one document from Group 1 or if you can't, a **original certified copy** of two documents from Group 2 for each individual applicant.

Group 1

Provide a **original certified copy** of one of these:

current Australian driver's licence
showing your photo, and please copy the front and back OR

current foreign driver's licence
showing your date of birth, signature and photo OR

current Australian passport
a passport that has expired within the preceding two years is acceptable, and please copy the pages which identify you OR

current foreign passport
showing your signature and photo, and please copy the pages which identify you OR

current Australian State or Territory Government issued ID card
showing your date of birth, signature and photo OR

current foreign Government issued ID card
showing your date of birth, signature and photo.

Group 2

If you can't provide anything from Group 1, then provide a **original certified copy** of one of the following:

Australian or foreign government issued birth certificate
OR

Australian or foreign government issued citizenship certificate
OR

current Centrelink pension or health card
please copy the front and back.

PLUS provide a original certified copy of one of the following:

a Government issued notice
one which shows your name and residential address, not more than 12 months old OR

a rates or utilities notice
one which shows your name and residential address, not more than 3 months old OR

ATO notice
one which shows any debt owing to the ATO, your name and residential address, not more than 12 months old.

*Refer to page 10 for a list of acceptable certifiers

Signature

Date (DD/MM/YYYY)
 / /

Phone

Within Australia: 1800 572 018 (free call)

International: +61 3 9046 4041

Email

ubs@unitregistry.com.au

Website

www.ubs.com/am-australia

Identification form – Australian and Foreign companies

Please complete this form if you are a company investing for the first time in one of UBS Asset Management's Funds.

If you are a trustee, do NOT complete this form. Complete the Identification form – Trusts and Trustees found on page 18.

1. Please complete all sections in BLOCK letters, using a black pen. If you make an error while completing this form, do not use correction fluid. Cross out your mistakes and initial your changes..
2. Make copies of your ID document(s) and arrange for them **to be certified**. Please refer to the 'Instructions' on page 9 for more information on getting your documents certified.
3. Include this identification form and original certified copies of your ID documents with your initial application form when you send it to us.

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1. Australian and foreign companies

1.1 General information

Full name of company

Nature of business

1.2 Australian companies

Principal place of business (if different to registered office address). A PO Box is not acceptable.

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Please provide us with a copy of:

an ASIC search

1.3 Foreign companies

Country Established if not Australia

Principle business / industry in which the entity operates (required)

Registered in Australia?

No Yes – what is the ARBN:

Registered in country of formation?

No Yes – name of regulator/exchange:

Identification number issued by foreign registration body

Name of foreign registration body

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

If you are a foreign company not registered in Australia write your registered business address in country of formation or principal place of business if there is not a registered address.

(A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country (if not Australia)

Please provide us with copies of one of the following:

a Full Company Extract from ASIC OR

an ASIC or foreign regulator certificate of registration.

2. Company type

Please complete the section below for public companies (section 2.1) or private companies (section 2.2) (as applicable).

2.1 Public company

Are you a public company?

No Yes

If yes, please proceed to section 3.

2.2 Private company

Are you a private company?

No Yes

If yes, please complete the director details section below if you are a private Australian company or a private foreign company. Do not complete for public companies.

Director details

How many directors are there?

Provide the full name of each director:

Director 1

Title Full given names

Surname

Director 2

Title Full given names

Surname

Director 3

Title Full given names

Surname

Director 4

Title Full given names

Surname

If there are more directors, please provide their name on a separate sheet and attach to this form.

3. Regulated/listed companies

Are you an Australian listed company?

No Yes – please provide name of market/exchange

Market/exchange

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

No Yes – please provide name of listed company and market/exchange

Company

Market/exchange

Are you a regulated company?

One that is licensed by an Australian Commonwealth, State or Territory statutory regulator.

No Yes – please provide details of the regulator and licence number

Regulator

Licence number

Verification

If you answered yes to any of these questions, please provide us with a original certified copy of one of the following and sign the form at the end. For you, this form is then complete.

- an ASIC search OR
- a search of the licence or other records of the relevant regulator OR
- a public document issued by the company OR
- a search of the relevant market/exchange

4. Non-regulated/non-listed companies

If you answered no to all the questions above in 3, please fill in 4.1, 4.2 and 4.3 below.

