



DISTRIBUTION IS RESTRICTED TO WHOLESALE CLIENTS ONLY

Application Form

Individual Investor/ Sole Trader/ Joint Investor

Issued Date: 30 September 2024

Use this Application Form if you wish to invest in the fund(s) listed in **Section 11**.

Ironbark Asset Management (Fund Services) Limited ('Ironbark') (ABN 63 116 232 154 AFSL 298626) is the responsible entity of the fund(s). Infinity Asset Management Pty Ltd ('Infinity') is responsible for providing client services for the fund(s).

Each person should obtain and read the Information Memorandum ('IM' or 'disclosure documents') before making a decision about whether to make an investment into the fund(s). You can access a copy of the current disclosure documents, any updated information, and the Application Form free of charge by contacting Infinity on 1300 847 434 by emailing contact@infinityassetmanagement.com.au. Information in the disclosure documents may change from time to time, and Ironbark will update this information by updating the relevant document.

Checklist

Before posting State Street Australia Ltd (the 'Unit Registry') your Application Form, please ensure you have:

- Read the current disclosure documents and any incorporated information and any disclosure update notices for the relevant fund(s).
- Completed this Application Form in full.
- Provided the required investor identity verification documents as outlined in Section 10.
- If paying by electronic funds transfer, ensure the application monies are transferred at the same time as lodging your Application Form, referencing your investor name in the payment description in Section 12.
- Read the declaration and have provided all relevant signatures in Section 14.

Contact details

If you have any questions regarding this Application Form, please contact Infinity on 1300 847 434 or email contact@infinityassetmanagement.com.au.

Mail your completed Application Form with wet ink signature(s) and supporting identity verification documents to validate your identity to the Unit Registry.

Unit Registry Mailing Information:

Ironbark Asset Management (Fund Services) Limited C/- State Street Australia Ltd - Unit Registry Level 14, 420 George Street Sydney NSW 2000

Privacy Collection Notice: When you provide information or instructions to Ironbark or Ironbark's service providers or delegates, Ironbark and Ironbark's service providers or delegates will be collecting personal information about you. This information is needed to facilitate, administer, and manage your investment, and to comply with Australian taxation laws and other laws and regulations. Otherwise, your application may not be processed or Ironbark and Ironbark's service providers or delegates will not be able to administer or manage your investment. You should refer to the Ironbark Privacy Policy for more detail about the personal information that Ironbark collects and how Ironbark collects, uses and discloses your personal information which is available on the Ironbark website at www.ironbarkam.com/privacy-policy/.

Terms and conditions for collection of Tax File Numbers ('TFN') and Australian Business Numbers ('ABN'): The collection of TFN and ABN information is authorised and its use and disclosure strictly regulated by tax laws and the Privacy Act. Investors must only provide an ABN instead of a TFN when the investment is made in the course of their enterprise. You are not obliged to provide either your TFN or ABN, but if you do not provide either or claim an exemption, we are required to deduct tax from your distribution at the highest marginal tax rate plus Medicare levy to meet Australian taxation law requirements. For more information about the use of TFNs for investments, contact the enquiries section of your local branch of the Australian Taxation Office. Once provided, your TFN will be applied automatically to any future investments in the fund(s) where formal application procedures are not required (e.g. distribution reinvestments), unless you indicate, at any time, that you do not wish to quote a TFN for a particular investment. Exempt investors should attach a copy of the certificate of exemption. For super funds or trusts list only the applicable ABN or TFN for the super fund or trust.

TFN exemption codes:

- Investments held by pension and benefit recipients please write the full name of N Non-residents please provide your country of the benefit you receive.
- Entities not required to lodge an income tax return please provide the reason as **D** Do not wish to quote TFN. to why the entity does not have to lodge an income tax return.
- residence for tax purposes.

X Other exemption – please provide another reason for your exemption.

