

# INITIAL APPLICATION FORM

ALTRINSIC GLOBAL EQUITIES TRUST

INSTRUCTIONS TO COMPLETE

DATE: DECEMBER 2024

**You must complete this Initial Application Form if you are a new investor wishing to invest in the Altrinsic Global Equities Trust (Trust) for the first time.** The Responsible Entity of the Trust is MLC Investments Limited (MLC) (ABN 30 002 641 661) (AFSL 230705). MLC is the issuer of the current Product Disclosure Statement (PDS) and Product Guide for the Trust which provides important information about the Trust to assist you in deciding whether to invest in the Trust. You should read the PDS, Product Guide and any website updates for the Trust in full before completing this Initial Application Form. If you do not have a copy of the PDS, Product Guide and any website updates, a copy is available free of charge from [mlcam.com.au/aget](http://mlcam.com.au/aget) or by contacting Client Services on **1300 738 355 (0800 404 988 if calling from New Zealand)** or from your approved Australian financial adviser (Financial Adviser).

**Any person who gives another person a copy of this Initial Application Form must at the same time give the person a copy of the PDS and Product Guide.**

**Please print in BLOCK LETTERS and use BLACK or BLUE ink to complete this Initial Application Form and relevant Financial Services Council (FSC) identification form(s). If you make an error while completing this form, do not use correction fluid. Cross out your mistakes and have all signatories initial the changes.**

To ensure that we are able to process your application quickly and efficiently, please cross (X) each box below to confirm that you have completed each section of the Initial Application Form that is relevant to your investment:

☐ **Signed and dated** the Initial Application Form:

- ☐ **Individual investor** - sign and date the form.
- ☐ **Joint investors** - both investors to sign and date the form.
- ☐ **Company** - to be signed and dated by two directors or a director and secretary of the company or, if the company has only a sole director, that director.
- ☐ **Trusts (including self-managed super funds (SMSFs))** - to be signed and dated by a trustee.
- ☐ **Other (associations / government bodies / registered co-operatives / partnerships)** - to be signed and dated.
- ☐ **Authorised Signatory List** - if an organisation wishes to authorise persons other than the director(s)/secretary signing the Initial Application Form to make transactions in relation to the investment, then a certified copy of the Authorised Signatory List must be submitted to Registry Services.
- ☐ **Power of Attorney - sign and date the form in the presence of a witness.** Attach a certified copy of the Power of Attorney. Each page of the Power of Attorney document must be certified by a Justice of the Peace, solicitor or notary public. The Attorney needs to **complete the FSC identification form for individuals**, which is available on [mlcam.com.au/forms](http://mlcam.com.au/forms)

- ☐ Supplied your **TFN, ABN, TFN exemption** or country of tax residence for non-residents.
- ☐ Supplied your **email address**.
- ☐ Provided **certified proof of identity**- either to your Financial Adviser (who should complete the declaration in Section 9 of this Initial Application Form and attach

certified copies of identity verification documents) or attached to the Initial Application Form if you are investing directly with us.

☐ Provided **relevant FSC identification form(s)**.

☐ **Investing by Electronic Funds Transfer (EFT)** email your Initial Application Form, relevant FSC Identification form(s) and identity verification documents to Registry Services at:

[altrinsic\\_transactions@unitregistry.com.au](mailto:altrinsic_transactions@unitregistry.com.au)

**AND**

Send your original Initial Application Form, relevant FSC Identification form(s) and identity verification documents to:

Registry Services  
 Altrinsic Global Equities Trust  
 GPO Box 804  
 Melbourne VIC 3001 Australia

**AND**

Deposit your funds into the administrator's bank account:

- Bank: National Australia Bank Limited
- BSB No: 083 043
- Account No: 912 572 466
- **Bank BIC: NATAAU3303X**  
(for New Zealand investors only)
- Account Name: NNL ANF MLC Altrinsic Application Account
- Reference: [Investor's name(s)]

## Anti-Money Laundering, Counter-Terrorism Financing and Sanctions Obligations

We are required to comply with the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* (AML/CTF) and Sanctions laws.

As such we are required to collect and verify information from you or anyone acting on your behalf, including your related party, to comply with our obligations. In addition, we may ask for additional information that may be reasonably required for the purposes of AML/CTF and Sanctions laws. This could include the information about you, or a holder of a beneficial interest in the investment, or the source of funds used in connection with the investment.

We may be required to take necessary actions including delaying, blocking, freezing, or refusing the processing of any transaction related to your investment if we have reasonable grounds to suspect that the transaction may breach any obligation of, or cause us to commit or participate in an offence under any AML/CTF and Sanctions laws. We also reserve the right to report details of accounts or transactions to the relevant authorities where we are legally obliged to do so.

We will incur no liability to you or a related party if your transactions are delayed, blocked, frozen or refused under the above circumstances.

