

Application Form

Important Information

This Application Form accompanies the Information Memorandum of Pinnacle Diversified Property Fund (**Fund**) dated 8 December 2022 (**IM**) and the relevant Supplementary Information Memorandum of the specific Class of the Fund you wish to invest in (**SIM**). The IM and SIM contain information about investing in the Fund. If you give another person access to this Application Form, you must also give them access to the IM and SIM or if applicable, the replacement IM and SIM.

The trustee of the Fund is Trident Capital Group Pty Ltd ACN 649 965 908 AFSL no. 531934 (**Trustee or Trident Capital Group**). The Investment Manager of the Fund is Trident Funds Services Pty Ltd ACN 663 572 076 Corporate Authorised Representative no. 1299936 (**Investment Manager**). On request, Trident Capital Group will send you a copy of the IM and SIM of a specific Class or the replacement IM and SIM of a specific Class and the Application Form free of charge.

Units in the relevant Class of the Fund will only be issued following the Trustee's acceptance of a completed Application Form that is issued with the IM and SIM as well as the provision of all identification documentation.

The table below indicates the applicable sections that you need to be complete depending on the type of investor you are.

INVESTOR TYPE	SECTIONS TO COMPLETE
<input type="checkbox"/> Individual / Joint Investors / Sole Trader	Complete Sections A, B, C, H and I
<input type="checkbox"/> Australian Company	Complete Sections A, B, D, G, H and I
<input type="checkbox"/> Foreign Company	Complete Sections A, B, E, G, H and I
<input type="checkbox"/> Trust	If Trustee is an Individual - Complete Sections A, B, C, F, G, H and I If Trustee is an Australian Company - Complete Sections A, B, D, F, G, H and I
<input checked="" type="checkbox"/> Superannuation Fund	If Trustee is an Individual - Complete Sections A, B, C, F, G, H and I If Trustee is an Australian Company - Complete Sections A, B, D, F, G, H and I


Note:

- If you wish to invest in the Fund and you are a partnership, please contact us at funds@tridentfinancial.com.au as different application form will be required.
- Please note that Trident Capital Group does not accept applications for investing in the Fund from associations, registered co-operatives, government bodies or agents.

Questions about this Application Form

Should you have any queries in relation to this Application Form, please contact us:

Pinnacle Diversified Property Fund

 Trident Capital Group Pty Ltd
Level 1, 268 Canterbury Road
Surrey Hills VIC 3127
Australia

 +613 9899 4036

 funds@tridentfinancial.com.au

Section A: Your Investment

ALL investors must complete this section. Please use BLOCK letters to complete this application form. All fields in Section A MUST be completed

A1. Investment Details

Name of Class

Investment Amount (AUD) \$

I would like to Invest in the Pinnacle Diversified Property Fund - Cash Class Units (Cash Class Units) initially. (Note: Cash Class Units will be converted to above named Class of units upon issue of those units)

Direct Credit/EFT
Please refer Payment Instructions below

Bank Cheque
Please refer Payment Instructions below

Direct Credit / EFT Instructions:

Please transfer investment funds amount to:

Pinnacle Diversified Property Fund

BSB: 033-089
Account number: 685122
Bank Name: Westpac
SWIFT: WPACAU2S

Please note the Applicant's name in the reference when transferring the funds.

The amount transferred must be the exact amount of the investment in Australian Dollars. Please ensure all funds transferred are net of all bank charges

Bank Cheque Instructions:

Bank Cheques must be made payable to **Trident Capital Group Pty Ltd ATF Pinnacle Diversified Property Fund**.

Only cheques in Australian currency and drawn on Australian bank will be accepted. Your cheque(s) should be crossed NOT NEGOTIABLE. Mail or deliver your completed Application Form, together with your bank cheque(s) to:

Trident Capital Group Pty Ltd
Level 1, 268 Canterbury Road
Surrey Hills VIC 3127
Australia

A2. Distributions

Please indicate what you would like to do with your distributions:

Pay into nominated bank account (section B.3)

Reinvest into the same Units (if available)

Note: Unless otherwise stipulated in the IM and the relevant SIM, if no selection is made, the distributions will be paid to your nominated account by default.

Section B: Your Details

ALL investors must complete this section. Please use BLOCK letters to complete this application form. All fields in Section B MUST be completed

B1. Contact Details

Please provide details of key contact person for correspondence.

Title	Surname		
<input type="text" value="MR"/>	<input type="text" value="TANG"/>		
Given name(s)			
<input type="text" value="YUJIAN"/>			
Unit no.	Street no.	Street name	
<input type="text"/>	<input type="text" value="10"/>	<input type="text" value="KINGBURN CT"/>	
Suburb/town	State	Postcode	Country
<input type="text" value="TEMPLESTOWE"/>	<input type="text" value="VIC"/>	<input type="text" value="3106"/>	<input type="text"/>
Phone	Mobile		
<input type="text" value="()"/>	<input type="text" value="(61) 431386267"/>		
Email (This email address will be used for ALL correspondence)			
<input type="text" value="yzfx2019@outlook.com"/>			

B2. Power of Attorney

- I/we have appointed a Power of Attorney (POA) to act on my/our behalf.
(Please provide an original certified copy of the POA and certified identification documents of the attorney)
- Not applicable

B3. Nominated Bank Account Details

Please provide details of the account into which you would like distributions and redemptions to be paid. The nominated bank account must be in the name of the investor (or where joint investors, in the name of at least one of the investors).

By providing your nominated bank account, you authorise the Trustee to use these details for all future transaction requests that you make including credits in relation to any withdrawal proceeds until written notice is provided otherwise. Please check these details carefully as it is your responsibility to ensure all payee account details are correct. Incorrect details may result in loss of funds and we do not accept liability for loss of funds due to incorrect or incomplete bank account details provided by you.

All distributions will be paid in Australian dollars (unless otherwise specified in the IM and the relevant SIM). If an international (non-Australian) bank account is provided, it must be at a bank where the investor is a tax resident and any applicable bank fees will be deducted from the payment.

Account name	
<input type="text" value="TWXC SELF MANAGED SUPERANNUATION FUND"/>	
Name of financial institution	
<input type="text" value="COMMONWEALTH BANK OF AUSTRALIA"/>	
Branch address	
<input type="text" value="28 MAIN ST, BOX HILL VIC 3128"/>	
BSB / SWIFT (if applicable)	Account number
<input type="text" value="063109"/>	<input type="text" value="13534780"/>

B4. Source Of Funds (Anti-Money Laundering & Counter Terrorism Financing (AML/CTF))

- Gainful employment
 Business activities
 Superannuation savings
 Inheritance / gift
 Financial investments
 Other, please specify

B5. Notes

To comply with the AML/CTF laws and regulations, you must disclose whether you or any controlling persons are or have an association with a PEP.