Application Form: Individual Investor/ Sole Trader/ Joint Investor

PLEASE USE BLOCK LETTERS TO COMPLETE THIS FORM

1. Investment details	
Please indicate (X) if this is a new investment and you:	
Do not have an existing account for another investmen	nt with the same Unit Registry (Please proceed to Section 2)
Do have an existing account for another investment wit	h the same Unit Registry
Refer to Section 11 for the list of applicable Funds that share the same	e Unit Registry, State Street Australia Ltd.
Link existing account to this application	
	t, please provide your account information below. Please note that me and must be administered by the same Unit Registry as the new
Existing account name:	
Existing unit holder code:	
If any of your information has changed since your prior investm If there has been no change to your investor details, please pro 2. Investor type	
Please indicate (X) your investor type:	
Individual Investor	
Sole Trader	
Joint Investor	
3. Investor details	
3A. Individual Investor or Sole Trader	
Surname:	
Full give name(s):	
Title (Mr /Mrs /Miss /Ms):	Date of birth:
Business name of Sole Trader (if applicable):	ABN:
TFN:	Tax Exemption*:
*I acknowledge that should I choose not to provide my ABN, To distributions at the highest marginal tax rate.	FN or specific exemption, then tax will be deducted from my
Non-residents: If you are an overseas investor eligible to inve	est in the fund(s), please indicate:
Country of residence for tax purposes:	
Country of citizenship:	

Contact details				
Telephone (home):		_ Telephone (work)	:	
Mobile:		_ Email address:		
Primary address (cannot be a P	O Box)			
C/- (if applicable):				
Street number and name:				
Suburb:		_ State:		Postcode:
Country:				
Postal address				
Is the postal address the same as	your primary address?			
Yes, postal address is the	e same as primary	No (Please con	nplete below)	
C/- (if applicable):				
Street number and name: _				
Suburb:		State:		Postcode:
Country: _				
3B. Joint Investor				
Complete this section if there is a	joint investor/owner.			
Surname: _				
Full give name(s):				
Title (Mr /Mrs /Miss /Ms):		Da	ate of birth:	
TFN:		Та	x Exemption*:	
*I acknowledge that should I chood distributions at the highest marginal		TFN or specific exemp	tion, then tax w	vill be deducted from my
Non-residents: If you are an over	seas investor eligible to in	vest in the fund(s), plea	se indicate:	
Country of residence for tax purpo	ses:			
Country of citizenship				
Contact details				
Telephone (home):		Telephone (work): _		
Mobile:		Email address:		

Primary address (cannot be a PO Box)		
Is the residential address for Joint Investor 2 th	ne same as the primary address as .	Joint Investor 1?
Yes, primary is the same as Investor 1	1 (Please proceed to Section 4)	No (Please provide below)
C/- (if applicable):		
Street number and name:		
Suburb:	State:	Postcode:
Country	-	
3C. Signing authority for Joint Investors		
Please indicate (\mathbf{X}) the signing requirements for	or future instructions (e.g. withdrawa	als, change of account details etc.)
All joint investors must sign		
Only one investor required to sign		
		structions in relation to an investment in the fund(s investment, including changes to account details
4. Bank account details		
4A. Bank account details (if an Australian fi	nancial institution)	
	lit any withdrawal proceeds and dist	tributions (if elected to be paid to a bank account)
		yments are allowed. By providing your nominated uture transaction requests that you make until you
Warning: We are not liable for loss of funds sho	ould you provide incorrect payment	information.
Australian financial institution:		
Account name:		
Branch number (BSB):	Ac	ccount number:
4B. Bank account details (if an international	I financial institution)	
For Ironbark to make a payment in Australian d bank account below.	dollar denominated currency to an in	nternational financial institution, please nominate a
Intermediary bank name:		Intermediary BSB:
Beneficiary bank name, and address or BIC/SWIFT Code:		
Account number of beneficiary bank at intermediary bank:		
Beneficiary name(s):		
Account number of beneficiary at beneficiary bank:		

