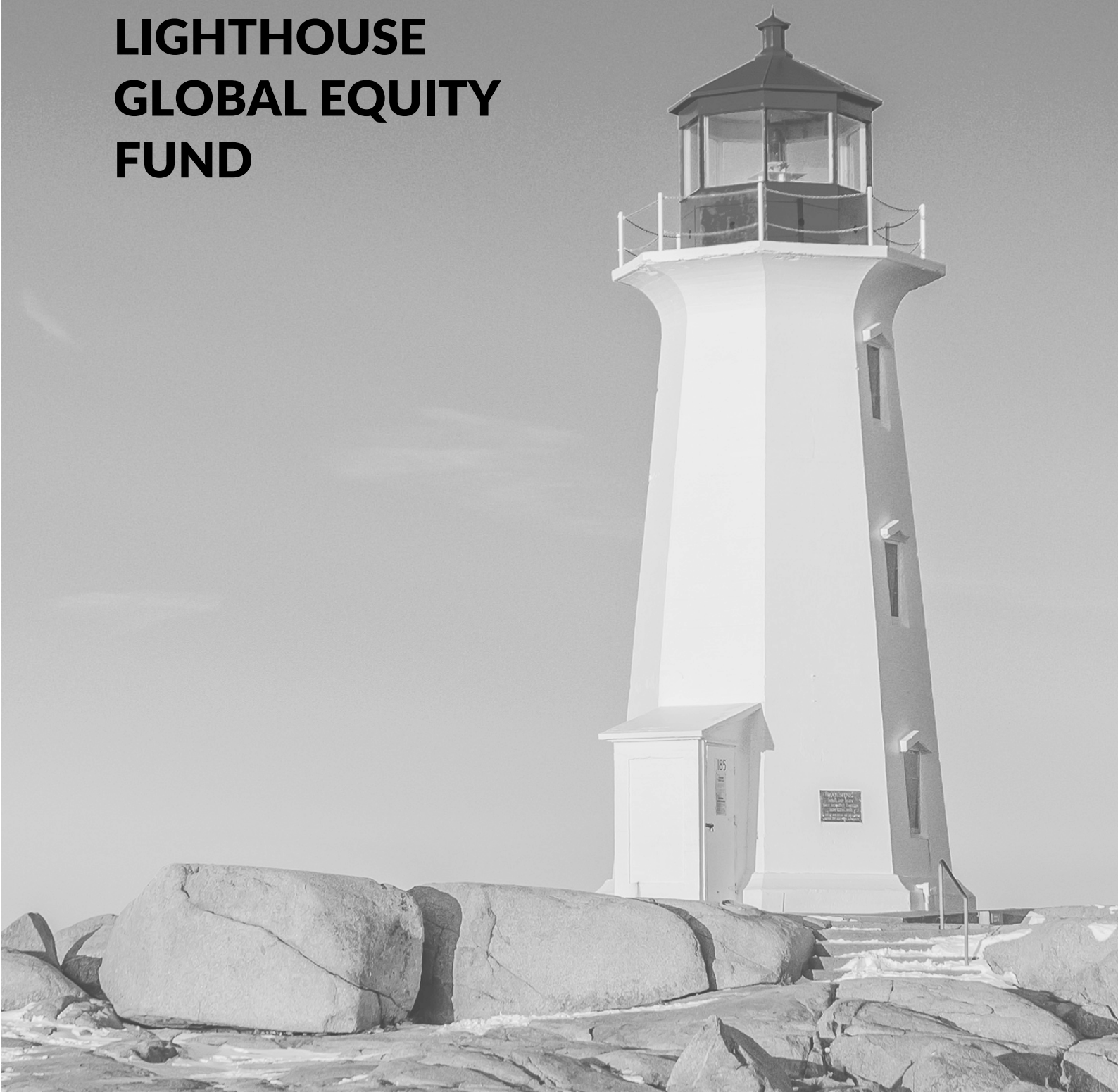


# LIGHTHOUSE GLOBAL EQUITY FUND



Application Form



# Instructions

This Application Form should be read in conjunction with the Product Disclosure Statement for the Lighthouse Global Equity Fund.

Please send your completed Application Form, along with any other relevant documentation to us:

By email:

[contact@fundrock.com](mailto:contact@fundrock.com)

By post:

Operations Team  
FundRock NZ Limited  
PO Box 25003  
Wellington 6140  
New Zealand

## Identity Verification

The Anti-Money Laundering and Countering Financing of Terrorism Act 2009 requires us to verify the identity of new investors in the Lighthouse Investment Funds. This means your application must be accompanied by relevant certified documents as outlined in the Checklist for Identity Verification and the Certification of Documents sections below.

For natural persons, verification of identity and proof of address can be done online, by us, instead, using Cloudcheck at no cost to you. If you elect to use the Cloudcheck service:

- you must tick the appropriate box under the Declaration section on page 13;
- you must send in non-certified copies of those documents related to your identity (e.g. passport) and proof of address (e.g. utility bill) with your application; and
- you must send in original/certified copies of all the other documents listed in the Checklist for Identity Verification that is related to your investor type (e.g. for individual or joint account, an original or certified true copy of bank deposit slip, bank statement or confirmation from your bank verifying the name and account number)

Our requirements may change from time to time and we may be required to ask you for additional information in the future, including if we are unable to verify your identity by using the Cloudcheck service.

## Privacy Act 2020 Notice

This statement relates to the personal information that you are providing to FundRock NZ Limited (**FundRock**), as manager of the Lighthouse Investment Funds, by way of this application and any subsequent personal information which you provide in the future.