### Identity verification documents

Whether you are investing via a Financial Adviser or directly with MLC, you will be required to provide valid identity verification documentation. The actual documentation required will depend on whether you are an individual investor or a non-individual investor such as a superannuation fund, a trust or a company. The applicable documentation is outlined in the relevant FSC identification form(s) (refer to Section 11). **If any documentation you provide is not in English, it must be accompanied by an original copy of an English translation prepared by an accredited translator.**

If we do not receive all the required valid customer identity verification documents with your Initial Application Form or we are unable to verify your identity at any time, we may not be able to commence your investment or may not process any future withdrawal requests until we receive the required documents. We will contact you or your Financial Adviser as soon as possible if we require more information.

If you are investing through a Financial Adviser, they will be required to obtain acceptable identity verification documents from you prior to lodging your application. To do this, they will need to sight the original or certified copies of your identity verification documents and retain copies. They will then send us certified copies of your identity verification documents together with your Initial Application Form.

If you are not investing via a Financial Adviser or have not provided identity verification documents to your Financial Adviser, you will be required to send the **certified copies** of the original identity verification documents (not scanned copies) as listed in the relevant FSC identification form(s), which must be valid at the time you send them to us. Until we receive such document(s) we reserve the right to withhold processing any transaction requests you wish to make in the future.

If the Initial Application Form is signed under Power of Attorney, we will also require a certified copy of the Power of Attorney document and a specimen signature of the Attorney.

Please refer to 'Approved Certifiers' for a list of persons who can certify these documents and see 'Certified copy requirements' for details of how documents must be certified.

### Beneficial ownership and control of an entity

In accordance with Sections 3 and 11 (where applicable) MLC, as required by AML/CTF law, reserves the right to request, and verify, the identity of any persons who are deemed to own or control (directly or indirectly) for the non-individual entity. Please refer to the relevant FSC identification forms for definitions of the beneficial owner for each investor type.

For further information on this, please contact Client Services on **1300 738 355 (0800 404 988 if calling from New Zealand)**.

### Email terms and conditions

If emails are used in operating your account, you should understand that there is potentially a greater risk that a person could fraudulently send us an email and, by pretending to be you, withdraw money from your account. These terms and conditions apply when we (or Registry Services) receive email instructions or communications about your account.

These terms are in addition to any other requirements relating to you giving us instructions or completing any particular authority. We can change these terms by giving you 14 days' written notice, except where the changes adversely impact you, in which case we'll give you 30 days' written notice.

By investing in the Trust, you agree that MLC, Altrinsic Global Advisors, LLC (Altrinsic), and Registry Services are not responsible for any losses you may suffer as a result of any fraudulent communications received by email, except to the extent those losses arise directly from their or their agents' fraud, negligence, wilful misconduct or breach of contract.

You agree to be liable and indemnify MLC, Altrinsic and Registry Services for any losses suffered by any of them as a result of any fraudulent communications received by email to the extent those losses arise from your negligence, wilful default or fraud.

MLC, Altrinsic and Registry Services will only act on complete and legible communications from you. MLC, Altrinsic and Registry Services will not be liable for any loss which results from not receiving your email, except to the extent the losses or delays are caused by their or their agents' fraud, negligence, wilful misconduct or breach of contract.

### Australian tax file number

MLC is authorised under the Australian Income Tax Assessment Act 1936 to ask for your Australian tax file number (TFN) when you open an investment account for income distribution purposes. You don't have to provide your TFN and it's not an offence if you decide not to, but if you don't, 'Pay As You Go Withholding Tax' will be deducted at the highest marginal tax rate (plus Medicare Levy) from any income distributions payable to you.

## Certified copy requirements

A certified copy is a document that has been approved as a true copy of an original document. The following certification requirements **must appear on each page of the copy**:

- The text: **‘This is to certify that this is a true and correct copy of the original which I have sighted’**.
- **Signature** of the Approved Certifier.
- **Full printed name** of the Approved Certifier (e.g. Michelle Helena Citizen).
- **Capacity** of the Approved Certifier (e.g. solicitor).
- **Full address** of the Approved Certifier.
- **Registration number** (if applicable).
- **Date** that the document was certified.

Note: A photocopy of a certified document will not be accepted. Original certification only.

## Approved Certifiers

Identity verification documents may be certified as a true and correct copy of an original document by one of the following persons in Australia or for New Zealand investors, a person in New Zealand of equivalent capacity. The person certifying must state their capacity (from the list below) and complete according to **certified copy requirements** listed above.

1. A person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia as a legal practitioner (however described).
2. A Judge of a Court.
3. A Magistrate.
4. A chief executive officer of a Commonwealth Court.
5. A registrar or deputy registrar of a Court.
6. A Justice of the Peace.
7. A notary public (for the purposes of the Statutory Declaration Regulations 1993).
8. A police officer.
9. An agent of the Australian Postal Corporation who is in charge of supplying postal services to the public.
10. A permanent employee of the Australian Postal Corporation with two or more years of continuous service who is employed in an office supplying postal services to the public.
11. An Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955).
12. An officer with two or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 1993).
13. A finance company officer with two or more continuous years of service with one or more finance companies (for the purposes of the Statutory Declarations Regulations 1993).
14. An officer with, or authorised representative of, a holder of an Australian Financial Services Licence (AFSL), having two or more continuous years of service with one or more licensees.
15. A member of the Institute of Chartered Accountants in Australia, CPA Australia or the Institute of Public Accountants with two or more years of continuous membership.
16. A foreign public notary whose appointment is lawful and their status as a notary public can be verified.

