

KNOW YOUR CLIENT

Trust and Superannuation Fund

WHEN TO USE THIS FORM

Use this form to provide the information we need to verify the trust'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 TRUST/SUPERANNUATION FUND

One of these:

- original certified copy of the executed trust deed
- certified extract of the executed trust deed including the trust name, establishment date, trustee's name and power, beneficiaries/investors, settlor's name and contribution, if any
- a letter from a qualified solicitor or accountant verifying the existence of the trust including the trust name, establishment date, trustee's name and power, beneficiaries/investors, settlor's name and contribution, if any issued within the preceding six months
- for a deceased estate, an original certified copy of a will, probate or Letters of Administration
- for a unit trust, a list of the registered unit holders.

DOCUMENTS FOR A COMPANY TRUSTEE

The document you need to send us depends on the type of company:

Australian 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).

Foreign company

- certified certificate of registration issued by the relevant foreign registration body, and
- certified company or share registers describing the beneficial ownership of the company (not required if the company is listed or regulated on a Dexus approved financial market), or
- certified full company registration details by the relevant foreign registration body.
- for multiple layers of ownership, a certified ownership structure chart up to individual beneficial owner level (if not listed on a Dexus approved financial market).

DOCUMENTS FOR WHERE A CUSTODIAN/INVESTMENT MANAGER IS APPOINTED TO ACT ON BEHALF OF THE TRUSTEE

The document you need to send us must be **one** of the following:

- original certified copy of the executed trust deed
- certified extract of the executed trust deed including the trust name, establishment date, trustee's name and power, beneficiaries/investors, settlor's name and contribution, if any issued within the preceding six months
- a letter from a qualified solicitor or accountant verifying the existence of the trust including the trust name, establishment date, trustee's name and power, beneficiaries/investors, settlor's name and contribution, if any issued within the preceding six months
- certified copy of the executed custody agreement (when the custodian is appointed) or certified copy of the executed investment management agreement (when the investment manager is appointed)
- AML representation letter from the custodian/investment manager.

DOCUMENTS FOR ANY INDIVIDUAL TRUSTEE, BENEFICIAL OWNER OR CONTROLLING PERSON

So we can verify the identity of any individual trustee, 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 Dexu 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 Dexu 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 Dexu 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 Dexu 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.

Dexu approved financial market

For a list of Dexu approved financial markets, please visit www.dexu.com/identification.

Beneficiary class

- for a unit trust, it may include holders of units in the trust
- for a family trust, it may include family members of a named person (you need to provide the person's name)
- for a super fund (including self-managed super funds), it may include members of the fund
- for a regulated platform, it may include clients or members of the regulated platform
- for a charitable trust, it may include a description of the purpose of the trust.

Regulated trust

A trust that is registered and regulated by an Australian Commonwealth statutory regulator including:

- a self-managed super fund within the meaning of section 19 of the Superannuation Industry (Supervision) Act 1993 – the regulator is the Australian Taxation Office
- a regulated super fund, an approved deposit fund, a pooled superannuation trust or a public sector superannuation scheme, within the meaning of the Superannuation Industry (Supervision) Act 1993, including small APRA-regulated funds – the regulator is the Australian Prudential Regulation Authority
- any other trust that the financial adviser and issuer agree is a regulated trust.

Types of trusts

The main types of trusts include:

- charitable trust
- child trust
- custody arrangement
- discretionary trust
- estate
- family trust
- listed trust
- private investment trust
- private property trust
- registered scheme
- regulated investment platform
- regulated superannuation trust
- securitisation trust
- self-managed super fund
- testamentary trust
- trading trust
- wholesale trust.

SECTION 1 – TRUST DETAILS

Complete this section if you are investing for or on behalf of a trust or superannuation fund.

1A. TRUST DETAILS

Full name of trust

Country of establishment

TFN (or exemption code)

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

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 | |
| <input type="checkbox"/> Other | <input type="text"/> |

Source of wealth

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

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

1B. TYPE OF TRUST

Please indicate the type of trust and provide details where appropriate.

- ☐ **Government superannuation fund** (Australian or foreign) established under legislation
- Name of regulator (eg ASIC, APRA, ATO)
-
- ☐ **Managed investment scheme** registered by ASIC
- ARSN
- ☐ **Wholesale trust** (a managed investment scheme not registered by ASIC that only has wholesale clients and does not make small scale offerings to which section 1012E of the Corporations Act 2001 applies)
- ABN
- ☐ **Regulated trust** (such as a self managed superannuation fund, unregistered managed investment scheme that is not registered by ASIC) subject to regulatory oversight of an Australian Commonwealth statutory regulator
- Name of regulator (eg ASIC, APRA, ATO)
-
- Registration/Licence details
-
- ABN

If any one of the above is selected, please go to Section 2

- ☐ Foreign superannuation fund
- ☐ Family trust
- ☐ Unregistered scheme
- ☐ Foreign trust
- ☐ Other - please specify

1C. TRUST BENEFICIARIES

Please provide the name of the settlor - the person who settled the initial sum to create the trust.

