

ADVISER CODE (if applicable)



## Milford Investment Funds – Intermediary Trust including Estate Application Form

**Note: For Trust account applications there is a minimum initial investment of \$100,000 per account. For Estate applications the minimum initial investment is \$10,000. These amounts can be split across multiple Funds.**

### A - Investing Entity Details

FULL TRUST NAME

EMAIL ADDRESS (will receive account communications)

CONTACT PHONE NUMBER

PHYSICAL ADDRESS (cannot be a PO Box)

SUBURB

CITY

COUNTRY

POSTCODE

POSTAL ADDRESS (if different from physical address)

SUBURB

CITY

COUNTRY

POSTCODE

#### Entity Tax Details

IRD NUMBER\*

\*For New Zealand resident entities, if no IRD number has been received within six weeks of joining the Fund, we are required by law to close your account.

**Prescribed Investor Rate ('PIR')** (Please tick appropriate box)

You can find out more about PIRs at [www.ird.govt.nz/pir](http://www.ird.govt.nz/pir). If you are unsure of your PIR, we recommend you seek professional advice or contact Inland Revenue. **If a PIR is not selected, or an IRD number is not supplied, a 28% PIR will apply.**

0%    10.5%\*    17.5%    28%

\*A PIR of 10.5% can only be selected for an Estate (Testamentary Trust).

**How did you hear about Milford?** (Please select as many that apply).

Newspaper/magazine advertising    Online advertising    Online search    Radio    Social media    Referral

TV/video advertising   Other \_\_\_\_\_

## B - Entity Foreign Tax Residency Details

International tax compliance regulations have been introduced to protect the integrity of tax systems around the world. These require Milford, along with other financial institutions, to collect information about their clients' foreign tax residency. Further information about the Foreign Account Tax Compliance Act ('FATCA') and the Common Reporting Standard ('CRS') is available from Inland Revenue, [www.ird.govt.nz/international-tax/exchange-of-information](http://www.ird.govt.nz/international-tax/exchange-of-information).

**If you need tax advice, please contact a qualified tax professional.**

**1. Is the entity a foreign tax resident?**  Yes  No

If 'Yes' please list below all countries, other than New Zealand, in which the entity is a tax resident and provide the Tax Identification Number ('TIN') for each country.

Country of Tax Residence	TIN (or reason why TIN was unable to be obtained)

**2. Is the entity a Financial Institution for FATCA or CRS purposes?**

The term Financial Institution ('FI') as defined by FATCA and CRS includes custodial institutions, depository institutions, investment entities or specified insurance companies. A family trust is likely to be a Financial Institution if 50% or more of the trust's income is from financial assets and is managed by another Financial Institution.

No - please continue to Question 4 below

Yes - if applicable, please provide your Global Intermediary Identification Number (GIIN)

GIIN:

- then continue to Question 3 below

**3. Are you a managed investment entity that is resident in a jurisdiction that is not participating in the OECD's CRS regime?**

This would capture any entity, the gross income of which is primarily attributable to investing, reinvesting, or trading in financial assets, and that is (i) managed by a Financial Institution; and (ii) not tax resident in a jurisdiction with which an agreement is in place in relation to the automatic exchange of financial account information as set out in the CRS.

No - please continue to Section C

Yes - please continue to Section C and ensure you also complete Appendix 2 for each Associated Person<sup>^</sup> as applicable

**4. Is the entity an Active or Passive Non-Financial Entity (NFE)?**

Generally, an entity will be an Active NFE if less than 50% of its income is passive income and less than 50% of its assets produce (or could produce) passive income. An entity will be a Passive NFE if it primarily (50% or more) derives passive income and/or has assets that primarily (50% or more) produce (or could produce) passive income. **Passive income** generally includes non-trading investment income in the form of: interest or equivalents, dividends, annuities, other financial arrangements' income, and rents and royalties.

Active NFE - please continue to Section C

Passive NFE - please continue to Section C and ensure you also complete Appendix 2 for each Associated Person<sup>^</sup> as applicable

<sup>^</sup> In this context an Associated Person refers to any beneficiary who has received a distribution and any settlor (or any other individual) who has contributed less than \$5,000 to the Trust.

## C - Trust Details

Please select your type of trust and answer the questions within that box, if relevant, for your trust type.

**Discretionary Trust**

If in Section B, you answered 'Yes' to Question 3 (i.e. you are a managed investment entity resident in a jurisdiction that is not participating in the OECD's CRS regime) or you are a Passive NFE (Question 4), we need further information about your beneficiaries.

Have any beneficiaries received a distribution from the Trust?

