Super Accelerator Core

Application Forms booklet 28 August 2017

Issuer/trustee details:

Netwealth Investments Limited ABN 85 090 569 109 AFSL 230975

Fund details:

Netwealth Superannuation Master Fund ABN 94 573 747 704





This booklet contains application forms for Netwealth Super Accelerator Core ('Super Accelerator Core') which is a product of the Netwealth Superannuation Master Fund (referred to as the 'Fund').

This booklet accompanies the Product Disclosure Statement for Super Accelerator dated 20 July 2017 and is the Application Forms Booklet referred to in the Product Disclosure Statement.

Throughout this Application Forms Booklet and in all the forms contained in this booklet 'PDS' refers to the Product Disclosure Statement for Super Accelerator dated 20 July 2017, including any Supplementary Product Disclosure Statement for Super Accelerator.

Before completing the 'Application' form contained in this booklet you should ensure that you have a copy of the current PDS for Super Accelerator.

Netwealth contact details

Head office

Level 8/52 Collins Street Melbourne VIC 3000

Postal address

Netwealth Investments Limited PO Box 336 South Melbourne VIC 3205

Freecall 1800 888 223 (within Australia) Phone 03 9655 1300 Fax 03 9655 1333 Email contact@netwealth.com.au Our website www.netwealth.com.au

Checklist and forms

How to contribute

Method	Payment		Other requirem	ents
Cheque	Netwealth Invest	ne made payable to: ments Limited – Applications Account. De crossed 'not negotiable'.	contribution' for	to your 'Application' form or 'Additional rm or if you have applied online clearly ount the cheque is for.
Electronic funds transfer (EFT) If you know your account number.	Bank: BSB number: Account no.: Reference:	ANZ 013 993 Last 9 digits of your Netwealth account number A – Superannuation guarantee B – Salary sacrifice C – Personal contribution D – Spouse contribution	Netwealth acco as follows: BSB number: Account no.: Reference: Note: Superann	ke a salary sacrifice contribution for funt number 0001040500 enter details 013 993 001040500 B uation guarantee will be the default be if no reference is provided.
Electronic funds transfer (EFT) or direct branch deposit For a new application where you do not have an account number.	Bank: BSB number: Account no.: Account name: Reference:	ANZ 013 030 837 557 601 Netwealth applications account Proposed account name		remittances except SuperStream remittance@netwealth.com.au.
BPAY®	Biller Codes:	156513: Superannuation Guarantee 156539: Salary Sacrifice 156505: Personal Contribution 156521: Spouse	Number (CRN).	a unique BPAY® Customer Reference This can be found on the Netwealth odic statements or by contacting
Direct debit	One-off direct del	oits or a regular contribution plan.	regular or ad-ho AND/OR (if requ	oution plan' form – to commence a
SuperStream Employers Only	Bank: BSB number: Account no.: Reference:	Netwealth acco	ke a SuperStream contribution for nunt number 0001040500 send the ontribution message to: 94 573 747 704 NET0017AU 0001040500	



⚠ All contribution remittances except SuperStream must be sent to remittance@netwealth.com.au.

Please ensure you complete Step 6 of your application indicating the type of contribution.

It is important to follow these contribution instructions carefully otherwise we may not be able to correctly allocate your contributions to your account.

[®] Registered to BPAY Pty Ltd ABN 69 079 137 518

Checklist and forms

Forms you need to complete

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You must complete	Page	
'Application' form	5	In all cases using this 'Application' form or completing an online application.
Optional	Page	
Rollover/transfer request	17	If you wish to rollover a benefit from another fund.
Direct debit request	20	If you wish to make any contributions by direct debit from a bank account.
Compliance letter	22	Give this to your employer if you want them to contribute to your Netwealth superannuation account. A 'Standard Choice' form is also available on our website.

Income Stream Service

You must complete	Page	
'Application' form	5	In all cases using this 'Application' form or completing an online application.
Income stream instruction	14	If you are applying for an income stream.
Tax File Number Declaration	23	If you are under age 60, commencing an income stream and want to claim the tax-free threshold from your Super Accelerator income stream.
Optional	Page	
Rollover/transfer request	17	If you wish to rollover a benefit from another fund.
Direct debit request	20	If you wish to make a contribution from your bank account to commence your income stream.

Please send all correspondence to:

Send to us:



contact@netwealth.com.au



Netwealth Investments Limited, Reply Paid 336, South Melbourne VIC 3205

Netwealth Super Accelerator Core Application



NWNFWRSWAP

Please use **BLACK** pen and **BLOCK** letters.

This form may only be used if you have received a copy of the Product Disclosure Statement for Super Accelerator dated 20 July 2017 ('the PDS').

Step 1. Choose the type of account you wi	sh t	0 0	oen																									
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Step 2. Confirm if you are an existing Netv	weal	th	clie	nt																								
Client name																												
Client number										Acc	our	ıt nu	mbe	er														
Step 3. Provide your personal details if yo	u ar	e a	nev	/ cli	ent																							
Mr/Mrs/Miss/Ms/Dr/Other					Fai	mily	nar nar	ne																				
Given name(s)																												
Date of birth		D] /		M	/					Sex]	Лale		[Fe	mal	е							
Residential address (mandatory)																												
Suburb/town																												
State				Po	stcc	ode					C	oun	try (if no	t Au	ıstra	ılia) [\Box	\Box		
Postal address (if different from above)																												
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Email																												
Preferred online access and communicate	tion	me	tho	d																								
Level of online access (please select one)		Tr	ans	act					Br	OWS	e o	nly																
Communication method (please select one)		El	ectr	onic	ally	1			Po	st																		
If no level of online access is selected the provided an email address above then y															omn	nuni	catio	on m	neth	od i	s se	lect	ed a	nd y	ou h	nave)	
You elect to receive your Annual Member Sta	teme	ent a	and	to c	onfi	rm i	trans	sact	ions	by	acc	essir	ng yo	our	onlir	ne ad	ccou	nt, ι	ınles	ss y	ou c	hoo	se tl	ne fc	ollov	ving	:	
I request that my Annual Member State	men	ts a	nd r	non	thly	Co	nfirn	natio	on St	tate	mei	nt be	e ser	nt to	me	by t	he c	omr	nun	icat	ion	met	hod	sele	cted	da b	ove.	

¹ Receiving communications electronically means by an email sent to your email address, an attachment to an email sent to your email address, or notification to you by email that the communication is available for you to access in your secure online account or on the public website. Communications include all letters, statements, confirmations and other notices.

Step 4. Consider providing your tax file n	umb	er (TFN	l')																									
Before providing your TFN, please ensu important information regarding the co							rma	tior	be	low	and	the	Ήο	w su	per	is ta	xed	sec	tion	of	the	PD	S, wl	hich	1 01	ıtlin	es		
Tax file number				-] -						(OR				1	do r	not v	wish	h to	pro	vid	e m	y TF	Ν	
Important information about providing y	our	tax	file	nuı	nbe	er (T	FN))																					
Under the <i>Superannuation Industry (Supervis</i> purposes.	sion)	Act	1993	<i>3</i> , yc	ur s	upe	ranı	nuat	tion	fun	d is	auth	oris	sed t	:0 CC	llec	t yo	ur T	FN,	whi	ch w	vill o	only	be	use	ed fo	or lav	wful	
These purposes may include locating and ide Australian Taxation Office ('ATO') for the purp												inist	erir	ng el	igibl	e tei	mir	natio	n pa	aym	ent	10 2	r rep	orti	ing	to t	he		
These purposes may change in the future as superannuation provider, when your benefits not be disclosed to any other superannuation	are b	oein	g tra																										
It is not an offence not to quote your TFN. Ho otherwise apply):	weve	er gi	ving	you	ır TF	N to	o yo	ur s	upe	ranr	nuati	ion f	unc	l will	hav	e th	e fo	llow	ing	adv	anta	age	s (w	hich	n m	ay r	not		
 your superannuation fund will be able to the tax on contributions to your superan other than the tax that may ordinarily apple it will make it much easier to trace different 	nuati ply, n	on a	acco dditic	unt nal	/s w tax	ill no will	ot in be o	icre dedi	ase, ucte	, ed w	hen	you	sta	rt dr		-		-										tire.	
The consequences of not quoting your TFN n	nay c	han	ge ir	the	e fut	ure	as a	a res	ult	of le	gisla	ative	e ch	ange	es.														
For more information, please contact Netwee	alth o	r th	e AT	O S	upe	ranı	านat	ion	info	oline	on ²	13 10	20.																
Step 5. Provide nominated bank account	deta	ails																											
You can only nominate a bank account not be made to third parties.			eld i	n yc	our r	nam	e or	a jo	int	bank	acc	cour	nt fo	r wh	nich	you	are	one	oft	he a	accc	un	t ho	lder	rs. F	^o ayr	nent	ts w	ill
Name of financial institution										Τ													\top	T	Т	Т	Т		
Account holder/s name										Ì		İ										Ť	Ŧ	Ŧ	Ī	Ī	Ī	Ī	司
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Step 6. Provide details of your initial cont	ribu	tioi	15 –	roll	ove	rs, 1	trar	iste	rs a	and	con	trib	uti	ons															
(i) Rollovers and transfers																													
For all rollovers and transfers from other funds				lete	the	det	ails	belo	w a	and t	he 'F	Rollo	ver	/tran	sfer	requ	uest	for	m in	this	s Ap	plic	atio	n Fo	orm	is Bo	ookl	et.	
Your initial contribution must be a minimum	of \$10	0,00	0.																										
Fund name	L																							\perp	╛				
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Fund name									<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u> </u>	1_						<u> </u>	<u> </u>	\pm	$_{+}$	\dashv	ᆜ	\dashv		닉
Policy/account number															Ap	pro	к. а	moı	ınt \$	<u> </u>	1			\perp		1	\perp		

