

Morningstar Funds – Application Form (Class A)

effective from 3 November 2025

Who can apply:		Go to:
New investors	▶ Australian resident investors receiving a PDS (including electronically) in Australia. ▶ Applications from outside Australia will only be accepted at Morningstar's discretion where it is not unlawful to do so.	Page 2
Existing investors	▶ Existing investors should apply via the Additional Investment Application Form available on www.morningstarinvestments.com.au/classa	

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 (AID) 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 and the AID. Morningstar will send paper copies of the PDS, AID and Application Form, on request and without charge.

You should read the relevant PDS and the AID carefully before completing this Application Form.

You should consider the appropriateness of the Fund(s) having regards to your own objectives, financial situation and needs and seek professional financial advice tailored to your personal circumstances before making an investment decision.

**Please save this form in a way that allows you to maintain access to it before completing.
Your web browser may not support the print and save functionality in this 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 sections which are relevant to you.

What do I need to fill in?

Investor type	Section to be completed	Additional sections to be completed	Page
Individual/Joint Investor/Sole Trader	1	General Details Declaration and Signatures	32-38 39
Company/Corporate Trustee	2	General details Declaration and Signatures	32-38 39
Trust/Superannuation Fund with Individual Trustee	1 3	General Details Declaration and Signatures	32-38 39
Trust/Superannuation Fund with Corporate Trustee	2 3	General Details Declaration and Signatures	32-38 39
Partnership	4	General Details Declaration and Signatures	32-38 39
Agent of Investors ¹	1 2 3 4 5	General Details Declaration and Signatures	32-38 39

1 If you are:

- An investor appointing an agent to act on your behalf in relation to your investment in the Fund(s), 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(s), 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
Individual/Joint Investor/Sole Trader	1	Identification Documents Required	5
Company/Corporate Trustee	1 2	Identification Documents Required	5 and 13
Trust/Superannuation Fund with Individual Trustee	1 3	Identification Documents Required	5 and 22
Trust/Superannuation Fund with Corporate Trustee	1 2 3	Identification Documents Required	5, 13 and 22
Partnership	1 4	Identification Documents Required	5 and 28
Agent of Investors	1 5	Identification Documents Required	5 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, we 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/- MUFG Corporate Markets (AU) Limited
Locked Bag 5038
Parramatta NSW 2124

How do I transfer the funds?

Note: We do not accept cheques.

You can transfer funds electronically—please refer to page 34.

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).
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1(a) Individual 1/Sole Trader (if applicable, Individual Trustee 1 needs to complete his/her details here)

Title	Given Name(s)	Surname	
Date of Birth (DD/MM/YYYY)		Place of Birth (City, Country)	
Residential Address			
Suburb	State	Postcode	Country
Tax File Number ² 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 needs to complete his/her details here)

Title	Given Name(s)	Surname	
Date of Birth (DD/MM/YYYY)		Place of Birth (City, Country)	
Residential Address			
Suburb	State	Postcode	Country

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

Tax File Number ² 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 (if any)		
Principal Place of Business			
Suburb	State	Postcode	Country

1(d) Identification Documentation for Individuals

You must attach the following **certified** copies of documents (dated) to this Application Form. Certification must be dated within the last 12 months. 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 select):

☐

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;☐☐

OR

Option 2:

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

Australian birth certificate;

Australian citizenship certificate;

Birth certificate issued by a foreign government;

Citizenship certificate issued by a foreign government;

Pension card issued by Centrelink.

AND

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

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 (the notice must contain the individual's name and residential address); 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 organisation, either in Australia or overseas. Immediate family members and/or close associates of these individuals are also considered PEPs. Examples of PEPs include heads of state or of government, senior politicians, senior government, judicial or military officials, senior executives of state-owned corporations, and important political party officials.

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	TFN ⁴ , ABN or Exemption Code (if any)	Australian Tax Resident (Yes/No)
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Foreign Taxpayer Identification Number 1 (TIN) or Exemption Code (if any)	Foreign Jurisdiction 1
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Foreign Taxpayer Identification Number 2 (TIN) or Exemption Code (if any)	Foreign Jurisdiction 2
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Name of Regulator (if licensed by an Australian Commonwealth, State, or Territory statutory regulator)

Licence Details

Registered Office Address in Australia or Address in Country of Formation

Suburb	State	Postcode	Country
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Principal Place of Business in Australia or Country of Formation (if a local agent is used, please also provide the name of the local agent)

Suburb	State	Postcode	Country
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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 Company ☐ Public Company ☐ Others (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:

Director 1

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

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.

