

Application Form



Information Memorandum dated 25 March 2024

Important Information

This Application Form accompanies the Hejaz Enhanced Income Fund (Fund) Information Memorandum dated 25 March 2024 (**IM**). The IM for the Fund contains information about investing in the Fund. If you give another person access to this Application Form, you must also give them access to the IM and if applicable, any relevant Term Sheet for a Class of units of the Fund (**Term Sheet**) or replacement IM.

The trustee of the Fund is Hejaz Funds Management Pty Ltd ABN 87 138 165 901, AFSL No. 339583 (Hejaz Funds Management). On request, Hejaz Funds Management will send you a copy of the IM, any relevant Term Sheet or replacement IM and the relevant application forms free of charge during the life of the IM.

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

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

Investor Type	Sections to complete
Individual / Joint Investors	Complete Sections A, B, C, H and I
Sole Trader	Complete Sections A, B, C, H and I
Australian Company	Complete Sections A, B, D, G, H and I
Foreign Company	Complete Sections A, B, E, G, H and I
Trust	If Trustee is an Individual - Complete Sections A, B, C, F, G, H and I If Trustee is an Australian Company - Complete Sections A, B, D, F, G, H and I
Superannuation Fund	If Trustee is an Individual - Complete Sections A, B, C, F, G, H and I If Trustee is an Australian Company - Complete Sections A, B, D, F, G, H and I

Note: If you wish to invest in the Fund and you are a partnership, associations, registered co-operatives or government body, please contact us at info@hejazfs.com.au as a different application form will be required.

Questions about this Application Form

Should you have any queries in relation to this Application Form, please contact the Investment Manager:

Hejaz Enhanced Income Fund

Hejaz Funds Management Pty Ltd
Level 11, 2 Queen St Melbourne VIC 3000 Australia
T: 1300 043 529 | **E:** info@hejazfs.com.au

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Section A: Your Investment

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

A.1 Investment Details

Investment Amount (AUD) \$, , .00

Please indicate how you will be making your new or additional investment:

Direct Credit / EFT Instructions:

Please transfer investment funds amount to

Hejaz Enhanced Income Fund - Application Account

BSB: 063-000

Account number: 1404 8149

Bank Name: Commonwealth Bank

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

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

Bank Cheque Instructions:

Bank Cheques must be made payable to **Hejaz Funds Management Pty Ltd ATF Hejaz Social Impact Fund**.

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

Hejaz Funds Management Pty Ltd
Level 11, 2 Queen Street
Melbourne Vic 3000

A.2 Distributions

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

Pay into nominated bank account (section B.3)

Reinvest into the same Units (if available)

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

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Section B: Your Details

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

B.1 Contact Details

Please provide details of key contact person for correspondence.

Title:

Surname:

Middle name:

Given Name(s):

Postal Address

Unit no:

Street no:

Street name:

Suburb/town:

State:

Postcode:

Country:

Phone:

Mobile:

Fax:

Email (This email address will be used for ALL correspondence)

Note: we are committed to reducing our ecological footprint and our preferred method of communication is by e-mail. By providing this e-mail address, you consent for us to communicate with you using this e-mail address unless otherwise notified to us in writing.

B.2 Power Of Attorney

I/we have appointed a Power of Attorney (POA) to act on my/our behalf.

(Please provide an original certified copy of the POA and certified identification documents of the attorney)

Not applicable

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B.3 Nominated Bank Account Details

Please provide details of the account into which you would like distributions and redemptions to be paid.

The nominated bank account must be in the name of the investor (or where joint investors, in the name of at least one of the investors).

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

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

Account name:

Name of financial institution:

Branch address:

BSB / SWIFT (if applicable):

Account number:

B.4 Source Of Funds (Anti-Money Laundering & Counter Terrorism Financing (AMLCTF))

Gainful employment

Business activities

Superannuation savings

Inheritance / gift

Financial investments

Other, please specify

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B.5 Politically Exposed Person (PEP)

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

Note 1. Politically Exposed Person (PEP)

A Politically Exposed Person is an individual who:

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

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

Note 2. Beneficial Owner

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

Ownership for the purpose of determining a Beneficial Owner means an ownership (directly or indirectly) of 25% or more of the customer. "Control" includes whether the control is exerted by means of trusts, agreements, arrangements, understandings or practices and whether or not the individual has control based on legal or equitable rights. It includes where an individual can exercise control through making decisions about financial and operating policies.