The personal information you have supplied may be collected, used, stored, and shared by FundRock, Lighthouse Funds Limited (**Lighthouse**), Public Trust, Adminis (and any of their related entities and service providers) for the purposes of enabling them to arrange and manage your investment, and to contact you in relation to your investment.

FundRock will provide you (on request) with the name and address of any entity to which it has disclosed your information. You have the right to access all personal information held about you by FundRock. If any of the information is incorrect, you have the right to request to have it corrected.

# 1. Type Of Investor

WHAT TYPE OF INVESTOR ARE YOU?

☐ Individual ☐ Joint ownership

If the investor is an individual or individuals acting jointly then complete Section 2.

☐ Company ☐ Trust ☐ Partnership

☐ Retirement scheme ☐ Power of attorney ☐ Estate

If the investor is an entity that is not one or more individuals then complete Section 3.

IF THE INVESTOR IS A COMPANY IS THIS COMPANY A VEHICLE FOR HOLDING PERSONAL ASSETS?

☐ Yes

☐ No

IF THE INVESTOR IS A COMPANY OR PARTNERSHIP DO YOU HAVE ANY NOMINEE DIRECTORS, NOMINEE SHAREHOLDERS OR NOMINEE PARTNERS?

A nominee director, nominee shareholder or nominee partner is a person who follows the instructions or directions of another person who is not a director, shareholder or partner. The nominee is listed as a director, shareholder or partner but has no control or beneficial ownership and is only acting on the instructions of the true owner(s).

If yes then as part of this application you will need to provide the names and identity verification for these nominees.

☐ Yes

☐ No

ARE YOU AN EXISTING UNITHOLDER?

☐ Yes

Unitholder Number (if known):

☐ No

ARE YOU A PORTFOLIO INVESTOR PROXY (PIP)?

Portfolio investor proxies are also known as custodians, or nominees, or wrap platforms.

☐

Yes

☐

No

WHAT IS THE PRIMARY SOURCE OF THE MONEY YOU INTEND TO INVEST WITH US?

☐

Accumulated personal savings

☐

Accumulated business savings

☐

The sale of property

☐

The sale of a business

☐

Inherited family wealth

☐

Other (please specify)

WHAT IS THE PRIMARY REASON FOR OPENING THIS ACCOUNT?

☐

Long-term investment

☐

Income generation

☐

Saving for retirement

☐

Other (please specify)

☐

Saving for a house deposit

HOW OFTEN DO YOU INTEND TO TRANSACT ON THIS ACCOUNT?

☐

Regularly (ie monthly)

☐

Occasionally (ie several times a year)

☐

Infrequently (ie annually)

☐

This is a one-off investment

OVER THE NEXT THREE TO FIVE YEARS HOW MUCH DO YOU HOPE TO INVEST IN THIS ACCOUNT?

☐

Less than \$50,000

☐

\$50,000 to \$500,000

☐

More than \$500,000

## 2. Investor Details For Individuals And Joint Accounts

Complete this section if the investment is being made by an individual or by individuals acting jointly.

### INDIVIDUAL ONE

|                |  |
|----------------|--|
| Title:         |  |
| First Name(s): |  |
| Surname:       |  |

|                |   |   |   |   |   |   |   |   |
|----------------|---|---|---|---|---|---|---|---|
| Date Of Birth: | D | D | M | M | Y | Y | Y | Y |
| Citizenship:   |   |   |   |   |   |   |   |   |

Please provide proof of identification. See page 16 for guidance on acceptable forms of proof of identity.

|                |  |
|----------------|--|
| Email Address: |  |
| Mobile Phone:  |  |

|               |  |
|---------------|--|
| Home Address: |  |
| Suburb:       |  |
| City:         |  |
| Country:      |  |
| Postcode:     |  |

Please provide proof of your home address. See page 16 for guidance on acceptable forms of proof of address.

|                |                                |                                    |
|----------------|--------------------------------|------------------------------------|
| NZ Tax Status: | <input type="radio"/> Resident | <input type="radio"/> Non-resident |
|----------------|--------------------------------|------------------------------------|

|                    |                                                 |                            |                            |                          |
|--------------------|-------------------------------------------------|----------------------------|----------------------------|--------------------------|
| IRD Number:        |                                                 |                            |                            |                          |
| PIR <sup>1</sup> : | <input type="radio"/> 0%                        | <input type="radio"/> 0.5% | <input type="radio"/> 7.5% | <input type="radio"/> 8% |
|                    | <input type="radio"/> Notified Foreign Investor |                            |                            |                          |

Either circle the options that apply to you, or strike out those options that do not apply to you.

The United States legislation known as the Foreign Account Tax Compliance Act (**FATCA**) requires us to establish if you are a United States citizen or tax resident. If you are a citizen or tax resident of the United States then please provide your US Taxpayer Identification Number (**TIN**) here. Note that your TIN will typically be your Social Security Number.

|         |  |
|---------|--|
| US TIN: |  |
|---------|--|

The OECD's Common Reporting Standard (**CRS**) requires us to establish if you are a tax resident in any country other than New Zealand or the United States. If you are a tax resident of any country other than New Zealand or the United States then please indicate the country, or countries, here.

|                |  |
|----------------|--|
| Tax Residency: |  |
| Tax Number:    |  |

|                |  |
|----------------|--|
| Tax Residency: |  |
| Tax Number:    |  |

|                |  |
|----------------|--|
| Tax Residency: |  |
| Tax Number:    |  |

|                |  |
|----------------|--|
| Tax Residency: |  |
| Tax Number:    |  |

|                                                                    |                           |                          |
|--------------------------------------------------------------------|---------------------------|--------------------------|
| Are you a controlling person for an entity that is subject to CRS? | <input type="radio"/> Yes | <input type="radio"/> No |
|--------------------------------------------------------------------|---------------------------|--------------------------|

See the notes on CRS on page 18. Either circle the option that applies to you, or strike out the option that does not apply to you.