## Privacy Notification

We are committed to protecting your privacy. Any personal information we collect about you will be handled in accordance with our privacy policy, which outlines how we manage your personal information, how you may access or correct your personal information, and how you may complain about a breach of your privacy. To obtain a copy of our privacy policy, please contact Client Services on **1300 738 355** or visit our website at **[mlcam.com.au/privacy](http://mlcam.com.au/privacy)**

We collect your personal information from the application form you complete when applying for this product for the purpose of providing you with the products and services that you request and for related purposes, including providing you with financial advice and ongoing services in relation to your account with us, or providing information about other products and services that may be of interest to you. You may contact us at any time to let us know that you do not want your personal information to be used or disclosed for marketing purposes. If you do not provide all the information requested in your application form, we may not be able to process your application.

To verify your identity for Know Your Customer (KYC) purposes, we may also solicit personal information about you from reliable identity verification service providers.

For the purpose of providing you with the products or services you have requested, we may disclose your personal information to our related bodies corporate or external parties, including your financial adviser or employer, banks or other financial institutions, medical professionals, insurers, legal or accounting firms, auditors, mail houses, or when required or authorised to do so by law. It is generally unlikely that we will disclose your personal information overseas, however, any overseas disclosure does not affect our commitment to safeguarding your personal information and we will take reasonable steps to ensure any overseas recipient complies with Australian privacy laws.

## 1. ADDITIONAL INVESTMENT

If you already have an investment in the Trust and wish to make an additional investment, you should use the Additional Investment Form available from **mlcam.com.au/aget** or by contacting Client Services on **1300 738 355 (0800 404 988 if calling from New Zealand)**, or from your Financial Adviser.

## 2. INVESTOR TYPE

*Mandatory (\*)*

Cross (X)	Investor type*	Sections to be completed*
<input type="checkbox"/>	Individuals / Joint investors / Sole traders	3A, 3B (if applicable), 4, 5, 6, 7, 8, 9 (if applicable), 10, 11A, 12, 13
<input type="checkbox"/>	Australian companies	3C, 4, 5, 6, 7, 8, 9 (if applicable), 10, 11B, 12, 13
<input type="checkbox"/>	Australian regulated trusts (including SMSFs and individual or corporate trustees)	3C, 4, 5, 6, 7, 8, 9 (if applicable), 10, 11C, 12, 13
<input type="checkbox"/>	Australian unregulated trusts and foreign trusts	3C, 4, 5, 6, 7, 8, 9 (if applicable), 10, 11D, 12, 13
<input type="checkbox"/>	Foreign companies	3C, 4, 5, 6, 7, 8, 9 (if applicable), 10, 11E, 12, 13 Please contact Client Services on <b>1300 738 355 (0800 404 988 if calling from New Zealand)</b> .
<input type="checkbox"/>	Associations	3C, 4, 5, 6, 7, 8, 9 (if applicable), 10, 11F, 12, 13
<input type="checkbox"/>	Government bodies	3C, 4, 5, 6, 7, 8, 9 (if applicable), 10, 11G, 12, 13
<input type="checkbox"/>	Registered co-operatives	3C, 4, 5, 6, 7, 8, 9 (if applicable), 10, 11H, 12, 13
<input type="checkbox"/>	Partnerships	3C, 4, 5, 6, 7, 8, 9 (if applicable), 10, 11I, 12, 13
<input type="checkbox"/>	Custodian	3D, 4, 5, 6, 7, 8, 9 (if applicable), 10, 11J, 12, 13

### 3. INVESTOR DETAILS

3A. Investor 1 - ☐ Individual ☐ Joint investor 1 ☐ Sole trader

Mandatory (\*)

Title*	Full given name(s)*	Surname*
<input type="text"/>	<input type="text"/>	<input type="text"/>
Full business name (if any)*	ABN (if any)*	
<input type="text"/>	<input type="text"/>	
Date of birth (DD/MM/YYYY)*	Gender*	
<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other	
Telephone: Business hours*	Mobile	
<input type="text"/>	<input type="text"/>	
Email*	<input type="text"/>	
Occupation*	<input type="text"/>	
TFN <sup>1</sup>	TFN exemption reason (Australian residents)	
<input type="text"/>	<input type="text"/>	
Country of tax residence (non-Australian residents)*	<input type="text"/>	

#### Residential address

(PO boxes, locked bags and RMBs are not acceptable)

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

#### Principal place of business - sole trader only

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

<sup>1</sup> It is not against the law if you choose not to give your TFN, exemption code or exemption reason, but if you decide not to, tax will be taken out of your income distributions at the highest marginal rate (plus Medicare Levy). See 'Australian tax file number' on page 2 for more information.

