Application form

Please complete all pages of this form in black ink using BLOCK letters. Mark appropriate boxes with a cross like the following X. Start at the left of each answer space and leave a gap between words.

Please ensure this form is fully complete and all required documentation is provided to either your financial adviser or us, so we can process your application.

1. Investor type	•			
Are you an existing Perp	etual investor?			
no yes	client number			
If yes, would you like to o	open a new account or make	an additional investment into	an existing account?	
new account*				
additional investment	existing account number		please go to sect	ion 2
Investor type (please se	elect only one investor type)		
individual**	joint**	company	superannuation fund	trust
partnership	association	government body	other entity	
	account for an entity (not an ir e, available on our website (u		u will also need to complete the 'Crovided a form for this entity).	ustomer identificatio
** Individual or joint inves	tors include adult(s) investing	for a child under 18 years.		
2. Investment a	mount and payme	ent details		

How much would you like to invest? Source of funds being invested (tick most relevant option) retirement savings employment income business activities inheritance/gift financial investments sale of assets other How will this investment be made? NOTE: Cash is not accepted. cheque (initial make cheque payable to PIML - PIML-PSF - [insert name(s) of applicant(s)] investments only) debit my/our bank account nominated in section 6 as bank account 1. direct debit I/We acknowledge and accept the terms and conditions of direct debit available at

www.perpetual.com.au/pureseriesfundsupdates

3. Investor details

Existing investors in the Funds need only complete this section if you wish to change any details provided previously.

A. Individual and joint account holders

Investor 1 (inc	dividual account	holder)			Investor	2 (joint	accoun	nt holder)			
title					title						
Mr Mrs	s Miss	Ms	Other		Mr	Mrs	N	Miss	Ms	Other	
first name(s)					first nam	e(s)					
шш			ш		ш			Ш	Ш	ш	
last name					last nam	е					
шш			Ш	ш	ш					Ш	шш
occupation					occupati	on					
date of birth			gender		date of b	irth				gender	
/	/		male	female	/		/			male	female
Tax residency tax resident on on the amount of a person's	atus for tax purp y rules differ by co of a particular cou nt of time a perso residence or pla y can also be as	ountry. Who untry is ofte on spends in ce of work.	n (but not a n a country For the Ur	always) based v, the location nited States,	Tax residentax residental tax reside	dency idency ident of a mount con's re	rules dif a partic of time esidence	ular cour a person e or place	untry. Wh ntry is often spends i e of work.	en (but not a in a country For the Ur	dividual is a always) based of the location nited States, or residency.
Please answ	er <u>BOTH</u> of the f	ollowing ta	x residen	cy questions:	Please a	nswer	BOTH	of the fo	llowing ta	ax residenc	cy questions:
1. Are you a	tax resident of	Australia?			1. Are yo	ou a ta	x resid	ent of A	ustralia?		
	nplete the following of proceed to question		no	(proceed to question 2 below)	yes			ollowing de question 2		no	(proceed to question 2 below)
tax file numbe	er (TFN)				tax file n	umber	(TFN)				
		or							or		
TFN exemption	on code				TFN exe	mption	n code				
							Ш				
2. Are vou a	tax resident of	another co	untrv?		2. Are vo	ou a ta	x resid	ent of ar	nother co	ountry?	
	nplete the following		no		yes			ollowing de		no	
	se list all releva			vide your tax					countrie		vide your tax
A TIN refers t	to the number as	signed by a	a country fo		A TIN re	fers to	the nun	nber assi	igned by a	a country fo	or the purpose
Australia. If a	ing its tax laws a TIN is not provid cified below (A, E	led, please	list one of	the three	Australia	. If a T	ĪN is no	t provide	d, please	quivalent of list one of not providing	the three
Country 1	omed below (A, E	0 0 10 11	ot providiri	garn.	Country		ieu DeiO	W (A, D (), O) 101 TI	ot providing	gain.
					,						
TIN		If no TI	N, list reaso	n A, B or C	TIN				If no T	IN, list reaso	n A, B or C
Country 2					Country	2					
TIN		If no TI	N, list reaso	n A, B or C	TIN				If no T	IN, list reaso	n A, B or C
	nore than two cou et and tick this b		vide details	on a				two coun k this box		vide details	on a
Reason A:	The country of to tax residents		ncy does n	ot issue TINs	Reason			untry of ta	ax resider	ncy does no	ot issue TINs
Reason B:	I have not been	n issued wit	th a TIN.		Reason	B:	I have n	not been	issued wi	th a TIN.	
Reason C:	The country of TIN to be discl		ncy does n	ot require the	Reason			untry of ta		ncy does no	ot require the