<sup>1</sup> The PIR is your Prescribed Investor Rate. If you are unsure what your PIR is then visit [www.ird.govt.nz](http://www.ird.govt.nz) and search for "Prescribed Investor Rate", or speak to your tax advisor. If your PIR is invalid or you do not choose one then the default rate of 28% will apply. For joint investors we will use the highest PIR. For information on Notified Foreign Investors please refer to [Non-residents' PIE income](#). Further information can also be found in the Other Material Information (OMI) refer to the "Foreign Residents" section

## INDIVIDUAL TWO

|                |  |
|----------------|--|
| Title:         |  |
| First Name(s): |  |
| Surname:       |  |

|                |   |   |   |   |   |   |   |   |
|----------------|---|---|---|---|---|---|---|---|
| Date Of Birth: | D | D | M | M | Y | Y | Y | Y |
| Citizenship:   |   |   |   |   |   |   |   |   |

Please provide proof of identification. See page 16 for guidance on acceptable forms of proof of identity.

|                |  |
|----------------|--|
| Email Address: |  |
| Mobile Phone:  |  |

|               |  |
|---------------|--|
| Home Address: |  |
| Suburb:       |  |
| City:         |  |
| Country:      |  |
| Postcode:     |  |

Please provide proof of your home address. See page 16 for guidance on acceptable forms of proof of address.

|                |                                |                                    |
|----------------|--------------------------------|------------------------------------|
| NZ Tax Status: | <input type="radio"/> Resident | <input type="radio"/> Non-resident |
|----------------|--------------------------------|------------------------------------|

|             |                                                 |                            |                            |                          |
|-------------|-------------------------------------------------|----------------------------|----------------------------|--------------------------|
| IRD Number: |                                                 |                            |                            |                          |
| PIR:        | <input type="radio"/> 0%                        | <input type="radio"/> 0.5% | <input type="radio"/> 7.5% | <input type="radio"/> 8% |
|             | <input type="radio"/> Notified Foreign Investor |                            |                            |                          |

Either circle the options that apply to you, or strike out those options that do not apply to you.

The United States legislation known as the Foreign Account Tax Compliance Act (**FATCA**) requires us to establish if you are a United States citizen or tax resident. If you are a citizen or tax resident of the United States then please provide your US Taxpayer Identification Number (**TIN**) here. Note that your TIN will typically be your Social Security Number.

|         |  |
|---------|--|
| US TIN: |  |
|---------|--|

The OECD's Common Reporting Standard (**CRS**) requires us to establish if you are a tax resident in any country other than New Zealand or the United States. If you are a tax resident of any country other than New Zealand or the United States then please indicate the country, or countries, here.

|                |  |
|----------------|--|
| Tax Residency: |  |
| Tax Number:    |  |

|                |  |
|----------------|--|
| Tax Residency: |  |
| Tax Number:    |  |

|                |  |
|----------------|--|
| Tax Residency: |  |
| Tax Number:    |  |

|                |  |
|----------------|--|
| Tax Residency: |  |
| Tax Number:    |  |

|                                                                    |                           |                          |
|--------------------------------------------------------------------|---------------------------|--------------------------|
| Are you a controlling person for an entity that is subject to CRS? | <input type="radio"/> Yes | <input type="radio"/> No |
|--------------------------------------------------------------------|---------------------------|--------------------------|

See the notes on CRS on page 18. Either circle the option that applies to you, or strike out the option that does not apply to you.

### INDIVIDUAL THREE

|                |  |
|----------------|--|
| Title:         |  |
| First Name(s): |  |
| Surname:       |  |

|                |   |   |   |   |   |   |   |   |
|----------------|---|---|---|---|---|---|---|---|
| Date Of Birth: | D | D | M | M | Y | Y | Y | Y |
| Citizenship:   |   |   |   |   |   |   |   |   |

Please provide proof of identification. See page 16 for guidance on acceptable forms of proof of identity.

|                |  |
|----------------|--|
| Email Address: |  |
| Mobile Phone:  |  |

|               |  |
|---------------|--|
| Home Address: |  |
| Suburb:       |  |
| City:         |  |
| Country:      |  |
| Postcode:     |  |

Please provide proof of your home address. See page 16 for guidance on acceptable forms of proof of address.

|                |                                |                                    |
|----------------|--------------------------------|------------------------------------|
| NZ Tax Status: | <input type="radio"/> Resident | <input type="radio"/> Non-resident |
|----------------|--------------------------------|------------------------------------|

|             |                                                 |                            |                            |                          |
|-------------|-------------------------------------------------|----------------------------|----------------------------|--------------------------|
| IRD Number: |                                                 |                            |                            |                          |
| PIR:        | <input type="radio"/> 0%                        | <input type="radio"/> 0.5% | <input type="radio"/> 7.5% | <input type="radio"/> 8% |
|             | <input type="radio"/> Notified Foreign Investor |                            |                            |                          |

Either circle the options that apply to you, or strike out those options that do not apply to you.

