

CROMWELL PHOENIX PROPERTY SECURITIES FUND WHOLESALE UNITS TRANSFER FORM

Issued by Cromwell Funds Management Limited ABN 63 114 782 777 AFSL 333214

Transfer Form Information

Please read this important information on how to complete a Cromwell Transfer Form

The Transfer Form is to be used if you wish to transfer a Cromwell managed fund to another person or entity.

We do not accept copies or faxes. Return the original completed form to: Boardroom Pty Limited, GPO Box 3993, Sydney NSW 2001.

IMPORTANT: Transferee (Buyer) Information

Please ensure you read the PDS for the fund, as required by the Application Form.

FATCA/CRS

Cromwell is required to collect and report to the Australian Taxation Office (ATO) certain information about the tax residency of our unitholders. If you have not supplied Cromwell with your tax residency status previously, please do so by one of the following methods:

> Online via your registered InvestorServe Access -

Visit www.investorserve.com.au > My Details > FATCA-CRS Information

> Email or Post a FATCA/CRS Form - Call Cromwell's Investor Services Team on 1300 268 078 to obtain a copy of the Automatic Exchange of Information (AEOI) Form for you to complete and return.

Not providing this information to Cromwell may delay the processing of your transaction.

AML/CTF

If you have $\underline{\text{NOT}}$ invested in a Cromwell managed fund previously, please provide the following:

- 1. Transferee (Buyer) Information (Part 1);
- 2. Completed and signed the Transfer (Part 2); and
- 3. Relevant Cromwell Identification Form and attaching certified copies of identification documents.

Type of Entity	Forms to be completed
Individual / Joint Investors (each applicant must complete a form)	IDENTIFICATION FORM 1: Individual & Sole Traders Form
Australian Companies	IDENTIFICATION FORM 2: Australian Companies Form
Australian Regulated Trusts (including Self Managed Super Funds)	IDENTIFICATION FORM 3: Australian Regulated Trusts (including Self Managed Super Funds) Form
Unregulated Australian Trusts and Foreign Trusts (e.g. Family, Unit and Testamentary Trusts)	IDENTIFICATION FORM 4: Unregulated Australian Trusts and Foreign Trusts Form

Change of Trustees – Self Managed Super Funds

The following documents need to be provided with the Transfer Form

- Original certified copy of any/all Deeds of Amendment or Minutes of Meeting noting the change of trustees
- Cromwell Identification Form 3 Australian Regulated Trusts (including SMSFs)

For a change of trustee of an unregulated trust, please contact Cromwell's Investor Services Team on 1300 268 078.

Deceased Estates

The following documents need to be provided with the Transfer Form

- Original certified copy of Probate and attaching Will OR Letters of Administration;
- For each Executor or Administrator Original certified copy of driver's licence (current) OR Passport (that has not expired more than 2 years ago);
- Section 1071B Statement Form (if the registered address of the holding is not Queensland).

If Probate <u>**HAS NOT**</u> been granted or you have any questions, please contact Cromwell's Investor Services Team on 1300 268 078.

Correct format of Registerable Titles

Only legal entities are allowed to hold units in the Fund. Transfer Forms must be in the name(s) of natural person(s), companies or other legal entities acceptable to the Fund. At least one full given name and the surname are required for each natural person. The name of the beneficiary or any other non-registerable name may be included by way of an account designation if completed exactly as described in the example of correct forms of registerable title shown below.

Type of Investor	Correct format of Registerable Name	Incorrect format
Individual		
Use given names, not initials	John Alfred Smith	J A Smith
Company		
Use company name, not abbreviations. Director(s) names must be completed within the Applicant(s) Details section	ABC Pty Ltd	ABC P/L or ABC Co
Trust		
Use trustee(s) names	Sue Smith	Sue Smith Family
Use name of the trust in the account designator section	Sue Smith Family Trust	Trust Sue Smith
Superannuation Funds		
Use name of trustee of fund	Jane Smith Pty Ltd	Jane Smith Super- Fund
Use name of fund in the account designator section	Jane Smith Super Fund	Jane Smith Pty Ltd
Deceased Estates		
Use executor(s) names	Sue Lennon	Estate of the Late-
Use name of the deceased in the account designator section	Estate of the Late Jon Lennon	Jon Lennon
A Minor (less than 18 years old)		
Use trustee(s) personal names	Sue Smith	Junior Smith
Use name of the minor in the account designator section	Junior Smith	Sue Smith





Please complete this form using BLACK INK and write clearly within the boxes in CAPITAL LETTERS. Mark appropriate answer boxes with a tick (\checkmark).

Any alterations made to this form MUST be initialled by both the Buyers(s) and the Seller(s). The use of correction fluid or tape renders the form invalid. Any increases to the holding amount being transferred is not acceptable, even if initialled.

Transferee (Buyer) Information - Part 1

Please complete the below sections if you have NOT invested in a Cromwell managed fund previously or for a change of Trustee/s. If you are a current investor in a Cromwell managed fund proceed to Part 2.