Exemption from requirements to provide Beneficial Owner information are:

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

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Section C: Individual(s) / Sole Trader

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

C.1 Personals Details

Investor or entity 1

Title: Surname: Middle name:

Given Name(s): Date of birth:
(dd/mm/yyyy)

Primary Residential Address

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

Unit no: Street no: Street name:

Suburb/town: State: Postcode:

Country:

Is this investor a Politically Exposed Person (PEP) (as defined in Note 1, page 5)? Yes No

Investor or entity 2 (Joint investor)

Title: Surname: Middle name:

Given Name(s): Date of birth:
(dd/mm/yyyy)

Primary Residential Address

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

Unit no: Street no: Street name:

Suburb/town: State: Postcode:

Country:

Is this investor a Politically Exposed Person (PEP) (as defined in Note 1, page 5)? Yes No



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Sole Trader

Full business name (if any):

ABN (if any):

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

Unit no:

Street no:

Street name:

Suburb/town:

State:

Postcode:

Country:

C.2 Tax Information

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

Please answer **BOTH** Tax Residency questions

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

Tax File Number (TFN)

TFN Exemption (if applicable)

Investor 1

(or sole trader)

Investor 2

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

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

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

Country

Tax File Number (TFN)

If no TIN, list reason A, B or C

1

2

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

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

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

If you are a tax resident of more countries, please provide details in a separate sheet.

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

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

Yes No

1. Did you obtain residence rights under a Citizenship by Investment (CBI) or Residence by Investment (RBI) scheme?
2. Do you hold residence rights in any other jurisdiction(s)?
3. Have you spent more than 90 days in any other jurisdiction(s) during the previous year?
4. Have you filed income tax returns in any other jurisdiction(s) during the previous year?

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

C.3 Identification Documents

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

Australian State / Territory driver's licence containing a photograph of the person

Australian passport (a passport that has expired within the preceding 2 years is acceptable)

Card issued under a State or Territory for the purpose of proving a person's age containing a photograph of the person

Foreign passport or similar travel document containing a photograph **and** the signature of the person*

Foreign driver's licence that contains a photograph of the person in whose name the document is issued*

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

If you are unable to provide one of the above documents, please contact us on **1300 043 529** or info@hejazfs.com.au.

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Section D: Australian Company

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

D.1 Australian Company Details

Full name as registered by ASIC:

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

Unit no:

Street no:

Street name:

Suburb/town:

State:

Postcode:

Country:

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

Unit no:

Street no:

Street name:

Suburb/town:

State:

Postcode:

Country:

ACN:

ABN:

D.2 Regulatory / Listing Details

Is the company regulated or listed?

Company is not regulated or listed

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

Regulator name

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

Australian listed company

Name of market / exchange

Majority-owned subsidiary of an Australian listed company

Australian listed company name

Name of market / exchange

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D.3 Company Type

Public (companies whose name does NOT include the words "Pty Ltd" or "Proprietary Ltd"; generally listed companies) - **Go to Section D.5.**

Proprietary (companies whose name ends with "Proprietary Ltd" or "Pty Ltd"; also known as private companies) - **Go to Section D.4 & D.5.**

D.4 Directors (Proprietary Companies Only)

How many directors are there?

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

	Surname	Middle name	Given name(s)
Director 1			
Director 2			
Director 3			
Director 4			

D.5 Tax Information

Please complete Section G1 and G2: Tax Information for Company

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

Controlling Persons

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

D.6 Identification Documents

Please provide a copy of the Identification document.

Full ASIC company extract

For each **Beneficial Owner (as defined in Note 2 on page 5)**, provide an **ORIGINAL CERTIFIED COPY of ONE** of the following documents:

Australian State / Territory driver's licence containing a photograph of the person

Australian passport (a passport that has expired within the preceding 2 years is acceptable)

Card issued under a State or Territory for the purpose of proving a person's age containing a photograph of the person

Foreign passport or similar travel document containing a photograph and the signature of the person*

Foreign driver's licence that contains a photograph of the person in whose name the document is issued*

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

If you are unable to provide one of the above documents, please contact us on **1300 043 529** or **info@hejazfs.com.au**.