The United States legislation known as the Foreign Account Tax Compliance Act (**FATCA**) requires us to establish if you are a United States citizen or tax resident. If you are a citizen or tax resident of the United States then please provide your US Taxpayer Identification Number (**TIN**) here. Note that your TIN will typically be your Social Security Number.

|         |  |
|---------|--|
| US TIN: |  |
|---------|--|

The OECD's Common Reporting Standard (**CRS**) requires us to establish if you are a tax resident in any country other than New Zealand or the United States. If you are a tax resident of any country other than New Zealand or the United States then please indicate the country, or countries, here.

|                |  |
|----------------|--|
| Tax Residency: |  |
| Tax Number:    |  |

|                |  |
|----------------|--|
| Tax Residency: |  |
| Tax Number:    |  |

|                |  |
|----------------|--|
| Tax Residency: |  |
| Tax Number:    |  |

|                |  |
|----------------|--|
| Tax Residency: |  |
| Tax Number:    |  |

|                                                                    |                           |                          |
|--------------------------------------------------------------------|---------------------------|--------------------------|
| Are you a controlling person for an entity that is subject to CRS? | <input type="radio"/> Yes | <input type="radio"/> No |
|--------------------------------------------------------------------|---------------------------|--------------------------|

See the notes on CRS on page 18. Either circle the option that applies to you, or strike out the option that does not apply to you.

### 3. Investor Details For Entities That Are Not Natural Persons

Complete this section if the investment is being made by an entity that is not one or more individuals – such as if the investment is being made by a company, trust or partnership.

#### THE ENTITY

|                     |  |           |  |
|---------------------|--|-----------|--|
| Full Legal Name:    |  |           |  |
| Registered Address: |  |           |  |
|                     |  |           |  |
| City:               |  |           |  |
| Country:            |  | Postcode: |  |
| Postal Address:     |  |           |  |
|                     |  |           |  |
| City:               |  |           |  |
| Country:            |  | Postcode: |  |
| Telephone:          |  |           |  |

#### TAX STATUS

|                |                                |                                    |
|----------------|--------------------------------|------------------------------------|
| NZ Tax Status: | <input type="radio"/> Resident | <input type="radio"/> Non-resident |
|----------------|--------------------------------|------------------------------------|

|             |                                                 |                            |                            |                          |
|-------------|-------------------------------------------------|----------------------------|----------------------------|--------------------------|
| IRD Number: |                                                 |                            |                            |                          |
| PIR:        | <input type="radio"/> 0%                        | <input type="radio"/> 0.5% | <input type="radio"/> 7.5% | <input type="radio"/> 8% |
|             | <input type="radio"/> Notified Foreign Investor |                            |                            |                          |

Either circle the options that apply to you, or strike out those options that do not apply to you.

The United States legislation known as the Foreign Account Tax Compliance Act (**FATCA**) requires us to establish if you are a United States citizen or tax resident.

|                                                                            |                           |                          |
|----------------------------------------------------------------------------|---------------------------|--------------------------|
| Is the entity a US company, or a trust or partnership for US tax purposes? | <input type="radio"/> Yes | <input type="radio"/> No |
|----------------------------------------------------------------------------|---------------------------|--------------------------|

If Yes then please provide your US Taxpayer Identification Number (TIN) here.

|         |  |
|---------|--|
| US TIN: |  |
|---------|--|

If No then which one of the following describes your FATCA status?

|                       |                                                |
|-----------------------|------------------------------------------------|
| <input type="radio"/> | New Zealand financial institution              |
| <input type="radio"/> | Participating foreign financial institution    |
| <input type="radio"/> | Partner jurisdiction financial institution     |
| <input type="radio"/> | Deemed-compliant foreign financial institution |
| <input type="radio"/> | Active non-financial foreign entity            |
| <input type="radio"/> | Passive non-financial foreign entity           |
| <input type="radio"/> | Exempt beneficial owner                        |

See the notes on FATCA on page 18. Either circle the option that applies to you, or strike out the options that do not apply to you.

If the entity is a financial institution for FATCA (any of the first four options in the table on the previous page) then it will need to provide a Global Intermediary Identification Number (**GIIN**).

|          |  |
|----------|--|
| US GIIN: |  |
|----------|--|

If the entity is a Passive Non-Financial Foreign Entity **and** any controlling person(s) of the entity is a US citizen or tax resident then you need to provide their US Taxpayer Identification Number (**TIN**).

|         |  |
|---------|--|
| US TIN: |  |
|---------|--|

|         |  |
|---------|--|
| US TIN: |  |
|---------|--|

**A controlling person is any natural person who exercises control over an entity. In the case of a trust the settlor, the protector (if any), the trustees, and some beneficiaries may be considered controlling persons. Note that some trusts domiciled in New Zealand may be considered Passive Non-Financial Foreign Entities under FATCA.**

The OECD's Common Reporting Standard (**CRS**) requires us to establish if the entity (including trusts) are a tax resident in any country other than New Zealand or the United States. If the entity is a tax resident of any country other than New Zealand or the United States then please indicate the country, or countries, here.

|                |  |
|----------------|--|
| Tax Residency: |  |
| Tax Number:    |  |

|                |  |
|----------------|--|
| Tax Residency: |  |
| Tax Number:    |  |

For CRS purposes is the entity:

|                       |                                        |
|-----------------------|----------------------------------------|
| <input type="radio"/> | A financial institution.               |
| <input type="radio"/> | An active non-financial foreign entity |
| <input type="radio"/> | A passive non-financial foreign entity |

**See the notes on CRS on page 18. Either circle the option that applies to you, or strike out the option that does not apply to you.**

