

QVG LONG SHORT FUND

APPLICATION FORM

Trustee and Investment Manager
QVG Long Short Company Pty Ltd
ABN 20 629 091 685 | CAR No. 1271154
qvgcapital.com.au

February 2020

HOW TO INVEST

To invest in the Fund you will need to complete and sign the attached Application Form.

Supply of Tax File Numbers (TFN) is discretionary. It is not an offence if you decide not to supply your TFN. If you do not supply your TFN, however, tax will be deducted from your income earned at the highest marginal tax rate (plus Medicare levy) and forwarded to the Australian Taxation Office. These deductions will appear on your statements. A form is attached for your convenience. Joint applications must be signed by all applicants. Joint investments will be deemed to be held as Joint Tenants. Applications under Power of Attorney must be accompanied by a certified copy or the original of the Power of Attorney with specimen signatures.

The minimum initial investment in the Fund is \$100,000 and additional investment is \$50,000. All investors will need to qualify as a Wholesale Investor. The Trustee may vary these minimum investment amounts on request.

Generally, the unit price will be available each business day in Sydney via the QVG website. Applications received by 2pm in Sydney will receive that day's closing unit price. Please scan and email the completed Application Form with relevant **certified** ID to:

Link Fund Solutions (formerly White Outsourcing) at LFS_registry@linkgroup.com

Cash & cheques will not be accepted. Application monies should be sent by electronic transfer to:

Account Name: QVG Long Short Fund Application Account
Bank: ANZ
BSB: 012-006
Account: 837 001 144

Please note, units will not be allocated until the application is approved by Link Fund Solutions. If the money has been transferred before the application has been approved, it will be held in a separate unit trust until the application has been approved and units are allocated.

For questions relating to fund applications please contact our administrator Link Fund Solutions on P: +61 2 9547 4311 or email Link on LFS_registry@linkgroup.com

How do you qualify as a Wholesale Investor?

If you are applying for \$500,000 or more you'll be automatically deemed Wholesale Investor and no additional documentation is required. If you are investing less than \$500,000 and you are an Australian Investor, additional documentation will be required to certify that you are a Wholesale Investor in the form of:

1. An accountant's certificate certifying that the proposed Unitholder has:
 - net assets of at least A\$2.5million, or
 - gross income for each of the last two financial years of at least \$250,000.

OR

2. A statutory declaration that the proposed Unitholder:
 - is a trustee of a superannuation fund within the meaning of the Superannuation Industry (Supervision) Act 1993 with net assets of at least A\$10 million,
 - controls at least A\$10 million (including any amount held by an associate or under a trust that the investing entity manages),
 - is a manufacturer and employs 100 or more people, or the investing entity is not a manufacturer and employs 20 or more people,
 - holds an Australian financial services licence, or
 - is a 'professional investor' as otherwise defined in the Corporations Act.

Examples of correct names and required signatures

Type of Investor	<input checked="" type="checkbox"/> Correct Name	<input checked="" type="checkbox"/> Incorrect Name	Signature Required
Individual/ joint investors <ul style="list-style-type: none"> • use full name of each applicant, do not use initials 	Alexander John Smith Laura Sue Barden	Alex Smith Laura S Barden	<ul style="list-style-type: none"> • signature of each applicant
Company <ul style="list-style-type: none"> • use full company title, do not use abbreviations 	ABC Pty Ltd XYZ Limited	ABC P/L, ABC Co, XYZ Inc.	<ul style="list-style-type: none"> • by two directors, or • by a director and a secretary, or • if there is only one director by that sole director
Trusts/minors <ul style="list-style-type: none"> • use trustee(s)/ individual(s)name(s) • use trust/minor name as designation 	Paul Ryan Smith ATF Smith Family Trust Paul Ryan Smith <Joel Smith>	Paul Smith Family Trust Joel Smith	<ul style="list-style-type: none"> • signature of each trustee/ individual • if trustee is a company see above
Superannuation fund <ul style="list-style-type: none"> • use trustee(s)personal name(s) • use fund name as designation 	Amy Rachel Wood ATF Amy Wood Super Fund ABC Pty Ltd ATF Smith Superannuation Fund	A R Wood Super Fund Smith Super Fund	<ul style="list-style-type: none"> • signature of each trustee • if trustee is a company see above
Deceased estates <ul style="list-style-type: none"> • use executor(s) personal names, do not use name of the deceased 	John Smith ATF Est of the Late Jane Smith	Estate of the Late Jane Smith	<ul style="list-style-type: none"> • signature of the executor(s)

For questions relating to fund applications please contact Link Fund Solutions on P: +61 2 9547 4311 or email Link on LFS_registry@linkgroup.com

APPLICATION FORM

QVG Long Short Fund

**This application form relates to the Information Memorandum dated February 2020 (IM) issued by QVG Capital
ABN 20 629 091 685 CAR No. 1271154.**

**Please read the IM in full before completing this Application Form.
INDIVIDUALS, COMPANIES, TRUSTS & TRUSTEE**

PART A: INVESTOR & INVESTMENT DETAILS (all investors must complete this section)

Investor Name:

Please refer to previous page for correct naming convention

Type of Investor: (Please tick applicable box)

	Account Type	Identification Requirement Groups to Complete	Sections to Complete after Part A is completed
<input type="checkbox"/>	Individual/Joint investors	Group A	Sections 3, 4, 5
<input type="checkbox"/>	Trust/Superannuation fund with individual trustee(s)	Group B or C, & D	Sections 1, 4, 5
<input type="checkbox"/>	Trust/Superannuation fund with corporate trustee	Group B or C, & D	Sections 1, 2, 4, 5
<input type="checkbox"/>	Company	Group E, F or G	Sections 2, 4, 5

AML Identity Verification Requirements

- Identification documentation provided must be in the name of the Applicant.
- Non-English language documents must be translated by an accredited translator.
- Applications made without providing this information cannot be processed until all the necessary information has been provided.
- If you are unable to provide the identification documents described please call P: +61 2 9547 4311

These documents should be provided as an original or a **CERTIFIED COPY** of the original.