Trust settlor - Full name

Please provide the full name of each beneficiary of the trust (individuals and Companies)

Beneficiary 1

Beneficiary 2

Beneficiary 3

Beneficiary 4

If there are more than 4 beneficiaries, please write their full names on a separate page and attach to this form.

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

Yes - please provide details of membership class
(eg family members of a named person)

1D. FOREIGN SUPERANNUATION FUND ONLY

Fund name

Country of registration

Name of regulator

Registration number

Name of legislation under which superannuation fund was established (if applicable)

SECTION 2 – TRUSTEE DETAILS

2A. TYPE OF TRUSTEE

- ☐ The trustees are all individuals – go to **part 2B**
- ☐ The trustees are all companies – go to **part 2C** and complete the remainder of **Section 2**, then go to **Section 3**
- ☐ The trustees are a combination of individuals and companies – go to **parts 2B and 2C** and complete the remainder of **Section 2**, then go to **Section 3**

2B. INDIVIDUAL TRUSTEE DETAILS

Please provide the following details of the individual trustees (if the trust has more than 2 trustees, please complete an 'Individual, Joint Investors and Sole Trader' form for each additional individual trustee. These forms are available online at www.dexus.com/identification).

TRUSTEE 1 DETAILS

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"/>
Occupation		Industry	
<input type="text"/>		<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"/>			

TRUSTEE 2 DETAILS

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"/>
Occupation		Industry	
<input type="text"/>		<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"/>			

2C. COMPANY TRUSTEE DETAILS

Only complete this section if there are no individuals acting as trustees.

Please provide the information of each company trustee below (if the trust has more than 1 company trustee, please complete a 'Company' form for each additional company trustee. These forms are available online at www.dexus.com/identification).

COMPANY TRUSTEE 1

Company name (as registered by the relevant registration body)

Business name of the trustee, if any

Name of the registration body

Registration number issued by the relevant registration body (eg ACN)

Registered office address of company trustee as registered by relevant registration body(a PO Box is **not** acceptable)

Unit number

Street number

Street name

Suburb/Town

State

Postcode

Country

AND

Principal business address of company trustee as registered by relevant registration body (a PO box is **not** acceptable)

Unit number

Street number

Street name

Suburb/Town

State

Postcode

Country

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

Core Business Activity (nature of business/industry type)

Source of funds

Select how you have sourced these funds to invest with Dexu (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 | |
| <input type="checkbox"/> Other | <input type="text"/> |

Source of wealth

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

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

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

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

- | |
|---|
| <input type="checkbox"/> Building wealth (eg a large initial deposit, using investment returns to grow your wealth over time) |
| <input type="checkbox"/> Business income (eg regular deposits and withdrawals for expenses - mostly for non-individuals) |
| <input type="checkbox"/> Savings (eg regular deposit with few withdrawals, earning interest to grow your balance) |
| <input type="checkbox"/> Everyday savings (eg frequent deposits and withdrawals) |

To find out more about the types of company categories and Dexus 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

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

☐

Public listed - provide details below

Name of financial market company listed on

Country of financial market

Is your company listed on a Dexus approved financial market?

☐

Yes - go to the next Section - 'Tax information'

☐

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

Name of the public listed company

Name of financial market the company is listed on

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

☐

Yes - go to the next Section - 'Tax information'

☐

Regulated company - provide details below and go to the next Section - 'Tax information'

Name of financial regulator (eg APRA)

Licence details (eg AFSL, ACL, RSE)

Licence number

☐

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

COMPANY TRUSTEE 1 – BENEFICIAL OWNERS

Does your trust have beneficial owners?

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

☐ No – go to **Company Trustee 1 Controlling Persons**

☐ Yes – provide details below for **each** beneficial owner and then **go to Section 3**

COMPANY TRUSTEE 1 – BENEFICIAL OWNER 1

Title Surname

Country

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

COMPANY TRUSTEE 1 – 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

COMPANY TRUSTEE 1 – 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

COMPANY TRUSTEE 1 – 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

CONTROLLING PERSONS OF COMPANY TRUSTEE 1

If you did not list any Beneficial Owners, please provide details for the people who directly or indirectly control your trustee company. You will also need to attach identification documents for **each** person. A person may control the trustee 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 trustee company's behalf.