Yes - each beneficiary who has received a distribution (including any income, cash, asset(s), forgiveness of debt or the Trust incurring expenditure for your benefit) must complete Appendix 2 (unless they have completed Section D or Appendix 1). Note you are considered to have received a distribution if a person or entity receiving that distribution holds it for your benefit (e.g. a nominee or nominee company)

- please also detail the class of these beneficiaries (e.g. children, grandchildren) in Notes Section (page 16)

No

**Non-Discretionary Trust**

How many beneficiaries does the Trust have?

More than 10 - please detail the class of beneficiaries (e.g. children, grandchildren) in Notes Section (page 16)

10 or fewer - beneficiaries with more than 25% interest in the Trust's assets must complete Appendix 1  
- for each beneficiary with 25% or less interest in the Trust's assets, list their name and date of birth in the Notes Section (page 16)

If in Section B, you answered 'Yes' to Question 3 (i.e. you are a managed investment entity resident in a jurisdiction that is not participating in the OECD's CRS regime) or you are a Passive NFE (Question 4), we need further information about your beneficiaries.

Have any beneficiaries received a distribution from the Trust?

Yes - each beneficiary who has received a distribution must complete Appendix 2 (unless they have completed Section D or Appendix 1)

No

**Estate (Testamentary Trust)**

Does the Estate have a life tenant?

Yes - each life tenant must complete Appendix 1 (unless they have completed Section D)

No

How many beneficiaries does the Estate have?

More than 10 - please detail the class of beneficiaries (e.g. children, grandchildren) in Notes Section (page 16)

10 or fewer - beneficiaries with more than 25% interest in the Estate's assets must complete Appendix 1  
- for each beneficiary with 25% or less interest in the Estates's assets, list their name and date of birth in the Notes Section (page 16)

If in Section B, you answered 'Yes' to Question 3 (i.e. you are a managed investment entity resident in a jurisdiction that is not participating in the OECD's CRS regime) or you are a Passive NFE (Question 4), we need further information about your beneficiaries.

Have any beneficiaries received a distribution, or have the right to receive a mandatory distribution from the Estate?

Yes - each beneficiary who has received a distribution or has the right to receive a mandatory distribution (including any income, cash, asset(s), forgiveness of debt or the Estate incurring expenditure for your benefit) must complete Appendix 2 (unless they have completed Section D or Appendix 1). You are considered to have received a distribution if a person or entity receiving that distribution holds it for your benefit (e.g. a nominee or nominee company)

No

**Charitable Trust**

What is the purpose or aim of the charitable trust?

Milford Investment Funds  
Trust including Estate Application Form (continued)

## D - Trustee / Executor / Officer 1 Details

TITLE	FIRST NAME	MIDDLE NAME(S)	SURNAME
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
PREFERRED NAME		DATE OF BIRTH	CONTACT NUMBER
<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
ROLE/RELATIONSHIP TO ENTITY	OCCUPATION	EMAIL ADDRESS (required for access to client portal)	
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	
PHYSICAL ADDRESS (cannot be a PO Box)			SUBURB
<input style="width: 100%;" type="text"/>			<input style="width: 100%;" type="text"/>
CITY	COUNTRY	POSTCODE	
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	
POSTAL ADDRESS (if different from physical address)			SUBURB
<input style="width: 100%;" type="text"/>			<input style="width: 100%;" type="text"/>
CITY	COUNTRY	POSTCODE	
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	

### Tax Information

IRD NUMBER

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Are you a US citizen or US tax resident?

Yes  No

Are you a tax resident in any other country (other than the US or NZ)?

Yes  No

If you answered 'Yes' to either of the above questions please list all countries below and provide the Tax Identification Number ('TIN') for each country. If you are a US citizen or US tax resident your TIN will typically be your Social Security Number.

Country of Tax Residence	TIN (or reason why TIN was unable to be obtained)
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

For further information on your personal tax residency status please see <http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-residency> or speak to a tax adviser.

### Investor Identification

We have two options for clients to confirm their identity. Please select **one** of the options below.

#### Option 1 - Electronic Identity Verification and Proof of Address

Milford can confirm the identity and/or New Zealand address of many of our clients electronically, with their permission. Please note that we use an external third party system not owned by Milford to conduct identity checks in this way.

I confirm that I give Milford authority to check my identity and/or address electronically using the documentation provided.  
**I have included a copy of my current signed NZ Passport (preferred) or NZ Driver Licence (front & back).**

#### Option 2 - Certified Copies of Identity Documents

I will provide certified identification documents.