Total rollovers \$

Step 6. Provide details of your initial contributions – rollovers, transfers and contributions (continued)										_
(ii) Initial contributions											
Indicate the total of all initial contributions											
Concessional contributions											
Superannuation guarantee contributions (employer)	\$				1					0 0	
Salary sacrifice contributions (employer)	\$				I					0 0	
Personal contribution for which you intend to claim a tax deduction ¹	\$				1					0 0	
You will only be able to claim a tax deduction on contributions for which we have received a valid notice. Not s deductibility of contributions and the level of contributions that count toward your contribution limits. This ca										!	
You or your Nominated Financial Adviser can claim a tax deduction for eligible contributions online.											
Non-concessional contributions ²											
Personal contribution	\$				1					0 0	
Spouse contribution	\$				1					0 0	
Other³ (please attach details)	\$				1				0	0 0	
Total of all contributions	\$				I				0	0 0	
Contribution method											
Cheque Electronic funds transfer BPAY® Direct debit (please complete and atta	ch t	he e	nclo	sed	'Dire	ect c	lebit	requ	ıest	form)	
form issued by the Australian Tax Office. If you do not submit this completed form at the same time as the contribution, we will process the core contribution. Alternatively, you will have the opportunity to claim a tax deduction for that contribution at the end of the financial year when Ne may not be able to claim a deduction at that time if you have commenced a pension or transferred your benefit out of the Fund. If you do not quote your tax file number (TFN') to us we must return non-concessional contributions to you. You can quote your TFN at Step 4. This may include personal injury contributions or disposal of small business contributions. Please refer to the PDS for further details of types of Step 7. Regular contribution plan (optional)	tweal	th se	nds y	ou a s	sectio	on 29	0.170	notice			
I wish to make regular monthly contributions to my cash account.											
You must also complete the 'Direct debit request' form to enable us to debit your bank account. We will del month or the next business day if the 15th day is not a business day.	bit y	our	bank	(acc	cour	nt or	n the	: 15tl	n of	each	
Monthly contribution amount (minimum of \$100 per month) \$. 0 0											
Payment to commence 1 5 / M M / Y Y											
Concessional contributions											
Superannuation guarantee contributions (employer)	\$				I				0	0 0	
Salary sacrifice contributions (employer)	\$				I					0 0	
Non-concessional contributions											
Personal contributions ¹	\$				1					0 0	
Spouse contribution (personal)	\$				1					0 0	
Total of all regular monthly contributions	\$				7				0	0 0	

¹ If you wish to claim a tax deduction for some or all of your contributions, you or your Nominated Financial Adviser will need to do so online or submit a completed 'Notice of intent to claim or vary a deduction for personal super contributions' form issued by the Australian Tax Office for each contribution you intend to claim as a tax deduction. Alternatively, you will have the opportunity to claim a tax deduction for your personal contribution at the end of the financial year when Netwealth sends you a section 290.170 notice. You may not be able to claim a deduction at that time if you have commenced a pension or transferred your benefit out of the Fund.

Step 8. Reinvestment plan (optional)

You have two reinvestment options for the income and distributions received into your account. You can choose either or a combination of the two options. If no selection is made, your income and distributions will remain in your cash account. You can only reinvest into managed funds that you already hold.

Distribution reinvestment

Distributions received from a managed fund will be reinvested into units of the same managed fund in accordance with your instructions as follows:

Apply distribution reinvestment to all managed funds held in my account: I wish to have the income received from all managed funds held in my account reinvested into units of the same managed fund.

OR

Apply distribution reinvestment to selected managed funds: I wish to have the income received from the managed funds I have selected in Step 10 reinvested into units of the same managed funds.

If this option is selected, you must tick the 'Distribution reinvestment' box on the selected managed funds in Step 10.

If the distribution to be reinvested into any one managed fund is less than \$5, we may not be able to carry out your distribution reinvestment instructions and the amount will remain in your cash account.

Income reinvestment

Once a month we will calculate the amount of income you have received and deduct expenses for the month and any distributions that have been reinvested to give a monthly net income amount. The monthly net income will then be allocated to managed funds in accordance with your instructions as follows:

- Reinvest the following net income amounts:
- 1. Income earned less any expenses and reinvested distributions, plus
- 2. Regular contribution plan amounts made by direct debit.

A

If you enter an Income reinvestment % for any managed funds in Step 10 and make no selection in this section of Step 8, this is the income reinvestment plan that will apply.

OR

- Reinvest the following net income amounts:
- 1. Income earned less any expenses and reinvested distributions, plus
- 2. Regular contribution plan amounts made by direct debit, plus
- 3. Employer contributions (super guarantee and salary sacrifice).

If one of the above income reinvestment options is selected, you must complete the income reinvestment percentages in Step 10.

If the amount of reinvestment into any one managed fund is less than \$100 for a particular month, we may not be able to carry out your reinvestment instructions and the amount will remain in your cash account.

Rollovers or member personal contributions (concessional or non-concessional) that are not drawn through the Netwealth regular contribution plan by direct debit are not included in the amount reinvested.

Step 9. Select your auto sell down profile

You may nominate the order in which you want to sell down your investments to top up your cash account in the event that the balance of your cash account falls below the minimum cash requirement. You may select from one of the three auto sell down profiles:

Largest to smallest (default)

Units will be redeemed from your assets starting with your largest to smallest liquid managed fund holding and then other investments (from largest to smallest), until the minimum cash requirement is met.



If you make no selection this is the profile that will apply.

OR

Pro-rata

Units will be redeemed firstly from liquid managed funds based on the proportion that they represent and then other investments (from largest to smallest) until the minimum cash requirement is met.

OR

Rank

Units will be redeemed from liquid managed funds based on the ranking you select in Step 10, until the minimum cash requirement is met.

Step 10. Provide your investment instructions									
Cash account									
Please invest my initial rollovers/contributions in my cash account									
OR									
Total amount in the cash account above the minimum cash requirement 1 \$ OR	%	1		,			0	0	

Term deposit

Term deposit application forms are available online or from your adviser. Alternatively, you can transact online once you receive your login details. A minimum amount of \$5,000 may apply to any one term deposit.

Netwealth Global Specialist Series

If you wish to apply a dollar cost averaging plan to this account, please complete the 'Dollar cost averaging (DCA) plan' form available from our website.

Fund name	APIR code	Initial amount to invest (\$ or %) ²	Income reinvestment %3	Distribution reinvestment ⁴	Auto sell down rank
Netwealth Index Opportunities Conservative Fund	NET0004AU	, . 0 0			
Netwealth Index Opportunities Balanced Fund	NET0002AU	. 0 0			
Netwealth Index Opportunities Growth Fund	NET0027AU	. 0 0			
Netwealth Active 30/70 Conservative Fund	NET0025AU	. 0 0			
Netwealth Active 50/50 Balanced Fund	NET0006AU	. 0 0			
Netwealth Active 70/30 Growth Fund	NET0013AU	. 0 0			
Netwealth Active 90/10 High Growth Fund	NET0008AU	. 0 0			
Netwealth Australian Bond Index Fund	NET0023AU	. 0 0			
Netwealth Australian Property Index Fund	NET0010AU	. 0 0			
Netwealth Australian Equities Index Fund	NET0001AU	. 0 0			
Netwealth International Equities Index Fund	NET0009AU	, . 0 0			
Total for the Global Specialist Series		. 0 0			

🛕 Please ensure the total does not exceed the amount of your initial deposit, allowing for the minimum cash requirement. If the total is greater than the amount available for investment there may be delays in processing your application.

 $^{^{\}rm 1}~$ For further information please see the section of the PDS called 'Minimum cash requirement'.

