

La Trobe Financial Asset Management Limited ACN 007 332 363 Australian Financial Services Licence No. 222213

Important Information

The Trust has not been registered under the U.S. Securities Act of 1933, as amended (the Securities Act) and Units in the Trust may not be offered or sold in the United States of America or to U.S. Persons¹, as defined in 'Regulation S' of the Securities Act. This Application Form is not for use in, and may not be delivered to or inside, the United States of America.

An investment in 'Class A – Wholesale Units' (Units) in the La Trobe US Private Credit Trust (Trust) (the Offer), is only available to persons who are wholesale clients as defined in section 761G of the Corporations Act 2001 (Cth) (Corporations Act).

Completing the Application Form

Please complete this Application Form and provide the relevant information or documentation (including certified copies of identification as noted below).

Applicant Type	Identification required	Additional documentation required	Sections to complete on Application Form	TFN	Signature required
Individual	Electronic identification required or a certified copy of one (1) of the following documents that contain your photo(s) and full name(s):	If investing less than \$500,000 and not a professional investor, accountant's certificate* required.	Sections A, B, D, E, (F & G) [if applicable] & H, I	The applicant	The applicant
Joint	<ul style="list-style-type: none"> Australian driver's licence (current) Australian passport (current or expired less than 2 years) Australian State or Territory photo ID card (current) 	See above.	Sections A, B, D, E, (F & G) [if applicable] & H, I	Each applicant	Each applicant
Superannuation Fund	Individual trustee – for each trustee, same as individual	ABN (if applicable) ACN (if corporate trustee) Certified copy of trust deed or certified extract showing: <ul style="list-style-type: none"> Name of super fund/trust Name of trustees and beneficiaries Place of establishment of super fund/trust 		The super fund	The trustee(s)
Trust	Corporate trustee – for each company director or person purporting to act on behalf of the corporate trustee (Agent), same as individual	Certified evidence of authorisation of Agent to act on behalf of corporate trustee. If investing less than \$500,000 and not a professional investor, accountant's certificate* required.	Sections A, B, C, D, E, (F & G) [if applicable] & H, I	The trust	The trustee(s)
Company	For each director, secretary, or person purporting to act on behalf of the company (Agent), the same as individual	Certified evidence of authorisation of Agent to act on behalf of company. If investing less than \$500,000 and not a professional investor, accountant's certificate* required.	Sections A, B, C, D, E, (F & G) [if applicable] & H, I	The company	Two directors; or if one director company, sole director
Partnership	For each partner or person purporting to act on behalf of the partnership (Agent), same as individual	Certified copy or extract of partnership agreement or certified copy or extract of minutes of meeting Certified evidence of authorisation of Agent to act on behalf of Partnership. If investing less than \$500,000 and not a professional investor, accountant's certificate* required.	Sections A, B, C, D, E, F (G, H & I) [if applicable] & J, K	The partnership	All partners
Estate	For each executor, same as individual	Certified copy of death certificate Certified copy of grant of probate or letters of administration If investing less than \$500,000 and not a professional investor, accountant's certificate* required.	Sections A, B, C, D, E, (F & G) & H) [if applicable] & I	The deceased person	The executor(s)

* A certificate from a qualified accountant, obtained within the prior two years, that states that the applicant has net assets of at least \$2.5m or has a gross income for each of the last two financial years of at least \$250,000.

1. Under the Securities Act, "U.S. Persons" include: any natural person resident in the United States of America, any partnership or corporation organized or incorporated under the laws of the United States of America, any estate of which any executor or administrator is a U.S. Person, any trust of which any trustee is a U.S. Person, any agency or branch of a foreign entity located in the United States of America, any non-discretionary account or similar account (other than an estate or trust) held by a dealer or other fiduciary for the benefit or account of a U.S. Person, any discretionary account or similar account (other than an estate or trust) held by a dealer or other fiduciary organized, incorporated, or (if an individual) resident in the United States of America, any partnership or corporation if organized or incorporated under the laws of any foreign jurisdiction and formed by a U.S. Person principally for the purpose of investing in securities not registered under the Securities Act, unless it is organized or incorporated, and owned, by accredited investors (as defined in Rule 501(a) of Regulation D under the Securities Act) who are not natural persons, estates or trusts.