4.1 Beneficial owner details

Provide details of all beneficial owners who are individuals who, through one or more shareholdings, ultimately own 25% or more of the company's issued capital or who control (whether directly or indirectly) the company and either the date of birth or full residential address of each beneficial owner.

HELP

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.

Beneficial owner 1

Title Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)

Usual occupation/Nature of business

Residential address/Registered office address.
(A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Beneficial owner 2

Title Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)

Usual occupation/Nature of business

Residential address/Registered office address.
(A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Beneficial owner 3

Title Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)

Usual occupation/Nature of business

Residential address/Registered office address.
(A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Beneficial owner 4

Title Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)

Usual occupation/Nature of business

Residential address/Registered office address.
(A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Verification procedure - beneficial owners

Please provide a **original certified copy** of one document from Group 1 or if you can't, a original certified copy of two documents from Group 2 for each individual applicant.

Group 1

Provide a **original certified copy** of one of these:

current Australian driver's licence

showing your photo, and please copy the front and back OR

current foreign driver's licence

showing your date of birth, signature and photo OR

current Australian passport

a passport that has expired within the preceding two years is acceptable, and please copy the pages which identify you OR

current foreign passport

showing your signature and photo, and please copy the pages which identify you OR

current Australian State or Territory Government issued ID card

showing your date of birth, signature and photo OR

current foreign Government issued ID card

showing your date of birth, signature and photo.

Group 2

If you can't provide anything from Group 1, then provide a **original certified copy** of one of the following:

Australian or foreign government issued birth certificate
OR
Australian or foreign government issued citizenship certificate
OR
current Centrelink pension or health card

please copy the front and back.

PLUS provide a original certified copy of one of the following:

a Government issued notice

one which shows your name and residential address, not more than 12 months old OR

a rates or utilities notice

one which shows your name and residential address, not more than 3 months old OR

ATO notice

one which shows any debt owing to the ATO, your name and residential address, not more than 12 months old.

For each corporate beneficial owner please provide:

a completed Identification form – Australian and Foreign companies, plus any relevant identification.

4.2 Voting rights

If there are any other individuals, who have not been listed above in section 4.1, and who are entitled, either directly or indirectly, to exercise 25% or more of the company's voting rights, please provide their name, date of birth, and residential address on a separate sheet and attach to this form.

4.3 Senior Managing Official details

If the company does not have any beneficial owners, please provide the details of the Senior Managing Official (or equivalent).

Title Full given names

Surname

Date of birth (DD/MM/YYYY)

Company title

Residential address/Registered office address
(A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

HELP

Senior managing official: 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.

Verification procedure - senior managing official details

If you are unable to provide details of the beneficial owners in 4.1 above, please provide documentation showing the name of the senior managing official, as provided in this section (4.3).

5. Signature instructions

Where the company has a sole director who is also the sole company secretary, this form must be signed by that person. If the company (pursuant to section 204A of the Corporations Act 2001) does not have a company secretary, a sole director can also sign alone. Otherwise this form must be signed by a director jointly with either another director or a company secretary. Please indicate the capacity in which the form is signed.

Signature of director 1

Please print full name

Date (DD/MM/YYYY)

Company officer (please indicate company capacity)

Director

Sole director and company secretary

Signature of director 2/company secretary

Please print full name

Date (DD/MM/YYYY)

Company officer (please indicate company capacity)

Director

Company secretary

Phone

Within Australia: 1800 572 018 (free call)

International: +61 3 9046 4041

Email

ubs@unitregistry.com.au

Website

www.ubs.com/am-australia

Identification form – Trusts and Trustees

Please complete this form if you have not previously invested in one of UBS Asset Management's Funds.

1. Please complete all sections in BLOCK letters, using a black pen. If you make an error while completing this form, do not use correction fluid. Cross out your mistakes and initial your changes.
2. Make copies of your ID document(s) and arrange for them **to be certified**. Please refer to the 'Instructions' on page 9 for more information on getting your documents certified.
3. Include this identification form and original certified copies of your ID documents with your initial application form when you send it to us.