Director 2

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

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)

Director 3

Title

Given Name(s)

Surname

Date of Birth (DD/MM/YYYY)

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.

Director 4

Title

Given Name(s)

Surname

Date of Birth (DD/MM/YYYY)

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.

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

2(c) Beneficial Owner/Shareholder

You are not required to complete this section if you are an Australian Public Listed Company, majority owned by an Australian Public Listed Company or a Regulated Company.

Please 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/YYYY)
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/YYYY)
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/YYYY)
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/YYYY)

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.

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

If 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 ("NFE")

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

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 Non-Financial Foreign Entity (“NFFE”) 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.

Are there any controlling persons you have provided this information for already? If so, please provide their names and cross-refer to the relevant section of this form below:

Name of Controlling Person

Section

Please provide information for any other controlling persons below:

Controlling Person

Title

Given Name(s)

Surname

Date of Birth (DD/MM/YYYY)

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

Controlling Person

Title

Given Name(s)

Surname

Date of Birth (DD/MM/YYYY)

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

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. Certification must be dated within the last 12 months. 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 select):

Certificate of registration or incorporation issued by ASIC; or

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

Please select 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. Certification must be dated within the last 12 months. 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 select):

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; or

Foreign government issued national identity card containing a photograph and signature of the person.

OR

Option 2:

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

Australian birth certificate;

Australian citizenship certificate;

Birth certificate issued by a foreign government (for PEP only);

Citizenship certificate issued by a foreign government (for PEP only);

Pension card issued by Centrelink.

AND

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

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 (the notice must contain the individual's name and residential address); 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 organisation, either in Australia or overseas. Immediate family members and/or close associates of these individuals are also considered PEP. Examples of PEPs include heads of state or of government, senior politicians, senior government, judicial or military officials, senior executives of state-owned corporations, and important political party officials).

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)

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

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 which only has wholesale clients and does not make small scale offerings to which section 1012E of the *Corporations Act 2001* (Cth) applies

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

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

ABN

Registration/Licensing Details

Government Superannuation Fund established by legislation

Name of the Legislation Establishing the Fund

Other Trust Type

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

Section 3: Applicant Details – Trust/Superannuation Fund

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.

Note: You do not need to complete this section if all of the following apply:

- ▶ You provide a “custodial or depository service” as defined in item 46 of Table 1 in section 6 of the AML/CTF Act;
- ▶ You hold an Australian financial service licence authorising you to provide custodial or depository services under the *Corporations Act 2001* (Cth) or you are exempt from the requirement to hold such a licence;
- ▶ You are enrolled as a reporting entity with the Australian Transaction Reports and Analysis Centre; and
- ▶ You have met your obligations with respect to carrying out applicable customer identification procedures and ongoing customer due diligence requirements in accordance with Chapter 15 of the *Anti-Money Laundering and Counter-Terrorism Rules Instrument 2007 (No. 1)* (Cth) with respect to your underlying customers.

Note: You also do not need to complete this section under rule 4.12.2 of the AML/CTF Rules if the type of trust is one of the following:

- ▶ a managed investment scheme registered by ASIC;
- ▶ managed investment scheme that is not registered by ASIC and that:
 - ▶ only has wholesale clients; and
 - ▶ does not make small scale offerings to which section 1012E of the *Corporations Act 2001*(Cth) applies;
- ▶ registered and subject to the regulatory oversight of a Commonwealth statutory regulator in relation to its activities as a trust; or
- ▶ a government superannuation fund established by legislation.

Section 3: Applicant Details – Trust/Superannuation Fund

Beneficiary 1

Title	Given Name(s)	Surname	Date of Birth (DD/MM/YYYY)
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Residential Address

Suburb	State	Postcode	Country
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Politically Exposed Person (PEP)⁸

Are you a PEP?

Yes No

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

Beneficiary 2

Title	Given Name(s)	Surname	Date of Birth (DD/MM/YYYY)
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Residential Address

Suburb	State	Postcode	Country
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Politically Exposed Person (PEP)⁸

Are you a PEP?