Identification Requirements

If you are a new investor, you will need to supply information or documentation to allow La Trobe Financial to complete identification requirements. This will include supplying either your driver's licence/passport numbers to La Trobe Financial to complete an electronic identification (Section H of the Application Form) or provide certified copies of the relevant identification documents and attach these to the completed Application Form. Documents not in English must be accompanied by an English translation prepared by an accredited translator.

Identity Verification for Australian Residents

Electronic identification requirements include:

- Australian State or Territory Driver's Licence number; **OR**
- Australian Passport number.

If you do not wish to complete electronic identification then the following forms of identification will need to be provided:

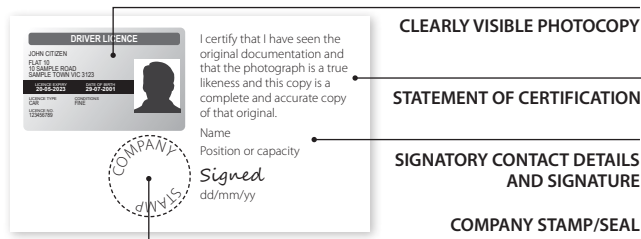
- One certified primary photographic identification document (Category A); **OR**
- One certified primary non-photographic identification document **PLUS** one secondary identification document (Category B).

Category A:

A certified copy of **ONE** of the following documents that contains your photo and full name:

- Australian driver's licence (current)
- Australian passport (current or expired less than 2 years)
- Current Australian State or Territory photo ID card

Example:



Category B:

A certified copy of **ONE** document from **BOTH** i and ii below:

- i**
- Australian birth certificate
 - Australian citizenship certificate
 - Pension card issued by Centrelink
 - Medicare Card
 - Health care card issued by Federal or State Government; **AND**
- OR**
- ii** A notice that contains your name and residential address which was issued to you by **EITHER**:
- The Commonwealth or a State or Territory within the preceding 12 months and records the provision of financial benefits; **OR**
 - The Australian Taxation Office within the preceding 12 months and records a debt payable by or to you; **OR**
 - A local government body or utilities provider within the preceding three months and records the provision of services to you at your residential address.

Please contact La Trobe Financial for other categories.

Identity Verification for Non-Australian Residents

Category A:

A certified copy of **ONE** of the following current documents:

- Foreign passport bearing your photograph and your signature or a unique identifier (current)
- National identity card issued by a foreign government bearing your photograph and either a signature or a unique identifier
- Foreign driver's licence that contains your photograph

Category B:

If you cannot provide one of the documents in Category A, please provide certified copies of **TWO** of the following current documents:

- OR**
- Citizenship certificate issued by a foreign government
 - Birth certificate issued by a foreign government
 - Pension card issued by a foreign authority
 - Health concession card issued by a foreign authority

Please contact La Trobe Financial for other categories.

Certification of documents

Who can certify?

Anyone listed on the Federal Attorney General's website may certify a document, which includes persons who are licensed or registered to practice the following occupations:

- Chiropractor
- Dentist
- Legal practitioner
- Medical practitioner
- Nurse
- Optometrist
- Patent attorney
- Pharmacist
- Physiotherapist
- Psychologist
- Trade marks attorney
- Veterinary surgeon

If you need a document certified **outside Australia** we will accept a document certified by the following:

- a staff member at an Australian Consulate
- a person authorised by law in that jurisdiction to administer oaths or affirmations or to authenticate documents (for example, a Notary Public or a lawyer)

What must the certifying officer do?

A person authorised to certify a document (see above) must:

1. Attest that the document is a true copy of the original by:
 - (a) For a document with a photo:

"I certify that I have seen the original documentation and that the photograph is a true likeness and this copy is a complete and accurate copy of that original."
 - (b) For a document without a photo:

"I certify that I have seen the original documentation and this copy is a complete and accurate copy of that original."
2. Sign and date the copy of the document they are certifying
3. Add their name along with the position or capacity to the document
4. Affix their official stamp or seal (if applicable)

Section A

Wholesale Investor Confirmation

This section requires you to confirm your status as a wholesale investor and should be completed by all Investors. It also requires you to confirm whether you are an existing Investor in the La Trobe Australian Credit Fund or the La Trobe US Private Credit Trust. We may not require identification documents where this is the case.

Section B

Individual Investor Details

If there are more than 2 applicants, please provide details on a separate page.

