

Investment Application Form

1. Investor details - Please tick the correct box and fill in capital letters:

New investor ☐ Existing investor ☐ Existing account number

Investor Type

- | | |
|--|---|
| <input type="checkbox"/> Individual/Trustee/Sole Trader (complete 1.1) | <input type="checkbox"/> Company (complete 1.2) |
| <input type="checkbox"/> Partnership (complete 1.2) | <input type="checkbox"/> Regulated trust - Including self managed super funds (complete 1.2) |
| <input type="checkbox"/> Association - Incorporated/unincorporated (complete 1.2) | <input type="checkbox"/> Unregulated trusts (complete 1.2) |

1.1 Individuals / Individual Trustee / Sole Trader

Investor 1 / individual trustee 1/ sole trader

Title Given name(s)
Surname/ Family name
Date of birth DD / MM / YYYY
 / /

Investor 2/ individual trustee 2

Title Given name(s)
Surname/ Family name
Date of birth DD / MM / YYYY
 / /

1.2 All other entity types

Name of entity/organisation

Contact person

Given name(s) <input type="text"/>	Surname/ Family name <input type="text"/>
Telephone <input type="text"/>	Position title in entity <input type="text"/>
Email <input type="text"/>	

1.3 Contact details

Telephone <input type="text"/>	Email <input type="text"/>
Postal address <input type="text"/>	

1.4 Source of funds

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> Savings | <input type="checkbox"/> Employment income | <input type="checkbox"/> Property/asset sale | <input type="checkbox"/> Business activity |
| <input type="checkbox"/> Inheritance/gift | <input type="checkbox"/> Financial investment | <input type="checkbox"/> Property sale | |
| <input type="checkbox"/> Other | <input type="text"/> | | |

2. Investment details:

Investment name - New account to be opened under the following name:

Full name

In Trust for (child's name)

Product selection





Please read the relevant Information Memorandum (IM), Offer Document, Additional Information Booklet (AIB) or Product Disclosure Statement (PDS) before proceeding. Available on www.uethical.com/forms-and-documents or contact us for a copy.

Wholesale product name	Relevant Product Disclosure document section or name	Investment amount
<input type="checkbox"/> International Equities Trust	IM sections 2.1.2, 2.7, 5.1a, 6.1a	\$
<input type="checkbox"/> Australian Equities Trust	IM sections 2.1.2, 2.7, 5.1b, 6.1b	\$
<input type="checkbox"/> Diversified Income Trust	IM sections 2.1.2, 2.7, 5.1c, 6.1c	\$
<input type="checkbox"/> Enhanced Income Trust	IM sections 2.1.2, 2.7, 5.1d, 6.1d	\$
<input type="checkbox"/> Cash Management Trust	IM sections 2.1.1, 2.7, 5.1e, 6.1e	\$
<input type="checkbox"/> Growth Portfolio	Offer Document	\$

Retail product name	Relevant Product Disclosure document	Investment amount*
<input type="checkbox"/> Cash Management Trust	Product Disclosure Statement and Additional Information Booklet	\$
<input type="checkbox"/> Australian Equities Trust	Product Disclosure Statement and Additional Information Booklet	\$

* Note: For our retail products, if you would like to apply for regular payments, please complete the Direct Debit Form from our website www.uethical.com and attach with your Application Form and relevant Know Your Client form

Initial funding - Investment will be funded via:

- ☐ Direct credit  BSB 704-907 Reference number will be advised by U Ethical
- ☐ BPay  Biller Code 16089 Reference number will be advised by U Ethical
- ☐ Direct debit  Provide a completed Direct Debit Form
- ☐ Funds transfer from existing U Ethical account  Provide a completed Redemption form

Investment amount \$

Investment amount in words

3. Income Distributions and Redemption Instructions:

Details provided must be for a bank account with an Australian domiciled financial institution (payment to third party or foreign bank accounts is not permitted).