3. Investor details (continued)

A. Individual and joint account holders Investor 1 (individual account holder)

Investor 2 (joint account holder)

Residential address (nunit number		number	Residential addre unit number	ss (mandatory) street num	nber
street name			street name		
suburb (if relevant) OR	city		suburb (if relevant	t) OR city	
state	postco	de	state	postcode	
country			country		
phone (business hours	5)		phone (business l	hours)	
phone (after hours)			phone (after hour	s)	
mobile			mobile		
email address			email address		
statements (including ta may include email notifi	ax statements), re ications advising	ports and other material me/us when new informa	s or notifications requiration regarding my/our	investment (such as trans red by the Corporations A investment is available for nation by mail from time to	ct) electronically. This viewing online, via
Postal address (if difference box	rent to residential unit number	address) street number	Postal address (if po box	different to residential add	dress) street number
po box		Silver Hamber	po box		Street Hamber
street name			street name		
suburb (if relevant) OR	City		suburb (if relevant	t) OR city	
state	postcode		state	postcode	
country			country		

3. Investor details (continued)

B. All other account holders

company name/corporate trustee				
name of superannuation fund, trus	t, partnership, association, govern	nment body, co-operative, o	or child*	
tax file number		and/or ABN		
principal business activity				
c/-				
po box unit numbe	r street number			
street name				
suburb (if relevant) OR city				
state postcode	country			
phone (business hours)	mobile	fax	x	
email address				

By providing my/our email address, I/we agree to receive any information about my/our investment (such as transaction confirmations, statements (including tax statements), reports and other materials or notifications required by the Corporations Act) electronically. This may include email notifications advising me/us when new information regarding my/our investment is available for viewing online, via hyperlink or via myPerpetual. I/We acknowledge you may still need to send me/us information by mail from time to time.

4. Features

Existing investors in the Funds need only complete this section if you wish to add any new features or change existing features. Indicate which optional features you would like applied to your account.

BPAY for additional investments	yes (default)	no	
Savings plan	yes	monthly (default)	
		quarterly	
Investor myPerpetual online access	view & transact (default)	view only	
Adviser myPerpetual online access Note: your financial adviser can access information about your account online (and may extend to their authorised delegates the same level of online access you have determined for your adviser)	view & transact (default)	view only	
Investment information to be sent in the mail Note: most of your investment information is also available online through myPerpetual	online only (default)	online and mail	
Annual financial reports to be sent in the mail Note: annual financial reports are also available on our website	no (default)	yes	
Marketing material I/We would like to receive investment education material and be informed about Perpetual Group's products, services and offers	yes (default)	no	

- For each optional feature you have selected, please ensure you have read and understood the relevant section in the PDS for that
 optional feature.
- If you have nominated an optional feature above, please ensure you also complete all details in the relevant columns of the table in the following section.

5. Investment allocation

Fund	APIR code	short code	initial investment (minimum	additional investment (minimum \$2,000	savings plan (minimum \$100 in	distributions (indicate a preference with an X)	
	code	code	\$25,000 in any Fund)	in any Fund)	any Fund)	reinvest (default)	bank account 1
Perpetual Pure Equity Alpha Fund	PER0668AU	PIWARA					
Perpetual Pure Microcap Fund	PER0704AU	PIWMCA					
Perpetual Pure Value Share Fund – Class A units	PER0439AU	PIBIAS					
Perpetual Pure Value Share Fund – Class P units	PER7814AU	PIBIAP					
Total							

6. Bank account details

Bank account 1

Existing investors in the Funds need only complete this section if you wish to add or change your bank account details.

You can only nominate a bank account that is held in your name(s). By providing your bank account details in this section, you accept the terms in the direct debit service agreement and authorise Perpetual to use these details for all future transaction requests that you nominate.

