

## 12 | APPLICATION FORM

### MERCHANT LEADERS FUND

#### Application Form

This application form is given solely to the recipient of the attached Information Memorandum and used to apply for Units pursuant to the Offer under the terms set out in the Merchant Leaders Fund (**Fund**) Information Memorandum dated 23 May 2018 (**IM**).

#### PART 1. New or Existing

This application should be applied to: (please tick one)

**NEW**

Please go to Part 2 and complete the remainder of the application form.

**EXISTING**

Please provide the Unitholder name and Unitholder number below.

\*Note: If you are a current Unitholder you only need to complete Part 2 to 5 of the application form if your details or preferences have changed.

#### PART 2. Investor Details

##### (a) New investor/Existing Investor

Title:	Surname:	
<hr/>		
Given names:	Date of birth:	
<hr/>		
Residential address:		
<hr/>		
Suburb:	State:	Postcode:
<hr/>		
Tax File Number:	Or exemption:	
<hr/>		

##### (b) New investor/Existing Investor – Joint Holder Details

Title:	Surname:	
<hr/>		
Given names:	Date of birth:	
<hr/>		
Residential address:		
<hr/>		
Suburb:	State:	Postcode:
<hr/>		
Tax File Number:	Or exemption:	
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**(c) Company, including Corporate Trustee**

Full name:

Full registered business name (if applicable) of the partnership:

Full street address of registered office: This must be a physical street address and cannot be a post box.

Suburb:

State:

Postcode:

Full street address of principal place of business:

Suburb:

State:

Postcode:

ACN / ABN / ARBN:

Tax File Number:

Country of registration / establishment:

Australia

Foreign (please specify)

Are you a regulated company / partnership: (please mark one)

Yes

No

Name of regulator / Registration body:

Details of relevant licence:

Is the Government body a body of: (please mark one)

A state, territory or a foreign country (please specify)

The Commonwealth of Australia

**(d) Trust**

Full name of Trust:

Type of Trust:

ABN:

Tax File Number:

Country of establishment:

Trustee Details

Individual Trustee. Please complete Part 2 (a) and / or (b)

Corporate Trustee. Please complete Part 2 (c)

### PART 3. Contact details

#### (a) Investor contact details (Joint investors please include one set of contact details for all communications)

Contact Name:

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Postal address:

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Suburb:

State:

Postcode:

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Telephone:

Mobile number:

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Fax number:

Email address:

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#### (b) Investor contact details (Joint investors please include one set of contact details for all communications)

Contact Name:

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Postal address:

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Suburb:

State:

Postcode:

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Telephone:

Mobile number:

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Fax number:

Email address:

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### PART 4. Communication

If you elect to receive a copy of the Fund's annual report, we are required by law to provide a copy to you free of charge (which will be sent to your specified email address). If you do not elect to receive a copy, then you may access the Annual Report on our website at [www.merchantfunds.com.au](http://www.merchantfunds.com.au).

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Please mark if you would like to receive a copy of the annual report each year.

☐ I wish to receive a copy of the annual report each year.

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## PART 5. Investment Details

Please specify the amount you wish to invest in the Merchant Leaders Fund:

INVESTMENT AMOUNT: \$ \_\_\_\_\_

The minimum investment amount is **\$100,000** (in cash or other assets as agreed to by the Investment Manager) and after that multiples of **\$50,000** (unless otherwise agreed to by the Investment Manager).

The Fund accepts payment via electronic transfer to:

Bank account name: Capricorn Investment Partners (Nominees) Pty Ltd ACF Merchant Leaders Fund Application Account

Bank name: The Rock Building Society Limited

BSB: 807 009

Account number: 30 081 044

Reference: Please include the applicant name in narration reference section when making an electronic transfer.

For alternative payment options contact The Investment Collective on:

Phone: 1800 679 000

Email: [bondsadmin@investmentcollective.com.au](mailto:bondsadmin@investmentcollective.com.au)

The Constitution provides for the Trustee to distribute Fund Income to Unitholders following the end of the financial year. Distributions of income are to be reinvested in additional Units unless the Trustee decides otherwise. A Unitholder may, however, notify the Trustee that it does not want the distribution to be reinvested. The notice must be given 15 business days before the end of annual distribution period.

## PART 6. Distributions and Bank Account Details

### (a) Distribution Method

The Constitution provides for the Trustee to distribute Fund Income to Unitholders following the end of the financial year. Distributions of income are to be reinvested in additional Units unless the Trustee decides otherwise. A Unitholder may, however, notify the Trustee that it does not want the distribution to be reinvested. The notice must be given 15 business days before the end of annual distribution period.

Distribution option

Reinvest

Deposit in nominated bank account (as per below)

### (b) Bank Account Nomination

Please nominate the bank account into which you would like distributions (where not reinvested) and withdrawals paid.

Account name: (Must be in the name of the Unitholder)

Name of Financial Institution:

Branch:

BSB:

Account Number:

## PART 7. Declaration and Signature

**I acknowledge, declare and agree that by signing this application form:**

I have provided all the accompanying information as required in Part 8.

I have provided a Wholesale Investor Declaration.

I am a professional investor under the Corporation Act or other investor than does not require disclosure under the Corporations ACT 2001, including in respect of each additional investment application (unless I/ we notify the Investment Manager or The Investment Collective).

I am an individual over 18 years of age or I am a duly incorporated body.

I have read carefully and understood I am applying solely on the basis of the Fund Information Memorandum provided and this completed application form. I understand that the information contained in the Information Memorandum is not legal, financial or tax advice nor a recommendation that the Fund is suitable to my/our needs.