If the entity is a Passive Non-Financial Foreign Entity **and** any controlling person(s) of the entity is a tax resident in any other country than New Zealand then you need to specify the details for that person(s).

|                |  |
|----------------|--|
| Name           |  |
| Type:          |  |
| Tax Residency: |  |
| Tax Number:    |  |

|                |  |
|----------------|--|
| Name:          |  |
| Type:          |  |
| Tax Residency: |  |
| Tax Number:    |  |

**A controlling person is any natural person who exercises control over an entity. In the case of a trust the settlor, the protector (if any), the trustees, and some beneficiaries may be considered controlling persons. Note that some trusts domiciled in New Zealand may be considered Passive Non-Financial Foreign Entities under CRS.**

# AUTHORISED REPRESENTATIVES (DIRECTORS, TRUSTEES ETC) WHO ARE NATURAL PERSONS

|                |  |
|----------------|--|
| Title:         |  |
| First Name(s): |  |
| Surname:       |  |

|                |   |   |   |   |   |   |   |   |
|----------------|---|---|---|---|---|---|---|---|
| Date Of Birth: | D | D | M | M | Y | Y | Y | Y |
|----------------|---|---|---|---|---|---|---|---|

|                |  |
|----------------|--|
| Email Address: |  |
| Mobile Phone:  |  |

|               |  |
|---------------|--|
| Home Address: |  |
| Suburb:       |  |
| City:         |  |
| Country:      |  |
| Postcode:     |  |

|                            |  |
|----------------------------|--|
| Relationship To Applicant: |  |
|----------------------------|--|

|                |  |
|----------------|--|
| Title:         |  |
| First Name(s): |  |
| Surname:       |  |

|                |   |   |   |   |   |   |   |   |
|----------------|---|---|---|---|---|---|---|---|
| Date Of Birth: | D | D | M | M | Y | Y | Y | Y |
|----------------|---|---|---|---|---|---|---|---|

|                |  |
|----------------|--|
| Email Address: |  |
| Mobile Phone:  |  |

|               |  |
|---------------|--|
| Home Address: |  |
| Suburb:       |  |
| City:         |  |
| Country:      |  |
| Postcode:     |  |

|                            |  |
|----------------------------|--|
| Relationship To Applicant: |  |
|----------------------------|--|

|                |  |
|----------------|--|
| Title:         |  |
| First Name(s): |  |
| Surname:       |  |

|                |   |   |   |   |   |   |   |   |
|----------------|---|---|---|---|---|---|---|---|
| Date Of Birth: | D | D | M | M | Y | Y | Y | Y |
|----------------|---|---|---|---|---|---|---|---|

|                |  |
|----------------|--|
| Email Address: |  |
| Mobile Phone:  |  |

|               |  |
|---------------|--|
| Home Address: |  |
| Suburb:       |  |
| City:         |  |
| Country:      |  |
| Postcode:     |  |

|                            |  |
|----------------------------|--|
| Relationship To Applicant: |  |
|----------------------------|--|

|                |  |
|----------------|--|
| Title:         |  |
| First Name(s): |  |
| Surname:       |  |

|                |   |   |   |   |   |   |   |   |
|----------------|---|---|---|---|---|---|---|---|
| Date Of Birth: | D | D | M | M | Y | Y | Y | Y |
|----------------|---|---|---|---|---|---|---|---|

|                |  |
|----------------|--|
| Email Address: |  |
| Mobile Phone:  |  |

|               |  |
|---------------|--|
| Home Address: |  |
| Suburb:       |  |
| City:         |  |
| Country:      |  |
| Postcode:     |  |

|                            |  |
|----------------------------|--|
| Relationship To Applicant: |  |
|----------------------------|--|

Please provide proof of identification and proof of address for all individuals listed here. See page 16 for guidance on acceptable forms of proof of identity and proof of address.

IF THE ENTITY IS A TRUST

|                |  |                 |   |   |   |   |   |   |   |   |
|----------------|--|-----------------|---|---|---|---|---|---|---|---|
| Type Of Trust: |  | Established On: | D | D | M | M | Y | Y | Y | Y |
|----------------|--|-----------------|---|---|---|---|---|---|---|---|

The types of trust include discretionary trust, non-discretionary trust or charitable trust.

List the named beneficiaries of the trust:

|              |  |                |   |   |   |   |   |   |   |   |
|--------------|--|----------------|---|---|---|---|---|---|---|---|
| Beneficiary: |  | Date Of Birth: | D | D | M | M | Y | Y | Y | Y |
| Beneficiary: |  | Date Of Birth: | D | D | M | M | Y | Y | Y | Y |
| Beneficiary: |  | Date Of Birth: | D | D | M | M | Y | Y | Y | Y |
| Beneficiary: |  | Date Of Birth: | D | D | M | M | Y | Y | Y | Y |
| Beneficiary: |  | Date Of Birth: | D | D | M | M | Y | Y | Y | Y |
| Beneficiary: |  | Date Of Birth: | D | D | M | M | Y | Y | Y | Y |

## 4. Details Of Your Investment

### THE AMOUNT YOU ARE INVESTING

I wish to invest the following amounts (in New Zealand dollars):

| Fund                          | Amount Of Your Initial Investment |
|-------------------------------|-----------------------------------|
| Lighthouse Global Equity Fund |                                   |

**The minimum investment is \$10,000.**

**The account name and number for the fund's custodial bank account will be provided once your account is confirmed to be open.**