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Section E: Foreign Company

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

E.1 Foreign Company Details

Full name of foreign company:

Country of formation / incorporation / registration:

Complete this section if the company is registered with ASIC

ARBN:

Australian agent name:
(if applicable)

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

Unit no:

Street no:

Street name:

Suburb/town:

State:

Postcode:

Country:

Registered office address:

Unit no:

Street no:

Street name:

Suburb/town:

State:

Postcode:

Country:

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

Yes - Name of registration body

No



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Complete this section if the company is NOT registered with ASIC

Is the company registered with a relevant foreign registration body? Yes No

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

Full address of the company in the country of formation, incorporation or registration as registered by the foreign registration body (PO Box not permitted).

Unit no: Street no: Street name:

Suburb/town: State: Postcode:

Country:

E.2 Company Type

Public Go to Section E.4

Proprietary Go to Section E.3

E.3 Directors (Proprietary Companies Only)

How many directors are there?

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

Surname	Middle name	Given name(s)
---------	-------------	---------------

Director 1

Director 2

Director 3

Director 4

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E.4 Regulatory / Listing Details (All Companies To Complete)

Is the company regulated or listed?

Company is not regulated or listed

Public listed company

Name of market / exchange

Country

Majority-owned subsidiary of a listed company

listed company name

Name of market / exchange

Country

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

Regulator name

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

E.5 Tax Information

Please complete Section G1 and G2: Tax Information for Company

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

Controlling Persons

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

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E.6 Identification Documents

Complete this Section For each Beneficial Owner (as defined in Note 2 on page 5)

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

Australian State / Territory driver's licence containing a photograph of the person

Australian passport (a passport that has expired within the preceding 2 years is acceptable)

Card issued under a State or Territory for the purpose of proving a person's age containing a photograph of the person

Foreign passport or similar travel document containing a photograph and the signature of the person*

Foreign driver's licence that contains a photograph of the person in whose name the document is issued*

Complete this section if the company is registered with ASIC

Please provide a copy of **ONE** of the following documents.

Full ASIC company extract (if company is registered in Australia)

Full company extract from relevant registration body

If the ASIC or foreign registration body database is not reasonably available, an original certified copy of the certificate of registration issued by ASIC or the relevant registration body

Complete this section if the company is NOT registered with ASIC

Please provide a copy of **ONE** of the following documents.

Full company extract from relevant registration body

If the foreign registration body database is not reasonably available, an original certified copy of the certificate of registration issued by the relevant registration body.

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

Please provide a copy of **ONE** of the following documents

Full ASIC company extract

Full company extract from relevant financial market

Evidence of the company's full name from the relevant Commonwealth, State or Territory statutory regulator

A public document issued by the company

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

If you are unable to provide one of the above documents, please contact us on **1300 043 529** or info@hejazfs.com.au.

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Section F: Trusts / Superannuation Fund

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

F.1 Trust Or Superannuation Fund Detail

Full name of trust or
Superannuation fund:

Country of establishment:

Australian Registered
Scheme Number (ARSN):

Type of trust

Family trust

Charitable trust

Testamentary trust

Superannuation fund

Other - please specify

Full name of Settlor/s*:
(if applicable)

* The person(s) who settles the initial sum or assets to create the Trust. Not required to be completed if settlor is deceased OR trust is verified using simplified verification e.g. SMSF.

F.2 Trustee

Name of Trustee (s):

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

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

Company - Please complete **Section D: Australian Company**

F.3 Beneficiary Classes

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

F.4 Tax Information

Please complete **Section G1 and G2: Tax Information for Trust / Superannuation Fund**

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

Controlling Persons

A Controlling Person is any individual who directly or indirectly exercises control over an entity. For a Trust, this includes all Trustees, Settlers, Protectors, Beneficiaries or class(es) of beneficiaries.

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F.5 Identification Documents

Please provide a Certified copy of the following documents.

An original or certified copy of Trust Deed or extract of the Trust Deed (must include name of the Trust, Trustees, Beneficiaries, Settlor(s) and Appointers (where applicable)

For each **Beneficial Owner (as defined in Note 2 on page 5)**, provide an **ORIGINAL CERTIFIED COPY of ONE** of the following documents:

Australian State / Territory driver's licence containing a photograph of the person

Australian passport (a passport that has expired within the preceding 2 years is acceptable)

Card issued under a State or Territory for the purpose of proving a person's age containing a photograph of the person

Foreign passport or similar travel document containing a photograph and the signature of the person*

Foreign driver's licence that contains a photograph of the person in whose name the document is issued*

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

If you are unable to provide one of the above documents, please contact us on **1300 043 529** or **info@hejazfs.com.au**.

