

## Application Form

### APPLICATION OPTIONS:

Please complete this form in accordance with the instructions below.

#### 1. READ THE FUND DOCUMENTS

Please read and ensure you understand the Product Disclosure Statement, Additional Information Document and the Target Market Determination for the relevant Lazard fund.

#### 2. COMPLETE THIS APPLICATION FORM

Please write in BLOCK letters, using a black pen. If you make an error while completing this form, please do not use correction fluid, simply cross out your mistakes and initial your changes.

#### 3. CERTIFY AND PROVIDE YOUR IDENTIFICATION DOCUMENTS

Please refer to Appendix A 'Identification and verification' and complete the relevant identification document attached to this Application Form.

#### 4. SEND YOUR DOCUMENTS

Return your Application Form and certified documents to:

##### By Email:


Lazard Asset Management Pacific Co.  
[lazard@automicgroup.com.au](mailto:lazard@automicgroup.com.au)

##### By Post:

Lazard Asset Management Pacific Co.  
GPO Box 5193  
Sydney NSW 2000

#### 5. MAKE YOUR PAYMENT

When your application is processed, you will be sent an automated email confirmation which will provide you with your personalised payment Instructions.

 **IMPORTANT:** You must ensure that you use the unique payment ID that is provided in the email confirmation otherwise we may not be able to identify your funds and your application may be delayed.

### ASSISTANCE:

Need help with your application, then please contact us on:



Email: [lazard@automicgroup.com.au](mailto:lazard@automicgroup.com.au)  
Phone (within Australia): 1300 441 609  
Phone (outside Australia): +61 (0)2 9934 0521

## 1. INVESTMENT DETAILS

**1.1 EXISTING INVESTOR:** Are you currently invested in the below Lazard funds?

Yes (Please provide your SRN)

No

**1.2 INVESTMENT AMOUNT:** Please specify the fund/s and the amount in which you would like to invest.

Applications for the following funds must be for a minimum of **A\$20,000.00**.

- Lazard Global Listed Infrastructure Active ETF
- Lazard Global Equity Franchise Fund – Class W
- Lazard Global Equity Franchise Fund (Hedged) – Class W
- Lazard Japanese Strategic Equity Fund

FUND	INVESTMENT AMOUNT
<input type="checkbox"/> Lazard Global Listed Infrastructure Active ETF	AUD \$ <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> , <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> , <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> . <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
<input type="checkbox"/> Lazard Global Equity Franchise Fund – Class W	AUD \$ <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> , <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> , <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> . <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
<input type="checkbox"/> Lazard Global Equity Franchise Fund (Hedged) – Class W	AUD \$ <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> , <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> , <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> . <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
<input type="checkbox"/> Lazard Japanese Strategic Equity Fund*	AUD \$ <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> , <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> , <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> . <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>

**Total:** AUD \$    ,    ,    .

\* For retail investors, you must have received personal financial advice to invest in this Fund. If you do invest in the Fund without receiving personal advice from a licensed financial adviser, we will ask you to provide a certificate confirming that you are a wholesale client within the meaning of Section 761G of the Corporations Act 2001.

## 2. CONTACT DETAILS

**2.1 CONTACT DETAILS:** Please specify contact details below.

Contact Name

Contact Telephone Number

Primary Email Address:

By providing your email address, you elect to receive all communications electronically by the Responsible Entity (where legally permissible).

Additional Email Addresses (you can nominate up to 5 additional email addresses)

## 3. DISTRIBUTION REINVESTMENT PLAN

**3.1 REINVESTMENT DISTRIBUTION ELECTION:** Please indicate below how you would like to receive fund distributions.

A nomination in this section overrides any previous nominations within the same fund. There may be periods in which no distribution is payable, or we may make interim distributions. We do not guarantee any particular level of distribution:

Reinvest in the Fund

Receive cash distribution.  
Please complete section 3.2 below

**3.2 PAYMENT INSTRUCTIONS:** Please provide your EFT details below for all cash payments

Payments will only be made electronically to Australian bank accounts. We will not make any payments into third party bank accounts. Investors who do not provide EFT details will have distribution payments defaulted into reinvestment (where eligible).



**PLEASE NOTE:** Distribution payments will be made by EFT to investors.

BSB

 - 

Account Number



**DO NOT USE YOUR CARD NUMBER**

If you are unsure of your BSB or account number, please check with your bank, building society or credit union.

Account Name

## 4. TARGET MARKET DETERMINATIONS

In relation to our Design and Distribution Obligations (DDO) under the Corporations Act, we seek the following information about your attributes as an investor (please tick only 1 box for each question below).

### Have you received personal financial advice from a licensed financial adviser?

If you have received personal financial advice from a licensed financial adviser in relation to this investment, please provide their details in section 9.

Yes (Please skip to the question on Source of Funds below)

No

### What is your primary objective in relation to this investment?

Capital Growth

You seek to invest in a product designed or expected to generate capital return over the investment timeframe. You prefer exposure to growth assets (such as shares or property) or otherwise seek an investment return above the current inflation rate).

Capital Preservation

You seek to invest in a product designed or expected to have low volatility and minimise capital loss. You prefer exposure to defensive assets that are generally lower in risk and less volatile than growth investments (this may include cash or fixed income securities).

Income Distribution

You seek to invest in a product designed or expected to distribute regular and/ or tax-effective income. You prefer exposure to income-generating assets (this may include high dividend-yielding equities, fixed income securities and money market instruments).