Note 1. Politically Exposed Person (PEP)

A Politically Exposed Person is an individual who:

- a holds a prominent public position or function in a government body or an international organisation, such as a:
- i. head of state or head of a country or government; or
 - ii. government minister or equivalent senior politician; or
 - iii. senior government official; or
 - iv. judge of the High Court of Australia, the Federal Court of Australia or a Supreme Court of a State or Territory, or a Judge of a court of equivalent seniority in a foreign country or international organisation; or
 - v. governor of a central bank or any other position that has comparable influence on the Governor of the Reserve Bank of Australia; or
 - vi. senior foreign representative, ambassador, or
 - vii. high commissioner, high-ranking member of the armed forces, or
 - viii. Board chair, chief executive, or chief financial officer of, or any other position that has comparable influence in, any State enterprise or international organisation, and
- b is an immediate family member of a person referred to in paragraph (1), including
- i. a spouse; or
 - ii. a de facto partner; or
 - iii. a child and a child's spouse or de facto partner; or
 - iv. parent; and
- c is a close associate of a person referred to in paragraph (1), which means any individual who is known (having regard to information that is public or readily available) to have:
- i. joint beneficial ownership of a legal entity or legal arrangement with a person referred to in paragraph (1); or
 - ii. sole beneficial ownership of a legal entity or legal arrangement that is known to exist for the benefit of a person described in paragraph (1).

Where you identify as, or have an association with, a PEP, we may request additional information from you.

Note 2. Beneficial Owner

A "Beneficial Owner" of a customer (the Applicant) means an individual (a natural person or person(s)) who ultimately owns or controls (whether directly or indirectly) the customer.

Ownership for the purpose of determining a Beneficial Owner means an ownership (directly or indirectly) of 25% or more of the customer.

"Control" includes whether the control is exerted by means of trusts, agreements, arrangements, understandings or practices and whether or not the individual has control based on legal or equitable rights. It includes where an individual can exercise control through making decisions about financial and operating policies.

Exemption from requirements to provide Beneficial Owner information are:

- a. When a company can be verified under the simplified company verification procedures: confirm the company is a domestic (registered in Australia) company, listed on an Australian stock exchange or a majority-owned subsidiary of a domestic company listed on an Australian stock exchange or Licensed and regulated by a Commonwealth, state or territory government regulator; and
- b. When a trust can be verified under the simplified trustee verification procedures: verify the trust is a managed investment scheme registered by Australian Securities and Investments Commission (ASIC) or an unregistered managed investment scheme that only has wholesale clients and does not make small scale offerings or a trust registered with and regulated by an Australian Government regulator or a government superannuation fund established under legislation.

Section C: Individuals / Sole Trader

Do not complete Section C if you have previously provided identification documents. Please complete Section C if trustee is an individual. Please use BLOCK letters to complete this Application Form.

C1. Personal Details

Investor or entity 1

Title Surname Date of birth (dd/mm/yyyy)

Given name(s)

Unit no Street no Street name

Suburb/town State Postcode Country

Is this investor a Politically Exposed Person (PEP) (as defined in Note 1, page 4)?

Yes No

Investor or entity 2

Title Surname Date of birth (dd/mm/yyyy)

Given name(s)

Unit no Street no Street name

Suburb/town State Postcode Country

Is this investor a Politically Exposed Person (PEP) (as defined in Note 1, page 4)?

Yes No

Sole Trader

Full business name (if any) ABN (if any)

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

Unit no Street no Street name

Suburb/town State Postcode Country

C2. Tax Information

Note: Tax Residency rules for individuals differ by country and may be based on the amount of time a person spends in a country, the location of the person's residence or place of work. You should seek professional advice if you are unsure of your Tax Residency status.

Please answer BOTH Tax Residency questions

1. Are you a tax resident of Australia? Yes - Complete TFN section below
 No

	Tax File Number (TFN)	TFN Exemption (if applicable)
Investor 1	<input type="text"/>	<input type="text"/>
Investor 2	<input type="text"/>	<input type="text"/>

It is not against the law if you choose not to provide your Tax File Number (TFN) or exemption reason. However, please note that should you decide not to, tax may be deducted from your distribution at the highest marginal tax rate (plus Medicare levy).

2. Are you a tax resident of a country other than Australia? Yes - Complete TIN section below
 No

If you are a tax resident of another country, please provide Tax Identification Number (TIN) or equivalent.

	Country	Tax Identification Number (TIN)	If no TIN, list reason A, B or C
Investor 1	<input type="text"/>	<input type="text"/>	<input type="text"/>
Investor 2	<input type="text"/>	<input type="text"/>	<input type="text"/>

Reason A: Country of residence does not issue TINs to tax residents

Reason B: Individual has not been issued with a TIN. Please provide explanation in the box

Reason C: Country of residence does not require the TIN to be disclosed

Please complete the below section only if are a tax residence in one of the following countries:

- Antigua and Barbuda
- Bahamas
- Bahrain
- Barbados
- Cyprus
- Dominica
- Malaysia
- Grenada
- Malta
- Panama
- Qatar
- Saint Kitts and Nevis
- Saint Lucia
- Seychelles
- Turks and Caicos Islands
- United Arab Emirates
- Vanuatu

- | | Yes | No |
|--|--------------------------|--------------------------|
| 1 Did you obtain residence rights under a Citizenship by Investment (CBI) or Residence by Investment (RBI) scheme? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 Do you hold residence rights in any other jurisdiction(s)? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 Have you spent more than 90 days in any other jurisdiction(s) during the previous year? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4 Have you filed income tax returns in any other jurisdiction(s) during the previous year? | <input type="checkbox"/> | <input type="checkbox"/> |

If you answered "Yes" to any of the above questions, please update Part C.2 – Country of Tax Residence and related Taxpayer Identification Number (TIN) or equivalent reflecting the above resulting jurisdictions or provide a reasonable explanation of why the jurisdiction is not a tax residency.

