

BlackRock Investment Management (Australia) Limited ABN 13 006 165 975,
 AFS Licence Number 230523 and BlackRock Asset Management Australia Limited
 ABN 33 001 804 566, AFS Licence 225398 (each referred to as BlackRock).

Important information

BlackRock must comply with Australian Anti-Money Laundering and Counter-Terrorism Financing laws ('the AML Legislation'), which requires us to, among other things, establish your identity.

This form is provided to collect the necessary customer information as required by the AML Legislation to establish your identity. For your application to be processed by BlackRock, you must ensure that this form as well as your application form is completed and forwarded to us.

By completing this Investor Identification Form and providing us with information to establish your identity, you acknowledge and agree:

- ▶ this information will be used by BlackRock Investment Management (Australia) Limited and/or BlackRock Asset Management Australia Limited to establish your identity for the purposes of the AML Legislation;
- ▶ BlackRock Investment Management (Australia) Limited and BlackRock Asset Management Australia Limited (collectively, BlackRock) will neither be responsible nor liable to you or any other person for any loss suffered (including consequential loss) where transactions are delayed, blocked, frozen or where BlackRock declines to process a transaction or ceases to provide you with a product or service, in circumstances where BlackRock is unable to establish your identity or where BlackRock reasonably believes you are a Proscribed Person¹.

1. A 'Proscribed Person' means any person or entity who BlackRock reasonably believes to be (i) in breach of the laws of any jurisdiction regarding economic or trade sanctions, or laws prohibiting money laundering or terrorism financing, or (ii) on a list of persons with whom dealings are proscribed by Australian laws or the laws of another recognised jurisdiction. A 'Proscribed Person' includes any person or entity who BlackRock reasonably believes to act on behalf, or for the benefit of, a person or entity referred to in (i) and/or (ii).

When completing this form

Depending on your investor type, BlackRock may require supporting identification/verification documentation to establish your identity.

Where such identification/verification documentation is required, an originally certified copy is required. An abbreviated list of the various people that can certify documents is provided on the next page.

Will documents in a language other than English be accepted?

Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator. An accredited translator is any person who is currently accredited by the National Accreditation Authority for Translators and Interpreters Ltd (NAATI) at the level of Professional Translator or above.

Which sections of this form apply to me?

Please ensure that you read the section applicable to you and (where relevant) attach an originally certified copy of the document before sending it to BlackRock.

What type of investor am I?

Type of investor	Description
Foreign Company	Company incorporated in a foreign jurisdiction.
Trust Foreign Company acting as a Corporate Trustee(s) of a Trust	Company incorporated in a foreign jurisdiction, acting in the capacity of a trustee on behalf of another. A trust will in most circumstances be established pursuant to a trust deed with the intention of holding income or property on behalf and for the benefit of another (who may or may not include the trustee). Trusts can include: <ul style="list-style-type: none"> ■ Family trusts ■ Deceased estate ■ Managed investment scheme (registered or unregistered) ■ Charitable trust ■ Testamentary trust ■ Pension scheme/Retirement fund

If you are not a Foreign Company or a Foreign Company acting as a Corporate Trustee(s) of a Trust, you will need to complete a separate Investor Identification Form, available from our website at www.blackrock.com.au, that caters to the following types of investors:

- ▶ Individual(s) & Sole Traders
- ▶ Individual(s) acting as a Trustee(s) of a Trust or Superannuation Fund
- ▶ Domestic (Australian) Company
- ▶ Domestic (Australian) Company acting as a Corporate Trustee of a Trust or Superannuation Fund
- ▶ Partnership
- ▶ Association
- ▶ Registered Co-operative
- ▶ Government Body.

Certifying AML documents

An originally certified copy is a copy of a document that has been certified as a true copy of an original document.

To obtain an originally certified copy, present the original AML document and a photocopy of that document to one of the people listed below. The person certifying the document will need to include the following information on the photocopy:

- ▶ “I certify that this is a true copy of the original document”; and
- ▶ the certifier’s:
 - full name
 - occupation, qualification, position or registration number (if any), which makes them eligible to certify documents;
- ▶ the date the document was signed and the certifier’s signature.

If this certification does not appear, you may be asked for new certified documents.

