dexus

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 a Dexus 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.

DEFINITIONS

Australian Public Listed company

Australian companies that are listed on a Dexus 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 a Dexus 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 a Dexus 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 a Dexus 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.

Dexus approved financial market

For a list of Dexus 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	1B. COMPANY GENERAL INFORMATION					
Company name	Company name (as registered by ASIC)					
On account of (if applicable)	ACN					
Contact person	TFN (or exemption code) Trading name (if any, and list all if multiple trading names exist)					
Country of formation/incorporation/registration	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)					

Sourc	e of funds				
Select	how you have sourced these funds to invest with Dexus (choose the $\ensuremath{\mathbf{one}}$	most relevant response).			
	Business income	Windfall (eg gift)			
	Investment income (eg rent, dividends)	Government benefits (eg tax benefit)			
	Sale of assets (eg property, company)	One-off payment (eg matured investment, court settlement)			
	Borrowed funds				
	Other				
Sourc	e 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				
	is the nature and purpose of your business relationship with Dexus? se the one most relevant option)				
	Building wealth (eg a large initial deposit, using investment returns to gro	ow your wealth over time)			
	Business income (eg regular deposits and withdrawals for expenses - m	ostly 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 Dexus approved financial markets, please visit www.dexus.com/identification.	Majority owned subsidiary of an Australian public listed company - provide details below
Which of these categories describes your company? (Please answer all relevant questions)	Name of Australian public listed company
Registered Public Company	Name of financial market Australian company is listed on
Registered Proprietary or Private Company	
Number of directors	Is your company listed on a Dexus approved financial market? Yes - go to Section 2 - 'Tax information'
Please provide full names of all directors	
Director 1	Majority owned subsidiary of a foreign public listed company - provide details below
	Name of foreign public listed company
Director 2	
	Name of financial market foreign company is listed on
Director 3	
	Is your company a majority owned subsidiary of a company listed on a Dexus approved financial market?
Director 4	Yes - go to Section 2 - 'Tax information'
	Regulated company - provide details below and go to Section 2 - 'Tax information'
Director 5	Name of financial regulator (eg ASIC, APRA)*
Director 6	Licence details (eg AFSL, ACL, RSE)
Director 6	Electrice details (e.g. Al e.g., Ale., No.E.)
If there are more than 6 directors please write their full names on a separate page and attach to this form.	Licence number
Other information	
* Australian public listed - provide details below	A company registered by ASIC isn't automatically regulated by ASIC.
Name of financial market company listed on	Other company type - you will need to provide details about your Beneficial Owners or Controlling Persons on the next page(s)
Is your company listed on a Dexus approved financial market? Yes - go to Section 2 - 'Tax information'	
res - go to Section 2 - Tax information	

1D. BENEFICIAL OWNERS

Does your company have beneficial owners?

	no ultimately own 25% or more of the company's capital issued to eficial owner you will need to attach identification documents.	shareholders (through direct or indirect shareholdings) are beneficial owners.
No - go	o to 'Controlling Persons' on the next page	
Yes - pr	provide details below for each beneficial owner and then go to Se	ection 2 - 'Tax information'
Beneficial	l Owner 1	
Title	Surname	
Given name(s	s) (including all given names)	
Alternative na	nme(s) (if any, please list all if multiple alternative names exist)	
Date of birth (o	dd/mm/yyyy) Gender Male Female Other	
Residential ac	ddress (a PO box is not acceptable)	
Unit number	Street number Street name	
Suburb/Town	State Postcode	
Country		
Country		
Beneficial		
Title	Surname	
Given name(s	s) (including all given names)	
Alternative na	nme(s) (if any, please list all if multiple alternative names exist)	
Date of birth (d	dd/mm/yyyy) Gender	
	Male Female Other	
Residential ac	ddress (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	s) (including all g	given names)		
Alternative na	me(s) (if any, pl	ease list all if	multiple alternati	ve names exist)
	-(-)(-), -			
Date of birth (dd/mm/\\\\\\\	Gender		
Date of birtin	da/mm/yyyy)	Male	Female	Other
Residential a	ddress (a PO b	ox is not acc	eptable)	
Unit number	Street number	er Street n	ame	
Suburb/Town			State	Postcode
Country				
	l Owner 4			
Title	Surname			
Given name(s	s) (including all g	given names)		
Alternative na	me(s) (if any, pl	ease list all if	multiple alternati	ve names exist)
Date of birth (dd/mm/yyyy)	Gender		
		Male	Female	Other
Desidential	dd: (- DO b			
Unit number	ddress (a PO be Street numbe			
Onit number	Street Humbe	Street	lame	
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.

Control	ling Person 1	Controlling Person 2
Title	Surname	Title Surname
Given nam	ne(s) (including all given names)	Given name(s) (including all given names)
Alternative	e name(s) (if any, please list all if multiple alternative names exist)	Alternative name(s) (if any, please list all if multiple alternative names ex
	th (dd/mm/yyyy) Gender Male Female Other	Date of birth (dd/mm/yyyy) Gender Male Female Other Role of controlling person
	al address(a PO box is not acceptable)	Residential address (a PO box is not acceptable)
Unit numb	er Street number Street name	Unit number Street number Street name
Suburb/To	wn State Postcode	Suburb/Town State Postcode
Country		Country