C3. Identification Information

Provide an ORIGINAL CERTIFIED COPY of ONE of the following documents for each individual investor:

- Australian State/Territory driver's licence containing a photograph of the person
- Australian passport (a passport that has expired within the preceding 2 years is acceptable)
- Card issued under a State or Territory for the purpose of proving a person's age containing a photograph of the person
- Foreign passport or similar travel document containing a photograph and the signature of the person or any unique identifier of the person in whose name the document is issued*
- Foreign National Identity Card that contains a photograph of the person in whose name the document is issued*

*Documents that are written in a language other than English must be accompanied with an English translation prepared by an Accredited Translator

If you are unable to provide one of the above documents, please contact us on +61 3 9899 4036 or funds@tridentfinancial.com.au.

Section D: Australian Company

Section D to be completed by Australian companies and Australian company trustee only. Please complete Section E for foreign companies. Please use BLOCK letters to complete this Application Form.

D1. Australian Company Details

Full name as registered by ASIC

TWXC PTY LTD

ACN: 668115768 ABN: []

Full address of registered business office (PO Box is not acceptable)

c/- TRIDENT FINANCIAL GROUP

Unit no: LEVEL 1 Street no: [] Street name: 268 CANTERBURY RD

Suburb/town: SURREY HILLS State: VIC Postcode: 3127 Country: []

Full address of principal place of business (if any) (PO Box is not acceptable) (if same as the registered office, write "as above")

c/-

Unit no: [] Street no: [] Street name: AS ABOVE

Suburb/town: [] State: [] Postcode: [] Country: []

D2. Regulatory / Listing Details

Is the company regulated or listed?

Company is not regulated or listed

Regulated company - A company whose activities are subject to the oversight of a Commonwealth, State or Territory statutory regulator. In this context "Regulated" means subject to supervision beyond that provided by ASIC as a company registration body. For example, Australian Financial Services Licensee (AFSL), Australian Credit Licensee (ACL) or Registrable Superannuation Entity (RSE) Licensee

Regulator name: [] Licence details (e.g. AFSL, ACL, RSE): []

Australian listed company

Name of market / exchange: []

Majority-owned subsidiary of an Australian listed company

Australian listed company name: []

Name of market / exchange: []

D3. Company Type

- Public (companies whose name does NOT include the words "Pty Ltd" or "Proprietary Ltd"; generally listed companies)
- Go to Section D5
- Proprietary (companies whose name ends with "Proprietary Ltd" or "Pty Ltd"; also known as private companies)
- Go to Section D4 & D5

D4. Directors (Proprietary Companies Only)

How many directors are there?

Provide full name of ALL directors. If there are more directors, provide details on a separate sheet.

	Surname	Given name(s)
Director 1	TANG	YUJIAN
Director 2	WANG	YU
Director 3		
Director 4		

D5. Taxation Information

Please complete Section G1 and G2: Tax Information for Company

Please complete Section G3: Tax Information for each Controlling Person(s)

Controlling Persons

Controlling Person is any individual who directly or indirectly exercises control over an entity. For a company, this includes any beneficial owners controlling more than 25% of company shares or senior managing officials.

D6. Identification Information

Please provide a copy of the following documents:

- Full ASIC company extract
- All public documentation issued by the company (e.g. annual report)
- Full Australian financial services licence held by the company (if any)
- Documentation or evidence that verifies information about the beneficial ownership of a company (if any)

For each Beneficial Owner (as defined in Note 2 on page 4), provide an ORIGINAL CERTIFIED COPY of ONE of the following documents:

- Australian State/Territory driver's licence containing a photograph of the person
- Australian passport (a passport that has expired within the preceding 2 years is acceptable)
- Card issued under a State or Territory for the purpose of proving a person's age containing a photograph of the person
- Foreign passport or similar travel document containing a photograph and the signature of the person or any unique identifier of the person in whose name the document is issued*

Foreign National Identity Card that contains a photograph of the person in whose name the document is issued*

*Documents that are written in a language other than English must be accompanied with an English translation prepared by an Accredited Translator

If you are unable to provide one of the above documents, please contact us on +61 3 9899 4036 or funds@tridentfinancial.com.au.

Section E: Foreign Company

Section E to be completed by foreign companies. Please complete Section D for Australian companies. Please use BLOCK letters to complete this Application Form.

E1. Foreign Company Details

Full name of foreign company

Country of formation / incorporation / registration

Complete this section if the company is registered with ASIC

ARBN

Australian agent name (if applicable)

Principal place of business in Australia or Australian agent address details (PO Box not permitted)

Unit no Street no Street name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Suburb/town

State

Postcode

Country

Registered office address

Unit no Street no Street name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Suburb/town

State

Postcode

Country

Is the company also registered with a relevant foreign registration body?

Yes - Name of registration body

No

Complete this section if the company is NOT registered with ASIC

Is the company registered with a relevant foreign registration body?

Yes

No

If Yes, please provide the company identification number (if any) that was issued by the relevant foreign body upon the company's formation, incorporation or regulation

Principal place of business in Australia or Australian agent address details (PO Box not permitted)

Unit no Street no Street name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Suburb/town

State

Postcode

Country

E2. Company Type

- Public
- Go to Section E4
- Proprietary
- Go to Section E3

E3. Directors (Proprietary Companies Only)

How many directors are there?

Provide full name of ALL directors. If there are more directors, provide details on a separate sheet.

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

E4. Regulatory / Listing Details (All Companies to Complete)

Is the company regulated or listed?

- Company is not regulated or listed**
- Regulated company** - A company whose activities are subject to the oversight of a Commonwealth, State or Territory statutory regulator. In this context "Regulated" means subject to supervision beyond that provided by a country's company registration body. For example, Australian Financial Services Licensee (AFSL), Australian Credit Licensee (ACL) or Registrable Superannuation Entity (RSE) Licensee in Australia

Regulator name	Licence details (e.g. AFSL, ACL, RSE)
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Public listed company
Name of market / exchange

Majority-owned subsidiary of a listed company
Listed company name

Name of market / exchange

E5. Taxation Information

Please complete Section G1 and G2: Tax Information for Company

Please complete Section G3: Tax Information for each Controlling Person(s)

Controlling Persons

Controlling Person is any individual who directly or indirectly exercises control over an entity. For a company, this includes any beneficial owners controlling more than 25% of company shares or senior managing officials.