3.1 Income reinvestment - Please select ONE of the following:

- ☐ Reinvest income
- ☐ Credit income to a bank account - Please complete details below:

BSB Account number

Account name

3.2 Redemption Proceeds - Please select ONE of the following:

- ☐ Bank account as above
- ☐ Alternate bank account

BSB Account number

Account name

Bank account validation

Please provide one of the following validations for this bank account (unless validation has previously been provided). A cancelled cheque, a deposit slip or a copy of any documentation from your bank showing the BSB, account number and account name.

4. Tax File Number (TFN) or entity reference

Collection of TFNs is authorised, and its use and disclosure are strictly regulated by tax laws and the Privacy Act. Quotation of your TFN is not compulsory and you may leave this section blank. However, tax may be taken out of your income distribution if you do not quote your TFN or claim an exemption to which you are entitled to. For more information about the use of TFNs, please contact the Australian Tax Office.

4.1 Individual investor 1 or Sole Trader TFN

OR exemption reason (select one below)

- ☐ Non-resident/
Country of residence
- ☐ Other - please specify

Individual investor 2 TFN

OR exemption reason (select one below)

- ☐ Non-resident /
Country of residence
- ☐ Other - please specify

4.2 Entity Australian Business Number (ABN) or Australian Company Number (ACN)

5. Acknowledgments

I/We agree to be bound by the Product Disclosure Statement (**PDS**), Offer Document, Additional Information Booklet (**AIB**) and/or Information Memorandum (**IM**), as applicable, for the Fund(s) (including all information incorporated by reference forming part of the PDS, Offer Document, AIB and/or IM) and the provisions of the Constitution for the Fund(s) (collectively, **Disclosure Documents**), as amended from time to time, which govern the operation of the Fund(s).

I/We acknowledge that this Investment Application Form is accompanied by the applicable current Disclosure Document(s) for the Fund(s).

I/We attest that we have read and understood all materials in the Disclosure Document as relevant to our investment in the Fund/s. I/We acknowledge that we have obtained further information on the Fund/s as required from U Ethical.

I/We acknowledge that (if applicable) I/we have access to all statements and information incorporated by reference forming part of the applicable Disclosure Documents for the Fund(s). If I/ we have received an Investment Application Form electronically, I/we declare that it was accompanied by an electronic copy of the applicable Disclosure Document for the Fund(s) or a printout of it, which I/we personally received.

I/We acknowledge that, upon receipt of this application, U Ethical may enter into transactions for the Fund(s) in anticipation of payment of application monies, and I/we indemnify U Ethical against any losses and expenses incurred by it if the application monies are not received as cleared funds by the Fund(s) in the normal course.

I/We acknowledge that neither Uniting Ethical Investors Limited or U Ethical or any of its associates, related body corporates or subsidiaries guarantees the repayment of capital or the performance of the Fund(s).

I/We declare that I/we have received and accepted the offer to apply to invest into the Fund(s) in Australia.

I/We declare that if investing as trustee, on behalf of a superannuation fund or trust, I/we confirm that I am/we 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 the superannuation fund is a complying fund under the Superannuation Industry (Supervision) Act 1993.

If this is a joint application, each investor acknowledges and agrees that investments in the Fund(s) are held as joint tenants and not as tenants in common (unless the Responsible Entity, Trustee or Issuer of the Fund(s) otherwise agrees).

I/We (including, in my/our personal capacity) agree to the collection, disclosure and use of information as contemplated in the section titled "Privacy", contained in the applicable Disclosure Document(s) for the Fund(s).

I/We have read and understood the information in the "Anti-Money Laundering and Counter Terrorism Financing" (AML) section of the applicable Disclosure Document(s) for the Fund(s).

I/We consent to telephone conversations being recorded. Recordings may be used for quality, verification and training purposes.

I/We consent to U Ethical providing me/us with certain types of product disclosure (including but not limited to the Disclosure Documents) and other types of Fund related documentation (including but not limited to annual reports) via digital disclosure (including but not limited to email and publication of documentation to U Ethical's website or online client portals).

I/We agree to receive confirmation of my/our investment transactions online via U Ethical's website.