I agree to be bound by the terms of the Constitution governing the Fund, this completed application form and the current Fund Information Memorandum, as amended or issued from time to time. The Trustee and Investment Manager reserves the right to not accept any applicable at its discretion.

That the Investment Manager / The Investment Collective is authorised to apply the Tax File Number or ABN provided above and it will be applied to all future applications for Units, including re-investments, unless I otherwise advise the Investment Manager or The Investment Collective.

That the Units in the Fund do not represent deposits with, or other liabilities of the Investment Manager or The Investment Collective.

That holding units in the Fund is subject to investment risk, including possible delays in repayment, loss of income and principal invested.

That I/we have such knowledge and experience in financial and business matters or we have obtained advice from a financial adviser such as I am capable of evaluating the merits and risks of my/our acquisition of the Units.

That the performance of the Fund, nor any particular return from, or any repayment of capital invested in, the Fund is guaranteed by the Investment Manager or The Investment Collective, the Custodian, the Auditor, or any of their subsidiaries or any other person or organisation and I/we understand the risks involved in investing in the Fund.

I/We acknowledge that due to anti-money laundering requirements, the Administrator and/or the Investment Manager may require proof of identity before the application can be processed and the Investment Manager and/or the Administrator be held harmless and indemnified against any loss ensuing due to the failure to process this application, if such information has been required by the parties hereto has not been provided by me/us.

I/We consent to details relating to my/ our application and holdings being disclosed to companies associated with Investment Manager which perform marketing and investor servicing duties.

I/ We understand the Fund is currently an unregistered managed investment scheme and agree to any future registration of the Fund with ASIC without the need of a Unitholder meeting.

Investor 1 (or authorised signatory of Applicant as shown in Section 2)

Investor 2 (or authorised signatory of Applicant as shown in Section 2)

**Signature:**

**Signature:**

**Name:**

**Name:**

**Date:**

**Date:**

### ADVISER USE ONLY

**Unitholder Number:**

**Number of Units:**

**Registered Name:**

**Registered Address:**

## PART 8. Additional Information for AML/CTF Purposes

### Identification Requirements

The Administrator is obliged to comply with the Know Your Customer policy in addition to Australian anti-money laundering legislation which dictates that we identify each investor in the fund and retain supporting documentation as evidence of the same.

*In order to satisfy the above we require the following documents:*

#### 1. INDIVIDUAL INVESTORS (Including Joint Investors, Sole Traders and Individual Trustee):

- A certified\* copy of an Australian Passport.
- or
- A certified\* copy of an Australian drivers licence.
- or
- A certified\* current foreign driver's licence, passport or similar travel document containing applicant signature.

**If these documents are unavailable, please contact The Investment Collective for alternatives.**

#### 2. COMPANY INVESTOR/ COMPANY TRUSTEE WHOM IS NOT PUBLIC, REGULATED OR LICENSED:

- A certified\* copy of an Australian Passport for each Director.
- or
- A certified\* copy of an Australian drivers licence for each Director.
- or
- A certified\* current foreign driver's licence, passport or similar travel document containing applicant signature.

**If these documents are unavailable, please contact The Investment Collective for alternatives.**

#### 3. OTHER TRUSTS:

- A certified\* copy of the Trust Deed.

**AND**

**The relevant identification documents for the identified trustee (individual or corporate) as outlined in 1. and 2. above**

\*Certified: A certifier must be a suitable person, such as a justice of the peace, lawyer, accountant, director or manager of a regulated credit or financial institution, a notary public, a member of the judiciary or a senior civil servant. The certifier should sign the copy document (printing his/her name clearly underneath) and clearly indicate his/her position or capacity on it together with a contact address and phone number. The certifier must indicate that the document is a true copy of the original and that the photo is a true likeness of the person.

**Please contact Merchant Funds Management who can certify or arrange certification of required documents.**

Phone: 08 6277 0050

Email: [info@merchantfm.com.au](mailto:info@merchantfm.com.au)

### USA Foreign Account Tax Compliance Act (FATCA)

**Are you:**

An individual who is a US Citizen or resident for tax purposes

A trust that is established under the laws of the US or a US Taxpayer or a trust that has its trustee, beneficiaries or settlor as a US Citizen or Taxpayer

A company established under the laws of the US or a US Taxpayer or a company whose beneficial owners through one or more shareholdings own more than 25% of the company's issued capital

A trust with a trustee that is a financial institution with a Global Intermediary Identification Number (GIIN) or has FATCA status (your tax status, as nominated by you, under the US Foreign Account Tax Compliance Act. E.g. you are deemed compliant Foreign Financial Institutions (FFI), excepted FFI, non-participating IGA FFI, exempted beneficial owner or GIIN applied but not yet issued)

A financial institution (e.g. custodial or depository institution, investment entity or insurance company) that has a GIIN or has FATCA status.

If you have ticked ✓ any of the above, please provide the name(s) and US Taxpayer Identification Number (TIN), GIIN or FATCA status of each owner, trustee, beneficial owner or settlor who is a US Citizen or resident of the US for tax purposes.

Name	Indicate if an individual, company, trust, trustee, beneficial owner or settlor	US TIN, GIIN or FATCA status

Additional information about FATCA can be found at:

[http://www.irs.gov/Businesses/Corporations/Foreign-Account-Tax-Compliance-Act-\(FATCA\)](http://www.irs.gov/Businesses/Corporations/Foreign-Account-Tax-Compliance-Act-(FATCA)); and

[http://www.aph.gov.au/About\\_Parliament/Parliamentary\\_Departments/Parliamentary\\_Library/pubs/rp/rp1314/QG/FATCA](http://www.aph.gov.au/About_Parliament/Parliamentary_Departments/Parliamentary_Library/pubs/rp/rp1314/QG/FATCA)