TOTUS ALPHA LONG SHORT FUND

TOTUS CAPITAL

INITIAL APPLICATION FORM

THE TRUST COMPANY (RE SERVICES) LIMITED
ABN 45 003 278 831

TOTUS ALPHA LONG SHORT FUND
ARSN 637 884 532

This Initial Application Form relates to a Product Disclosure Statement dated 20 March 2024 ("PDS") issued by The Trust Company (RE Services) Limited ABN 45 003 278 831, AFSL 235 150, for the offer of units in the Totus Alpha Long Short Fund ("Fund"). Terms defined in the PDS have the same meaning in this Initial Application Form. The PDS contains important information about investing in the Fund, and you are advised to read the PDS before completing this Initial Application Form.

If you are an existing Unitholder(s) and this is an additional investment, please use the Additional Investment Form.

If you are a new investor, or if you are an existing Unitholder(s) and this investment is NOT in the same name(s) and fund as your existing account, please complete the sections of this Initial Application Form and the Identification Forms noted below in Section 1.

If you have not been provided with the Identification Forms with this application you can obtain these at www.totuscapital.com.au.

If you have any questions regarding the Application Form please contact Apex Fund Services Investor Relations on 1300 133 451 or email: registry@apexgroup.com.

If you have any questions about investing in the Totus Alpha Long Short Fund, please contact Totus Capital Investor Relations on +61 2 8072 9945 or email ir@totuscapital.com.au.

SECTION 1: CONSUMER ATTRIBUTES

Please confirm what category of investor you are. You must select one option. Failure to complete this will result in your application being rejected. (**REQUIRED**)

- ○ **Wholesale Investor** (as defined by section 761G of the Corporations Act 2001). If yes, please proceed to section 2.
- ○ **Platform Provider.** If yes, please proceed to section 2.
- ○ **Retail Investor** (as defined in the Corporations Act) who has received personal financial advice in respect to the Fund. You must ensure your Financial Adviser details are provided in section 7. We will be unable to process your application unless this section is completed. Please proceed to section 2.
- ○ **Retail Investor** (as defined in the Corporations Act) who has not received personal financial advice in respect of the Fund. Please complete the remaining part of this section before proceeding to section 2.

To assist the RE in meeting the Design and Distribution Obligations (DDO) you are required to indicate your consumer attributes in response to each of the questions set out below. Please ensure all questions are completed and you must select only one answer for each question. These attributes should reflect your current objectives, financial situation, and needs. If unsure on how to complete, we recommend you seek financial advice.

(**REQUIRED** FOR RETAIL INVESTOR who has not received personal financial advice)

What is your primary investment objective?
- ☐ Capital growth
- ☐ Capital preservation
- ☐ Income distribution

What is your investment time horizon?
- ☐ up to and including 2 years i.e. Short term
- ☐ More than 2 years but less than 5 years i.e. Medium term
- ☐ Equal to 5 years but less than 7 years i.e. Medium to long term
- ☐ Equal to 7 years or more i.e. Long term

What is the intended use of this investment in your overall investment portfolio?
- ☐ Standalone portfolio (up to 100%)
- ☐ Major allocation (up to 75%)
- ☐ Core component (up to 50%)
- ☐ Minor allocation (up to 25%)
- ☐ Satellite component (up to 10%)

What do you anticipate to be your withdrawal needs following a redemption request?
- ☐ Daily
- ☐ Weekly
- ☐ Monthly
- ☐ Yearly
- ☐ After one year

What is your tolerance for risk (ability to bear loss)?
- ☐ Extremely high
- ☐ Very high
- ☐ High
- ☐ Medium
- ☐ Low

Where did you hear about the Fund?
- ☐ Financial Adviser
- ☐ Platform
- ☐ Research House
- ☐ Other - Please specify ______

