

INSTRUCTIONS FOR COMPLETING APPLICATION FORM

Applications

Applications must be for a minimum investment of AUD 50,000 with additional investment in increments of AUD 10,000. The Issue Price of Units is calculated in accordance with the Information Memorandum. JB Markets Pty Ltd (The Manager) will arrange for Units to be issued on the day application funds are cleared, and application funds may be received by way of cheque or electronic bank transfer.

Please read before completing the application form on the following pages.

Application form

Application must be made either on the application form accompanied with this Information Memorandum or via the online application process on the company's website. Please complete all parts using block letters.

Note that ONLY legal entities can hold the Units. The Application must be in the name of a natural person(s), companies or other legal entities acceptable to the Manager. At least one full given name and surname is required for each natural person.

Examples of the correct form of registrable title are set out below.

Type of Investor	Correct Form of Registrable Title	Incorrect Form of Registrable Title
Trusts	Mr John David Smith <J D Smith Family A/C>	John Smith Family Trust
Deceased Estates	Mr Michael Peter Smith <Est Lte John Smith A/C>	John Smith (deceased)
Partnerships	Mr John David Smith & Mr Ian Lee Smith	John Smith & Son
Clubs/Unincorporated Bodies	Mr John David Smith <Smith Investment A/C>	Smith Investment Club
Superannuation Funds	Mr John Smith & Mrs Mary Smith (Smith Family Super Fund A/C>	John & Mary Smith Superannuation Fund

Australian investors must be wholesale clients

Applications from entities that reside in Australia or receive this Information Memorandum in Australia will only be accepted if they are wholesale clients within the meaning of the Corporations Act. Such Applicants must complete the Wholesale Client Declaration in Part D of the Application Form.

Please note that processing your application may be delayed where you, or your adviser, do not provide adequate identification documents.

Anti-Money Laundering and Counter-Terrorism Financing Act – Account Identification Verification Procedures

The *Anti-Money Laundering and Counter-Terrorist Financing Act 2006 (AML/CTF)* requires additional identification information from investors.

Instructions for Direct Investors

If you are a direct investor (i.e. you are not investing through a dealer, Investor Directed Portfolio Service or other financial adviser) then please complete Part One. Please provide us with the requested identification information and your completed Application Form.

Instructions for Financial Advisers

If you are a financial adviser (i.e. you are a financial adviser, dealer, IDPS or a person making arrangements for a designated service) then please either:

1. Complete Part One - please check appropriate boxes to indicate the documents you have either collected and verified for this investor, or have attached to the Application Form; or
2. Complete Part Two - you may either:
 - (a) confirm the satisfactory collection and verification of the investor's identification documents, and contact JB Markets to enter into an agreement to allow us to have access to your customer identification records in relation to the investor when required;

OR

- (b) include certified copies of the investor's identification documents with the Application Form, and an extract from your equivalent AML/CTF program setting out your procedure for the collection of customer identification information.

Payment

1. Cheque: A cheque drawn in AUD must accompany the Application Form and be for the full amount of your selected investment. Cheques are to be crossed “not negotiable” and made payable to ‘JB Markets Pty Ltd ATF JB High Alpha Fund Trust Client Segregated Account’.

2. Electronic Transfer: Payment may be accepted (subject to having received and accepted a valid Application Form and relevant identification documents) in AUD for the full amount of your selected investment. Please reference payment with name of Applicant.

The bank details are:

Payment in	Australian Dollars
Account Name	JB Markets Pty Ltd ATF JB High Alpha Fund Trust Client Segregated Account
Bank	Westpac Banking Corporation
Branch Identification	034 001
Account Number	450 607
SWIFT Code	WPACAU2S

Acceptance of Application

The Manager may in its absolute discretion reject the Application. Each Unit Holder will be notified in writing upon the Application being accepted.

