

Morningstar Funds – Application Form (Class B) effective from 30 September 2019

	Who can apply:	Go to:
New Investors	<ul style="list-style-type: none"> – Australian resident investors receiving a PDS (including electronically) in Australia. – New Zealand residents who are wholesale investors where permitted by Australian and New Zealand law. – Applications from outside Australia will only be accepted at Morningstar’s discretion where it is not unlawful to do so. 	Page 2
Existing Investors	<ul style="list-style-type: none"> – Existing investors to apply via the Additional Investment Application Form available on morningstarinvestments.com.au/disclosure. 	

If you have any questions, please contact Morningstar on 1800 951 999 or via email at invest@morningstar.com.au.

Important information: This Application Form and the Additional Information Document are to be incorporated by reference into the Product Disclosure Statements (each a PDS and together the PDSs) for the Morningstar Funds (collectively the ‘Funds’ and individually the ‘Fund’) issued by Morningstar Investment Management Australia Limited (ABN 54 071 808 501; AFSL 228986) (‘Morningstar’).

A person who gives another person access to the Application Form must at the same time and by the same means give the other person access to the PDS. Morningstar will send paper copies of the PDS and Application Form, on request and without charge.

You should read the relevant PDS and the Additional Information Document carefully before completing this Application Form.

If you are completing the Application Form electronically, please type into the interactive text boxes. If you are completing the Application Form in hard copy, please use capital letters and black ink to complete this form. Select your Investor Type and complete all referenced sections. For your convenience, we have used coloured coding throughout the form to help you identify the relevant sections.

What do I need to fill in?

Investor Type	Section Reference	Sections to be Completed	Page
<input type="checkbox"/> Individual/Joint Investor/Sole Trader	1	1. Applicant details General details Declaration and Signatures	5 32 37
<input type="checkbox"/> Company/Corporate Trustee	2	2. Applicant details General details Declaration and Signatures	8 32 37
<input type="checkbox"/> Trust/Superannuation Fund with Individual Trustee	1 3	1. Applicant details 3. Applicant details General details Declaration and Signatures	5 16 32 37
<input type="checkbox"/> Trust/Superannuation Fund with Corporate Trustee	2 3	2. Applicant details 3. Applicant details General details Declaration and Signatures	8 16 32 37
<input type="checkbox"/> Partnership	4	4. Applicant details General details Declaration and Signatures	24 32 37
<input type="checkbox"/> Agent of Investors ¹	1 2 3 4 5	1. Applicant details; or 2. Applicant details; or 3. Applicant details; or 4. Applicant details; or 5. Applicant details Plus General details Declaration and Signatures	5 8 16 24 29 32 37

1 If you are:

- An investor appointing an agent to act on your behalf in relation to your investment in the Fund, you must complete the relevant sections applicable to you based on your Investor Type and also the sections for 'Agent of Investors'; or
- An agent of an investor making an initial investment on behalf of that investor and also acting on behalf of that investor in relation to their investment in the Fund, please complete the relevant sections applicable to the investor based on their Investor Type and also the sections for 'Agent of Investors'.

What identification documents are required?

If this is your initial investment into a Morningstar Fund, we are required by law to obtain various documents to verify your identity.

Investor Type	Section Reference	Sections to be Completed	Page
<input type="checkbox"/> Individual/Joint Investor/Sole Trader	1	Identification Documents Required	6
<input type="checkbox"/> Company/Corporate Trustee	1 2	Identification Documents Required	6 and 14
<input type="checkbox"/> Trust/Superannuation Fund with Individual Trustee	1 3	Identification Documents Required	6 and 22
<input type="checkbox"/> Trust/Superannuation Fund with Corporate Trustee	1 2 3	Identification Documents Required	6, 14 and 22
<input type="checkbox"/> Partnership	1 4	Identification Documents Required	6 and 28
<input type="checkbox"/> Agent of Investors	1 5	Identification Documents Required	6 and 31

Why are these identification documents required?

In accordance with the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Cth) (AML/CTF Act), Morningstar is required to identify and verify the identity of new investors (and in certain circumstances, existing investors). In order to do this, we must collect certain information (and documentation) from each investor. If you do not provide this information to us, we will not process your application and in these circumstances, will not be liable to you for any resulting loss. Morningstar may be required to collect further information from you in accordance with its ongoing customer due diligence obligations under the AML/CTF Act and if you or any beneficial owner is considered a politically exposed person, Morningstar will be required to identify you (and/or the beneficial owner) and verify that identification in accordance with the AML/CTF Act as it applies to politically exposed persons.

Morningstar is obliged under the AML/CTF Act to take and maintain copies of any information/documentation collected from you, and in certain circumstances, we may be required to disclose this information to the Australian Transaction Reports and Analysis Centre (AUSTRAC) or other government bodies. Morningstar may be prohibited from informing you of such disclosure. Aside from disclosures permitted or required under the AML/CTF Act, we will keep your information confidential in accordance with relevant legislation.

By applying for units, you are acknowledging that we may, in our absolute discretion, not issue units to you, cancel any units previously issued to you, delay, block or freeze any transaction or redeem any units issued to you if we believe it necessary in order to comply with our AML/CTF legislative obligations. In these circumstances, we will not be liable for any resulting loss.

Where do I send the application form?

Please send your completed application form, **including the required identification documentation** to:

Attention: Morningstar Unit Registry
C/- Link Market Services Limited
PO Box 3721
Rhodes NSW 2138

How do I transfer the funds?

Note: We do not accept cheques.

You can transfer funds electronically — please refer to page 29.

To help speed up the application process, we ask that you call us on 1800 951 999 or email us at invest@morningstar.com.au to let us know that your completed application form has been submitted.

Section 1: Applicant Details

Individual(s)/Individual Trustee(s)

Complete this section if you are an Individual(s), Individual Trustee(s) or Sole Trader.

How are you investing?

Individual Investor:
section 1(a) and 1(d).

Joint Investors:
section 1(a), 1(b) and 1(d).

Sole Trader:
section 1(a), 1(c) and 1(d).

1(a) Individual 1/Sole Trader (if applicable, Individual Trustee 1 or Partner 1 need to complete his/her details here)

Title Given Name(s) Surname

Date of Birth (DD/MM/YY) Place of Birth (City, Country)

Residential Address

Suburb State Postcode Country

Tax File Number² or Exemption Code Australian Tax Resident (Yes/No)

Foreign Taxpayer Identification Number 1 (TIN) or Exemption Code (if any) Foreign Jurisdiction 1:

Foreign Taxpayer Identification Number 2 (TIN) or Exemption Code (if any) Foreign Jurisdiction 2:

Politically Exposed Person (PEP)³

Are you a PEP?

Yes No

If Yes, please provide a description of the PEP's position.

