

The following questions assist Affluence Funds Management Limited (Affluence) in meeting its regulatory obligations by enabling it to assess whether the Affluence LIC Fund (Fund) is being offered to the stated target market.

If you answer yes to either PART 1 or PART 2, you will not need to complete the remaining questions.

**Investor Name / Entity:**

## PART 1: Financial advice

**Have you received current personal financial advice in relation to this application to invest in the Fund?**

**Yes** - please ensure Adviser Details section of the Application is completed in full. **Nothing further is required.**

**No** - Please continue to PART 2.

## PART 2: Investor status

**Are you investing \$500,000 or more, or are you a Wholesale Client?**

### MORE INFORMATION

**What is a wholesale client?**

A wholesale client is defined in the Corporations Act and includes an investor with net assets of greater than \$2,500,000 or an annual taxable income of \$250,000 or greater (as certified by a qualified accountant) or who invests more than \$500,000.

**Yes** - I am/We are a Wholesale Client. **Please provide a copy of your Accountant's Certificate with this completed application. Nothing further is required.**

**No** - I am/We are not a Wholesale Client. **Please complete PART 3 below.**

## PART 3: Target Market Questionnaire

**01: What is your primary investment objective in applying to invest in the Fund? (tick one option only)**

### MORE INFORMATION

**What is capital growth?**

Capital growth is the increase in the principal value (i.e. increase in the unit price) of an investment over time due to an increase in value of the Fund's underlying assets. Capital growth does not mean the increase in value of your investment as a result of reinvesting the income distributions.

**What is capital preservation?**

Capital preservation in an investment is an investment in which there is lower volatility in the change of principal value (i.e. change in the unit price) and the risks of capital loss (i.e. devaluation of investment) are actively managed, although capital is not guaranteed so a loss may still be suffered.

**What is capital guaranteed?**

A capital guaranteed investment is an investment in which the investor's principal is shielded from any loss of value over time.

**What is an income distribution?**

An income distribution is the periodic payment of income from the Fund's assets to its investors.

Capital growth  Capital preservation  Capital guaranteed  Income distributions

## PART 3: Target Market Questionnaire

### 02: What percentage of your total investable assets, excluding your residential home, do you intend to allocate to the Fund?

#### MORE INFORMATION

##### What are investable assets?

Investable assets are the financial resources you have available for investment purposes, excluding your primary residence and the money you need for daily living expenses; for example, bills and mortgage payments.

Less than or equal to 50%    51% to 75%    More than 75%    Prefer not to say

### 03: Which of the following best describes your tolerance for loss of your CAPITAL for the part of your portfolio that is invested in the Fund (having regard to your response to question 1 above):

#### MORE INFORMATION

##### What is capital loss?

Capital loss is the decrease in value of an investment over time.

**None** – For my/our investment in the Fund, I/we cannot afford to lose any capital.

**Low** – For my/our investment in the Fund, I/we accept that the value of my investment can fluctuate, I/we could lose a small amount of capital, particularly if I invest for a shorter period than 3 years.

**Medium** – For my/our investment in the Fund, I/we accept that the value of my investment can fluctuate, I/we could lose some capital, particularly if I invest for a shorter period than 3 years.

**High** – For my/our investment in the Fund, I/we accept that the value of my investment will fluctuate and could fall in value significantly, particularly when investment markets suffer losses and/or if I invest for a shorter period than 3 years.

### 04: DISTRIBUTIONS are subject to risks, including economic and market risk. Accordingly, there are circumstances where distributions from the Fund may be reduced, delayed or, in exceptional circumstances, not paid at all. If distributions are materially reduced or delayed, would you be able to meet your ongoing financial obligations and commitments?

Yes    No

### 05: What is your intended timeframe for investing in the Fund?

#### MORE INFORMATION

The Fund aims to achieve its investment objectives over three years and longer, and it may not be appropriate if your expected investment period is shorter than three years.