PART 1.1 CONTACT DETAILS - (MUST NOT BE ADVISER DETAILS)

Surname			
Title	Full Given Name(s)		
Address			
City	State Postcode		
Phone	After hours -		
Mobile	Facsimile -		
Email			
I	By providing this email address, you agree to receive all communications, including transaction confirmations, statements, reports and other notifications required by the Corporations Act, by email. From time to time we may still need to send correspondence by post. Contact us if you would like to receive a hard copy of the annual report in the post.		
Would you	like to be advised of other offers from Cromwell? Yes 🗌 No 🗌		
	Title Address City Phone Mobile Email		

TAX INFORMATION - (MUST NOT BE ADVISER DETAILS)

Tax File Number	Investor Name
Tax File Number	Investor Name
Individual and Joint Investors only	
ABN Number	
If exempt from providing a TFN and/or AE	3N, please provide the reason for exemption

PART 1.3

PART 1.2

DISTRIBUTION PAYMENTS

You are required to provide your bank account details for payment of	Account Name			
distributions. Distributions will not be paid by cheque. We can only accept	Financial Institution			
Australian bank account details. If no bank account details are provided,	BSB		Account Number	
your distributions will be reinvested.	If you would like your o	distribution reinvested as add	litional units please select or	ne of the following options:
This account must be in the investors name. Payment to a third party is not permitted.	Full Participation	Partial Participation	Specify the number of securities or percentage you would	
			like to participate	

If you select Partial Participation in the distribution reinvestment please ensure you provide bank account details for the cash portion of your distribution.

ADVISER DETAILS

Adviser given name		
Adviser surname		
Adviser company (if a	pplicable)	
Adviser Phone		
Adviser email		
Dealer Group Name		AFSL No:
ADDITIONAL INV	ESTMENT ENQUIRER	

PART 1.5

<i>If you would like someone other than the Contact or your Adviser</i>	Given name	
<i>to be able to enquire about this investment, please provide us</i>	Surname	
with their details here.	Date of birth	Company (if applicable)

PART 1.6

Please ensure you also provide the following documents, the relevant Cromwell Identification Form/s and attaching certified copies of identification documents.

Type of Entity	Forms to be completed
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CROMWELL PHOENIX PROPERTY SECURITIES FUND WHOLESALE UNITS - TRANSFER FORM



PART 2	TRANSFER DETAILS				
	Cromwell managed fund name	Cromwell managed fund name			
	Cromwell Phoenix Property Securities Fu	nd - Wholesale Units			
	Select one of the below options				
	Full investment amount; or				
	Quantity in dollars \$				
	Please write the quantity of units or dollar a	amount in words			
PART 3	TRANSFEROR ("SELLER") DETA	ILS			
Investor referen number must be					
		Investor reference number			
PART 4	TRANSFEREE ("BUYER") DETAIL	S			
If you have a cu					
holding in a Cro Managed Fund,					
provide us with investor referen	your	Investor reference	$\overline{\Box}$		
number.					
	OT invested in a Cromwell managed fund previo tified copies of identification documents referred	ously, please provide a relevant Cromwell Identification Form and d to in Part 1.6.			
PART 5	TRANSFEROR ("SELLER") AUTHO		7		
		ration, hereby transfer to the Transferee(s) the units specified above standing in my/our name(s)			
I/We have not rec I/We acknowledge	that I/We have taken My/Our own advice in relation to the transfe as Responsible Entity of the relevant investment. Cromwell Funds	ny) by death of the grantor or otherwise, under which this transfer is signed (if applicable r of the above units and that Cromwell Funds Management Limited has agreed to process the transf Management Limited has neither set nor determined the value at which the units are to be transf	ransfer		
	SIGNATURE A	SIGNATURE B			
Date		Date / / /			
Name		Name			
If a Company Of	Ifficer or Trustee, you MUST specify your title:	If a Company Officer or Trustee, you MUST specify your title:			
Director	Sole Director and Company Secretary	Director Company Secretary			
Trustee	Other	Trustee Other			
PART 6	TRANSFEREE ("BUYER") AUTHO				
I/We have not rec I/We acknowledge in its capacity only a I/We acknowledge t Constitution, includ Management Limite	ceived any notice of revocation of the Power of Attorney (if an that I/we have taken my/our own advice in relation to the transfer as Responsible Entity of the relevant investment. Cromwell Funds that by signing this form I/we have read the most recent Product D ding the Terms of Issue of Wholesale Units (each as amended fr	subject to the conditions on which the transferor(s) held the units at the date on which the form is si ny) by death of the grantor or otherwise, under which this transfer is signed (if applicabl of the above units and that Cromwell Funds Management Limited has agreed to process the tra Management Limited has neither set nor determined the value at which the units are to be transf isclosure Statement (PDS) for the investment. I/We agree to be bound by the PDS and the investm om time to time), and acknowledge that neither the Cromwell Property Group nor Cromwell lent or the repayment of capital. I/We further acknowledge that an investment is subject to inves	nie). ransfer sferred. ment's Funds		
	SIGNATURE A	SIGNATURE B			
Date		Date/ /			
Name		Name			
. ,	Ifficer or Trustee, you MUST specify your title:	If a Company Officer or Trustee, you MUST specify your title:			
Director	Sole Director and Company Secretary	Director Company Secretary Trustee Other			
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