² A minimum investment amount of \$100 applies to any managed fund.

³ Your selected % of net income received in your cash account from all sources will be reinvested in this fund. Percentage amounts of income reinvestment for all managed funds must total 100% and Step 8 must be completed.

⁴ Distributions received from this managed fund will be reinvested into this managed fund.

Step 11. Binding death benefit direction (c	ptio	nal)																								
Non-lapsing OR		Fi	xed t	erm	of				ye	ars																	
Nominated dependants																											
Upon your death, Netwealth will pay your supyou have not provided a binding death benefit																	und	ler a	bin	ding	dea	th b	ene	fit d	irect	tion	or if
To ensure that your direction is valid ple You have completed the % of the b The relationship of your nominated The % of benefit for each of your no You are not nominated as a depend If this form is not completed correctly, your direpresentative.	enefi I beno omina dant I	it fo efic ated belo	r ead iary i d dep ow if	ch of is on oend you	e of ant are	f the s an com	rel d/o nple	ation r you eting	nshi ur le ; this	ps li gal p s app	sted pers	d be sona atior	low; I rep n un	ores der	enta a Po	tive wer	ado	d up Atto	to 1 rney	00%;				oers	onal		
Details of the dependants that you wish to no	mina	ıte ι	unde	r yol	ur b	indiı	ng c	deatl	h be	nefi	t dir	ecti	on:	(use	e cop	ies	of th	nis f	orm	if no	mir	ıatin	ıg m	ore	thar	ı fou	r)
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Legal personal representative																											
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Financial Adviser nomination																									
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Automatic Adviser Representative non	ninatio	on and	ager	су	agree	men	nt																		
I nominate the Financial Adviser named aboaccount (including receiving documents on Representative (either by ticking the box be Financial Adviser to give Netwealth instruct authorised to continue as my Adviser Representatives in the Practions by my Adviser Representative as de	my bel low or ions in sentat oduct (half) ur by advi relatio ive so l Disclos	lless I sing N n to n ong a ure St	info Netw ny a s the tate	orm Ne vealth ccoun e new ment.	etwea in wr t. If n AFS I con	alth ritin ny F Lice nfirm	in w g). N inar ense n an	vriti My F ncia ee is d aş	ng th inar Il Ad reg gree	nat I ncial vise ister	do i Adv r cha red l	not vise ang oy N	war ma es tl	nt my ny au heir realt	y Fin Ithor AFS h. I h	anci ise Lice nave	al A offic ense not	dvis ers ee, th	ser to or ei he Fi the ir	o be mplo inan mpo	my oyee cial ortar	Advies of Adv	iser the iser arni	is
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I do NOT wish for my Financial Advise	r to be	my Ad	viser F	Repr	esent	ative	١.																		
Advice fees																									
Please provide the details of any fees that years Licensee for whom Your Financial Advisor all of this amount being paid by the AFS LTAX Credit (RITC) on these fees and the amount being paid by the AFS LTAX Credit (RITC) on these fees and the amount being paid by the AFS LTAX Credit (RITC) on these fees and the amount being paid by the AFS LTAX Credit (RITC) on these fees and the amount being paid by the AFS LTAX Credit (RITC) on these fees and the amount being paid by the AFS LTAX Credit (RITC) on these fees and the amount being paid by the AFS LTAX Credit (RITC) on these fees and the amount being paid by the AFS LTAX Credit (RITC) on these fees and the amount being paid by the AFS LTAX Credit (RITC) on these fees and the amount being paid by the AFS LTAX Credit (RITC) on the amount being paid by the AFS LTAX Credit (RITC) on the amount being paid by the AFS LTAX Credit (RITC) on the amount being paid by the AFS LTAX Credit (RITC) on the amount being paid by the AFS LTAX Credit (RITC) on the amount being paid by the AFS LTAX Credit (RITC) on the amount being paid by the AFS LTAX Credit (RITC) on the amount being paid by the AFS LTAX Credit (RITC) on the amount being paid by the AFS LTAX Credit (RITC) on the amount being paid by the AFS LTAX Credit (RITC) on the amount being paid by the AFS LTAX Credit (RITC) on the amount being paid by the AFS LTAX Credit (RITC) on the amount being paid by the AFS LTAX Credit (RITC) on the amount by the AFS LTAX Credit (RITC) on the amount by the AFS LTAX Credit (RITC) on the amount by the AFS LTAX Credit (RITC) on the amount by the AFS LTAX Credit (RITC) on the amount by the AFS LTAX Credit (RITC) on the amount by the AFS LTAX Credit (RITC) on the amount by the AFS LTAX Credit (RITC) on the amount by the AFS LTAX Credit (RITC) on the amount by the AFS LTAX Credit (RITC) on the amount by the AFS LTAX Credit (RITC) on the amount by the AFS LTAX Credit (RITC) on the amount by the AFS LTAX Credit (RITC) on the amount by the AFS LTAX Credit (RITC) on the amount by the AFS LTAX Cre	ser act: icense	s as an ee to Yo	autho ur Fin	orise nanc	ed repr ial Ad	reser viser	ntati (or	ive (thei	who	oeve omin	r tha	at m Ne	ay t	oe fr alth	om ma	time y be	to t enti	ime tled) and to r	d you ecei	u co ive a	nse Red	nt to duce	so ed Ir	me
Upfront member advice fees applying t	o cont	tributi	ons, r	ollo	vers	and	trai	nsfe	ers	to y	our	acc	oui	1t (i	ncl	udin	g G	ST)							
Initial contributions/rollovers flat percentag	e rate] %	ra	ite a	pplie	ed to	allo	cont	ribu	tion	s/roll	ovei	s sh	iowr	n in S	tep	6 of	this	forn	٦.
AND/OR																									
Initial contributions/rollovers fixed dollar an	nount	\$		7				0	0] T	his a	amoi	unt i	is a	one-	off fe	ee.								
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Ongoing member advice fees based on	a fixe	d amo	unt (i	nclı	uding	GST) (c	ont	inu	ed o	on n	ext	pag	ge)											
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Paid Monthly	Qu	ıarterly			Half y	early			Υ	earl	У														
Commencing MM / YY																									

Step 12. Nominate Your Financial Adviser and advice fees (continued)
Indexed annually by None OR CPI ¹ OR A fixed rate of %
OR The lesser of CPI ¹ and %
OR The greater of CPI¹ and %
If you have chosen to index the ongoing member advice fee, you must select a date for the fee to first be indexed on. If no selection is made, the fee will be indexed 12 months from the next applicable quarter.
Fee to be first indexed on 31 Mar Y Y OR 30 Jun Y Y OR 30 Sep Y Y OR 31 Dec Y Y
1 CPI will be calculated as the rate of increase in All Groups Consumer Price Index for Australian capital cities published by the Australian Bureau of Statistics for the 12 months to the end of the calendar quarter immediately preceding the date of increase.
Licensee member advice fee
Please provide the details of any fees that you agree with Your Financial Adviser to pay to Your Financial Adviser's AFS Licensee for whom Your Financial Adviser acts as an authorised representative (whoever that may be from time to time), including GST. You authorise and direct us to pay these amounts to the AFS Licensee. The licensee member advice fee is in addition to any other member advice fees that you agree to be paid to Your Financial Adviser. Netwealth may be entitled to receive a Reduced Input Tax Credit (RITC) on these fees and the amount deducted from your account to pay these fees may be less than the amount shown on this form.
Ongoing licensee member advice fees based on your account balance (including GST)
Full account balance % p.a. This is a percentage per year of the full account balance, paid monthly.
OR
Account balance range
From \$
From \$
From \$
From \$ /
Ongoing licensee member advice fees based on a fixed amount (including GST)
Flat dollar amount \$
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Step 13. Read and sign this client declaration

(If you wish to use the direct debit facility you must also complete the 'Direct debit request' form in this Application Forms Booklet and agree to the direct debit request agreement terms.)

By submitting this application, I declare that:

Product Disclosure Statement and Trust Deed

- 1. I have received, read and understood and agree to be bound by the terms and conditions set out in the Product Disclosure Statement, Information Guides and any Supplementary Product Disclosure Statement for Super Accelerator and the trust deed for the Netwealth Superannuation Master Fund; and
- 2. I have read, understood and agree to be bound by the terms and conditions governing the use of the Netwealth website available from the Netwealth website.