GROUP A – Individuals										
Each individual investor, individual trustee, and beneficial owner must provide one of the following primary photographic ID:										
<input type="checkbox"/> A current Australian driver's licence (or foreign equivalent) that includes a photo and signature <input type="checkbox"/> An Australian or foreign passport (Australian passport can be expired within preceding 2 years) <input type="checkbox"/> An identity card issued by a State or Territory Government that includes a photo										
If you do NOT own one of the above ID documents, please provide one valid option from Column A and one valid option from Column B.										
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="padding: 2px;">Column A</th> </tr> </thead> <tbody> <tr> <td style="padding: 2px;"><input type="checkbox"/> Australian birth certificate</td> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> Australian citizenship certificate</td> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> Pension card issued by Department of Human Services (previously known as Centrelink)</td> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> Health care card issued by Department of Human Services (previously known as Centrelink)</td> </tr> </tbody> </table>	Column A	<input type="checkbox"/> Australian birth certificate	<input type="checkbox"/> Australian citizenship certificate	<input type="checkbox"/> Pension card issued by Department of Human Services (previously known as Centrelink)	<input type="checkbox"/> Health care card issued by Department of Human Services (previously known as Centrelink)	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="padding: 2px;">Column B</th> </tr> </thead> <tbody> <tr> <td style="padding: 2px;"><input type="checkbox"/> A document issued by the government within the last 12 months which contains the individual's name and residential address.</td> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> A document issued by the Australian Taxation Office within the last 12 months which contains the individual's name and residential address. Block out the TFN before scanning, copying or storing this document.</td> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> A document issued by a local government body or utilities provider within the preceding 3 months which contains the individual's name and residential address.</td> </tr> </tbody> </table>	Column B	<input type="checkbox"/> A document issued by the government within the last 12 months which contains the individual's name and residential address.	<input type="checkbox"/> A document issued by the Australian Taxation Office within the last 12 months which contains the individual's name and residential address. Block out the TFN before scanning, copying or storing this document.	<input type="checkbox"/> A document issued by a local government body or utilities provider within the preceding 3 months which contains the individual's name and residential address.
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<input type="checkbox"/> A document issued by a local government body or utilities provider within the preceding 3 months which contains the individual's name and residential address.										

GROUP B – Registered Managed Investment Scheme, Regulated Superannuation Fund (including a self- managed super fund), Government Superannuation Fund or a trust registered with the Australian Charities and Not-for-profit Commission (ACNC)
<p>Provide one of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> A copy of the company search of the relevant regulator’s website e.g. APRA, ASIC or the ATO <input type="checkbox"/> A copy or relevant extract of the legislation establishing the government superannuation fund sourced from a government website. <input type="checkbox"/> A copy from the ACNC of information registered about the trust as a charity <p>All the above must show the Trust’s full name and type (i.e. registered managed investment scheme, regulated superannuation fund (including a self- managed super fund) or government superannuation fund).</p>
GROUP C – Other Trusts (unregulated)
<p>Provide Group A verification documents for each beneficial owner of the trust who is directly or indirectly entitled to benefit from a 25% or greater interest in the trust, or who directly or indirectly controls the trust, and in relation to the Trust, the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> A certified copy or certified extract* of the Trust Deed. Extracts of Trust Deeds must include the name of the Trust, Trustees, Beneficiaries, Settlor and Settled Sum and be executed.
GROUP D – Trustees
<ul style="list-style-type: none"> <input type="checkbox"/> If you are an Individual Trustee – please provide the identification documents listed under Group A. <input type="checkbox"/> If you are a Corporate Trustee – please provide the identification documents listed under Group E, F or G. <input type="checkbox"/> If you are a combination of both – please provide the identification documents for each investor type listed under Group A and E, F or G.
GROUP E – Regulated Australian Companies
<p>Provide one of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> A copy of information regarding the company’s licence or other information held by the relevant Commonwealth, State or Territory regulatory body e.g. AFSL, RSL, ACL etc. <input type="checkbox"/> If the company is listed on an Australian securities exchange, provide details of the exchange and the ticker (issuer) code <input type="checkbox"/> If the company is a majority owned subsidiary of a company listed on an Australian securities exchange, provide details of the exchange and the ticker (issuer) code for the holding company <input type="checkbox"/> An Annual Statement from ASIC issued in the previous 12 months <input type="checkbox"/> A full company search issued in the previous 3 months <input type="checkbox"/> A certificate of Company Registration <p>All of above must clearly show the company’s full name, its type (i.e. public or proprietary) and ACN issued to the company.</p>
GROUP F – Other Australian Companies (unregulated)
<p>Provide Group A verification documents for each beneficial owner (including any shareholder who directly or indirectly owns or controls 25% or more of the issued capital, or who exerts control over the company), and in relation to the unregulated company, one of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> An Annual Statement from ASIC issued in the previous 12 months <input type="checkbox"/> A full company search issued in the previous 6 months <input type="checkbox"/> A certificate of Company Registration <p>All of above must clearly show the company’s full name, its type (i.e. public or private) and ACN issued to the company.</p>
GROUP G – Non-Australian Companies
<p>Provide Group A verification documents for each beneficial owner (including any shareholder who directly or indirectly owns or controls 25% or more the issued capital, or who exerts control over the company), and in relation to the foreign company, one of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> A certified copy of the company’s Certificate of Registration or incorporation issued by ASIC or the equivalent issued by the foreign jurisdiction’s in which the company was incorporated, established or formed. <input type="checkbox"/> A certified copy of the company’s articles of association or constitution. <input type="checkbox"/> A copy of a company search on the ASIC database or relevant foreign registration body. The company search from a foreign regulator must include the name of the regulator, the name of the company and the foreign registration number. <p>All of above must clearly show the company’s full name, its type (i.e. public or private) and the ARBN issued by ASIC, or the identification number issued to the company by the foreign regulator.</p>

PART A: (continued)

1. Contact Details

Full given name(s)

Surname

Company name / Trustee Name (if applicable)

Telephone

Facsimile

Email (required, will be used for all correspondence)

Postal Address

Street

Suburb

State

Postcode

Country

2. Investment Details

Amount:

Please note

AUD \$

unless otherwise agreed, the minimum initial investment amount is \$100,000.00 and the minimum additional investment amount is \$50,000.00.

Source of funds being invested:

retirement income employment income/savings business activities sale of assets

inheritance/gift financial investments Other

3. Payment Details

Electronic Funds Transfer (EFT) to:

Bank:

ANZ

BSB:

012-006

Account Number:

837 001 144

Account Name:

QVG Long Short Fund Application Account

Please include your Investor Name in the reference field of your EFT or send a notification email to LFS_registry@linkgroup.com to ensure that the investor account is properly credited.

4. Distributions

Distributions

Please confirm how you would like to receive any distributions – either paid into an Australian bank account or automatically reinvested as additional units in the Fund.

Reinvestment Payment into bank account (as specified on the next page)

If no election is made, any distributions will be reinvested.

5. Bank Account

IMPORTANT INFORMATION:

Distributions and withdrawal proceeds can only be paid to an Australian bank account in the name of the investor and cannot be paid by cheque or to third party accounts. By completing this section, you confirm that any distributions and withdrawal proceeds sent by Electronic Funds Transfer (EFT) to a designated bank account are sent at your risk insofar as the onus to provide bank account details rests solely on you.