E6. Identification Information

Complete this Section For each Beneficial Owner (as defined in Note 2 on page 4)

For each Beneficial Owner, provide an ORIGINAL CERTIFIED COPY of ONE of the following documents:

- Australian State/Territory driver's licence containing a photograph of the person
- Australian passport (a passport that has expired within the preceding 2 years is acceptable)
- Card issued under a State or Territory for the purpose of proving a person's age containing a photograph of the person
- Foreign passport or similar travel document containing a photograph and the signature of the person or any unique identifier of the person in whose name the document is issued*
- Foreign National Identity Card that contains a photograph of the person in whose name the document is issued*

Complete this section if the company is registered with ASIC

Please provide a copy of ONE of the following documents:

- Full ASIC company extract
- Full company extract from relevant registration body
- If the ASIC or foreign registration body database is not reasonably available, an original certified copy of the certificate of registration issued by ASIC or the relevant registration body
- All public documentation issued by the company (e.g. annual report)
- Full Australian financial services licence held by the company (if any)
- Documentation or evidence that verifies information about the beneficial ownership of a company (if any)

Complete this section if the company is NOT registered with ASIC

Please provide a copy of ONE of the following documents:

- Full company extract from relevant registration body
- If the foreign registration body database is not reasonably available, an original certified copy of the certificate of registration issued by the relevant registration body
- Documentation or evidence that verifies information about the beneficial ownership of a company (if any)

Complete this section if the company is regulated, listed or a majority subsidiary of an Australian listed company

Please provide a copy of ONE of the following documents:

- Full company extract
- Full company extract from relevant financial market
- Evidence of the company's full name from the relevant Commonwealth, State or Territory statutory regulator
- A public document issued by the company

*Documents that are written in a language other than English must be accompanied with an English translation prepared by an Accredited Translator

If you are unable to provide one of the above documents, please contact us on +61 3 9899 4036 or funds@tridentfinancial.com.au.

Section F: Trusts / Superannuation Fund

Do not complete Section F if you have previously provided identification documents. Please use BLOCK letters to complete this Application Form.

F1. Trust or Superannuation Fund Details

Full name of trust or Superannuation fund

TWXC PTY LTD ATF TWXC SELF MANAGED SUPERANNUATION FUND

Country of establishment

AUSTRALIA

Australian Registered Scheme Number (ARSN)

Type of trust

Family trust
 Charitable trust
 Testamentary trust
 Superannuation fund

Other - please specify

Full name of Settlor/s* (if applicable)

* The person(s) who settles the initial sum or assets to create the Trust. Not required to be completed if settlor contributed less than \$10,000 upon trust establishment OR settlor is deceased OR trust is verified using simplified verification eg. SMSF.

F2. Trustee

Is the Trustee(s) an Individual(s) or a Company?

- Individual(s)
 Please complete Section C: Individual(s) / Sole Trader for each Individual Trustee
- Company
 Please complete Section D: Australian Company

F3. Beneficiaries

- Provide full name of ALL beneficiaries of the trust

	Surname	Given name(s)
Beneficiary 1	TANG	YUJIAN
Beneficiary 2	WANG	YU
Beneficiary 3		
Beneficiary 4		
Beneficiary 5		

If there are more than 5 beneficiaries, provide details on a separate sheet

OR

- If applicable, please state class(es) of beneficiaries (e.g. unit holders, family members of named person, charitable organisation/causes)

F4. Taxation Information

Please complete Section G1 and G2: Tax Information for Company

Please complete Section G3: Tax Information for each Controlling Person(s)

Controlling Persons

Controlling Person is any individual who directly or indirectly exercises control over an entity. For a company, this includes any beneficial owners controlling more than 25% of company shares or senior managing officials.

F5. Identification Information

Please provide a copy of the following documents about the trustee:

- Full ASIC company extract
- All public documentation issued by the company (e.g. annual report)
- Full Australian financial services licence held by the company (if any)
- Documentation or evidence that verifies information about the beneficial ownership of a company (if any)
- The executed trust deed or certified copy or certified extract of the trust deed

For each Beneficial Owner (as defined in Note 2 on page 4), provide an ORIGINAL CERTIFIED COPY of ONE of the following documents:

- Australian State/Territory driver's licence containing a photograph of the person
- Australian passport (a passport that has expired within the preceding 2 years is acceptable)
- Card issued under a State or Territory for the purpose of proving a person's age containing a photograph of the person
- Foreign passport or similar travel document containing a photograph and the signature of the person or any unique identifier of the person in whose name the document is issued*
- Foreign National Identity Card that contains a photograph of the person in whose name the document is issued*

*Documents that are written in a language other than English must be accompanied with an English translation prepared by an Accredited Translator

If you are unable to provide one of the above documents, please contact us on +61 3 9899 4036 or funds@tridentfinancial.com.au.

Section G: Taxation Information

Section G must be completed for investors that are Australian company, a Foreign company, a Trust or a Superannuation Fund. Individual investors must complete Tax Information section in Section C. Please use BLOCK letters to complete this Application Form.

G1. Tax Status

Collection of tax status is compulsory pursuant to the United States Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS).

Please tick the applicable tax status

- Not Applicable**
- A Financial Institution** - A custodial or depository institution, an investment entity or a specified insurance company for FATCA / CRS purposes

Global Intermediary Identification Number (GIIN) (if applicable):

If the company is a Financial Institution but does not have a GIIN, what is the company's FATCA status?

- Deemed Compliant Financial Institution
- Excepted Financial Institution
- Exempt Beneficial Owner
- Non Reporting IGA Financial Institution

- If the entity is a trust and a Trustee-documented trust, provide trustee GIN:

- Non-participating Financial Institution
- Other - FATCA status

- Describe FATCA status:

Is the Financial Institution an Investment Entity located in a non-participating CRS jurisdiction* ?