Anti Money Laundering and Counter-Terrorism Financing

- 3. I acknowledge that Netwealth is bound by laws about the prevention of money laundering and the financing of terrorism, including the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 ('AML/CTF laws') and I represent and agree with Netwealth that;
 - (a) I am not applying to invest in the Fund under an assumed name;
 - (b) any money used by me to invest in the Fund is not derived from or related to any criminal activities;
 - (c) any proceeds of my investments will not be used in relation to any criminal activities;
 - (d) if Netwealth asks, I will provide all additional information Netwealth reasonably requires for the purposes of AML/CTF laws (including the source of funds used to invest);
 - (e) Netwealth may obtain information about me from third parties if Netwealth believes this is necessary to comply with AML/CTF laws; and

Step 13. Read and sign this client declaration (continued)

- (f) in order to comply with AML/CTF laws Netwealth may be required to take action, including:
 - · delaying or refusing the processing of any contribution or benefit payment; or
 - disclosing information that Netwealth holds about me to Netwealth's related bodies corporate or service providers, or relevant regulators of AML/CTF laws (whether in or outside of Australia).

Contributions

4. I am eligible to contribute or have contributions made on my behalf to the Fund and will advise Netwealth and cease making contributions to the Fund if I cease to be eligible to contribute under superannuation law.

(The following declaration, 5, only applies if you are between the age of 65 and 75 and are making personal contributions to the Fund).

5. I declare that I have been gainfully employed for at least 40 hours in a period of not more than 30 consecutive days in the current financial year.

Binding death benefit direction

- 6. If I have given a binding death benefit direction, I accept and understand the conditions relating to binding death benefit directions, and
- 7. I acknowledge that, where a fixed term direction has been elected, the direction will cease to have effect after the nominated fixed term (shown in Step 11 from the date this application is receipted by Netwealth) unless I update it prior to this time.

Acknowledgement and Declaration

- 8. I represent to Netwealth that all the details in the application are true and correct;
- 9. I confirm that any member advice fees entered at Step 12 are for financial product advice provided to me by my Financial Adviser relating solely to my Netwealth Superannuation account;
- 10. I consent to the use of my personal information as outlined in the PDS for Super Accelerator; and

It is recommended that you retain a copy of the completed 'Application' form for your own records.

11. I authorise Netwealth to disclose to my Financial Adviser (if applicable) information regarding this transaction and/or my investments held through the Netwealth Superannuation Master Fund.

Before you sign this 'Application' form, Netwealth or your adviser is obliged to give you a current Product Disclosure Statement for Super

Accelerator which contains important information about the Fund. This document will help you understand the product and to decide if it is

appropriate to your needs.														
Signed by:														
Please print full name														

r icase print run name																			
Signature										Da	te	D	D	/	M	M	/	Υ	Υ

Step 14. Once complete

See page 3 of the Application Forms Booklet for details on how to make your contribution. Attach any cheque/s (Income stream instruction) (Direct debit

1 0		sfer request' forms (if required) to the '	,	3 1	IIICOIII	e stream instruction, Direct debit
Send to us:	@	contact@netwealth.com.au	0	Netwealth Investments Limited, F	Reply Pa	aid 336, South Melbourne VIC 3205
For more information:	\Box	netwealth.com.au		1800 888 223	€	Your adviser
Notes						
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Superannuation Income stream instruction



NWNEWBISIF

Please use **BLACK** pen and **BLOCK** letters.

This form may only be used if you have received a copy of the Product Disclosure Statement Super Accelerator dated 20 July 2017 ('the PDS').

Step 1. Provide member details																			_													_								
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The minimum cash requiremen	nt																																							
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Step 2. Declare condition of release			_																														_	_	_					
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Standard Income Stream																							_	Ве	fore	e 1.	Jul	y 19	960									ļ	55	
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Transition to Retirement Income Stream	ım																																							
I have reached my preservation age*																																								
Step 3. Provide notice of intent to clain	nat	tas	c de	adı	uct	ior	n fo	ır r	her	รก	na	al c	on	trik	ni i	tin	ne																							
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Step 4. Claim your tax-free threshold and/or notify your Tax File Number (TFN)
Are you aged under 60?
No – If you are over age 60 no PAYG tax will be deducted from your income and no additional ATO forms are required.
Yes – Do you want to claim the tax-free threshold from your Netwealth income stream?
Yes – Please complete and attach the enclosed ATO 'Tax File Number Declaration' form
No – You may want to provide your Tax File Number, if you have not previously done so. To provide your TFN please complete a 'Tax File Number Notification' form available from our website and attach it to this form or complete Step 4 of the 'Application' form.
1 Only claim the tax-free threshold from one payer at a time, unless your total income from all sources for the financial year will be less than the tax-free threshold.
Step 5. Nominate bank account details
You can only nominate a bank account that is held in your name or a joint bank account for which you are one of the account holders. Payments
will not be made to third parties.
Provide the bank account any income stream payments are to be made to (if applicable). If left blank, income stream payments will be made to the nominated bank account currently recorded for your account.
Name of financial institution
Account holder/s name
BSB Account number
Step 6. Nominate your income stream details (gross of any tax)
Payment frequency (please tick one box)
Payment to commence 1 5 / M M / Y Y
If you are investing between 1 June and 30 June you can defer the commencement of your payments until next financial year.
A Payments are made on the 15 th of each month or the next business day if the 15 th is not a business day.
Annual amount of pension required (please tick one box)
Standard Income Stream
The minimum annual pension ¹
OR p.a. (must be greater than minimum amount) ¹
Transition to Retirement Income Stream
The minimum annual pension ¹
OR The maximum annual pension ²
OR p.a. (must be between the minimum and maximum amounts) ¹
1 If there is less than a full year from the start of your income stream to the next 30 June, you will receive the annual amount reduced on a pro rata basis. 2 If there is less than a full year from the start of your income stream to the next 30 June, you will receive the full maximum amount over the remainder of the year.

Step 6. Nominate your income stream de	rtails (gross of any tax) (continued)
Term Allocated Pension	
Original commencement date	
Original purchase price \$. 0 0
Term selected	years
Amount of pension required (please tick one	box)
Fixed annual calculated amount	
OR 90% of the fixed calculated annu	ıal amount
OR 110% of the fixed calculated annu	ual amount
OR Nominated annual amount in all	owable 90-110% range \$
Step 7. Consider a reversionary pensione	er nomination
	s if you wish to nominate a reversionary pensioner. A reversionary pensioner must be a superannuation 'Information Guide 11: Death Benefits' for details. A Power of Attorney is unable to nominate themselves as a
Full name	
Address	
Suburb/town	
State	Postcode Country (if not Australia)
Date of birth	D D / M M / Y Y
Relationship	Spouse/de facto Child Interdependent Financial dependent
If you wish to make a binding death benefit o	direction instead of a reversionary pensioner nomination, please complete Step 11 of the 'Application' form.
Step 8. Read and sign this declaration	
	Netwealth that all the details in this transaction are true and correct and I declare that:
	agree to be bound by the terms and conditions set out in the current Product Disclosure Statement, ary Product Disclosure Statement for the Netwealth Superannuation Master Fund;
	the 'Application' form and signed the declaration; and
3. I authorise Netwealth to disclose to my Fi the Netwealth Superannuation Master Fu	inancial Adviser (if applicable) information regarding this transaction and/or my investments held through und.
	Netwealth or your adviser is obliged to give you a current Product Disclosure Statement for Super information about the Fund. The Product Disclosure Statement and the Information Guides will help you t is appropriate to your needs.
Full name	
Signature	Date DD / MM / YY
	ppy of the completed form for your own records.
Step 9. Once complete please send to us	
Send to us:	_

1800 888 223

Your adviser

Superannuation Rollover/transfer request



NWNEWBROTR

Please use BLACK pen and BLOCK letters.

This form may only be used if you have received a copy of the Product Disclosure Statement for Super Accelerator dated 20 July 2017.

Warning about insurance benefits. The superannuation fund you are transferring from may provide you with insurance against death, illness or accident in the form of life insurance, disability insurance or income protection insurance. When you submit this form and transfer benefits you may lose any insurance entitlements you have. You should consider any insurances you may lose as a result of this transfer.