If this section is not completed it may cause a delay in processing of your withdrawal proceeds. Additional security checks to verify bank account changes will be performed at the time of payment of your withdrawal proceeds.

Please pay distributions and withdrawal proceeds to the following bank account:

Beneficiary Bank	<input type="text"/>	Branch Name	<input type="text"/>
BSB	<input type="text"/>	Account Number	<input type="text"/>
Account Name	<input type="text"/>		

If you reside outside Australia and would like distributions and redemption proceeds to be paid into a bank account outside Australia please also provide the following additional details:

Beneficiary Bank Address	<input type="text"/>		
National Beneficiary Bank Clearing Code	<input type="text"/>	Beneficiary Bank SWIFT Code	<input type="text"/>
Intermediary Bank details (if applicable)	<input type="text"/>		

6. Financial Adviser (if applicable)

By completing this section you nominate the named adviser as your financial adviser for the purposes of your investment in the Fund. You also consent to give your financial adviser access to your account information.

Adviser Name:	<input type="text"/>		
Dealer Group:	<input type="text"/>		
Advisory Firm:	<input type="text"/>		
AFSL Number:	<input type="text"/>	Contact Phone:	<input type="text"/>
Contact Email:	<input type="text"/>		

7. Taxation Details

Where the investment in the fund is held jointly by 2 or more unitholders taxation details for each unitholder needs to be provided. If there are more than 2 investors provide details on a separate sheet of paper and attach it to your application form.

INVESTOR 1												
Name:												
Are you a resident of Australia for taxation purposes? (Select <input checked="" type="checkbox"/> one of the following options) <input type="checkbox"/> Yes - please complete the below <input type="checkbox"/> No – please provide country of tax residence: _____												
Tax File Number (TFN) or Australian Business Number (ABN):												
Please indicate to whom this TFN or ABN belongs (Select <input checked="" type="checkbox"/> one of the following options): <input type="checkbox"/> Company <input type="checkbox"/> Trust or Superannuation Fund <input type="checkbox"/> Individual <input type="checkbox"/> Other – please specify: _____												
Exemption Number (if applicable):												
INVESTOR 2												
Name:												
Are you a resident of Australia for taxation purposes? (Select <input checked="" type="checkbox"/> one of the following options) <input type="checkbox"/> Yes - please complete the below <input type="checkbox"/> No – please provide country of tax residence: _____												
Tax File Number (TFN) or Australian Business Number (ABN):												
Please indicate to whom this TFN or ABN belongs (Select <input checked="" type="checkbox"/> one of the following options): <input type="checkbox"/> Company <input type="checkbox"/> Trust or Superannuation Fund <input type="checkbox"/> Individual <input type="checkbox"/> Other – please specify: _____												
Exemption Number (if applicable):												

Please note: You are not obliged to provide your TFN but if you do not provide your TFN (or an ABN) and unless you claim a TFN exemption, the Responsible Entity will be required to deduct tax at the highest marginal tax rate (plus Medicare levy). By inserting the TFN (or ABN) and signing this Application Form, you declare that this investment is made in the course or furtherance of your enterprise. Collection of TFN information is authorised and its use and disclosure are strictly regulated by the tax laws and the Privacy Act 1988 (Cth).

PART B: INVESTOR IDENTIFICATION

SECTION 1 - INVESTOR TYPE : ALL TRUSTS (INCLUDING SUPERANNUATION FUNDS)

1.1 General Information

Full name of trust

Country where trust established

1.2 Trustee Details

How many trustees are there?

Type of Trustee (please select):

Corporate Trustee:

Full name of Company (please then complete section 2)

Individual Trustee(s):

Please fill out details of individual trustee(s) below (Individual's name must match provided ID exactly):

Individual Trustee 1

Full given name(s)

Surname

Date of Birth (dd/mm/yyyy)

 / /

Residential address (PO Box is NOT acceptable)

Street

Suburb

State

Postcode

Country

Individual Trustee 2

Full given name(s)

Surname

Date of Birth (dd/mm/yyyy)

 / /

Residential address (PO Box is NOT acceptable)

Street

Suburb

State

Postcode

Country

If there are more trustees, provide details on a separate sheet of paper and attached it to your application form.

1.3 Type of Trust (select only one of the following trust types and provide the information requested)

Registered managed investment scheme

Provide Australian Registered Scheme Number (ARSN)

Regulated trust (e.g. a Self-Managed Superfund)

Provide name of the regulator (e.g. ASIC, APRA, ATO)

Provide the trust's ABN or registration / licensing details

Government superannuation fund

Provide name of the legislation establishing the fund

Other trust type

Trust description (e.g. unregistered, fixed, family, unit)

Full name of settlor(s) ¹

¹ Provide name of settlor of the trust where the initial asset contribution to the trust was greater than \$10,000 (unless settlor is now deceased). Group A verification will also be required.

1.4 Beneficiary Details (only complete if "Other trust type" is selected in section 1.3 above)

Do NOT complete if the trust is a registered managed investment scheme, regulated trust (SMSF) or government superannuation fund.

Does the Trust Deed name beneficiaries?

Yes, how many?

provide full name of each beneficiary below:

	Full given name(s)	Surname
1	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>

If there are more beneficiaries, provide details on a separate sheet of paper and attached it to your application form.

No, describe the class of beneficiary (e.g. unitholders, family members of named person, charitable purpose)

Provide details of the membership class(-es)

1.5 Beneficial Ownership Details (only complete if "Other trust type" is selected in section 1.3 above)

Do NOT complete if the trust is a registered managed investment scheme, regulated trust (SMSF) or government superannuation fund.

Please provide the names and details of any beneficial owner of the trust. A beneficial owner of a trust is any individual who has a 25% or more interest in the trust or who directly or indirectly controls* the trust.

** includes control by acting as trustee; or by means of trusts, agreements, arrangements, understandings and practices; or exercising control through the capacity to direct the trustees; or the ability to appoint or remove the trustees.*

Beneficial Owner 1

Full given name(s)	Surname	Date of Birth (dd/mm/yyyy)
<input type="text"/>	<input type="text"/>	<input type="text" value="/ /"/>

Residential address (PO Box is NOT acceptable)

Street	<input type="text"/>						
Suburb	<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>	Country	<input type="text"/>
Role (such as trustee or appointor)	<input type="text"/>						

Beneficial Owner 2

Full given name(s)	Surname	Date of Birth (dd/mm/yyyy)
<input type="text"/>	<input type="text"/>	<input type="text" value="/ /"/>

Residential address (PO Box is NOT acceptable)

Street	<input type="text"/>						
Suburb	<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>	Country	<input type="text"/>
Role (such as trustee or appointor)	<input type="text"/>						

If there are more beneficial owners, provide details on a separate sheet of paper and attach it to your application form.