For each applicant, we require confirmation of your tax residency and for applicants that are not Tax Resident in Australia Only, completion of the additional FATCA/CRS form.

Please note that all communications with you will be via email. If you do not provide us with your email address, you will receive your Investor Activity Statements via post which will be issued annually each July for the previous financial year.

Section C

Organisation/Trust Details

If you are investing in the name of a company, trust, partnership, association, co-operative, Government body or other you must complete both sections B and C.

For each Entity application, we require confirmation of your tax residency, and we may require completion of the additional FATCA/CRS form depending on which option you select under section C of the Application Form. No FATCA/CRS form is required in connection with completing section B of the form for an Entity application. U.S. Persons must not apply for Units (see page 1 of this Application Form).

Section B is required to be completed for all beneficial owners, being those individuals who directly or indirectly own 25% or more of the Entity, or who control the Entity.

Account Authorities applies to joint company and organisation investors and identifies the number of signatories who can authorise transactions on the account, such as withdrawals and changes to account details. If left blank, we will assume one signature only is required.

Section D

Investment Details

Please indicate your investment amount and payment method, noting that there is a minimum investment amount of AUD\$10,000 for an initial acquisition of Units and AUD\$5,000 for any subsequent acquisition of Units.

Section E

Payment of Distributions

This bank account will be your nominated account with La Trobe Financial for the payment of distributions and/or redemption proceeds.

Section F

Financial Adviser details

If you have been referred to the Trust by a financial adviser you should ask them to complete this section.

IMPORTANT: Unless you instruct us otherwise, your financial adviser will have access to your account information and your financial records in relation to your investment(s).

Section G

Investor Representative

If you wish to appoint a financial adviser, solicitor, accountant or another trusted person to discuss and/or deal with your investments in the Trust, please complete this section. This section is optional and you do not have to appoint an Investor Representative.

Section H

Verification of Identity

Verification of identity must be completed electronically or manually by supplying information or certified identity documents to La Trobe Financial. You will be required to provide your consent to La Trobe Financial disclosing your personal information to a third party agency if you choose to have your identification verified electronically. Please confirm that you consent to La Trobe Financial providing your information to credit reporting agencies for verification purposes. These checks do not impact your credit rating.

Section I

Declaration & Signature

The Application Form must be signed by all relevant parties.

Section J

Payment to La Trobe Financial

Fund your investment using the available payment methods.

Issuer and Trustee:

La Trobe Financial Asset Management Limited (La Trobe Financial) (ABN 27 007 332 363, AFSL 222213).

Class A– Wholesale Units (Units) in the Trust will only be issued following our acceptance of an application form issued with the Information Memorandum current at the date of signing this form (or other such application form as we may provide at the relevant time).

Print clearly in capital letters using **black or blue ink** if completing this form by hand. Place a cross **X** within the appropriate box when selecting an option.

If insufficient space, please attach additional pages. Do not sign this application form unless all necessary sections have been fully and accurately completed.

Investment Accounts are able to be opened by the following:

1. How to apply:

Please email all completed applications through to:

investor@latrobefinancial.com.au

OR

Post your application to:

ATT: Investor Services

La Trobe Financial

GPO Box 2289

Melbourne Victoria 3001 Australia

2. Calling our team:

Our Asset Management Team are available to help you with your application.

Phone 1800 818 818.

3. Completing this form

Please note that by completing this Application Form, investors must supply either information to complete electronic identification, or certified copies of identification will need to be provided for all individuals identified in Sections B and C. The identification requirements are set out in detail in the pages below.

You should consider the appropriateness of an investment in the Units, having regards to your own objectives, financial situation and needs and seek professional financial advice tailored to your personal circumstances before making an investment decision.

SECTION A – WHOLESALE INVESTOR CONFIRMATION (All Investors)

This Offer, and an investment in the Trust, is only available to persons who are wholesale clients as defined in section 761G of the Corporations Act. Please confirm your wholesale client category (**Investor Type**) below:

- I am investing at least \$500,000 or more in the Trust; or
- I am investing less than \$500,000 and confirm that (a) I am not acquiring units in connection with a business; and (b) have provided a certificate from a qualified accountant, certified within the prior two years, that states that I have net assets of at least \$2.5m or have had a gross income for each of the last two financial years of at least \$250,000; or
- I am a professional investor (as defined in the Corporations Act) and attach documents supporting my status in this respect.