Legal notices

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Your privacy is important to us. We will treat all personal information in accordance with UBS Asset Management (Australia) Ltd's Privacy Policy. A copy of the Privacy Policy can be obtained by calling 1800 572 018 or +61 3 9046 4041 or from UBS Asset Management (Australia) Ltd's website: www.ubs.com/au/en/asset_management/privacy-policy.html

1. Trust details

Full name of trust

Business name (if any)

Country in that the trust was established

Principal business / industry in which the entity operates

Name of Settlor (the person who settles the initial sum to create the Trust)

Please indicate if there is no settlor, or settlor contributed less than \$10,000 or the settlor is deceased

2. Type of trust

2.1 Regulated trusts

This includes complying superannuation funds and SMSFs

Superannuation fund - or another type of trust registered and regulated by an Australian Commonwealth statutory regulator

No Yes

If yes, please tell us:

The trust's ABN

The regulator if not APRA or the ATO

Any licence number

Registered managed investment scheme

No Yes

If yes, please tell us the ARSN

Government superannuation fund

No Yes

If yes, please tell us the name of the Act that regulates the trust

If you answered yes to any of these questions, then please provide a original certified copy of one of the following:

superannuation funds

go to www.abn.business.gov.au, select the 'Super Fund Lookup' option and print out the results for your super fund OR

registered managed investment schemes

an ASIC search of the scheme OR

Government superannuation funds

an extract of the establishing legislation.

2.2 Non-regulated trusts

Including family discretionary trusts, family and other unit trusts, deceased estates and charitable trusts (but not including self-managed super funds)

Is the trust a non-regulated trust?

No Yes

If yes, please specify the type of trust

Please provide full name, address and date of birth of all beneficial owners who are individuals who own 25% or more of the trust income or assets or who control (whether directly or indirectly) the trust and either the date of birth or full residential address of each beneficial owner below:

HELP

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.

Beneficial owner 1

Title Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)

Usual occupation/Nature of business

Residential address (A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Beneficial owner 2

Title Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)

//

Usual occupation/Nature of business

Residential address (A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level Street number

Street name

Suburb State

Post code Country

Beneficial owner 3

Title Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)

//

Usual occupation/Nature of business

Residential address (A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level Street number

Street name

Suburb State

Post code Country

Beneficial owner 4

Title Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)

//

Usual occupation/Nature of business

Residential address (A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level Street number

Street name

Suburb State

Post code Country

If you are a non-regulated trust, please provide us with original certified copies of one of the following:

- a copy or extract of trust deed showing the full name of the trust, full name of the trustee and the signatures; or
- a notice issued to the trust by the ato within the last 12 months (eg notice of assessment); or
- a letter from a qualified solicitor or accountant verifying the name of the trust; or
- a pds/prospectus/offering memorandum showing the full name of the trust;
- and if the trust has individual trustee(s), provide the identification documents for individuals for one trustee

Please provide the name of all beneficiaries that are not beneficial owners.

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

please provide class details (eg family members of a names person)

please provide the full names of each beneficiary below. If you cannot fit all beneficiaries in the space provided, please provide details on a separate page and attach it your form.

Beneficiary 1

Title Full given names

Surname/

Beneficiary 2

Title Full given names

Surname

Beneficiary 3

Title Full given names

Surname

Beneficiary 4

Title Full given names

Surname

Please provide the name of the **appointor** of the trust, if applicable

HELP

Appointor: the appointor has the power to appoint or remove the trustees of the trust. Not all trusts have an appointor.

Name of trust **settlor**

HELP

Settlor: this is the person that creates the trust. The settlor may be, for example, your accountant or solicitor.

Note: you do not need to provide the name of the trust settlor if they are deceased, or the material asset at the time the trust was established was less than \$10,000.

3. Trustee details

3.1 Verification procedure – individual trustee

Trustee 1

Title Full given names

Surname

Date of birth (DD/MM/YYYY)

Usual occupation/Nature of business

Residential address (PO Box not acceptable)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Trustee 2

Title Full given names

Surname

Date of birth (DD/MM/YYYY)

Usual occupation/Nature of business

Residential address (PO Box not acceptable)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Please provide a **original certified copy** of one document from Group 1 or if you can't, a original certified copy of two documents from Group 2 for each individual applicant.

Group 1

Provide a **original certified copy** of one of these:

current Australian driver's licence

showing your photo, and please copy the front and back OR

current foreign driver's licence

showing your date of birth, signature and photo OR

current Australian passport

a passport that has expired within the preceding two years is acceptable, and please copy the pages which identify you OR

current foreign passport

showing your signature and photo, and please copy the pages which identify you OR

current Australian State or Territory Government issued ID card

showing your date of birth, signature and photo OR

current foreign Government issued ID card

showing your date of birth, signature and photo.

