



ELLERSTON CAPITAL

28 June 2017

Ellerston Australian MicroCap Fund – Class B Application Form

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Ellerston Australian MicroCap Fund – Class B

IMPORTANT INFORMATION

This Application Form accompanies the Information Memorandum (IM) dated 16 June 2017 relating to units (Units) in the Ellerston Australian MicroCap Fund – Class B (Fund). The IM contains information about investing in Units in the Fund. You should read the IM and documents incorporated by reference and any supplementary documents before applying for Units in the Fund. If you make an error while completing your application form, do not use correction fluid. Cross out your mistakes and initial your changes.

Additional information required under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006.

In accordance with the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (the AML/CTF Law) we are required to collect additional information about you. We may also ask you to provide original certified copies of certain identification documents along with the application form. Under the AML/CTF Law, we are prohibited from processing your application until we have received all of the information and supporting documentation requested in this form. In most cases, the information that you provide in this form will satisfy the AML/CTF Law. However, in some instances we may contact you to request further information. It may also be necessary for us to collect information (including sensitive information) about you from third parties in order to meet our obligations under the AML/CTF Law. If you do not have the documents listed below, contact Ellerston Capital on 02 9021 7797.

A list of persons eligible to certify documents can be found on page 2. Documents submitted to verify the identity of entities must be original certified copies, not photocopies of certified copies.

HOW TO COMPLETE THIS FORM?

Step 1: Ensure that the relevant section as indicated on the application form is completed.

Step 2: Obtain certified copies of original documentation for identification purposes as indicated in the applicable section.

Step 3: Post completed form and Identification documents to:

Ellerston Capital Limited, c/- Link Market Services
PO Box 3721, Rhodes NSW 2138

Step 4: Transfer application monies or attach cheque.

PLEASE COMPLETE THE RELEVANT SECTION					
INVESTOR TYPE	Section 1	Section 2	Section 3	Section 4	Section 5
		Bank Details	Communication Preferences	Financial Advisers	Signature
INDIVIDUAL(S) & SOLE TRADERS	1.1	Yes	Yes	Optional	Yes
COMPANY/CORPORATE TRUSTEE	1.2	Yes	Yes	Optional	Yes
INDIVIDUALS ACTING AS TRUSTEE OF A TRUST OR SUPERANNUATION FUND	1.3	Yes	Yes	Optional	Yes
CORPORATE TRUSTEES ACTING AS TRUSTEE OF A TRUST OR SUPERANNUATION FUND	1.2 + 1.3	Yes	Yes	Optional	Yes
AUTHORISED REPRESENTATIVE/AGENT	Where relevant	Yes	Yes	Yes	Yes
ADDITIONAL APPLICATIONS	1.0				Yes

WHO CAN CERTIFY IDENTIFICATION DOCUMENTS?

Please provide original certified copies of the documents required for proof of identity. If a document is not written in English, please also include an English translation prepared by an accredited translator.

Recommended certification wording:

I, the undersigned, in my capacity as (description of capacity of person certifying) hereby certify that (name of holder), the holder of the attached (passport/driver's licence/ID card no.) appeared before me on (date) and that the attached is a true copy of the original that I have sighted and the picture thereon is a good likeness of the holder.

Signed:

Name:

Capacity:

Date:

Telephone Number:

Address:

Any of the following people can certify identification documentation as a true copy of an original document:

- Justice of the Peace
- Australian police officer
- Officer with two or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 1993)
- Finance company officer with two or more continuous years of service with one or more finance companies (for the purposes of the Statutory Declaration Regulations 1993)
- Officer with, or authorised representative of, a holder of an Australian financial services licence, having two or more continuous years of service with one or more licensees
- Member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with two or more years of continuous membership, i.e. an accountant
- Judge of a court
- Magistrate
- A person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described), i.e. a lawyer
- Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
- Permanent employee of the Australian Postal Corporation with two or more years of continuous service who is employed in an office supplying postal services to the public
- Chief executive officer of a Commonwealth court
- Registrar or deputy registrar of a court
- Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955)
- Notary public (for the purposes of the Statutory Declaration Regulations 1993)

IDENTIFICATION DOCUMENTS REQUIRED

WHAT DOCUMENTS WILL BE REQUIRED FOR PROOF OF IDENTITY PURPOSES?

