

KNOW YOUR CLIENT

Australian Company

WHEN TO USE THIS FORM

Use this form to provide the information we need to verify the company's identity and to meet our legal obligations (including those under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006, United States Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS)).

VERIFYING AN INVESTOR'S IDENTITY

We need to verify or confirm your identity by checking that certain details you provide in this form **match** the details that are in certain documents you need to attach to this form.

If you are signing this form under Power of Attorney or as the investor's legal or nominated representative (agent), we also need to verify your identity.

Please send us **original certified copies** of your original documents - don't send us the original documents. If the document is not written in English, then you must also attach an English translation prepared by an accredited translator. An accredited translator is any person who is currently accredited by the National Accreditation Authority for Translators and Interpreters Ltd (NAATI) at the level of Professional Translator or above. Please refer to www.naati.com.au for further information.

GETTING YOUR COPIES CERTIFIED

A copy of a document must be certified to be a true and correct copy of the original document. Only certain people can certify copies including:

- police officer or sheriff
- justice of the peace or notary public
- legal practitioner, magistrate, judge or registrar/deputy registrar of a court
- member of any of the following: Chartered Accountants Australia and New Zealand, the Association of Taxation and Management Accountants, CPA Australia or the Institute of Public Accountants.

You can see the full list of people who can certify documents or extracts at www.dexus.com/identification.

Example

I certify that this is a true and correct copy of the original document

John Citizen

John Citizen, Justice of the Peace
10 Other Street
Suburb NSW 2000
02 9999 9999 DD MMM YYYY

DOCUMENTS FOR A COMPANY

Most recent ASIC annual statement.
Certified full company registration details by ASIC.
for multiple layers of ownership, a certified ownership structure chart up to individual beneficial owner level (if not regulated or listed on an AMP approved financial market)

DOCUMENTS FOR ANY BENEFICIAL OWNER OR CONTROLLING PERSON

So we can verify the identity of any beneficial owner or controlling person you listed in the form, you need to send us the documents shown under option A or B:

Option A

One of these:

- current Australian state or territory driver licence that has your photo
- Australian mobility parking scheme permit
- Australian passport that is current or expired within the last two years
- card issued under a state or territory law to prove your age that has your photo
- current foreign government passport (or similar international travel document) that has your photo and signature
- current foreign driver licence that has your photo
- current national identity card that has your photo.

Option B

One of these:

- Australian or foreign birth certificate
- Australian or foreign citizenship certificate
- birth certificate extract
- pension card issued by Department of Human Services
- health card issued by Department of Human Services
- Australian or foreign marriage certificate
- an indigenous community identity card
- a name change certificate.

Plus

One of these (**must** include the client's full name and residential address):

- a document issued by the Commonwealth or a state or territory within the last 12 months that shows financial benefits paid to you
- a document issued by the ATO within the last 12 months that shows money to be paid to you or that you need to pay to them (make sure you cross out your TFN)
- a document issued by a local government body or utility provider within the last three months that shows the services provided to you at your address
- if you're under 18 years old, a notice issued by a school principal within the last three months that shows how long you attended that school.

Dexus Funds Management Limited as responsible entity of Dexus Property Trust and Dexus Operations Trust (Dexus) recently acquired AMP Capital's real estate and domestic infrastructure equity business. Following the acquisition, Dexus intends to change the legal name of certain funds and responsible entities to reflect Dexus branding. Dexus has registered the proposed names as business names with the Australian Securities and Investments Commission. Subject to regulatory filings and approvals, the change of name is expected to be completed in 2023.

Dexus Falcon Pty Limited is licensed to use the AMP Capital trade marks by AMP Limited. AMP Limited announced the sale of AMP Capital's real estate and domestic infrastructure equity business to Dexus Funds Management Ltd on 27 April 2022. Dexus Falcon Pty Limited and its products and services are not affiliated with, guaranteed by or endorsed by AMP Limited.

DEFINITIONS

Australian Public Listed company

Australian companies that are listed on an AMP approved financial market such as the ASX.

Foreign Public Listed company

Companies that are subject to disclosure requirements that ensure transparency of Beneficial Ownership comparable to similar public listing requirements in Australia. Refers to listing on an AMP approved financial market that by stock exchange rules, law or enforceable means promotes transparency of beneficial owner information.

Majority owned subsidiary of an Australian Public Listed company

Companies that are majority owned by an Australian company that is listed on an AMP approved financial market such as the ASX.