Years

**06: The Fund generally processes withdrawals monthly. Withdrawal requests received by the last business day of each month will usually be paid approximately ten days after the end of the month. However, this is not guaranteed and in some limited circumstances, you may have to wait longer to redeem your investment. Would you be able to meet your ongoing financial obligations and commitments having regard to this timeframe for accessing your capital?**

Yes  No

**By completing and submitting this Target Market Questionnaire I/We warrant and confirm to Affluence that:**

- (a) all of the responses and information I/we have provided in this Target Market Questionnaire (including any supporting documentation I/we have provided) are true, correct and complete;**
- (b) I/we have received, read and understood the PDS.**

**I/We acknowledge and agree in favour of Affluence that:**

- (a) nothing in this Target Market Questionnaire constitutes advice to me/us from Affluence and the 'More Information' sections are for general information purposes only;**
- (b) Affluence recommends that I/we obtain appropriate professional advice in respect of our investment in the Fund and our completion of the Target Market Questionnaire.**

**Signatures:**

Signature A

Date (day / month / year)

Signature B

Date (day / month / year)

Full name

Full name

**This Form is for Trusts** that have not previously invested in the Affluence LIC Fund.

Complete this form using **BLACK INK** and write clearly within the boxes in **CAPITAL LETTERS**. Mark appropriate answer **boxes with a cross (X)**. You should read the PDS for the Fund in full before completing this Application Form.

If you have any questions, contact Affluence on 1300 233 583, +61 7 3532 4076 or [invest@affluencefunds.com.au](mailto:invest@affluencefunds.com.au).

### PART 1 – INVESTOR IDENTIFICATION

If you have not invested in an Affluence fund previously, you must attach the required certified identification documents.

Has the applicant invested in an Affluence fund previously?

Yes, Investor ID (SRN):

No - For each individual Trustee or at least one beneficial owner of a company Trustee, please attach a certified copy of an original driver's licence, passport or other Identification Document. Refer to the Application Pack for more detail on acceptable Identification Documents and certification requirements.

### PART 2 – INVESTMENT AMOUNT & PAYMENT DETAILS

Minimum application is \$20,000 and thereafter multiples of \$1,000.

For direct deposits, please ensure your name is included in the application payment reference. Units will not be allocated if the application payment cannot be identified and matched.

Investment amount: \$    ,    ,  0 0 0 . 0 0

Please indicate which payment method you've used:

Cheque > Made payable to: PERPETUAL CORPORATE TRUST LIMITED ACF ALF APPLICATIONS

Direct Deposit > Your Reference:

Deposit funds to: Westpac, 341 George Street, Sydney

BIC / Swift Code: WPACAU2F

BSB: 032-143

Account No.: 464925

Name: Perpetual Corporate Trust Limited ACF ALF Applications

### PART 3 – PRIMARY CONTACT PERSON FOR THE INVESTMENT (MUST NOT BE ADVISER DETAILS)

Affluence will contact the primary contact person first for matters related to the investment. This person will also have full access to operate the investment within the online Registry Investor Centre.

Please complete the contact details in full.

Adviser details are not acceptable unless your Adviser holds a power of attorney, a certified copy of which must be provided.

These contact details will be used for all correspondence.

All investment communication is emailed.

Preferred contact name(s):

Postal address:

Street or PO Box:

State:

Postcode:

Suburb:

Country:

Mobile phone:

Home phone:

 

Email address:

How did you hear about Affluence?

**PART 4 – INVESTOR DETAILS**

**Please complete this section in full.**

**Trust type:**

<input type="checkbox"/> Registered managed investment scheme	ARSN: <input type="text"/>
<input type="checkbox"/> Other regulated trust	Details: <input type="text"/>
<input type="checkbox"/> Other trust (e.g. family, unit, charitable)	Trust type: <input type="text"/>

**Full name of the trust / designation:**

**In which country was the Trust established?**

<input type="checkbox"/> Australia	OR	Another Country: <input type="text"/>
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**ABN (if registered):**

**TFN:**

**Does the Trust have a settlor, and was the settlement amount on establishment greater than \$10,000?**

<input type="checkbox"/> No	<input type="checkbox"/> Yes - full name of settlor: <input type="text"/>
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**If you answered “No” to this question please ensure you provide a copy of the Trust Deed.**