Bank account 2

Complete your account details in this section if you would like us Only complete your account details in this section if you would like to debit or credit your bank account for applications, withdrawals us to debit a different bank account for your savings plan. and payment of distributions, as applicable. name of financial institution name of financial institution branch name branch name branch number (BSB) branch number (BSB) account number account number name of account holder name of account holder signature of account holder A signature of account holder A signature of account holder B signature of account holder B date date

7. Authorised representative

Existing investors in the Funds need only complete this section if you wish to add or change an authorised representative. Would you like to appoint an authorised representative? Before appointing an authorised representative, refer to the PDS for more details.

no please	go to section 8.											
	complete the detai		ociated with a	ppointing a	ın authoi	rised rep	oresenta	ntive.				
myPerpetual onlin	ne access for my au	thorised repres	sentative									
view and transact	(default)	or	view only									
authorised repre	esentative details:											
first name(s)				Ш			Ш		Ш	Ш	Ш	
last name											Ш	
po box		unit nu	ımber			stre	eet num	ber				
							Ш					
street name												
suburb (if relevant	t) OR city											
									ш			
state	postcode	country				H						
state	postcode	country										
	postcode	country										
state signature of authorised	postcode	country					date		/			

8. Member advice fee

Your adviser (the fee recipient) is seeking your consent to the payment of an ongoing advice fee from your account.

For new ongoing fee arrangements, the fee will begin on the business day we receive the form (3pm cut-off applies). Ongoing advice fees are paid monthly by the withdrawal of units from the account above. A percentage ongoing advice fee is calculated on the average daily balance of your investment over the month.

Please also sign section 10 of this application form. We can refuse a request to pay a member advice fee

ongoing member advice fee (including GST)	
. % per annum (cannot be paid where the investment is made with a borrowed amount) or	
\$ per month	
Based on your current account balance, an estimate of the fees payable over a 12 month period is \$	
Where an estimate is provided (ie for a percentage-based fee), an explanation of the method used to work out the estimate.	
Services provided for the above fee	
Please outline the services the account holder is entitled to receive under the ongoing fee arrangement	

signature of investor 1 or company officer	signature of investor 2 or company officer
	ents, this can be up to a maximum of 12 months from when you form in section 10). For existing ongoing fee arrangements, this ence day.
The ongoing fee arrangement will not be accepted if this section is If you do not renew your consent to the ongoing fee, we will stop decayou may withdraw or vary your consent earlier than this date.	not completed. ducting it from your account 150 days after the reference day, however

9. Financial adviser use only

Financial adviser details and member advice fee

Where an ongoing member advice fee has been agreed with the investor (see section 8 of this application form):

- A percentage member advice fee cannot be paid on a borrowed amount used to make an investment. I can confirm that I have made reasonable enquiries to determine that the investment has not been made with borrowed amounts.
- I will promptly notify Perpetual in writing if I am no longer entitled to receive the member advice fee.
- I acknowledge that where agreed services are not provided to the member, Perpetual reserves the right to claw back fees.
- I consent to Perpetual acting as my agent to collect any agreed member advice fee agreed in 'Member Advice Fee' section of this application form.

financial adviser name		
phone (business hours)		phone (after hours)
mobile		fax
postal address		
email		
AFSL licensee name		
AFSL number		
either Perpetual adviser number		
or dealer group		
dealer branch		
financial adviser signature		date / /
IL GN	/ (Group)	
IL AN	/ (Adviser)	ADVISER STAMP
IL CN	/ (Client)	

10. Declaration and signature

I/We declare and agree that:

- I/we have read the Product Disclosure Statement (PDS) and all Supplementary Product Disclosure Statements (SPDSs) (if applicable), and any relevant incorporated material to which this application applies, and have received and accepted the offer to invest in Australia
- all of the information provided in my/our application is true and correct
- I am/we are bound by any terms and conditions in this PDS and all SPDSs (if applicable) and the provisions of the constitution/s (as amended) of the Fund/s that I am/we are invested in
- I/we have the legal power to invest and/or are at least 18 years of age
- I/we have read and understood the privacy disclosure as detailed in the PDS. I/We consent to my/our personal information being collected, held, used and disclosed in accordance with the privacy disclosure. I/We consent to Perpetual disclosing this information to my/our financial adviser (named in this form) in relation to the investments described in this form. Where the financial adviser named in this form no longer acts on my/our behalf, I/we will notify Perpetual of the change
- if I/we have received this PDS from the internet or other electronic means that I/we received it personally or a print out of it, accompanied by or attached to this application form
- if this is a joint application, each of us agrees, unless otherwise indicated on this application, our investment is as joint tenants. Each
 of us is able to operate the account and bind the other(s) to any transaction including investments, switches or withdrawals by any
 available method
- in relation to trust investors, only the trustee has rights and obligations under the Funds
- withdrawals by companies must be signed by an authorised representative or in accordance with the company's constitution or under power of attorney
- I/we confirm that I/we have provided my/our financial adviser with acceptable identification documentation as described in the following
 section or the relevant customer identification form OR I/we are not investing through a financial adviser, and therefore have included
 certified copies of acceptable identification documentation with the completed application form as described in the following section or
 the relevant customer identification form.