Majority owned subsidiary of a Foreign Public Listed company

Companies that are majority owned by a foreign company that is listed on an AMP approved financial market.

Regulated company

Companies subject to the supervision of an Australian Commonwealth, State or Territory statutory regulator beyond that provided by ASIC as a company registration body. Examples include Australian Financial Services Licensees (AFSL); Australian Credit Licensees (ACL); or Registrable Superannuation Entity (RSE) Licensees.

AMP approved financial market

For a list of AMP approved financial markets, please visit www.dexus.com/identification.

SECTION 1 - COMPANY DETAILS

Complete this section if you are investing for or on behalf of an Australian company.

1A. ALL INVESTORS

Company name

On account of (if applicable)

Contact person

Country of formation/incorporation/registration

1B. COMPANY GENERAL INFORMATION

Company name (as registered by ASIC)

ACN

TFN (or exemption code)

Trading name (if any, and list all if multiple trading names exist)

Registered office address in Australia (a PO Box is **not** acceptable)

Unit number Street number Street name

Suburb/Town

State

Postcode

Principal place of business in Australia (please tick)

☐

Same as registered office address above

☐

Other - please provide address (a PO box is **not** acceptable)

Unit number Street number Street name

Suburb/Town

State

Postcode

Core Business Activity (nature of business/industry type)

Source of funds

Select how you have sourced these funds to invest with Dexus (choose the **one** most relevant response).

- | | |
|---|--|
| <input type="checkbox"/> Business income | <input type="checkbox"/> Windfall (eg gift) |
| <input type="checkbox"/> Investment income (eg rent, dividends) | <input type="checkbox"/> Government benefits (eg tax benefit) |
| <input type="checkbox"/> Sale of assets (eg property, company) | <input type="checkbox"/> One-off payment (eg matured investment, court settlement) |
| <input type="checkbox"/> Borrowed funds | |

☐ Other

Source of wealth

Select how you have built your wealth in order to invest with Dexus (choose the **one** most relevant response).

- ☐ Business income
- ☐ Investment income (eg rent, dividends)
- ☐ Sale of assets (eg property, company)
- ☐ Windfall (eg gift)
- ☐ One-off payment (eg matured investment, court settlement)

☐ Other

What is the nature and purpose of your business relationship with Dexus?

(Choose the **one** most relevant option)

- ☐ Building wealth (eg a large initial deposit, using investment returns to grow your wealth over time)
- ☐ Business income (eg regular deposits and withdrawals for expenses - mostly for non-individuals)
- ☐ Savings (eg regular deposit with few withdrawals, earning interest to grow your balance)
- ☐ Everyday savings (eg frequent deposits and withdrawals)

1C. COMPANY DETAILS

To find out more about the types of company categories and AMP approved financial markets, please visit www.dexus.com/identification.

Which of these categories describes your company? (Please answer all relevant questions)

☐ **Registered Public Company**

☐ **Registered Proprietary or Private Company**

Number of directors

Please provide full names of all directors

Director 1

Director 2

Director 3

Director 4

Director 5

Director 6

If there are more than 6 directors please write their full names on a separate page and attach to this form.

Other information

☐ **Australian public listed** - provide details below

Name of financial market company listed on

Is your company listed on an AMP approved financial market?

☐ Yes - go to Section 2 - 'Tax information'

☐ **Majority owned subsidiary of an Australian public listed company** - provide details below

Name of Australian public listed company

Name of financial market Australian company is listed on

Is your company listed on an AMP approved financial market?

☐ Yes - go to Section 2 - 'Tax information'

☐ **Majority owned subsidiary of a foreign public listed company** - provide details below

Name of foreign public listed company

Name of financial market foreign company is listed on

Is your company a majority owned subsidiary of a company listed on an AMP approved financial market?

☐ Yes - go to Section 2 - 'Tax information'

☐ **Regulated company** - provide details below and go to Section 2 - 'Tax information'

Name of financial regulator (eg ASIC, APRA)*

Licence details (eg AFSL, ACL, RSE)

Licence number

* A company registered by ASIC isn't automatically regulated by ASIC.

☐ **Other company type** - you will need to provide details about your Beneficial Owners or Controlling Persons on the next page(s)

1D. BENEFICIAL OWNERS

Does your company have beneficial owners?

The people who ultimately own 25% or more of the company's capital issued to shareholders (through direct or indirect shareholdings) are beneficial owners. For **each** beneficial owner you will need to attach identification documents.