Group 2

If you can't provide anything from Group 1, then provide a **original certified copy** of one of the following:

Australian or foreign government issued birth certificate
OR

Australian or foreign government issued citizenship certificate
OR

current Centrelink pension or health card
please copy the front and back.

PLUS provide a original certified copy of one of the following:

a Government issued notice
one which shows your name and residential address, not more than 12 months old OR

a rates or utilities notice
one which shows your name and residential address, not more than 3 months old OR

ATO notice
one which shows any debt owing to the ATO, your name and residential address, not more than 12 months old.

For each corporate beneficial owner please provide:

a completed Identification form – Australian and Foreign companies, plus any relevant identification.

3.2 Verification procedure – company trustees

3.2.1 General information

Full name of company trustee

Nature of business

ACN

3.2.2 Australian company trustee

Place of business (if different to registered office address).

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

Property/Building name (if applicable)

Unit/Level Street number

Street name

Suburb State

Post code Country

3.2.3 Foreign company trustee

Country of formation

Registered in Australia?

No Yes

If yes, please provide the ARBN

Registered in that country?

No Yes

If yes, please provide the name of regulator/exchange

Identification number issued by foreign registration body

Registered business address in country of formation.

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit/Level Street number

Street name

Suburb State

Post code Country (if not Australia)

Please provide us with original certified copies of one of the following:

an ASIC or foreign regulator search OR

an ASIC or foreign regulator certificate of registration.

3.2.4 Company type

Please complete the section below (as applicable).

Are you a public company?

No Yes

If yes, please proceed to section 3.2.5

Are you a private company?

No Yes

If yes, please complete the director details section below if you are a private Australian company or a private foreign company. Do not complete for public companies.

Director details

How many directors are there?

Provide the full name of each director:

Director 1

Title Full given names

Surname

Director 2

Title Full given names

Surname

Director 3

Title Full given names

Surname

Director 4

Title Full given names

Surname

If there are more directors, please provide their name on a separate sheet and attach to this form.

3.2.5 Regulated/Listed companies

Are you an Australian listed company?

No Yes – please provide name of market/exchange

Market/exchange

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

No Yes – please provide name of listed company and market/exchange

Company

Market/exchange

Are you a regulated company?

One which is licensed by an Australian Commonwealth, State or Territory statutory regulator.

No Yes – please provide details of the regulator and licence number

Regulator

Licence number

If you answered yes to any of these questions, please provide us with a original certified copy of one of the following and sign the form at the end. For you, this form is then complete.

an ASIC search OR

a search of the licence or other records of the relevant regulator OR

a public document issued by the company OR

a search of the relevant market/exchange

3.2.6 Non-regulated/non-listed companies

If you answered no to all the questions in section 3.2.5, please fill in the sections 3.2.6 (a), (b) and (c) below.

3.2.6 (a) Beneficial owner details

Provide details of all deneficial owners (i.e. company shareholders) who, through one of more shareholdings, own 25% or more of the company's issued capital.

Beneficial owner 1

Title Full given names

Surname

Date of birth (DD/MM/YYYY)

/ /

Usual occupation/Nature of business

Residential address (A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level Street number

Street name

Suburb State

Post code Country

Beneficial owner 2

Title Full given names

Surname

Date of birth (DD/MM/YYYY)

/ /

Usual occupation/Nature of business

Residential address (A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level Street number

Street name

Suburb State

Post code Country

Beneficial owner 3

Title Full given names

Surname

Date of birth (DD/MM/YYYY)

/ /

Usual occupation/Nature of business

Residential address (A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level Street number

Street name

Suburb State

Post code Country

Beneficial owner 4

Title Full given names

Surname

Date of birth (DD/MM/YYYY)

/ /

Usual occupation/Nature of business

Residential address (A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level Street number

Street name

Suburb State

Post code Country

Verification procedure - beneficial owners

Please provide a original certified copy of one document from Group 1 or if you can't, a original certified copy of two documents from Group 2 for each individual applicant.