### YOUR NOMINATED BANK ACCOUNT FOR RECEIVING DISTRIBUTIONS AND WITHDRAWALS

|                  |  |         |  |
|------------------|--|---------|--|
| Name Of Account: |  |         |  |
| Name Of Bank:    |  | Branch: |  |
| Account Number:  |  |         |  |

**We collect this information on behalf of the Custodian, in order to provide a level of protection against fraud. Any request to withdraw funds held by you will be reviewed against these default instructions before being processed.**

## 5. Declaration

By signing here I confirm that:

1. I have received, read, and retained a copy of the current Lighthouse Investment Funds Product Disclosure Statement for the relevant fund(s) being invested in;
2. I agree to be bound by the terms and conditions of the master trust deed and establishment deeds for Lighthouse Investment Funds, as amended from time to time;
3. I agree and consent to the terms outlined in this Application Form in relation to the Privacy Act 2020 and the supply of personal information and FATCA and CRS related information;
4. I acknowledge that I am authorised to provide personal information on behalf of the applicant and evidence of this authority is provided (in the case of a parent/guardian/other providing information about the applicant);
5. I consent to FundRock providing any information relating to my CRS or FATCA status or CRS or FATCA matters to the New Zealand Inland Revenue Department, and agree to notify FundRock in writing immediately if there is any change which I become aware of which would render any of the above information incorrect, and to re-submit information to FundRock upon request;
6. where applicable, those signing this application form are persons with authority to sign this form on behalf of the entity named in this Application Form;
7. I agree to update the information I have provided if my circumstances change;
8. I consent to receiving electronic communications (including email) from FundRock, Lighthouse, Public Trust, and Adminis relating to my investment in Lighthouse Investment Funds and as otherwise set out in the terms above in relation to the Privacy Act 2020;
9. I authorise FundRock and Lighthouse to disclose information relating to me to any regulatory authority in New Zealand as may be required from time to time under applicable law;
10. I certify that all information given in this form is true and correct;
11. I understand that the value of my investment in Lighthouse Investment Funds is liable to fluctuations and may rise and fall from time to time;
12. I understand that none of FundRock, Lighthouse, Public Trust, Adminis or any other person guarantees my investment in the Lighthouse Investment Funds;
13. I understand the manner in which the fees will be deducted from my investment;
14. I understand that any interest income earned from monies held in the applications/redemption bank account may be retained by FundRock for their own benefit;
15. I agree that in the event this account holds zero units for a period of 6 months or more, FundRock may close the account; and
16. I agree that in the event this account holds a balance of less than \$500 and stays at or below that level for at least three consecutive calendar months, FundRock may close the account and return the remaining account balance to the bank account listed above.

If you would like to have your identification verified online using Cloudcheck, please confirm and tick the appropriate box here. There is no cost to you for using the Cloudcheck identity verification service.

☐ I confirm that I am authorised to provide the personal details presented and I consent, for the purposes of verifying my identity, to the personal information that I have provided being used with and, where necessary, disclosed to third parties, including the following sources: (1) the NZTA for the purpose of checking the Driver Licence and MOTO databases; (2) the Department of Internal Affairs for the purpose of checking the Passport, Birth Certificate and Citizenship Certificate databases; (3) Land Information New Zealand; (4) the Companies Office; (5) Centrix Group Limited, Equifax, Illion and other data sources used by Cloudcheck as required; (6) The Australian Government's Document Verification Service, if presenting an Australian identity document; and I authorise these parties, including any not listed, that may be used by Cloudcheck, to use any information that they hold about me to compare the information that I have provided.

I understand I have the right to complain about any misuse of my personal information which has been collected for the purpose of verifying my identity. Information on how to complain is included within the PDS.

| Signature Of Applicant 1, Director Or Trustee | Date Signed |
|-----------------------------------------------|-------------|
|                                               |             |

☐ I confirm that I am authorised to provide the personal details presented and I consent, for the purposes of verifying my identity, to the personal information that I have provided being used with and, where necessary, disclosed to third parties, including the following sources: (1) the NZTA for the purpose of checking the Driver Licence and MOTO databases; (2) the Department of Internal Affairs for the purpose of checking the Passport, Birth Certificate and Citizenship Certificate databases; (3) Land Information New Zealand; (4) the Companies Office; (5) Centrix Group Limited, Equifax, Illion and other data sources used by Cloudcheck as required; (6) The Australian Government's Document Verification Service, if presenting an Australian identity document; and I authorise these parties, including any not listed, that may be used by Cloudcheck, to use any information that they hold about me to compare the information that I have provided.

I understand I have the right to complain about any misuse of my personal information which has been collected for the purpose of verifying my identity. Information on how to complain is included within the PDS.

| Signature Of Applicant 2, Director Or Trustee | Date Signed |
|-----------------------------------------------|-------------|
|                                               |             |

☐ I confirm that I am authorised to provide the personal details presented and I consent, for the purposes of verifying my identity, to the personal information that I have provided being used with and, where necessary, disclosed to third parties, including the following sources: (1) the NZTA for the purpose of checking the Driver Licence and MOTO databases; (2) the Department of Internal Affairs for the purpose of checking the Passport, Birth Certificate and Citizenship Certificate databases; (3) Land Information New Zealand; (4) the Companies Office; (5) Centrix Group Limited, Equifax, Illion and other data sources used by Cloudcheck as required; (6) The Australian Government's Document Verification Service, if presenting an Australian identity document; and I authorise these parties, including any not listed, that may be used by Cloudcheck, to use any information that they hold about me to compare the information that I have provided.