### Please select the intended use of this investment in your overall investment portfolio

Solution/standalone (up to 100%)

Major Allocation (up to 75%)

Core Component (up to 50%)

Minor Allocation (up to 25%)

Satellite Allocation (up to 10%)

### What is your intended investment timeframe for this investment?

Less than 5 years

5 or more years

### For this investment, what is your tolerance for risk (able to bear loss) and return profile?

Low

You are looking for an investment that is low risk in nature e.g. you have the ability to tolerate up to 1 negative return over a 20-year period and you are comfortable with a low target return from this investment.

Medium

You are looking for an investment that is moderate or medium risk in nature, e.g. you have the ability to tolerate up to 4 negative returns over a 20-year period and you are comfortable with a moderate target return from this investment.

High

You are looking for an investment that is higher risk in nature e.g. you have the ability to tolerate up to 6 negative returns over a 20-year period in order to achieve a higher target return from this investment.

Very High

You are looking for an investment that is very high risk in nature e.g. you have the ability to tolerate 6 or more negative returns over a 20 year period as you are seeking to maximise returns.

Extremely High

You are looking for an investment that is extremely high risk in nature e.g. you have the ability to accept significant volatility and losses as you are seeking to obtain accelerated returns (potentially in a short timeframe).

### Under normal circumstances, how soon after your withdrawal request do you want your withdrawal proceeds to be paid?

Within 7 business days of a withdrawal request

Within one month of a withdrawal request

Within three months of a withdrawal request

### Source of Funds

Employment Income

Savings

Superannuation/Retirement Savings

Inheritance

Sale of Assets (e.g. shares, property)

Donation/Gift





Other

## 5. SECTIONS TO COMPLETE AND IDENTIFICATION REQUIRED



**IMPORTANT:** Complete the sections outlined as applicable to your investor type

Please refer to the column 'Identification Documentation Required' for guidance on the documentation you must provide as part of your application.

Investor Type	Description	To Be Completed	Identification Documentation Required
 <b>Individual/Joint Investors/Individual Trustee</b>	A natural person or persons.	Section 6.1 Section 7 Section 8 Section 9 (if applicable) Section 10	<b>Certified copy of a driver's licence</b> that contains a photograph of the licence/ permit holder; <b>or certified copy of a passport</b> that contains a photograph and signature of the passport holder (can be current or recently expired (within the last 2 years).
 <b>Sole Trader</b>	A natural person operating a business under their own name with registered business name.	Section 6.1 Section 7 Section 8 Section 9 (if applicable) Section 10	<b>Certified copy of a driver's licence</b> that contains a photograph of the licence/ permit holder; <b>or certified copy of a passport</b> that contains a photograph and signature of the passport holder (can be current or recently expired (within the last 2 years).
 <b>Companies/Corporate Trustee</b>	A company registered as an Australian public company or an Australian proprietary company, or a foreign company.	Section 6.3 Section 7 Section 8 Section 9 (if applicable) Section 10	<b>Certified copy of the certification of registration</b> issued by ASIC or the relevant foreign registration body; <b>or the most recent Company Statement issued by ASIC.</b> Please <b>provide identification documents for those persons that own or control more than 25%</b> of the company. If a Beneficial Owner is a company or trust and not an individual, please contact the Responsible Entity to request a separate form to provide further details on the company or trust.
 <b>Trust/Superannuation Fund</b>	Types of trusts include self-managed superannuation funds, registered managed investment schemes, unregistered wholesale managed investment schemes, government superannuation funds or other trusts (such as family trusts and charitable trusts).	Section 6.4 Section 7 Section 8 Section 9 (if applicable) Section 10	Provide the <b>name of the legislation establishing the government superannuation fund</b> sourced from a government website.  Ensure the <b>ABN</b> of the superannuation fund is disclosed in the supporting document/s.  Provide a <b>certified copy</b> or a certified extract of the <b>Trust Deed</b> containing the cover page, recitals and signature page.



**Partnership**

A partnership created under a partnership agreement.

Section 6.2  
Section 7  
Section 8  
Section 9 (if applicable)  
Section 10

**A certified copy or extract of the partnership agreement.**  
If the partnership is a member of a professional association:  
An original or certified copy of a current membership certificate (or equivalent) of a professional association; or Membership details independently sourced from the relevant professional association (e.g., the professional association's website).  
All Beneficial Owners named.



**Associations**

Incorporated associations are associations registered under State or Territory based incorporated association statutes. Unincorporated associations are those of persons who are not registered under an incorporated associations statute and thus do not have the legal capacity to enter into agreement

Section 6.3  
Section 7  
Section 8  
Section 9 (if applicable)  
Section 10

**The original, a certified copy or a certified extract of the constitution** or rules of the association; and (Where the association is incorporated) information provided by ASIC or by the State, Territory or overseas body responsible for the incorporation of the association.  
  
**Beneficial Owners**  
The documents that are to be collected for INDIVIDUALS. All Beneficial Owners named.

## 6. INVESTOR DETAILS

### 6.1 INVESTOR DETAILS: INDIVIDUALS

Please complete if you are investing individually, jointly or you are an individual or joint trustee, or as a sole trader.

#### INVESTOR 1:

Title  First Name(s)

Surname

Date of Birth  /  /

**Address:** Unit / Street Number / Street Name

Suburb  State

Postcode  Country

#### INVESTOR 2:

Title  First Name(s)

Surname

Date of Birth  /  /

**Address:** Unit / Street Number / Street Name

Suburb  State

Postcode  Country

Select the primary address for the investment account – only 1 address can be made the primary address. If no selection is made or the selection is invalid, the investor 1 address will be applied.