SECTION 2 - INVESTOR TYPE: AUSTRALIAN & FOREIGN COMPANY

Please note, if you are an Australian Company acting as trustee of a fund, please also complete Section 1.

2.1 General Information

Full name
as registered by ASIC or foreign registration body

Registration number
(select the following categories which apply to the company and provide the information requested)

ACN ARBN

Foreign body registration number

Please also provide name of the foreign registration body below:

Country of formation / incorporation / registration

Registered office address (PO Box is NOT acceptable)

Street

Suburb State Postcode Country

Principal place of business (if any) (PO Box is NOT acceptable)

Street

Suburb State Postcode Country

2.2 Regulatory and listing details (select the following categories which apply to the company and provide the information requested)

Regulated company (subject to the supervision of a Commonwealth, State or Territory statutory regulator beyond that provided by ASIC as company registration body. Examples include Australian Financial Services Licensees (AFSL); Australian Credit Licensees (ACL); or Registrable Superannuation Entity (RSE) Licensees)

Regulator name

Licence Details (e.g. AFSL, ACL, RSE)

Australian listed company or Foreign listed company as defined in the IFSA/FPA Guidelines

Name of market / exchange

Majority-owned subsidiary of an Australian listed company

Australian listed company name

Name of market or exchange

Foreign company

Country of formation / incorporation / registration

2.3 Company Type (select only ONE of the following categories)

- Australian Listed Public Company** Section 2 now completed
- Australian Proprietary/Private Company or Non- Listed Public Company** Go to Section 2.4 and 2.5 below.
- Foreign Company** Go to Section 2.4 and 2.5 below

2.4 Directors (only needs to be completed for proprietary/private, non-listed public company and foreign companies)

How many directors are there? provide full name of each director

	Full given name(s)	Surname
1	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>
2	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>
3	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>
4	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>

If there are more directors, provide details on a separate sheet of paper and attached it to your application form.

2.5 Beneficial Ownership Details (only needs to be completed for proprietary/private, non-listed public company and foreign companies that are not regulated companies as selected in Section 2.2)

Provide details of **ALL individuals** who owns directly, jointly or beneficially at least 25% of the company's issued share capital (through direct or indirect shareholdings).

Shareholder/Beneficial Owner 1

Full given name(s)	Surname	Date of Birth (dd/mm/yyyy)
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px; text-align: center;" type="text" value="/ /"/>

Residential address (PO Box is NOT acceptable)

Street	<input style="width: 95%; height: 25px;" type="text"/>						
Suburb	<input style="width: 25%; height: 25px;" type="text"/>	State	<input style="width: 25%; height: 25px;" type="text"/>	Postcode	<input style="width: 25%; height: 25px;" type="text"/>	Country	<input style="width: 25%; height: 25px;" type="text"/>

Shareholder/Beneficial Owner 2

Full given name(s)	Surname	Date of Birth (dd/mm/yyyy)
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px; text-align: center;" type="text" value="/ /"/>

Residential address (PO Box is NOT acceptable)

Street	<input style="width: 95%; height: 25px;" type="text"/>						
Suburb	<input style="width: 25%; height: 25px;" type="text"/>	State	<input style="width: 25%; height: 25px;" type="text"/>	Postcode	<input style="width: 25%; height: 25px;" type="text"/>	Country	<input style="width: 25%; height: 25px;" type="text"/>

If there are more shareholder/beneficial owners, provide details on a separate sheet of paper and attach it to your application form.

SECTION 3 - INVESTOR TYPE: INDIVIDUAL OR JOINT INDIVIDUALS

INVESTOR 1

Investor's name must match investor's ID exactly.

Full given name(s) <input type="text"/>	Surname <input type="text"/>	Date of Birth (dd/mm/yyyy) <input type="text" value="/ /"/>
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Residential address *(PO Box is NOT acceptable)*

Street	<input type="text"/>						
Suburb	<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>	Country	<input type="text"/>

COMPLETE THIS PART IF INDIVIDUAL IS A SOLE TRADER

Full business name <input type="text"/>	ABN (if any) <input type="text"/>
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Principal Place of Business (if any) *(PO Box is NOT acceptable)*

Street	<input type="text"/>						
Suburb	<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>	Country	<input type="text"/>

INVESTOR 2

Investor's name must match investor's ID exactly.

Full given name(s) <input type="text"/>	Surname <input type="text"/>	Date of Birth (dd/mm/yyyy) <input type="text" value="/ /"/>
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Residential address *(PO Box is NOT acceptable)*

Street	<input type="text"/>						
Suburb	<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>	Country	<input type="text"/>

COMPLETE THIS PART IF INDIVIDUAL IS A SOLE TRADER

Full business name <input type="text"/>	ABN (if any) <input type="text"/>
---	---

Principal Place of Business (if any) *(PO Box is NOT acceptable)*

Street	<input type="text"/>						
Suburb	<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>	Country	<input type="text"/>

If there are more than 2 joint individual investors, provide details on a separate sheet of paper and attach it to your application form.

SECTION 4: FATCA & CRS – Self-certification Declaration

*This certification must be completed **by all investors** to declare their FATCA & CRS status. Please refer to section 8 for explanations of terms before completing this form. Neither the Trustee of the Fund or Link Fund Solutions is able to provide you with tax or professional advice in respect of FATCA & CRS and we strongly encourage you to seek the advice of an experienced tax professional in relation to completing this form.*

What are FATCA & CRS?

The U.S. Foreign Account Tax Compliance Act (FATCA) and the Common Reporting Standard (CRS) are two ways in which a large number of governments are seeking the same thing – to improve global tax compliance. Both require financial institutions to capture relevant information on foreign tax payers, as follows:

- FATCA promotes cross border tax compliance by U.S. taxpayers, by implementing an international standard for the automatic exchange of information related to those taxpayers. Australia has entered into an inter-governmental agreement (IGA) with the U.S. to implement FATCA in Australia, to be administered through the ATO. The AUS-USA FATCA IGA requires the ATO to obtain detailed account information for U.S. citizens and/or taxpayers on an annual basis. The effect of this is that, to satisfy their FATCA obligations, relevant Australian financial institutions must identify any U.S. taxpayers and report those taxpayers’ financial account data to the ATO.
- CRS is a global reporting standard, developed by the OECD, for the automatic exchange of information (AEOI). Its goal is to allow tax authorities to obtain a clearer understanding of financial assets held abroad by their residents, for tax purposes. Over 88 countries (**refer to OECD link in section IV for participating jurisdictions**) have agreed to share information on residents’ assets and incomes in accordance with defined reporting standards. Once again, this means that financial institutions around the globe must provide tax authorities with taxpayer financial account data, and the financial institutions must therefore collect this information from their customers and pass it on.