I/We acknowledge and agree that:

- if I/we do not renew my/our consent to the ongoing fee arrangement, the member advice fee specified in Section 8 of this form will be
 deducted for a maximum of 150 days after the reference date of the ongoing fee arrangement. I/we understand that I/we can withdraw
 my/our consent to (terminate the ongoing fee arrangement), or vary the ongoing fee arrangement, at any time by notice in writing to
 my/our financial adviser or Perpetual.
- The ongoing fee arrangement may continue where Perpetual is advised by the outgoing AFS licensee or financial adviser that the services under the ongoing fee arrangement are to be provided by a new AFS licensee or financial adviser and that I/we have consented to that transfer
- The ongoing fee arrangement will terminate, and no further advice will be provided or fee charged under it, if consent is not given
- the information contained in the PDS is not investment advice or a recommendation that a Fund is suitable having regard to my/our investment objectives, financial situation or particular needs
- Perpetual may be required to pass on my/our personal information or information about my/our investment to the relevant regulatory authorities, including for compliance with income tax law and the Anti-Money Laundering and Counter-Terrorism Act 2006 or associated regulation and any tax-related requirements for tax residents of other countries
- investments in the Fund/s are not investments, deposits or other liabilities of Perpetual Limited or its subsidiaries and are subject to investment and other risks, including possible delays in repayment and the loss of income and principal invested
- neither Perpetual Investment Management Limited nor Perpetual Limited or its subsidiaries guarantee the repayment of capital or the performance of the Fund/s or any particular rate of return from the Fund/s
- the PDS has referred me/us to additional information or terms and conditions ('information') of this product which may assist me/us in making my/our investment decision and I/we have referred to this information to the extent I/we considered it was necessary to make my/our investment decision
- Perpetual Group may contact me/us where required by using the email address(es) provided on the application form. I/We will notify
 Perpetual of any change to my/our email address(es). I/We understand that failure to advise such a change may result in me/us not
 receiving correspondence relating to my/our investment.

10. Declaration and signature (continued)

Joint applicants must both sign

signature of investor 1 or company officer	signature of investor 2 or company officer
print name	print name
capacity (company investments only. If you are not a sole director, two signatories are required.)	capacity (company investments only. If you are not a sole director, two signatories are required.)
sole director director secretary	director secretary
date	date
/ /	/ /
Important notes: • If signing under power of attorney, the attorney certifies that	Final checklist Have you
he or she has not received notice of revocation of that power. The power of attorney, or a certified copy, must be sent to Perpetual, if not previously provided.	Completed all sections of your application form?
Perpetual, in the previously provided. Perpetual has the absolute discretion to accept or reject any application.	Signed your application form?
Investors should retain a copy of the PDS.	Provided your financial adviser the customer identification
A business day is a working day for Perpetual in Sydney.	documents requested in this application form or the relevant Customer Identification form?
	OR, if you are opening a new account and do not have a financial adviser, completed the following section of this application form (for individuals) or enclosed the relevant customer identification form (for entities) and certified copies of your identification documents (as requested in the following section of this application form or the relevant customer identification form)?
	Please send your completed application form to:
	Reply Paid 4171 Perpetual Pure Series Funds
	GPO Box 4171 Sydney NSW 2001

11. Identification verification for individuals and joint investors

This section is only applicable if you are investing as an individual or joint investor (as selected in section 1 of this form) and have not provided this documentation previously. If you are investing as a company, trust or any other investor type, please complete the relevant 'Customer Identification form' available on our website or by contacting us.