**A beneficial owner is an individual who ultimately owns 25% or more or controls the Trust.**

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

<input type="checkbox"/> No	<input type="checkbox"/> Yes - Provide details of the membership class / es (e.g. unit holders, family members of named person, charitable purpose): <input type="text"/>
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**Does the Trust have any beneficial owners who are not Trustees or Directors of the Trustee Company?**

<input type="checkbox"/> No	<input type="checkbox"/> Yes - Please complete an additional details form (page 38 and 39) for each additional beneficial owner: <input type="text"/>
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**Is the Trustee for this Trust a (tick one):**

<input type="checkbox"/> Individual (Go to part 5)	<input type="checkbox"/> Company (Go to part 6)
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**PART 5 – INDIVIDUAL TRUSTEE DETAILS 01**

Please complete the Trustee details in full.

Title:

Legal First Name:

Middle names:

Legal last name:

Date of birth:

Country of citizenship:

Residential Address:

Street:

State:

Postcode:

Suburb:

Country:

Mobile phone:

Home phone:

Email address:

Is this Trustee a sophisticated Investor for the purpose of Chapter 6D of the Corporations Act (2001) or a wholesale client for the purposes of Chapter 7 of the Corporations Act (2001)?

Yes

No

Unsure

Is this Trustee a beneficial owner?

Yes

No

If this Trustee is a Beneficial owner please select the Source of Investment Funds:

Gainful employment

Superannuation saving

Financial investments

Business activity

Inheritance / gift

Other

Would you like this person to have access to the investment in the Registry Investor Centre?

Yes

No

Would you like this person to receive monthly fund updates via email?

Yes

No

**PART 5 – INDIVIDUAL TRUSTEE DETAILS 02**

**Please complete the Trustee details in full.**

**Please complete an Additional Details form if there are additional Trustees.**

**Title:**

**Legal First Name:**

**Middle names:**

**Legal last name:**

**Date of birth:**

**Country of citizenship:**

**Residential Address:**

Street:

State:

Postcode:

Suburb:

Country:

**Mobile phone:**

**Home phone:**

**Email address:**


**Is this Trustee a sophisticated Investor for the purpose of Chapter 6D of the Corporations Act (2001) or a wholesale client for the purposes of Chapter 7 of the Corporations Act (2001)?**

Yes

No

Unsure

**Is this Trustee a beneficial owner?**

Yes

No

**If this Trustee is a Beneficial owner please select the Source of Investment Funds:**

Gainful employment

Superannuation saving

Financial investments

Business activity

Inheritance / gift

Other

**Would you like this person to have access to the investment in the Registry Investor Centre?**

Yes

No

**Would you like this person to receive monthly fund updates via email?**

Yes

No

**PART 6 – COMPANY TRUSTEE DETAILS**

Please complete the Company details in full.

Registered company name:

Country where the business is registered:

ACN:

Is this a charity or not for profit?

Yes     No

Is this a public company?

Yes     No

Registered office address:

Company Trustee principal place of business (if different from registered office):

**PART 7 – DIRECTOR DETAILS 01**

Please complete the Director details in full.

Title:

Legal first name:

Middle names:

Legal last name:

Date of birth:

Country of citizenship:

Residential Address:

Mobile phone:

Email address:

Is this Director a sophisticated Investor for the purpose of Chapter 6D of the Corporations Act (2001) or a wholesale client for the purposes of Chapter 7 of the Corporations Act (2001)?

Yes     No     Unsure

A beneficial owner is an individual who ultimately owns or controls 25% or more of the Investor.

Read only access applies where the Director is not the primary contact for the investment.

Would you like this person to have access to the investment in the Registry Investor Centre?

Yes     No

Is this Director a beneficial owner?