### 3B. Investor 2 - ☐ Joint Investor 2

*Mandatory (\*)*

Title*	Full given name(s)*	Surname*
<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of birth (DD/MM/YYYY)*	Gender*
<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/> Male <input type="checkbox"/> Female

Telephone: Business hours*	Mobile
<input type="text"/>	<input type="text"/>

Email\*

Occupation\*

TFN <sup>2</sup>	TFN exemption reason (Australian residents)
<input type="text"/>	<input type="text"/>

Country of tax residence (non-Australian residents)\*

#### Residential address

(PO boxes, locked bags and RMBs are not acceptable)

Unit*	Level*	Street number*	Street name*
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Suburb/Town\*

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

If there are more investors, provide details on a separate sheet with full details as specified above.

<sup>2</sup> It is not against the law if you choose not to give your TFN, exemption code or exemption reason, but if you decide not to, tax will be taken out of your income distributions at the highest marginal rate (plus Medicare Levy). See 'Australian tax file number' on page 2 for more information.

- 3C. ☐ Companies<sup>3</sup> ☐ Australian unregulated trusts and foreign trusts  
☐ Australian regulated trusts (including SMSF and individual and corporate trustees) ☐ Associations  
☐ Government bodies ☐ Registered co-operatives ☐ Partnerships

Mandatory (\*)

Full name of company/company trustee (registered with ASIC)* <input type="text"/>	Account Designation* <input type="text"/>
Contact person name* <input type="text"/>	Contact person email* <input type="text"/>
Contact person telephone: Business hours* <input type="text"/>	Contact person mobile <input type="text"/>
ABN/ACN (if registered in Australia)* <input type="text"/>	TFN <sup>2</sup> <input type="text"/>
TFN exemption reason (Australian residents) <input type="text"/>	

#### Registered address and Principal place of business\*

Unit* <input type="text"/>	Level* <input type="text"/>	Street Number* <input type="text"/>	Street Name* <input type="text"/>
Suburb/Town* <input type="text"/>			
State* <input type="text"/>	Postcode* <input type="text"/>	Country* <input type="text"/>	
<input type="text"/>			
Country of tax residence (non-Australian residents)* <input type="text"/>			

#### Nature of Business/Industry\*

Please identify the Nature of Business/Industry for this investment by indicating with a cross (X) **one** or more of the following which is applicable to you.

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Permanent Building Society Operation (732201) | <input type="checkbox"/> Self Managed Superannuation Fund (SMSF) (Aust Use Only) (741205) | <input type="checkbox"/> Superannuation Funds (741299)                        |
| <input type="checkbox"/> Credit Union Operation (732301)               | <input type="checkbox"/> Health Insurance (742103)  | <input type="checkbox"/> Schools (842399)                                     |
| <input type="checkbox"/> Money Market Corporations (732403)            | <input type="checkbox"/> General Insurance (742204)                                       | <input type="checkbox"/> Post Graduate School, University, Operation (843101) |
| <input type="checkbox"/> Financial Intermediation (732901)             | <input type="checkbox"/> Portfolio, Investment, Management Service (751909)               | <input type="checkbox"/> Health Services (863908)                             |
| <input type="checkbox"/> Finance Companies (733001)                    | <input type="checkbox"/> Trustee Service (751914)   | <input type="checkbox"/> Religious Organisation Operation (961008)            |
| <input type="checkbox"/> Unit Trust Operation (734003)                 | <input type="checkbox"/> Public Trustee (751915)  | <input type="checkbox"/> Business and Professional Associations (9621)        |
| <input type="checkbox"/> Property Trusts (734006)                      | <input type="checkbox"/> All Other Business Services (786917)                             | <input type="checkbox"/> Charities Operation (962920)                         |
| <input type="checkbox"/> Financial Asset Investors (734007)            | <input type="checkbox"/> Government Administration (811)                                  |   |

<sup>3</sup> For companies registered outside of Australia, do not use this section; rather refer to Section 11E.

### 3D. ☐ Custodian

*Mandatory (\*)*

Full name (if any) of trust/custodial arrangement\*

Country of establishment\*

Full business name\*

Type of Trust\*

Please answer (X) to the following questions:

1. ☐ Yes ☐ No Do you provide a custodial or depository service of the kind described in item 46 of table 1 in subsection 6(2) of the Anti-Money Laundering and Counter-Terrorism Act 2006 (Cth) (**AML/CTF Act**) and Rule 4.4.19 of the the Anti-Money Laundering and Counter-Terrorism Financing Rules Instrument 2007 (No 1) (Cth) (**AML/CTF Rules**)?
2. ☐ Yes ☐ No Do you hold an Australian financial service license or are you exempt from the requirement to hold such license?  
Confirm AFSL or specify the grounds for exemption
3. ☐ Yes ☐ No Are you enrolled as a reporting entity with AUSTRAC, or do you satisfy one of the 'geographical link' tests in subsection 6(6) of the AML/CTF Act or is your name and enrolment details entered into the AUSTRAC Reporting Entities roll?
4. ☐ Yes ☐ No Have you carried out all applicable customer identification procedures and ongoing customer due diligence requirements and do you hold certified copies of all identification records in accordance with the AML/CTF Act and AML/CTF Rules in relation to your underlying customers?