Step 1. Provide your Super Accelerator a	ccou	ınt t	o ro	llov	er to	0																						
Account number (if known)																												
Step 2. Provide your personal details																												
Mr/Mrs/Miss/Ms/Dr/Other					Fam	nily	nar	ne¹															L					
Given name(s)																										\mathbb{L}		
Date of birth	D	D	/	M	M	/ [Υ	Υ			Sex			N	/lale	е			F	ema	le							
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Please attach certified documentary evidence if your n If no Tax File Number is provided you must provide cert you are transferring from may require more information Step 3. Provide details of the fund you are	tified p n, simila	hotog ar to a	graphi a banl	ic doo k 100	cumer point	tary	evic	dence	e of yo	ur id	lentit	y. Th			-						sspor	t/birt	th cer	tifica	ite. Si	ome f	[:] und	S
Complete details of each of the funds you ar If you are transferring from a Self Managed S			_		-					tha	n foi	ur s	upei	r fun	ds t	o tr	anst	er f	rom,	plea	ise (com	ıplet	e a s	sepa	arate	e fo	rm.
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Step 4. Provide	e details if you are transfer	ringt	rom	a Ser	IVIa	ınag	ed	Sup	er F	-un	d																	
Fund name																				Τ	I	T	$\overline{\mathbb{L}}$	I	I	Ī		
Unique Super le	dentifier (USI)															Α	BN				I		\perp	\perp		\perp		
Member or acc	ount number																		\prod	\Box		T	\mathbb{I}	\Box	\perp			\perp
Contact phone	number																											
Postal address																	Τ		Τ	Τ	Τ	Т	T	Т	Т	\top		\top
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Upfront mem	ber advice fee (including G	ST)		'																								
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Step 7. Read and sign this declaration

By submitting this instruction, I represent to Netwealth that all the details in this transaction are true and correct and I declare that:

- I authorise the transfer of my benefits from the fund shown in Steps 3 or 4 ('previous fund') to the Netwealth Superannuation Master Fund, a complying superannuation fund for the purposes of the Superannuation Industry (Supervision) Act 1993;
- 2. I discharge the trustee of my previous superannuation fund from any further liability to pay a benefit to me in respect of those benefits that have been correctly transferred;
- 3. I acknowledge that the transfer of my benefits from my previous fund may be delayed due to circumstances beyond the control of Netwealth Investments Limited ('Netwealth');
- 4. I consent to the deduction of any applicable fees from my benefit as a result of the transfer. (If you are not aware of the fees that may apply, you should contact your previous fund for further information);
- 5. I understand that any insurance I have in my previous fund may be lost as a result of this transfer;
- 6. I have received, read and understood and agree to be bound by the terms and conditions set out in the relevant Product Disclosure Statement for the Netwealth Superannuation Master Fund current as at the date I sign this form;
- 7. I authorise Netwealth to disclose to my adviser (if applicable) information regarding this transaction and/or my investments held; and
- 8. I authorise the trustee of my previous fund to provide Netwealth with all relevant details of my membership and any other relevant information required by law to effect this transfer and forward a payment for the transfer.

You should read the terms and condition	e current Product [ns governing this tr	Disclo ransa	sure ction	Stat n. The	eme cur	nt f ren	for t it Pr	he p odu	prod ict [duct Discl	in w osur	hich e St	ı yoı tate	ur a me	nt is	unt ava	is h ilab	eld ole	l as on (the our	re n web	nay osite	hav e.	e be	en	char	iges	to t	he	
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Superannuation Direct debit request



Please use BLACK pen and BLOCK letters.

This form may only be used if you have received a copy of the Product Disclosure Statement for Super Accelerator dated 20 July 2017 ('the PDS').

🛕 Please complete every step in this form (except Client number and Netwealth account number if these are not yet known). If the form is incomplete,

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Step 5. Once complete please send to us

Send to us:



contact@netwealth.com.au



Netwealth Investments Limited, Reply Paid 336, South Melbourne VIC 3205

For more information: netwealth.com.au





1800 888 223



Your adviser

Client Service Agreement – Direct debit

Definitions

account means the account held at your financial institution from which we are authorised to arrange for funds to be debited.

agreement means this Client Service Agreement between you and us with regard to direct debit arrangements.

non-business day means a Saturday or a Sunday or a public holiday listed throughout Australia.

debit day means the day that payment by you to us is due.

direct debit request means the direct debit request between us and you.

us or we means Netwealth Investments Limited (the debit user) you have authorised by signing a direct debit request.

you means the customer who signed the direct debit request.

your financial institution is the financial institution where you hold the account that you have authorised us to arrange to debit.

Drawing arrangements

We will only arrange for funds to be debited from your account as authorised in the direct debit request. Where the debit date falls on a non-business day, we will draw the amount on the next business day.

We will not change any details of drawings arrangements without giving you at least fourteen (14) days' written notice.

We reserve the right to cancel the direct debit arrangements if three or more drawings are returned unpaid by your nominated financial institution and to arrange with you an alternate payment method.

We will keep all information pertaining to your nominated account at the financial institution, private and confidential.

Your rights

You may terminate your direct debit arrangement at any time by giving signed written notice directly to us. Notice to us should be received by us at least two (2) business days prior to the due date.

You may stop a debit to your account under your direct debit arrangement by giving signed written notice directly to us. Notice given to us should be received by us at least two (2) business days prior to the due date.

You may request a change to the drawing amount by contacting us and advising your requirements no less than two (2) business days prior to the due date.

Where you consider that a drawing has been initiated incorrectly (outside your direct debit arrangement) you may take the matter up directly with us, or lodge a direct debit claim through your nominated financial institution.

Your responsibilities

It is your responsibility to ensure that sufficient funds are available in the nominated account to meet a drawing on its due date. If there are not sufficient funds in the nominated account a bank dishonor fee may be recovered from your account.

It is your responsibility to ensure that the authorisation given to draw on the nominated account is identical to the account signing instruction held by the financial institution where the account is based.

It is your responsibility to advise us if the account nominated by you to receive the direct debit arrangement is transferred or closed.

It is your responsibility to advise us of a suitable alternate payment method if you wish to amend your direct debit arrangement (where necessary).

All changes or queries regarding this agreement or your direct debit arrangement should be directed to our investor services team on 1800 888 223 or in writing to:



contact@netwealth.com.au



Netwealth Investments Limited, Reply Paid 336, South Melbourne VIC 3205

Superannuation Compliance letter

20 July 2017

To whom it may concern

Netwealth Superannuation Master Fund ABN 94 573 747 704 SFN 5099 560 25, including Netwealth Super Accelerator and Netwealth Super Wrap

Level 8/52 Collins Street MELBOURNE VIC 3000 PO Box 336 **SOUTH MELBOURNE VIC 3205** Freecall: 1800 888 223 Phone: +61 3 9655 1300 Fax: +61 3 9655 1333

Email: contact@netwealth.com.au

Netwealth Investments Ltd ABN 85 090 569 109

AFSL 230975

Product USI

NET0017AU Netwealth Superannuation Master Fund Personal Super

Netwealth Superannuation Master Fund Employer Sponsored Super NET0018AU NET0021AU Netwealth Superannuation Master Fund Standard Income Stream

NET0019AU Netwealth Superannuation Master Fund Transition to Retirement Income Stream

NET0020AU Netwealth Superannuation Master Fund Term Allocated Pension

As trustee of the above mentioned superannuation fund (Fund), Netwealth Investments Limited confirms that:

- The Fund is a resident regulated superannuation fund within the meaning of the Superannuation Industry (Supervision) Act 1993 (SIS).
- The Fund will accept all types of personal contributions and will accept employer contributions where the member has completed a Standard choice form nominating the Fund.
- The Fund is able to receive preserved benefits and will preserve these in accordance with SIS.
- The Fund is not subject to a direction under section 63 of SIS.

Contributions can be accepted by the Fund in the following ways:

Method	Payment		Other requirements
Cheque	Netwealth Investm	pe made payable to: nents Limited – Applications Account. pe crossed "not negotiable".	Attach details of the type of contribution to your cheque; OR Attach an 'Additional contribution' form to your cheque.
Electronic funds transfer – for online banking	Bank: BSB number: Account no.: Reference:	ANZ 013 993 Last 9 digits of your Netwealth account number A – Superannuation guarantee B – Salary sacrifice C – Personal contribution D – Spouse contribution	Example: to make a salary sacrifice contribution for Netwealth account number 0001040500 enter details as follows: BSB number: 013 993 Account no.: 001040500 Reference: B Note: Superannuation guarantee will be the default contribution type if no reference is provided.
Electronic funds transfer - for branch deposit	Bank: BSB number: Account no.: Account name: Reference:	ANZ 013 030 837 557 601 Netwealth applications account Your 10 digit Netwealth account number	Example: to make a contribution at a bank branch for Netwealth account number 0001040500 enter details as follows: Bank: ANZ BSB number: 013 030 Account no.: 837 557 601 Reference: 0001040500 All contribution remittances except SuperStream must be sent to remittance@netwealth.com.au.
Врау°	Biller Codes:	156513: Superannuation Guarantee 156539: Salary Sacrifice 156505: Personal Contribution 156521: Spouse	Each client has a unique BPAY Customer Reference Number (CRN). This can be found on the Netwealth website, on periodic statements or by contacting Netwealth.
Direct debit	One-off direct del	oits or a regular contribution plan.	'Direct debit request' form—to request a one-off or ad-hoc direct debit from your bank account; AND (if required) 'Regular contribution plan' form—to commence a regular contribution plan.
SuperStream Employers Only	Bank: BSB number: Account no.: Reference:	ANZ 013 030 837 557 724 Same as SuperStream contribution message	Example: to make a SuperStream contribution for Netwealth account number 0001040500 send the SuperStream contribution message to: ABN: 94 573 747 704 USI: NET0017AU Member ID: 0001040500

🛕 All contribution remittances except SuperStream must be sent to remittance@netwealth.com.au.