Group 1

Provide a **original certified copy** of one of these:

current Australian driver's licence
 showing your photo, and please copy the front and back OR

current foreign driver's licence
 showing your date of birth, signature and photo OR

current Australian passport
 a passport that has expired within the preceding two years is acceptable, and please copy the pages which identify you OR

current foreign passport
 showing your signature and photo, and please copy the pages which identify you OR

current Australian State or Territory Government issued ID card
 showing your date of birth, signature and photo OR

current foreign Government issued ID card
 showing your date of birth, signature and photo.

Group 2

If you can't provide anything from Group 1, then provide a **original certified copy** of one of the following:

Australian or foreign government issued birth certificate
 OR

Australian or foreign government issued citizenship certificate
 OR

current Centrelink pension or health card
 please copy the front and back.

PLUS provide a original certified copy of one of the following:

a Government issued notice
 one which shows your name and residential address, not more than 12 months old OR

a rates or utilities notice

one which shows your name and residential address, not more than 3 months old OR

ATO notice

one which shows any debt owing to the ATO, your name and residential address, not more than 12 months old.

For each corporate beneficial owner please provide:

a completed Identification form – Australian and Foreign companies, plus any relevant identification.

3.2.6 (b) Voting rights

If there are any other individuals, who have not been listed above in section 3.2.6 (a), and who are entitled, either directly or indirectly, to exercise 25% or more of the company's voting rights, please write down their full names on a piece of paper and attach to this form.

3.2.6 (c) Senior Managing Official details

If the company does not have any beneficial owners, please provide the details of the Senior Managing Official (or equivalent).

Title Full given names

Surname

Date of birth (DD/MM/YYYY)

Nature of business

Company title

Residential address (A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

HELP

Senior managing official: 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.

Verification procedure - senior managing official details

If you are unable to provide details of beneficial owners in 3.2.6 (a) above, please provide documentation showing the name of the senior managing official, as provided in this section 3.2.6 (c).

3. Signing instructions

Individual Trustee: where the investment has one individual trustee, the trustee must sign.

Multiple trustees: where the investment has more than one individual trustee, all trustees must sign.

Corporate trustee: where the company has a sole director who is also the sole company secretary, this form must be signed by that person. If the company (pursuant to section 204A of the Corporations Act 2001) does not have a company secretary, a sole director can also sign alone. Otherwise this form must be signed by a director jointly with either another director or a company secretary. Please indicate the capacity in which the form is signed.

Trust: the trustee(s) must sign this form. Trustee(s) signing on behalf of the trust confirm that the trustee(s) is/are acting in accordance with such designated powers and authority under the trust deed.

Power of Attorney: if signing under a Power of Attorney and you have not already lodged the Power of Attorney with us, please attach a certified copy of the Power of Attorney. I/We attest that the Power of Attorney has not been rescinded or revoked and that the person who gave the Power of Attorney is still living.

Signature of trustee 1, director or authorised signatory

Please print full name

Date (DD/MM/YYYY)

Company officer (please indicate company capacity)

Director

Sole director and company secretary

Authorised signatory

Signature of trustee 2, director/company secretary or authorised signatory

Please print full name

Date (DD/MM/YYYY)

Company officer (please indicate company capacity)

Director

Company secretary

Authorised signatory

Phone

Within Australia: 1800 572 018 (free call)

International: +61 3 9046 4041

Email

ubs@unitregistry.com.au

Website

www.ubs.com/am-australia

Identification form – Government body

Please complete this form if you have not previously invested in one of UBS Asset Management's Funds.

1. Please complete all sections in BLOCK letters, using a black pen. If you make an error while completing this form, do not use correction fluid. Cross out your mistakes and initial your changes.
2. Make copies of your ID document(s) and arrange for them **to be certified**. Please refer to the 'Instructions' on page 9 for more information on getting your documents certified.
3. Include this identification form and original certified copies of your ID documents with your initial application form when you send it to us.