**For further detail on document requirements, including who can certify them and correct certification wording, see page 14.**

Milford Investment Funds  
Trust including Estate Application Form (continued)

**D - Trustee / Executor / Officer 2 Details**

TITLE	FIRST NAME	MIDDLE NAME(S)	SURNAME
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
PREFERRED NAME	DATE OF BIRTH		CONTACT NUMBER
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>		<input type="text"/>
ROLE/RELATIONSHIP TO ENTITY	OCCUPATION	EMAIL ADDRESS (required for access to client portal)	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
PHYSICAL ADDRESS (cannot be a PO Box)			SUBURB
<input type="text"/>			<input type="text"/>
CITY	COUNTRY	POSTCODE	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
POSTAL ADDRESS (if different from physical address)			SUBURB
<input type="text"/>			<input type="text"/>
CITY	COUNTRY	POSTCODE	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

**Tax Information**

IRD NUMBER

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Are you a US citizen or US tax resident?  Yes  No

Are you a tax resident in any other country (other than the US or NZ)?  Yes  No

If you answered 'Yes' to either of the above questions please list all countries below and provide the Tax Identification Number ('TIN') for each country. If you are a US citizen or US tax resident your TIN will typically be your Social Security Number.

Country of Tax Residence	TIN (or reason why TIN was unable to be obtained)
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

For further information on your personal tax residency status please see <http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-residency> or speak to a tax adviser.

**Investor Identification**

We have two options for clients to confirm their identity. Please select **one** of the options below.

**Option 1 - Electronic Identity Verification and Proof of Address**

Milford can confirm the identity and/or New Zealand address of many of our clients electronically, with their permission. Please note that we use an external third party system not owned by Milford to conduct identity checks in this way.

I confirm that I give Milford authority to check my identity and/or address electronically using the documentation provided.  
**I have included a copy of my current signed NZ Passport (preferred) or NZ Driver Licence (front & back).**

**Option 2 - Certified Copies of Identity Documents**

I will provide certified identification documents.  
**For further detail on document requirements, including who can certify them and correct certification wording, see page 14.**

Milford Investment Funds  
Trust including Estate Application Form (continued)

**D - Trustee / Executor / Officer 3 Details**

TITLE	FIRST NAME	MIDDLE NAME(S)	SURNAME
PREFERRED NAME	DATE OF BIRTH		CONTACT NUMBER
	/ /		
ROLE/RELATIONSHIP TO ENTITY	OCCUPATION	EMAIL ADDRESS (required for access to client portal)	
PHYSICAL ADDRESS (cannot be a PO Box)			SUBURB
CITY	COUNTRY	POSTCODE	
POSTAL ADDRESS (if different from physical address)			SUBURB
CITY	COUNTRY	POSTCODE	

**Tax Information**

IRD NUMBER

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Are you a US citizen or US tax resident?  Yes  No

Are you a tax resident in any other country (other than the US or NZ)?  Yes  No

If you answered 'Yes' to either of the above questions please list all countries below and provide the Tax Identification Number ('TIN') for each country. If you are a US citizen or US tax resident your TIN will typically be your Social Security Number.

Country of Tax Residence	TIN (or reason why TIN was unable to be obtained)

For further information on your personal tax residency status please see <http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-residency> or speak to a tax adviser.

**Investor Identification**

We have two options for clients to confirm their identity. Please select **one** of the options below.

**Option 1 - Electronic Identity Verification and Proof of Address**

Milford can confirm the identity and/or New Zealand address of many of our clients electronically, with their permission. Please note that we use an external third party system not owned by Milford to conduct identity checks in this way.

I confirm that I give Milford authority to check my identity and/or address electronically using the documentation provided. **I have included a copy of my current signed NZ Passport (preferred) or NZ Driver Licence (front & back).**

**Option 2 - Certified Copies of Identity Documents**

I will provide certified identification documents. **For further detail on document requirements, including who can certify them and correct certification wording, see page 14.**

Milford Investment Funds  
Trust including Estate Application Form (continued)

**D - Trustee / Executor / Officer 4 Details**

TITLE	FIRST NAME	MIDDLE NAME(S)	SURNAME
PREFERRED NAME	DATE OF BIRTH		CONTACT NUMBER
	/ /		
ROLE/RELATIONSHIP TO ENTITY	OCCUPATION	EMAIL ADDRESS (required for access to client portal)	
PHYSICAL ADDRESS (cannot be a PO Box)			SUBURB
CITY	COUNTRY	POSTCODE	
POSTAL ADDRESS (if different from physical address)			SUBURB
CITY	COUNTRY	POSTCODE	

**Tax Information**

IRD NUMBER

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Are you a US citizen or US tax resident?  Yes  No

Are you a tax resident in any other country (other than the US or NZ)?  Yes  No

If you answered 'Yes' to either of the above questions please list all countries below and provide the Tax Identification Number ('TIN') for each country. If you are a US citizen or US tax resident your TIN will typically be your Social Security Number.