1(b) Individual 2 (if applicable, Individual Trustee 2 need to complete his/her details here)

Title Given Name(s) Surname

Date of Birth (DD/MM/YY) Place of Birth (City, Country)

Residential Address

Suburb State Postcode Country

Section 1: Applicant Details – Individual(s)/Individual Trustee(s)

Tax File Number² or Exemption Code

Australian Tax Resident (Yes/No)

Foreign Taxpayer Identification Number
1 (TIN) or Exemption Code (if any)

Foreign Jurisdiction 1:

Foreign Taxpayer Identification Number
2 (TIN) or Exemption Code (if any)

Foreign Jurisdiction 2:

Politically Exposed Person (PEP)³

Are you a PEP?

Yes No

If Yes, please provide a description of the PEP's position.

1(c) Sole Trader (if applicable)

Full Business Name (if any)

ABN

Principal Place of Business

Suburb

State

Postcode

Country

Foreign Taxpayer Identification Number
1 (TIN) or Exemption Code (if any)

Foreign Jurisdiction 1:

Foreign Taxpayer Identification Number
2 (TIN) or Exemption Code (if any)

Foreign Jurisdiction 2:

1(d) Identification Documentation for Individuals

You must attach the following **certified** copies of documents (dated) to this Application Form. Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.

Please provide documents from Option 1 **or** Option 2 to verify the individual's full name and either date of birth, or residential address.

Option 1:

Please provide **one** document from the selection below (please tick):

- Australian driver's licence containing a photograph of the person;
- Australian Passport;
- Identification card issued by a state or territory that contains the date of birth and a photograph of the card holder;
- Foreign government issued passport or similar travel document containing a photograph and signature of the person;
- Foreign government issued national identity card containing a photograph and signature of the person; or

Section 1: Applicant Details – Individual(s)/Individual Trustee(s)

Or

Option 2:

Please provide **one** document from the selection below (please tick):

- Australian birthcertificate;
- Australian citizenship certificate;
- Birth certificate issued by foreign governments (for PEP only);
- Citizenship certificate issued by foreign governments (for PEP only);
- Pension card issued by Centrelink; or
- Foreign driver's licence that contains a photograph of the person.

And

Option 2 (continued):

Please **also** provide **one** document from the selection below (please tick):

- A notice issued by the Commonwealth or a State or Territory within the preceding 12 months that records the provision of financial benefits and contains the individual's name and residential address;
- A notice issued by the Australian Taxation Office within the preceding 12 months that records a debt payable to or by the person by or to the Commonwealth; or
- A notice issued by the local government body or utilities provider within the preceding 3 months that records the provision of services to that address or to that person (the notice must contain the individual's name and residential address).

Please proceed to the General Details section on page 32.

² It is not compulsory to provide your Tax File Number (TFN). However, without your TFN or exemption information, withholding tax will be deducted from your distributions at the highest marginal rate (plus Medicare Levy).

³ A Politically Exposed Person (PEP) is an individual who holds a prominent public position or role in a government body or international organization, either in Australia or overseas. Immediate family members and/or close associates of these individuals are also considered PEPs.

Section 2: Applicant Details

Company/Corporate Trustee(s)

Complete this section if you are investing for or on behalf of a Company, or as a Trust/Superannuation Fund with a Corporate Trustee.

2(a) Company Details

Full Company Name

Country of Formation, Incorporation or Registration (if non-Australian)

ACN or ARBN

TFN⁴, ABN or Exemption Code (if any)

Australian Tax Resident (Yes/No)

Foreign Taxpayer Identification Number
1 (TIN) or Exemption Code (if any)

Foreign Jurisdiction 1:

Foreign Taxpayer Identification Number
2 (TIN) or Exemption Code (if any)

Foreign Jurisdiction 2:

Name of Regulator (if licensed by an Australian Commonwealth, State, or Territory statutory regulator)

Licence Details

Registered Business Address in Australia or Country of Formation (not a PO Box)

Suburb

State

Postcode

Country

Principal Place of Business (if a local agent is used, please also provide the name of the local agent)

Suburb

State

Postcode

Country

Section 2: Applicant Details – Company/Corporate Trustee(s)

If an Australian company, please select your registration status with ASIC:

Proprietary Company Public Company

If a foreign company, please select your registration status with the relevant foreign registration body

Private/Proprietary Company Public Company Other please specify:

Name of the relevant foreign registration body

Foreign company identification number

2(b) Director Information

Australian Proprietary Companies and Foreign Private Companies, please provide the full name of each director of the Company:

Politically Exposed Person (PEP)⁵

Are you a PEP?

Yes No

If Yes, please provide the name of the director and a description of the PEP's position.

Director 1

PEP Position

Director 2

PEP Position

Director 3

PEP Position

Director 4

PEP Position

If there are additional directors, please provide their full names on a separate page and attach to this Application Form.

2(c) Beneficial Owner

Companies that are NOT an Australian Public Listed Company owned by an Australian Public Listed Company or Regulated Company are to provide details for each individual who:

- ▶ Directly or indirectly owns 25% or more of the Company; and/or
- ▶ Ultimately controls the Company, including any person who controls the decision making, financial or operating policies of the Company.

Section 2: Applicant Details – Company/Corporate Trustee(s)

Beneficial Owner/Shareholder 1

Title Given Name(s) Surname Date of Birth (DD/MM/YY)

Residential Address

Suburb State Postcode Country

Politically Exposed Person (PEP)⁵

Are you a PEP?

Yes No

If Yes, please provide a description of the PEP's position.

Beneficial Owner/Shareholder 2

Title Given Name(s) Surname Date of Birth (DD/MM/YY)

Residential Address

Suburb State Postcode Country

Politically Exposed Person (PEP)⁵

Are you a PEP?

Yes No

If Yes, please provide a description of the PEP's position.

Beneficial Owner/Shareholder 3

Title Given Name(s) Surname Date of Birth (DD/MM/YY)

Residential Address

Suburb State Postcode Country

Politically Exposed Person (PEP)⁵

Are you a PEP?

Yes No

If Yes, please provide a description of the PEP's position.

Section 2: Applicant Details – Company/Corporate Trustee(s)

Beneficial Owner/Shareholder 4

Title	Given Name(s)	Surname	Date of Birth (DD/MM/YY)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Residential Address

Suburb	State	Postcode	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Politically Exposed Person (PEP)⁵

Are you a PEP?

Yes No

If Yes, please provide a description of the PEP's position.

If there are additional beneficial owners/shareholders, please provide their full names, dates of birth and residential addresses on a separate page and attach to this Application Form.

2(d)(i) FATCA and CRS

Select FATCA and CRS status from the following categories and provide the information requested.

Financial Institution for FATCA purposes (A custodial or depository institution, an investment entity or a specified insurance company.)