Persons based overseas who can certify AML documents

- ▶ Australian Consular Officer or Australian Diplomatic Officer (within the meaning of the Consular Fees Act 1955)
- ▶ Employee of the Australian Trade Commission who is:
 - in a country or place outside Australia; and
 - authorised under paragraph 3(d) of the Consular Fees Act 1955; and
 - exercising his or her function in that place
- ▶ Employee of the Commonwealth who is:
 - in a country or place outside Australia; and
 - authorised under paragraph 3(c) of the Consular Fees Act 1955; and
 - exercising his or her function in that place
- ▶ Member of the Australian Defence Force who is:
 - an officer; or
 - a non-commissioned officer within the meaning of the Defence Force Discipline Act 1982 with 2 or more years of continuous service; or
 - a warrant officer within the meaning of that Act.
- ▶ Member of the Institute of Chartered Accountants **in Australia**, the Australian Society of Certified Practising Accountants or the National Institute of Accountants
- ▶ A person who, is currently licensed or registered **in Australia** to practise in the following occupations:
 - Legal practitioner
 - Medical Practitioner
 - Nurse

If you have an enquiry about who can certify your documents please don't hesitate to contact BlackRock on +61 3 9657 3000 and ask to speak with one of our Client Service representatives.

Investor Identification Form – Foreign Corporate Entity

Section A. Foreign Company

If you are:

- a) a Company incorporated in a foreign jurisdiction, complete this Section A; or
- b) a Company incorporated in a foreign jurisdiction, acting in the capacity of a trustee of a trust, go to Section B.

SECTION A1

GENERAL INFORMATION

Full name of Foreign Company

Country of formation/incorporation/registration

Select if registered by a foreign body and provide the name of the body:

SECTION A2

IS THE FOREIGN COMPANY REGISTERED WITH ASIC?

Yes Provide Australian Registered Body Number (ARBN)

Provide EITHER address of principal place of business in Australia

OR local agent name and address details

Address

Street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

Name of local agent in Australia

No

Provide company identification number (if any) issued by the foreign registration body

Principal place of business in the company's country of formation or incorporation

Street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

SECTION A3

REGISTERED ADDRESS OF COMPANY

Provide the registered address as registered with ASIC. If the foreign company is NOT registered with ASIC, provide the registered address in the country of formation, incorporation or registration (if any)

Street address

Suburb

State

Postcode

Country (if not Australia)

SECTION A4

REGULATORY/LISTING DETAILS Please select ✓ each of the following categories that apply to the company and provide the information requested

<input type="checkbox"/> Regulated company (licensed by an Australian Commonwealth, State or Territory statutory regulator)	Regulator name	<input type="text"/>
	Licence details	<input type="text"/>
<input type="checkbox"/> Listed as defined in the IFSA/FPA Guidelines	Name of market/exchange	<input type="text"/>
<input type="checkbox"/> Majority-owned subsidiary of an Australian listed company	Australian listed company name	<input type="text"/>
	Name of market/exchange	<input type="text"/>
<input type="checkbox"/> None of the above		

SECTION A5

COMPANY TYPE

Please select ✓ ONE of the following:

<input type="checkbox"/> Public	<input type="checkbox"/> Private/Proprietary	<input type="checkbox"/> Other	<input type="text"/>
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SECTION A6

DIRECTOR(S)

Complete for all companies other than listed companies (as ticked in Section A4) or public companies (as ticked in Section A5)

How many directors are there? Provide details for each director below

Director 1

Full given name(s)

Surname

Date of birth (dd/mm/yyyy)

Address details of Director 1

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

Director 2

Full given name(s)

Surname

Date of birth (dd/mm/yyyy)

Address details of Director 2

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

Director 3

Full given name(s)

Surname

Date of birth (dd/mm/yyyy)

Address details of Director 3

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

Director 4

Full given name(s)

Surname

Date of birth (dd/mm/yyyy)

Address details of Director 4

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

If there are more directors, please provide details on a separate sheet and attach to this form.

If the company is a regulated company (as selected in Section A4 above), this is the end of Section A. Please submit this form, together with your application form. Otherwise, continue to Section A7.

SECTION A7

SHAREHOLDERS

Complete for all companies other than (i) listed or regulated companies (as ticked in Section A4) or (ii) public companies (as ticked in Section A5).