If you have any further queries, please contact us via email at contact@netwealth.com.au or Freecall 1800 888 223.

Yours sincerely

Matt Heine

Joint Managing Director

Netwealth Investments Limited

Registered to BPAY Pty Ltd ABN 69 079 137 518



NWCLMATFNF

Tax file number declaration

Information you provide in this declaration will allow your payer to work out how much tax to withhold from payments made to you.

- This is not a TFN application form.
 To apply for a TFN, go to ato.gov.au/tfn
- Terms we use

When we say:

- payer, we mean the business or individual making payments under the pay as you go (PAYG) withholding system.
- **payee**, we mean the individual being paid.

Who should complete this form?

You should complete this form before you start to receive payments from a new payer – for example:

- payments for work and services as an employee, company director or office holder
- payments under return-to-work schemes, labour hire arrangements or other specified payments
- benefit and compensation payments
- superannuation benefits.
- You need to provide all information requested on this form. Providing the wrong information may lead to incorrect amounts of tax being withheld from payments made to you.
- You do not need to complete this form if you:
 - are a beneficiary wanting to provide your tax file number (TFN) to the trustee of a closely held trust. For more information, visit ato.gov.au/trustsandtfnwithholding
 - have reached 60 years of age and started a super benefit that does not include an untaxed element for that benefit.
 - are receiving superannuation benefits from a super fund and have been taken to have quoted your TFN to the trustee of the super fund.

Section A: To be completed by the payee

Question 1 What is your tax file number (TFN)?

You should give your TFN to your employer only after you start work for them. Never give your TFN in a job application or over the internet.



We and your payer are authorised by the *Taxation Administration Act 1953* to request your TFN. It's not an offence not to quote your TFN. However, quoting your TFN reduces the risk of administrative errors and having extra tax withheld. Your payer is required to withhold the top rate of tax from all payments made to you if you do not provide your TFN or claim an exemption from quoting your TFN.

How do you find your TFN?

You can find your TFN on any of the following:

- your income tax notice of assessment
- correspondence we send you
- a payment summary your payer issues to you.

If you have a tax agent, they may also be able to tell you your TFN.

If you still can't find your TFN, you can:

- phone us on 13 28 61 between 8.00am and 6.00pm, Monday to Friday
- visit your nearest shopfront (phone us on 13 28 61 to make an appointment).

If you phone or visit us we need to know we are talking to the correct person before discussing your tax affairs. We will ask you for details only you, or your authorised representative would know.



You don't have a TFN

If you don't have a TFN and want to provide a TFN to your payer, you will need to apply for one.

For more information about applying for a TFN, visit ato.gov.au/tfn

You may be able to claim an exemption from quoting your TFN.

Print X in the appropriate box if you:

- have lodged a TFN application form or made an enquiry to obtain your TFN. You now have 28 days to provide your TFN to your payer, who must withhold at the standard rate during this time. After 28 days, if you have not given your TFN to your payer, they will withhold the top rate of tax from future payments
- are claiming an exemption from quoting a TFN because you are under 18 years of age and do not earn enough to pay tax, or you are an applicant or recipient of certain pensions, benefits or allowances from the
 - Department of Human Services however, you will need to quote your TFN if you receive a Newstart, Youth or sickness allowance, or an Austudy or parenting payment
 - Department of Veterans' Affairs a service pension under the Veterans' Entitlement Act 1986
 - Military Rehabilitation and Compensation Commission.

Providing your TFN to your super fund

Your payer must give your TFN to the super fund they pay your contributions to. If your super fund does not have your TFN, you can provide it to them separately. This ensures:

- your super fund can accept all types of contributions to your accounts
- additional tax will not be imposed on contributions as a result of failing to provide your TFN
- you can trace different super accounts in your name.



For more information about providing your TFN to your super fund, visit ato.gov.au/supereligibility

Question 2-5

Complete with your personal information.

Question 6 On what basis are you paid?

Check with your payer if you are not sure.

Question 7 Are you an Australian resident for tax purposes?

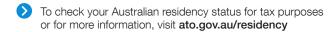
Generally, we consider you to be an Australian resident for tax purposes if you:

- have always lived in Australia or you have come to Australia and now live here permanently
- are an overseas student doing a course that takes more than six months to complete
- migrate to Australia and intend to reside here permanently.

If you go overseas temporarily and do not set up a permanent home in another country, you may continue to be treated as an Australian resident for tax purposes.

Foreign resident tax rates are different

A higher rate of tax applies to a foreign resident's taxable income and foreign residents are not entitled to a tax-free threshold nor can they claim tax offsets to reduce withholding, unless you are in receipt of an Australian Government pension or allowance.



Answer **no** to this question if you are not an Australian resident for tax purposes, unless you are in receipt of an Australian Government pension or allowance. If you answer **no**, you must also answer **no** at question 10.

Question 8 Do you want to claim the tax-free threshold from this payer?

The tax-free threshold is the amount of income you can earn each financial year that is not taxed. By claiming the threshold, you reduce the amount of tax that is withheld from your pay during the year.

Answer **yes** if you want to claim the tax-free threshold, you are an Australian resident for tax purposes, and one of the following applies:

- you are not currently claiming the tax-free threshold from another payer
- you are currently claiming the tax-free threshold from another payer and your total income from all sources will be less than the tax-free threshold.

Answer **yes** if you are a foreign resident in receipt of an Australian Government pension or allowance.

Otherwise answer no.

- If you receive any taxable government payments or allowances, such as Newstart, Youth Allowance or Austudy payment, you are likely to be already claiming the tax-free threshold from that payment.
- For more information about the current tax-free threshold, which payer you should claim it from, or how to vary your withholding rate, visit ato.gov.au/taxfreethreshold

Question 9

Do you want to claim the seniors and pensioners tax offset by reducing the amount withheld from payments made to you?

Claim tax offsets with only one payer

You are not entitled to reduce your withholding amounts, or claim the seniors and pensioners tax offset (SAPTO), with more than one payer at the same time.

If you receive income from more than one source and need help with this question, phone **1300 360 221** between 8.00am and 6.00pm, Monday to Friday.

2 Tax file number declaration

How your income affects the amount of your tax offset

You must meet the eligibility conditions to receive SAPTO. Your rebate income, not your taxable income, determines the amount of SAPTO, if any, you will receive.

Answer yes if you are eligible and choose to claim SAPTO with this payer. To reduce the amount withheld from payments you receive during the year from this payer, you will also need to complete a Withholding declaration (NAT 3093).

Answer **no** if one of the following applies:

- you are not eligible for SAPTO
- you are already claiming SAPTO with another payer
- vou are eligible but want to claim your entitlement to the tax offset as a lump sum in your end-of-year income tax assessment.



For more information about your eligibility to claim the tax offset or rebate income, visit ato.gov.au/taxoffsets

Question 10

Do you want to claim a zone, overseas forces or invalid and invalid carer tax offset by reducing the amount withheld from payments made to you?



Claim tax offsets with only one payer

You are not entitled to claim tax offsets with more than one payer at the same time.

You may be eligible for one or more of the following:

- a zone tax offset if you live or work in certain remote or isolated areas of Australia
- an overseas forces tax offset if you serve overseas as a member of Australia's Defence Force or a United Nations armed force
- an invalid and invalid carer tax offset.

Answer yes to this question if you are eligible and choose to receive tax offsets by reducing the amount withheld from payments made to you from this payer. You also need to complete a Withholding declaration (NAT 3093).

Answer **no** to this question if you are either:

- not eligible for the tax offsets
- a foreign resident
- choose to receive any of these tax offsets as an end-of-year lump sum through the tax system
- are already claiming the offset from another payer.



For more information about your entitlement, visit ato.gov.au/taxoffsets

Question 11

(a) Do you have a Higher Education Loan Program (HELP), Student Start-up Loan (SSL) or Trade Support Loan (TSL) debt?

Answer yes if you have a HELP, SSL or TSL debt.

Answer no if you do not have a HELP, SSL or TSL debt, or you have repaid your debt in full.



You have a HELP debt if either:

- the Australian Government lent you money under HECS-HELP, FEE-HELP, OS-HELP, VET FEE-HELP or SA-HFI P.
- you have a debt from the previous Higher Education Contribution Scheme (HECS).

(b) Do you have a Financial Supplement debt?

Answer yes if you have a Financial Supplement debt.

Answer **no** if you do not have a Financial Supplement debt, or you have repaid your debt in full.