## 4. SOURCE OF FUNDS/SOURCE OF WEALTH

### 4A. Source of Funds\*

*Mandatory (\*)*

Source of Funds describes where your funds came from in regard to deposits in the account. Please identify the Source of Funds for this investment by indicating with a cross (X) **one** or more of the following which is applicable to you.

<input type="checkbox"/>	Employment Please indicate the nature of employment	
<input type="checkbox"/>	Investments Please indicate the type of investments e.g. superannuation, real estate, financial etc	
<input type="checkbox"/>	Business activity Please indicate the nature of business and industry	
<input type="checkbox"/>	Inheritance/Gift Please indicate the name of deceased/donor	
<input type="checkbox"/>	Legal settlement Please specify the type of legal settlement	
<input type="checkbox"/>	Other Please specify	

### 4B. Source of Wealth\*

*Mandatory (\*)*

Source of Wealth describes how you have built your net worth. Please identify the Source of Wealth for this investment by indicating with a cross (X) **one** or more of the following which is applicable to you.

<input type="checkbox"/>	Employment Please indicate the nature of employment	
<input type="checkbox"/>	Investments Please indicate the type of investments e.g. superannuation, real estate, financial etc	
<input type="checkbox"/>	Business activity Please indicate the nature of business and industry	
<input type="checkbox"/>	Inheritance/Gift Please indicate the name of deceased/donor	
<input type="checkbox"/>	Legal settlement Please specify the type of legal settlement	
<input type="checkbox"/>	Other Please specify	

## 5. INVESTOR NEEDS AND INVESTMENT OBJECTIVE

The following questions may assist MLC in meeting its regulatory obligations by determining whether you are in the target market described in the Target Market Determination (TMD) prepared for the Trust. The TMD for the Trust is available at [mlcam.com.au/tmd](http://mlcam.com.au/tmd). We may not be able to process your application until you have answered all the applicable questions and we may contact you should we require any further information. Please select only one response for each question.

*Mandatory (\*)*

a) What investment objective are you looking to achieve from this investment?\*

- ☐ **Capital growth** - You seek to invest in a product designed or expected to generate capital return over the investment timeframe. For example, exposure to growth assets (such as shares or property) or otherwise seeks an investment return above the current inflation rate.
- ☐ **Capital preservation** - You seek to invest in a product designed or expected to have low volatility and minimise capital loss. For example, exposure to defensive assets that are generally lower in risk and less volatile than growth investments (this may include cash or fixed income securities).
- ☐ **Income distribution** - You seek to invest in a product designed or expected to distribute regular and/or tax-effective income earned by the Trust. For example, exposure to income-generating assets (this may include high dividend-yielding equities, fixed income securities and money market instruments).

b) How do you intend to use the investment in the relevant portion of your portfolio?\*

- ☐ **Solution/standalone** - up to 100%
- ☐ **Major allocation** - up to 75%
- ☐ **Core component** - up to 50%
- ☐ **Minor allocation** - up to 25%
- ☐ **Satellite component** - up to 10%

c) What is your investment timeframe in relation to this investment?\*

- ☐ **Short-term** - less than or equal to 2 years
- ☐ **Medium-term** - more than 2 years and less than or equal to 6 years
- ☐ **Long-term** - greater than 6 years

d) Which investment risk and return profile best describes the nature of this investment?\*

- ☐ **Low risk & return** - You are looking for an investment that is low risk in nature e.g. you have the ability to tolerate up to 1 negative return over a 20-year period and you are comfortable with a low target return from this investment.
- ☐ **Medium risk & return** - You are looking for an investment that is moderate or medium risk in nature, e.g. you have the ability to tolerate up to 3 negative returns over a 20-year period and you are comfortable with a moderate target return from this investment.
- ☐ **High risk & return** - You are looking for an investment that is higher risk in nature e.g. you have the ability to tolerate up to 6 negative returns over a 20-year period in order to achieve a higher target return from this investment.
- ☐ **Very high risk & return** - You are looking for an investment that is very high risk in nature e.g. you have the ability to tolerate 6 or more negative returns over a 20 year period as you are seeking to maximise returns and you can accept higher potential losses.

e) Under normal circumstances, within what period do you expect to be able to access your funds for this investment?\*

- ☐ Within one week      ☐ Within three months      ☐ More than one year
- ☐ Within one month      ☐ Within one year

f) I have received financial advice on the investment that took into account my personal circumstances.\*

- ☐ Yes, please ensure the details of your Financial Adviser are completed in Section 9.
- ☐ No

### Warning

***If your investment objective(s), intended use, investment timeframe and / or investment risk and return profile are inconsistent with this investment, then you should think again about applying for the investment and it is strongly recommended that you seek financial advice that takes into account your personal circumstances.***

## 6. INVESTMENT AMOUNT AND METHOD OF PAYMENT

Fund	APIR Code	Initial investment amount: Minimum A\$20,000 <sup>4</sup>
Altrinsic Global Equities Trust	ANT0005AU	A\$ <input type="text"/>

**All investments must be made in Australian dollars.**

### Method of payment

Refer to page 1 instructions for 'Investing by Electronic Funds Transfer (EFT)'.