Investor 1 address above is the primary address

Investor 2 address above is the primary address

#### TAX DETAILS:

If you are an Australian resident for tax purposes, please provide your tax file number (TFN) or exemption code. If you are an Australian resident and do not provide your TFN, or exemption code, you will be taxed at the highest marginal tax rate plus the Medicare levy.

TFN or Exemption Code (Investor 1)

TFN or Exemption Code (Investor 2)

Non-Australian residents: If you are not an Australia resident for tax purposes, please indicate your country of residence.

Foreign tax domicile (Investor 1)

Foreign tax domicile (Investor 2)

#### SOLE TRADERS – Additional Information required if a Sole Trader

Full Business Name

Australian Business Number (ABN)

If there are more than two individual investors, please provide the full name, date of birth, and residential address of each on a separate sheet and attach to this form.

#### IDENTIFICATION DOCUMENTS:

To comply with Australia's Anti-Money Laundering and Counter-Terrorism Financing (AML/CTF) legislation, we must collect certain information from prospective investors and their beneficial owners supported by certified copies of relevant identification documents for all investors and their beneficial owners.

Electronic-based verification (AML link in the 'Application Confirmation' sent to your email once your application has been processed)

Document-based verification (see below)

Please refer to Appendix A at the end of the Application Form for details of how to arrange certified copies. Please provide all documents in the proper format otherwise we may not be able to process your application for investment.

**Certified copy of a current driver's licence** that contains a photograph of the licence/permit holder; OR

**Certified copy of a passport** that contains a photograph and signature of the passport holder (can be current or recently expired within the last 2 years)

## 6.2 INVESTOR DETAILS: PARTNERSHIP

Complete this section if you are investing for, or on behalf of, a partnership.

Full Name of Partnership

Country where partnership is established

ACN/ABN (if registered in Australia)

Name of Regulator

Registered Address

Suburb

State

Postcode

Country

Postal Address (if different from above)

Suburb

State

Postcode

Country

*Note: The postal address will be used for all account correspondence; however we also require your registered address.*

Is the Partnership regulated by a professional association?

Yes - Name of Association

Provide membership details

No - How many partners are in the partnership

**Partner 1:**

Title

First Name(s)

Surname

Date of Birth

**Address:** Unit / Street Number / Street Name

Suburb

State

Postcode

Country

**Partner 2:**

Title

First Name(s)

Surname

Date of Birth

**Address:** Unit / Street Number / Street Name

Suburb

State

Postcode

Country



**Partner 3:**

Title  First Name(s)

Surname

Date of Birth  /  /

**Address:** Unit / Street Number / Street Name

Suburb  State

Postcode  Country

**Partner 4:**

Title  First Name(s)

Surname

Date of Birth  /  /

**Address:** Unit / Street Number / Street Name

Suburb  State

Postcode  Country

**If there are more partners, provide details on a separate sheet and tick this box**

If there are more partners, provide details on a separate sheet and confirm the total number of partners in the box

**BENEFICIAL OWNERS OF THE PARTNERSHIP**

Please provide details of the Beneficial Owner(s) of the partnership who directly or indirectly controls the partnership in Section 8.6.

**IDENTIFICATION DOCUMENTS:**

To comply with Australia's Anti-Money Laundering and Counter-Terrorism Financing (AML/CTF) legislation, we must collect certain information from prospective investors and their beneficial owners supported by certified copies of relevant identification documents for all investors and their beneficial owners.

- Electronic-based verification (AML link in the 'Application Confirmation' sent to your email once your application has been processed)
- Document-based verification (see below)

Please refer to Appendix A at the end of the Application Form for details of how to arrange certified copies. Please provide all documents in the proper format otherwise we may not be able to process your application for investment.

Select one of the following options to verify a partnership.

- Provide a certified copy of the Partnership Agreement; and
- Provide a certified copy of the current Australian driver's licence or passport\* of Partner 1; and
- Provide a certified copy of the current Australian driver's licence or passport\* of each Beneficial Owner listed Section 8.6; and
- For partnerships regulated by a professional association, provide an original current membership certificate OR membership details independently sourced from the relevant association

\*Please note that your passport can be current or recently expired (within the last 2 years).

### 6.3 INVESTOR DETAILS: COMPANY/CORPORATE TRUSTEE

Complete this section if you are investing as a company or corporate trustee.

Full Company Name

Country of Formation, Incorporation or Registration

ARBN (if registered with ASIC)

ACN/ABN (if registered in Australia)

Tax File Number or Exemption Code (Australian residents)

AFS Licence Number (if applicable)

Name of Regulator (if Licenced by an Australian Commonwealth, State or Territory statutory regulator)

Registered Business Address

Suburb

State

Postcode

Country

Principal Place of Business (not a PO Box address)

Suburb

State

Postcode

Country

If an Australian Company, registration status with ASIC.

Proprietary Company

Public Company

If a Foreign Company, registration status with the relevant foreign registration body

Proprietary Company

Public Company

Other - Please Specify

Name of Relevant Foreign Registration Body

Foreign Company Identification Number

Tax File Number or Exemption Code (Australian residents)

AFS Licence Number (if applicable)

Is the Company Listed?

No

Yes - Name of Market/Stock Exchange

Is the Company a majority-owned subsidiary of an Australian listed company?