Prior to submitting your application, please attach original certified copies of the following identification documentation. We may also require additional documentation. If a document is not written in English, please also include an English translation prepared by an accredited translator. Certification must be completed in the manner described on the previous page.

Individual Applicants (including Sole Traders)

EITHER any one of the following documents that includes your name and either your date of birth or residential address:

- A valid driver's licence that includes your photograph
- A passport that includes your photograph and signature, which is either valid or has expired within the preceding two years
- A valid proof of age card issued under the law of an Australian State or Territory that includes your photograph
- A valid national identity card issued for the purposes of identification by a foreign government, the United Nations or an agency of the United Nations that includes your photograph and signature

OR one primary identification document AND a secondary identification document, each of which includes your name and either your date of birth or residential address:

- A primary non-photographic identification document, being:
 - A birth certificate or birth extract
 - A citizenship certificate
 - A valid pension card issued by Centrelink that entitles you to financial benefits
- A secondary identification document, being:
- A notice issued to you by the Commonwealth or an Australian State or Territory within the preceding 12 months recording the provision of financial benefits to you, which includes your name and current residential address
- A notice issued to you by the Australian Taxation Office within the preceding 12 months recording a debt payable to or by you under Australian tax laws, which includes your name and current residential address
- A notice issued to you by a local government body or utilities provider within the preceding 3 months recording the provision of services to you or your current residential address, which includes your name and current residential address
- In relation to a person under the age of 18, a notice issued to you by a school principal within the preceding 3 months recording the period of time that you have attended at the school, which includes your name and current residential address

Public companies

Each of the following:

- A recent company extract from ASIC (or overseas company regulator) or certificate of incorporation
- Specimen signatures of authorised signatories who are permitted to transact on the investment
- If listed on a stock exchange, a list of names and addresses of shareholders holding 10% or more of the issued share capital
- Where the company is not regulated by ASIC or an overseas regulator, individual shareholders holding more than 25% of issued share capital must produce the documentation listed above for Individual Applicants

Proprietary companies

Each of the following:

- A recent company extract from ASIC (or overseas company regulator) or certificate of incorporation
- Specimen signatures of authorised signatories who are permitted to transact on the investment
- A list of names and addresses of shareholders holding 10% or more of the issued share capital
- Where the company is not regulated by ASIC or an overseas regulator, individual shareholders holding more than 25% of issued share capital must produce the documentation listed above for Individual Applicants

Trust Applicants

Each of the following:

- Trust Deed; and
- For individual trustees, the documentation requested for at least one of the trustees listed above for Individual Applicants OR
- For corporate trustees, the documentation requested for the companies (above)

**WHOLESALE CLIENT CERTIFICATE: DECLARATION FROM QUALIFIED ACCOUNTANT IN
RELATION TO INVESTOR**

Details of Investor:

Surname Title

Given Name(s)

Company Name:

Address Details:

Unit Street Number PO Box

Street Name

Suburb/Town

State Postcode Country

I,

Name

of

Company Name

hereby certify that:

- (a) I am a qualified accountant for the purposes of the *Corporations Act 2001* (Cth), being a member of the Institute of Chartered Accountants in Australia/Australian Society of Certified Practising Accountants/National Institute of Accountants and am subject to, and comply with, that body's continuing education requirements;
 - 1.
- (b) I am giving this certificate in accordance with section 761G(7)(c) of the *Corporations Act 2001* (Cth) and acknowledge that this certificate is being relied upon by Ellerston Ventures Partnership LP ("Fund") in relation to the offer of Partnership Interests in the Fund; and
 - 2.
- (c) the Investor whose details are set out above has,

net assets of at least A\$2.5 million; or
 gross income for each of the last two financial years of at least A\$250,000 a year.