☐ No - go to 'Controlling Persons' on the next page

☐ Yes - provide details below for **each** beneficial owner and then go to Section 2 - 'Tax information'

Beneficial Owner 1

Title

Surname

Given name(s) (including all given names)

Alternative name(s) (if any, please list all if multiple alternative names exist)

Date of birth (dd/mm/yyyy)

Gender

Male ☐

Female ☐

Other ☐

Residential address (a PO box is **not** acceptable)

Unit number

Street number

Street name

Suburb/Town

State

Postcode

Country

Beneficial Owner 2

Title

Surname

Given name(s) (including all given names)

Alternative name(s) (if any, please list all if multiple alternative names exist)

Date of birth (dd/mm/yyyy)

Gender

Male ☐

Female ☐

Other ☐

Residential address (a PO box is **not** acceptable)

Unit number

Street number

Street name

Suburb/Town

State

Postcode

Country

Beneficial Owner 3

Title

Surname

Given name(s) (including all given names)

Alternative name(s) (if any, please list all if multiple alternative names exist)

Date of birth (dd/mm/yyyy)

Gender

Male ☐

Female ☐

Other ☐

Residential address (a PO box is **not** acceptable)

Unit number

Street number

Street name

Suburb/Town

State

Postcode

Country

Beneficial Owner 4

Title

Surname

Given name(s) (including all given names)

Alternative name(s) (if any, please list all if multiple alternative names exist)

Date of birth (dd/mm/yyyy)

Gender

Male ☐

Female ☐

Other ☐

Residential address (a PO box is **not** acceptable)

Unit number

Street number

Street name

Suburb/Town

State

Postcode

Country

1E. CONTROLLING PERSONS

If you did not list any Beneficial Owners, please provide details for the people who directly or indirectly control your company. You will also need to attach identification documents for **each** person. A person may control the company through: the authority to make decisions about financial or operating policies, voting rights of 25% or more, power of veto, or by way of trusts, agreements and practices.

If there are no individuals who meet the above criteria, please provide details of the most senior official(s), such as a managing director or directors who are authorised to sign on the company's behalf.

Controlling Person 1

Title

Surname

Given name(s) (including all given names)

Alternative name(s) (if any, please list all if multiple alternative names exist)

Date of birth (dd/mm/yyyy)

Gender

Male

Female

Other

Role of controlling person

Residential address(a PO box is **not** acceptable)

Unit number

Street number

Street name

Suburb/Town

State

Postcode

Country

Controlling Person 2

Title

Surname

Given name(s) (including all given names)

Alternative name(s) (if any, please list all if multiple alternative names exist)

Date of birth (dd/mm/yyyy)

Gender

Male

Female

Other

Role of controlling person

Residential address (a PO box is **not** acceptable)

Unit number

Street number

Street name

Suburb/Town

State

Postcode

Country

Controlling Person 3

Title	Surname		
<input type="text"/>	<input type="text"/>		
Given name(s) (including all given names)			
<input type="text"/>			
Alternative name(s) (if any, please list all if multiple alternative names exist)			
<input type="text"/>			
Date of birth (dd/mm/yyyy)	Gender		
<input type="text"/>	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Other <input type="checkbox"/>
Role of controlling person			
<input type="text"/>			
Residential address (a PO box is not acceptable)			
Unit number	Street number	Street name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Suburb/Town	State	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Country			
<input type="text"/>			

Controlling Person 4

Title	Surname		
<input type="text"/>	<input type="text"/>		
Given name(s) (including all given names)			
<input type="text"/>			
Alternative name(s) (if any, please list all if multiple alternative names exist)			
<input type="text"/>			
Date of birth (dd/mm/yyyy)	Gender		
<input type="text"/>	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Other <input type="checkbox"/>
Role of controlling person			
<input type="text"/>			
Residential address (a PO box is not acceptable)			
Unit number	Street number	Street name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Suburb/Town	State	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Country			
<input type="text"/>			

SECTION 2 - TAX INFORMATION

Collection of tax status in accordance with United States Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS).

2A. TAX STATUS

Tick one of the Tax Status boxes below (if the Company is a Financial Institution, please provide all the requested information below).

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

Please complete sections (a) and (b) below

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

If the Company is a Financial Institution but does not have a GIIN, provide its FATCA status (select **ONE** of the following statuses)

☐ Deemed Compliant Financial Institution

☐ Excepted Financial Institution

☐ Exempt Beneficial Owner

☐ Non Reporting IGA Financial Institution

☐ Non-Participating Financial Institution

☐ US Financial Institution

☐ Other (describe the company's FATCA status)

(b) PLEASE ANSWER THE QUESTION BELOW FOR ALL FINANCIAL INSTITUTIONS

Is the Financial Institution an Investment Entity located in a Non-Participating CRS Jurisdiction and managed by another Financial Institution?