No

Yes - Name of Australian Listed Company

- Name of Market/Stock Exchange

DIRECTORS OF THE COMPANY/CORPORATE TRUSTEE

If the company is registered as a proprietary company by ASIC or a private company by a foreign registration body, please list the name of each director of the company.

Director 1 – Full Name

Director 4 – Full Name

Director 2 – Full Name

Director 5 – Full Name

Director 3 – Full Name

Director 6 – Full Name

## BENEFICIAL OWNERS OF THE COMPANY/CORPORATE TRUSTEE

Please provide details of the Beneficial Owner of the company who directly or indirectly controls the company in Section 8.6.

### IDENTIFICATION DOCUMENTS:

To comply with Australia's Anti-Money Laundering and Counter-Terrorism Financing (AML/CTF) legislation, we must collect certain information from prospective investors and their beneficial owners supported by certified copies of relevant identification documents for all investors and their beneficial owners.

- Electronic-based verification (AML link in the 'Application Confirmation' sent to your email once your application has been processed)
- Document-based verification (see below)

Please refer to Appendix A at the end of the Application Form for details of how to arrange certified copies. Please provide all documents in the proper format otherwise we may not be able to process your application for investment.

To verify a company or corporate trustee:

- Provide ACN to perform a search of the ASIC database (unit registry to perform on behalf of the investor); and/or
- Provide a certified copy of the certification of registration issued by ASIC or the relevant foreign registration body

Select one of the following options to verify the Officeholders who have signed the Application Form and Beneficial Owners identified above.

- Provide a certified copy of a current Australian driver's licence that contains a photograph of the licence/permit holder; or
- Provide a certified copy of a passport\* that contains a photograph and signature of the passport holder.

\*Please note that your passport can be current or recently expired (within the last 2 years).

## 6.4 INVESTOR DETAILS: TRUST/SUPERANNUATION FUND

Complete this section if you are investing as a Trust/Superannuation Fund.

Full Name of Trust/Superannuation Fund

Country of Establishment

Tax File Number or Exemption Code

Australian Business Number (if any)

### TYPE OF TRUST

(Please tick ONE box from the list below to indicate the type of Trust and provide the required information)

Type A:  Regulated Trust (e.g. self-managed superannuation fund)

Name of regulator (e.g. ASIC, APRA, ATO)

Registration/Licensing details

Type B:  Government Superannuation Fund

Name of the legislation establishing the fund

Type C:  Foreign Superannuation Fund

Name of regulator

Registration/Licensing details

Type D:  Other Type of Trust/Unregulated Trust

Trust Description (e.g. family, unit, charitable)

If **Type C or D**, please complete the below Beneficiary details.

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

**Yes**

Describe the class of beneficiaries below (e.g. unit holders, family members of named person, charitable purposes)

**No**

Provide the full names of each beneficiary in respect of the trust in Section 8.6 (includes beneficial owners who ultimately own 25% or more of the trust)

If a trustee is an individual, please also complete Section 6.1. If a trustee is a company, please also complete Section 6.3.

### IDENTIFICATION DOCUMENTS:

To comply with Australia's Anti-Money Laundering and Counter-Terrorism Financing (AML/CTF) legislation, we must collect certain information from prospective investors and their beneficial owners supported by certified copies of relevant identification documents for all investors and their beneficial owners.

Electronic-based verification (AML link in the 'Application Confirmation' sent to your email once your application has been processed)


Document-based verification (see below)

Please refer to Appendix A at the end of the Application Form for details of how to arrange certified copies. Please provide all documents in the proper format otherwise we may not be able to process your application for investment.

Provide the ABN for the superannuation fund

OR

Provide a certified copy or a certified extract of the Trust Deed containing the cover page, recitals and signature page.

 **IMPORTANT:** Failure to complete electronic OR paper based verification will result in your application being rejected.

### IDENTIFICATION DOCUMENTS:

To comply with Australia's Anti-Money Laundering and Counter-Terrorism Financing (AML/CTF) legislation, we must collect certain information from prospective investors and their beneficial owners supported by certified copies of relevant identification documents for all investors and their beneficial owners.

The Responsible Entity is required to comply with the Anti-Money Laundering and Counter Terrorism Financing Act 2006 (Cth) and associated rules and regulations (AML/CTF Laws). This means that the Responsible Entity may require Unitholders to provide personal information and documentation when investing in the Fund. The Responsible Entity may need to obtain additional information and documentation to process applications or subsequent transactions or at other times.

**Please ensure that you complete these details to enable your application to be processed.**

### Important Information

Automic Group uses an electronic verification service provider, BronID, for identity verification and risk assessment services to determine, with reasonable satisfaction, that an individual is who they claim to be. The Responsible Entity must undertake this check to meet its obligations under Anti-Money Laundering and Counter-Terrorism Financing laws in Australia.

You will be directed to input personal information including your name, residential address and date of birth. The BronID platform is then used to assess whether the personal information matches (in whole or part) the personal information held by government data sources, or credit reporting bodies. BronID uses the personal information to prepare an assessment, which it provides to Automic Group.

If the identity verification cannot be completed by using an electronic verification search through BronID, or you do not consent to the electronic verification process, Automic Group will request that your identity be verified by providing certified copies of identity documents.

**By proceeding with this application, I/we consent to the making of this request and the disclosure of the personal information to BronID.**

Please refer to [Appendix A at the end of the Application Form](#) for details of how to arrange certified copies. Please provide all documents in the proper format otherwise we may not be able to process your application for investment.

### Summary of common entities and their requirements.

Select one of the following options to verify a *Superannuation Fund* or a *Regulated Trust*.