SECTION 2: INVESTOR TYPE

Investor type	Complete sections	Please complete the required Identification Form and provide certified copies of the identification requested on the Identification Form
◯ **Individual and Joint Investors** – A natural person or persons.	3, 5, 6, 7, 8 & 9	Form A - Individuals.
◯ **Sole trader** – A natural person operating a business under their own name with a registered business name.	4, 5, 6, 7, 8 & 9	Form A - Individuals.
◯ **Companies** – A company registered as an Australian public company or an Australian proprietary company, or a foreign company.	4, 5, 6, 7, 8 & 9	For a Company complete the relevant form based on company type, either Form B or C. All Beneficial Owners named on Form B or C must complete Form A.
◯ **Trusts** – Types of trusts include self-managed superannuation funds, registered managed investment schemes, unregistered wholesale managed investment schemes, government superannuation funds or other trusts (such as family trusts and charitable trusts).	4, 5, 6, 7, 8 & 9	For the Trust complete either Form D or E; and For an Individual Trustee complete Form A; or For a Company Trustee complete Form B or C. All Beneficial Owners named on Form D or E must be complete Form A.
◯ **Partnership** – A partnership created under a partnership agreement.	4, 5, 6, 7, 8 & 9	For the Partnership please complete Form F. All Beneficial Owners named on Form F must complete Form A.
◯ **Associations** – Incorporated associations are associations registered under State or Territory based incorporated association statutes. Unincorporated associations are those of persons who are not registered under an incorporated associations statute and thus do not have the legal capacity to enter into agreements.	4, 5, 6, 7, 8 & 9	For the Association please complete Form G. All Beneficial Owners named on Form G must complete Form A.
◯ **Registered co-operative** – An autonomous association of persons united voluntarily to meet common economic, social and cultural needs and aspirations through a jointly-owned and democratically-controlled enterprise registered under a registry system maintained by a State or Territory. This Investor type can include agricultural businesses such as a dairy co-operative.	4, 5, 6, 7, 8 & 9	For the Registered co-operative please complete Form H. All Beneficial Owners named on Form H must complete Form A.
◯ **Government body** – The government of a country, an agency or authority of the government of a country, the government of part of a country or an agency or authority of the government of part of a country.	4, 5, 6, 7, 8 & 9	For a Government body please complete Form I. All Beneficial Owners named on Form I must complete Form A.

SECTION 3: INDIVIDUALS AND JOINT ACCOUNT HOLDERS INVESTOR DETAILS

APPLICANT 1

Investor type

○ Individual

Title | Given name(s) | Surname

Occupation | Australian Tax File Number (TFN)

Residential address

Street address 1

Street address 2

Suburb | State | Postcode | Country

Postal address if different to residential address

Street address 1

Street address 2

Suburb | State | Postcode | Country

Contact details

Phone number (business hours) | Phone number (non-business hours)

Mobile number | Email address

Preferred contact method

- ☐ I consent to receive all investor correspondence from you by email to the email address provided.
- ☐ I wish to receive all investor correspondence by post to the address provided on this Application Form.
- ☐ I nominate my Financial Advisor as noted in section 7 to receive all investor correspondence.

TOTUS CAPITAL

SECTION 3: INDIVIDUALS AND JOINT ACCOUNT HOLDERS INVESTOR DETAILS CONT.

APPLICANT 2 (IF APPLICABLE)

Investor type

○ Individual

Title	Given name(s)	Surname

Occupation	Australian Tax File Number (TFN)

Residential address

Street address 1

Street address 2

Suburb	State	Postcode	Country

Postal address if different to residential address

Street address 1

Street address 2

Suburb	State	Postcode	Country

Contact details

Phone number (business hours)	Phone number (non-business hours)

Mobile number	Email address

Preferred contact method

- ☐ I consent to receive all investor correspondence from you by email to the email address provided.
- ☐ I wish to receive all investor correspondence by post to the address provided on this Application Form.
- ☐ I nominate my Financial Advisor as noted in section 7 to receive all investor correspondence.

SECTION 4: ALL OTHER ACCOUNT HOLDERS INVESTOR DETAILS

Investor type/capacity

- ◯ Company
- ◯ Sole trader
- ◯ Trust
- ◯ Partnership
- ◯ Association
- ◯ Co-operative
- ◯ Government body
- ◯ Other

Full name of company / business if sole trader / trust (including trustee details) / partnership / association / cooperative / government body

Tax File Number (TFN)

ABN (if applicable)

Principle business activity

Address

Street address 1

Street address 2

Suburb

State

Postcode

Country

Contact details

Phone number (business hours)

Mobile number

Fax number

Email address

Preferred contact method

- ☐ I consent to receive all investor correspondence from you by email to the email address provided.
- ☐ I wish to receive all investor correspondence by post to the address provided in on this Application Form.
- ☐ I nominate my Financial Advisor as noted in section 7 to receive all investor correspondence.