## 7. WITHDRAWAL PROCEEDS AND INCOME DISTRIBUTIONS

By providing your bank account details in this section, you authorise MLC to use these details for **all** distribution and withdrawal requests that you nominate.<sup>5</sup>

### Australian Account

Name of Australian bank or financial institution

Branch

BSB number

 - 

Account number

Account name<sup>6</sup>

### New Zealand Account

Name of New Zealand bank or financial institution

Branch

Bank number

Branch number

Account number

Suffix number

Account name

Beneficiary SWIFT BIC

Intermediary SWIFT BIC

Intermediary BSB

Please indicate how you would like your income distributions to be paid by crossing (X) one box only.

**Note:** if no election is made, distributions will be reinvested.

☐

Reinvest income distributions for additional units.

☐

Pay income distributions directly to the bank account shown in this section.

<sup>4</sup> All payments to the Trust are in Australian dollars. Payments from non-Australian dollar bank accounts will be subject to currency conversion rates and may incur additional fees. Non-Australian resident investors should seek advice from their banking institution.

<sup>5</sup> All payments from the Trust are in Australian dollars. Payments into non-Australian dollar bank accounts will be subject to currency conversion rates and may incur additional fees. Non-Australian resident investors should seek advice from their banking institution.

<sup>6</sup> Payments can only be made to accounts held in the investor's name. For joint investors, payments can be made to a bank account held solely in the name of one of the joint account holders, provided both signatories have signed this form. No third party payments are made.

## 8. COMMUNICATION/CORRESPONDENCE

### 8A. Electronic communication

All investor correspondence will be sent to the email address(es) provided in Section 3.

You will be required to register for access to Investor Online which enables you to view your account details online, including your current valuation, transaction confirmations, statements, reports and other material. Joint investors/individual trustees are required to register separately. From time to time we may still need to send you letters in the post.

Please cross (X) the boxes below as applicable.

- ☐ I/We elect to receive all investor correspondence from you via post to the address I have provided.
- ☐ Please provide my/our Financial Adviser (details provided in Section 9) with access to information about my/our investments and copies of all statements about my investment.<sup>7</sup> If no election is made no copies will be sent.

Your communication preferences can be amended at any time by completing a Change of Details Form available at **[mlcam.com.au/aget](http://mlcam.com.au/aget)** or on request from Client Services on **1300 738 355 (0800 404 988 if calling from New Zealand)**.

### 8B. Annual report

We will publish a copy of the annual report for the Trust on **[mlcam.com.au/aget](http://mlcam.com.au/aget)**

- ☐ Please cross (X) this box if you wish to receive a paper copy of the Annual Report by post.
- ☐ Please cross (X) this box if you do not wish to receive a paper copy of the Annual Report by post.

If you choose to have the annual report mailed to you, we will mail it to the correspondence postal address provided in Section 3.

If you do not choose to have the annual report mailed to you, we will email it to the correspondence email address provided in Section 3. If you have not provided a correspondence email address, we will publish a copy of the annual report for the Trust on **[mlcam.com.au/aget](http://mlcam.com.au/aget)**, and we'll notify you by mail when this has been made available online.

<sup>7</sup> By electing this option, your Financial Adviser will also be able to access such information via Adviser Online.

## 9. FINANCIAL ADVISER DETAILS

Financial Adviser name

Dealer Group

Dealer branch

ABN (if registered in Australia)

AFSL No. (if registered in Australia)

Unit

Level

Street number

Street name

Suburb/Town

State

Postcode

Country

Telephone: Business hours

Mobile

Email\*

Financial Adviser signature

Financial Adviser stamp

Date signed (DD/MM/YYYY):   /   /

Full Name

## 10. INTERESTED PARTIES

Provide details of the parties that may receive information relating to this investment below.

Name

Company

Email

Contact phone no.

### Delivery address

Unit

Level

Street number

Street name (or PO Box)

Suburb/Town

State

Postcode

Country

Please attach a schedule if more space is required.

## 11. CUSTOMER IDENTITY VERIFICATION

You must complete the FSC identification form(s) relevant to your investor type. If you are not lodging this application through a Financial Adviser you will be required to send the **certified copies** of the original identity verification documents (not scanned copies) as listed in the relevant FSC identification form(s), (ensuring each page is certified). Please refer to page 2 for instructions on **'Certified copy requirements'**. If you are unsure which form you should complete please contact Client Services on **1300 738 355 (0800 404 988 if calling from New Zealand)** or email **client.services@mlcam.com.au**

**Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.<sup>8</sup>**

### 11A. Person(s) named in 3A, 3B and individuals that have provided details on a separate sheet along with sole traders

Please complete the FSC identification form for **individuals and sole traders**, which is available on **mlcam.com.au/forms**

### 11B. Australian companies

Please complete the FSC identification form for **Australian companies**, which is available on **mlcam.com.au/forms**

### 11C. Australian regulated trusts (including SMSFs and individual and corporate trustees)

Please complete the FSC identification form for **Australian regulated trusts**, which is available on **mlcam.com.au/forms**

For SMSFs, in addition to completing the identification form for **Australian regulated trusts**, a certified copy of the Trust Deed (or if not reasonably available, a certified extract of the Trust Deed) must be provided. Extracts of the Trust Deeds must include the name of the Trust, Trustees, Beneficiaries, Settlor/s and Appointers (where applicable).