I understand I have the right to complain about any misuse of my personal information which has been collected for the purpose of verifying my identity. Information on how to complain is included within the PDS.

| Signature Of Applicant 3, Director Or Trustee | Date Signed |
|-----------------------------------------------|-------------|
|                                               |             |

## 6. Checklists For The Information You Need To Provide

### IF YOU ARE APPLYING FOR AN INVESTMENT BY AN INDIVIDUAL OR JOINT ACCOUNT

- ☐ Certified true copy of identification for each applicant with the certification not more than three months old.
- ☐ Original or certified true copy of address verification for each applicant that is not more than three months old.
- ☐ Original or certified true copy of a bank deposit slip, bank statement or confirmation from your bank verifying the account name and number.

### IF YOU ARE APPLYING FOR AN INVESTMENT BY A TRUST

- ☐ Original or certified true copy of the Trust Deed with the certification not more than three months old.
- ☐ Certified true copy of identification for each trustee and beneficial owner with the certification not more than three months old.
- ☐ Original or certified true copy of address verification for each trustee and beneficial owner that is not more than three months old.
- ☐ Original or certified true copy of a bank deposit slip, bank statement or confirmation from your bank verifying the account name and number.
- ☐ Evidence of source(s) of wealth.

**Beneficial owners are any individuals who have effective control that is making the investment or who own 25% or more of the entity making the investment. The beneficial owners of a trust may include a beneficiary of the trust, and any other individual who has effective control over the trust, specific trust property, or the power to amend the trust deed, or to remove or appoint trustees, or to appoint or remove any of the beneficiaries of the trust.**

### IF YOU ARE APPLYING FOR AN INVESTMENT BY A COMPANY

- ☐ Certificate of Incorporation.
- ☐ Trading name (if applicable).
- ☐ Proof of address for the company's registered office that is not more than three months old.
- ☐ List of directors and authorised signatories.
- ☐ Certified true copy of identification for each director, beneficial owner and authorised signatory with the certification not more than three months old.
- ☐ Original or certified true copy of address verification for each director and authorised signatory that is not more than three months old.
- ☐ Original or certified true copy of a bank deposit slip, bank statement or confirmation from your bank verifying the account name and number.

**Beneficial owners are any individuals who have effective control that is making the investment or who own 25% or more of the entity making the investment. The beneficial owners of a company may include shareholders, senior management (e.g. CEO), and any other person with effective control (such as some directors).**

#### IF YOU ARE APPLYING FOR AN INVESTMENT BY A PARTNERSHIP

- ☐ Original or certified true copy of the Partnership Agreement with the certification not more than three months old.
- ☐ Certified true copy of identification for each partner with the certification not more than three months old.
- ☐ Original or certified true copy of address verification for each partner that is not more than three months old.
- ☐ Original or certified true copy of a bank deposit slip, bank statement or confirmation from your bank verifying the account name and number.

#### IF YOU ARE APPLYING FOR AN INVESTMENT UNDER A POWER OF ATTORNEY

- ☐ Certified true copy of identification for each applicant with the certification not more than three months old.
- ☐ Original or certified true copy of address verification for each applicant that is not more than three months old.
- ☐ Original or certified true copy of a bank deposit slip, bank statement or confirmation from your bank verifying the account name and number.
- ☐ Original or certified true copy of the Power of Attorney with the certification not more than three months old.
- ☐ Original or certified true copy of the Certificate of Non-Revocation with the certification not more than three months old.

#### IF YOU ARE APPLYING FOR AN INVESTMENT FOR AN ESTATE

- ☐ Certified true copy of identification for each executor with the certification not more than three months old.
- ☐ Original or certified true copy of address verification for each executor that is not more than three months old.
- ☐ Original or certified true copy of a bank deposit slip, bank statement or confirmation from your bank verifying the account name and number.
- ☐ Original or certified true copy of the Probate with the certification not more than three months old.

# Acceptable Forms Of Supporting Documentation

## PROOF OF IDENTITY

You can choose one of three options for providing proof of identity.

| Option 1                                                                           | Option 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Option 3                                                                                                                                                                                                                                                                                                                                                                                                                      |
|------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| The personal details page of your passport, including the photograph and signature | <p>ONE of the following:</p> <ul style="list-style-type: none"> <li>Your full birth certificate (whether New Zealand or foreign), or</li> <li>A certificate of New Zealand citizenship or an equivalent certificate of citizenship issued by a foreign government.</li> </ul> <p>And ONE of the following:</p> <ul style="list-style-type: none"> <li>A New Zealand drivers licence or 18+ card, or</li> <li>A valid and current international driving permit and a drivers license from another country, with a translation if not in English.</li> </ul> | <p>A New Zealand drivers license,</p> <p>And ONE of the following:</p> <ul style="list-style-type: none"> <li>A bank statement issued by a registered bank in the 12 months immediately preceding the date of this application, or</li> <li>A statement issued by a government agency to you in the 12 months preceding the date of this application (for example a statement from the Inland Revenue Department).</li> </ul> |
| Preferred Option                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                               |

Whichever option you choose you must provide a certified copy of the appropriate document(s).