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Section G: Tax Information

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

G.1 Tax Status

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

Please tick the applicable FATCA and CRS status

A Financial Institution - A custodial or depository institution, an investment entity or a specified insurance company for FATCA / CRS purposes.

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

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

Deemed Compliant Financial Institution

Exempt Beneficial Owner

Excepted Financial Institution

Non-participating Financial Institution

Non Reporting IGA Financial Institution

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

Other - FATCA status - Describe FATCA status:

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

Yes - Please complete Section G.2 and Section G.3

No - Proceed to Section H

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

Australian Public Listed company, majority owned subsidiary of Australian Public Listed company - Proceed to Section H.

Foreign Public Listed company or majority owned subsidiary of a foreign Public Listed company - Proceed to Section H.

Governmental entity, central bank, or international organization - Proceed to Section H.

More than 50% of the entity's gross income consisted of Active Income; and Less than 50% of the assets held by the entity was used to produce Passive Income - Please complete section G.2.

Other - such as a company operating an active trade or business, that is not described above - Please complete Section G.2.

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

Notes:

- A list of CRS participating countries can be found on the ATO website at: https://www.ato.gov.au/General/International-tax-agreements/Indetail/International-arrangements/Automatic-exchange-of-information---CRS-and-FATCA/?page=4#4_19_CRS_Participating_Jurisdictions.
- For the purpose of the CRS, passive income includes, but is not limited to, the portion of gross income that consists of dividends; interest; income equivalent to interest; rents and royalties, other than rents and royalties derived in the active conduct of a business conducted; annuities; the excess of gains over losses from the sale or exchange of Financial Assets that gives rise to passive income described above.
- Please note that we may request further information regarding information provided to us.

G.2 Tax Residency of Investor Entity

Please answer **BOTH** Tax Residency questions

- | | |
|---|----------------------------------|
| 1. Is the investor entity a tax resident of Australia? | Yes - Tax File Number (TFN) |
| | No |
| 2. Is the investor entity a tax resident of a country other than Australia? | Yes - Complete TIN Section below |
| | No |

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

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

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

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

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

If you are a tax resident of more countries, please provide details in a separate sheet.

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G.3 Controlling Persons

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

1. Are any of the Controlling Persons in relation to the Investor a Politically Exposed Person (as defined in Note 1, page 5)?

Yes - please identify the PEP: 1) Name:

Position:

2) Name:

Position:

No

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

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

No - Please proceed to Section H.

Controlling Person 1

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

Trustee

Beneficiary

Protector

Trustee Settlor

Beneficial Owner
(as defined in Note 2, page 5)

Title:

Surname:

Middle name:

Given Name(s):

Date of birth:
(dd/mm/yyyy)

Primary Residential Address

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

Unit no:

Street no:

Street name:

Suburb/town:

State:

Postcode:

Country:

Please answer BOTH Tax Residency questions.

1. Is the Controlling Person a tax resident of Australia?

Yes - Tax File Number (TFN)

No

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2. Is the Controlling Person a tax resident of a country other than Australia? Yes - Complete TIN Section below
- No

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

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

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

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

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

If you are a tax resident of more countries, please provide details in a separate sheet.

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

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

Yes No

- Did you obtain residence rights under a Citizenship by Investment (CBI) or Residence by Investment (RBI) scheme?
- Do you hold residence rights in any other jurisdiction(s)?
- Have you spent more than 90 days in any other jurisdiction(s) during the previous year?
- Have you filed income tax returns in any other jurisdiction(s) during the previous year?

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



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Controlling Person 2

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

Trustee

Beneficiary

Protector

Trustee Settlor

Beneficial Owner
(as defined in Note 2, page 5)

Title:

Surname:

Middle name:

Given Name(s):

Date of birth:

(dd/mm/yyyy)

Primary Residential Address

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

Unit no:

Street no:

Street name:

Suburb/town:

State:

Postcode:

Country:

Please answer **BOTH** Tax Residency questions

1. Is the Controlling Person a tax resident of Australia?

Yes - Tax File Number (TFN)

No

2. Is the Controlling Person a tax resident of
a country other than Australia?

Yes - Complete TIN Section below

No

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

Country

Tax File Number (TFN)

If no TIN, list reason A, B or C

1

2

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

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

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

If you are a tax resident of more countries, please provide details in a separate sheet.