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1. Government body details

Full name of Government body

Principle place of operation (A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Please select the type of government body by crossing one of the options below:

Commonwealth of Australia

State or Territory (please specify)

Foreign Country (please specify)

Is the Government body a:

separate legal entity

agency

authority and/or

Foreign Government body beneficial owner 1

Chairperson

President

Treasurer

Secretary

Full given names

Surname

Date of birth (DD/MM/YYYY)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Foreign Government body beneficial owner 2

Chairperson

President

Treasurer

Secretary

Full given names

Surname

Date of birth (DD/MM/YYYY)

Residential address (A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Phone

Within Australia: 1800 572 018 (free call)

International: +61 3 9046 4041

Email

ubs@unitregistry.com.au

Websitewww.ubs.com/am-australia

Identification form – Partnership/ Association/Registered co-operative

Please complete this form if you have not previously invested in one of UBS Asset Management's Funds.

1. Please complete all sections in BLOCK letters, using a black pen. If you make an error while completing this form, do not use correction fluid. Cross out your mistakes and initial your changes.
2. Make copies of your ID document(s) and arrange for them **to be certified**. Please refer to the 'Instructions' on page 9 for more information on getting your documents certified.
3. Include this identification form and original certified copies of your ID documents with your initial application form when you send it to us.

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1. Partnership/Association/Registered co-operative details

Full name of Partnership/Association/Registered co-operative

Country established, if not Australia

Business Activity of Partnership/Association/Registered co-operative

Partnerships only: Full business name (if any) and, if regulated, the name and membership details of the professional association

Incorporated associations/Registered co-operatives: Unique identifying number issued and the government body responsible for the incorporation or registration

Partnerships and unincorporated associations must complete the below details for ONE partner/member signing the form and supply identification documents for this person (refer to page 10 of this Application Form).

Unregulated partnerships must provide the full name and residential address details for ALL partners.

Please provide details on a separate page if necessary.

Partner 1/Unincorporated association officer

Title Full given names

Surname

Date of birth (DD/MM/YYYY)

Nature of business

Company title

Residential address (A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Partner 2

Title Full given names

Surname

Date of birth (DD/MM/YYYY)

Nature of business

Company title

Residential address (A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Associations and co-operatives must provide the full names of the officers below:

Officer 1

Chairperson President Treasurer Secretary

Full given names

Surname

Date of birth (DD/MM/YYYY)

Nature of business

Company title

Residential address (A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Officer 2

Chairperson President Treasurer Secretary

Full given names

Surname

Date of birth (DD/MM/YYYY)

Nature of business

Company title

Residential address (A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Officer 3

Chairperson President Treasurer Secretary

Full given names

Surname

Date of birth (DD/MM/YYYY)

Nature of business

Company title

Residential address (A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Officer 4

Chairperson President Treasurer Secretary

Full given names

Surname

Date of birth (DD/MM/YYYY)

Nature of business

Company title

Residential address (A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Individual/joint investors must provide their residential address and sole traders their principal business address (if different). Company, corporate trustee, co-operative, association or government body investors must provide their principal business address and registered office address (if different).

**Investor 1/Sole Trader/Company/Association/Co-operative/
Government body**

Residential Business

Residential address (A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

**Investor 2/Incorporated registered address
(if applicable)**

Residential Business

Residential address (A PO Box is not acceptable)

Property/Building name (if applicable)

Unit/Level

Street number

Street name

Suburb

State

Post code

Country

Direct Debit Request (DDR) Service Agreement

The following is your Direct Debit Service Agreement with National Australia Bank Limited (NAB). This agreement is designed to explain what your obligations are when undertaking a Direct Debit arrangement with us. It also details what our obligations are to you as your Direct Debit provider.

We recommend you keep this agreement in a safe place for future reference. It forms part of the terms and conditions of your Direct Debit Request and should be read in conjunction with your DDR form.

Definitions

account means the account held at your financial institution from which we are authorised to arrange for funds to be debited.

agreement means the Direct Debit Request Service Agreement between you and us.

banking day means a day other than a Saturday or Sunday or a public holiday listed throughout Australia.

debit day means the day that payment by you to us is due.

debit payment means a particular transaction where a debit is made.

direct debit request means the Direct Debit Request between us and you.

us or we means NAB (the Debit User) you have authorised by signing a direct debit request.

you means the customer who signed the Direct Debit Request.

your financial institution means the financial institution nominated by you on the DDR at which your account is maintained.

Debiting your account

- By signing a Direct Debit Request, you have authorised us to arrange for funds to be debited from your account. You should refer to the Direct Debit Request and this agreement for the terms of the arrangement between us and you.
- We will only arrange for funds to be debited from your account as authorised in the Direct Debit Request.
- If the debit day falls on a day that is not a banking day, we may direct your financial institution to debit your account on the following banking day. If you are unsure about which day your account has or will be debited you should ask your financial institution.