Yes No

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

Beneficiary 3

Title	Given Name(s)	Surname	Date of Birth (DD/MM/YYYY)
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Residential Address

Suburb State Postcode Country

Politically Exposed Person (PEP)⁸

Are you a PEP?

Yes No

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

Beneficiary 4

Residential Address

Suburb	State	Postcode	Country
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Are you a PEP?

Yes No

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

3(f)(i) FATCA and CRS

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 U.S. trust for U.S. tax purposes?

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

Section 3: Applicant Details – Trust/Superannuation Fund

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)

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)(iii))

vi. Active Non-Financial Entity (“NFE”)

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)(iii))

Section 3: Applicant Details – Trust/Superannuation Fund

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 U.S. for U.S. 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 U.S. for U.S. tax purposes. Please leave blank if none of them are U.S. citizens or residents of the U.S. for U.S. tax purposes.

Full Name 1

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

U.S. TIN

Full Name 2

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

U.S. TIN

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 (Provide their GIIN) |

iii. A U.S. trust for U.S. 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

Section 3: Applicant Details – Trust/Superannuation Fund

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 (“NFE”)

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 Non-Financial Foreign Entity ("NFFE") 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.

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

Are there any controlling persons you have provided this information for already? If so, please provide their names and cross-refer to the relevant section of this form below:

Name of Controlling Person

Section

Please provide information for any other controlling persons below:

Controlling Person

Title

Given Name(s)

Surname

Date of Birth (DD/MM/YYYY)

Place of Birth (City, Country)

Residential Address

Suburb

State

Postcode

Country

Tax File Number⁷ 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

Section 3: Applicant Details – Trust/Superannuation Fund

Controlling Person

Title	Given Name(s)	Surname	
Date of Birth (DD/MM/YYYY)		Place of Birth (City, Country)	
Residential Address			
Suburb	State	Postcode	Country
Tax File Number ⁷ 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	

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.

3(g) Identification Documentation for Trusts

You must attach the following certified copies of documents (dated) to this Application Form. Certification must be dated within the last 12 months. 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 select):

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 5 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 13 titled 'Identification Documentation Required'.

In addition:

If you are a **regulated trust**, please provide the required documents outlined in Option 2(a).
If you are an **unregulated trust**, please provide the required documents outlined in Option 2(b).
Additional documents are not required if Option 2(c) applies.

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 select):

Screen print 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 (www.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 select):

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.

Option 2(c): Regulated/Unregulated Trusts

If the below boxes are all selected, then you are not required to provide Settlor or Beneficial Owner documentation:

You provide a "custodial or depository service" as defined in item 46 of Table 1 in section 6 of the AML/CTF Act;

You hold an Australian financial service licence authorising you to provide custodial or depository services under the *Corporations Act 2001* (Cth) or you are exempt from the requirement to hold such a licence;

You are enrolled as a reporting entity with the Australian Transaction Reports and Analysis Centre; and

You have met your obligations with respect to carrying out applicable customer identification procedures and ongoing customer due diligence requirements in accordance with Chapter 15 of the *Anti-Money Laundering and Counter-Terrorism Rules Instrument 2007 (No. 1)* (Cth) with respect to your underlying customers.

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 selected at section 3(b) either 'Registered Managed Investment Scheme', 'Regulated Trust' or 'Government Superannuation Fund'.
- ▶ You satisfy each of the following:
 - ▶ You provide a "custodial or depository service" as defined in item 46 of Table 1 in section 6 of the AML/CTF Act;
 - ▶ You hold an Australian financial service licence authorising you to provide custodial or depository services under the *Corporations Act 2001* (Cth) or you are exempt from the requirement to hold such a licence;
 - ▶ You are enrolled as a reporting entity with the Australian Transaction Reports and Analysis Centre; and
 - ▶ You have met your obligations with respect to carrying out applicable customer identification procedures and ongoing customer due diligence requirements in accordance with Chapter 15 of the *Anti-Money Laundering and Counter-Terrorism Rules Instrument 2007 (No. 1)* (Cth) with respect to your underlying customers.

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 organisation, either in Australia or overseas. Immediate family members and/or close associates of these individuals are also considered PEP. Examples of PEPs include heads of state or of government, senior politicians, senior government, judicial or military official, senior executives of state-owned corporations, and important political party officials).