Lodgment

Mail your original completed Application Form with cheque(s) (if applicable), certified copy of accountant’s certificate (if applicable) and the required proof of identity in the form referred to in Part One on the following pages to the following address:

**JB Markets Pty Ltd
GPO Box 3112
BRISBANE QLD 4001
AUSTRALIA**

PART ONE - INDIVIDUAL

Please complete full name, date of birth and residential address on the Application Form and provide verification documents from list A OR B as follows.

A. A current and certified copy of one of the following: *(Note: where the document is not in English, it must be accompanied by an English translation prepared by an accredited translator)*

- a driver's licence containing a photograph of the person; or
- a passport or similar travel document containing a photograph and signature of the person; or
- an identification card issued by a state or territory containing the date of birth and a photograph of the card holder.

B. A current and certified copy of one of the following: *(Note: where the document is not in English, it must be accompanied by an English translation prepared by an accredited translator)*

- a birth certificate; or
- a citizenship certificate; or
- a pension card, Medicare card or other identification card issued by a government agency of a state or territory; or
- a driver's licence;

PLUS a certified copy of a notice that contains the name and residential address of the person, and is issued by a local government body (e.g. a Council) or utilities provider within the preceding 3 months that records the provision of services to that address or to that person.

Individual acting in the capacity of a sole trader

Please complete full name, date of birth, residential address, full business name (if any) and principal place of business (if any) on the Application Form and provide:

- a current or certified copy of a business name search; and
- verification documents required for an individual (as above)

Individual acting in the capacity of a sole trader

Please complete full partnership name, business name (if any) and partners name on the Application Form and provide the following:

- a certified copy or certified extract of the current partnership agreement; or
- minutes of a partnership meeting.

Either copy must include:

- the full name of the partnership;
- the full business name (if any) of the partnership, as registered under any state or territory business name legislation;
- the country in which the partnership was established;
- the full name and residential address of each partner; and
- verification documents required for an individual (as above) for one partner.

Company

Please complete full company name, company business or registration number and address of registered office on the Application Form and provide a current or certified copy of a search from a recognised database that includes:

- the full name of the company;
- the company business or registration number;
- the registered office address;
- the principal place of business;
- the names of each director (only provide if a proprietary company); and
- the names and addresses of each shareholder that holds over 25% of the shares issued by the company (only provide if a proprietary company that is not licensed and is not subject to regulation).

Trusts (including Australian self-managed superannuation funds)

Please complete full name of trust, country of establishment and full business name of trustee (if any) on the Application Form and provide an original trust deed, or a certified copy or certified extract, confirming:

- full name of the trust
- type of trust
- country where the trust was established
- name of each beneficiary or class of beneficiary.

PART TWO

Name of Financial Adviser: _____

Country of Authorisation: _____

Name of Regulator: _____

Licence Number: _____

Date Verified (dd/mm/yyyy): _____

I confirm I have completed AML/CTF identification requirements for this investor or I have included the investor's identification documents for your verification.

Signature: _____

Name of Signatory: _____

Position: _____

Date: _____

APPLICATION FORM

A. Application

Please insert the amount of the Application Monies you wish to invest in the Fund. The minimum investment is AUD 50,000 with additional investments in multiples of AUD 10,000 thereafter. The number of Units issued to you will depend on the Issue Price at the date your Application Form is accepted by the Manager.

Application Monies	AUD:
For office use only	
Issue Price	
Number of Units Issued	

B. Acknowledgments

By signing, completing and forwarding this form to the Trustee the Applicant acknowledges, agrees and warrants:

- to be bound by the provisions of the Trust Deed of the Fund (as amended from time to time);
- the subscription is subject to investment risks including the possible loss of income and capital invested, and that the Trustee does not guarantee the performance of the Fund, or the repayment of capital;
- the Trustee may accept any application by notice in writing to the Applicant;
- that the Applicant is not aware and has no reason to suspect that the Application Monies have been derived from, or are related to, money laundering or the financing of terrorism;
- that the Applicant is not a United States citizen or a resident of the United States for taxation purposes (US Person), no person or entity controlling, owning or otherwise holding an interest in the Applicant is a US Person, and the Applicant will not be receiving the Units in the Fund or any payment in connection with such Units for the account or benefit of a US Person;
- if the Applicant is not a resident of Australia, that the Applicant received the Information Memorandum and the offer to apply for Units outside of Australia and represents and warrants to the Trustee that it is not prohibited or restricted by the laws of the jurisdiction in which it has received the Information Memorandum and offer from applying for or being issued Units.