Provide details of **ALL individuals** who are beneficial owners through one or more shareholdings of more than 25% of the company's issued capital.

Shareholder 1

Full given name(s)

Surname

Address details of Shareholder 1

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

Shareholder 2

Full given name(s)

Surname

Address details of Shareholder 2

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

Shareholder 3

Full given name(s)

Surname

Address details of Shareholder 3

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

This is the end of Section A. Please submit this form together with the completed application form. BlackRock will perform the verification procedure to establish your identity. However, if we cannot access the information to complete this procedure, we may ask you to provide us with further information.

Section B. Foreign Company acting as Trustee of a Trust

If you are:

- a) a Company incorporated in a foreign jurisdiction AND you are acting in the capacity of a trustee of a trust, complete this Section B; or
b) a Company incorporated in a foreign jurisdiction that is **not** acting in the capacity of a trustee of a trust, please complete Section A only.

SECTION B 1

TRUST DETAILS – GENERAL INFORMATION

Full name of trust

Full business name (if any)

Country where trust established

SECTION B 2

TYPE OF TRUST

Please select ONE of the following and provide the details requested:

Regulated trust

Provide name of the regulator (e.g. ASIC, APRA)

Provide the trust's ABN or registration/licensing details

If you have ticked regulated trust, Sections B3 and B4 do not need to be completed. Please go to Section B5.

Government superannuation fund

Provide name of the legislation establishing the fund

If you have ticked government superannuation fund, Sections B3 and B4 do not need to be completed. Please go to Section B5.

Registered managed investment scheme

Provide Australian Registered Scheme Number (ARSN)

If you have ticked registered managed investment scheme, Sections B3 and B4 do not need to be completed. Please go to Section B5.

Other trust type (e.g. Self Managed Superannuation Fund/
Pension Scheme/Retirement Fund)

Please specify Trust description (e.g. family discretionary or unit trust, testamentary trust, charitable, estate, SMSF, pension scheme, retirement fund)

Provide the trust's ABN or registration/licensing details

If you have ticked other trust type, please complete Sections B3 and B4, then go to Section B5.

SECTION B3

BENEFICIARY DETAILS

Provide beneficiary details only if "Other trust type" is selected in Section B2 above.

Do NOT complete if the trust is a regulated trust, government superannuation fund or a registered managed investment scheme.

Do the terms of the trust identify the beneficiaries by reference to membership of a class?

Yes Provide details of the membership class(es) (e.g. unit holders, family members of a named person, charitable purpose)

No How many beneficiaries are there?
Provide details of each beneficiary below.

[Go to Section B4](#)

Beneficiary 1

Full given name(s)

Surname

Date of birth (dd/mm/yyyy)

Address details of Beneficiary 1

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

Beneficiary 2

Full given name(s)

Surname

Date of birth (dd/mm/yyyy)

Address details of Beneficiary 2

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

Beneficiary 3

Full given name(s)

Surname

Date of birth (dd/mm/yyyy)

Address details of Beneficiary 3

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

Beneficiary 4

Full given name(s)

Surname

Date of birth (dd/mm/yyyy)

Address details of Beneficiary 4

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

If there are more than four beneficiaries, please provide details on a separate sheet and attach to this form.

Please go to Section B4.

SECTION B4

TRUSTEE DETAILS

Provide trustee details only if "Other trust type" is selected in Section B2 above.

Do NOT complete if the trust is a regulated trust, government superannuation fund or a registered managed investment scheme.

How many trustees are there? Provide full name and address of each trustee below.

Trustee 1

Company name OR full name if the Trustee is an individual

Company registered office address OR residential address if the Trustee is an individual (PO Box is NOT acceptable)

<input type="text"/>	
<input type="text"/>	
<input type="text"/>	
Suburb	<input type="text"/>
State	Postcode
Country (if not Australia)	

Trustee 2

Company name OR full name if the Trustee is an individual

Company registered office address OR residential address if the Trustee is an individual (PO Box is NOT acceptable)

<input type="text"/>	
<input type="text"/>	
<input type="text"/>	
Suburb	<input type="text"/>
State	Postcode
Country (if not Australia)	

If there are more trustees, please provide details on a separate sheet and attach to this form.

Please go to Section B5.