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		TFN ⁹ , 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	

Section 4: Applicant Details – Partnership

4(b) Partner Details

All Partners must provide this information.

Partner 1

Title	Given Name(s)	Surname	
Date of Birth (DD/MM/YYYY)			
Residential Address			
Suburb	State	Postcode	Country

Partner 2

Title	Given Name(s)	Surname	
Date of Birth (DD/MM/YYYY)			
Residential Address			
Suburb	State	Postcode	Country

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

Section 4: Applicant Details – Partnership

4(c)(i) 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 U.S. partnership?

Yes—Please provide the partnership's U.S. 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 (Provide their GIIN)

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(d)(ii))

v. Active Non-Financial Entity (“NFE”)

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
- Others: Please Specify

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

Section 4: Applicant Details – Partnership

4(c)(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 Non-Financial Foreign Entity (“NFFE”) 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.

Please provide details of any persons who are not partners (listed above) who 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.

Are there any controlling persons you have provided this information for already? If so, please provide their names and cross-refer to the relevant section of this form below:

Name of Controlling Person	Section
----------------------------	---------

Please provide information for any other controlling persons below:

Controlling Person

Title	Given Name(s)	Surname
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Date of Birth (DD/MM/YYYY)	Place of Birth (City, Country)
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Residential Address

Suburb	State	Postcode	Country
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Tax File Number ⁹ or Exemption Code	Australian Tax Resident (Yes/No)
--	----------------------------------

Foreign Taxpayer Identification Number 1 (TIN) or Exemption Code (if any)	Foreign Jurisdiction 1
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Foreign Taxpayer Identification Number 2 (TIN) or Exemption Code (if any)	Foreign Jurisdiction 2
---	------------------------

Controlling Person

Title	Given Name(s)	Surname
-------	---------------	---------

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

Residential Address

Suburb	State	Postcode	Country
--------	-------	----------	---------

Tax File Number ⁹ 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
---	------------------------

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(d) Partnership Identification Documentation

You must attach the following certified copies of documents (dated) to this Application Form. Certification must be dated within the last 12 months. Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.

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; or

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.

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 Email

Agent's Postal Address (not a PO Box)

Suburb	State	Postcode	Country
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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/we agree to:

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

Signature of Agent 1

Date _____

Please note: Physical signature is required on this form. Digital and electronic signatures are not acceptable.

Signature of Agent 2

Date _____

Please note: Physical signature is required on this form. Digital and electronic signatures are not acceptable.

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/YYYY)
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Residential Address

Suburb State Postcode Country

Declaration by Verifying Officer

I agree to:

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

Signature of Verifying Officer

Date _____

Please note: Physical signature is required on this form. Digital and electronic signatures are not acceptable.

Section 5: Applicant Details – Agent of Investors

5(c) Identification Documentation for Agent and Verifying Officer

You must attach the following certified copies of documents (dated) to this Application Form. Certification must be dated within the last 12 months. 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 select):

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 select):

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: Contact 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

Residential or Business Address (not a PO Box)

Suburb

State

Postcode

Country

Postal Address
As Above

Suburb

State

Postcode

Country

Phone (Home)

Phone (Work)

Mobile

Email

Section B: Consumer Attributes

As required under the mandatory Design and Distribution Obligations legislation, Morningstar as the issuer of financial product must collect data to determine there is an appropriate target market for our products and ensure that our products have the key attributes which are likely to be consistent with the likely objectives, financial situations and needs of a class of consumers to whom the product is targeted. For more information, please visit our website at www.morningstarinvestments.com.au/ddo

Please complete this section so that Morningstar can ensure that our products are distributed to investors who fall within the Target Market Determination (TMD).

What is your primary investment objective?

Capital Growth Capital Preservation Income Distribution

What is your intended use of this investment in your investment portfolio?

Solution/Standalone (up to 100%)	Core Component (up to 50%)	Satellite Allocation (up to 10%)
Major allocation (up to 70%)	Minor allocation (up to 25%)	

What is your intended investment timeframe (in years)?

What is your tolerance for risk (your ability to bear loss)?

Low¹⁰ Medium¹¹ High¹² Very High¹³ Extremely High¹⁴

What do you anticipate your withdrawal needs may be?

Within one week of request	Within one month of request	Within three months of request	Within one year of request
Within 5 years of request	Within 10 years of request	10 years or more	

Have you received personal financial advice from a licensed financial adviser in relation to this investment?