Amendments by us

We may vary any details of this agreement or a Direct Debit Request at any time by giving you a least 14 days written notice.

Amendments by you

You may change, stop or defer a debit payment, or terminate this agreement by providing at least 14 days notification by writing to:

UBS Asset Management (Australia) Limited
GPO Box 804
Melbourne VIC 3001
Fax: 1300 073 090 or +61 3 9977 5800

Your obligations

- It is your responsibility to ensure that there are sufficient cleared funds available in your account to allow a debit payment to be made in accordance with the Direct Debit Request.
- If there are insufficient cleared funds in your account to meet a debit payment
 - you may be charged a fee and/or interest by your financial institution;
 - you may also incur fees or charges imposed or incurred by us; and
 - you must arrange for the debit payment to be made by another method or arrange for sufficient cleared funds to be in your account by an agreed time so that we can process the debit payment.
- You should check your account statement to verify that the amounts debited from your account are correct.
- If we are liable to pay goods and services tax ('GST') on a supply made in connection with this agreement, then you agree to reimburse us.

Dispute

- If you believe that there has been an error in debiting your account, you should notify us directly by faxing us on 1300 073 090 and confirm that notice in writing with us as soon as possible so that we can resolve your query more quickly. Alternatively you can take it up with your financial institution directly.
- If we conclude as a result of our investigations that your account has been incorrectly debited we will respond to your query by arranging for your financial institution to adjust your account (including interest and charges) accordingly. We will also notify you in writing of the amount by which your account has been adjusted.
- If we conclude as a result of our investigations that your account has not been incorrectly debited, we will respond to your query by providing you with reasons and any evidence for this finding in writing.

Accounts

You should check:

- with your financial institution whether direct debiting is available from your account, as direct debiting is not available on all accounts offered by financial institutions;
- your account details which you have provided to us are correct by checking them against a recent account statement; and
- with your financial institution before completing the Direct Debit Request if you have any queries about how to complete the Direct Debit Request.

Confidentiality

- We will keep any information (including your account details) in your Direct Debit Request confidential. We will make reasonable efforts to keep any such information that we have about you secure and to ensure that any of our employees or agents who have access to information about you do not make any unauthorised use, modification, reproduction or disclosure of that information.
- We will only disclose information that we have about you:
 - to the extent specifically required by law; or
 - for the purposes of this agreement (including disclosing information in connection with any query or claim).

Notice

- If you wish to notify us in writing about anything relating to this agreement, you should write to UBS Asset Management (Australia) Ltd, Level 16, Chifley Tower, 2 Chifley Square NSW 2000.
- We will notify you by sending a notice in the ordinary post to the address you have given us in the Direct Debit Request.
- Any notice will be deemed to have been received on the third banking day after posting.

Request and Authority to debit

Surname or Company Name

Given name(s) or ACN/ARBN

requests and authorises NAB [Direct Debit ID 322063] to arrange, through its own financial institution, a debit to your nominated account any amount NAB, has deemed payable by you. The debit or charge will be made through the Bulk Electronic Clearing System (BECS) from your account held at the financial institution you have nominated below and will be subject to the terms and conditions of the Direct Debit Request Service Agreement.

Details of Financial Institution at which Account is held

Financial Institution Name

Address

Details of Account to be Debited

Name of Account

BSB number

Account number

Acknowledgement

By signing and/or providing us with a valid instruction for your Direct Debit Request, you have understood and agreed to the terms and conditions governing the debit arrangements between you and NAB as set out in this Request and your Direct Debit Request Service Agreement.

Signature 1

(If signing for a company, sign and print full name and capacity for signing eg. director)

Address

Date (DD/MM/YYYY)

Signature 2

(If signing for a company, sign and print full name and capacity for signing eg. director)

Address

Date (DD/MM/YYYY)

Facsimile indemnity

If you are advising us via facsimile in respect of instructions (including applications, withdrawal requests and switching requests) you should be aware of the following conditions:

We will only process your facsimile instructions if it has been received by us in full. We are not responsible for any loss or delay that results from a transmission not being received by us. A facsimile receipt confirmation from the sender's facsimile machine is not evidence of receipt of the facsimile by us.