Country of Tax Residence	TIN (or reason why TIN was unable to be obtained)

For further information on your personal tax residency status please see <http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-residency> or speak to a tax adviser.

**Investor Identification**

We have two options for clients to confirm their identity. Please select **one** of the options below.

**Option 1 - Electronic Identity Verification and Proof of Address**

Milford can confirm the identity and/or New Zealand address of many of our clients electronically, with their permission. Please note that we use an external third party system not owned by Milford to conduct identity checks in this way.

I confirm that I give Milford authority to check my identity and/or address electronically using the documentation provided.  
**I have included a copy of my current signed NZ Passport (preferred) or NZ Driver Licence (front & back).**

**Option 2 - Certified Copies of Identity Documents**

I will provide certified identification documents.  
**For further detail on document requirements, including who can certify them and correct certification wording, see page 14.**

**E - Trusts with a Trustee Company**

What type of Trustee Company does the trust have?

- Trustee Company - name all Directors below (Note a minimum of two Directors of the Trustee Company, plus any applicable individual Trustees must sign the Agreement on page 11)
- Professional Trustee Company (e.g. law or accountancy firm) - provide the names of the nominated directors authorised to act on behalf of the Professional Trustee Company below (Note the minimum number of nominated Professional Trustee Company Directors, plus any applicable individual Trustees, must sign the Agreement on page 11)

**All directors listed in this section will need to complete Appendix 1, unless they have completed Section D.**

TRUSTEE COMPANY / PROFESSIONAL TRUSTEE COMPANY NAME

For Professional Trustee Companies only: We nominate any \_\_\_\_\_ (number) of the below named Director(s) to act on behalf of the Trust.

DIRECTOR NAME

DIRECTOR NAME

DIRECTOR NAME

DIRECTOR NAME

DIRECTOR NAME

DIRECTOR NAME

**F - Authority to Act (optional)**

Complete this section to give authority to a specified subset of Trustees/Executors/Officers to act on behalf of all others.

We the Trustees/Executors/Officers:

1. Confirm that we are all the current and validly appointed Trustees/Executors/Officers of the Trust/Estate
2. Confirm that we have decided to invest in one or a number of Milford Funds from time to time
3. Authorise that the following named Trustees/Executors/Officers (acting jointly where more than one name is given)

NAME

NAME

NAME

NAME

may, until further written notice to the contrary, instruct Milford on behalf of all of the Trustees/Executors/Officers to:

- a) reallocate any or all amounts invested between Funds in the name of the Trust/Estate
- b) withdraw any or all amounts from any Fund(s) provided that such amounts are payable to the Trust/Estate
- c) deposit any further amounts into any Fund(s) in the name of the Trust/Estate

4. Ratify the actions of the above authorised Trustees/Executors/Officers so acting
5. Indemnify Milford in respect of any liability incurred by Milford in acting in reliance upon this Authority to Act.

Please note, you must immediately notify Milford of any changes to the Trustees/Executors/Officers of the Trust/Estate. This Authority to Act will then be revoked and, if required, a new Authority to Act will need to be completed.

**All Trustees/Executors/Officers (plus a minimum of two Directors of a Trustee Company or the minimum number of Directors nominated by the Professional Trustee Company) must sign the Agreement on page 11 before the Authority to Act will be in place.**



## G - Investment Details

### Source of Funds\*

Please tell us the original source of the funds you are investing with us.

Inheritance/windfall  Property sale  Asset/Business sale  Personal income  Accumulated savings/earnings  Superannuation

**All trusts, other than estates, need to supply proof of the source of funds (this documented evidence may need to be certified).**

See page 15 for further examples of suitable verification of the source of your funds.

Please provide further details. For example, sale of property at 123 Sample Street for \$600,000 on 21/06/2014.

### Primary Purpose for the Investment\*

Please tell us the primary reason you are investing these funds with us.

Retirement  Income  Investment  Other (please specify)

How do you intend to transact on this account?

**Deposits** (please select at least one)

Regular  Now and then  Lump sum (one-off)

**Withdrawals** (please select at least one)

Regular  Now and then  Lump sum (one-off)

\* Please note this information is requested solely in relation to Milford's Anti-Money Laundering and Countering Financing of Terrorism Act 2009 obligations and is not used to assess the suitability of your product selection, or to provide financial advice.