5. Source of application monies (required) Please indicate (X) the source of the application monies being invested: Salary Savings Financial Investment income Business activity One-off payment (e.g. matured investment, court settlement, redundancy, inheritance, gifts) Real Estate (e.g. shares, property) One-off payment (e.g. matured investment, court settlement, redundancy, inheritance, gifts) Borrowed monies Charitable donations 6. Financial adviser (complete if applicable) I am a financial adviser completing this Application Form on behalf of the investor(s). I have provided personal financial advice to the investor(s) named in this Application Form, taking into account their personal needs, objectives, financial and taxation situation (having regard to the nature and any complexities of the fund(s), have complied with all requirements of the Corporations Act and applicable law in relation to this investment by the investor(s) and have provided the investor(s) with all documents required by applicable law. All details in this Application Form are true and correct and I indemnify Ironbark against any liabilities arising from acting on any of the information provided by me in connection with the investor(s) application which is false or misleading. Name of the advisory firm: Adviser group AFSL number: Name of the dealer group: Name of the adviser: Telephone (business hours): Email address of the adviser: Email address of the advisory firm: **Customer Identification Procedure** Following completion of the customer identification procedure, please indicate (X): I have provided the Unit Registry with the appropriate customer Identification documents on this investor(s) which meets the AML/CTF Act. OR I have not provided the Unit Registry with the customer identification documents on this investor(s) which meets the AML/CTF Act. I will retain and agree to provide them to Ironbark on request. If I cease being the financial adviser for the investor(s), I will notify the Unit Registry at that time. Adviser's Signature: (Wet signature required) Date:

7. Authorised representative, Agent or Power of Attorney (complete if applicable)
Complete this section if you are completing this Application Form as an agent under a direct authority such as a Power of Attorney ('POA'). You must also complete the section relevant to the investor(s) that you are acting on behalf of.
I/we would like to appoint an authorised representative or agent to operate on this account.
OR
I am an agent under a Power of Attorney or the investor's legal or nominated representative, and have provided/confirm:
 The POA document is an original or certified copy; The POA document has been signed by the investor(s); The POA document is current and complete; and The POA document permits the attorney/agent (you) to transact on behalf of the investor(s)
The appointed Power of Attorney or nominated authorised representative can do the following things in respect of my/our investments in the fund(s):
 Change my/our account details relating to my/our investment in the fund(s); Obtain details of my/our investments in the fund(s); Issue investment and/or withdrawal instructions on my/our behalf relating my/our investments in the fund(s); and Issue instructions as to how my/our investment distributions are to be paid.
The Attorney declares that they have not received notice of revocation of that Power of Attorney (a certified copy of the Power of Attorney is required to be submitted with the Application Form).
The investor(s) acknowledge and agree, without limitation, to release, discharge, and agree to indemnify Ironbark from and against any and all losses, liabilities, actions, proceedings, account claims and demands arising from Ironbark acting on the instructions of my/our authorised representatives, agents and/or nominees.
Full name of Authorised representative/Agent/POA:
Title of role in relation to the investor(s) ¹
Signature(s) of Authorised representative/Agent/POA: (Wet signature required)
¹ Role in relation to the investor can be but not limited to: Accountant, margin lender, legal guardian, executor etc.
8. Global tax reporting requirements (CRS/FATCA)
Information about investors that are foreign tax residents must be reported to the Australian Taxation Office ('ATO') in accordance with international tax reporting standards and laws to which Australia is subject. These include the OECD Common Reporting Standard ('CRS') and United States Foreign Account Tax Compliance Act ('FATCA'). If you require further information on Australia's obligations under CRS or FATCA, please visit the ATO website www.ato.gov.au .
Tax Residency rules differ by country. Whether an individual is a tax resident of a particular country is often (but not always) based on the amount of time a person spends in a country, the location of a person's residence or place of work. For the US, tax residency can be as a result of citizenship or residency.
A Tax Identification Number (' TIN ') is the number assigned by each country for the purposes of administering tax laws. This is the equivalent of a Tax File Number in Australia or Social Security Number in the US. If a TIN is not provided, please list one of the three reasons specified (A, B or C) for not providing a TIN.
Individual Investor 1 or Sole trader Tax information – please indicate with (X) for BOTH tax residency questions.
Yes No
Are you an Australian resident for tax purposes?
Are you a tax resident of another country?