Yes No

If so, did your financial adviser consider you to be within the TMD¹⁵ for the product(s) you are investing in?

Yes No

¹⁰ If you select 'Low', this means that you are conservative or low risk in nature, seeking to minimise potential losses (e.g. have the ability to bear up to 1 negative return over a 20 year period (SRM 1 to 2)) and comfortable with a low target return profile. You typically prefer defensive assets such as cash and fixed income.

¹¹ If you select 'Medium', this means that you are moderate or medium risk in nature, seeking to minimise potential losses (e.g. have the ability to bear up to 4 negative returns over a 20 year period (SRM 3 to 5)) and comfortable with a moderate target return profile. You typically prefer a balance of growth assets such as shares, property and alternative assets and defensive assets such as cash and fixed income.

¹² If you select 'High', this means that you are higher risk in nature and can accept higher potential losses (e.g. have the ability to bear up to 6 negative returns over a 20 year period (SRM 6)) in order to target a higher target return profile. You typically prefer predominantly growth assets such as shares, property and alternative assets with only a smaller or moderate holding in defensive assets such as cash and fixed income.

¹³ If you select 'Very High', this means that you have a more aggressive or very high risk appetite, seeks to maximise returns and can accept higher potential losses (e.g. have the ability to bear 6 or more negative returns over a 20 year period (SRM 7) and possibly other risk factors, such as leverage). You typically prefer growth assets such as shares, property and alternative assets.

¹⁴ If you select 'Extremely High', this means that you have an extremely high risk appetite, seek to obtain accelerated returns and can accept significant volatility and potential losses and possibly other risk factors, such as significant use of derivatives, leverage or short positions or may be in emerging or niche asset classes).

¹⁵ As the issuer of financial products, Morningstar is required to make a TMD for a product. The TMD must be in writing. Each TMD describes the target market, establishes distribution conditions and reporting requirements for each product. Our TMDs are available on our website at morningstarinvestments.com.au/tmd

General Details

Section C: 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 Australian Bank Account Details for redemption payments.

Financial Institution

Branch Address

Account Name

BSB Number

Account Number

Please provide your Australian Bank Account Details for distribution payments. Same as above Australian Bank Account Details

Financial Institution

Branch Address

Account Name

BSB Number

Account Number

General Details

Purpose of Investment

Source of funds¹⁶ being invested (please select):

- ☐ Savings
- ☐ Superannuation contributions
- ☐ Donation/gift
- ☐ Normal course of business
- ☐ Investments
- ☐ Commission
- ☐ Inheritance
- ☐ Asset sale
- ☐ Others (please specify)

If your source of wealth¹⁷ is clearly derived from legitimate means such as the above, and you are engaging in a transaction which is consistent with that wealth, you may not be required to provide evidence such as:

- ▶ Where you are dealing with family fortune which may have been derived as a result of inheritance such as Will statement.
- ▶ If you are an active entrepreneur, ASIC company extracts and website screenshots to ensure all fits within your profile.
- ▶ If you are a former entrepreneur and the business has been 'sold to third party', provide the name of purchaser, approximate date of sale, and other details.
- ▶ If you a high net worth professional with employment and wealth generated, certain employment details to assess whether this fits with your profile.

16 Source of funds refers to the origin of the particular funds or other assets involved in one or more transactions between you and Morningstar.

17 Source of wealth refers to the origin of your entire wealth including the volume of wealth you would be expected to have accumulated and how you acquired that wealth.

Section D: 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 and AID of your selected Fund(s) by selecting in the space provided.

Fund Name	ARSN/APIR	PDS Issue Date	Minimum Initial Investment Amount (\$)	Investment Amount (\$)	Select to Indicate PDS and AID Read
Morningstar Multi Asset Real Return Fund	092 232 356/INT0040AU	3 November 2025	10,000.00	\$	
Morningstar High Growth Real Return Fund	092 226 358/INT0042AU	3 November 2025	10,000.00	\$	
Morningstar Growth Real Return Fund	092 234 136/INT0038AU	3 November 2025	10,000.00	\$	
Morningstar Balanced Real Return Fund	092 229 975/INT0028AU	3 November 2025	10,000.00	\$	
Morningstar Moderate Real Return Fund	092 232 589/INT0034AU	3 November 2025	10,000.00	\$	
Morningstar International Shares (Unhedged) Fund	092 229 199/INT0052AU	3 November 2025	10,000.00	\$	
Morningstar International Shares (Hedged) Fund	092 227 435/INT0050AU	3 November 2025	10,000.00	\$	
Morningstar Australian Shares Fund	092 226 563/INT0022AU	3 November 2025	10,000.00	\$	
Total				\$	

General Details

If you provide a correctly completed Application Form, including required identification documentation and payment in 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 Form and payment in 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 E: 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 C.