Company's Global Intermediary Identification Number (GIIN), if applicable

Company does not have a GIIN, please provide its FATCA status.

Exempted Financial Institution Deemed Compliant Financial Institution

Exempt Beneficial Owner Non-Participating Financial Institution

Non-Reporting Financial Institution Sponsored Financial Institution (Provide their GIIN)

Financial Institution for CRS Purposes (A custodial or depository institution, an investment entity (other than a professionally managed investment entity) or a specified insurance company.)

Specify Type

Reporting Financial Institution

Non-Reporting Financial Institution: Type e.g. Trustee Documented Trust

Investment Entity resident in Non-Participating Jurisdiction for CRS Purposes managed by another Financial Institution (Provide details of controlling persons at section 2(d)(ii))

Active Non-Financial Entity

Specify Type

Less than 50% of the Active NFE's gross income from the preceding calendar year is passive income and less than 50% of its assets during the preceding calendar year are assets held for the production of passive income

Corporation that is regularly traded or a related entity of a regularly traded corporation Government Entity

Section 2: Applicant Details – Company/Corporate Trustee(s)

International Organisation or Central Bank

Others: Please Specify

Passive Non-Financial Entity (Provide details of controlling persons at section 2(d)(ii))

2(d)(ii) Controlling Persons

If the Company is a Passive NFE or Professionally Managed Investment Entity in a Non-Participating Jurisdiction for CRS purposes or a Passive NFE for FATCA purposes, provide details of its controlling persons who are resident in another country for tax purposes i.e. the natural persons who exercise control over the entity. For companies, if a person holds 25% or more of the issued capital or voting rights, they should be included. Where no natural persons exercise control through ownership, other people might exercise control through other means e.g. directors and senior managing officials.

Controlling Person 1

Title Given Name(s) Surname

Date of Birth (DD/MM/YY) Place of Birth (City, Country)

Residential Address

Suburb State Postcode Country

Tax File Number⁴ or Exemption Code Australian Tax Resident (Yes/No)

Foreign Taxpayer Identification Number 1 (TIN) or Exemption Code (if any) Foreign Jurisdiction 1:

Foreign Taxpayer Identification Number 2 (TIN) or Exemption Code (if any) Foreign Jurisdiction 2:

Beneficial Owner 2

Title Given Name(s) Surname

Date of Birth (DD/MM/YY) Place of Birth (City, Country)

Residential Address

Suburb State Postcode Country

Tax File Number⁴ or Exemption Code Australian Tax Resident (Yes/No)

Section 2: Applicant Details – Company/Corporate Trustee(s)

Foreign Taxpayer Identification Number 1 (TIN) or Exemption Code (if any)	<input type="text"/>	Foreign Jurisdiction 1:	<input type="text"/>
Foreign Taxpayer Identification Number 2 (TIN) or Exemption Code (if any)	<input type="text"/>	Foreign Jurisdiction 2:	<input type="text"/>

If there are additional controlling persons, please provide their full names, dates/places of birth, residential addresses, tax residence, TIN and jurisdiction on a separate page and attach to this Application Form.

Section 2: Applicant Details – Company/Corporate Trustee(s)

2(e) Identification Documentation for Companies

You must attach the following certified copies of documents (dated) to this Application Form. Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.

Please provide **one** document from the selection below (please tick):

- Certificate of registration or incorporation issued by ASIC; or
- Certificate of registration or incorporation issued by the relevant foreign registration body.

Please tick if applicable:

- If a listed company, provide a search of the relevant financial market;

2(f) Identification Documentation for Beneficial Owners

You must attach the following **certified** copies of documents (dated) to this Application Form. Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.

Please provide documents from Option 1 **or** Option 2 to verify the individual's full name and either date of birth, or residential address.

Option 1:

Please provide **one** document from the selection below (please tick):

- Australian driver's licence containing a photograph of the person;
- Australian Passport;
- Identification card issued by a state or territory that contains the date of birth and a photograph of the card holder;
- Foreign government issued passport or similar travel document containing a photograph and signature of the person;
- Foreign government issued national identity card containing a photograph and signature of the person; or

Section 2: Applicant Details – Company/Corporate Trustee(s)

Or

Option 2:

Please provide **one** document from the selection below (please tick):

- Australian birth certificate;
- Australian citizenship certificate;
- Birth certificate issued by foreign governments (for PEP only);
- Citizenship certificate issued by foreign governments (for PEP only);
- Pension card issued by Centrelink; or
- Foreign driver's licence that contains a photograph of the person.

And

Option 2 (continued):

Please **also** provide **one** document from the selection below (please tick):

- A notice issued by the Commonwealth or a State or Territory within the preceding 12 months that records the provision of financial benefits and contains the individual's name and residential address;
- A notice issued by the Australian Taxation Office within the preceding 12 months that records a debt payable to or by the person by or to the Commonwealth; or
- A notice issued by the local government body or utilities provider within the preceding 3 months that records the provision of services to that address or to that person (the notice must contain the individual's name and residential address).

⁴ It is not compulsory to provide your Tax File Number (TFN). However, without your TFN or exemption information, withholding tax will be deducted from your distributions at the highest marginal rate (plus Medicare Levy).

⁵ A Politically Exposed Person (PEP) is an individual who holds a prominent public position or role in a government body or international organization, either in Australia or overseas. Immediate family members and/or close associates of these individuals are also considered PEP.

Section 3: Applicant Details

Trust/Superannuation Fund

Complete this section if you are investing for, or on behalf of, a Trust/Superannuation Fund/SMSF.

3(a) Trust Details

Full Trust/Superannuation Fund/SMSF Name

Full Business Name of Trustee (if any)

Trust Settlor Full Name⁶ (if applicable)

Country in which Trust was Established

TFN⁷, ABN or Exemption Code

Australian Tax Resident (Yes/No)

Registered Business Address in Australia or Country of Formation (not a PO Box)

Suburb

State

Postcode

Country

Principal Place of Business

Suburb

State

Postcode

Country

Foreign Taxpayer Identification Number
1 (TIN) or Exemption Code (if any)

Foreign Jurisdiction 1:

Foreign Taxpayer Identification Number
2 (TIN) or Exemption Code (if any)

Foreign Jurisdiction 2:

Section 3: Applicant Details – Trust/Superannuation Fund

3(b) Type of Trust

Please select **one** option below and provide the requested information:

ASIC Registered Managed Investment Scheme

Provide ARSN

Unregistered Managed Investment Scheme

Foreign Superannuation Fund

Regulated Trust (e.g. Self-Managed Superannuation Fund)

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

ABN

Registration/Licensing Details

Government Superannuation Fund

Name of the Legislation Establishing the Fund

Other Trust Type

Trust Description (e.g. family, unit, charitable, testamentary)

3(c) Individual Trustee(s)

Please complete section 1.