COMPANY TRUSTEE 1 - CONTROLLING PERSON 1

TitleSurname

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)GenderMaleFemaleOther

Residential address (a PO box is not acceptable)

Unit numberStreet numberStreet name

Suburb/TownStatePostcode

Country

COMPANY TRUSTEE 1 - CONTROLLING PERSON 2

TitleSurname

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)GenderMaleFemaleOther

Residential address (a PO box is not acceptable)

Unit numberStreet numberStreet name

Suburb/TownStatePostcode

Country

COMPANY TRUSTEE 1 – CONTROLLING PERSON 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

COMPANY TRUSTEE 1 – CONTROLLING PERSON 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

SECTION 3 – TAX INFORMATION

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

3A. TAX STATUS

Tick one of the Tax Status boxes below (if the Trust 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 Trust's Global Intermediary Identification Number (GIIN), if applicable

If the Trust 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

If the entity is a Trustee-Documented Trust, provide the Trustee's GIIN

☐ 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 3B**(Foreign Controlling Persons). If 'No', please go to **Section 4** 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 Registered Charity or Deceased Estate**

If the Trust is listed above, please proceed to **Section 4** to complete the form.

☐ **A Foreign (non-Australian) Charity or an 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 Foreign Charity or an Active NFE, please proceed to **part 3C** (Country of Tax Residency)

☐ **Other** (Trusts that are not previously listed – Passive Non-Financial Entities)

Please proceed to **part 3B**(Foreign Controlling Persons).

3B. FOREIGN CONTROLLING PERSONS (INDIVIDUALS)

Are any of the Trust's Controlling Persons tax residents of countries other than Australia? ☐ Yes ☐ No

If the Trustee is a company, are any of this company's Controlling Persons tax residents of countries other than Australia? ☐ Yes ☐ No

A Controlling Person is any individual who directly or indirectly exercises control over the Trust. For a Trust, this includes all Trustees, Settlers*, Protectors or Beneficiaries**. For a Trustee Company, this includes any persons controlling more than 25% of the shares in the company or Senior Managing Officials.

☐ ***Settlor** – Tick this box if the Settlor is unknown or has no continuing connection with the trust and after reasonable inquiry, the trustee has no reason to believe that the Settlor is a foreign tax resident. If so, you do **not** need to provide a Tax Status Declaration for the Settlor.

☐ ****Beneficiaries** – **only** provide a Tax Status Declaration for each beneficiary who is a foreign tax resident **and** has or will receive a distribution from the trust in the current calendar year. Tick this box to confirm that you agree to inform Dexus as soon as practicable when a distribution from the trust has or will be made to any other foreign tax resident and provide Dexus with the details requested.

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', to either of the two questions above, please provide the details of these individuals below 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)
<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="text"/>

If there are more 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.

3C. COUNTRY OF TAX RESIDENCY

Is the Trust a tax resident of a country other than Australia? ☐ Yes ☐ No

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

If 'No', please proceed to **Section 4** 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	<input type="text"/>	TIN	<input type="text"/>	If no TIN, list reason A, B or C (see below)	<input type="text"/>
2. Country	<input type="text"/>	TIN	<input type="text"/>	If no TIN, list reason A, B or C (see below)	<input type="text"/>
3. Country	<input type="text"/>	TIN	<input type="text"/>	If no TIN, list reason A, B or C (see below)	<input type="text"/>

If there are more countries of which the Trust 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 Trust has not been issued with a TIN.

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

SECTION 4 – 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 Dexu Privacy Policy available online at www.dexu.com/privacy or by contacting us.

SECTION 4 – 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 above
- 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 Dexu as soon as possible when the tax residency of the trust or any of its 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"/> Individual	<input type="checkbox"/> Sole trader	<input type="checkbox"/> Trustee	<input type="checkbox"/> Director	<input type="checkbox"/> Attorney
<input type="checkbox"/> Joint investor	<input type="checkbox"/> Partner	<input type="checkbox"/> Sole director	<input type="checkbox"/> Agent	
<input type="checkbox"/> Representative of association/co-operative/government body – please specify position (eg chairman)				<input type="text"/>

Signature

Date (dd/mm/yyyy)



Signatory 2

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

Signing as (please tick):

<input type="checkbox"/> Joint investor	<input type="checkbox"/> Trustee	<input type="checkbox"/> Company secretary	<input type="checkbox"/> Attorney (if more than 2 attorneys, please provide names and signatures)
<input type="checkbox"/> Partner	<input type="checkbox"/> Director	<input type="checkbox"/> Agent	

Signature

Date (dd/mm/yyyy)



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 4 and signed and dated this section
- ☐ Attached original certified copies of documents to verify the trust as set out on page 1
- ☐ Attached original certified copies of documents to verify the identity of a company trustee (if applicable), as set out on page 1
- ☐ Attached a separate sheet with the name details for other directors, if the company trustee has more than six directors
- ☐ Attached a separate sheet with the name details for other trustees, if more than four trustees
- ☐ Attached a separate sheet with the name details for other beneficiaries, if more than four beneficiaries

CONTACT DETAILS

Dexus Capital Funds Management Limited
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Sydney NSW 2001
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