Yes     No

If this Director is a Beneficial owner please select the Source of Investment Funds:

<input type="checkbox"/> Gainful employment	<input type="checkbox"/> Inheritance / gift
<input type="checkbox"/> Business activity	<input type="checkbox"/> Financial investments
<input type="checkbox"/> Superannuation saving	<input type="checkbox"/> Other

Would you like this person to receive monthly fund updates via email?

Yes     No

**PART 7 – DIRECTOR DETAILS 02**

Please complete the Director details in full.

Please complete an Additional Details form if there are additional Directors.

**Title:**  
[Text Box]

**Legal first name:**  
[Text Box]

**Middle names:**  
[Text Box]

**Legal last name:**  
[Text Box]

**Date of birth:**  
[Text Box]

**Country of citizenship:**  
[Text Box]

**Residential Address:**

Street:  
[Text Box]

State:  
[Text Box]

Postcode:  
[Text Box]

Suburb:  
[Text Box]

Country:  
[Text Box]

**Mobile phone:**

[Text Box]

**Email address:**

[Text Box]

**Is this Director a sophisticated Investor for the purpose of Chapter 6D of the Corporations Act (2001) or a wholesale client for the purposes of Chapter 7 of the Corporations Act (2001)?**

Yes

No

Unsure

**A beneficial owner is an individual who ultimately owns or controls 25% or more of the Investor.**

**Read only access applies where the Director is not the primary contact for the investment.**

**Is this Director a beneficial owner?**

Yes

No

**If this Director is a Beneficial owner please select the Source of Investment Funds:**

Gainful employment

Inheritance / gift

Business activity

Financial investments

Superannuation saving

Other

**Would you like this person to have access to the investment in the Registry Investor Centre?**

Yes

No

**Would you like this person to receive monthly fund updates via email?**

Yes

No

**PART 8 – ADVISER DETAILS**

**If you use a financial adviser, have them complete this section.**

**Adviser name:**

[Text Box]

**Email address:**

[Text Box]

**Licensed dealer name:**

[Text Box]

**AFSL No.:**

[Text Box]

**Would you like your Adviser to have access to your investment in the Registry Investor Centre?**

Yes

No

**Would you like your Adviser to receive monthly fund updates via email?**

Yes

No

**PART 9 – TAX STATUS**

We are required to collect this information to satisfy legal requirements and to ensure correct amounts of withholding tax are deducted for foreign Investors.

Are any of the applicants (including Trustees, Directors or beneficial owners) citizens or residents of a country other than Australia for tax purposes?

Yes  No

If yes, complete the following and we may require you to provide additional information:

Name: \_\_\_\_\_ Country of tax residency: \_\_\_\_\_ TIN, GIIN or other Tax ID No.: \_\_\_\_\_

_____	_____	_____
_____	_____	_____
_____	_____	_____

**PART 10 – DISTRIBUTION AND WITHDRAWAL PAYMENTS**

You are required to provide Australian or New Zealand bank account details for electronic payment of distributions and withdrawals. Payment cannot be made by cheque. If no bank account details are provided, distributions may be automatically reinvested.

Would you like your distributions reinvested into the Fund as additional units?

Yes  No

Bank name and address:

_____
_____

Account name:

_____
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BSB: \_\_\_\_\_ Account number (including suffix for NZ applicants): \_\_\_\_\_

_____	_____
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**Please ensure the BSB and account number are correct.**

**PART 11 – ADDITIONAL INVESTMENT ENQUIRER**

If you would like someone other than the primary contact or your Adviser to be able to enquire about this investment, please provide us with their details here.

Additional enquirer name:

_____
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Relationship to Investor:

_____
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Email address:

_____
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Would you like this person to have read only access to the investment in the Registry Investor Centre?