I/We acknowledge and agree that: (i) U Ethical may, at its sole discretion, transact with me/us via straight through processing networks or other similar electronic messaging networks facilitating the exchange of electronic communications where U Ethical has notified me/us in writing prior to the availability of such service and (ii) U Ethical will not be liable to me/us for any loss whatsoever in connection with instructions sent by me/us via such networks which are not received by U Ethical and (iii) U Ethical may at its sole discretion cease transacting with me/us via such networks.

I/We acknowledge I/we may opt out from receiving promotional information about services and products of U Ethical and its related companies by contacting U Ethical's client services centre.

I/We acknowledge that the terms and conditions set out in this Investment Application Form will govern all other investments I/we make in the Fund(s) to which this current application relates.

I/We acknowledge that the Know Your Client (**KYC**) Form forms part of this Application Form. By completing this Investment Application Form, the Know Your Client (**KYC**) form relevant to me/us and providing U Ethical with information to establish my/our identity, I/we acknowledge and agree that:

- this information can be used by U Ethical to establish my/our identity for the purposes of the U Ethical meeting its anti-money laundering requirements; and
- U Ethical will not be responsible or liable to me/us or any other person for any loss suffered where transactions are delayed, blocked, frozen or where U Ethical declines to process a transaction or ceases to provide me/us with a product or service in circumstances where U Ethical is unable to establish my/our identity or where U Ethical reasonably believes I/we are a Proscribed Person**.

** A Proscribed Person means any person or entity who U Ethical reasonably believes to be (i) in breach of the laws of any jurisdiction regarding economic or trade sanctions, or laws prohibiting money laundering or terrorism financing, or (ii) on a list of persons with whom dealings are proscribed by Australian laws or the laws of another recognised jurisdiction. A Proscribed Person includes any person or entity who U Ethical reasonably believes to act on behalf, or for the benefit of, a person or entity referred to in (i) and/or (ii).

5. Acknowledgments (continued)

I/We acknowledge that all information provided in this Application Form is true and correct.

Signatory 1

Full name of signatory

Corporate title (if applicable); (Sole director/Director/Sole Secretary/Secretary/Trustee/Power of Attorney)

Signature

Date

/ /

Signatory 2

Full name of signatory

Corporate title (if applicable); (Sole director/Director/Sole Secretary/Secretary/Trustee/Power of Attorney)

Signature

Date

/ /

Company Seal

Individual investor: Where the investment is in one name, the investor must sign.

Joint investor: Where the investment is in more than one name, all investors must sign.

Corporate investor/Corporate trustee: Must sign either: (a) under seal and signed by directors; or (b) by two directors or director and company secretary; or (c) by a sole director/sole secretary (where applicable).

Superannuation/Trust: Each trustee must sign.

Authorised registered signatories: Please provide a completed signatory list attached with this form (on page 6).

Power of Attorney (POA): Please provide a certified copy of the POA and a certified copy of the attorney(s) photo identification document (driver's licence or passport) along with certification that they have not received notice of revocation of that power.

Additional authorised signatories

Signatory 3

Title Given name(s)

Surname/ Family name

Date of birth DD / MM / YYYY

Address (PO Box not accepted)

Suburb

State

Postcode

Telephone

Email address

Signature (By signing below, I acknowledge the declarations in section 5)

Date

Signatory 5

Title Given name(s)

Surname/ Family name

Date of birth DD / MM / YYYY

Address (PO Box not accepted)

Suburb

State

Postcode

Telephone

Email address

Signature (By signing below, I acknowledge the declarations in section 5)

Date

Signatory 4

Title Given name(s)

Surname/ Family name

Date of birth DD / MM / YYYY

Address (PO Box not accepted)

Suburb

State

Postcode

Telephone

Email address

Signature (By signing below, I acknowledge the declarations in section 5)

Date

Signatory 6

Title Given name(s)

Surname/ Family name

Date of birth DD / MM / YYYY

Address (PO Box not accepted)

Suburb

State

Postcode

Telephone

Email address

Signature (By signing below, I acknowledge the declarations in section 5)

Date