I. Individual & Joint Investors

Please provide details for each individual. If there are more than 2 individuals please provide their details on a separate page.

FATCA

1. Are you a U.S. citizen or U.S. resident for tax purposes? **TIP: SMSF’s complete section II. Superannuation Funds on p.16**

Yes ► *Provide your Name & U.S. Taxpayer Identification Number (TIN) below and continue to question 2:*

Individual 1

Full Name

TIN

Individual 2

Full Name

TIN

No ► *Continue to question 2*

CRS

2. Are you a tax resident of any other country outside of Australia?

Yes ► *Provide details below and skip to section 5. If resident in more than one jurisdiction please include details for all jurisdictions below (if more than 2 jurisdictions please provide them on a separate piece of paper)*

Individual 1

	Country of Tax Residence	Tax Identification Number (TIN) or equivalent	Reason Code if no TIN provided
1.			
2.			

Individual 2

	Country of Tax Residence	Tax Identification Number (TIN) or equivalent	Reason Code if no TIN provided
1.			
2.			

If TIN or equivalent is not provided, please provide reason from the following options:

- Reason A:** The country/jurisdiction where the entity is resident does not issue TINs to its residents
- Reason B:** The entity is otherwise unable to obtain a TIN or equivalent number (Please explain why the entity is unable to obtain a TIN in the below table if you have selected this reason)
- Reason C:** No TIN is required. (Note: Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction)

If **Reason B** has been selected above, explain why you are unable to obtain a TIN:

No ▶ [Skip to section 5](#)

II. Superannuation Funds

Full legal name of the Superannuation Fund

3. Are you an Australian Retirement Fund? (refer to FATCA definitions in section 8)

- Yes** ▶ [Skip to section 5](#) **TIP: SMSF's proceed to sign on page 21 do not go to Q.5 on page 17**
- No** ▶ [Continue to section III](#)

III. Entities (Company, Trust, Partnership, Association etc.)

Full legal name of the Entity

FATCA

4. Select only ONE of the following three FATCA categories that best describes the entity and provide the information requested.

- U.S. person as defined under FATCA and U.S. Internal Revenue Code.**
This includes but is not limited to company, trust or partnership that is established under the laws of a U.S. and is considered a U.S. resident for tax purposes.

(a) U.S. federal tax classification ▶ [Please confirm entity's U.S. federal tax classification below](#)

- Single-member LLC
 C Corporation
 S Corporation
 Partnership
 Trust/estate
 Limited liability company - C corporation
 Limited liability company - S corporation
 Limited liability company – Partnership
 Other ▶ [Please provide detail:](#) _____

(b) Are you exempt from FATCA reporting?

Yes ▶ [Please provide your FATCA exemption code](#)

FATCA exemption code

U.S. Tin

No ▶ [Please provide your U.S. Taxpayer Identification Number \(TIN\)](#)

Financial institution (FFI) ▶ [Select one of the options from \(a\) to \(e\) to confirm which type of FFI are you](#)

(a) Reporting IGA FFI or Participating FFI

▶ [Provide entity's GIIN and continue to question 5](#)

GIIN

(b) Sponsored FFI or Trustee Documented Trust

▶ [Please complete details of the Sponsoring entity or Trustee below and continue to question 5](#)

Name of Sponsoring entity or Trustee

GIIN of Sponsoring entity or Trustee

(c) FFI that does not need to register (e.g. Non-Reporting IGA FFI) ▶ [Please complete details below and continue to question 5](#)

FATCA status

GIIN (if applicable)

(d) Non-participating FFI ▶ [Note that information about you will be reported to ATO and IRS. Continue to question 5](#)

(e) Exempt Beneficial Owner ▶ [Continue to question 5](#)

Non-Financial Foreign Entity (NFFE) ▶ *Select one of the options from (a) to (c) to confirm which type of NFFE are you*

- (a) **Active NFFE** ▶ *Continue to question 5*
- (b) **Passive NFFE with no controlling U.S. persons** ▶ *Continue to question 5*
- (c) **Passive NFFE with controlling persons (refer to FATCA definitions in section 8) who are U.S. citizens or U.S. residents for tax purposes** ▶ *Provide details of each of the controlling U.S. persons below (if there are more than 2 controlling U.S. persons please provide their details on a separate page and attach to this form) and continue to question 5:*

U.S. Person 1

- Controlling Person Beneficiary Trustee Owner
 Director Other – please specify _____

Full Name

Residential address (PO box is not acceptable)

U.S. Taxpayer Identification Number (TIN)

U.S. Person 2

- Controlling Person Beneficiary Trustee Owner
 Director Other – please specify _____

Full Name

Residential address (PO box is not acceptable)

U.S. Taxpayer Identification Number (TIN)

CRS

5. Are you a tax resident of any other country outside of Australia?

- Yes** ▶ *Provide details below and continue to question 6. If resident in more than one jurisdiction please include details for all jurisdictions below (if more than 2 jurisdictions please provide them on a separate piece of paper)*

	Country of Tax Residence	Tax Identification Number (TIN) or equivalent	Reason Code if no TIN provided
1.			
2.			

If TIN or equivalent is not provided, please provide reason from the following options:

- Reason A:** The country/jurisdiction where the entity is resident does not issue TINs to its residents
- Reason B:** The entity is otherwise unable to obtain a TIN or equivalent number (Please explain why the entity is unable to obtain a TIN in the below table if you have selected this reason)
- Reason C:** No TIN is required. (Note: Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction)

If **Reason B** has been selected above, explain why you are unable to obtain a TIN:

- No** ▶ *Continue to question 6*

6. Are you a Financial Institution for the purposes of CRS?

- Yes** ▶ *Continue to question 7*
 No ▶ *Skip to question 8*

7. Are you an Investment Entity (Financial Institution) located in a Non-Participating Jurisdiction for CRS purposes and managed by another Financial Institution?

- Yes** ▶ *Continue to question 9*
 No ▶ *Skip to section 5*

8. Are you an Active Non-Financial Entity (Active NFE)?

- Yes** ▶ *Specify the type of Active NFE below and then skip to section 5*
- Less than 50% of the Active NFE's gross income from the preceding calendar year is passive income and less than 50% of its assets during the preceding calendar year are assets held for the production of passive income
 - Corporation that is regularly traded or a related entity of a regularly traded corporation
 - Governmental Entity, International Organisation or Central Bank

No ► *You are a Passive Non-Financial Entity (Passive NFE). Continue to question 9*

9. Controlling Persons – Does one or more of the following apply to you:

- Is any natural person that exercises control over you (for corporations, this would include directors or beneficial owners who ultimately own 25% or more of the share capital) a tax resident of any country outside of Australia?
- If you are a trust, is any natural person including trustee, protector, beneficiary, settlor or any other natural person exercising ultimate effective control over the trust a tax resident of any country outside of Australia?