Section F: Communications

By applying to invest in the Fund(s), 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 AID. 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 AID for further information.

Various Communications

Morningstar is required to send you various communications about your investment including your monthly investor statements, transaction confirmations, notices and other documents relating to any meetings of members and annual financial reports. You may also opt out of receiving annual financial reports. Please indicate below how you prefer to receive these communications.

Document Type	Hard copy (Postal address as supplied on page 32 of this Application Form will be used)	Email (Email address as supplied on page 32 of this Application Form will be used)	Prefer not to receive
Monthly investor statement			N/A
Transaction confirmation			N/A
Notice of meeting and any other document relating to a meeting of members			N/A
Annual financial reports			

You may at any time request that we send you the following kinds of documents in hard copy or electronic form:

- ▶ Notice of meeting and any other document relating to a meeting of members
- ▶ Annual financial reports

You may change your communication elections at any time by completing a Change of Details Form.

General Details

Financial Reports

The Fund's annual report and half-yearly report, where required, will be made available to investors each year. Copies of these reports are available on our website at www.morningstarinvestments.com.au/financial-statements

Alternatively, please email us at invest@morningstar.com.au to request a copy of any report.

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

Please complete your adviser details (if applicable):

Adviser Name

Adviser Firm Name

Adviser Authorised Representative Number

Address

Suburb State Postcode Country

Telephone

Email

Dealer Group Name

Dealer Group AFS Licence Number

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 www.morningstarinvestments.com.au/investors to access the Portal.

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

1. I/We confirm that I/we have received, read and understood the PDS for the selected Fund(s) identified on page 36 of this Application Form and the AID 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 AID, Morningstar's Privacy Policy available at www.morningstar.com/company/privacy-policy/apac/au and the Privacy Policy of the custodian of the Fund(s) available at www.morningstarinvestments.com.au/custodian-privacy-policy (including the disclosure of my personal information to certain countries located outside of Australia).
3. By providing consent to the disclosure of my/our personal information outside Australia, I/we acknowledge that neither Morningstar Investment Management Australia Limited (ABN 54 071 808 501, AFSL 228986) ('Morningstar') nor the custodian are required to ensure that any overseas recipients handle my/our personal information in accordance with Australian privacy laws and 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 and the AID for the Fund(s), the terms of the Fund's/Funds' Constitution and the law and any agreement between Morningstar and me/us, in each case as amended from time to time.
6. I/We acknowledge that investments in the Fund(s) are not deposits with or 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) unless I/we have expressly requested for a particular kind of document to be sent to me in hard copy.
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 documents and/or information (which may include personal details) that Morningstar reasonably believes is/are 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 am/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 and may include but is not limited to its obligations under the Design and Distribution Obligations in Pt 7.8A of the Corporations Act 2001 and/or the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* (Cth) (AML/CTF Act) 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 name/s different from the name/s disclosed in this Application Form.
15. I/We declare that 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 Morningstar, 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.
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.

Declaration and Signatures

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 Agents.
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).
21. Where I am/we are signing this Application Form on behalf of a company that is acting as a trustee of a trust and the provider of a "custodial or depository service" within the meaning of item 46 of Table 1 of Subsection 6(2) of the AML/CTF Act, I/we represent and warrant that:
 - (a) the applicant either holds an Australian financial service licence (AFSL) authorising it to provide custodial or depository services under the *Corporations Act 2001* (Cth) or is exempt from the requirement to hold such an AFSL;
 - (b) the applicant's name and enrolment details are entered on the Reporting Entities Roll kept by AUSTRAC under the AML/CTF Act; and
 - (c) the applicant has carried out all applicable customer identification and ongoing customer due diligence obligations in accordance with Chapter 15 of the *Anti-Money Laundering and Counter-Terrorism Rules Instrument 2007 (No. 1)* (Cth) on its underlying customer(s).