- Yes - Go to Section F.2
- No - Go to Section G

- Active Non-financial Entity (NFE)** - Active NFEs include entities where, during the previous reporting period, less than 50% of their gross income was passive income (e.g. dividends, interests and royalties) and less than 50% of assets held produced passive income. For other types of Active NFEs, refer to Section VIII in the Annexure of the OECD 'Standard for Automatic Exchange of Financial Account Information' at www.oecd.org or the Australia - US intergovernmental agreement on FATCA

- Australian Public Listed company, majority owned subsidiary of Australian Public Listed company - Proceed to Section H
- Foreign Public Listed company or majority owned subsidiary of a foreign Public Listed company - Proceed to Section H
- Governmental entity, central bank, or international organization - Proceed to Section H
- More than 50% of the entity's gross income consisted of Active Income; and Less than 50% of the assets held by the entity was used to produce Passive Income - Please complete section G.2
- Other - such as a company operating an active trade or business, that is not described above - Please complete Section G.2

- Passive Non-financial Entities** - An entity earning 50% or more of its revenue from investment activities (e.g. rent, dividend, interest) or 50% or more of the entity's assets are used to generate investment income. Please complete Section G.2 and G.3

Notes

A list of CRS participating countries can be found on the ATO website at: https://www.ato.gov.au/General/International-tax-agreements/In-detail/International-arrangements/Automatic-exchange-of-information---CRS-and-FATCA/?page=4#4_19_CRS_Participating_Jurisdictions

For the purpose of the CRS, passive income includes, but is not limited to, the portion of gross income that consists of dividends; interest; income equivalent to interest; rents and royalties, other than rents and royalties derived in the active conduct of a business conducted; annuities; the excess of gains over losses from the sale or exchange of Financial Assets that gives rise to passive income described above.

Please note that we may request further information regarding information provided to us.

G2. Tax Residency of Investor Entity

Please answer BOTH Tax Residency questions

- 1 Is the investor entity a tax resident of Australia? Yes - Tax File Number
 No
- 2 Is the investor entity a tax resident of a country other than Australia? Yes - Complete TIN section below
 No

If the investor entity is a tax resident of another country, please provide Tax Identification Number (TIN) or equivalent.

	Country	Tax Identification Number (TIN)	If no TIN, list reason A, B or C
1	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
2	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

Reason A: Country of residence does not issue TINs to tax residents

Reason B: Individual has not been issued with a TIN. Please provide explanation in the box

Reason C: Country of residence does not require the TIN to be disclosed

G3. Controlling Persons

A Controlling Person is any individual who directly or indirectly exercises control over an entity. For a Trust, this includes all Trustees, Settlers, Protectors and Beneficiaries. For a company, this includes any beneficial owners controlling more than 25% of company shares or senior managing officials.

- 1 Are any of the Controlling Persons in relation to the Investor a Politically Exposed Person (as defined in Note 1, page 4)?

Yes - please identify the PEP:

Name	<input style="width: 100%;" type="text"/>
Position	<input style="width: 100%;" type="text"/>
Name	<input style="width: 100%;" type="text"/>
Position	<input style="width: 100%;" type="text"/>

No

- 2 Are any of the Controlling Persons in relation to the Investor tax residents of a jurisdiction outside Australia?

Yes - Please complete below for each Controlling Person who is a tax resident of a jurisdiction outside Australia

No - Please proceed to Section H

Controlling Person 1

Type of Controlling Person (please tick all that is applicable)

- Trustee
 Trust Settlor
 Beneficiary
 Beneficial Owner
 Protector

Title	Surname	Date of birth (dd/mm/yyyy)
MRS	WANG	05/11/1980

Given name(s)

YU

Primary Residential Address (legal residence for the purpose of income tax and/or as specified in identification documents)

Unit no	Street no	Street name
	10	KINGBURN CT

Suburb/town	State	Postcode	Country
TEMPLESTOWE	VIC	3106	

Please answer BOTH Tax Residency questions

- 1 Is the Controlling Person a tax resident of Australia? Yes - Tax File Number No
- 2 Is the Controlling Person a tax resident of a country other than Australia? Yes - Complete TIN section below No

If the Controlling Person is a tax resident of another country, please provide Tax Identification Number (TIN) or equivalent.

	Country	Tax Identification Number (TIN)	If no TIN, list reason A, B or C
1	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>

Reason A: Country of residence does not issue TINs to tax residents

Reason B: Individual has not been issued with a TIN. Please provide explanation in the box

Reason C: Country of residence does not require the TIN to be disclosed

Please complete the below section only if are a tax residence in one of the following countries:

- Antigua and Barbuda
- Bahamas
- Bahrain
- Barbados
- Cyprus
- Dominica
- Malaysia
- Grenada
- Malta
- Panama
- Qatar
- Saint Kitts and Nevis
- Saint Lucia
- Seychelles
- Turks and Caicos Islands
- United Arab Emirates
- Vanuatu

		Yes	No
1	Did you obtain residence rights under a Citizenship by Investment (CBI) or Residence by Investment (RBI) scheme?	<input type="checkbox"/>	<input type="checkbox"/>
2	Do you hold residence rights in any other jurisdiction(s)?	<input type="checkbox"/>	<input type="checkbox"/>
3	Have you spent more than 90 days in any other jurisdiction(s) during the previous year?	<input type="checkbox"/>	<input type="checkbox"/>
4	Have you filed income tax returns in any other jurisdiction(s) during the previous year?	<input type="checkbox"/>	<input type="checkbox"/>

If you answered "Yes" to any of the above questions, please update Part C.2 – Country of Tax Residence and related Taxpayer Identification Number (TIN) or equivalent reflecting the above resulting jurisdictions or provide a reasonable explanation of why the jurisdiction is not a tax residency.

Controlling Person 2

Type of Controlling Person (please tick all that is applicable)

- Trustee
 Trust Settlor
 Beneficiary
 Beneficial Owner
 Protector

Title	Surname	Date of birth (dd/mm/yyyy)
MR	TANG	03/05/1978

Given name(s)

YUJIAN

Primary Residential Address (legal residence for the purpose of income tax and/or as specified in identification documents)

Unit no	Street no	Street name
	10	KINGBURN CT

Suburb/town	State	Postcode	Country
TEMPLESTOWE	VIC	3106	

Please answer BOTH Tax Residency questions

- 1 Is the Controlling Person a tax resident of Australia? Yes - Tax File Number 502 079 225
 No
- 2 Is the Controlling Person a tax resident of a country other than Australia? Yes - Complete TIN section below
 No

If the Controlling Person is a tax resident of another country, please provide Tax Identification Number (TIN) or equivalent.