- Perform a search of the relevant regulator's website e.g. 'Super Fund Lookup' (unit registry to perform);
- Provide a copy of an offer document of the managed investment scheme e.g. a copy of a Product Disclosure Statement; or
- Provide a copy of the legislation establishing the government superannuation fund sourced from a government website.

Select one of the following options to verify an *Unregulated Trust* or a *Foreign Superannuation Fund*.

- Provide a certified copy or a certified extract of the Trust Deed containing the cover page, recitals and signature page;
- Provide an original letter from a solicitor or qualified accountant that confirms the name of the Trust; or
- Provide a notice issued by the Australian Taxation Office within the last 12 months (e.g. a Notice of Assessment).

Select one of the following options to verify the *Beneficiaries and the Beneficial Owners* identified in Section 8.6.

- Provide a certified copy of a current Australian driver's licence that contains a photograph of the licence/permit holder; or
- Provide a certified copy of a passport\* that contains a photograph and signature of the passport holder.
- AND relevant identification documents for the trustee (as applicable).

\*Please note that your passport can current or be recently expired (within the last 2 years).

## 8. TAX DECLARATION (FATCA AND CRS)



**IMPORTANT:** Failure to complete this section will result in your application being rejected.

The certification is being used to comply with the U.S. Foreign Account Tax Compliance Act (FATCA) and OECD Common Reporting Standards (CRS).

Australia is a participant in the Automatic Exchange of Information (AEOI) regime concerning the automatic exchange of financial account information with foreign jurisdictions. The regime aims to address tax evasion at a global level. The relevant laws are the Foreign Account Tax Compliance Act (FATCA) in the case of exchange by Australia with the United States of America (U.S.) and the Common Reporting Standard (Standard) in the case of exchange by Australia with other countries that have implemented the Standard. The Standard commenced operation in Australia on 1 July 2017.

The Foreign Account Tax Compliance Act (FATCA) relates to US taxpayers and the Common Reporting Standard (CRS) is a broader framework for the exchange of financial account information between jurisdictions relating to all non-Australian taxpayers.

To comply with FATCA and CRS, as a financial institution, we must collect information about your tax status before opening your account. In some cases, this information will need to be reported to the Australian Taxation Office who may then pass this information to tax authorities in other jurisdictions. Please note that if you do not complete this section, we may not be able to process your application.

Further information about this regime is available at the website URL shown below:

<https://www.ato.gov.au/General/International-tax-agreements/In-detail/International-arrangements/Automatic-exchange-of-information---CRS-and-FATCA/>

As a result of Australia’s participation in the regime applicants must certify their country of tax residency. Where required the information will be reported to the Australian Taxation Office (ATO) which will report to various global tax authorities.

If you are unable to complete this form, please seek appropriate advice relating to the tax information required.

The account holder is the persons listed or identified as applicant in Section 6 (Account Holder).

The Account Holder’s Country of Tax Residence, Taxpayer Identification Number (TIN) or Tax File Number (TFN), Global Intermediary Identification Number (GIIN), FATCA Status, CRS Status and Controlling Persons (includes Beneficial Ownership details) must be provided in this section. If the person opening the account is not a Financial Institution and is acting as an intermediary, agent, custodian, nominee, signatory, investment advisor or legal guardian on behalf of one or more other account holders, this form must be completed by or on behalf of that other person who is referred to as the Account Holder.



**PLEASE NOTE: If you are applying:**

- As an Individual/Joint Investors/Sole Trader please complete Section 8.1 and 8.7.
- All other types of entities please complete Sections 8.2, 8.3, 8.4, 8.5, 8.6 and 8.7 (where applicable).

### 8.1 TAX RESIDENCE – INDIVIDUAL/SOLE TRADER

**8.1.1 INVESTOR 1:** Provide all jurisdictions where the investor is a tax resident

If no TIN is available, please select one of the reasons below against the appropriate country.

- Reason A – The country where the Account Holder is liable to pay tax does not issue TINs to its residents
- Reason B – The Account Holder is otherwise unable to obtain a TIN or equivalent number
- Reason C – No TIN is required. (Note: Only select this reason if the domestic law of the relevant jurisdiction does not require the TIN to be disclosed)

Country of Tax Residence 1 (outside Aus)	TIN 1/TFN 1	Reason if no TIN:	A	B	C
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Country of Tax Residence 2 (if applicable)	TIN 2/TFN 2 (if applicable)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Country of Tax Residence 3 (if applicable)	TIN 3/TFN 3 (if applicable)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I certify the tax residence countries provided represent all countries in which I am considered a tax resident.  
If the Account Holder has any additional countries of tax residence, please attach a statement to this form containing the Country and TIN for each additional country.

Is the account holder a U.S. Person? A U.S. person includes a U.S. citizen or resident alien of the U.S. even if residing outside the U.S.

- Yes - If 'Yes', the Account Holder's U.S. country of residence and U.S. Tax Identification Number must be provided above.
- No

(If Joint Investor, please also complete Section 8.1.2)

**8.1.2 INVESTOR 2:** Provide all jurisdictions where the investor is a tax resident

If no TIN is available, please select one of the reasons below against the appropriate country.