SECTION 5: AUTHORISED REPRESENTATIVE DETAILS

Complete this section if you wish to appoint a person to act in a legal capacity as your authorised representative and to operate your investment in the Fund on your behalf. In general, an authorised representative can do everything you can do with your investment, except appoint another authorised representative.

We may act on the sole instructions of the authorised representative until you advise us in writing that the appointment of your authorised representative has terminated. We may also terminate or vary an appointment of an authorised representative by giving you 14 days prior notice.

If an authorised representative is a partnership or a company, any one of the partners or any Director of the company is individually deemed to have the powers of the authorised representative.

Please attach a certified copy of your Power of Attorney.

For information on how to certify your document please refer to page 9 of the Application Form.

Given name(s)

Surname

Signature of authorised representative

Date (dd/mm/yyyy)

/ /

SECTION 6: INVESTMENT DETAILS

Class of Units

PDS Platform Class

Investment amount (subject to minimums)

$AUD

Source of funds being invested (choose most relevant)

- ◯ Retirement income
- ◯ Employment income
- ◯ Business activities
- ◯ Sale of assets
- ◯ Inheritance/gifts
- ◯ Financial investments
- ◯ Other

Payment method

◯ Direct credit/electronic funds transfer

Account Name: Apex Fund Services Pty Ltd ACF Totus Alpha Long Short Fund Application Account

Bank and Branch: National Australia Bank – North Sydney

BSB: 082-401

Account Number: 877 023 014

Please reference your electronic transfer with the same name as the applicant (in part or in full).

◯ Cheque

Cheque made payable to: Apex Fund Services Pty Ltd ACF Totus Alpha Long Short Fund Application Account

Distribution payment instructions

Distributions will be automatically reinvested as additional Units in the Fund unless elected to be paid out as cash as per section 9.12 of the PDS.

◯ Please confirm if you wish to have your distributions paid directly to your nominated bank account

Your distribution bank account details

Bank	Account name
BSB	**Account number**

If you wish to have a separate bank account for redemption payments, please fill the below

Your redemption bank account details

Bank	Account name
BSB	**Account number**

SECTION 7: FINANCIAL ADVISOR DETAILS

By filling out this section you nominate and consent the named Financial Advisor access to your information

Advisor name (full name)

Name of advisory firm

Name of dealer group

AFSL or AFSL representative number

Address

Street address 1

Street address 2

Suburb

State

Postcode

Country

Contact details

Phone number (business hours)

Mobile number

Fax number

Email address

If you have elected for your Financial Advisor to receive all investor correspondence, please confirm the financial advisors preferred contact method

☐ I consent to receive all investor correspondence from you by email to the email address provided in section 7.

☐ I wish to receive all investor correspondence by post to the address provided in section 7.

SECTION 8: DECLARATION

I/we declare and agree each of the following:

- I/we have read the current PDS to which this application applies and have received and accepted the offer in it.
- In conjunction with the PDS, I/we confirm that I/we have been notified that a Target Market Determination (TMD) is available for the Fund, and that I/we have read the relevant TMD, and understand the target market for the Fund.
- My/our application is true and correct.
- I am/we are bound by any terms and conditions contained in the current PDS and the provisions of the constitution of the Fund as amended from time to time.
- I/we have legal power to invest.
- If this is a joint application, each of us agrees that our investment is as joint tenants. Each of us is able to operate the account and bind the other to any transaction including investments or withdrawals by any available method.
- If investing as trustee on behalf of a super fund or trust, I/we confirm that I am/we are acting in accordance with my/our designated powers and authority under the relevant trust deed. In the case of a super fund, I/we also confirm that it is a complying fund under the Superannuation Industry (Supervision) Act 1993.
- I/we acknowledge that none of The Trust Company (RE Services) Limited ABN 45 003 278 831 or any of their related entities, officers or employees or any related company or any of the appointed service providers including the investment manager and custodian guarantee the repayment of capital or the performance of the Fund or of any particular rate of return by the Fund.
- I/we agree to the anti-money laundering and counter-terrorism financing statements contained in section 11.1 of the PDS. I/we agree to provide further information or personal details to The Trust Company (RE Services) Limited and the custodian if required to meet their obligations under any anti-money laundering and counter-terrorism law and regulations, and acknowledge that processing of my/our application may be delayed and will be processed at the unit price applicable for the business day on which all required information has been received and verified.
- I/we have read and understood the privacy disclosure as detailed in section 13.7 of the PDS. I/we consent to my/our personal information being collected, held, used and disclosed in accordance with the privacy disclosure. I/we consent to The Trust Company (RE Services) Limited disclosing this information to my/our financial adviser (named in this form) for units in the Fund. Where the financial adviser no longer acts on my/our behalf, I/we will notify The Trust Company (RE Services) Limited of the change.
- If I/we have appointed an authorised representative, I/we release, discharge and indemnify The Trust Company (RE Services) Limited from any loss, expense, action or other liability which may be suffered by, brought against me/us or The Trust Company (RE Services) Limited for any action or omissions by the authorised representative whether authorised by me/us or not.
- I/we certify that the information provided in the separate ID forms, including information relating to tax-related requirements, is reasonable based on verifiable documentation.