Yes ► *Complete details below for these persons and continue to section 5*

	Name	Date of Birth	Residential Address	Country of Tax Residence	Tax Identification Number (TIN) or equivalent	Reason Code if no TIN provided
1.						
2.						

If there are more than 2 controlling persons, please list them on a separate piece of paper

If TIN or equivalent is not provided, please provide reason from the following options:

- **Reason A:** The country/jurisdiction where the entity is resident does not issue TINs to its residents
- **Reason B:** The entity is otherwise unable to obtain a TIN or equivalent number (Please explain why the entity is unable to obtain a TIN in the below table if you have selected this reason)
- **Reason C:** No TIN is required. (Note: Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction)

If **Reason B** has been selected above, explain why you are unable to obtain a TIN:

No ► *Almost there! Continue to sign on page 21*

IV. Explanations

Common terms

Financial institution (also referred to as *Foreign financial institution* or “**FFI**” under FATCA) - an entity created or organised outside of the U.S. and includes:

- Depository institution** – entity that accepts deposits in the ordinary course of banking or similar business (banks, credit unions), or
- Custodial institution** – entity that holds financial assets for the account of others as a substantial portion of its business (brokers, custodians), or
- Investments entity** – means any entity that conducts as a business (or is managed by an entity that conducts as a business) one or more of the following activities or operations for or on behalf of a customer:
 - trading in money market instruments (cheques, bills, certificates of deposit, derivatives, etc.); foreign exchange; exchange; interest rate and index instruments; transferable securities; or commodity futures trading;
 - individual and collective portfolio management; or
 - otherwise investing, administering, or managing funds or money on behalf of other persons.

Non-Financial Foreign Entity (“NFFE”) - any non-U.S. entity that is not a financial institution. NFFE can be either *Active NFFE* or *Passive NFFE* (refer below for more details).

U.S. citizen or U.S. resident for tax purposes – includes:

- anyone born in the U.S. (who hasn’t renounced their citizenship)
- anyone living in the U.S.
- a green card holder
- U.S. passport holder
- U.S. companies, trusts or partnerships

Controlling Persons - means the natural persons who exercise control over an Entity. In the case of a trust, such term means the settlor, the trustees, the protector (if any), the beneficiaries or class of beneficiaries, and any other natural person exercising ultimate effective control over the trust, and in the case of a legal arrangement other than a trust, such term means persons in equivalent or similar positions. The term “Controlling Persons” shall be interpreted in a manner consistent with the Financial Action Task Force Recommendations.

GIIN - Global Intermediary Identification Number is an IRS registration number for financial institutions.

TIN – is U.S. Taxpayer Identification Number and may include Social Security Number (SSN) or Employer Identification Number (EIN).

IGA - Agreement between the Government of Australia and the Government of the United States of America to Improve International Tax Compliance and to Implement FATCA.

Australian Retirement Fund

- Any plan, scheme, fund, trust, or other arrangement operated principally to administer or provide pension, retirement, superannuation, or death benefits that is a superannuation entity or public sector superannuation scheme (including an exempt public sector superannuation scheme) as defined in the *Superannuation Industry (Supervision) Act 1993*, or a constitutionally protected fund as defined in the *Income Tax Assessment Act 1997*.
- A pooled superannuation trust as defined in the *Income Tax Assessment Act 1997*.
- Any Entity that is wholly owned by, and conducts investment activities, accepts deposits from, or holds financial assets exclusively for or on behalf of, one or more plans, schemes, funds, trusts, or other arrangements referred to in subparagraphs (1) or (2) of this paragraph.

FATCA status

FATCA status refers to entity classification under FATCA and may include:

- Active NFFE** - any NFFE that meets following criteria:
 - NFFE where less than 50% of income is passive income (i.e. dividends, interest, annuities etc.) and less than 50% of its assets produce passive income; or
 - Entity’s stock is regularly traded on established securities market (e.g. entity listed on ASX) or affiliated group of such entity; or
 - Entity organised in U.S. Territory and owned by its residents; or
 - Foreign government; or
 - International organisation; or
 - Foreign Central Bank of Issue; or
 - Any other specifically identified class of entities, including those posing a low risk of tax evasion, as determined by the IRS (e.g. start-up entities, entities in liquidation, not-for profit entities etc.)
 - Passive NFFE with controlling U.S. persons** - any NFFE that is not an Active NFFE or is not a withholding foreign partnership or trust and has controlling U.S. persons.
 - Passive NFFE with no controlling U.S. persons** - any NFFE that is not an Active NFFE or is not a withholding foreign partnership or trust and where none of the entity’s controlling persons are U.S. persons.
 - Participating FFI** – an FFI that enters into an agreement with the IRS to undertake certain due diligence, withholding and reporting requirements for U.S. account holders in accordance with FATCA and is generally able to provide GIIN.
 - Exempt Beneficial Owner** - this is non-reporting entity under FATCA and may include:
 - the Australian Government, State and local governments and local authorities and their wholly owned agencies or instrumentalities, including certain named entities;
 - International, intergovernmental and supranational organisations;
 - Reserve Bank of Australia and its subsidiaries;
 - Complying Australian superannuation funds (including self-managed super funds);
 - Investment entity wholly owned by *exempt beneficial owners*;
 - Non-Reporting IGA FFI** – this is non-reporting entity (certified or registered deemed-compliant FFI) under FATCA and may include:
 - Financial institution with Australian client base (must satisfy all condition listed in paragraph III. A of Annex II of the IGA, including at least 98% of the U.S. dollar value of all account balances must be held by Australian residents);
 - Small local banks that meet criteria listed in the IGA;
 - Financial Institution that is not an Investment Entity with only Low-Value Accounts (i.e. with value of U.S.\$ 50,000 or less) and with total assets of no more than U.S.\$50 million;
 - Qualified credit card issuer (with customer deposits of U.S.\$50,000 or less);
 - Trustee-Documented Trust – A trust established under the laws of Australia to the extent that the trustee of the trust is a Reporting U.S. Financial Institution, Reporting Model 1 FFI, or Participating FFI and reports all information required to be reported pursuant to the Agreement with respect to all U.S. Reportable Accounts of the trust;
 - Sponsored investment entity - an investment entity established in Australia that has a Sponsoring entity;
 - Certain Investment Manager and Investment Advisors;
 - Certain Collective Investment Vehicles that meet criteria listed in the IGA.
 - Non-Participating FFI** - an entity that does not comply with FATCA and generally will not fall into any of the below categories:
 - Participating FFI; or
 - Reporting FFI; or
2. Exempt Beneficial Owner

Further information about FATCA & CRS can found at:

<http://www.irs.gov/fatca>

<http://treasury.gov.au/Policy-Topics/Taxation/Tax-Treaties/HTML/Intergovernmental-Agreement>