Controlling Person 3 Controlling Person 4 Title Title Surname Surname Given name(s) (including all given names) Given name(s) (including all given names) Alternative name(s) (if any, please list all if multiple alternative names exist) Alternative name(s) (if any, please list all if multiple alternative names exist) Date of birth (dd/mm/yyyy) Gender Date of birth (dd/mm/yyyy) Gender Other Other Male Female Male Female Role of controlling person Role of controlling person Residential address(a PO box is not acceptable) Residential address (a PO box is not acceptable) Unit number Street number Street name Unit number Street number Street name Suburb/Town State Postcode Suburb/Town State Postcode Country Country

SECTION 2 - TAX INFORMATION

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

		TATUS	
Tick o	7		tatus boxes below (if the Company is a Financial Institution, please provide all the requested information below).
	A Fin	ancial In	stitution (a custodial or depository institution, an investment entity or a specified insurance company for FATCA/CRS purposes)
	Pleas	e comple	te sections (a) and (b) below
	(a) Pr	ovide 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)
		Deeme	d Compliant Financial Institution
		Excepte	ed Financial Institution
		Exempt	Beneficial Owner
		Non Re	porting IGA Financial Institution
		Non-Pa	rticipating Financial Institution
		US Fina	ancial Institution
		Other (d	describe the company's FATCA status)
	(b) Pl	LEASE A	NSWER THE QUESTION BELOW FOR ALL FINANCIAL INSTITUTIONS
	Is the	Financia	Institution an Investment Entity located in a Non-Participating CRS Jurisdiction and managed by another Financial Institution?
		Yes	No
			d to part 2B (Foreign Beneficial Owners or Controlling Persons). If ' No ', please go to Section 3 to complete the form. ng Jurisdictions are on the OECD website at www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/crs-by-jurisdiction.
	(Publi	ic listed c	blic Listed Company, Majority Owned Subsidiary of an Australian Public Listed Company or Australian Registered Charity ompanies or majority owned subsidiaries of Australian listed companies as per part 1E that are not Financial Institutions as described appany that is an Australian Registered Charity)
	If the	Company	y type is listed above, please proceed to Section 3 to complete the form.
	A Pul Bank		d Company, Majority Owned Subsidiary of a Public Listed Company, Governmental Entity, International Organisation or Central
	If the	Company	y type is listed above, please proceed to Section 3 to complete the form.
	(Activ	e NFEs in	ian Registered Charity or Active Non-Financial Entity (NFE) nclude entities where, during the previous reporting period, less than 50% of their gross income was passive income (eg dividends, by alties) and less than 50% of assets held produced passive income. For other types of Active NFEs, refer to section VIII in the Annexure 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)
			that are not previously listed - Passive Non-Financial Entities) d to part 2B (Foreign Beneficial Owners or Controlling Persons).

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

Does th	e Co	mpany h	ave any Beneficial Ow	ners or Controlling	g Persons v	who are t	ax resid	dents	of countries other than Australia?	
	Yes		No							
	spen								ntry is often (but not always) based on the amount of ted States, tax residency can be as a result of citize	
each of	them	ı. US citi							ion 1) and complete a separate Tax Status Declarate form. These forms are available online	ion Form fo
Full giv	en na	ame(s)		Surname					Role (such as Director or Senior Managing Official)	
If there			neficial Owners or Cont	rolling Persons wh	no are tax r	esidents (of coun	ntries	other than Australia, provide details on a separate s	heet
US citiz	ens a	and tax r	eparate Tax Status Dec esidents should comple lable online at www.de.	ete the US Tax Sta	atus Declar		m.			
2C. C	OUN	ITRY (OF TAX RESIDEN	CY						
Is the C	ompa	any a tax	resident of a country of	ther than Australi	a?	Yes		No		
			e the Company's coun country, please list all r			dentificat	ion nur	mber	(TIN) or equivalent below. If the Company is a tax re	esident of
If 'No', p	oleas	e procee	d to Section 3 to comp	lete the form.						
									s the equivalent of a Tax File Number in Australia or a e reasons (A, B or C) for not providing a TIN.	an Employe
1. Cou	ntry			TIN					If no TIN, list reason A, B or C (see below)	
2. Cou	ntry			TIN					If no TIN, list reason A, B or C (see below)	
3. Cou	ntry			TIN					If no TIN, list reason A, B or C (see below)	
If there	are m	nore cou	ntries of which the Con	npany is a tax res	dent, provi	de details	s on a s	separ	ate sheet and tick this box.	
Reasor	n B	The Con	ntry of tax residency do npany has not been iss ntry of tax residency do	ued with a TIN.			i .			

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
- 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	
Signing as (plea	ase tick):			
Director		Sole director	Agent	Attorney
Signature				Date (dd/mm/yyyy)
×				
Signatory 2				
Title	Surname		First name	
Signing as (plea	ase tick):			
	ny secretary	Director	Agent	Attorney (if more than 2 attorneys, please provide names and signatures)
Signature				Date (dd/mm/yyyy)
,				
×				
	VOLID OI	IENT EODM OU	TOWN IOT	
		IENT FORM CHE	ECKLIST	
The investor/ag	gent/attorney has:			
Comple	eted all relevant sect	tions of the form		
Read ar	nd understood the c	obligations and declaration in Secti	ion 3 and signed and dated this section	
Attache	d a separate sheet	with the name details for other dire	ectors, if the company has more than si	ix directors
Attache	ed original certified c	opies of documents to verify the c	ompany as set out on page 1	
	ed original certified c	opies of documents to verify the ic	dentity of any beneficial owner and cont	trolling person that has been listed in this form

CONTACT DETAILS

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