Longwave Australian Small Companies Fund – Active ETF |ABN 77 852 020 525
Responsible Entity: Pinnacle Fund Services Ltd | ABN 29 082 494 362 | AFSL 238371

Additional Application Form

APPLICATION OPTIONS:

OPTION A: APPLY ONLINE AND PAY ELECTRONICALLY (RECOMMENDED)

Make a Top Up Application through the Investor Portal: https://investor.automic.com.au/#/home

- ✓ **Pay electronically:** Applying online allows you to pay electronically at the time of making your application.
- ✓ **Applying online is simple:** Applying online is very easy to do, it eliminates any postal delays and removes the risk of your Application being potentially lost in transit.
- ✓ **Receive immediate confirmation:** Applying online provides you with greater privacy over your instructions and is the only method which provides you with immediate confirmation that your application has been successfully processed.

OPTION B: STANDARD PAPER-BASED APPLICATION AND PAYMENT

Please complete this form in accordance with the instructions below.

1 READ THE PRODUCT DISCLOSURE STATEMENT

Please read and ensure you understand the Product Disclosure Statement ('PDS'), any product guide, important information, and Declaration as part of this Application Form. The law prohibits any person passing this Application Form on to another person unless it is accompanied by a complete PDS. We will provide a paper or electronic copy of the current PDS and its incorporated documents on request and without charge.

2 COMPLETE THIS APPLICATION FORM

Please write in BLOCK letters, using a black pen. If you make an error while completing this form, do not use correction fluid. Cross out your mistake and initial your changes. The investor(s) must complete and sign the form. Keep a photocopy of the completed Application Form for your records.

3 CERTIFY AND PROVIDE YOUR IDENTIFICATION DOCUMENTS

Please refer to Appendix A 'Identification and verification' and provide the relevant identification documentation as outlined in this Application Form.

4 SEND YOUR DOCUMENTS

Return your Application Form and certified documents to:

By Email:	By Post:	
Longwave Australian Small Companies Fund - Active ETF longwave@automic.com.au	Longwave Australian Small Companies Fund - Active ETF GPO Box 5193 Sydney NSW 2000	OR… Save time and apply online: **See details above**

5 MAKE YOUR PAYMENT

To make payment, please return your form with your email address provided in section 2.1. When your application is processed by our unit registry you will be sent an automated email confirmation. This will provide you with your personalised payment instructions to make your payment.

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

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

Email: longwave@automic.com.au
Phone (within Australia): 1300 092 587
Phone (outside Australia): +61 (0)2 7208 4521

AUTOMIC GROUP

1. INVESTOR DETAILS

Security Holder Reference Number (SRN) – 12 digits including the leading letter 'I'

Entity Name: _____

If there have been no changes to the information previously provided, could you please tick the below boxes:

☐ I/We confirm there are no changes to our identification documents previously provided and that these remain current and valid

☐ I/We confirm there are no changes to our FATCA or CRS status

If there have been changes in the FATCA/CRS status since your last application, please update this status in the **Automic Investor Portal** or please contact Automic.

If there have been changes in your identification documents, please contact Automic either on 1300 092 587 or longwave@automic.com.au.

2. APPLICATION DETAILS

Additional Investment Amount:

Fund Name	Dollar amount to be invested
Longwave Australian Small Companies Fund-Active ETF	$AUD ☐☐☐,☐☐☐,☐☐☐.☐☐

* The minimum additional investment amount outlined in the Fund's Product Disclosure Statement or as agreed with the Responsible Entity

3. DECLARATIONS, ACKNOWLEDGEMENTS AND SIGNATURES

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

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

- Wish to apply for Units and received the PDS for the Trust at the same time and by the same means as I / we received this Application Form;
- Agree to be bound by the PDS, the terms of issue of Units and the terms of the Trust Deed, as may be amended from time to time;
- Confirm that I / we have read and understood the PDS as supplemented, updated or replaced from time to time;
- Confirm that I / we have legal power to invest including, if investing as a trustee that I/we am/are acting in accordance with my / our designated powers and authority under the trust deed;
- If investing as a trustee on behalf of a superannuation fund, confirm that the investment complies with and does not breach any provision of the Superannuation Industry (Supervision) Act 1993 (Cth) and agree to provide the Responsible Entity any additional information or documentation it requests to ensure compliance with that legislation and other relevant prudential laws;
- If this is a joint application, each of us agrees, unless otherwise indicated on this Application Form, that our investment is as joint tenants and that each of us who is able to operate the account will bind the other(s) to any transaction, election or other communication with the Responsible Entity or its delegates;
- Agree to information about me / us being collected, used and disclosed in accordance with the privacy statement contained in the PDS and on the Fund Manager's website;
- Will provide to the Responsible Entity or its nominee any information that the Responsible Entity reasonably requires in order to enable the Responsible Entity to comply with all its obligations under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Cth) (AML/CTF Act) and its associated rules and regulations (in force from time to time);
- Acknowledge that the information collected by the Responsible Entity (including in this Application Form) may be used for identification purposes, including via a third party identification service, to enable the Responsible Entity to comply with all its customer identification obligations under the AML/CTF Act and associated rules and regulations as referred to above;
- Acknowledge that investments in the Trust are not deposits or liabilities of any company in the Responsible Entity;
- Declare that this Application Form is completed and lodged in accordance with the PDS and that all statements made by me / us are complete and accurate and acknowledge that is it a criminal offence to knowingly provide misleading information or documents in respect to this application;
- Declare the CRS and FATCA notifications provided at Sections 8 and 9 of this Application Form are correct and agree to provide the Responsible Entity any additional information or documentation it requests from time to time to ensure compliance with reporting and other obligations under CRS and FATCA rules and regulations;
- Without limitation, specifically acknowledge, accept and agree to the content of the Important Information set out on pages 2 and 3 of the IM;
- Acknowledge that the Trust is subject to investment and other risks, including but not limited to those set out in the IM, which could include delays in repayment, and / or loss of income and capital invested and that no member of the Responsible Entity guarantees the performance of the Trust or any particular rate of return; and
- Confirm that the application, including all details provided in the Application Form, is true and correct.

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

INSTRUCTIONS – Who needs to sign this form:

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

Signature of investor 1, director or authorised signatory

Please print full name

Date

/ /

Company officer (please indicate company capacity):

- ☐ Director
- ☐ Sole director and company secretary
- ☐ Authorised signatory

Signature of investor 2, director/company secretary or authorised signatory

Please print full name

Date

/ /

Company officer (please indicate company capacity):

- ☐ Director
- ☐ Company secretary
- ☐ Authorised signatory