### Investment Details

**For Trust account applications there is a minimum initial investment of \$100,000 per account. For Estate applications the minimum initial investment is \$10,000. These amounts can be split across multiple Funds.**

		Indicative Investment Amount (Minimum of \$1,000 Per Fund)	Distribution Options (If no option is selected, all distributions will be reinvested)	
Multi-Asset Funds	Milford Conservative Fund	\$	<input type="checkbox"/> Reinvest	<input type="checkbox"/> Direct Credit
	Milford Diversified Income Fund	\$	<input type="checkbox"/> Reinvest	<input type="checkbox"/> Direct Credit
	Milford Balanced Fund	\$	N/A	N/A
	Milford Active Growth Fund	\$	N/A	N/A
	Milford Australian Absolute Growth Fund	\$	N/A	N/A
	Milford Aggressive Fund	\$	N/A	N/A
Cash & Fixed Income Funds	Milford Cash Fund	\$	N/A	N/A
	Milford Trans-Tasman Bond Fund	\$	<input type="checkbox"/> Reinvest	<input type="checkbox"/> Direct Credit
	Milford Global Corporate Bond Fund	\$	<input type="checkbox"/> Reinvest	<input type="checkbox"/> Direct Credit
Equity Funds	Milford Global Equity Fund	\$	N/A	N/A
	Milford Trans-Tasman Equity Fund	\$	N/A	N/A
	Milford Dynamic Fund	\$	N/A	N/A
Total		\$		

## G - Investment Details (continued)

### Payment details & process

**Please note your account must be established with Milford before we can accept any funds for investment.**

Once your account has been setup we will contact you with the appropriate bank account details and references for you to make a direct credit payment.

## H - New Zealand Bank Account Details

Please provide us with your bank account details, including proof of these.

- The bank account you provide will be the account we can accept payments from (you need to initiate the payment).
- Any withdrawal requests will be paid into this bank account.
- We recommend using your cheque account rather than a savings account.
- We are unable to accept payments from international or third party bank accounts.

ACCOUNT NAME **(must be in the same name as your Milford Funds holding)**

BANK

BRANCH

ACCOUNT NUMBER

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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BANK

BRANCH

ACCOUNT NUMBER

SUFFIX

### PROOF OF BANK ACCOUNT

Must be a NZ domiciled bank account in the name of the Trust or Estate.

Please provide a bank record or document that:

- Was issued in the last 12 months
- Includes bank account name
- Includes bank account number
- Includes bank logo

Examples of this include a bank statement, letter from the bank, or mobile banking screen shot.

## Your Agreement

### Privacy Statement

1. The personal information you provide in this Application Form (and identity information collected in connection with this Application Form), or in the future, will be collected and held by Milford Funds Limited (“Milford”) for purposes relating to the administration, marketing, operation, security and management of the Funds, the provision of services to you, and compliance with any laws, rules and regulations whether in New Zealand or in any other country. Milford will do this in accordance with all applicable New Zealand privacy laws and our Privacy Policy which can be accessed on our website at [milfordasset.com/privacy-policy](http://milfordasset.com/privacy-policy). Your personal information may be disclosed to, and held and used by, the following persons:
  - The Supervisor of the Funds
  - Milford Asset Management Limited or any of its subsidiaries or related companies (together, the “Milford Group”)
  - Inland Revenue
  - Financial Markets Authority
  - Any third party, whether in New Zealand or elsewhere, that provides services to the Milford Group. In particular, if you have opted for electronic identity verification, the information will be shared with external agencies who may use a credit file header database to verify your address (note, this is not a credit check)
  - Your own financial adviser (and their staff), this only applies if you have notified us of this relationship (you are responsible for advising us if and when this relationship ends)
  - Any other person or entity where it is relevant to do so for the purposes set out above.
 We can also release personal information to third parties as instructed by you and in other ways permitted by the Privacy Act.
2. Your personal information may also be used by, and you consent to the use of your personal information by, Milford or any other member of the Milford Group to keep you informed about other financial opportunities, products and services of any Milford Group member, including by email, by text message, by Milford Group’s online portal or by any other electronic means. Any electronic communication offering other financial opportunities, products or services will include an unsubscribe facility.
3. You have the right to access and request correction to the personal information you have supplied, by contacting Milford on 0800 662 345 or by emailing us at [info@milfordasset.com](mailto:info@milfordasset.com). Any update to your personal information may be used to update other information held about you by any member of the Milford Group.

### Electronic provision of information

4. We consent to receiving any communication from the Supervisor or any member of the Milford Group electronically via Milford Group’s online portal, or at the email address specified in this Application Form, or any other email address advised to any Milford Group entity from time to time. These communications include those required by law and those provided in connection with your Fund, including annual reports, annual tax certificates and six-monthly transaction confirmations.