Representations and Covenants Around Compliance with the Requirements of Certain Ex-Australia Tax Reporting and Anti-Money Laundering Legislation

Because the Fund(s) may be subject to the laws of other jurisdictions (e.g., those of the U.S.A. and the E.U.) as a result of its receipt/retention/investment of investor monies, the investment managers need certain information/representations from investors in the Fund regarding their compliance with any applicable laws of those other jurisdictions (e.g., those related to money laundering, tax reporting, etc.) in order for the investment managers themselves to meet their reporting/review/compliance obligations under law. To this end, by executing and delivering this application document, you represent and covenant that neither you, nor any immediately family member nor any third person (whether an individual or an entity) with whom it is publicly known that you maintain any kind of unusually close relationship are:

1. A person whose name appears on the U.S. Specially Designated Nationals and Blocked Persons List published by the U.S. Department of Treasury;
2. A non-U.S. shell bank (i.e., a financial institution without a physical presence in any jurisdiction), as that term is more fully described in the U.S.A. Patriot Act ("Non-U.S. Shell Bank");
3. A person who resides in, or whose Fund subscription funds are transferred from, a jurisdiction that: (a) has been designated (e.g., pursuant to action by the European Commission or the Financial Action Task Force) as a "Non-Cooperative Jurisdiction" because of its non-compliance with international money laundering principles or processes; or (b) has been designated by the U.S. Secretary of the Treasury as warranting "special measures" under the provisions of the U.S.A. Patriot Act;
4. A Senior Non-U.S. Political Figure (i.e., a senior official in the executive, legislative, administrative, military or judicial branches of any non-U.S. jurisdiction; or a senior official of a major non-U.S. political party; or a senior executive of a non-U.S., government-owned entity or any entity that has been formed by or for the benefit of such person);
5. Funding your investment in the Fund(s) with any monies originating from or passing through any financial institution: (a) whose banking license was issued by a jurisdiction designated as a Non-Cooperative Jurisdiction; (b) whose banking license was issued by a jurisdiction designated by the U.S. Secretary of the Treasury as warranting "special measures" under the provisions of the U.S.A. Patriot Act; (c) that has itself been designated by the U.S. Secretary of the Treasury as warranting special measures; (d) that qualifies as a Non-U.S. Shell Bank; or (e) that qualifies as an "offshore bank" (i.e., a bank whose license excepts it from conducting activities within the territory of the jurisdiction in which its banking license was issued or with citizens of that jurisdiction); and
6. Are subject to economic sanctions of any kind, including, without limitation, all sanctions regimes promulgated by the United Nations, the European Union, or the United States of America.
7. You agree to promptly provide Morningstar or its nominee with any information/documentation that Morningstar reasonably requires to allow Morningstar to meet its reporting and/or other compliance obligations under all applicable laws, including, without limitation, those of Australia, the United States of America, and the European Union and its member states. You represent that all such information/documentation (including, without limitation, the information provided in this application document) will be correct and complete as of the date provided and you understand and agree that Morningstar will treat that information/documentation as being correct and complete without the obligation to perform additional validation or confirmation (except where otherwise required by law to do so.) You further covenant that you will promptly notify Morningstar of any changes to such information/documentation as you reasonably become aware of them, including, without limitation, any changes to any of your responses to the above representations and covenants.

Consumer Attributes and Appropriateness of Morningstar Fund(s)

1. You acknowledge that the Morningstar Fund(s) is/are not "Capital Guaranteed" and is/are not suitable as standalone product(s) for investors with a "Low" Risk and Return profile or need for daily access to their funds. When using the Morningstar Fund(s), investors should at minimum, have a 2+ year investment timeframe.

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

Please note: Physical signature is required on this form. Digital and electronic signatures are not acceptable.

Title	Given Name(s)	Surname	Date
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Capacity

Individual

Partner

Director

Joint Investor

Trustee

Agent

Sole Trader

Sole Director

Signature of Investor 2

Please note: Physical signature is required on this form. Digital and electronic signatures are not acceptable.

Title	Given Name(s)	Surname	Date
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Capacity

Individual

Partner

Director

Joint Investor

Trustee

Agent

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/- MUFG Corporate Markets (AU) Limited
Locked Bag 5038
Parramatta NSW 2124

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.