Applicant 1

Existing Investor Number _____

Applicant 2

Existing Investor Number _____

SECTION B – INDIVIDUAL INVESTOR DETAILS

Please note details of Company directors, Trustees and Partners required below if completing on behalf of corporation/organisation as per Section C.

Applicant 1

Investor type: Individual Joint Company Director
 Agent Trustee Partner

Title _____

Surname _____

Given names _____

Other names known by _____

Date of birth _____

Country of citizenship/s _____

Tax File Number or Exemption Reason[^] _____

Tax Residence Country (Not Applicable for Entity Application) _____

Please select from the below (Not Applicable for Entity Application):

- Tax Resident in Australia Only
- US Citizen or resident of the US for Tax Purposes, noting U.S. Persons must not apply for Units (see page 1 of this Application Form)*
- Resident of another country outside of Australia and US*

*Please complete the FATCA and CRS Details form available at www.latrobefinancial.com.au and submit with your Application Form.

If there are more than two (2) applicants, including trustees or company directors, please provide their full details on a separate page.

[^]The Applicant is not required to quote its tax file number, however, if a tax file number is not quoted, tax may be deducted from payments of interest at the highest marginal tax rate (plus any applicable government levy) if required by law. Tax will not be deducted if the Applicant supplies an Australian business number (if applicable) or an appropriate exemption applies to its investment. The use and disclosure of tax file numbers is strictly regulated by tax and privacy laws.

Applicant 2

Investor type: Individual Joint Company Director
 Agent Trustee Partner

Title _____

Surname _____

Given names _____

Other names known by _____

Date of birth _____

Country of citizenship/s _____

Tax File Number or Exemption Reason[^] _____

Tax Residence Country (Not Applicable for Entity Application) _____

Please select from the below (Not Applicable for Entity Application):

- Tax Resident in Australia Only
- US Citizen or resident of the US for Tax Purposes, noting U.S. Persons must not apply for Units (see page 1 of this Application Form)*
- Resident of another country outside of Australia and US*

*Please complete the FATCA and CRS Details form available at www.latrobefinancial.com.au and submit with your Application Form.

CONTACT DETAILS

Residential street address _____

City, State, Province & Postcode _____

Country (if not Australia) _____

PO Box or postal address (if different to residential address) _____

Phone (business) _____

Mobile _____

Email _____

Residential street address _____ Same as Applicant 1

City, State, Province & Postcode _____

Country (if not Australia) _____

PO Box or postal address (if different to residential address) _____

Phone (business) _____

Mobile _____

Email _____

SECTION C – INVESTOR DETAILS (ORGANISATION/TRUST DETAILS/SMSF/ASSOCIATIONS)**Note:** Section A is required to be completed for Individual Trustees.**If you are investing in the name of a company, trust, partnership or other entity, please complete the following:**

Entity type: Company Trust SMSF Partnership
 Sole Trader Association Custodian Other

Full name of Entity

Trustee Name (if applicable)

Type of Trust (if applicable)

Settlor of Trust (if applicable)

ACN/ARBN

ABN

Tax File Number or Exemption Reason[^]

Tax Residence Country

U.S. Persons must not apply for Units (see page 1 of this Application Form).

Please select the most appropriate box from the below:

- Australian superannuation fund (i.e. a superannuation entity or public sector superannuation scheme (including an exempt public sector superannuation scheme or self-managed superannuation fund); or
- Australian "Financial Institution" for FATCA and CRS purposes; or
- Listed public company the stock of which is regularly traded on an established securities market; or
- Tax Resident in Australia only, Non Financial Institution whose:
- earnings from 'Investment income (including property)' was < 50% of the Entity's revenues in the preceding reporting period; and
 - assets that generate such income were < 50% of the Entity's assets in that period, (i.e Active NFFE/NFE for FATCA/CRS purposes); or
- None of the above*

Please complete the FATCA and CRS Details form available at www.latrobefinancial.com and submit with your Application Form.[^]The Applicant is not required to quote its tax file number, however, if a tax file number is not quoted, tax may be deducted from payments of interest at the highest marginal tax rate (plus any applicable government levy) if required by law. Tax will not be deducted if the Applicant supplies an Australian business number (if applicable) or an appropriate exemption applies to its investment. The use and disclosure of tax file numbers is strictly regulated by tax and privacy laws.*

Country of incorporation, formation or registration and name of relevant registered body (if applicable)

Registration or Identification Number

Type of Government body, level of Government and Jurisdiction (Government bodies only)

OWNERSHIP/DIRECTORS (Please Note: Section A is required to be completed for all individuals below)

Directors, any individuals/beneficiaries that have 25% or more ownership of the company, trust or partnership, and any individual who purports to act on behalf of the customer (Agent).