3(d) Company/Corporate Trustee

Please complete section 2.

3(e) Beneficiary Details

Please complete below section for all beneficiaries.

Beneficiary 1

Title	Given Name(s)	Surname	Date of Birth (DD/MM/YY)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Residential Address			
<input type="text"/>			
Suburb	State	Postcode	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Section 3: Applicant Details – Trust/Superannuation Fund
Beneficiary 2

Title	Given Name(s)	Surname	Date of Birth (DD/MM/YY)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Residential Address

Suburb	State	Postcode	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Politically Exposed Person (PEP)⁸

Are any beneficiaries a PEP?

Yes No

If Yes, please provide the name of the beneficiary and a description of the PEP's position.

Beneficiary 1	PEP Position
<input type="text"/>	<input type="text"/>
Beneficiary 2	PEP Position
<input type="text"/>	<input type="text"/>
Beneficiary 3	PEP Position
<input type="text"/>	<input type="text"/>
Beneficiary 4	PEP Position
<input type="text"/>	<input type="text"/>

3(f) FATCA and CRS

Regulated trusts

If you are investing for, or on behalf of, a regulated trust, please select **FATCA and CRS status** from the list below:

i. An Australian regulated superannuation fund (SMSF, APRA regulated super fund, registered managed investment fund, government super fund or pooled super trust)?

Yes—There are no further FATCA/CRS obligations. Please proceed to section 3(g).

ii. A US trust for US tax purposes?

Yes—Please provide the company's US Taxpayer Identification Number (TIN) or exemption code, if the trust is an exempt payee.

iii. A financial institution or a trust/fund with a trustee/responsible entity that is a financial institution for FATCA purposes?

Yes—Please provide the Global Intermediary Identification Number (GIIN). If the trust/fund or trustee/responsible entity does not have a GIIN, please detail the institution's FATCA status:

Exempted Financial Institution Deemed Compliant Financial Institution

Exempt Beneficial Owner Non-Participating Financial Institution

Non-Reporting Financial Institution Sponsored Financial Institution (Provide their GIIN)

Section 3: Applicant Details – Trust/Superannuation Fund

iv. Financial Institution for CRS Purposes (A custodial or depository institution, an investment entity (other than a professionally managed investment entity) or a specified insurance company.)

Specify Type

Reporting Financial Institution

Non-Reporting Financial Institution: Type e.g. Trustee Documented Trust

v. Investment Entity resident in Non-Participating Jurisdiction for CRS Purposes managed by another Financial Institution (Provide details of controlling persons at section 3(f)(ii))

vi. Active Non-Financial Entity

Specify Type

Less than 50% of the Active NFE's gross income from the preceding calendar year is passive income and less than 50% of its assets during the preceding calendar year are assets held for the production of passive income

Corporation that is regularly traded or a related entity of a regularly traded corporation Government Entity

International Organisation or Central Bank

Others: Please Specify

vii. Passive Non-Financial Entity (Provide details of controlling persons at section 3(f)(ii))

Unregulated trusts (Foreign Superannuation Fund/Other trust type)

If you are investing for, or on behalf of, an unregulated trust, please select **FATCA and CRS status** from the list below:

i. A family trust/unit trust or other trust which has trust beneficiaries, trustee or settlors that are US citizens or residents of the US for US tax purposes?

Yes—Please provide the following details of each beneficiary, trustee, settlor or beneficial owner who is a US citizen or resident of the US for US tax purposes. Please leave blank if none of them are US citizens or residents of the US for US tax purposes.

Full Name 1

Residential Address (street address must be provided, PO Box is not acceptable)

US TIN

Full Name 2

Residential Address (street address must be provided, PO Box is not acceptable)

US TIN

Section 3: Applicant Details – Trust/Superannuation Fund

ii. A financial institution, trust or fund with a trustee or responsible entity that is a financial institution for FATCA purposes?

Yes—Please provide the GIIN:

If neither the fund nor the trustee has a GIIN, please detail the institution's FATCA status:

Exempted Financial Institution Deemed Compliant Financial Institution

Exempt Beneficial Owner Non-Participating Financial Institution

Non-Reporting Financial Institution Sponsored Financial Institution

iii. A US trust for US tax purposes?

Yes—Please provide the TIN or exemption code, if the trust is an exempt payee.

iv. **Financial Institution for CRS Purposes** (A custodial or depository institution, an investment entity (other than a professionally managed investment entity) or a specified insurance company.)

Specify Type

Reporting Financial Institution

Non-Reporting Financial Institution: Type e.g. Trustee Documented Trust

v. **Investment Entity resident in Non-Participating Jurisdiction for CRS Purposes managed by another Financial Institution** (Provide details of controlling persons at section 3(f)(ii))

vi. **Active Non-Financial Entity**

Specify Type

Less than 50% of the Active NFE's gross income from the preceding calendar year is passive income and less than 50% of its assets during the preceding calendar year are assets held for the production of passive income

Corporation that is regularly traded or a related entity of a regularly traded corporation Government Entity

International Organisation or Central Bank

Others: Please Specify

vii. **Passive Non-Financial Entity** (Provide details of controlling persons at section 3(f)(ii))

3(f)(ii) Controlling Persons

If the Trust is a Passive NFE or Professionally Managed Investment Entity in a Non-Participating Jurisdiction for CRS purposes or a Passive NFE for FATCA purposes, please provide details of its controlling persons who are resident in another country for tax purposes i.e. the natural persons who exercise control over the entity.

For trusts (other than discretionary trusts), the law requires all beneficiaries to be listed, and any other persons that ultimately control the trust.

Where no natural persons exercise control through ownership, other people might exercise control through other means e.g. directors and

Section 3: Applicant Details – Trust/Superannuation Fund

senior managing officials.

Controlling Person 1

Title	Given Name(s)	Surname	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Date of Birth (DD/MM/YY)	Place of Birth (City, Country)		
<input type="text"/>	<input type="text"/>		
Residential Address			
<input type="text"/>			
Suburb	State	Postcode	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Tax File Number ⁷ or Exemption Code		Australian Tax Resident (Yes/No)	
<input type="text"/>		<input type="text"/>	
Foreign Taxpayer Identification Number 1 (TIN) or Exemption Code (if any)	<input type="text"/>	Foreign Jurisdiction 1:	<input type="text"/>
Foreign Taxpayer Identification Number 2 (TIN) or Exemption Code (if any)	<input type="text"/>	Foreign Jurisdiction 2:	<input type="text"/>

Controlling Person 2

Title	Given Name(s)	Surname	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Date of Birth (DD/MM/YY)	Place of Birth (City, Country)		
<input type="text"/>	<input type="text"/>		
Residential Address			
<input type="text"/>			
Suburb	State	Postcode	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Tax File Number ⁷ or Exemption Code		Australian Tax Resident (Yes/No)	
<input type="text"/>		<input type="text"/>	
Foreign Taxpayer Identification Number 1 (TIN) or Exemption Code (if any)	<input type="text"/>	Foreign Jurisdiction 1:	<input type="text"/>
Foreign Taxpayer Identification Number 2 (TIN) or Exemption Code (if any)	<input type="text"/>	Foreign Jurisdiction 2:	<input type="text"/>

If there are additional controlling persons, please provide their full names, dates/places of birth, residential addresses, tax residence, TIN and jurisdiction on a separate page and attach to this Application Form.