Signed:

Dated:

1.0 ADDITIONAL APPLICATION

Are you an existing investor?

Yes

If you are an existing investor in the Fund you do not need to provide additional identification information. **Please ensure that you complete section 5 (Declaration and Signature).** Your existing distribution and communication preferences will be maintained. If you would like these changed, please also complete section 3 and mark the distribution election box below.

Existing account number

Existing account name

Additional Amount to be invested.

Do you want to change your distribution election?

Note: This will affect your entire holding

cash

reinvestment

Method of payment

cheque

electronically

No – New Investors need complete the applicable Section 1, Section 2, 3 and 5 below. Section 4 is optional

1.1. INDIVIDUAL / JOINT INVESTOR / SOLE TRADER

A. Individual / Joint Investor (*joint applicants will be held as joint tenants*) / **Sole Trader Details**

Complete your name, contact details and address below. You must include a street residential address not a PO Box.

Investor 1

Title Mr/Mrs/Ms/Dr/Other	Date of Birth (DD/MM/YYYY)
Given Names	Surname
Sole Traders – Full business name	
TFN or reason for exemption	
County of residence for tax purposes (if not Australia)	
ABN/ARBN	
Email	
Mobile	
Country of birth	
Tax residency	
TIN (US taxpayer identification number – where applicable)	
Are you a citizen or resident of the United States of America? (Please ✓ your selection)	
<input type="checkbox"/> Yes	<input type="checkbox"/> No

Residential address (not a PO Box)

Investor 2

Title Mr/Mrs/Ms/Dr/Other	Date of Birth (DD/MM/YYYY)
Given Names	Surname
TFN or reason for exemption	
County of residence for tax purposes (if not Australia)	
ABN/ARBN	
Email	
Mobile	
Country of birth	
Tax residency	
TIN (US taxpayer identification number – where applicable)	
Are you a citizen or resident of the United States of America? (Please ✓ your selection)	
<input type="checkbox"/> Yes <input type="checkbox"/> No	

Residential address (not a PO Box)**Mailing Address if different from residential address**

1.2. COMPANY / CORPORATE TRUSTEE

Company name and contact

Company name (as registered with ASIC)
Contact person
Email
Mobile
Country of establishment
GIIN (global intermediary identification number)

Australian Company
 Public

 Private (proprietary)

Foreign Company
 Public

 Private (proprietary)

Australian Company (both Public & Private)

Australian Company Number (ACN)

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Australian Business Number (ABN)

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Registered address (not a PO Box)**Mailing address (if different from registered address)**

Principal Place of Business in Australia

- Same as registered address above
- Other – please provide address below (not a PO Box)

Country/ies where the entity has a presence

Foreign Company (Public & Private)

Australian Registered Business Number (ARBN) *(if not registered, leave blank)*

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Identification number issued by foreign registration body *(if not registered, write 'Not registered')*

Name of foreign registration body *(if applicable)*

Registered address in Australia (not a PO Box) (if not registered in Australia, provide overseas address)

Principal Place of Business in Australia (or full name and address of company's agent in Australia)

- Same as registered address above
- Other – please provide address below (not a PO Box)

Full name of agent in Australia *(if applicable)*

Registered address (not a PO Box)

To be completed for both foreign and Australian Companies

1. Are any of the beneficial owners US citizens or residents of the US for tax purposes Yes No

If yes, provide the name and US Taxpayer Identification Number (TIN) of each beneficial owner who is a US citizen or resident of the US for tax purposes.

Full given name(s)	Surname	US TIN

2. Director details for Private Companies (both Australian and Foreign)

Director 1 – Full Name

Director 2 – Full Name

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Director 3 – Full Name

Director 4 – Full Name

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Director 5 – Full Name

Director 6 – Full Name

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(If more than 6 directors, please provide full names on a separate page and attach to this form.)