	nt of a country other than Australia , please list all relevant countries b		provide your TIN or	equivalent below. If you are a tax resident of
Country 1:		TIN:		If no TIN, list reason A, B or C:
Country 2:		TIN:		If no TIN, list reason A, B or C:
Reason B - I have not be	of tax residency does not issue TINs to een issued with a TIN. of tax residency does not require the T			
Joint Investor Tax info	ormation – please indicate with (X) for BO	TH tax residency qu	uestions.
		Yes	No	
Are you an Australian ı	resident for tax purposes?			
Are you a tax resident	of another country?			
	nt of a country other than Australia , please list all relevant countries b		provide your TIN or	equivalent below. If you are a tax resident of
Country 1:		TIN:		If no TIN, list reason A, B or C:
Country 2:		TIN:		If no TIN, list reason A, B or C:
Reason B – I have not be Reason C – The country	of tax residency does not require the T	IN to be di	sclosed.	
9. Communicati	on elections (required fo	rinve	stor(s) and ad	viser)
Generally, all correspo	ndence regarding your investment	(includir	ng investor stateme	ents) will be sent to you via email.
	eferred email address for future co ser, agent if applicable).	rrespond	ence regarding your	investment (including the email address of
Email address 1:				
Email address 2:				
Email address 3:				
By providing my/our en		updated	disclosure documer	nts and confirmation of transactions and
If you would prefer to re	eceive communication by mail, plea	ase indica	ate (X):	
	r to receive communication by mail	to the po	ostal address provid	ed in Section 2
9A. Annual Financial	Report			
	port(s) for the fund(s) in which you ir communication preference below		re available from 30	September each year. To receive a copy,
I would like to	receive an electronic copy of the a	innual fin	ancial report(s)	
I would like to	receive a paper copy of the annua	ıl financia	ıl report(s)	
If no election is made, you	u can access a copy by contacting Infin	ity on 130	0 847 434. To change	your elected preference, you can contact Infinity.

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Ironbark may at any time convene a meeting of investo (X) your communication preference below:	rs to consider any matter, including resolutions for a fund. Please indicate
I would like to receive an electronic copy of the	e notice of meeting
I would like to receive a paper copy of the noti	ce of meeting
If no election is made, and we have a valid email address, an Ironbark.	electronic copy will be provided. To change your elected preference, you can contact
10. Investor identity verification	
If you are not lodging this application through a financia verification documents.	al adviser, you are required to provide certified copies of the identity
Please provide document(s) as listed under either	A or B.
A. A valid copy of one of the following documents:	
Australian driver's licence containing your photo	graph; or
Australian passport containing your photograph	and signature; or
A card issued under an Australian State or Terri	tory law containing your photograph and proof of age.
B. If you are unable to provide a document from A, Group 2 below:	please provide one document from Group 1 and one document from
Group 1	Group 2
A copy of one of the following documents:	The document must contain your full name and current residential address as shown in Section 3 of this Application Form.
	The document must contain your full name and current residential
A copy of one of the following documents:	The document must contain your full name and current residential address as shown in Section 3 of this Application Form.
A copy of one of the following documents: Australian birth certificate or birth extract; or	The document must contain your full name and current residential address as shown in Section 3 of this Application Form. A copy of one of the following documents issued to you: a notice or bill issued within the preceding three months from a local government body or utilities provider that records the
A copy of one of the following documents: Australian birth certificate or birth extract; or Australian citizenship certificate; or Pension or Health care card issued by Centrelink or Department of Veterans'	The document must contain your full name and current residential address as shown in Section 3 of this Application Form. A copy of one of the following documents issued to you: a notice or bill issued within the preceding three months from a local government body or utilities provider that records the provision of services to you, e.g.: council rates notice electricity bill
A copy of one of the following documents: Australian birth certificate or birth extract; or Australian citizenship certificate; or Pension or Health care card issued by Centrelink or Department of Veterans' Affairs.	The document must contain your full name and current residential address as shown in Section 3 of this Application Form. A copy of one of the following documents issued to you: a notice or bill issued within the preceding three months from a local government body or utilities provider that records the provision of services to you, e.g.: council rates notice electricity bill gas bill a letter or notice issued to you within the preceding 12 months from the ATO that records a debt or refund payable by or to you, e.g.: notice of assessment
A copy of one of the following documents: Australian birth certificate or birth extract; or Australian citizenship certificate; or Pension or Health care card issued by Centrelink or Department of Veterans' Affairs.	The document must contain your full name and current residential address as shown in Section 3 of this Application Form. A copy of one of the following documents issued to you: a notice or bill issued within the preceding three months from a local government body or utilities provider that records the provision of services to you, e.g.: council rates notice electricity bill gas bill a letter or notice issued to you within the preceding 12 months from the ATO that records a debt or refund payable by or to you, e.g.: notice of assessment
A copy of one of the following documents: Australian birth certificate or birth extract; or Australian citizenship certificate; or Pension or Health care card issued by Centrelink or Department of Veterans' Affairs. If you are a non-Australian resident and cannot proforeign passport, or similar travel document bear	The document must contain your full name and current residential address as shown in Section 3 of this Application Form. A copy of one of the following documents issued to you: a notice or bill issued within the preceding three months from a local government body or utilities provider that records the provision of services to you, e.g.: council rates notice electricity bill gas bill a letter or notice issued to you within the preceding 12 months from the ATO that records a debt or refund payable by or to you, e.g.: notice of assessment