Section 3: Applicant Details – Trust/Superannuation Fund

3(g) Identification Documentation for Trusts

You must attach the following certified copies of documents (dated) to this Application Form. Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator. The identification documents you must provide depend on the type of trust and type of trustee. Please complete 'All Trusts/Superannuation Funds' (Option 1) **and** then select the type of trust from the two categories outlined below (Option 2(a) or 2(b)):

Option 1: All Trust/Superannuation Funds (Mandatory)

Please provide **one** of the following based on the type of trustee for the Fund (please tick):

- Individual Trustee(s)—One Individual Trustee must complete section 1 and provide his/her identification documentation as set out in section 1(d) on page 6 titled 'Identification Documentation Required'; or
- Corporate Trustee—Complete section 2 and provide the identification documentation for the company as set out in section 2(e) on page 14 titled 'Identification Documentation Required'.

In addition:

If you are a **regulated trust**, please provide the required documents outlined in Option 2(a) on the following page.

If you are an **unregulated trust**, please provide the required documents outlined in Option 2(b) on the following page.

Section 3: Applicant Details – Trust/Superannuation Fund

Option 2(a): Regulated Trusts (if applicable)

(e.g. Registered Managed Investment Trust/Government Superannuation Fund/SMSF)

If you are a regulated trust, please provide **one** document from the section below (please tick):

Screenprint from the relevant regulator's website showing the full name of the trust, and that the trust is a registered scheme, regulated trust or government superannuation fund:

- ASIC (asic.gov.au); or
- ATO (ato.gov.au) e.g. self-managed superannuation fund; or Super Fund Lookup (abn.business.gov.au).

Option 2(b): Unregulated Trusts (if applicable)

(e.g. Foreign Superannuation Trust/Other Trust Type)

If you are an unregulated trust, please provide **one** document from the section below (please tick):

- A certified copy or certified extract of the Trust Deed; or
- Letter from a solicitor or qualified accountant verifying the name of the Trust and settlor.
Verification of settlor's name using the trust deed or a solicitor's certificate is not required if at the time the trust was established, the settlor's contribution to the trust was less than \$10,000, or if the settlor is deceased. If the settlor falls within this category, an ATO certificate verifying the name of the trust would be sufficient.

Beneficial Owners (Foreign Superannuation Funds and Other Trust Types)

Each beneficial owner of the trust must complete section 1 and provide the identification documentation as set out in section 1(d) on page 6 titled 'Identification Documentation Required'. A beneficial owner (e.g. a beneficiary or a trustee) is an individual who:

- ▶ Directly or indirectly owns 25% or more of the Company; or
- ▶ Ultimately controls the trust, including controlling decision making, financial or operating policies.

Please proceed to the General Details section on page 32.

6 You must provide 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 was established was less than \$10,000;
- ▶ The settlor is deceased; or
- ▶ You have ticked at section 3(b) either 'Registered Managed Investment Scheme', 'Regulated Trust' or 'Government Superannuation Fund'.

7 It is not compulsory to provide your Tax File Number (TFN). However, without your TFN or exemption information, withholding tax will be deducted from your distributions at the highest marginal rate (plus Medicare Levy).

8 A Politically Exposed Person (PEP) is an individual who holds a prominent public position or role in a government body or international organization, either in Australia or overseas. Immediate family members and/or close associates of these individuals are also considered PEP.

Section 4: Applicant Details

Partnership

Complete this section if you are investing for, or on behalf of, a Partnership.

4(a) Partnership Details

Full Name of Partnership

Registered Business Name of Partnership (if any)

Country in which Partnership was Established

TFN⁹, ABN or Exemption Code

Registered Address (not a PO Box)

Suburb

State

Postcode

Country

Principal Place of Business

Suburb

State

Postcode

Country

Australian Tax Resident (Yes/No)

Foreign Taxpayer Identification Number
1 (TIN) or Exemption Code (if any)

Foreign Jurisdiction 1:

Foreign Taxpayer Identification Number
2 (TIN) or Exemption Code (if any)

Foreign Jurisdiction 2:

4(b) Partner Details

AML/CTF legislation requires details of **one** Partner to be provided. The Partner must complete section 1(a) and 1(d).

4(c) Type of Partnership

Is the Partnership regulated by a professional association?

Yes—Please provide details requested and go to section 4(d).

Name of Association

Partnership's Membership Numbers/Reference

No—You are required under AML/CTF legislation to provide the full name and residential address of every other partner in the partnership:

Number of Partners:

Section 4: Applicant – Details Partnership

Partner 2:

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

Date of Birth

Residential Address

Suburb	State	Postcode	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

If there are additional partners, please write their full names and residential addresses on a separate page and attach to this Application Form.

Section 4: Applicant Details Partnership

4(d) FATCA and CRS

If you are investing for, or on behalf of, a partnership, please select FATCA and CRS status from the categories outlined below. If you are unsure of the FATCA/CRS status, please consult your accountant or tax specialist.

i. A US partnership?

Yes—Please provide the partnership’s US Taxpayer Identification Number (TIN) or exemption code, if an exempt payee:

ii. A financial institution for FATCA purposes?

Yes—Please provide the institution’s Global Intermediary Identification Number (GIIN), if applicable:

If the institution does not have a GIIN, please detail the institution’s FATCA status:

- Exempted Financial Institution Deemed Compliant Financial Institution
- Exempt Beneficial Owner Non-Participating Financial Institution
- Non-Reporting Financial Institution Sponsored Financial Institution

If you are unsure of the FATCA status, please consult your accountant or tax specialist.

iii. Financial Institution for CRS Purposes (A custodial or depository institution, an investment entity (other than a professionally managed investment entity) or a specified insurance company.)