For information about repaying your HELP, SSL, TSL or Financial Supplement debt, visit ato.gov.au/getloaninfo

Have you repaid your HELP, SSL, TSL or Financial Supplement debt?

When you have repaid your HELP, SSL, TSL or Financial Supplement debt, you need to complete a Withholding declaration (NAT 3093) notifying your payer of the change in your circumstances.



Sign and date the declaration

Make sure you have answered all the questions in section A, then sign and date the declaration. Give your completed declaration to your payer to complete section B.

Section B: To be completed by the payer



Important information for payers - see the reverse side of the form.

Lodge online

Payers can lodge TFN declaration reports online if you have software that complies with our specifications.

For more information about lodging the TFN declaration report online, visit ato.gov.au/lodgetfndeclaration

Tax file number declaration 3

More information

Internet

- For general information about TFNs, tax and super in Australia, including how to deal with us online, visit our website at ato.gov.au
- For information about applying for a TFN on the web, visit our website at ato.gov.au/tfn
- For information about your super, visit our website at ato.gov.au/superseeker

Useful products

In addition to this TFN declaration, you may also need to complete and give your payer the following forms which you can download from our website at **ato.gov.au**:

- Withholding declaration (NAT 3093) if you want to
 - claim entitlement to the seniors and pensioners tax offset (question 9) or other tax offsets (question 10)
 - change information you previously provided in a TFN declaration.
- Medicare levy variation declaration (NAT 0929) if you qualify for a reduced rate of Medicare levy or are liable for the Medicare levy surcharge. You can vary the amount your payer withholds from your payments.
- Standard choice form (NAT 13080) to choose a super fund for your employer to pay super contributions to. You can find information about your current super accounts and transfer any unnecessary super accounts through myGov after you have linked to the ATO. Temporary residents should visit ato.gov.au/departaustralia for more information about super.

Other forms and publications are also available from our website at ato.gov.au/onlineordering or by phoning 1300 720 092.

Phone

- Payee for more information, phone 13 28 61 between 8.00am and 6.00pm, Monday to Friday. If you want to vary your rate of withholding, phone 1300 360 221 between 8.00am and 6.00pm, Monday to Friday.
- Payer for more information, phone 13 28 66 between 8.00am and 6.00pm, Monday to Friday.

If you phone, we need to know we're talking to the right person before we can discuss your tax affairs. We'll ask for details only you, or someone you've authorised, would know. An authorised contact is someone you've previously told us can act on your behalf.

If you do not speak English well and need help from the ATO, phone the Translating and Interpreting Service on **13 14 50**.

If you are deaf, or have a hearing or speech impairment, phone the ATO through the National Relay Service (NRS) on the numbers listed below:

- TTY users phone 13 36 77 and ask for the ATO number you need (if you are calling from overseas, phone +61 7 3815 7799)
- Speak and Listen (speech-to-speech relay) users phone 1300 555 727 and ask for the ATO number you need (if you are calling from overseas, phone +61 7 3815 8000)
- Internet relay users connect to the NRS on relayservice.gov.au and ask for the ATO number you need.

If you would like further information about the National Relay Service, phone 1800 555 660 or email helpdesk@relayservice.com.au

Privacy of information

Taxation law authorises the ATO to collect information and to disclose it to other government agencies. For information about your privacy, go to ato.gov.au/privacy

Our commitment to you

We are committed to providing you with accurate, consistent and clear information to help you understand your rights and entitlements and meet your obligations.

If you follow our information in this publication and it turns out to be incorrect, or it is misleading and you make a mistake as a result, we must still apply the law correctly. If that means you owe us money, we must ask you to pay it but we will not charge you a penalty. Also, if you acted reasonably and in good faith we will not charge you interest.

If you make an honest mistake in trying to follow our information in this publication and you owe us money as a result, we will not charge you a penalty. However, we will ask you to pay the money, and we may also charge you interest. If correcting the mistake means we owe you money, we will pay it to you. We will also pay you any interest you are entitled to.

If you feel that this publication does not fully cover your circumstances, or you are unsure how it applies to you, you can seek further assistance from us.

We regularly revise our publications to take account of any changes to the law, so make sure that you have the latest information. If you are unsure, you can check for more recent information on our website at **ato.gov.au** or contact us.

This publication was current at July 2016.

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Published by

Australian Taxation Office Canberra July 2016

JS 35902

4 Tax file number declaration



Tax file number declarationThis declaration is NOT an application for a tax file number.

■ Use a black or blue pen and print clearly in BLOCK LETTERS.

= 000 a black or blac poin and print closiny in B20 or C22. (22.10)
■ Print X in the appropriate boxes.
■ Read all the instructions including the privacy statement before you complete this declaration

ato.gov.au ■ Read all the instructions	including the privacy statement before you complete this declaration.	
Section A: To be completed by the PAYEE 1 What is your tax file number (TFN)?	6 On what basis are you paid? (Select only one.) Full-time Part-time Labour Superannuation or annuity employment income stream employment	
For more information, see question 1 on page 2 of the instructions. OR I have made a separate application/enquiry to the ATO for a new or existing TFN. OR I have made a separate application/enquiry to the ATO for a new or existing TFN. OR I have made a separate application/enquiry to the ATO for a new or existing TFN. Is years of age and do not earn enough to pay tax.	7 Are you an Australian resident for tax purposes? (Visit ato.gov.au/residency to check) No	
OR I am claiming an exemption because I am in receipt of a pension, benefit or allowance.	8 Do you want to claim the tax-free threshold from this payer? Only claim the tax-free threshold from one payer at a time, unless your total income from all sources for the financial year will be less than the tax-free threshold.	
2 What is your name? Title: Mr Mrs Miss Ms Surname or family name	Yes No No Answer no here and at question 10 if you are a foreign resident, except if you are a foreign resident in receipt of an Australian Government pension or allowance.	
First given name	9 Do you want to claim the seniors and pensioners tax offset by reducing the amount withheld from payments made to you? Yes Complete a Withholding declaration (NAT 3093), but only if you are claiming the tax-free threshold from this payer. If you have more than one payer, see page 3 of the instructions.	
Other given names	10 Do you want to claim a zone, overseas forces or invalid and invalid carer tax offset by reducing the amount withheld from payments made to you?	
3 If you have changed your name since you last dealt with the ATO, provide your previous family name.	Yes Complete a Withholding declaration (NAT 3093).	
Day Month Year	11 (a) Do you have a Higher Education Loan Program (HELP), Student Start-up Loan (SSL) or Trade Support Loan (TSL) debt?	
4 What is your date of birth?	Yes Your payer will withhold additional amounts to cover any compulsory repayment that may be raised on your notice of assessment. (b) Do you have a Financial Supplement debt?	
5 What is your home address in Australia?	Yes Your payer will withhold additional amounts to cover any compulsory repayment that may be raised on your notice of assessment.	
Suburb/town/locality	DECLARATION by payee: I declare that the information I have given is true and correct. Signature Date	
State/territory Postcode	You MUST SIGN here	
	There are penalties for deliberately making a false or misleading statement.	
Once section A is completed and signed, give it to your payer to completed.	elete section B.	
Section B: To be completed by the PAYER (if you are n		
1 What is your Australian business number (ABN) or withholding payer number? 9 4 5 7 3 7 4 7 7 0 4	4 What is your business address? POBOX336	
2 If you don't have an ABN or withholding payer number,		
have you applied for one? Yes No No	Suburb/town/locality SOUTHMELBOURNE State/territory Postcode	
3 What is your legal name or registered business name (or your individual name if not in business)?	VIC 3205	
NETWEALTH	5 Who is your contact person?	
SUPERANNUATION	Business phone number 0 3 9 6 5 5 1 3 0 0	
MASTER FUND		
DECLARATION by payer: I declare that the information I have given is true and correct. 6 If you no longer make payments to this payee, print X in this box.		
Signature of payer Date Day Month Year	Return the completed original ATO copy to: Australian Taxation Office PO Box 9004 PENRITH NSW 2740 IMPORTANT See next page for: payer obligations lodging online.	
There are penalties for deliberately making a false or misleading statement.		

Payer information

The following information will help you comply with your pay as you go (PAYG) withholding obligations.



Is your employee entitled to work in Australia?

It is a criminal offence to knowingly or recklessly allow someone to work, or to refer someone for work, where that person is from overseas and is either in Australia illegally or is working in breach of their visa conditions.

People or companies convicted of these offences may face fines and/or imprisonment. To avoid penalties, ensure your prospective employee has a valid visa to work in Australia before you employ them. For more information and to check a visa holder's status online, visit the Department of Immigration and Border Protection website at immi.gov.au

Payer obligations

If you withhold amounts from payments, or are likely to withhold amounts, the payee may give you this form with section A completed. A TFN declaration applies to payments made after the declaration is provided to you. The information provided on this form is used to determine the amount of tax to be withheld from payments based on the PAYG withholding tax tables we publish. If the payee gives you another declaration, it overrides any previous declarations.