I/we acknowledge and agree that:

- The Trust Company (RE Services) Limited may be required to pass on my/our personal information or information about my/our investment to the relevant regulatory authorities, including for compliance with anti-money laundering and counter-terrorism law and regulations as well as any tax-related requirements for tax residents of other countries.

Additional declaration and agreement for New Zealand investors:

- I/we received and accepted this offer in Australia or New Zealand.
- I/we understand that the PDS is not an investment statement under New Zealand law and that there are likely to be differences between the information provided in a PDS compared to an investment statement under New Zealand law.
- I/we have read and understand the 'Important additional information for New Zealand investors' in the current PDS.

SECTION 9: SIGNATURES

Joint applicants must both sign, For Individual Trustee Trust/Superannuation Funds each individual Trustee must sign. For Corporate Trustee Trust/Superannuation Funds 2 Directors, a Director and Secretary or Sole Director must sign.

APPLICANT 1

Signature

Full name

Date (dd/mm/yyyy) / /

Tick capacity (mandatory for companies)

☐ Sole Director and Company Secretary
☐ Director
☐ Secretary
☐ Non-corporate trustee
☐ Partner

APPLICANT 2

Signature

Full name

Date (dd/mm/yyyy) / /

Tick capacity (mandatory for companies)

☐ Director
☐ Secretary
☐ Non-corporate trustee
☐ Partner

Post your original signed Initial Application Form, Identification Forms and certified* copies of your identification required to:

Totus Alpha Long Short Fund
c/- Apex Fund Services Pty Ltd

GPO Box 4968
Sydney NSW 2001

Please ensure that you have transferred your Application Monies or enclose a cheque for payment.

* For information on how to certify your documents please refer to page 10 of the Application Form.

Application monies must be made in Australian Dollars by either cheque, funds transfer or direct credit into the following account:

Account Name: Apex Fund Services Pty Ltd ACF Totus Alpha Long Short Fund Application Account

Bank and Branch: National Australia Bank – North Sydney

BSB: 082-401

Account Number: 877 023 014

CERTIFYING YOUR DOCUMENTS

All documents must be provided in a certified copy format – in other words, a copy of the original document that has been certified by an eligible certifier.

A 'certified extract' means an extract that has been certified as a true copy of some of the information contained in a complete original document by one of the persons described below.

Please note that we require the copy which was actually signed by the certifier (i.e. the original penned signature of the certifier).

People who can certify documents or extracts are:

- A lawyer, being a person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described).
- A magistrate, a chief executive officer of a Commonwealth court or a judge, registrar or deputy registrar of a court.
- A Justice of the Peace or a notary public (for the purposes of the Statutory Declaration Regulations 1993).
- An agent of the Australian Postal Corporation (APC) who is in charge of, or a permanent employee of the APC with 2 or more years of continuous service who is employed in or an office supplying postal services to the public.
- A police officer or an Australian consular officer or an Australian diplomatic officer (under the Consular Fees Act 1955).
- An officer with 2 or more continuous years of service with one or more financial institutions (under the Statutory Declaration Regulations 1993).
- A finance company officer with 2 or more continuous years of service with one or more financial companies (under the Statutory Declaration Regulations 1993).
- An officer with, or authorised representative of, a holder of an Australian financial services licence, having 2 or more continuous years of service with one or more licensees.
- A member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with 2 or more years of continuous membership.