We do not take responsibility for any fraudulently completed facsimile transactions and we will not compensate you for any losses. For example, you bear the risk that a fax may be sent by someone who knows your account details.

In the event of fraud taking place, you agree to release, discharge and indemnify UBS Asset Management (Australia) Ltd from and against all actions, proceedings, accounts, claims, costs, demands, charges and expenses, losses and liabilities (however they arise) to the extent permitted by law, suffered by you or suffered by or brought against us, in respect of the facsimile instructions.

Privacy

Keeping us informed

Our records about you are important. Please inform us in writing (must be signed by the authorised signatories) of any changes to details which you have given us. This may be a new postal address, a change of name or new financial institution account details for distribution payments.

We will send you written confirmation of any changes. Please quote your Investor Number when you contact us.

Collecting and using your information

We collect information for the following purposes:

- to process your application;
- to administer your investment and provide you with reports;
- to monitor and improve the quality of service provided to you; and
- to comply with regulatory or legal requirements, including the Corporations Act, the Proceeds of Crime Act, the Financial Transaction Reports Act, the Taxation Administration Act and the Anti-Money Laundering and Counter-Terrorism Financing Act.

We also ask you for some personal details so that we, and our related companies, can keep in touch with you and tell you on an ongoing basis about our other products and services that could be useful to you. We may do this by telephone, electronic messages (eg. email), online and other means. Please contact us if you do not wish your details to be used for marketing purposes.

We may gather information about you from a third party. These include credit agencies, financial advisers, fund managers or intermediaries and spouses. We may also collect details of your interactions with us and our products and services (including from our records of any telephone, email and online interactions).

If you provide someone else's personal information to us, you must ensure that they first agree on the basis of this privacy section.

Disclosing your information

We exchange your personal information with your consultant/adviser and third parties appointed by your consultants/adviser if you complete section 10 of the Application Form, or if you request us to, and to any other authorised representative of yours (such as your accountant or lawyer) from time to time. In addition, we may exchange personal information about you in the following circumstances:

- you consent to the disclosure;
- with any joint investor;
- with companies that provide services to us, to our related companies, to the Fund, or on our behalf (and our related companies may also exchange personal information with these companies) - for example administration, custody, investment management, technology, identity verification, auditing, registry, mailing or printing services; or

- where required or authorised by law, which may include disclosures to the Australian Taxation Office and other Government or regulatory bodies; or
- with organisations related to us such as UBS Wealth Management Australia Ltd and its related bodies corporate, whether in Australia or any overseas jurisdiction ('Related Companies').

In some cases, the types of organisations referred to above to whom we will disclose your personal information may be located in Switzerland, China, Hong Kong, India, New Zealand, Poland, Singapore, United Kingdom, United States of America and other countries.

FATCA

The Fund is registered as a Financial Institution under the intergovernmental agreement entered into between the Australian and U.S. governments in relation to FATCA on 28 April 2014 ('IGA').

As a Financial Institution, we will conduct due diligence on prospective investors in the Fund and on existing unit holders. Prospective investors (including existing unit holders applying for additional units) will need to provide us with certain information and/or documentation when applying for units. Existing unit holders will need to provide us with certain information and/or documentation on request.

We will report information in respect of certain unit holders and their unit holdings in the Fund to the Australian Taxation Office ('ATO'). Broadly, we will report to the ATO information in respect of unit holders who are:

- U.S. citizens or residents,
- certain types of U.S. entities, or
- certain types of non-U.S. entities that are controlled by one or more U.S. citizens or residents.

We are also required to report to the ATO the details of any payments we make to "Nonparticipating Financial Institutions", as such term is defined in the IGA.

If you are an existing unit holder and you do not provide us with the required documentation upon request we may be required to report information in respect of you and your unit holding in the Fund to the ATO.

If you are a new investor (including an existing unit holder applying for additional units) and you do not provide us with the required information and/or documentation on request, we may not issue units to you. Alternatively, we may report information in respect of you and your unit holding in the Fund to the ATO.

In accordance with the IGA, the ATO will share information reported to it by Australian financial institutions with the U.S. Internal Revenue Service.

For further information in relation to how our due diligence and reporting obligations under the IGA may affect you, please consult your tax adviser.