3. Major Shareholders for Companies excluding regulated companies (both Australian and Foreign)

For a company (Australian and foreign) which is not a 'regulated company',¹ or listed on a stock exchange please provide details for each shareholder who owns, through one or more shareholdings, more than 25% of the company's issued capital.

1. 'Regulated Company' – any company (e.g. SMSF) that is licensed and subject to oversight by a statutory regulator i.e ASIC, APRA, ATO or equivalent body in foreign countries.

Major Shareholder 1 – Full Name

Major Shareholder 2 – Full Name

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Residential Address (not a PO box)

Residential Address (not a PO box)

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Major Shareholder 3 – Full Name

Major Shareholder 4 – Full Name

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Residential Address (not a PO box)

Residential Address (not a PO box)

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Section 1.3 Trust / Superannuation Fund

1) Name of Trust / Superannuation Fund

2) Country of establishment

3) Regulated Superannuation Funds (e.g. SMSF) are not required to complete A) or B) below

A) Provide the Trust or Trustees GIIN (US Global intermediary identification number) if applicable

3.

B) If neither the Trust nor the Trustee has a GIIN, please provide the Trust’s FATCA status.

4) Tax File Number for the Trust/Superfund

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5) Type of Trust

- Category A Government superannuation fund (Australia or foreign) established under legislation
- Category B Foreign superannuation fund (other than Category A)
- Category C Managed investment scheme registered with ASIC

Australian Registered Scheme Number (ARSN)

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Category D Regulated Trust*

* A regulated trust refers to:

- i) a self managed superannuation fund within the meaning of Section 19 of the Superannuation Industry (Supervision) Act 1993 (SIS Act) – the regulator is the Australian Tax Office,
- ii) a regulated superannuation fund, an approved deposit fund, a pooled superannuation trust or a public sector superannuation scheme within the meaning of the SIS Act – the regulator is the Australian Prudential Regulation Authority (APRA)

Name of Regulator (eg ASIC, APRA, ATO)

Registration / Licence details

Australian Business Number (ABN)

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Category E Other (eg family trust, unregistered)

If you selected either Category B, Category D, or Category E, you will need to provide details of beneficiaries.

Beneficiary details

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

Yes Provide details of membership class (eg family members of a named person)

No List full names of all company and individual beneficiaries

Beneficiary 1 – Full Name	Beneficiary 2 – Full Name
Beneficiary 3 – Full Name	Beneficiary 4 – Full Name

(If more than 4 beneficiaries, please provide full names on a separate page and attach to this form.)

Trustee details

Trustee is a:

- Company Complete **Section 1.2** of this form
- Individual Complete individual trustee details below

Please provide the identification documents set out in Section 1.1 for **ONE** of the individual trustees.

Please provide details for **EACH** of the individual trustees as follows:

Trustee 1

Title Mr/Mrs/Ms/Dr/Other	Date of Birth (DD/MM/YYYY)
Given Names	Surname

Residential Address (not a PO box)

Trustee 2

Title Mr/Mrs/Ms/Dr/Other	Date of Birth (DD/MM/YYYY)
Given Names	Surname

Residential Address (not a PO box)

Trustee 3

Title Mr/Mrs/Ms/Dr/Other	Date of Birth (DD/MM/YYYY)
Given Names	Surname

Residential Address (not a PO box)

(If more than 3 trustees, please provide full details on a separate page and attach to this form.)