- Reason A – The country where the Account Holder is liable to pay tax does not issue TINs to its residents
- Reason B – The Account Holder is otherwise unable to obtain a TIN or equivalent number
- Reason C – No TIN is required. (Note: Only select this reason if the domestic law of the relevant jurisdiction does not require the TIN to be disclosed)

Country of Tax Residence 1	TIN 1/TFN 1	Reason if no TIN:		
<input type="text"/>	<input type="text"/>	A <input type="checkbox"/>	B <input type="checkbox"/>	C <input type="checkbox"/>
Country of Tax Residence 2 (if applicable)	TIN 2/TFN 2 (if applicable)	A <input type="checkbox"/>	B <input type="checkbox"/>	C <input type="checkbox"/>
<input type="text"/>	<input type="text"/>	A <input type="checkbox"/>	B <input type="checkbox"/>	C <input type="checkbox"/>
Country of Tax Residence 3 (if applicable)	TIN 3/TFN 3 (if applicable)	A <input type="checkbox"/>	B <input type="checkbox"/>	C <input type="checkbox"/>
<input type="text"/>	<input type="text"/>	A <input type="checkbox"/>	B <input type="checkbox"/>	C <input type="checkbox"/>

- I certify the tax residence countries provided represent all countries in which I am considered a tax resident. If the Account Holder has any additional countries of tax residence, please attach a statement to this form containing the Country and TIN for each additional country.

Is the account holder a U.S. Person? A U.S. person includes a U.S. citizen or resident alien of the U.S. even if residing outside the U.S.

- Yes - If 'Yes', the Account Holder's U.S. country of residence and U.S. Tax Identification Number must be provided above.
- No

**8.2 ACCOUNT HOLDER'S GIIN – COMPANIES, TRUSTS AND OTHER TYPES OF ENTITIES**

Account Holder's GIIN (if any)

Sponsoring Entity's Name (if the Account Holder is sponsored entity, please provide the sponsor's GIIN)

**8.3 TAX RESIDENCE – COMPANIES, TRUSTS AND OTHER TYPES OF ENTITIES**

Provide all jurisdictions outside of Australia where the Account Holder is a tax resident.

If no TIN is available, please select one of the reasons below against the appropriate country.

- Reason A – The country where the Account Holder is liable to pay tax does not issue TINs to its residents
- Reason B – The Account Holder is otherwise unable to obtain a TIN or equivalent number
- Reason C – No TIN is required. (Note: Only select this reason if the domestic law of the relevant jurisdiction does not require the TIN to be disclosed)

Country of Tax Residence 1	TIN 1/TFN 1	Reason if no TIN:		
<input type="text"/>	<input type="text"/>	A <input type="checkbox"/>	B <input type="checkbox"/>	C <input type="checkbox"/>
Country of Tax Residence 2 (if applicable)	TIN 2/TFN 2 (if applicable)	A <input type="checkbox"/>	B <input type="checkbox"/>	C <input type="checkbox"/>
<input type="text"/>	<input type="text"/>	A <input type="checkbox"/>	B <input type="checkbox"/>	C <input type="checkbox"/>
Country of Tax Residence 3 (if applicable)	TIN 3/TFN 3 (if applicable)	A <input type="checkbox"/>	B <input type="checkbox"/>	C <input type="checkbox"/>
<input type="text"/>	<input type="text"/>	A <input type="checkbox"/>	B <input type="checkbox"/>	C <input type="checkbox"/>

- You certify the tax residence countries provided represent all countries considered a tax resident. If the Account Holder has any additional countries of tax residence, please attach a statement to this form containing the Country and TIN for each additional country.

## 8.4 FATCA STATUS – COMPANIES, TRUSTS AND OTHER TYPES OF ENTITIES

Provide all jurisdictions outside of Australia where the Account Holder is a tax resident.

Is the Account Holder a specified U.S. person? A U.S. person includes a U.S. citizen or resident alien of the U.S. even if residing outside the U.S.

Yes Provide a U.S. Taxpayer Identification Number (TIN):  *(Proceed to Section 8.5 and 8.7)*

No *(Continue the non U.S Person Certification below)*

Non U.S Person Certification

Select only a single category. Select a classification that matches your FATCA status:

- Exempt Beneficial Owner (includes self-managed superannuation fund) *(Proceed to Section 8.5 and 8.7)*
- Active Non-Financial Entity (Non U.S.) *(Proceed to Section 8.5 and 8.7)*
- Passive Non-Financial Entity (Non U.S.) *(Complete Section 8.5, 8.6 and 8.7)*
- Direct Reporting Non-Financial Entity (Non U.S.) *(Provide GIIN in Section 8.2 then proceed to Section 8.5 and 8.7)*
- Participating Foreign Financial Institution *(Provide GIIN in Section 8.2 then proceed to Section 8.5 and 8.7)*
- Local/Partner Jurisdiction Foreign Financial Institution *(Provide GIIN in Section 8.2 then proceed to Section 8.5 and 8.7)*
- Deemed-Compliant Foreign Financial Institution. Select deemed-complaint category:
- Passive Non-Financial Entity (Non U.S.) *(Complete Section 8.5 and 8.7)*
  - Direct Reporting Non-Financial Entity (Non U.S.) *(Provide GIIN in Section 8.2 then proceed to Section 8.5 and 8.7)*
  - Participating Foreign Financial Institution *(Provide GIIN in Section 8.2 then proceed to Section 8.5 and 8.7)*
  - Local/Partner Jurisdiction Foreign Financial Institution *(Provide GIIN in Section 8.2 then proceed to Section 8.5 and 8.7)*
- Nonparticipating Foreign Financial Institution *(Proceed to Section 8.5 and 8.7)*
- Sponsored Direct Reporting Non-Financial Entity (Non U.S.) *(Provide GIIN and Sponsor's name in Section 8.2, proceed to Section 8.5 and 8.7)*
- Other – describe the FATCA status *(Proceed to Section 8.5 and 8.7)*

## 8.5 CRS STATUS – COMPANIES, TRUSTS AND OTHER TYPES OF ENTITIES

Is the entity an Investment Entity managed by another Financial Institution?