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

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

Yes No

1. Did you obtain residence rights under a Citizenship by Investment (CBI) or Residence by Investment (RBI) scheme?
2. Do you hold residence rights in any other jurisdiction(s)?
3. Have you spent more than 90 days in any other jurisdiction(s) during the previous year?
4. Have you filed income tax returns in any other jurisdiction(s) during the previous year?

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

If there are more than 2 Controlling Person, please duplicate pages 21 and 22.



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Section H: Certificate by Qualified Accountant

Chapters 6D or 7 of the Corporations Act 2001.

Please use **BLOCK** letters to complete this application form

Name of Investor(s)

H.1 Investor Category

Please select the category that best describe the investor.

Sophisticated Investor

Investor 1	Investor 2	Qualifying criteria
		I am applying for AU\$500,000 or more worth of Units
		I have net assets of at least AU\$2.5 million (please arrange for Qualified Accountant to complete Section H.2 below)
		I have earned at least AU\$250,000 per annum gross income for each of the last two (2) financial years (please arrange for Qualified Accountant to complete Section H.2 below)

Professional Investor

Investor 1	Investor 2	Qualifying criteria
		I have or control gross assets of at least AU\$10 million (please arrange for Qualified Accountant to complete Section H.2 below)
		I hold an Australian Financial Services Licence number (please provide AFSL no.)

Please contact the Investment Manager if you do not fit the above categories.

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H.2 Qualified Accountant[#] Certification

To be completed by a Qualified Accountant

Full Name of Qualified Accountant:

Unit no:

Street no:

Street name:

Suburb/town:

State:

Postcode:

Country:

Phone:

Mobile:

Fax

Email: (This email address will be used for ALL correspondence)

Professional body[#] (e.g. CPA Australia/Chartered Accountants Australia):

Membership No:

Membership Designation (e.g. CPA):

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

Signature

Date

[#]For information on this certificate or a list of accountant qualifications, please refer to

<https://asic.gov.au/regulatory-resources/financialservices/financial-product-disclosure/certificates-issued-by-a-qualified-accountant/>.

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Section I: Declarations & Signatures

Please read the declarations below before signing this Application Form.

I/We declare that:

- i. I/We have read and understood the IM to which this Application Form applies including any supplemental information;
- ii. I/We have received and accepted the offer to invest in Hejaz Income Fund (**Fund**) in Australia and represent and warrant to the Trustee that I/ we are permitted to invest in the Fund without the Fund or Trustee obtaining any further authorisation, registration, certification in any country other than Australia and agree to indemnify the Trustee and Investment Manager if the warranty is untrue;
- iii. I/We acknowledge and warrant that we are a "wholesale client" for the purposes of section 761G of the Corporations Act 2001 (Cth) and relevant information has been provided to confirm this and that if the Applicant is a SMSF, it is compliant and investing in this Fund complies with the Superannuation Industry Supervision Act 1993 (Cth);
- iv. The information provided in this Application Form is true, correct and complete in all respects;
- v. I/We agree to be bound by the provisions of the Trust Deed governing the Fund and the terms and conditions of the IM each as amended from time to time;
- vi. I/We acknowledge that none of Hejaz Funds Management Pty Ltd ACN 138 165 901 (**Trustee**), Hejaz Asset Management Pty Ltd ACN 613 618 821 (**Investment Manager**), their related bodies corporate, officers, employees, consultants, advisers or agents, guarantees the performance of the Fund or the payment of distributions other than as set out in the IM;
- vii. I/We have read and understood the risks set out in section 6 of the IM and acknowledge that an investment in the Fund is subject to risks, including risk that an investment in the Fund may result in reduction in, or total loss of, the capital value of the investment, returns that are less than expected or delays in repayment of capital;
- viii. I/We acknowledge the Trustee reserves the right to reject any application in whole or in part in its absolute discretion;
- ix. I/We warrant and represent to the Trustee and Investment Manager that I/we have undertaken my/our own due diligence in relation to an investment in the Fund, including (without limitation) in relation to the structure of the Fund and the likelihood of returns from the Fund;
- x. I/We have obtained my/our own independent financial, taxation and legal advice prior to investing in the Fund;
- xi. If this Application Form is signed under Power of Attorney, each Attorney declares he/she has not received notice of revocation of that power;
- xii. I am/We are over 18 years of age and I/we are eligible to hold units in the Fund;
- xiii. I/We have all requisite power and authority to execute this Application Form and make the investment in the Fund as set out in this Application Form;
- xiv. I/we acknowledge that application monies will be held by the Trustee in an interest bearing trust account until invested in the Fund or returned to me/ us. No interest will be earned on application monies;
- xv. I/we have read the information on privacy and personal information contained in section 8 of the IM and consent to my/our personal information being used and disclosed as set out in the IM and Trustee's privacy policy, and that until I/we inform the Trustee otherwise, I/we will be taken to have consented to all uses of our personal information contained under that heading;
- xvi. I/we acknowledge that the Trustee may deliver and make reports, statements and other communications available in electronic form, such as e-mail or by posting on a website;
- xvii. I/we indemnify the Trustee, the Investment Manager and each of their related bodies corporate, officers, employees, consultants, agents and permitted delegates (together, the **Indemnified Parties**) and hold each of them harmless from and against any loss, damage, liability, cost or expense, including reasonable legal fees due to or arising out of a breach of representation, warranty, covenant or agreement by me/us contained in any document provided by me/use to either the Trustee or the Investment Manager, their representatives, agents or other parties in connection with our investment in the Fund;
- xviii. The indemnification obligations provided herein survive the execution and delivery of this Application Form, any investigation at any time made by the

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- Trustee and the issue and/or sale of the investment;
- xix. To the extent permitted by law, I/we release each of the Indemnified Parties from all claims, actions, suits or demands whatsoever and howsoever arising that I/we may have against any Indemnified Party in connection with the IM or my/our investment;
- xx. Other than as disclosed in this Application Form, no person or entity controlling, owning or otherwise holding an interest in me/us is a United States citizen or resident of the United States for taxation purposes (**US Person**);
- xxi. I/We will promptly notify the Trustee within 30 days of any change to the information that I/we have previously provided to the Trustee, including any changes which may result in a person or entity controlling, owning or otherwise holding an interest in me/us who is a US Person or a non-Australian tax resident;
- xxii. I/We consent to the Trustee disclosing any information (including) to the Australian Taxation Office) required by the Trustee to comply with its due diligence and reporting obligations under the Foreign Account Tax Compliance Act and the Common Reporting Standard as enacted by Division 396 of Schedule 1 to the Taxation Administration Act 1953 and any related Australian law and guidance implementing the same;
- xxiii. I/We acknowledge that the collection of my/our personal information may be required by the Financial Transaction Reports Act 1988 (Cth), the Corporations Act 2001, and/or the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (**AML/CTF Law**);
- xxiv. I/We acknowledge that there is no requirement and it is not an offence if I/we do not provide the Trustee with a Tax File Number (**TFN**) or to quote a TFN exemption or Australian Business Number, however, if I/we choose not to, the Trustee may be required to deduct tax at the highest marginal rate plus the Medicare Levy from my/our income distributions (if applicable);

- xxv. I/We are not aware and have no reason to suspect that the monies used to fund my/our investment in the Fund have been or will be derived from or related to any money laundering, terrorism financing or similar or other activities prohibited under any international convention or agreement (including AML/CTF Law); and
- xxvi. I/We will promptly provide the Trustee with all additional information, documentation (including original or certified copies) and assistance that the Trustee may request in order for the Trustee to comply with any of its internal compliance policies, AML/CTF Law and the IGB.

Use of email

If I/we submit my/our Application Form by email, the Trustee may rely on the emailed Application Form to process and accept my/our application. For each investment in the Fund, if the Trustee receives instructions by email in relation to my/our investment in the Fund, I/we:

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



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Investor or Entity 1

Signature

Investor or Entity 2

Signature

Date (dd/mm/yyyy):

Surname:

Middle name:

Given name(s):

Capacity Individual Joint investor

 Sole Director Director

 Sole Trader Attorney
(under POA)

Date (dd/mm/yyyy):

Surname:

Middle name:

Given name(s):

Capacity Joint investor

 Director / Company Secretary

Signing authority

Please tick to indicate signing requirements for future instructions (e.g. withdrawals, change of contact details etc).
Change of bank details must be signed in accordance with the below table).