Individual 1 name**Individual 2 name****Individual 3 name****Individual 4 name** Certified copies of Trust Deeds (and any variations thereto) MUST be supplied with the Application. Certified copy of authority for Agent to act on behalf of the entity MUST be supplied.**ADDRESS DETAILS****Registered Office**

Street address

City, State, Province & Postcode

Country (if not Australia)

Principal Place of Business Same as Registered Office

Street address

City, State, Province & Postcode

Country (if not Australia)

ASSOCIATIONS

Full name and address of the chairman, secretary and treasurer (or equivalent of these positions)

Chairman

Address

Secretary

Address

Treasurer

Address

Other

Address

ACCOUNT AUTHORITIES (Optional)

Authorisation for account changes and redemptions:

 One signatory All signatories Other (please specify)

SECTION D – INVESTMENT DETAILS

Please indicate your investment amount and the payment method. We accept payment in Australian dollars only.

A minimum initial amount of AUD\$10,000 applies and AUD\$5,000 for any subsequent acquisition of Units. The Trustee may elect a different amount from time to time, as set out in the Information Memorandum.

Investment Amount (minimum investment amount \$10,000) \$ _____

SECTION E – NOMINATED BANK ACCOUNT

Please provide details of the bank account into which distributions and/or redemption proceeds are to be paid.

Account name _____

Name of financial institution _____

BSB _____ Account number _____

Branch address _____

SECTION F – FINANCIAL ADVISER RELATIONSHIPS (Advisers only)**Adviser details**

Information relating to your investment is provided to your Financial Adviser unless you leave this section blank or tell us otherwise. You may wish to provide further authority for your Financial Adviser to transact on your behalf. See Section G.

La Trobe Financial Adviser Number _____

Name _____

Company _____

Dealer group _____

Contact name _____

Contact phone _____

Email _____

Identity verification declaration

In accordance with the Financial Services Council/Financial Planning Association Industry Guidance Note 24, I confirm that customer identification has taken place under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Cth) (**Act**) and that I will provide La Trobe Financial with access to the records as required, or that the industry agreed 'Customer Identification Form' confirming compliance is attached. I also agree to forward these documents to La Trobe Financial if I ever become unable to retain the documents. I understand and agree that La Trobe Financial is authorised to conduct random audits of these records in accordance with its obligations under the Act.

Signature of Financial Adviser _____

Date _____

SECTION G – APPOINTING SOMEONE TO BE YOUR INVESTOR REPRESENTATIVE (Optional)**TO BE COMPLETED BY INVESTOR(S)**

You may appoint someone to represent you in dealing with your investments with La Trobe Financial. If you would like to do this, please complete the following steps:

A. Name and Signature of Investor Representative

Full name _____

Signature _____

B. Level of authority

There are three types of authority that you can provide to your Investor Representative. Please select your preferred level of authority.

Enquiry Only: I/we authorise you as our Investor Representative to make enquiries and receive information from La Trobe Financial in relation to my investment in the Trust.

Full Transaction Authority: I/we authorise you as my/our Investor Representative to transact on my behalf in relation to my investment in the Trust, as if you were the legal and beneficial owner of the Units, including by making further investments, transfers or redemption requests.

Power of Attorney: I/we authorise you as my/our Power of Attorney to transact on my/our behalf in relation to my investment in the Trust, as if you were the legal and beneficial owner of the Units, including by making further investments, transfers or redemption requests.

We require a certified copy of the Power of Attorney documentation along with Certified ID/Electronic Verification for the individual acting as the Power of Attorney.

Note: Bank Account amendments will require verbal confirmation from investment account holder(s)/Power of Attorney in all instances.