### Declaration

- We have received and read a copy of the Product Disclosure Statement dated 20 June 2024 (“PDS”), and understand that additional information about the Funds is available on the Funds’ online register entry.
- We agree to be bound by the terms and conditions of the PDS and the Trust Deed.
- We understand that the value of our investment is liable to fluctuations and may rise and fall from time to time.
- We accept that it is solely our decision to make this investment and that we have chosen the appropriate Fund for our risk tolerance and circumstances.
- We understand that Milford has not assessed the suitability of this investment for our personal financial situation, financial needs or goals.
- We understand the manner in which the fees will be deducted from our investment.
- We acknowledge that we will be unable to make any withdrawal from the Funds until Milford has received our signed withdrawal request and any supporting or identification information required.
- All the information we have provided in this Application Form is to the best of our knowledge and belief, correct and complete.
- We will immediately advise Milford about any changes to our personal details (including our residential or email address, telephone number, legal status or capacity).
- We undertake to notify Milford of any change in tax residency status or a change which causes the information to become incorrect or incomplete.
- We confirm that particulars of all current trustees have been listed in this application and we will immediately advise Milford of any changes to the trustees of the entity.
- We confirm that particulars of all current beneficiaries have been listed in this application and we will immediately advise Milford of any changes to the beneficiaries of the entity and once a first distribution is made to any beneficiary.
- We understand that if Milford receives contradictory instructions from any persons authorised to operate our account, Milford can refuse to act on any or all such instructions.
- We will immediately advise Milford of any changes, variations or amendments to the entity which affects the trustees powers of investment.
- We acknowledge and agree to the terms of the Privacy Statement and electronic provision of information above.

### Must be signed by all Trustees (including Directors of Trustee Companies as applicable – see Section E)

NAME OF TRUSTEE/EXECUTOR/OFFICER 1	SIGNATURE	DATE
		/ /
NAME OF TRUSTEE/EXECUTOR/OFFICER 2	SIGNATURE	DATE
		/ /
NAME OF TRUSTEE/EXECUTOR/OFFICER 3	SIGNATURE	DATE
		/ /
NAME OF TRUSTEE/EXECUTOR/OFFICER 4	SIGNATURE	DATE
		/ /

If required, you may make a copy of this page for additional signatories. Please note we cannot accept electronic signatures.

# Milford Investment Funds

## Trust including Estate Application Form (continued)

### Appendix 1 (You may make copies of this page if required)

To be completed by the following individuals (unless they have completed Section D):

- Appointer or Protector
- Any Settlor (or other individual) who has contributed \$5,000 or more to the trust
- All Directors of a Trustee Company or all nominated directors of a professional Trustee Company
- Beneficiaries with more than 25% interest (Non-discretionary Trusts and Estates only)
- Shareholders of the Trustee Company with more than 25% shareholding (excluding professional Trustee Companies)
- Any person who has been given the authority to act

FULL TRUST NAME

TITLE	FIRST NAME	MIDDLE NAME(S)	SURNAME
<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>

PREFERRED NAME	DATE OF BIRTH	CONTACT NUMBER	IRD NUMBER
<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>

ROLE/RELATIONSHIP TO ENTITY	OCCUPATION	EMAIL ADDRESS
<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>

PHYSICAL ADDRESS (cannot be a PO Box)	SUBURB
<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>

CITY	COUNTRY	POSTCODE
<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>

POSTAL ADDRESS (if different from physical address)	SUBURB
<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>

CITY	COUNTRY	POSTCODE
<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>

Are you a US citizen or US tax resident?  Yes  No

Are you a tax resident in any other country (other than the US or NZ)?  Yes  No

If you answered 'Yes' to either of the above questions please list all countries below and provide the Tax Identification Number ('TIN') for each country. If you are a US citizen or US tax resident your TIN will typically be your Social Security Number.

Country of Tax Residence	TIN (or reason why TIN was unable to be obtained)
<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>
<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>

For further information on your personal tax residency status please see <http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-residency> or speak to a tax adviser.

### Investor Identification

Please select **one** of the options below.

#### Option 1 - Electronic Identity Verification and Proof of Address

Milford can confirm the identity and/or New Zealand address of many of our clients electronically, with their permission. Please note that we use an external third party system not owned by Milford to conduct identity checks in this way.

I confirm that I give Milford authority to check my identity and/or address electronically using the documentation provided. **I have included a copy of my current signed NZ Passport (preferred) or NZ Driver Licence (front & back).**

#### Option 2 - Certified Copies of Identity Documents

I will provide certified identification documents.

**For further detail on document requirements, including who can certify them and correct certification wording, see page 14.**

### Declaration

I acknowledge that the information contained in this form and information regarding the account may be reported to New Zealand Inland Revenue and exchanged with the tax authority of another pursuant to intergovernment agreements to exchange financial account information. I will notify Milford if any of this information changes, including any changes in my tax residency status. I agree to Milford's Privacy Policy found here [milfordasset.com/privacy-policy](http://milfordasset.com/privacy-policy).