Section 2: Application Amount and Banking Details

Application amount	Distribution Options	
	Distributions (Select one only)	
Amount to be invested	Reinvest all	Pay all to a bank account
\$	<input type="checkbox"/>	<input type="checkbox"/>

**if no selection is made or an incomplete instruction is received, the distribution will be reinvested. If you elect to have distributions reinvested, this election will apply to your entire holding of Units. Distribution reinvestment cannot apply to only part of your holding of Units. The Manager may suspend or discontinue distribution reinvestment in its discretion.*

Payment Method

Important – Preferred method of payment (Please ✓ your selection)

Cheque (to be provided before midday on the cut-off day)

Cheques are to be made payable to: Pacific Custodians Pty Limited – Ellerston Australian MicroCap Fund – Class B

Electronic Funds Transfer

For electronic transfer of application monies the preferred method of paying is by RTGS or SWIFT to:

Bank Name	Commonwealth Bank of Australia
Bank Address	Town Hall Sydney, 546 George Street, Sydney 2000
Account Name	Pacific Custodians Pty Limited – Ellerston Capital Applications

BSB Number	062 028	Account Number	1066 0620
BIC	CTBAAU2SXXX		
Reference	EAMCF [Investor name] Eg EAMCF John Citizen		

Banking details (for payment of distributions and redemptions)

Bank Name			
Bank Address			
Account Name			
BSB Number		Account Number	

Section 3: Communication Preferences

<input type="checkbox"/>	I would like to receive all information about my holding by mail . This is the default if no election is made.
<input type="checkbox"/>	I would like to receive all information about my holding by email . This will include an email copy of the annual report
Email address:	
Contact name:	
Additional persons authorised to receive duplicate copies of statements:	
Contact name:	
Role:	
Email address:	
Contact name:	
Role:	
Email address:	
An electronic version of the Fund's annual report will be made available on our website www.ellerstoncapital.com . If you would like to receive a hard copy of the Fund's annual report by post, please tick the box below. If you do not tick this box, we will not send you a hard copy of the annual report, which is both environmentally friendly and more cost effective for the Fund.	

<input type="checkbox"/>	Yes, I would like to receive a hard copy by post of the Fund's annual report
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Section 4: Authorised Representative/Agents/Financial Advisers

This section should be completed if:

- You are a financial adviser for a client;
- You are an authorised representative has been appointed to operate this account; OR
- This application is being made by an agent of the investor under a power of attorney or as the investor's legal or nominated representative.

All Authorised Representatives/Agents

AFSL: _____

Name of Dealer Group

Dealer Group Code:

Name of Financial Planning/ Accounting Firm

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Address of Financial Planning/ Accounting Firm

--

Full name of Authorised Representative/Agent/Financial Adviser/Accountant

Adviser Code:

Email address of representative

--

Signature of Authorised Representative/Agent/ Financial Adviser

--

Evidence of authority to act on investors behalf e.g. Power of Attorney

If the investor is a non-individual (ie. a company, trust etc) please also complete the following:

If a non-individual investor (ie. a company, trust etc) appoints an authorised representative in relation to this investment then the investor must also appoint a verifying officer to liaise with that authorised representative.

Please provide the following information about the verifying officer:

Title Mr/Mrs/Ms/Dr/Other	Date of Birth (DD/MM/YYYY)
Given Names	Surname

Residential address (not a PO Box)

Section 5: Declaration and Signatures

I/we declare and agree:

- That all details in this application are true and correct;
- That I/we have read the Information Memorandum dated 16 June 2017 (**IM**) to which this application was attached and agree to be bound by the provisions of the IM and Constitution (as amended from time to time) governing the Fund;
- That I/we wish to apply for Units in the Fund;
- That I/we am/are an individual over 18 years of age, or I am a duly incorporated body;
- That if this application is signed under Power of Attorney, the Attorney declares that he/she has not received notice of revocation of that power (an original certified copy of the Power of Attorney should be submitted with this application);
- That sole signatories signing on behalf of a company confirm that they are signing as a sole director and sole secretary of the company;
- That if investing as trustee, on behalf of a superannuation fund or trust, I/we confirm that I/we am/are acting in accordance with my/our designated powers and authority under the applicable trust deed. In the case of superannuation funds, I/we also confirm that it is a complying fund under the Superannuation Industry (Supervision) Act 1993;
- That if investing as agent, representative or nominee on behalf of one or more investors (**Underlying Investors**), I/we further agree and confirm that the representations, warranties, and covenants made in this application are made by me/us on behalf of myself/ourselves and the Underlying Investors and that I/we have all requisite power and authority from the Underlying Investors to execute and perform the obligations under this application, and I/we will provide the Trustee with any information reasonably requested by it or required by any applicable law or regulations with respect to the Underlying Investors and my/our authority to act on their behalf;
- That I/we are not aware and have no reason to suspect that the monies used to fund my/our investment in the Fund have been or will be derived from or related to any money laundering, terrorism financing or similar activities illegal under applicable law or regulations or otherwise prohibited under any international convention or agreement (**AML/CTF Law**);
- That I/we are not aware and have no reason to suspect the proceeds of my/our investment in the Fund will be used to finance any illegal activities;
- That I/we will provide all additional information and assistance that the Manager or its delegates (which may include the Fund's administrator) may request in order for the Manager or delegate to comply with any AML/CTF Law; and
- That the Manager and/or the Fund's administrator may, to the extent permitted by the Corporations Act, deliver and make reports, statements and other communications available in electronic form, such as email or by posting on a web site instead of physical delivery.

I/we acknowledge that:

- Holding Units is subject to investment risks, including loss of income and principal invested and possible delays in repayment;
- The Manager is authorised to apply the TFN or ABN provided above and it will be applied to all future applications for Units, including reinvestments, unless I/we advise the Manager otherwise;
- The Manager reserves the right to not accept any application in its absolute discretion;
- If my/our application monies are dishonoured, the Manager will not process my/our application and will notify me/us;
- I/we have read the information on privacy and personal information contained in the IM and consent to my/our personal information being used and disclosed as set out in the IM including for, or in relation to, the subscription for Units. Further, I/we have read the information on Link Group's privacy policy at www.linkmarketservices.com.au;
- Application money will be held in a bank account until invested in the Fund or returned to me/us and invested in the Fund on the next monthly application date (if any) or may be returned to me/us. Any interest paid on that account will be paid to the Fund and not to applicants regardless of whether their application is successful;
- The Manager may decide to delay or refuse any request or transaction, including by suspending the issue or redemption of Units in the Fund, if I/we do not provide information requested by the Manager or if the Manager is concerned that the request or transaction may breach any obligation of, or cause the Manager to commit or participate in an offence under, any AML/CTF Law, and the Manager will incur no liability to me/us if the Manager is to do so;
- Investments in the Fund are not deposits with or other liabilities of the Manager or its related bodies corporate, affiliates, associates or officers of any of the above entities and are subject to investment risk, including possible delays in repayment and loss of income and capital invested. None of the Manager or any related bodies corporate, affiliates, associates or officers of any of the above entities guarantees any particular rate of return or the performance of the Fund, nor do they guarantee repayment of capital from the Fund;
- The Fund, the Fund's administrator and the Manager are each hereby authorised and instructed to accept and execute any instructions in respect of my/our investment in the Fund to which this application relates given by me/us in written form or by facsimile. If the instructions are given by me/us by facsimile, I/we undertake to confirm them in writing; and
- The Fund's administrator will issue a confirmation of my investment in the Fund as soon as practicable after my application is received by them and accepted by the Fund (if you do not receive your confirmation within a reasonable time, you may contact the Fund's administrator to ascertain the status of your application).

Individuals

Name of applicant **Signature of applicant** **Date**

Company's/Other

Name of applicant **Signature of applicant** **Date**

Capacity (please tick if applicable) Director Secretary Executive Officer Authorised Signatory

Company seal (if applicable)



ELLERSTON CAPITAL

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Sydney NSW 2000

MELBOURNE OFFICE

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Melbourne VIC, 3000

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