Date	Date	Date
Sign	Sign	Sign
Print name	Print name	Print name

Applicant 1 (Individual)
Sole Director & Sole Company Secretary

Joint Applicant 2
(Individual) / Director

Joint Applicant 3
(Individual) / Director / Company Secretary

C. Details of Applicants

Applicant: Full Name or Company/Trust Name		
Applicant 2: Full Name (for applications in joint names)		
Individual		
If Applicant is an individual, please provide the following information for each Applicant.		
Applicant	Residential Address:	
	Date of Birth:	
	Nationality:	
	Telephone Number:	
	Email Address:	
	Tax File Number (Australian residents only):	
Applicant 2	Residential Address: (if applicable)	
	Date of Birth:	
	Nationality:	
	Telephone Number:	
	Email Address:	
	Tax File Number (Australian residents only):	
Company		
If Applicant is a company, please provide the following information.		
Domicile:		
Company Registration Number:		
Date of Incorporation:		

Registered Address:	
Mailing Address (if different from above):	
Telephone Number:	
Email Address:	
Tax File Number (Australian residents only):	

Name, Residential Address, Date of Birth and Nationality of each director of the company:

Director 1	Name:	
	Address:	
	Date of birth:	
	Nationality:	
Director 2	Name:	
	Address:	
	Date of birth:	
	Nationality:	

Trust

If the Applicant is a trust, please provide the following information. Please provide a copy, or certified extract, of the trust deed.

Address of the trustee:	
Date of Establishment of the trust:	
Place of Residence of the trust:	

Business Number (e.g. ABN) of the trust: (if applicable)	
Type of trust:	
If any of the trustees is an individual – in respect of any of those individuals, the same information required above for an individual Applicant:	
If any of the trustees is a company - in respect of that company, the same information required above for a company Applicant:	
Names and Residential Addresses of the beneficiaries of the trust or, if the terms of the trust identify the beneficiaries by reference to membership of a class, details of that class:	
Mailing Address (if different from above):	
Telephone Number:	
Email Address:	
Tax File Number (Australian residents only):	

Partnership

If the Applicant is a partnership, please provide the following information

Please provide a copy, or certified extract of the partnership agreement.

Full Business Name (if any) of the partnership as registered under any state or territory business names legislation:

Full names and Residential Addresses of all partners:

Date of establishment of the partnership:

Country in which the partnership was established:

In respect of all individual partners - the same information required above for an individual Applicant:	
Mailing Address (if different from above):	
Telephone Number:	
Email Address:	
Tax File Number (Australian residents only):	

D. Redemption and Distribution Bank Details

All nominated bank account(s) must be in the name of the investor. If the investor is a trustee, the bank account name should be should include the name of the trustee.

You must provide proof of identity in the form referred to in the table in the "Instructions for Completing the Application Form".

Redemption and Distribution Bank Details	
Name of Bank	
Full Account Name	
BSB	
Account Number	

Distribution Option (please <input checked="" type="checkbox"/> appropriate option)	
<input type="checkbox"/> Automatic reinvestment	<input type="checkbox"/> Payment by direct deposit into redemption bank account (above)
If you do not make a distribution choice, distributions will automatically be reinvested in additional units in the relevant Trust.	