Yes  No

## PART 12 – DECLARATION AND SIGNATURES

### I acknowledge, declare and agree that by signing this Application Form:

- I have received, read and understood the PDS dated 30 September 2022 to which this Application Form applies and the TMD current at the date of signing this Application Form and have received and accepted the offer to invest in Australia or New Zealand. I agree to be bound by the PDS and the Constitution (each as amended from time to time).
- The information contained in the PDS and TMD does not constitute financial product advice or a recommendation that the Fund is suitable for me, given my investment objectives, financial situation and needs.
- None of AFM or any other person guarantees the repayment of the amount invested in the Fund, the performance of, nor any particular return from the Fund and I understand the risks involved in investing in the Fund.
- I have legal power to invest in accordance with this application and have complied with all applicable laws in doing so. All details provided in this Application Form are true and correct and I am over the age of 18 years. I indemnify AFM against any liabilities whatsoever arising from acting on any information I provide in connection with this application. If this application is signed under Power of Attorney, I declare that I have not received notice of revocation of the power.
- In the case of joint applications, the joint applicants agree that unless otherwise indicated on the application form, the investment will be held as joint tenants and either Investor is able to operate the account and bind the other Investor for future transactions.
- I acknowledge that AFM may be required to pass on information about me to comply with AML / CTF, FATCA and CRS requirements. I will provide AFM with all additional information and assistance AFM may request in order for AFM to comply with AML / CTF, FATCA and CRS requirements. I am not aware and have no reason to suspect the monies used to fund my investment in the Fund have been or will be derived from or related to any money laundering, terrorism financing or similar or other illegal activities under applicable laws or regulations. I am not a politically exposed person or organisation for the purposes of AML / CTF laws.
- I have read and understood the 'Privacy Statement' in the PDS. Unless I inform AFM otherwise, I consent to all uses of my personal information contained under that heading.
- AFM and the Registry may rely conclusively upon and shall incur no liability in respect of any action taken upon any notice, consent, request, instruction or other instrument believed, in good faith, to be genuine or to be signed by properly authorised persons. AFM and the Registry are authorised to accept and act upon any instructions in respect of this application and the investment to which it relates given by me by facsimile. I indemnify AFM and the Registry against any loss arising as a result of any of them acting on facsimile instructions.
- AFM reserves the right to reject any application and AFM is released and indemnified in respect of any loss or liability arising from its rejection of an application for any reason.
- If I nominate an adviser, then I acknowledge that AFM or the Registry may supply my adviser or their AFSL holder with information about my investment unless I instruct AFM not to do so.
- I confirm my answers to the Target Market Questions completed with this Application Form are correct.

### Signatures:

<div style="border: 1px solid black; padding: 10px; width: 100%; height: 100%;"><b>Signature A</b></div>	<b>Date (day / month / year)</b> <div style="border: 1px solid black; width: 100%; height: 20px; margin-top: 5px;"></div>	<div style="border: 1px solid black; padding: 10px; width: 100%; height: 100%;"><b>Signature B</b></div>	<b>Date (day / month / year)</b> <div style="border: 1px solid black; width: 100%; height: 20px; margin-top: 5px;"></div>
<b>Full name</b> <div style="border: 1px solid black; width: 100%; height: 20px; margin-top: 5px;"></div>		<b>Full name</b> <div style="border: 1px solid black; width: 100%; height: 20px; margin-top: 5px;"></div>	
<b>Title (e.g. Trustee, Director-Trustee Company)</b> <div style="border: 1px solid black; width: 100%; height: 20px; margin-top: 5px;"></div>		<b>Title (e.g. Trustee, Director-Trustee Company)</b> <div style="border: 1px solid black; width: 100%; height: 20px; margin-top: 5px;"></div>	

## PART 13 – CHECKLIST

- Completed and signed this application form?
- Attached a cheque or arranged a payment for the full application amount?
- Attached certified copies of Identification Documents if required (refer to Part 1 and the Application Pack)?

**Send these items to:**

**Mail:**  
Affluence Funds Management Limited.  
GPO Box 112, Brisbane QLD 4001

**Email:**  
[invest@affluencefunds.com.au](mailto:invest@affluencefunds.com.au)

## WHAT HAPPENS NEXT?

- Application forms, funds and identification documents must be received by the last business day of each month to be accepted for that month.
- We will contact you if further information is required. Once all information is received, we will email you a confirmation of receipt.
- Units are issued as at the 1st of the following month. We will email you a statement confirming your investment by the 10th of the following month.