Only one required to sign

All signatories must sign

Who must sign?

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

Investor Type	Names Required	Signatures
Individuals and/or joint investors	Full name of each investor (do not use initials)	Individual investor or each joint investors
Sole trader	<ul style="list-style-type: none"> Full name or sole trader; and Full business name (if any) 	Sole trader
Australian company/ Foreign company	<ul style="list-style-type: none"> Full company name as registered with ASIC or a foreign registration body; and Name of each Director of the company; and Full name of each beneficial owner* 	<ul style="list-style-type: none"> Sole director and company secretary Two directors; or One director and one company Secretary



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Investor Type	Names Required	Signatures
Trust/Superannuation fund	<ul style="list-style-type: none"> • Full trust/Superannuation fund name (e.g. John Smith Pty Ltd ATF The Smith Family Trust) • Full name of the trustee(s) • Names of beneficiaries (if identified in Trust Deed) • Full name of the settlor(s)** • Full name of each beneficial owner* 	<ul style="list-style-type: none"> • Individual trustee(s) "as trustee for" • If any of the trustees are an Australian company, the signatures set out in the "Australian company" sections are also required
Account designation	Full name of responsible adult, as the investor	Adult(s) investing on behalf of the person/minor
Investment made under a Power of Attorney (POA)	<ul style="list-style-type: none"> • Full name of each investor(s) ; and • Full name of person holding POA 	Person holding Power of Attorney

*Refer to Note 2 on page 5 for definition of a Beneficial Owner.

**Not required in some circumstances.

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Certification of Documents

Customer Identification

To comply with our obligations under Anti-Money Laundering and Counter-Terrorism Financing legislation, we must collect certain information about each investor. In some cases, the information must be supported by a “certified copy” or “certified extract of an identification document” A certified copy is a document that has been certified as true and correct copy of an original document.

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

Certifying documents

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

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

“I certify that this is a true and correct copy of the original document produced to me.”

- Signature of the certifier
- Full name of the certifier
- Occupation, qualification or registration number of the certification
- Date of certification

Who can certify?

In Australia

Legal	<ul style="list-style-type: none"> • Solicitor or barrister (that is, a person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described)) • A judge of a court / a magistrate • A chief executive officer of a Commonwealth court • A registrar or deputy registrar of a court; • A notary public • Bailiff • Clerk of the Court • Commissioner for Affidavits. • Commissioner for Declarations • Master of a court • Justice of Peace
Police and Australian Defence Force	<ul style="list-style-type: none"> • Police officer • Sheriff or Sheriff's officer • Member of the Australian Defence Force who is an officer, a non- commissioned officer within the meaning of the Defence Force Discipline Act 1982 with two or more years of continuous service, • A warrant officer (within the meaning of the Defence Force Discipline Act 1982)

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Accountant	<p>Member of the following institutions with 2 or more years of continuous membership:</p> <ul style="list-style-type: none"> i. Chartered Accountants Australia & New Zealand ii. Certified Practising Accountants Australia iii. National Institute of Accountants iv. Association of Taxation and Management Accountants v. Fellow of the National Tax Accountants' Association
Post Office	<ul style="list-style-type: none"> • An agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public • A permanent employee of the Australian Postal Corporation with 2 or more years of continuous service
Financial corporations (Bank, Building Society, Credit Union)	<ul style="list-style-type: none"> • An officer with 2 or more continuous years of service with one or more financial institutions • A finance company officer with 2 or more continuous years of service with one or more finance companies • An officer, or authorised representative of, an Australian financial services licence holder, having 2 or more continuous years' service
Health professionals	<ul style="list-style-type: none"> • Chiropractor • Dentist • Medical practitioner • Nurse • Optometrist • Pharmacist • Physiotherapist • Psychologist • Veterinary surgeon
Engineers	<ul style="list-style-type: none"> • Member of Chartered Secretaries Australia • Member of Engineers Australia, other than at the grade of student • Member of the Australasian Institute of Mining and Metallurgy

Overseas

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