SIGNATURE

DATE

# Milford Investment Funds

## Trust including Estate Application Form (continued)

### Appendix 2 (You may make copies of this page if required)

If in Section B, you answered 'Yes' to Question 3 (i.e. you are a managed investment entity resident in a jurisdiction that is not participating in the OECD's CRS regime) or you are a Passive NFE (question 4), then you will need to complete this page for the following Associated Persons (unless they have completed Section D or Appendix 1):

- any beneficiary who has received a distribution
- any settlor (or any other individual) who has contributed less than \$5,000 to the Trust

FULL TRUST NAME

TITLE	FIRST NAME	MIDDLE NAME(S)	SURNAME
<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>

PREFERRED NAME	DATE OF BIRTH	CONTACT NUMBER	IRD NUMBER
<input style="width: 95%;" type="text"/>	<input style="width: 90%;" type="text"/> / <input style="width: 90%;" type="text"/> / <input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>

ROLE/RELATIONSHIP TO ENTITY	EMAIL ADDRESS
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

PHYSICAL ADDRESS (cannot be a PO Box)	SUBURB
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

CITY	COUNTRY	POSTCODE
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Are you a US citizen or US tax resident?  Yes  No

Are you a tax resident in any other country (other than the US or NZ)?  Yes  No

If you answered 'Yes' to either of the above questions please list all countries below and provide the Tax Identification Number ('TIN') for each country. If you are a US citizen or US tax resident your TIN will typically be your Social Security Number.

Country of Tax Residence	TIN (or reason why TIN was unable to be obtained)
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

For further information on your personal tax residency status please see <http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-residency> or speak to a tax adviser.

#### Declaration

I acknowledge that the information contained in this form and information regarding the account may be reported to New Zealand Inland Revenue and exchanged with the tax authority of another pursuant to intergovernment agreements to exchange financial account information. I will notify Milford if any of this information changes, including any changes in my tax residency status. I agree to Milford's Privacy Policy found here [milfordasset.com/privacy-policy](http://milfordasset.com/privacy-policy).

SIGNATURE

DATE

## Investor Identification

If you have opted not to use Electronic Identity Verification or did not pass this system check then you will need to provide the following documentation:

**Please provide a certified photocopy of each document:**

- The documents can be verified by a Milford employee or certified by a Trusted Referee as described below.
- These documents cannot be scanned to us (we need the physical copy that has been certified).
- Please do not send in original versions of your identity documents.

### 1. CERTIFIED COPY OF IDENTIFICATION

#### Option 1

One of the following:

- Current signed Passport (preferred)
- New Zealand Firearms Licence

**OR**

#### Option 2

- New Zealand Driver Licence (front and back)

In combination with one of the following:

- Bank statement dated within the last 12 months
- Valid credit or debit card with name embossed and signature
- Birth certificate
- Citizenship certificate
- Government agency letter (IRD, Work & Income, Electoral Commission) dated within the last 12 months
- SuperGold card with photo, name and signature

### 2. PROOF OF ADDRESS

Must state name and physical address, cannot be a PO Box address.

One of the following documents that has been issued in the last 12 months:

- Bank statement (we accept downloaded bank statements)
- Current house or contents insurance policy or renewal statement
- Current vehicle registration
- Government agency letter (IRD, Work & Income, Electoral Commission)
- Utility bill (power, water, internet, fixed home phone, SKY)
- Rates bill
- Tenancy agreement
- Letter issued by local Health Board

### 3. ACCEPTED TRUSTED REFEREES FOR CERTIFICATION

Originals can be verified by a Milford employee **OR** certified by a Trusted Referee in accordance with the instructions outlined below. Certified copies of identification must be presented to Milford within three months of certification.

Identification must be certified by one of the following:

- Lawyer with a current practising certificate
- Chartered Accountant
- Member of the Police
- Justice of the Peace
- Registered Medical Doctor
- Registered Teacher
- New Zealand Honorary Consul
- Notary Public
- A person who has the legal authority to take statutory declarations or the equivalent in New Zealand
- If outside New Zealand, a person authorised by law to take a statutory declaration (or equivalent) in that country

The certifier must:

- For photographic ID, make the statement **"I certify this to be a true copy of the original which I have sighted and represents a true and correct likeness of [name of the person presenting the documentation for certification]."**
- For certification of other documents, make the statement **"I certify this to be a true copy of the original which I have sighted."**
- Include their **name, occupation and capacity to be a certifier** e.g. registration number (if applicable), **signature and date** of certification.
- Not be living at the same address, a relative or spouse of the individual presenting the documents or, be involved in the transaction or business requiring the certification.