	Country	Tax Identification Number (TIN)	If no TIN, list reason A, B or C
1			
2			

Reason A: Country of residence does not issue TINs to tax residents

Reason B: Individual has not been issued with a TIN. Please provide explanation in the box

Reason C: Country of residence does not require the TIN to be disclosed

Please complete the below section only if are a tax residence in one of the following countries:

- Antigua and Barbuda
- Dominica
- Qatar
- United Arab Emirates
- Bahamas
- Malaysia
- Saint Kitts and Nevis
- Vanuatu
- Bahrain
- Grenada
- Saint Lucia
- Barbados
- Malta
- Seychelles
- Cyprus
- Panama
- Turks and Caicos Islands

- | | Yes | No |
|--|--------------------------|--------------------------|
| 1 Did you obtain residence rights under a Citizenship by Investment (CBI) or Residence by Investment (RBI) scheme? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 Do you hold residence rights in any other jurisdiction(s)? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 Have you spent more than 90 days in any other jurisdiction(s) during the previous year? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4 Have you filed income tax returns in any other jurisdiction(s) during the previous year? | <input type="checkbox"/> | <input type="checkbox"/> |

If you answered "Yes" to any of the above questions, please update Part C.2 – Country of Tax Residence and related Taxpayer Identification Number (TIN) or equivalent reflecting the above resulting jurisdictions or provide a reasonable explanation of why the jurisdiction is not a tax residency.

If there are more than 2 Controlling Person, please duplicate pages 17 and 18.

Section H: Certificate by Qualified Accountant

Chapters 6D or 7 of the Corporations Act 2001.
Please use BLOCK letters to complete this application form

Name of investor(s):

TWXC PTY LTD ATF TWXC SELF MANAGED SUPERANNUATION FUND

H1. Investor Category

Please select the category that best describe the investor

Sophisticated Investor

Investor 1 Investor 2 Qualifying criteria

- | | | |
|-------------------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | I am applying for AU\$500,000 or more worth of Units |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | I have net assets of at least AU\$2.5 million (please arrange for Qualified Accountant to complete Section H.2 below) |
| <input type="checkbox"/> | <input type="checkbox"/> | I have earned at least AU\$250,000 per annum gross income for each of the last two (2) financial years (please arrange for Qualified Accountant to complete Section H.2 below) |

Professional Investor

Investor 1 Investor 2 Qualifying criteria

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | I have or control gross assets of at least AU\$10 million (please arrange for Qualified Accountant to complete Section H.2 below) |
| <input type="checkbox"/> | <input type="checkbox"/> | I hold an Australian Financial Services Licence number (please provide AFSL no.) <input type="text"/> |

Please contact the Trustee if you do not fit the above categories.

H2. Qualified Accountant Certification

To be completed by a Qualified Accountant

Full name of Qualified Accountant

JING WANG

Unit no Street no Street name

 8 FLEMMING AVE

Suburb/town State Postcode Country

MARIBYRNONG VIC 3032

Phone / Mobile

0398994036

Email

JENNY@TRIDENTFINANCIAL.COM.AU

Professional body# (e.g. CPA Australia,
Chartered Accountants Australia)

CPA AUSTRALIA

Membership No

9209946

Membership Designation (e.g. CPA)

I confirm that I comply with this body's continuing professional education requirements. I certify that the above named person/entity is a Qualifying Investor in accordance with the category indicated in Section H.1 above.

Signature



Date

09 Jun 2023

#For information on this certificate or a list of accountant qualifications, please refer to <https://asic.gov.au/regulatory-resources/financial-services/financial-product-disclosure/certificates-issued-by-a-qualified-accountant/>

Section I: Declarations & Signatures

Please read the declarations below before signing this Application Form.

I/We declare that:

- i. I/We have read and understood the IM and the SIM to which this Application Form applies including any supplemental information;
- ii. I/We have received and accepted the offer to invest in the Pinnacle Diversified Property Fund (Fund) in Australia and represent and warrant to the Trustee that I/we are permitted to invest in the Fund without the Investment Manager or Trustee obtaining any further authorisation, registration, certification in any country other than Australia and agree to indemnify the Trustee and Investment Manager if the warranty is untrue;
- iii. I/We acknowledge and warrant that we are a "wholesale client" for the purposes of section 761G of the Corporations Act 2001 (Cth) and relevant information has been provided to confirm this and that if the Applicant is a SMSF, it is compliant and investing in this Fund complies with the Superannuation Industry Supervision Act 1993 (Cth);
- iv. The information provided in this Application Form is true, correct and complete in all respects;
- v. I/We agree to be bound by the provisions of the Trust Deed governing the Fund and the terms and conditions of the IM and the SIM each as amended from time to time;
- vi. I/We acknowledge that none of the Trustee, Investment Manager or their related bodies corporate, officers, employees, consultants, advisers or agents, guarantees the performance of the Fund or the payment of distributions other than as set out in the IM;
- vii. I/We have read and understood the risks set out in Section 6 of the IM and the risk section of the relevant SIM and acknowledge that an investment in the Fund is subject to risks, including risk that an investment in the Fund may result in reduction in, or total loss of, the capital value of the investment, returns that are less than expected or delays in repayment of capital;
- viii. I/We acknowledge the Trustee reserves the right to reject any application in whole or in part in its absolute discretion;
- ix. I/We warrant and represent to the Trustee and Investment Manager that I/we have undertaken my/our own due diligence in relation to an investment in the Fund, including (without limitation) in relation to the structure of the Fund and the likelihood of returns from the Fund;
- x. I/We have obtained my/our own independent financial, taxation and legal advice prior to investing in the Fund;
- xi. If this Application Form is signed under Power of Attorney, each Attorney declares he/she has not received notice of revocation of that power;
- xii. I am/We are over 18 years of age and I/we are eligible to hold units in the Fund;
- xiii. I/We have all requisite power and authority to execute this Application Form and make the investment in the Fund as set out in this Application Form;
- xiv. I/we acknowledge that application monies will be held by the Trustee in an interest bearing trust account until invested in the Fund or returned to me/us. No interest will be earned on application monies;
- xv. I/we have read the information on privacy and personal information contained in Section 7 of the IM and consent to my/our personal information being used and disclosed as set out in the IM and Trustee's privacy policy, and that until I/we inform the Trustee otherwise, I/we will be taken to have consented to all uses of our personal information contained under that heading;
- xvi. I/we acknowledge that the Trustee may deliver and make reports, statements and other communications available in electronic form, such as e-mail or by posting on a website;
- xvii. I/we indemnify the Trustee, the Investment Manager and each of their related bodies corporate, officers, employees, consultants, agents and permitted delegates (together, the Indemnified Parties) and hold each of them harmless from and against any loss, damage, liability, cost or expense, including reasonable legal fees due to or arising out of a breach of representation, warranty, covenant or agreement by me/us contained in any document provided by me/use to either the Trustee or the Investment Manager, their representatives, agents or other parties in connection with our investment in the Fund;
- xviii. The indemnification obligations provided herein survive the execution and delivery of this Application Form, any investigation at any time made by the Trustee and the issue and/or sale of the investment;
- xix. To the extent permitted by law, I/we release each of the Indemnified Parties from all claims, actions, suits or demands whatsoever and howsoever arising that I/we may have against any Indemnified Party in connection with the IM and the relevant SIM or my/our investment ;
- xx. Other than as disclosed in this Application Form, no person or entity controlling, owning or otherwise holding an interest in me/us is a United States citizen or resident of the United States for taxation purposes (US Person);
- xxi. I/We will promptly notify the Trustee within 30 days of any change to the information that I/we have previously provided to the Trustee, including any changes which may result in a person or entity controlling, owning or otherwise holding an interest in me/us who is a US Person or a non-Australian tax resident;
- xxii. I/We consent to the Trustee disclosing any information (including to the Australian Taxation Office) required by the Trustee to comply with its due diligence and reporting obligations under the Foreign Account Tax Compliance Act and the Common Reporting Standard as enacted by Division 396 of Schedule 1 to the Taxation Administration Act 1953 and any related Australian law and guidance implementing the same;
- xxiii. I/We acknowledge that the collection of my/our personal information may be required by the Financial Transaction