For corporate trustees, please also complete the FSC identification form for Australian companies.

### 11D. Australian unregulated trusts and foreign trusts

Please complete the FSC identification form for **Australian unregulated trusts and foreign trusts**, which is available on **mlcam.com.au/forms**

In addition to completing the identification form for **Australian unregulated trusts and foreign trusts**, a certified copy of the Trust Deed (or if not reasonably available, a certified extract of the Trust Deed) must be provided. Extracts of the Trust Deeds must include the name of the Trust, Trustees, Beneficiaries, Settlor/s and Appointers (where applicable). You will be required to complete either an Australia Company or Foreign Company for a Corporate Trustee OR, an individual FSC form for individual trustee/s.

### 11E. Foreign companies

Please complete the FSC identification form for **foreign companies**, which is available on **mlcam.com.au/forms**

Please contact Client Services on **1300 738 355 (0800 404 988 if calling from New Zealand)** to discuss your application further.

### 11F. Associations

Please complete the FSC identification form for **associations**, which is available on **mlcam.com.au/forms**

### 11G. Government bodies

Please complete the FSC identification form for **government bodies**, which is available on **mlcam.com.au/forms**

### 11H. Registered co-operatives

Please complete the FSC identification form for **registered co-operatives**, which is available on **mlcam.com.au/forms**

### 11I. Partnerships

Please complete the FSC identification form for **partnerships and partners**, which is available on **mlcam.com.au/forms**

### 11J. Custodian

Custodial arrangement (if the custodian does not satisfy the requirements set out in Section 3D, you must also complete the FSC identification form for **Australian companies and Australian regulated trusts** or **Australian unregulated trusts and foreign trusts**, which is available on **mlcam.com.au/forms**

<sup>8</sup> An accredited translator is a person currently accredited by the National Accreditation Authority for Translators and Interpreters Ltd (NAATI) at the level of Professional Translator, or above, to translate from a language other than English into English or an overseas standard comparable to the Australian NAATI accreditation.

## 12. DECLARATION

I/We declare that:

- All details in this Initial Application Form, relevant FSC Identification Form(s) and all other documents provided are true and correct. I/We agree to advise MLC Investments Limited (MLC) (ABN 30 002 641 661) (AFSL 230705) of any change in circumstances in future including changes affecting my/our declared tax residency status within 30 days and I/we agree to indemnify MLC against any liabilities it incurs as a result of information given in connection with this application being incorrect or my/our failure to advise MLC of any change in circumstances which results in such information ceasing to be correct, except to the extent that the claim or liability is caused or contributed to by fraud, negligence, wilful misconduct or breach of contract by MLC, its agents or any person appointed to provide services in relation to the Trust.
- I/We have received a copy of the current PDS and Product Guide to which this application relates, have read it and accepted the offer of units in the Trust made in the PDS and Product Guide in Australia or New Zealand. I/We acknowledge that my/our interest in the relevant Trust will be subject to the terms of the Constitution for the Trust (as amended from time to time).
- I/We have legal power to invest in the Trust in accordance with this application and have complied with all applicable laws in making this application.
- I/We am/are over the age of 18 years.
- In the case of joint investors, the joint applicants agree that unless otherwise expressly indicated on this Initial Application Form, the units will be held as joint tenants and either investor is able to operate the account and bind the other investor for future transactions, including additional investments and withdrawals.
- I/We have read and understood the email terms and conditions to give instructions on my/our account in the relevant PDS and Product Guide (as applicable).
- I/We acknowledge that I/we have read and understand the Privacy information in the PDS and Product Guide and the Initial Application Form.
- I/We understand that if I/we fail to provide any information requested in this Initial Application Form or do not agree to any of the possible exchanges or uses detailed above, my/our application may not be accepted by MLC.
- I/We acknowledge that an investment in the Trust is subject to investment risk, including possible delays in repayment and loss of income and principal invested, and agree that those risks are appropriate for a person in my/our circumstances and with my/our investment objectives.
- I/We acknowledge that none of MLC or any other member of the Insignia Financial Group, guarantees the performance of the Trust or the repayment of the capital or any particular rate of return or distribution from the Trust.
- If investing as trustee on behalf of a superannuation fund or trust, I/we confirm that I/we am/are acting in accordance with my/our designated powers and authority under the trust deed. In the case of superannuation funds, I/we also confirm that it is a complying fund under the *Superannuation Industry (Supervision) Act 1993*.
- Unless an alternative authority for signature is notified to and accepted by MLC, the person/persons that signs/sign this form is/are able to operate the account on behalf of

themselves/the relevant entity (as applicable) and bind themselves/the entity for future transactions, including additional deposits and withdrawals.