- Yes - If any tax residence country provided is not a participating CRS jurisdiction, then complete Section 8.6 and 8.7
- No *(Proceed to the NFE section that follows below)*

If the Account Holder is a Non-Financial Entity (NFE), select a classification that matches your CRS status:

- Non-Reporting Financial Institution *(Proceed to Section 8.7)*
- Other Active Non-Financial Entity *(Proceed to Section 8.7)*
- Passive Non-Financial Entity *(Complete Section 8.6 and 8.7)*
- Government Entity, International Organisation and Central Bank *(Proceed to Section 8.7)*
- A corporation, the stock of which is regularly traded on an established securities market

Name of Securities Market:

Name of Related Entity:

- Other – describe the CRS status *(Proceed to Section 8.6)*



## 8.6 CONTROLLING PERSONS (INCLUDES BENEFICIARY DETAILS UNDER SECTIONS 8.1 and 8.2)

If there is a change in Controlling Persons/Beneficial Ownership, please submit an updated form within 30 days

CONTROLLING PERSON 1 AND/OR  BENEFICIAL OWNER 1

First Name



Current Residential Address

Suburb State Postcode Country





DOB (DD/MM/YYYY)

City/Town of Birth

Country of Birth




Provide all jurisdictions where the Account Holder is a tax resident

If no TIN is available, please select one of the reasons below against the appropriate country.

- Reason A – The country where the Account Holder is liable to pay tax does not issue TINs to its residents
- Reason B – The Account Holder is otherwise unable to obtain a TIN or equivalent number
- Reason C – No TIN is required. (Note: Only select this reason if the domestic law of the relevant jurisdiction does not require the TIN to be disclosed)

Country of Tax Residence 1

TIN 1/TFN 1

Reason if no TIN:



A  B  C

Country of Tax Residence 2 (if applicable)

TIN 2/TFN 2 (if applicable)



A  B  C

Country of Tax Residence 3 (if applicable)

TIN 3/TFN 3 (if applicable)



A  B  C

You certify the tax residence countries provided represent all countries considered a tax resident.

If the Account Holder has any additional countries of tax residence, please attach a statement to this form containing the Country and TIN for each additional country.

CONTROLLING PERSON AND/OR  BENEFICIAL OWNER 2

First Name

Family Name/Surname

Current Residential Address

Suburb State Postcode Country





DOB (DD/MM/YYYY)

City/Town of Birth

Country of Birth




Provide all jurisdictions where the Account Holder is a tax resident

If no TIN is available, please select one of the reasons below against the appropriate country.

- Reason A – The country where the Account Holder is liable to pay tax does not issue TINs to its residents
- Reason B – The Account Holder is otherwise unable to obtain a TIN or equivalent number
- Reason C – No TIN is required. (Note: Only select this reason if the domestic law of the relevant jurisdiction does not require the TIN to be disclosed)

Country of Tax Residence 1

TIN 1/TFN 1

Reason if no TIN:



A  B  C

Country of Tax Residence 2 (if applicable)

TIN 2/TFN 2 (if applicable)



A  B  C

Country of Tax Residence 3 (if applicable)

TIN 3/TFN 3 (if applicable)



A  B  C

You certify the tax residence countries provided represent all countries considered a tax resident.

If the Account Holder has any additional countries of tax residence, please attach a statement to this form containing the Country and TIN for each additional country.

If there are more than 2 Controlling Persons or Beneficial Owners or Countries of Tax Residence, please attach details to this Application Form.

## 8.7 DECLARATIONS AND SIGNATURE

- You acknowledge and agree that information contained in this form and information regarding the account(s) set out above may be reported to the Australian Taxation Office (ATO) as required under the relevant laws and the ATO may provide the information to the country or countries in which I/We/Account Holder am/are/is resident for tax purposes.
- You undertake to advise the relevant trustee/responsible entity and/or their relevant agent of any change in circumstances which causes the information contained herein to become incorrect and to provide them with a suitably updated certification within 30 days of such change in circumstances.
- You certify that you are the Account Holder (or I you are authorised to sign for the Account Holder) of all the account(s) to which this form relates.
- You declare that all statements made on this form/in this declaration are, to the best of my/our knowledge and belief, true correct and complete.

Signature

Name of Signer

Capacity in which Signing (if not signed by account holder)

Date

Signature

Name of Signer

Capacity in which Signing (if not signed by account holder)

Date

## 9. FINANCIAL ADVISER DETAILS

Use this section to tell us about your registered financial adviser. If you change your financial adviser, it's important to let us know immediately.

### 9.1 ADVISER AND DEALER GROUP



**NOTE:** The details below are to be completed by your financial adviser

Notice to financial adviser: by completing this section of the application form, you are confirming that you are an ASIC registered financial adviser and hold a current Australian Financial Services Licence (AFSL).