Reports Act 1988 (Cth), the Corporations Act 2001 (Cth), and the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Cth) (AML/CTF Law);

- xxiv. I/We acknowledge that there is no requirement and it is a not an offence if I/we do not provide the Trustee with a Tax File Number (TFN) or to quote a TFN exemption or Australian Business Number, however, if I/we choose not to, the Trustee may be required to deduct tax at the highest marginal rate plus the Medicare Levy from my/our income distributions (if applicable);
- xxv. 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 or other activities prohibited under any international convention or agreement (including AML/CTF Law);
- xxvi. I/We will promptly provide the Trustee with all additional information, documentation (including original or certified copies) and assistance that the Trustee may request in order for the Trustee to comply with any of its internal compliance policies and the AML/CTF Law; and
- xxvii. I/we will provide the Trustee any information that it reasonably requires in order to enable the Trustee to meet all of its compliance, reporting and other obligations under the United States of America Foreign Account Tax Compliance Act (FATCA) and all associated rules and regulations from time to time (including, without limitation, the Inter-Governmental Agreement (IGA) entered into between the governments of the US and Australia). I/We understand that the Trustee may disclose such information to the Australian Taxation Office (ATO) who may in turn disclose the information to the US Internal Revenue Service (IRS).

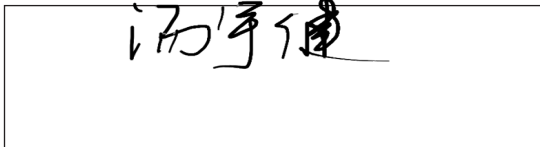
Use of email

If I/we submit my/our Application Form by email, the Trustee may rely on the emailed Application Form to process and accept my/our application.

For each investment in the Fund, if the Trustee receives instructions by email in relation to my/our investment in the Fund, I/we:

- i. will send the originals in the mail for the Trustee's records,
- ii. acknowledge that there is potentially a greater risk that fraudulent instructions can be given by someone who has access to my/our account number and a copy of my/our signature(s) and that I/we accept such risks,
- iii. acknowledge that the Trustee may assume that the instruction has been sent, and is authorised, by or on behalf of me/us, and
- iv. release the Trustee from, and indemnify the Trustee against, all losses and liabilities arising from any payment or action taken by the Trustee based on any instruction bearing my/our account number and a signature that purports to be mine/ours or that of an authorised signatory on the account, even if such instructions are not authorised (except to the extent that such losses and liabilities directly arise from the negligence or wilful default of the Trustee).

Investor or entity 1

Signature 

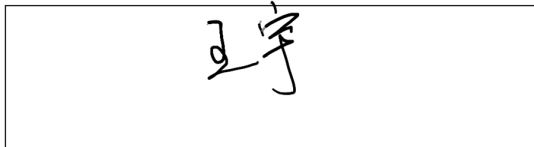
Date (dd/mm/yyyy) **09 Jun 2023**

Surname **TANG**

Given name(s) **YUJIAN**

- Capacity
- Individual Joint investor
- Sole Director Director
- Sole Trader Attorney (under POA)

Investor or entity 2

Signature 

Date (dd/mm/yyyy) **09 Jun 2023**

Surname **WANG**

Given name(s) **YU**

- Capacity
- Joint investor
- Director / Company Secretary

Signing authority

Please tick to indicate signing requirements for future instructions (e.g. withdrawals, change of account details, etc)

- Only one required to sign
- All signatories must sign

Who must sign?

The table below provides guidance on completing the Declaration and the applicant(s) signatures section of the Application Form. Please ensure that all applicants have read the Declaration before signing.

Investor type	Names required	Signatures	TFN/ABN
Individuals and/or joint investors	Full name of each investor (do not use initials)	Individual investor or each joint investors	Individual investor or joint investors
Sole trader	<ul style="list-style-type: none"> Full name or sole trader; and Full business name (if any) 	Sole trader	Sole trader
Australian company/ Foreign company	<ul style="list-style-type: none"> Full company name as registered with ASIC or a foreign registration body; and Name of each Director of the company; and Full name of each beneficial owner* 	<ul style="list-style-type: none"> Sole trader Two Directors; or One Director and company Secretary 	Company
Trust/Superannuation fund	<ul style="list-style-type: none"> Full trust/Superannuation fund name (e.g. John Smith Pty Ltd ATF The Smith Family Trust); Full name of the trustee(s); Names of beneficiaries (if identified in Trust Deed); Full name of the settlor(s); and** Full name of each beneficial owner* 	<ul style="list-style-type: none"> Individual trustee(s) "as trustee for" If any of the trustees are an Australian company, the signatures set out in the "Australian company" sections are also required 	Superannuation fund or trust
Account designation	Full name of responsible adult, as the investor	Adult(s) investing on behalf of the person/minor	Adult(s)
Investment made under a Power of Attorney (POA)	<ul style="list-style-type: none"> Full name of each investor(s); and Full name of person holding POA 	Person holding Power of Attorney	Individual investor or joint investors

*Refer to Note 2 on page 4 for definition of a Beneficial Owner

**Not required in some circumstances.

Customer Identification

To comply with our obligations under Anti-Money Laundering and Counter-Terrorism Financing legislation, we must collect certain information about each investor. In some cases, the information must be supported by a "certified copy" or "certified extract of an identification document"

A certified copy is a document that has been certified as true and correct copy of an original document.

