

Phone

Within Australia: 1300 050 207
International: +61 2 8022 7495

Email

contrarius@unitregistry.com.au

Tax File Numbers, Australian Business Numbers or Exemptions

Use this form if you are an existing investor and wish to update your Tax File Number (TFN), Australian Business Number (ABN) or advise of a reason for exemption.

Complete all sections in BLOCK letters and using a black pen. If you make an error while completing this form, do not use correction fluid. Cross out your mistakes and initial your changes.

1. Please double check that you have completed the following:

- written your account number and account name as it appears on your latest statement
- completed the tax section relevant to you
- signed the form as per the 'Acknowledgements and signatures' in section 3.

2. Send your documents to us.

You can return your form by post or email according to the details below:

Send by post: Contrarius Funds Unit Registry
GPO Box 804
Melbourne VIC 3001

Scan and email to: contrarius.forms@unitregistry.com.au

Please include your account number in the subject line of your email.

Legal Notices

Equity Trustees Limited (ABN 46 004 031 298, AFSL No. 240975) (EQT) is the issuer of units in Contrarius Global Equity Fund (Australia Registered), Contrarius Global Balanced Fund (Australia Registered), Contrarius Australia Equity Fund, and Contrarius Australia Balanced Fund

Your privacy is important to us. Personal information is collected on this form by EQT and its delegates for the purposes of maintaining the register of unitholders, facilitating distribution payments and other unit holder communications required or permitted by the Corporations Act 2001 or other legislation. We will treat all personal information in accordance with Equity Trustees' Privacy Policy, a copy of which is available at www.eqt.com.au.

1 Investor details

Account number

Account name

2 Tax File Numbers , Australian Business Numbers or exemptions

Individuals

Please provide your TFN or reason for exemption. If you are an Australian resident and do not provide your TFN, or reason for exemption, you will be taxed at the highest marginal tax rate plus the Medicare levy.

TFN

Reason for exemption

Companies

Please provide your ABN

ABN

Trusts or superannuation funds

Please provide the below information which is applicable to you.

ABN (applicable if you are a trust or a self-managed superannuation fund registered with the Australian Tax Office)

TFN

Australian Registered Scheme Number (ARSN) (applicable if your trust is registered with ASIC)

3 Acknowledgements and signatures

You agree that by completing and signing this form, you

- authorise us to act according with the instructions on this form
- acknowledge that the instructions on this form supersede, and has priority over, all previous instructions received by us, and
- agree to indemnify us from and against all losses, costs, expenses, claims, actions or proceedings brought against us in connection with following your instructions on this form.

Signing instructions

Individual/Sole Trader – where the investment is in one name, the account holder must sign.

Joint Holding – where the investment is in more than one name, all of the account holders must sign.

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 you have not already lodged the Power of Attorney with us, please attach a certified copy of the Power of Attorney document that includes Certificate of Witness and Statement of Acceptance and Certified Identification Document of the Power of Attorney. I/We attest that the Power of Attorney has not been rescinded or revoked and that the Donor is still living.

Signature of investor 1, director or authorised signatory

Please print full name

Date (DD/MM/YYYY)

 / /

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 (DD/MM/YYYY)

 / /

Company officer (please indicate company capacity)

- ☐ Director
- ☐ Company secretary
- ☐ Authorised signatory