Financial Adviser's full name

Financial adviser/authorized representative number (given by ASIC)

Dealer group name

AFS Licence number

ABN

Contact details

Phone number

Email address:

Financial Adviser's Signature

Date

## 10. DECLARATIONS, ACKNOWLEDGMENTS AND SIGNATURES

### 10.1 DECLARATIONS AND ACKNOWLEDGEMENTS: When you apply to invest, you (the applicant(s)) confirm:

The named that is applying for investments in the selected Fund(s), declares that the details given in this Application Form are true and correct. By completing this application I/we acknowledge that I/we were given access to a complete copy of the PDS(s) at the same time (and by the same means) as accessing this application. I/We declare that by signing and lodging this Application Form, I/we represent and acknowledge that I/we have read and understood the Offering Document(s) to which the Application Form relates. I/We declare that by signing and lodging this Application Form, I/we represent and acknowledge that I/we have read and understood the Target Market Determination of the Fund to which the Application Form relates. I/We acknowledge that by signing the application, I/we:

- a) agree to become bound by the provisions of the Constitution(s) of the Fund(s), as may be amended from time to time;
- b) agree to be bound by the terms of the relevant Offering Document(s);
- c) agree that the Constitution(s) and the Offering Document(s) contain all of the terms and conditions that govern my/our investment in the Fund(s);
- d) provide consent to Lazard to use and disclose the information I/we have provided in this application as outlined in the "Privacy" section in the Offering Document(s);
- e) have the permission of any other person whose personal information we have provided, to disclose their information to Lazard and have their consent for their information to be used and disclosed as outlined in the "Privacy" section in the Offering Document(s) and any Updated Information;
- f) represent that if outside Australia, my/our application and its acceptance by Lazard does not breach applicable laws of the jurisdiction of the applicant;
- g) agree that Lazard may decide to delay or refuse any application or redemption if I/we do not provide the AML/CTF, FATCA and/or CRS information requested or Lazard is not satisfied as to my/our identity and Lazard will not incur any liability to me/us if it does so;
- h) have considered the appropriateness of the Fund(s) to my investment objectives and needs and have not received advice from Lazard;
- i) warrant that I/we am/are not a United States citizen(s) or a resident(s) of the United States for taxation purposes (US Person), nor do I/we act on behalf of or for the benefit of any US Person unless otherwise disclosed and I/we agree to promptly notify Lazard if I/we become a US Person
- j) agree to promptly provide Lazard any information required from time to time to enable Lazard to comply with the US Foreign Account Tax Compliance Act and the Common Reporting Standard, together with the supporting regulations and any related Australian law designed to implement these regimes, and consent to Lazard to report relevant information to the ATO and exchanged with tax authorities of another country or countries in which I/we may be tax resident where those countries (or tax authorities in those countries) have entered into agreements with Australia to exchange financial account information. I/we agree to promptly provide an updated self-certification where any change in circumstance occurs which causes any of the information contained in this form to be incorrect
- k) if this application is signed by an attorney, the attorney states that there is no notice of revocation of the power of attorney under which this application is signed;
- l) any tax file number supplied at any time may be applied to this investment and previous or future investments in my/our name(s)
- m) agree that any election I/we have made to receive annual reports electronically is taken to be given by me the time I/we are registered as a unit holder of the selected Fund(s) on this application; and
- n) to the extent this form has been completed, or is accompanied by documentation completed or prepared, by the holder of an Australian Financial Services Licence (an AFS Licensee) who, in its capacity as an AFS Licensee, has arranged or is arranging the investment to which this Application Form relates, represent and warrant that all information given to the relevant AFS Licensee in connection with such arrangement is true and correct.

I/We acknowledge and understand that:

- a) units in the Fund(s) do not represent deposits or other liabilities of the Lazard Group;
- b) investing in the Fund(s) is subject to investment risk, including possible delays in repayment and loss of income and principal invested; and
- c) neither Lazard, Lazard Group nor any other entity guarantee the performance of the Fund(s) or the repayment of capital invested in the Fund(s).

**10.2 SIGNING:** Applicants must sign in accordance with the instructions below in the boxes provided

Individual	Where the investment is in one name, the sole investor must sign.
Joint Holding	Where the investment is in more than one name, all investors must sign. If more than two signatures are required, please attach an additional page with the full names of each account holder, their signatures, and date.
Companies	Where the company has a sole director who is also the sole company secretary, this form must be signed by that person. If the company (pursuant to section 204A of the Corporations Act 2001) does not have a company secretary, a sole director can also sign alone. Otherwise this form must be signed by a director jointly with either another director or a company secretary. Please indicate the capacity in which the form is signed.
Trust	The trustee(s) must sign this form. Trustee(s) signing on behalf of the trust confirm that the trustee(s) is/are acting in accordance with such designated powers and authority under the trust deed.
Power of Attorney	If signing under a Power of Attorney and you have not already lodged the Power of Attorney document, please attach a certified copy of the Power of Attorney annotated with the following: I/We attest that the Power of Attorney has not been rescinded or revoked and that the person who gave the Power of Attorney is still living.

Signature of investor 1, Director or Authorised Signatory

Please print full name

Date

Company officer (please indicate company capacity):

- Director
- Sole Director and Company Secretary
- Authorised Signatory

Signature of investor 2, Director/Company Secretary or Authorised Signatory

Please print full name

Date

Company officer (please indicate company capacity):

- Director
- Company Secretary
- Authorised Signatory

**APPENDIX A**

All copies of documents forwarded must be certified as a correct copy by a person who in the State or Territory of certification has the power to witness a Statutory Declaration.

**People who can certify documents or extracts are:**

- A lawyer, being 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)
- Financial adviser or financial planner
- 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 the Peace
- A notary public (for the purposes of the Statutory Declaration Regulations 1993)
- A police officer
- 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 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 Licences
- 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