<http://www.aph.gov.au/About-Parliament/Parliamentary-Departments/Parliamentary-Library/pubs/rp/rp1314/QG/FATCA>

<http://www.oecd.org/tax/automatic-exchange/international-framework-for-the-crs/>

<http://www.oecd.org/tax/automatic-exchange/international-framework-for-the-crs/MCAA-Signatories.pdf>

SECTION 5: DECLARATION AND SIGNATURE

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

- I have received and read the IM to which this Application Form applies and have received and accepted the offer to invest in Australia or otherwise in a jurisdiction in which it is lawful for me to receive and accept the offer to invest.
- I am at least 18 years of age.
- I declare that I am a wholesale investor as defined in sections 761G or 761GA of the Corporations Act
- If I have received the IM from the internet or other electronic means that I received it personally or a print out of it, accompanied by this Application Form.
- All details provided by me in this Application Form are true and correct.
- I agree to be bound by the terms and conditions of the current IM and of the trust deed of the Fund, as amended, reissued or replaced from time to time.
- That the trustee is authorised to apply the TFN or ABN provided above to all future applications for units, including reinvestments, unless I notify the trustee otherwise.
- No one guarantees the repayment of capital invested in, the Fund, the performance of nor any particular return from the Fund and I understand the risks involved in investing in the Fund.
- I acknowledge that the Fund is not currently registered with the Australian Securities and Investments Commission, but may be at some future point in time. By investing in the Fund, I consent to the Fund being registered at some future point should the trustee consider it appropriate. I also consent to registration taking place without the trustee holding a meeting of investors to approve the application for registration.
- QVG Capital Pty Ltd (ABN 69 619 271 886, AFSL No. 507070) ("QVG Capital") has been appointed as agent of the trustee for the purposes of arranging for the offer to issue, vary or dispose of units in the Fund in Australia pursuant to section 911A(2)(b) of the Corporations Act. The trustee may only issue, vary or dispose of such interests in Australia in accordance with QVG Capital's offers, provided they are accepted. I acknowledge that apart from being named as the arranger of the issue of units in the Fund, QVG Capital takes no responsibility for the contents of the IM. I acknowledge that, to the maximum extent permitted by law, QVG Capital expressly disclaims and takes no responsibility for any part of the IM other than the references to its name. QVG Capital does not guarantee the performance of the Fund, the repayment of capital invested nor any particular rate of capital or income return.
- I acknowledge that units may be redeemed or monies deducted from my withdrawal proceeds without me asking in order to pay any fees owing to any person and I authorise the trustee to redeem such number of units or deduct such monies as is necessary to meet any fees I owe any person. I acknowledge this may have tax consequences for my/our investment in the Fund.
- I acknowledge that the trustee may be required to pass on information about me or my investment to the relevant regulatory authority in compliance with the AML Act and relevant taxation legislation. I will provide such information and assistance that may be requested by the trustee to comply with its obligations under the AML Act and relevant taxation legislation and I indemnify it against any loss caused by my failure to provide such information or assistance.
- The monies used to fund my investment in the Fund are not derived from or related to any money laundering, terrorism financing or other illegal activities, whether prohibited under Australian law, international law or convention ('illegal activity') and the proceeds of my investment in the Fund will not be used to finance any illegal activities.
- I am not a 'politically exposed' person or organisation for the purpose of any AML law.
- I consent to details about my application and holdings being disclosed in accordance with the Privacy section of the IM.
- I acknowledge that any personal information I provide Link Fund Solutions ("LFS") will be collected and handled in accordance with the LFS privacy policy, a copy of which can be found at www.linkfundsolutions.com or posted / emailed to me if I contact LFS on +612 9547 4311 or LFS_registry@linkgroup.com. By submitting this form or any other paperwork relating to my investment I consent to my/our personal information being collected and handled by the unit registry in accordance with that policy.
- I confirm that the trustee and Administrator are authorised to accept and act upon any instructions in respect of this application and the units to which it relates given by me by facsimile and/or email. If instructions are given by facsimile and/or email, the onus is on me to ensure that such instructions are received in legible form and I undertake to confirm them in writing. I indemnify the trustee and Administrator against any loss arising as a result of any of them acting on facsimile or emailed instructions. The trustee and Administrator may rely conclusively upon and shall incur no liability in respect of any action taken upon any notice, consent, request, instruction or other instrument believed, in good faith, to be genuine or to be signed by properly authorised persons.
- I acknowledge that the trustee reserves the right to reject any application.

Account operating instructions (if no selection is made, all individuals to sign will be assumed)

- Any individual to sign
 Any two individuals to sign
 All individuals to sign
 Other (please specify– e.g. *per attached Power of Attorney*): _____

1	Signature	Name and title (block letters please)	Date
2	Signature	Name and title (block letters please)	Date
3	Signature	Name and title (block letters please)	Date
4	Signature	Name and title (block letters please)	Date

9. Supporting Documents

Please provide the following documents with your form:

- **Original signed application form**
- **Certified ID's for each individual investor listed**

10. Complete Form

Please return the complete form to:

- **Scan and email** this form to LFS_registry@linkgroup.com

11. Payment Details

- Electronic Funds Transfer (EFT) to:
- | | |
|------------------------|---|
| Bank: | ANZ |
| BSB: | 012-006 |
| Account Number: | 837 001 144 |
| Account Name: | QVG Long Short Fund Application Account |

Please include your Investor Name in the reference field of your EFT or send a notification email to LFS_registry@linkgroup.com to ensure that the investor account is properly credited.

Please note, units will not be allocated until the application is approved by Link Fund Solutions. If the money has been transferred before the application has been approved, it will be held in a separate unit trust until the application has been approved and units are allocated.

FOR FURTHER ASSISTANCE

1. Contact **Link** on +61 2 9547 4311, or
2. Contact **QVG Capital** on +61 2 8039 9060

CERTIFIED COPY OF AN ORIGINAL DOCUMENT

Certified copy means a document that has been certified as a true copy of an original document.

Certified extract means an extract that has been certified as a true copy of some of the information contained in a complete original document by one of the persons described in the sub-paragraphs below.