C. Release and Indemnity

I/we hereby release, discharge and agree to indemnify La Trobe Financial and the Investment Manager from and against all actions, proceedings, accounts, claims and demands, however arising, resulting from La Trobe Financial and/or the Investment Manager acting upon the instructions of my/our Investor Representative, other than where arising from the negligence, wilful misconduct or fraud of La Trobe Financial, their employees, officers, contractors, agents or appointed receivers or that of the Investment Manager or their employees, officers, contractors, agents or appointed receivers.

Signature of Investor _____

Signature of Investor _____

Date _____

Date _____

SECTION H – VERIFYING YOUR IDENTITY

La Trobe Financial is required by law to collect and verify information about your identity before providing services to you. Please tick your preferred option for us to verify your identity:

1. Online verification (Australian ID documents only): To complete electronic identity verification you will be required to provide the following information: Driver's Licence/Australian Passport details. By ticking this box, you confirm that you are authorised to provide the personal information presented (including name, residential address, date of birth and Driver's Licence/Passport number) and consent to that information being disclosed to a Credit Reporting Body, the document issuer or official record holder including via third party systems for the purpose of confirming and verifying my/our identity. You agree that La Trobe Financial may keep full and proper records of all such disclosures, confirmations and consents as necessary or required to comply with its obligations under law;

OR

2. Certified copy of identification: Certified copy of identification for each Applicant (Section A) or individual (Section B) MUST be attached to the application if this method is selected. Refer to the section 'Completing the Application Form' above, for further details.

APPLICANTS

Individual 1 Australian Driver's Licence no. _____
 Card no. _____
 State _____ Expiry date _____
 Australian Passport no. _____
or Certified copy of identity documents

Individual 2 Australian Driver's Licence no. _____
 Card no. _____
 State _____ Expiry date _____
 Australian Passport no. _____
or Certified copy of identity documents

Individual 3 Australian Driver's Licence no. _____
 Card no. _____
 State _____ Expiry date _____
 Australian Passport no. _____
or Certified copy of identity documents

Individual 4 Australian Driver's Licence no. _____
 Card no. _____
 State _____ Expiry date _____
 Australian Passport no. _____
or Certified copy of identity documents

We will be unable to accept applications for units until the verification of identity process has been completed.

Please note that by signing this Application Form, you will be consenting to La Trobe Financial collecting information about you for the purposes of verifying you. This may include sending your information to credit reporting agencies for the purpose of verification.

SECTION I – DECLARATION AND SIGNATURE

All Investors (or their agents or attorneys, if applicable) must sign this declaration. We cannot process your application without the relevant signatures.

- I/We wish to apply for fully paid Class A – Wholesale Units (**Units**) in the Trust. I/We declare that I/we have received a paper or electronic copy of the Information Memorandum dated 15 December 2023 at the same time as I/we received this form.
- I/We confirm that I/we have read the Information Memorandum for the Trust and the details in the Application Form are true and correct.
- I/We agree to be bound by the provisions of the Information Memorandum and the trust deed for the Trust dated 30 October 2023 as amended from time to time, a copy of which is available for my/our inspection and acknowledge the terms of La Trobe Financial's privacy policy available at www.latrobefinancial.com.au.
- I/We confirm that in considering whether or not to subscribe for Units, I/we have conducted and relied on my/our own investigations and analysis and/or the investigations and analysis conducted by my/our Financial Adviser (if applicable).
- I/We represent that I/we have the experience necessary to evaluate and understand the financial, investment and other risks associated with an investment in the Trust.
- I/We acknowledge that investments in the Trust are subject to investment risks, which could include delays in repayments, and loss of income and capital invested, and that La Trobe Financial does not guarantee the performance of the Trust or any particular rate of return or the repayment of capital out of the Trust.
- I/We confirm that I/we am/are a wholesale client for the purposes of section 761G of the Corporations Act in respect of my/our investment in Units in the Trust, and any financial service provided by La Trobe Financial in connection with the Trust. I/We will promptly notify La Trobe Financial if my/our status as a wholesale client changes.
- I/We acknowledge and understand that the offer of Units in the Trust is only being made to persons who are wholesale clients and that the Information Memorandum is not a disclosure document or Product Disclosure Statement for Corporations Act purposes.
- I/We confirm that I/we am/are not a 'U.S. Person' or 'U.S. Persons' (see page 1 of this Application Form).
- I/We consent to the Tax File Number (**TFN**), Australian Business Number (**ABN**) or Exemption Reason (if applicable) provided in this application form being applied to all of my/our future investments in the Fund.
- I/We will provide all additional information, documentation and assistance that La Trobe Financial may reasonably request in order for La Trobe Financial and/or the Trust to comply with its obligations under the intergovernmental agreement (**IGA**) entered into between the Australian and U.S. Governments in relation to the U.S. Foreign Account Tax Compliance Act (**FATCA**) on 28 April 2014, Subdivisions 396-A (FATCA) and 396-C (Common Reporting Standard) of Schedule 1 to the Taxation Administration Act 1953 (Cth) or any amendment or replacement of those provisions.
- I/We will promptly provide an updated application within 30 days and notify La Trobe Financial if a change in my/our circumstances means that any of the information or documentation provided for FATCA or CRS purposes (including without limitation tax residence details) is no longer correct.