The identity documentation requested below is required to meet our obligations under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006. **We cannot process your application without this information.**

Identity documentation

Please provide a document from Part I. If you do not have a document from Part I, please provide the documents listed in Part II OR Part III

If you are a joint investor, please provide the relevant documents for BOTH investors.

- If you are applying directly with Perpetual You will need to provide a certified copy of the document(s) with your application.
- If you are lodging this application through a financial adviser You may provide a certified copy with your application OR have
 your adviser sight an original or certified copy of your document(s) and complete the 'Record of verification procedure' section in this
 form.

ionii.
PART I – Primary ID documents
Provide ONE of the following:
current Australian State/Territory driver's licence containing your photograph
Australian passport (current or a passport that has expired within the preceding 2 years is acceptable)
current card issued under a State or Territory law for the purpose of proving a person's age containing your photograph
current foreign passport or similar travel document containing your photograph and signature
OR
PART II – should only be completed if you do not own a document from Part I
Provide ONE of the following:
Australian birth certificate
Australian citizenship certificate
concession card such as a pension, health care or seniors health card issued by Services Australia (excludes Medicare cards)
AND provide ONE valid document from the following:
a document issued by the Commonwealth or a State or Territory within the preceding 12 months that records the provision of financial benefits to you and contains your name and residential address
a document issued by the Australian Taxation Office within the preceding 12 months that records a debt payable by you to the Commonwealth (or by the Commonwealth to the individual), which contains your name and residential address.
a document issued by a local government body or utilities provider within the preceding 3 months which records the provision of services to your address or to you (the document must contain your name and residential address)
OR
PART III – should only be completed if you do not own document(s) from Part I OR Part II
BOTH documents from this section must be provided
foreign driver's licence that contains a photograph of you and your date of birth
national ID card issued by a foreign government containing your photograph and your signature

Any documents written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.

11. Identification verification for individuals and joint investors (continued)

How to certify your documents

In accordance with the AML Rules, a certified copy means a document that has been certified as a true and correct copy of an original document by a person listed below, including all persons described in the Statutory Declarations Regulations 2023 (Cth).

To create a certified copy, one of the persons listed below must write the following on the copy of the document.

- 'I, [full name], [category of persons as listed below], certify that this [name of document] is a true and correct copy of the original. [signature and date]'
- An Australian bank, building society, credit union or finance company officer with a minimum of 2 years continuous service
- A fellow of the National Tax and Accountants' Association
- An Australian judge of a court, Justice of the Peace or magistrate
- An Australian legal practitioner
- · A notary public, patent or trade marks attorney
- An Australian medical practitioner including dentist, nurse, midwife, optometrist, pharmacist, physiotherapist, chiropractor, psychologist, occupational therapist or veterinary surgeon
- A permanent employee or agent of the Australian Postal Corporation with a minimum of 2 years continuous service
- An Australian federal, state or territory police officer
- An architect
- A teacher employed on a full-time basis at an Australian school or tertiary education institution

- An accountant who is a full member of the Chartered Accountants Australia and New Zealand, CPA Australia, the Institute of Public Accountants or the Association of Taxation and Management Accountants
- An Australian Consulate or Diplomatic Officer
- A registered migration agent
- An officer or authorised representative of an Australian Financial Services Licence holder with a minimum of 2 years continuous service with one or more licensees
- A financial adviser or financial planner
- A person in a country other than Australia who is authorised by local law to administer oaths or affirmations or to authenticate documents (please list the local law providing this authority when certifying the document)

IMPORTANT: Please ensure that you have either

- · enclosed certified copies of your identity documents OR
- agreed that your financial adviser will complete the 'Record of verification procedure' below.

Record of verification procedure (Financial adviser use only) This section is to be used by financial advisers when a record of verification is provided, rather than certified copies of identity documentation.				
ID document details	Document 1		Document 2	
verified from	original	certified copy	original	certified copy
document name/type				
document issuer				
issue date				
expiry date				
document number				
accredited English translation	N/A	sighted	N/A	sighted
By completing and signing this record of verification procedure I declare that:				
• an identity verification procedure has been completed in accordance with the AML/CTF rules, in the capacity of an AFSL holder or their authorised representative and				
the information provided provided.	d in relation to the resid	dency status for tax purpo	ses is reasonable consi	dering the identity documentation
AFS licensee name			AFSL number	
representative/employee name			phone number	
signature			date verification completed	