Has your payee advised you that they have applied for a TFN, or enquired about their existing TFN?

Where the payee indicates at question 1 on this form that they have applied for an individual TFN, or enquired about their existing TFN, they have 28 days to give you their TFN. You must withhold tax for 28 days at the standard rate according to the PAYG withholding tax tables. After 28 days, if the payee has not given you their TFN, you must then withhold the top rate of tax from future payments, unless we tell you not to.

If your payee has not given you a completed form

- notify us within 14 days of the start of the withholding obligation by completing as much of the payee section of the form as you can. Print 'PAYER' in the payee declaration and lodge the form - see 'Lodging the form'.
- withhold the top rate of tax from any payment to that payee.



For a full list of tax tables, visit our website at ato.gov.au/taxtables

Lodging the form

You need to lodge TFN declarations with us within 14 days after the form is either signed by the payee or completed by you (if not provided by the payee). You need to retain a copy of the form for your records. For information about storage and disposal, see below.

You may lodge the information:

- online lodge your TFN declaration reports using software that complies with our specifications. There is no need to complete section B of each form as the payer information is supplied by your software.
- by paper complete section B and send the original to us within 14 days.



For more information about lodging your TFN declaration report online, visit our website at ato.gov.au/lodgetfndeclaration

Provision of payee's TFN to the payee's super fund

If you make a super contribution for your payee, you need to give your payee's TFN to their super fund on the day of contribution, or if the payee has not yet quoted their TFN, within 14 days of receiving this form from your payee.

Storing and disposing of TFN declarations

The TFN guidelines issued under the Privacy Act 1988 require you to use secure methods when storing and disposing of TFN information. You may store a paper copy of the signed form or electronic files of scanned forms. Scanned forms must be clear and not altered in any way.

If a payee:

- submits a new TFN declaration (NAT 3092), you must retain a copy of the earlier form for the current and following financial year.
- has not received payments from you for 12 months, you must retain a copy of the last completed form for the current and following financial year.

Penalties

You may incur a penalty if you do not:

- lodge TFN declarations with us
- keep a copy of completed TFN declarations for your records
- provide the payee's TFN to their super fund where the payee quoted their TFN to you.





Client Directed – General Advice Declaration Netwealth Super Accelerator Account

This Declaration of "General Advice" is based on the Netwealth Super Accelerator Product Disclosure

I/We Acknowledge that I/we request that Sapient Financial Solutions Pty Ltd ABN 76 165 960 645 place/arrange on my/our behalf the Netwealth Super Accelerator Account dated 2nd April 2015 and Netwealth Insurance dated 1st February 2017 (**Financial Product**) which is of my/our own choosing.

I/we confirm we were provided the "General Advice Warning" (below) and understood this before any general advice was provided to me/us.

General Advice Warning

(insert full address / state / postcode)

"This General Advice Warning is issued by Sapient Financial Solutions Pty Ltd, Corporate Authorised Representative of Australian Financial Services Licence No 434776. This information might contain general advice, which is provided without regard to any investor's individual objectives, financial situation or needs. It is not specific advice for any particular investor and is not intended to be passed on or relied upon by any person. Before making any decision about the general advice provided, you should consider the appropriateness of the general advice presented, having regard to your objectives, financial situation and needs. Any indicative information and assumptions used may change without notice to you, particularly if based on past performance. Further, you should read the Product Disclosure Statement relative to this advice before a decision is made".

I/we wish to confirm that only "General Advice" was sought by me/us from Sapient Financial Solutions and its Representatives in relation to arranging the implementation of this financial product on my/our behalf and that this information was in no way interpreted as financial advice.

I/we have read and understand the PDS and Insurance Guide, including the investment structure/s, risk, insurance options and the fee structures in place for the Financial Product as outlined in the PDS and Insurance Guide.

I/we confirm the advice provided to me was "General Advice" only and I/we confirm no recommendation or personal advice was provided by Sapient Financial Solutions or its Representatives to me/us. At no time has the Sapient Financial Solutions' Representative stated, recommended or inferred that the Financial Product may be appropriate for me/us, or that they have considered my personal objectives, financial situation and needs.

I/We understand that by not seeking personal financial planning advice regarding the appropriateness of the Financial Product that I/we risk making a decision which may not be suitable for my/our financial needs.



I/We understand that I/we should obtain independent financial planning advice and professional taxation advice as to the suitability of the Financial Product having regard to my/our individual objectives, financial situation and particular needs. I/we also understand by not doing so I/we risk making a decision which may not be suitable for my/our individual objectives, financial situation and particular needs.

I/We understand that (a) Sapient Financial Solutions Pty Ltd ABN 76 165 960 645 is a corporate authorised representative of Instreet Investment Limited ABN 44 128 813 016 AFSL No. 434776 and Thomas Schwager & Jason Bibby are individual authorised representatives under the same AFSL; and (b) Instreet Investment Limited is responsible for the financial services provided by each of you to us.

I/we confirm that all examples and illustrations used were for education purposes only and that these examples and illustrations were not used in any way to influence my/our decision.

After consideration of the appropriateness of this investment for my/our personal circumstances I/we chose to engage Sapient Financial Solutions for the implementation of this account for the sum of approximately \$.....

Superannuation Rollover & Future Contributions

I/we approve Sapient Financial Solutions Pty Ltd to facilitate the Rollover of my existing Superannuation monies to Netwealth Super Accelerator, as listed below:

	Member Number	Super Fund Name	
1			
2			
3			

I/we also understand that the value of my Superannuation investments will fluctuate between Rollover notification and investment into my new Super Fund.

Insurance Rollover

I/we understand Netwealth Super Accelerator has numerous options regarding insurances. I/we choose to exercise the following option with regard to insurance: (I/we have circled Yes, No or Not Applicable (NA))

- i) Transfer my current insurance policies within my existing Superannuation account into a Netwealth Super Accelerator Account. Yes / No / NA
- ii) I will engage a 3rd Party Financial Planner to provide personal insurance advice Yes / No / NA
- iii) If "Yes" above (ii) I approve Sapient Financial Solutions Pty Ltd to release my personal information to the 3rd Party Financial Planner to provide personal insurance advice (if applicable).

Yes / No / NA

- iv) I choose not to have insurance within my Superannuation and I understand the associated risks of not having insurance.

 Yes / No / NA
- v) I already have the appropriate insurances in place

Yes / No / NA



vi) Have Sapient Financial Solutions facilitate the following insurances;

Insurance Type		Cover Required
Life Insurance	Yes/No	\$
Total Permanent Disability	Yes/No	\$
Salary Continuance/ Income Protection Insurance	Yes/No	\$

I/we understand that a full rollover of my Superannuation will cancel any insurance that I may currently hold with my existing Superannuation provider(s).

Should I/we choose to rollover my insurance as directed in this Form, I understand this will create a new insurance policy with Netwealth.

Investment Decisions - Share/ Managed Fund Transactions

I/we understand Netwealth Super Accelerator have numerous investment options available. I choose to exercise the following option with regard to the investment options: (I/we have circled Yes, No or Not Applicable (NA))

Share Trading including Online Internet Share Trading Managed Investments

Yes / No / NA Yes / No / NA

I/we understand to execute the purchase or sale of an investment I can place these instructions originally on the Netwealth Super Accelerator Application Form; or after set up via Phone; or over the Internet for direct equities (Shares).

I/we understand and accept full responsibility for my/our decision to invest in the Financial Product.

I/we understand and accept that Sapient Financial Solutions and Instreet Investment Limited accepts no responsibility for the quality and/or likely future performance of this financial product.

I/we agree that Sapient Financial Solutions may collect, use and store my /our personal information for the purpose of processing my /our Application, managing the investments and complying with the relevant laws in accordance with Sapient Financial Solutions Privacy Policy, a copy of which can be provided on my / our request. Such information may include but is not limited to Tax File Numbers ("TFNs"), Bank Account details, Drivers' Licence and Passport information. I /we also understand that I /we can access the personal information Sapient Financial Solutions holds about me / us.

I/we agree that I/we have received the following documents:

- Sapient Financial Solutions Financial Service Guide Version 1
- Advisor Profile for Thomas Schwager or Jason Bibby Version 1
- Netwealth Super Accelerator PDS dated 20th July 2017
- Netwealth Insurance Guide dated 1st February 2017

Signature Applicant 1	Signature <u>Advisor</u> / <u>Witness</u>
Print Name & Title (e.g. Director)	Print Name & Title (e.g. Director)

Date Address