People who can certify documents or extracts are:

- a **lawyer** - a person who is enrolled on the roll of the Supreme Court of a State or Territory, or High Court of Australia, as a legal practitioner (however described);
- a **judge** of a court;
- a **magistrate**;
- a **chief executive officer** of a Commonwealth court;
- a **registrar** or **deputy registrar** of a court;
- a **Justice of Peace**;
- a **notary public** (for the purposes of the Statutory Declaration Regulations 1993);
- a **police officer**;
- a **postal agent** - an agent of the Australian Postal Corporation who oversees an office supplying postal services to the public;
- the **post office** - a **permanent employee** of The Australian Postal Corporation with 2 or more years of continuous service who is employed in an office supplying postal services to the public;
- an **Australian consular officer** or an **Australian diplomatic officer** (within the meaning of the Consular Fees Act 1955);
- an **officer** with 2 or more continuous years of service with one or more **financial institutions** (for the purposes of the Statutory Declaration Regulations 1993);
- a **finance company officer** with 2 or more continuous years of service with one or more financial companies (for the purposes of the Statutory Declaration Regulations 1993);
- an **officer** with, or **authorised representative** of, a **holder of an Australian financial services licence**, having 2 or more continuous years of service with one or more licensees; and
- an **accountant** - a member of the institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with 2 or more years of continuous membership.
- person authorised as a notary public in a foreign country

The eligible certifier must include the following information:

- Their full name
- Address
- Telephone number
- The date of certifying
- Capacity in which they are eligible to certify, and
- An official stamp/seal if applicable

The certified copy must include the statement, ***"I certify this is a true copy of the original document"***.

For photographic documents, the certified copy must include the statement, ***"I certify this is a true copy of the original document and the photograph is a true likeness"***.

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

WHOLESALE OR PROFESSIONAL INVESTOR CERTIFICATE

If you are investing less than \$500,000 you will need to complete this form or submit an equivalent qualified accountants certificate to satisfy the Trustee that you are a wholesale client

OPTION A: Wholesale Investor

This certificate is issued for the purposes of Section 708(8) and Section 761G of the Corporations Act 2001.

I hereby certify that the following person (or persons) has:

Please show the name of each person this applies to
(print full legal name of the person – individual or company)

- 1) _____
- 2) _____

- Net assets of at least AUD \$2.5 million; or
- A gross income for each of the last 2 financial years of at least AUD\$250,000 a year

Controlled Companies or Trusts

It is confirmed that for the purposes of the Corporation Act, that the above-named person (or persons) controls the following companies or trusts:

Please list the name of the entities
(include details of trusts for which the entity acts as a trustee)

I confirm that I am a qualified accountant as defined in section 88B of the Corporations Act.

I belong to (name of the professional body) _____

My membership NUMBER from this professional body is _____

I comply with this body's continuing professional education requirements.

Signature	Name and title (block letters please)	Date

* **"Qualified accountant"** means a member of a professional body that is approved by ASIC in writing for the purpose of the definition. ASIC has indicated that it will approve any member of:

- (a) The Australian Society of Certified Practising Accountants ("**ASPCA**"), who is entitled to use the post-nominals "CPA" or "FCPA", and is subject to and complies with the ICAA's continuing professional development requirements;
- (b) The Institute of Chartered Accountants in Australia ("**the ICAA**"), who is entitled to use the post-nominals of "CA", "ACA" or "FCA", and is subject to and complies with the ICAA's continuing professional education requirements; or
- (c) The National Institute of Accountants ("**the NIA**"), who is entitled to use the post-nominals "MNIA" or "FNIA", and it subject to and complies with NIA's continuing professional education requirements.

** In calculating the net assets of \$2,500,000 or gross income of \$250,000, the Unit holder may include the net assets or gross income (as relevant) of any company or trust the Unit holder controls [see Corporations Regulation 7.6.02AC].

*** Where the Unit holder is a company or trust controlled by someone who has a certificate from a qualified accountant, the Unit holder may be considered wholesale [see Corporations Regulation 7.6.02AB].

OPTION B: Professional Investor

Investor Name

I certify that I am (tick whichever box is applicable):

- A person who controls at least \$10 million (including any amount held by an associate or under a trust that the person manages) for the purpose of investment in securities; or
- A person who is a licensed or exempt dealer and is acting as principal. **License No.:** _____; or
- A regulated superannuation fund (APRA regulated), an approved deposit fund, a pooled superannuation trust, or a public sector superannuation scheme within the meaning of the Superannuation Industry (Supervision) Act 1993 if the fund, trust or scheme has net assets of at least \$10 million; or
- A person who is regulated by APRA (other than a trustee of a superannuation fund, an approved deposit fund, a pooled superannuation trust or a public sector superannuation scheme); or
- A person who is a body registered under the Financial Corporations Act 1974; or
- A listed entity or a related body corporate of a listed entity; or
- An exempt public authority; or
- A person who is a body corporate or an unincorporated body that carries on a business of investment in financial products, interests in land or other investments, and for those purposes invests funds received following an offer or invitation to the public where the terms of the offer provided for the funds subscribed to be invested for those purposes; or
- A foreign entity that, if established or incorporated in Australia, would be covered by one of the preceding paragraphs.

Details of the Managed Fund or Superannuation Fund/Trust/Scheme (block letters please)

Name

Address

Street

Suburb

State

Postcode

Country

Telephone

Facsimile

Email

I declare that I have read and understood this form, and that the information set out is true and correct.

Signature

Name of investor (block letters please)

Date

ADDITIONAL APPLICATION FORM

QVG Long Short Fund

This form should be used by existing unit holders provided your details have not changed.

Investor Number

Investor Name

AMOUNT OF ADDITIONAL INVESTMENT

Please indicate how much you wish to invest

\$AUD

Please note the minimum initial investment amount is \$100,000.00 and the minimum additional investment amount is \$50,000.00. Please make payment net of all bank changes. Only net amount received will be invested in the Fund.

PAYMENT DETAILS

Electronic Funds Transfer (EFT) to:

Bank: ANZ
BSB: 012-006
Account Number: 837 001 144
Account Name: QVG Long Short Fund Application Account

Please include your Investor Name in the reference field of your EFT or send a notification email to LFS_registry@linkgroup.com to ensure that the investor account is properly credited.

CONTACT DETAILS

Contact Name

Contact Number

DECLARATION AND AUTHORISATION

Please make sure you have completed the section above.

- In signing, I/we authorise that these instructions be made on my/our behalf and acknowledge that this form is provided on the basis that the Trustee will affect it according to the terms and conditions of the current IM.

Signature

Name and title of Signatory (block letters please)

Date

Signature

Name and title of Signatory (block letters please)

Date

Please note, units will not be allocated until the application is approved by Link Fund Solutions. If the money has been transferred before the application has been approved, it will be held in a separate unit trust until the application has been approved and units are allocated.

Please note it is up to the investor to ensure Link Fund Solutions have been notified of authorised signatories on this account. Where we cannot match the signature to the initial application form or signatory list provided there maybe delays in processing of this request.

COMPLETED FORM

- scan and email this request to LFS_registry@linkgroup.com, or
- post to Link Fund Solutions Pty Ltd, **Attention:** QVG Long Short Fund, Unitholder Services, PO BOX 5482, SYDNEY, NSW, 2001