☐ Yes ☐ No

If 'Yes', proceed to **part 2B** (Foreign Beneficial Owners or Controlling Persons). If 'No', please go to **Section 3** to complete the form.

CRS Participating Jurisdictions are on the OECD website at www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/crs-by-jurisdiction.

☐ **Australian Public Listed Company, Majority Owned Subsidiary of an Australian Public Listed Company or Australian Registered Charity**
(Public listed companies or majority owned subsidiaries of Australian listed companies as per **part 1E** that are not Financial Institutions as described above or a company that is an Australian Registered Charity)

If the Company type is listed above, please proceed to **Section 3** to complete the form.

☐ **A Public Listed Company, Majority Owned Subsidiary of a Public Listed Company, Governmental Entity, International Organisation or Central Bank**

If the Company type is listed above, please proceed to **Section 3** to complete the form.

☐ **A non-Australian Registered Charity or Active Non-Financial Entity (NFE)**
(Active NFEs include entities where, during the previous reporting period, less than 50% of their gross income was passive income (eg dividends, interests and royalties) and less than 50% of assets held produced passive income. For other types of Active NFEs, refer to section VIII in the Annexure of the OECD 'Standard for Automatic Exchange of Financial Account Information' at www.oecd.org.)

If the Company is a Charity or an Active NFE, please proceed to **part 2C** (Country of Tax Residency)

☐ **Other** (Entities that are not previously listed - Passive Non-Financial Entities)
Please proceed to **part 2B** (Foreign Beneficial Owners or Controlling Persons).

2B. FOREIGN BENEFICIAL OWNERS OR CONTROLLING PERSONS (INDIVIDUALS)

Does the Company have any Beneficial Owners or Controlling Persons who are tax residents of countries other than Australia?

☐

Yes

☐

No

Tax Residency rules differ by country. Whether an individual is tax resident of a particular country is often (but not always) based on the amount of time a person spends in a country, the location of a person's residence or place of work. For the United States, tax residency can be as a result of citizenship or residency.

If **'Yes'**, please provide the details of these individuals below (unless already provided in **Section 1**) and complete a separate Tax Status Declaration Form for each of them. US citizens and tax residents should complete the US Tax Status Declaration Form. These forms are available online at www.dexus.com/identification.

Full given name(s)

Surname

Role (such as Director or Senior Managing Official)

If there are more Beneficial Owners or Controlling Persons who are tax residents of countries other than Australia, provide details on a separate sheet and tick this box.

☐

Please complete a separate Tax Status Declaration Form for each of them.

US citizens and tax residents should complete the US Tax Status Declaration Form.

These forms are available online at www.dexus.com/identification.

2C. COUNTRY OF TAX RESIDENCY

Is the Company a tax resident of a country other than Australia?

☐

Yes

☐

No

If **'Yes'**, please provide the Company's country of tax residence and tax identification number (TIN) or equivalent below. If the Company is a tax resident of more than one other country, please list all relevant countries below.

If **'No'**, please proceed to **Section 3** to complete the form.

A TIN is the number assigned by each country for the purposes of administering tax laws. This is the equivalent of a Tax File Number in Australia or an Employer Identification Number in the United States. If a TIN is not provided, please list one of the three reasons (A, B or C) for not providing a TIN.

1. Country

TIN

If no TIN, list reason A, B or C (see below)

2. Country

TIN

If no TIN, list reason A, B or C (see below)

3. Country

TIN

If no TIN, list reason A, B or C (see below)

If there are more countries of which the Company is a tax resident, provide details on a separate sheet and tick this box.

☐

Reason A The country of tax residency does not issue TINs to tax residents.

Reason B The Company has not been issued with a TIN.

Reason C The country of tax residency does not require the TIN to be disclosed.

SECTION 3 - DECLARATION AND SIGNATURE

All investors (or their agents or attorneys if applicable) must complete this section.