E. Wholesale Client Declaration (Australian Applicants only)

The Applicant warrants and declares that it is a wholesale client within the meaning of section 761G(7) of the Corporations Act 2001 (Cth) and the Applicant further makes one or more of the following representations regarding its status as such, as indicated:

Check the box next to the statement or statements which describe the Applicant:

- | | |
|--|--|
| <p><input type="checkbox"/> (i) The Applicant's Application Monies equals or exceeds AUD \$500,000.</p> <p><input type="checkbox"/> (ii) The Applicant is a financial services licensee.</p> <p><input type="checkbox"/> (iii) The Applicant is a body registered by the Australian Prudential Regulatory Authority, other than a trustee of a fund or trust referred to in paragraph (v) below.</p> <p><input type="checkbox"/> (iv) The Applicant is a body registered under the Financial Corporations Act 1974 (Cth).</p> <p><input type="checkbox"/> (v) The Applicant is the trustee of:</p> <ul style="list-style-type: none">• a superannuation fund;• an approved deposit fund; or• a pooled superannuation trust; or• a public sector superannuation scheme <p>within the meaning of the Superannuation Industry (Supervision) Act 1993 (Cth), and the fund, trust or scheme has net assets of at least AUD \$10 million.</p> <p><input type="checkbox"/> (vi) The Applicant has or controls gross assets of at least AUD \$10 million (including any assets held by an associate or under a trust that the person manages).</p> <p><input type="checkbox"/> (vii) The Applicant is an ASX listed entity, or a related body corporate of a listed entity;</p> <p><input type="checkbox"/> (viii) The Applicant is an exempt public authority.</p> <p><input type="checkbox"/> (ix) The Applicant is a body corporate, or an unincorporated body, that:</p> <ul style="list-style-type: none">• carries on a business of investment in financial products, interests in land or other investments; and• for those purposes, invests funds received (directly or indirectly) following an offer or invitation to the public, within the meaning of section 82 of the Corporations Act, the terms of which are provided for the funds subscribed to be invested for those purposes. | <p><input type="checkbox"/> (x) The Applicant is a related body corporate of any body corporate that (if it were the Applicant) satisfies any of the statements in paragraphs (ii) to (ix) above.</p> <p><input type="checkbox"/> (xi) The Applicant is not applying for Units in connection with a business, and provides with this completed Application Form a certified copy of a certificate given within the previous 2 years by a qualified accountant (within the meaning of section 9 of the Corporations Act) that states that the Applicant:</p> <ul style="list-style-type: none">• has net assets of at least AUD \$2,500,000; or• has a gross income for each of the last 2 financial years of at least AUD \$250,000, <p>including the net assets or gross income, as the case may be, of a company or trust controlled by the Applicant.</p> <p>A form of accountant's certificate is provided on the following page.</p> <p><input type="checkbox"/> (xii) The Applicant is not applying for Units in connection with a business, and is a company or a trust controlled by a person who meets the requirements of paragraph (xi) above and provides a certified copy of the certificate referred to in that paragraph relating to that person.</p> <p><input type="checkbox"/> (xiii) The Applicant is a Sophisticated Investor within the meaning of Section 761GA of the Corporations Act 2001 (Cth).</p> |
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**CERTIFICATE UNDER CHAPTER 7 (SECTION 761G(7)(C)) OF
THE CORPORATIONS ACT (CTH) 2001**



Re: _____ (name) of

_____ (address) **(Investor)**

I certify that:

1. I am one of the following:

- (a)** a member of the Australian Society of Certified Practising Accountants (CPAA) who is entitled to use the post-nominals "CPA" or "FCPA", and is subject to and complies with the CPAA's continuing professional development requirements; or
- (b)** a member of the Institute of Chartered Accountants in Australia (ICAA) who is entitled to use the post-nominals "CA" or "ACA" or "FCA", and is subject to and complies with the ICAA's continuing professional education requirements; or
- (c)** a member of the National Institute of Accountants (NIA) who is entitled to use the post-nominals "PNA", "FPNA", "MNIA" or "FNIA", and is subject to and complies with the NIA's continuing professional education requirements.

2. In accordance with the requirements of section 761G(7) (c) of the Corporations Act I certify that the Investor:

- (a)** has net assets of at least \$2.5 million; or
- (b)** has a gross income for each of the last two financial years of at least \$250,000.

Dated: _____

Signature of Accountant: _____

Name of Accountant: _____

Address of Accountant: _____