- If I/we have elected in Section 8 of this Initial Application Form to receive communications by email, I/we consent to receive all disclosures required to be made to me/us by MLC under the *Corporations Act 2001* in electronic format.
- I/We have read and understood the terms and conditions of identity verification documents in the PDS and Product Guide as required by the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006*.

### Additional declaration for New Zealand investors

- I/We acknowledge the offer of units in the Trust is a regulated offer made under Australian and New Zealand law. In Australia, this is Chapter 8 of the *Corporations Act 2001* (Aust) and regulations made under that Act. In New Zealand, this is sub-part 6 of Part 9 of the *Financial Markets Conduct Act 2013* and Part 9 of the *Financial Markets Conduct Regulations 2014*. I/We acknowledge this offer and the content of the offer document are principally governed by Australian rather than New Zealand law. In the main, the *Corporations Act 2001* (Aust) and the regulations made under that Act set out how the offer must be made. There are differences in how financial products are regulated under Australian law compared to New Zealand law. I/We have read and understood the 'Important additional information for New Zealand investors' section in the Product Guide.

### 13. SIGNATURES

If this form is signed under a Power of Attorney, the Attorney declares that he/she has not received notice of rescindment or revocation of that Power of Attorney and he/she attests that the investor is still living (a certified copy of the Power of Attorney should be submitted with this application unless MLC has already sighted it).

<input type="checkbox"/> Investor 1 <sup>9</sup>	<input type="checkbox"/> Individual trustee 1	<input type="checkbox"/> Sole Director 1 <sup>10</sup>	<input type="checkbox"/> Director 1 <sup>10</sup>
<input type="checkbox"/> Attorney 1 <sup>11</sup>	<input type="checkbox"/> Partner 1	<input type="checkbox"/> Authorised signatory <sup>12</sup>	

Signature

Date signed (DD/MM/YYYY)

/  /

Full name

Date of birth (DD/MM/YYYY)

/  /

#### Residential address

Unit      Level      Street number      Street name

                

Suburb/Town

State

Postcode

Country

<input type="checkbox"/> Investor 2 <sup>9</sup>	<input type="checkbox"/> Individual trustee 2	<input type="checkbox"/> Director 2 <sup>10</sup>	<input type="checkbox"/> Secretary <sup>10</sup>
<input type="checkbox"/> Attorney 2 <sup>11</sup>	<input type="checkbox"/> Partner 2	<input type="checkbox"/> Authorised signatory <sup>12</sup>	

Signature

Date signed (DD/MM/YYYY)

/  /

Full name

Date of birth (DD/MM/YYYY)

/  /

#### Residential address

Unit      Level      Street number      Street name

                

Suburb/Town

State

Postcode

Country

**For Joint investors: withdrawal requests, additional investment and change of details forms must be signed by:**

<input type="checkbox"/> Investor 1 only	<input type="checkbox"/> Investor 2 only	<input type="checkbox"/> Either 1 or 2	<input type="checkbox"/> Both 1 and 2
--	--	--	---------------------------------------

**Please note:** if no option above is selected, both signatories for Joint investors will be required to sign on all withdrawal requests, additional investments and change of details forms.

<sup>9</sup> Joint investors must both sign.

<sup>10</sup> Company applications must be signed by two directors, a director and secretary or the sole director of the company. These people must be identified.

<sup>11</sup> Attorney's signature(s) must be witnessed on the next page.

<sup>12</sup> A certified copy of the Authorised Signatory List must be submitted to Registry Services.



**Signature of witness to Attorney 1**

Signature of witness to Attorney 1 signature (witness must be a third party, i.e. not the investor or the named Attorney)  
I declare I have witnessed the signature of the named Attorney

Witness name (print)

Date signed (DD/MM/YYYY)

/

/

**Residential Address**

Unit

Level

Street number

Street name

Suburb/Town

State

Postcode

Country

**Signature of witness to Attorney 2**

Signature of witness to Attorney 2 signature (witness must be a third party, i.e. not the investor or the named Attorney)  
I declare I have witnessed the signature of the named Attorney

Witness name (print)

Date signed (DD/MM/YYYY)

/

/

**Residential Address**

Unit

Level

Street number

Street name

Suburb/Town

State

Postcode

Country

**Important notes**

The offer of units in the Trust is made by MLC Investments Limited (MLC) ABN 30 002 641 661 AFSL 230705.

This Initial Application Form must not be handed to any person unless accompanied by the current PDS and Product Guide (as applicable) for the Trust. MLC may in its absolute discretion refuse any application for units. Persons external to MLC who market MLC products act as independent Financial Advisers and are not agents of MLC. MLC will not be bound by representations or statements which are not contained in information disseminated by MLC.