## Verification of Source of Funds

Source of Funds	Suggested Verification/Evidence (not exhaustive)
Employment	<ul style="list-style-type: none"> <li>• Pay slip (or bonus) from within the last three months</li> <li>• Bank statement details</li> <li>• IRD documents</li> <li>• Employment agreement</li> </ul>
Disposal of Business or Assets	<ul style="list-style-type: none"> <li>• Latest audited company accounts</li> <li>• Letter from solicitor or accountant (see below example)</li> </ul>
Investment income	<ul style="list-style-type: none"> <li>• Investment/savings certificates, contract notes or surrender statements</li> <li>• Bank statements clearly showing receipt of funds and investment company name</li> <li>• Signed letter detailing funds from a regulated accountant or solicitor</li> </ul>
Superannuation lump sum or annuity/retirement plan payments	<ul style="list-style-type: none"> <li>• Closing statement</li> <li>• Letter confirming collection</li> </ul>
Inheritance	<ul style="list-style-type: none"> <li>• Grant of Probate (copy of the will) which includes value of inheritance amount or estate</li> <li>• Letter from solicitor or accountant (see below example)</li> </ul>
Maturity or surrender of life policy	<ul style="list-style-type: none"> <li>• Closing statement</li> <li>• Letter confirming surrender</li> </ul>
Business proceeds	<ul style="list-style-type: none"> <li>• Latest audited company accounts</li> <li>• Letter from solicitor or accountant (see below example)</li> </ul>
Sale of property	<ul style="list-style-type: none"> <li>• Sale contract</li> <li>• Letter from solicitor or accountant (see below example)</li> </ul>
Lottery/Betting win	<ul style="list-style-type: none"> <li>• Lotteries commission letter</li> </ul>
Insurance or compensation claim	<ul style="list-style-type: none"> <li>• Closing statement</li> <li>• Letter confirming claim</li> </ul>
Gift	<ul style="list-style-type: none"> <li>• Evidence of the donor's source of funds and a letter from the donor confirming details of the gift.</li> <li>• Letter from solicitor (see below example)</li> </ul>
Other Income	<ul style="list-style-type: none"> <li>• Anything not listed that otherwise proves source of funds and is independent</li> </ul>

### Example letter template for solicitor or accountant

These should be on the organisation's letterhead, include the author's name, title and contact details and make a statement including the below points:

- We act as [solicitors/accountants] for the [trust name] and are familiar with the Trust's history.
- We can confirm that the funds within the Trust, invested with Milford, is originally derived from:
  - Detail of how the funds held by the trust was sourced
  - Detail the amount(s)
  - Detail the date of the source event(s), or the time frame over which the funds were accumulated
- Include any details and/or information that may better help clarify the above statements, if required.

## Application Form Checklist

- Application form completed and signed by all relevant individuals
- Trust Deed and any amendments
- Certified copy of Probate/Letters of Administration (Estate only)
- Details and verification (certified copy may be required) of source of funds (not required for Estates)
- Proof of bank account in the Trust or Estate's name
- Section D completed for the following persons:
  - All Trustees/Executors
  - All Officers (Charitable Trust only)
- Appendix 1 completed by the following persons (unless they have completed Section D):
  - Appointer or Protector
  - Any Settlor (or other individual) who has contributed for \$5,000 or more to the trust
  - All Directors of a Trustee Company / All nominated directors of a professional Trustee Company
  - Beneficiaries with more than 25% interest (Non-discretionary Trusts and Estates only)
  - Shareholders of the Trustee Company with more than 25% shareholding (excluding professional Trustee Companies)
  - Any person who has been given the authority to act
- If in Section B, you answered 'Yes' to Question 3 (i.e. you are a managed investment entity resident in a jurisdiction that is not participating in the OECD's CRS regime) or the Trust is a Passive NFE (question 4), then Appendix 2 should be completed for the following Associated Persons (unless they have completed Appendix 1 or Section D):
  - Settlor (or any other individual) who have contributed less than \$5,000 to the Trust
  - Beneficiaries of the Trust/Estate who have received a distribution (including any income, cash, asset(s), forgiveness of debt or the Trust/Estate incurring expenditure for their benefit). You are considered to have received a distribution if a person or entity receiving that distribution holds it for your benefit (e.g. a nominee or nominee company)

## Notes

### RETURNING YOUR COMPLETED FORM

Please send your application and all supplementary documentation in hard copy to the address details below:

**Milford Funds Limited**  
**PO Box 960**  
**Shortland Street**  
**Auckland 1140**