## PROOF OF RESIDENTIAL ADDRESS

To prove your residential address you must provide either an original document or a certified copy of one of the following documents. The document must show your residential address and have been issued to you in the **three months** preceding the date of your application.

| Proof Of Address                                                                                                                                                                                                                                                                                                                                            |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>ONE of the following:</p> <ul style="list-style-type: none"> <li>A bank statement issued by a registered bank, or</li> <li>A utility bill (for example an electricity bill, gas bill or internet service bill), or</li> <li>A letter or statement issued by a government agency (for example a statement from the Inland Revenue Department).</li> </ul> |

## CERTIFYING COPIES OF DOCUMENTS

We will accept copies of documents that have been certified by someone who is over 16 years of age and is ONE of the following:

- Lawyer (as defined in the Lawyers and Conveyancers Act 2006)
- Chartered accountant (within the meaning of section 19 of the New Zealand Institute of Chartered Accountants Act 1996)
- Justice of the Peace
- Member of the New Zealand Police
- Registered medical doctor
- Registered teacher
- Minister of religion
- Kaumatua
- Notary public
- Member of Parliament
- New Zealand Honorary Consul
- Commonwealth Representative (as defined in the Oaths and Declarations Act 1957)
- A person who has the legal authority to take statutory declarations or the equivalent in New Zealand

When certification occurs overseas, copies of international identification provided by a customer resident overseas must be certified by a person authorised by law in that country to take statutory declarations or the equivalent in the customer's country.

The person certifying the documents must NOT be any of the following:

- Related to you (for example they cannot be your parent, child, brother, sister, aunt, uncle or cousin), or
- Your spouse or partner, or
- A person who lives at the same residential address as you, or
- A person involved in the investment in this fund.

If insufficient identification and address verification is provided, your application will be rejected and your payment returned. Payments returned to investors will not be eligible to accrue any interest.

**The person certifying your documents MUST sight the originals and make a statement to the effect that the copies you are providing are a true copy. The person certifying your documents MUST include the following to document their certification:**

- The name and signature of the person certifying the copy of the document,
- The date of certification, and
- The capacity in which the person is certifying the documents (from the list of roles shown above).

**The date of certification MUST be in the three months preceding the date of your application.**

# Types Of Entities Captured By FATCA And CRS

The United States Foreign Account Tax Compliance Act (**FATCA**) and the OECD's Common Reporting Standard (**CRS**) establish several categories of financial institutions and financial entities. These categories have names and descriptions that may not be immediately clear to investors who are familiar with the entity types and descriptions commonly used in New Zealand.

| FATCA Or CRS Reference                           | Indicative Description                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|--------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| New Zealand Financial Institution                | A custodial institution, depository institution (bank), an investment entity, or insurance company, that is tax resident in New Zealand.                                                                                                                                                                                                                                                                                                                                                                                                                     |
| Participating Foreign Financial Institution      | A custodial institution, depository institution (bank), investment entity or insurance company, that is tax resident in a country other than New Zealand and where the financial institution has entered into an agreement with the US Inland Revenue Service to undertake certain due diligence, withholding and reporting requirements for US account holders.                                                                                                                                                                                             |
| Partner Jurisdiction Financial Institution       | A custodial institution, depository institution (bank), investment entity or insurance company, that is tax resident in a country other than New Zealand that has entered into an agreement with the United States to facilitate the implementation of FATCA.<br><br>This includes branches within a Partner Jurisdiction, even where the parent entity is outside a Partner Jurisdiction, but excludes branches outside a Partner Jurisdiction, even where the parent entity is within a Partner Jurisdiction.                                              |
| A Deemed-Compliant Foreign Financial Institution | A qualifying financial institution that is excluded from being a reporting financial institution under FATCA.<br><br>The terms under which an entity may qualify for this status are set out within the US Treasury Regulations and the Inter-Governmental Agreement ( <b>IGA</b> ) in place between New Zealand and the US.                                                                                                                                                                                                                                 |
| Active Non-Financial Foreign Entity              | A non-US entity that is not a financial institution and that meets one of the criteria to be considered "active" outlined within the US Treasury Regulations or the IGA in place between New Zealand the US.<br><br>These criteria include being a listed company (and its related entities), a registered charity, or an entity that derives <b>less than</b> 50% of its gross assets and income from passive income (income that has not been derived from the active conduct of a trade or business). This may include some New Zealand-domiciled trusts. |
| Passive Non-Financial Foreign Entity             | A non-US entity that is not a financial institution and that does not meet any of the criteria to be considered "active" as outlined within the US Treasury Regulations and the IGA in place between New Zealand and the US.<br><br>This will generally mean that the entity derives <b>more than</b> 50% of its gross assets and income from passive income (income that has not been derived from the active conduct of a trade or business). This may include some New Zealand-domiciled trusts.                                                          |
| Exempt beneficial owner                          | The terms under which an entity may qualify for this status are set out within the US Treasury Regulations and the IGA in place between New Zealand and the US. This includes New Zealand government entities.                                                                                                                                                                                                                                                                                                                                               |

An entity applying to invest in this fund may be captured by these definitions. An individual applying to invest in this fund may be a "controlling person" for an entity captured by these definitions. In the case of a trust, the settlor, the trustees, the protector (if any), the beneficiaries or class of beneficiaries, and any other natural person exercising ultimate control over the trust will be included. This means that the term may include a director, partner, trustee, settlor, beneficiary, protector of a trust, or other natural person exercising ultimate effective control over the entity.

For more information on CRS, and determining your status for CRS purposes, please see the Inland Revenue's website at [www.ird.govt.nz/international/exchange/crs/crs-glossary/crs-glossary.html](http://www.ird.govt.nz/international/exchange/crs/crs-glossary/crs-glossary.html) and [www.taxpolicy.ird.govt.nz/topical-issues/implementing-aeoi](http://www.taxpolicy.ird.govt.nz/topical-issues/implementing-aeoi).