Please note:

- documents are required to be certified copies of the original; documents such as passports, driver's licences and other cards that have an expiry date must not have expired; if any document is in a language other than English, then it must be accompanied by an English translation prepared by an accredited translator; and if any document is in a previous name, then it must be accompanied by evidence of the change of name (e.g. a marriage certificate).

Please see Section 10A for a list of who can certify the documents.

10A. Certification of investor identity documents

How to certify your documents

A certified copy is a document that has been certified as a true copy of an original document. To certify a document, take the original document and a photocopy to one of the people listed in the categories below and ask them to certify that the photocopy is a true and correct copy of the original document. That person will need to print their name, date and the capacity in which they are signing (e.g. postal agent, Justice of the Peace).

Sample wording:

I, [full name], a [category of persons listed below], certify that this [name of document] is a true and correct copy of the original.

[Signature and date]

Documents in a language other than English must be accompanied by an English translation prepared by an accredited translator.

Who can certify documents?

Financial corporations (bank, building society, credit union)	 Officer with two or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 1993 (Cth)) Finance company officer with two or more continuous years of service with one or more finance companies (for the purposes of the Statutory Declaration Regulations 1993 (Cth)) Officer with, or authorised representative of, a holder of an Australian financial services licence, having two or more continuous years of service with one or more licensees
Post office	 Permanent employee of the Australian Postal Corporation with two or more years of continuous service who is employed in an office supplying postal services to the public Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
JP	Justice of the Peace
Legal	 Person who is enrolled on the roll of the Supreme Court of a state or territory, or the High Court of Australia, as a legal practitioner (however described) Judge of a court Magistrate Chief executive officer of a Commonwealth court Registrar or deputy registrar of a court Notary public (for the purposes of the Statutory Declaration Regulations 1993 (Cth)) A person authorised as a notary public in a foreign country
Police	Australian police officer
Diplomatic service	 Australian consular officer Australian diplomatic officer (within the meaning of the Consular Fees Act 1955 (Cth))
Accountant	Member of the Institute of Chartered Accountants in Australia, Certified Practising Accountants (CPA) Australia or the National Institute of Accountants with two or more years of continuous membership

			Minimum	Investment	Distribution options (mark (X) one option per Fund) ¹	
Fund name	APIR code	IM Date	initial investment	Amount	Reinvest	Credit into nominated bank account
GLOBAL EQUITIES						
Infinity Private Assets Fund – Wholesale Class B	DAM8777AU	30/09/2024	\$ 100,000			

If the initial investment amount is made through a transfer, provide transfer form available on the website signed by both transferor and transferee.

12. Unit Registry mailing information and electronic funds transfer

When you transfer your investment amount, use your investor name as reference, and mail the form to the Unit Registry at the same time as transferring your application monies to mitigate a delay in opening your account.