A certified extract is an extract of a document that has been certified as a true copy of the relevant information contained in the original document. We can only accept the original certified copy itself; we cannot accept faxed or scanned versions of certified copies.

Certifying Documents

A certified document is a copy of an original document such as a birth certificate, marriage certificate or proof of identity that has been authorised (or stamped) as being a true copy of an original by one of the persons listed below.

The person certifying the document must include the following information on the photocopy:

Who Can Certify?

In Australia

Legal	<ul style="list-style-type: none"> ▪ solicitor or barrister (that is, 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)) ▪ a judge of a court / a magistrate ▪ a chief executive officer of a Commonwealth court ▪ a registrar or deputy registrar of a court; ▪ a notary public ▪ bailiff ▪ clerk of the Court ▪ Commissioner for Affidavits. ▪ Commissioner for Declarations ▪ Master of a court ▪ Justice of Peace
Police and Australian Defence Force	<ul style="list-style-type: none"> ▪ police officer ▪ Sheriff or Sheriff's officer ▪ Member of the Australian Defence Force who is an officer, a non-commissioned officer within the meaning of the Defence Force Discipline Act 1982 with two or more years of continuous service. ▪ A warrant officer (within the meaning of the Defence Force Discipline Act 1982)
Accountant	<ul style="list-style-type: none"> ▪ member of the following institutions with 2 or more years of continuous membership: <ol style="list-style-type: none"> i. Chartered Accountants Australia & New Zealand ii. Certified Practising Accountants Australia iii. National Institute of Accountants iv. Association of Taxation and Management Accountants v. Fellow of the National Tax Accountants' Association
Post Office	<ul style="list-style-type: none"> ▪ an agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public ▪ a permanent employee of the Australian Postal Corporation with 2 or more years of continuous service
Financial corporations (Bank, Building Society, Credit Union)	<ul style="list-style-type: none"> ▪ an officer with 2 or more continuous years of service with one or more financial institutions ▪ a finance company officer with 2 or more continuous years of service with one or more finance companies ▪ an officer, or authorised representative of, an Australian financial services licence holder, having 2 or more continuous years service
Health professionals	<ul style="list-style-type: none"> ▪ Chiropractor ▪ Dentist ▪ Medical practitioner ▪ Nurse ▪ Optometrist ▪ Physiotherapist ▪ Psychologist ▪ Veterinary surgeon
Engineers	<ul style="list-style-type: none"> ▪ Member of Chartered Secretaries Australia ▪ Member of Engineers Australia, other than at the grade of student ▪ Member of the Australasian Institute of Mining and Metallurgy

Overseas

Legal	<ul style="list-style-type: none"> ▪ a notary public ▪ Justice of Peace
Diplomatic service	<ul style="list-style-type: none"> ▪ an Australian consular officer (within the meaning of the Consular Fees Act 1985) ▪ an Australian diplomatic officer (within the meaning of the Consular Fees Act 1985) ▪ Employee of the Australian Trade Commission who is in a country or place outside Australia, and authorised under section 3(d) of the Consular Fees Act 1955, and exercising their function in that place.



Notice of intent to claim or vary a deduction for personal super contributions

COMPLETING THIS STATEMENT

- Print clearly using a black pen only.
- Use BLOCK LETTERS and print one character per box.
- Place in ALL applicable boxes.

! The instructions contain important information about completing this notice. Refer to them for more information about how to complete and lodge this notice.

Section A: Your details

1 Tax file number (TFN)

502 079 225

! The ATO does not collect this information provided on this form. This form is to assist you in providing details to your super fund. Your super fund is authorised to request your personal details, including your TFN, under the *Superannuation Industry (Supervision) Act 1993*, the *Income Tax Assessment Act 1997* and the *Taxation Administration Act 1953*. It is not an offence not to provide your TFN. However, if you do not provide your TFN, and your super fund doesn't already hold your TFN, they will not be permitted to accept the contribution(s) covered by this notice. For more information about your privacy please contact the entity you are providing this form to.

2 Name

Title: Mr Mrs Miss Ms Other

Family name

TANG

First given name

YUJIAN

Other given names

3 Date of birth 03 / 05 / 1978

4 Current postal address

10 KINGSBURM CT

Suburb/town/locality

TEMPLESTOWE

State/territory

VIC
(Australia only)

Postcode

3706
(Australia only)

Country if outside of Australia

5 Daytime phone number (include area code) 0431386267

Section B: Super fund's details

6 Fund name

TWXC SELF MANAGED SUPERANNUATION FUND

7 Fund Australian business number (ABN) 48 267 208 575

8 Member account number

9 Unique Superannuation Identifier (USI) (if known)



Notice of intent to claim or vary a deduction for personal super contributions

COMPLETING THIS STATEMENT

- Print clearly using a black pen only.
- Use BLOCK LETTERS and print one character per box.
- Place in ALL applicable boxes.

! The instructions contain important information about completing this notice. Refer to them for more information about how to complete and lodge this notice.

Section A: Your details

1 Tax file number (TFN)

502 070 534

! The ATO does not collect this information provided on this form. This form is to assist you in providing details to your super fund. Your super fund is authorised to request your personal details, including your TFN, under the *Superannuation Industry (Supervision) Act 1993*, the *Income Tax Assessment Act 1997* and the *Taxation Administration Act 1953*. It is not an offence not to provide your TFN. However, if you do not provide your TFN, and your super fund doesn't already hold your TFN, they will not be permitted to accept the contribution(s) covered by this notice. For more information about your privacy please contact the entity you are providing this form to.

2 Name

Title: Mr Mrs Miss Ms Other

Family name

WANG

First given name

YU

Other given names

3 Date of birth 05 / 11 / 1980

4 Current postal address

10 KINGBURN CT

Suburb/town/locality

TEMPLESTOWE

State/territory

VIC
(Australia only)

Postcode

3106
(Australia only)

Country if outside of Australia

5 Daytime phone number (include area code) 0431298616

Section B: Super fund's details

6 Fund name

TWXC SELF MANAGED SUPERANNUATION FUND

7 Fund Australian business number (ABN) 48 267 208 575

8 Member account number

9 Unique Superannuation Identifier (USI) (if known)