Specify Type

- Reporting Financial Institution
- Non-Reporting Financial Institution: Type e.g. Trustee Documented Trust

iv. Investment Entity resident in Non-Participating Jurisdiction for CRS Purposes managed by another Financial Institution(Provide details of controlling persons at section 3(f)(ii))

v. Active Non-Financial Entity

Specify type

- Less than 50% of the Active NFE’s gross income from the preceding calendar year is passive income and less than 50% of its assets during the preceding calendar year are assets held for the production of passive income
- Corporation that is regularly traded or a related entity of a regularly traded corporation Governmental Entity,
- International Organisation or Central Bank
- Other: Please Specify

vi. Passive Non-Financial Entity (provide details of controlling persons at section 3(f)(ii))

Section 4: Applicant Details Partnership

4(d)(ii) Controlling Persons

If the Partnership is a Passive NFE or Professionally Managed Investment Entity in a Non-Participating Jurisdiction for CRS purposes or a Passive NFFE for FATC purposes, please provide details of its controlling persons who are resident in another country for tax purposes i.e. the natural persons who exercise control over the entity.

For Partnerships, the law requires all partners to be listed, and any other persons that ultimately control the partnership.

Where no natural persons exercise control through ownership, other people might exercise control through other means, e.g. directors and senior managing officials.

Controlling Person 1

Title	Given Name(s)	Surname	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Date of Birth (DD/MM/YY)	Place of Birth (City, Country)		
<input type="text"/>	<input type="text"/>		
Residential Address			
<input type="text"/>			
Suburb	State	Postcode	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Tax File Number ⁹ or Exemption Code		Australian Tax Resident (Yes/No)	
<input type="text"/>		<input type="text"/>	
Foreign Taxpayer Identification Number 1 (TIN) or Exemption Code (if any)	<input type="text"/>	Foreign Jurisdiction 1:	<input type="text"/>
Foreign Taxpayer Identification Number 2 (TIN) or Exemption Code (if any)	<input type="text"/>	Foreign Jurisdiction 2:	<input type="text"/>

Controlling Person 2

Title	Given Name(s)	Surname	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Date of Birth (DD/MM/YY)	Place of Birth (City, Country)		
<input type="text"/>	<input type="text"/>		
Residential Address			
<input type="text"/>			
Suburb	State	Postcode	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Tax File Number ⁹ or Exemption Code		Australian Tax Resident (Yes/No)	
<input type="text"/>		<input type="text"/>	
Foreign Taxpayer Identification Number 1 (TIN) or Exemption Code (if any)	<input type="text"/>	Foreign Jurisdiction 1:	<input type="text"/>
Foreign Taxpayer Identification Number 2 (TIN) or Exemption Code (if any)	<input type="text"/>	Foreign Jurisdiction 2:	<input type="text"/>

If there are additional controlling persons, please provide their full names, dates/places of birth, residential addresses, tax residence, TIN and jurisdiction on a separate page and attach to this Application Form.

Section 4: Applicant Details – Partnership

4(e) Partnership Identification Documentation

You must attach the following certified copies of documents (dated) to this Application Form. Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.

i. Partnership Verification

Complete Option 1 for all partnerships **and** Option 2 if the partnership is regulated by a professional association.

Option 1: Partnership Verification

Please provide **one** document from the selection below to verify the partnership:

- An original, a certified copy or certified extract of the partnership agreement;
- A certified copy or certified extract of minutes of a partnership meeting;
- An original current membership certificate (or equivalent) of the relevant professional association;
- Membership details independently sourced from the relevant professional association;
- A search of the relevant ASIC or other regulator's database;
- A notice issued by the Australian Taxation Office within the last 12 months e.g. Notice of Assessment. **Block out the TFN before scanning, copying or storing this document.**

And

Option 2: Professional Association Verification

Please provide **one** document from the selection below to verify the partnership:

- An original current membership certificate (or equivalent); or
- Membership details independently sourced from the relevant association.

⁹ It is not compulsory to provide your Tax File Number (TFN). However, without your TFN or exemption information, withholding tax will be deducted from your distributions at the highest marginal rate (plus Medicare Levy).

Section 5: Applicant Details Agent of Investors

Complete this section if you are an:

- ▶ Investor appointing an agent to act on your behalf in relation to your investment in the Fund; or
- ▶ Agent making an initial investment on behalf of an investor and acting on their behalf in relation to their investment in the Fund.

You will also be required to complete the relevant sections applicable to the investor on whose behalf you are investing for.

Section 5(a) is to be completed if:

- ▶ The agent is acting for an individual investor; or
- ▶ The agent is acting for a non-individual investor (Note: They will be acting for the investor through an individual person, i.e. an employee or director).

Section 5(b) is to be completed if a verifying officer has been appointed by the non-individual investor to identify their agent.

Section 5(a) Agent Appointed by Individual and Non-Individual Investors

Agent's Full Name

Agent's Company Name (if any)

Licence Number or Authorised Representative Number (if any)

Agent's Phone

Agent's Facsimile

Agent's Email

Agent's Postal Address (not a PO Box)

Suburb

State

Postcode

Country

If there are two or more agents, you may provide these details on a separate page and attach to this Application Form.

Section 5: Applicant Details – Agent of Investors

Please specify how the agents of the investor act. If you do not indicate, then jointly will be applied.

Individually Jointly

Declaration by Agent(s) of the Investor(s)

I agree to:

- make a record of the above information; and
- inform the investor that they must retain the records made by me, the agent.

Signature of Agent

Date

5(b) Verifying Officer Appointed by a Non-Individual Investor

A non-individual investor can appoint a verifying officer to identify its agent and, under the AML/CTF Act, we are required to identify the verifying officer (not the agent). A verifying officer can be an employee, agent or contractor of the non-individual investor.

Details of Verifying Officer

Title	Given Name(s)	Surname	Date of Birth (DD/MM/YY)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Residential Address

Suburb	State	Postcode	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Declaration by Verifying Officer

I agree to:

- identify the agent of the investor in accordance with the AML/CTF Act;
- collect the following: full name of the agent, position, title or role held by the agent in relation to the investor; a copy of the agent's signature; and evidence that the agent is authorised to act for the investor;
- make a record of the above information;
- provide Morningstar with the full name of the agent and a copy of the agent's signature; and
- inform the investor that they must retain the records made by me, the verifying officer.

Signature of Verifying Officer

Date

5(c) Identification Documentation for Agent and Verifying Officer

You must attach the following certified copies of documents (dated) to this Application Form. Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.

i. An Agent

An agent appointed by an individual or non-individual investor must provide the following (please tick):

- Evidence of the agent’s authority to act on behalf of the investor (e.g. signed letter, certified copy of power of attorney); and
- Identification documents outlined in section 1(d) on page 6 titled ‘Identification Documentation Required’ in respect of the individual agent or the individual person that the non-individual agent will be acting through. Refer to Option 1 or Option 2.

ii. A Verifying Officer

A Verifying Officer appointed by a non-individual investor must provide the following (please tick):

- Written evidence of the investor’s authorisation of the Verifying Officer to act as a Verifying Officer. Identification documents outlined in section 1(d) on page 6 titled ‘Identification Documentation Required’ in respect of the Verifying Officer. Refer to Option 1 or Option 2;
- Identification documents outlined in section 1(d) on page 6 titled ‘Identification Documentation Required’ in respect of the Verifying Officer. Refer to Option 1 or Option 2; and
- A document signed by the Verifying Officer containing the full name and signature of each agent.