SECTION I – DECLARATION AND SIGNATURE (cont.)

13. I/We acknowledge that by completing this application, including the FATCA and CRS Details form, I/we am/are providing a self-certification in accordance with FATCA and the CRS.
14. I/We declare and agree that any information and documents that will be used for the purposes of this application (whether or not provided on or with this application) are complete and correct, and if they are about another person, have been provided with the consent of that person.
15. I/We acknowledge that it is a criminal offence to knowingly provide false or misleading information or documents in connection with this application.
16. I/We acknowledge and agree that La Trobe Financial may accept or reject my/our subscription for Units in the Trust under this form in whole or part in its absolute discretion.
17. I/We hereby acknowledge that neither La Trobe Financial has provided me/us with any financial product advice (other than under the Information Memorandum for the Trust), made any representation or given any guarantee as to the performance of the Trust, the maintenance of capital or any particular rate of Investor return.
18. If signed under a power of attorney, I/we declare that I/we have no knowledge of the revocation of that power of attorney.
19. If applying as a custodian, I/We declare that I am/we are acting in the capacity as a trustee, am/are licensed to provide custodial services and are providing the same in the ordinary course of carrying on a business providing such custodial services, and have carried out all requisite customer identification procedures and ongoing customer due diligence in relation to the customers to whom I/we are providing custodial services.

Privacy and Anti-Money Laundering declarations

20. I/We authorise the disclosure to my/our Financial Adviser, Authorised Representative or Referrer and/or other service provider of any information in relation to this application or my/our investment (personal information) and I/we consent to the payment of fees to the Financial Adviser, Authorised Representative or Referrer as set out in this Application Form, the Information Memorandum or in subsequent disclosure.
21. I/We understand and agree that La Trobe Financial may disclose information about me/us to courts, tribunals or as required by law, including to verify my/our identity as necessary for La Trobe Financial to comply with its obligations under the Anti-Money Laundering and Counter-Terrorism Financing Act.
22. I/We agree to information about me/us being collected, used and disclosed in accordance with the privacy statement contained in the Information Memorandum.
23. I/We understand that La Trobe Financial may use my/our personal information for marketing to me/us products and services offered by it and organisations with which it is affiliated or which it represents. I/We have the right not to receive marketing material by contacting La Trobe Financial.
24. I/We understand and agree that La Trobe Financial may provide personal information to an external organisation that provides information technology services for the purposes of the Trust.

Digital signatures are currently accepted on our application forms.**Signature of Investor**

Date _____

Name _____

Capacity to execute:

- Applicant Director
- Power of Attorney Trustee

Signature of Investor

Date _____

Name _____

Capacity to execute:

- Applicant Director
- Power of Attorney Trustee

Please do not use this Application Form unless accompanied by the Information Memorandum.

Post your application to:

La Trobe Financial
GPO Box 2289,
Melbourne Victoria 3001 Australia

Email your application to:

investor@latrobefinancial.com.au

La Trobe Financial Authorised Representative Details (if applicable)

Name _____

Number _____

SECTION J – PAYMENT

All application amounts for the La Trobe US Private Credit Trust must be deposited into the La Trobe Financial - Applications Trust Account.

Via Electronic Funds Transfer EFT:**Account Name:** La Trobe Financial – Applications Trust Account**BSB:** 063-000**Account Number:** 14446796**Reference:** Please note your Full Name and/or Investor Account Number**Via Cheque:****All cheques must be made payable to:**

La Trobe Financial – Applications Trust Account