Unit Registry details for mailing this Application Form and identity verification documents:

Ironbark Asset Management (Fund Services) Limited C/- State Street Australia Ltd – Unit Registry Level 14, 420 George Street Sydney NSW 2000

Payment method for the investment amount stated in Section 11:
Bank account to transfer application monies
Account Name: State Street Australia Limited ACF Ironbark Asset Management (Fund Services) Limited ATF Infinity Private Asse
Fund
Financial Institution: Westpac Banking Corporation
BSB: 032 143
Account Number: 896 963
Cheque - Cheques drawn on an Australian bank account should be made payable to 'Ironbark Asset Mgmt Apps Account'

Your distribution will be automatically reinvested in the fund(s) if you DO NOT indicate your preference to have your distribution directly credited to your nominated bank account.

13. Declaration and applicant(s) signature(s)

Please read the declarations below before submitting this application.

I/We declare/acknowledge that I/We:

- are 18 years of age or over and I am/we are eligible to hold units in the fund(s) issued by Ironbark in which I/we have chosen
 to invest;
- have received and have accepted this offer in Australia or, for applicable New Zealand Applicants, have read the terms of the
 offer and accepted the terms relating to New Zealand investors in the relevant disclosure documents;
- have received and read a copy of the relevant current disclosure documents and all information incorporated into these disclosure documents to which this Application Form applies;
- will be bound by the provisions of this Application Form at the date of signing and the terms of the relevant disclosure documents:
- agree that if all relevant information required by the Application Form is not provided, Ironbark may not be able to accept the
 application;
- agree that should I/we choose not to provide my ABN, TFN or specific exemption, then tax will be deducted from my
 distributions at the highest marginal tax rate (plus the Medicare levy, and any other levies we are required to deduct from time
 to time). Refer to TFN exemption codes on page 1;
- agree that joint applicants or signatories who allow either investors or signatories to give instructions in relation to an
 investment in the fund(s) will bind other investors or signatories for all transactions in connection with the investment, including
 changes to account details and transactions on the investment;
- agree that details provided to Ironbark in this Application Form and related documents are true and correct. In the event that
 these details change, Ironbark will be notified promptly in writing;
- agree to indemnify Ironbark against any liabilities arising from acting on information provided with this Application Form and related documents if unclear, false or misleading;
- agree and acknowledge that Ironbark may be required to act on any proposed transaction or activity as required for the purposes of AML/CTF Act or relevant laws;
- agree that if there is an financial adviser appointed, that the details regarding the investment can be provided to the financial
 adviser named in the Application Form, or anyone directly associated to the financial adviser's practice named in the
 Application Form;
- consent to the transfer of any personal information to external third parties including, but not limited to, fund administrators, fund investment manager(s), related corporate bodies and government agencies who are located in and outside Australia for the purpose of administering the products and services for which I/we have applied as permitted by law;
- agree that where Ironbark, in its sole discretion, determines that:
 - I/we are ineligible to hold units in a fund(s) or have provided misleading information in my/our Application Form; or
 - o I/we owe any amounts to Ironbark,
- then I/we appoint Ironbark as my/our agent to submit a withdrawal request in respect of all or part of the units in the fund(s);
- agree that Ironbark is not responsible for the delays in receipt of an Application Form caused by the postal service or by a
 delay in processing of payments by my/our financial institution;
- · agree that Ironbark is not liable for any loss or delay as a result of an electronic communication not received by Ironbark;
- agree and acknowledge that Investing in the fund(s) is subject to investment risk, including possible delays in repayment and loss of income and principal invested; and
- agree and acknowledge that Ironbark, any investment manager or any other person does not guarantee the performance of the fund(s), or the return and/or payment of capital and/or income.

The table below provides guidance on completing **Section 14**, 'Declaration and applicant(s) signature(s)' of the Application Form. Before signing the Application Form, please ensure you have read the declaration.

Type of investor	Signature required
Individual, Sole Trader and/or Joint Investors	Individual Investor; Sole Trader or each Joint Investor
Investment is made under Power of Attorney (POA)	Person holding Power of Attorney. In the case that POA document does not contain a sample of the POA's signature, please provide a certified copy of either the POA's driver's licence or passport containing a sample of their signature.

Signature 1	Signature 2
Signature: (Wet signature required)	Signature: (Wet signature required)
Date: Surname: Given name(s): Capacity: Director Company Secretary Primary Trustee (Individual)	Date: Surname: Given name(s): Capacity: Director Company Secretary Secondary Trustee (Individual)
COMPANY SEAL	