Individual Agent or Verifying Officer Identification Documents:

- Individual Agent or Verifying Officer must complete section 1 and provide the identification documentation as set out in section 1(d) on page 6 titled ‘Identification Documentation Required’. Refer to Option 1 or Option 2.

Please proceed to the General Details section on page 32.

General Details

Section A: Investor Details

Please provide your contact details below. Adviser details are not accepted. Joint applicants will be assumed to be joint tenants unless otherwise specified.

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

Residential Address (not a PO Box)

Suburb	State	Postcode	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Postal Address

Suburb	State	Postcode	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Phone (H)	Phone (W)
<input type="text"/>	<input type="text"/>

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

Email

Source of funds being invested (please select):

- | | |
|---|--------------------------------------|
| <input type="checkbox"/> Savings | <input type="checkbox"/> Investments |
| <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"/> Asset Sale |
| <input type="checkbox"/> Other | |

Section B: Payment

Please deposit funds to the below bank account:

Morningstar Bank Details:	
Financial Institution:	JPMorgan Chase Bank Australia
Branch Address:	Sydney
Account Name:	Morningstar IM ATF MIF Apps a/c
Account Number:	016-050-301
BSB Number:	212-200
SWIFT Address:	CHASAU2X
Reference:	<Insert client name>

Note: We do not accept cheques.

Please provide your Bank Details for redemption and distribution payments.

Financial Institution	<input type="text"/>	
Branch Address	<input type="text"/>	
Account Name	<input type="text"/>	
Account Number	<input type="text"/>	BSB Number <input type="text"/>

Section C: Investment Detail

Please specify the dollar amount to be invested in each Fund and the total amount of your investment below. Please confirm you have read the PDS of your selected Fund(s) by ticking in the space provided.

Fund Name	ARSN	PDS Issue Date	Investment Amount (\$)	Investment Amount (\$)	Minimum Initial PDS Read
Morningstar High Growth Real Return Fund - Class B	092 226 358	30 September 2019	500,000.00	\$ <input type="text"/>	<input type="checkbox"/>
Morningstar Growth Real Return Fund - Class B	092 234 136	30 September 2019	500,000.00	\$ <input type="text"/>	<input type="checkbox"/>
Morningstar Balanced Real Return Fund - Class B	092 229 975	30 September 2019	500,000.00	\$ <input type="text"/>	<input type="checkbox"/>
Morningstar Moderate Real Return Fund - Class B	092 232 589	30 September 2019	500,000.00	\$ <input type="text"/>	<input type="checkbox"/>
Total				\$ <input type="text"/>	

If you provide a correctly completed application request, including required identification documentation and cleared funds **in full**, prior to the 2:00pm (Sydney time) cut-off on a Business Day, you will generally pay the entry price calculated as at the close of business on that Business Day. For correctly completed application requests and cleared funds **in full** received after the 2.00pm (Sydney time) cut-off, you will generally pay the entry price calculated as at the close of business on the next Business Day.

Section D: Distribution Election

Please indicate how you wish distributions to be processed. If no election is made, income distributions will be reinvested.

- Reinvest my distributions; or
- Pay my distributions into the bank account detailed as previously provided in Section B.

If 'Reinvest my distributions' is selected, then the applicant can't select or tick 'Pay my distributions into the bank account detailed as previously provided in Section B.'

Section E: Communications

By applying to invest in the Funds, you consent and agree to your personal information being obtained and used by Morningstar and other parties as explained in the Privacy Statement in the Additional Information Document. The type of information held includes your name, address and other information that you provide when opening your account, as well as records of your account transactions and the value of your unit holding. Please refer to the Privacy Statement in the Additional Information Document for further information.

Morningstar are required to send you various communications about your investment including your monthly investor statements, transaction confirmations and financial reports. Please indicate below how you prefer to receive these communications.

- Hard Copy (Postal address as supplied on page 32 of the Application Form will be used.)
- Email (Email address as supplied on page 32 of the Application Form will be used.)
- From time to time we may provide you with information about other products and services that we or our related companies offer. Please tick the box if you do not wish to receive this information.

Financial Reports

Financial reports for the Fund(s) can be obtained from the Morningstar website (<http://www.morningstarinvestments.com.au>) or by emailing invest@morningstar.com.au.

Section F: Adviser Details (to be completed by advisers)

Please complete your adviser details (if applicable):

Adviser Name

Adviser Firm Name

Adviser Authorised Representative Number

Dealer Group Name

Dealer Group AFS Licence Number

Address

Suburb

State

Postcode

Country

Phone Number

Email Address

Morningstar Portal – Direct Adviser

Morningstar Portal – Direct Adviser allows registered advisers to view their clients' direct Morningstar investment details and generate client holdings reporting. Please go to <https://morningstarinvestments.com.au/investors> to access the Portal.

If you do not yet have a username, please visit <https://www.morningstarinvestments.com.au/direct-adviser-register> to register.

Should you require any assistance, please call us on 1800 951 999 or email us at invest@morningstar.com.au.

Please fill in your Adviser Username (if applicable) below, so you can view the investment details of this initial application (if successful) on Morningstar Portal – Direct Adviser.

Declaration and Signatures

I/We acknowledge and declare that:

1. I/We have received, read and understood the PDS for the selected Fund(s) identified on page 30 of this Application Form and the Additional Information Document including the Privacy Statement.
2. I/We consent to the collection, use and disclosure of my/our personal information in accordance with the Privacy Statement in the Additional Information Document, Morningstar's Privacy Policy available at morningstarinvestments.com.au/privacy-policy and the Privacy Policy of the custodian of the Fund(s) available at morningstarinvestments.com.au/custodian-privacy-policy (including the disclosure of my personal information to certain countries located outside of Australia).
3. I/We acknowledge that by providing consent to the disclosure of my/our personal information outside Australia, I/we acknowledge that neither Morningstar nor the custodian are required to ensure that any overseas recipients handle my/our personal information in accordance with Australian privacy laws that overseas recipients are subject to foreign law that could compel the disclosure of my/our personal information to a third party such as an overseas authority.
4. I/We confirm this Application Form accompanies the PDS for the selected Fund(s).
5. I/We agree to be bound by the terms and conditions set out in the PDS for the Fund(s), the terms of the Fund's/Funds' Constitution and the law and any agreement between Morningstar and myself/ourselves, in each case as amended from time to time.
6. I/We acknowledge that investments in the Fund(s) are not deposits with or other liabilities of Morningstar, or of any related corporation of Morningstar, and are subject to investment risk, including possible delays in repayment and loss of capital invested.
7. I/We further acknowledge that neither Morningstar, nor any of its related companies, directors, officers, the investment managers appointed or its external service providers, guarantee that my/our investment will gain or retain its value, guarantee the repayment of capital or guarantee the performance of the Fund(s).
8. I/We consent to receive any requisite notifications electronically (or as preferred by Morningstar).
9. I/We declare that all details given in this Application Form are accurate and complete and that I/we have the power to invest in the Fund(s).
10. I/We am/are Australian resident(s) and have received and accepted this offer in Australia.
11. I/We agree to give further information or personal details that Morningstar reasonably believes is required in order to meet its obligations under anti-money laundering, counter-terrorism or taxation legislation. By making this application, I/we represent and covenant that the funds I/we are investing are not the proceeds of crime, money laundering or connected with the financing of terrorism.
12. I/We agree that, Morningstar may in its absolute discretion determine not to issue units to me/us, refuse to transfer units from or to me/us, may cancel any units which have been issued to me/us or may redeem any units issued to me/us if Morningstar believes such action to be necessary or desirable in the light of its obligations under the Commonwealth Anti-Money Laundering and Counter-Terrorism Financing Act 2006 or any related legislation.
13. I/We agree that subject to any cooling off rights, once this Application Form has been received by Morningstar or its agents, it cannot be withdrawn.
14. I/We declare that I am/we are not commonly known by any other names different from those disclosed in this Application Form.
15. I/We declare any documents or information used for verification purposes in support of my/our application are complete and correct.
16. I/We acknowledge that it may be a criminal offence to knowingly provide false, forged, altered or falsified documents or misleading information or documents when completing this Application Form.
17. I/We acknowledge that if I/we fail to pay the full amount of the application monies in respect of the units the subject of this application either at the same time as making this application, or by any later date agreed with us, the amount owing together with any costs, expenses or damages incurred in relation to the Fund(s) as a result of the non-payment, shall be a debt payable by me/us to Morningstar in relation to the relevant Fund(s), and either no units will be issued to me/us or any units which have been issued may be cancelled or redeemed by Morningstar in its discretion.

Declaration and Signatures

18. I/We agree to meet the costs, expenses or penalties incurred by the Fund(s) in relation to the realisation of Fund assets to meet any redemption request I/we make, or any request for redemption proceeds to be paid to me/us by a particular method, and any other costs, expenses, penalties, losses, liabilities or damages or other amounts incurred by Morningstar or the Fund(s) on my/our behalf, or other amounts owing by me/us in relation to the Fund(s), and to repay any amount paid by Morningstar to redeem my/our units in order to meet such costs, expenses, penalties, losses, liabilities, damages or other amounts owing in respect of the Fund(s) and in order to meet any outstanding management fees payable by me/us to Morningstar.
19. I/We indemnify Morningstar and its agents in respect of any loss, claim or liability incurred by any of them relying on or acting pursuant to this Application Form or any notices, instructions and requests received by authorised signatories.
20. I/We agree that, if I/we have provided an email address to Morningstar, Morningstar (and any of its agents appointed for this purpose) may correspond with me/us using the email address provided for any purpose related to the administration of my investment in the Fund(s).

Warranties as to Commonwealth Anti-Money Laundering and Counter-Terrorism, CRS and FATCA – for Both Existing and New Investors

Where the Fund invests in overseas funds which are subject to US legislation, the investment managers need to know that investors in the Fund are not involved in money laundering so that those managers can meet their own anti-money laundering obligations under US law. Therefore, by making this application, you represent and covenant that neither you, nor any Related Person, are:

21. A person or entity whose name appears on the US Specially Designated Nationals List.
22. A Non-US Shell Bank
23. A person or entity resident in, or whose subscription funds are transferred from or through, an account in a Non-Cooperative Jurisdiction.
24. A Senior Non-US Political Figure.
25. A member of the Immediate Family of a Senior Non-US Political Figure.
26. A Close Associate of a Senior Non-US Political Figure.
27. A resident in, organised or chartered under the laws of, a jurisdiction that has been designated by the Secretary of the Treasury under Section 311 or 312 of the USA PATRIOT Act as warranting special measures due to money laundering concerns.
28. Entities and/or their persons that are subject to economic sanction including, without limitation, all applicable sanctions regimes promulgated by the United Nations, the European Union, the U.S. Office of Foreign Assets Control, and/or any other applicable jurisdiction's economic sanctions laws; and that the funds that you are investing do not originate from, nor will be routed through, an account maintained at a Non-US Shell Bank, an 'offshore bank' or a bank organised or chartered under the laws of a Non-Cooperative Jurisdiction.
29. I/We will provide Morningstar or its nominee any information that Morningstar reasonably requires in order to enable it to meet all of its compliance, reporting and other obligations under the United States of America Foreign Account Tax Compliance Act ('FATCA') and Common Reporting Standards for Automatic Exchange of Information in Tax Matters, and all associated rules and regulations from time to time (including, without limitation, the Inter-Governmental Agreement ('IGA') entered into between the governments of the US and Australia).
30. I/We understand that where I/we have provided Morningstar or its nominee with information about my status or designation under or for the purposes of FATCA and Common Reporting Standards for Automatic Exchange of Information in Tax Matters (including, but without limitation, US residency or citizenship status and FATCA status as a particular entity type) and all associated rules and regulations, Morningstar will treat that information as true and correct without any additional validation or confirmation being undertaken by Morningstar except where it is under a legal obligation to do so.

You agree to notify Morningstar promptly of any change in information affecting any of these representations and covenants.

Declaration and Signatures

Signature of Investor 1

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

Capacity

- | | | |
|---|--|-----------------------------------|
| <input type="checkbox"/> Individual | <input type="checkbox"/> Partner | <input type="checkbox"/> Director |
| <input type="checkbox"/> Joint Investor | <input type="checkbox"/> Trustee | |
| <input type="checkbox"/> Sole Trader | <input type="checkbox"/> Sole Director | |

Signature of Investor 2

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

Capacity

- | | | |
|---|--|-----------------------------------|
| <input type="checkbox"/> Individual | <input type="checkbox"/> Partner | <input type="checkbox"/> Director |
| <input type="checkbox"/> Joint Investor | <input type="checkbox"/> Trustee | |
| <input type="checkbox"/> Sole Trader | <input type="checkbox"/> Sole Director | |

If there are three or more investors, you may provide these details on a separate page and attach to this Application Form.

What's Next?

Thank you for completing the application form.

Note: We do not accept cheques.

Please send your completed application form, **including the required identification documentation** to:

Attention: Morningstar Unit Registry

C/- Link Market Services Limited

PO Box 3721

Rhodes NSW 2138

To help speed up the application process, we ask that you call us on 1800 951 999 or email us at invest@morningstar.com.au to let us know that your completed application form has been submitted.