ANTI-MONEY LAUNDERING (AML), COUNTER-TERRORISM FINANCING (CTF), UNITED STATES FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA) AND COMMON REPORTING STANDARD (CRS) OBLIGATIONS

By applying to invest you warrant that:

you comply and will continue to comply with all applicable AML & CTF and sanctions laws and regulations and FATCA/CRS obligations, including but not limited to the law and regulations of Australia in force from time to time (AML/CTF and Sanctions Law and FATCA/CRS obligations)

you are not aware and have no reason to suspect that:

the moneys used to fund your investment have been or will be derived from or related to any money laundering, terrorism financing or similar activities that would be illegal under applicable laws or regulations or otherwise prohibited under any international convention or agreement ('illegal activity'), or

the proceeds of your investment will be used to finance any illegal or sanctioned activities

you, your agent or your nominated representative will provide us with all additional information and assistance that we may request in order to comply with any AML/CTF and Sanctions Law and FATCA/CRS obligations

you will notify us if you are or become:

a 'politically exposed' person or organisation for the purposes of any AML/CTF Law

a 'proscribed person or entity' for the purposes of the Sanction Law, or

commonly known by a name other than the name provided in the form you complete at the time of applying for an investment, and

you will notify us as soon as possible of any changes to your name or business name, address (residential or business), occupation or core business activity, or ownership including any beneficial owners changes or controlling persons changes, where applicable.

By applying to invest you also acknowledge that we may:

decide to delay or refuse any request or transaction, including by suspending the issue or redemption of units, if we are concerned that the request or transaction may breach any obligation of, or cause us to commit or participate in an offence under any AML/CTF and Sanctions Law and FATCA/CRS obligations, and we will incur no liability to you if we do so

request further information from you which we reasonably believe is necessary for us to comply with AML/CTF and Sanctions Law and FATCA/CRS. Failing to provide us with this information in a reasonable time may result in restrictions on your account (including closure) in regard to any investment you have with us

take other action we reasonably believe is necessary to comply with AML/CTF and Sanctions Law and FATCA/CRS obligations, including disclosing any information held about you to any of our related bodies corporate or service providers whether in Australia or outside Australia, or to any relevant Australian or foreign regulator, and

collect additional information about you from time to time, from you or from third parties, for the purposes of satisfying AML/CTF and Sanctions Law and FATCA/CRS obligations, and that any such information may be used and disclosed as described in the Dexus Privacy Policy available online at www.dexus.com/privacy or by contacting us.

SECTION 3 - DECLARATION AND SIGNATURE (CONTINUED)

DECLARATION

All investors, agents acting as legal or nominated representative for investors and attorneys acting under power of attorney must sign this declaration.

I/We:

agree to the anti-money laundering, counter-terrorism financing, FATCA and CRS statement on the previous page
declare and agree that any information and documents relevant to and provided with or separate to this data collection form are complete and correct, and
if they are about another person, have been provided with the consent of that person
acknowledge that it is a criminal offence to knowingly provide false or misleading information or documents, and
if a certified copy of a document containing a photograph of an individual is submitted with this form, I/we warrant that I/we have advised the certifier of
their responsibility to be satisfied that the photograph in the original document is a true likeness of the individual named in that document
agree to notify Dexus as soon as possible when the tax residency of the company or any of its beneficial owners or controlling persons changes.

SIGNATURE(S) - The signatories must be the same as the application or subscription form which is being submitted.

Signatory 1

Title	Surname	First name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Signing as (please tick):

<input type="checkbox"/> Director	<input type="checkbox"/> Sole director	<input type="checkbox"/> Agent	<input type="checkbox"/> Attorney
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Signature	Date (dd/mm/yyyy)
<div></div> <input type="text"/>	<input type="text"/>

Signatory 2

Title	Surname	First name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Signing as (please tick):

<input type="checkbox"/> Company secretary	<input type="checkbox"/> Director	<input type="checkbox"/> Agent	<input type="checkbox"/> Attorney (if more than 2 attorneys, please provide names and signatures)
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Signature	Date (dd/mm/yyyy)
<div></div> <input type="text"/>	<input type="text"/>

KNOW YOUR CLIENT FORM CHECKLIST

The investor/agent/attorney has:

- ☐ Completed all relevant sections of the form
- ☐ Read and understood the obligations and declaration in Section 3 and signed and dated this section
- ☐ Attached a separate sheet with the name details for other directors, if the company has more than six directors
- ☐ Attached original certified copies of documents to verify the company as set out on page 1
- ☐ Attached original certified copies of documents to verify the identity of any beneficial owner and controlling person that has been listed in this form, as set out on page 1

CONTACT DETAILS

Client Services

T: 1800 658 404

8.30am - 5.30pm Sydney time

Monday to Friday

F: 1800 630 066

E: clientservices@dexus.com

W: www.dexus.com