SECTION B5

Note: Sections B5 to B11 needs to be completed for ONLY ONE of the Trustees (that is a foreign company) of the Trust.

FOREIGN COMPANY DETAILS – GENERAL INFORMATION

Full name of Foreign Company

Country of formation/incorporation/registration

Select if registered by a foreign body and provide the name of the body:

SECTION B6

IS THE FOREIGN COMPANY REGISTERED WITH ASIC?

Yes

Provide Australian Registered Body Number (ARBN)

Provide EITHER address of principal place of business in Australia

OR local agent name and address details

Address

Street address (PO Box is not acceptable)	
<input type="text"/>	
<input type="text"/>	
<input type="text"/>	
Suburb	<input type="text"/>
State	Postcode
Country (if not Australia)	

Name of local agent in Australia

No

Provide company identification number (if any) issued by the foreign registration body

Principal place of business in the company's country of formation or incorporation

Street address (PO Box is not acceptable)	
<input type="text"/>	
<input type="text"/>	
<input type="text"/>	
Suburb	<input type="text"/>
State	Postcode
Country (if not Australia)	

SECTION B7

REGISTERED ADDRESS OF COMPANY

Provide the registered address as registered with ASIC. If the foreign company is NOT registered with ASIC, provide the registered address in the country of formation, incorporation or registration (if any)

Street address

Suburb

State

Postcode

Country (if not Australia)

SECTION B8

REGULATORY/LISTING DETAILS Please select ✓ each of the following categories that apply to the company and provide the information requested

Regulated company (licensed by an Australian Commonwealth, State or Territory statutory regulator)

Regulator name

Licence details

Listed as defined in the IFSA/FPA Guidelines

Name of market/exchange

Majority-owned subsidiary of an Australian listed company

Australian listed company name

Name of market/exchange

None of the above

SECTION B9

COMPANY TYPE

Please select ✓ ONE of the following:

Public

This form is now complete. Please submit this form, together with the completed application form. If "Other trust type" is selected in Section B2, you will need to provide us with the documents requested on the last page of this form.

Private/Proprietary

Please go to Section B10.

Other

Please go to Section B10.

SECTION B 10

DIRECTOR(S)

Complete for all companies other than listed companies (as ticked in Section B8) or public companies (as ticked in Section B9)

How many directors are there? Provide details for each director below

Director 1

Full given name(s)

Surname

Date of birth (dd/mm/yyyy)

Address details of Director 1

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

Director 2

Full given name(s)

Surname

Date of birth (dd/mm/yyyy)

Address details of Director 2

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

Director 3

Full given name(s)

Surname

Date of birth (dd/mm/yyyy)

Address details of Director 3

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

Director 4

Full given name(s)

Surname

Date of birth (dd/mm/yyyy)

Address details of Director 4

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

If there are more directors, please provide details on a separate sheet and attach to this form.

If the company is a regulated company (as selected in Section B8 above), this is the end of Section B. Please submit this form, together with your application form. If "Other trust type" is selected in Section B2, you will also need to provide us with the documents requested on the last page of this form.

Otherwise, continue to Section B11 below.

SECTION B 11

SHAREHOLDERS

Complete for all companies other than (i) listed or regulated companies (as ticked in Section B8) or (ii) public companies (as ticked in Section B9).

Provide details of ALL individuals who are beneficial owners through one or more shareholdings of more than 25% of the company's issued capital.

Shareholder 1

Full given name(s)

Surname

Address details of Shareholder 1

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

Shareholder 2

Full given name(s)

Surname

Address details of Shareholder 2

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

Shareholder 3

Full given name(s)

Surname

Address details of Shareholder 3

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

This is the end of Section B. Please submit this form, together with the completed application form. If "Other trust type" is selected in Section B2, you will need to provide us with the documents requested on the last page of this form.

Verification procedure

BlackRock will perform the verification procedure to establish your identity. However, if we cannot access the information to complete this procedure, we may ask you to provide us with further information.

If “Other trust type” is selected in Section B2, you will need to provide us with ONE of the following (please ✓):

- A notice issued by the Australian Taxation Office within the last 12 months (e.g. a Notice of Assessment). *Block out the TFN before scanning, copying or storing this document.*
- A letter from a solicitor or qualified accountant that confirms the name of the trust.
- An original or certified copy or certified extract of the trust deed.