

Application Form

Aberdeen Standard International Equity Fund



Before completing this Application Form, please read the Product Disclosure Statement (PDS) and Additional Information Booklet (AIB) issued 5 October 2021.

All clients applying for a new abrdn account must also complete an Identification Form for the purposes of Anti-Money Laundering and Counter-Terrorism Financing (AML/CTF) laws.

The PDS, AIB and Identification Form can be viewed or downloaded at <https://www.abrdn.com/au>. Alternatively you can request a copy be sent to you by contacting the abrdn Client Service team on 1800 636 888 (Australian Investors), 0800 446 439 (if calling from New Zealand) or + 61 2 9950 2853 (if calling from outside Australia or New Zealand).

This Application Form is not to be used for any order you wish to make through the mFund Settlement Service ('mFund'). If you wish to make an application into the Fund through mFund, please refer to section 8 'How to apply' of the PDS.

Post initial and additional investment applications to:

abrdn Australia Limited
C/- Citi Unit Registry Australia
GPO Box 764
Melbourne VIC 3001

Fax additional investment applications to:

abrdn Australia Limited
C/- Citi Unit Registry Australia
1300 101 688 (Australia Investors)
+61 1300 101 688 (International investors)

If making an initial investment in the Fund online, please follow the lodgement instructions on our website, www.abrdn.com/au.

Please note: Initial Application Forms and Identification Forms sent by fax will not be accepted.

Please print in blue or black pen within the boxes in CAPITAL LETTERS. Mark appropriate boxes with an

1. Do you have an existing investment in the abrdn Funds?

No, go to section 3 onwards. All clients applying for a new abrdn account must also complete an Identification Form for the purposes of AML/CTF laws.

Yes, the existing investor number is

Please create a new account number for this investment. (If you are a current investor in this Fund and no selection is made, we will add this investment to the existing account number for this Fund).

If you have an existing investment in one of the abrdn Funds and none of the following details have changed since your initial investment - your investor details (including tax details), organisation type (if applicable), organisation's tax status classification (if applicable), or contact details - please complete section 4 onwards. If your details have changed, please go to section 3.

2. Do you have an existing investment in the abrdn Funds?

Are you a Professional Investor? (defined in the Product Disclosure Statement)

Are you investing in the Fund on the recommendation of your financial adviser? (complete adviser details in section 9)

If neither of the above apply, please contact Client Services team for a Target Market Questionnaire before proceeding with this application form. You will not be able to invest if we determine you are not within the target market for the Fund.

3. Investor details

3.1. Investor 1/Trustee 1/Director 1

Surname

Given name(s)

Title Mr Mrs Miss Ms Dr Date of birth / /

Your main country of residence if not Australia or New Zealand

Industry

Tax File Number or reason for exemption

ACN/ABN/ARBN

Please answer both tax residency¹ questions:

Are you a tax resident of Australia? Yes No

Are you a tax resident of another country? Yes No

If you are a tax resident of a country other than Australia, please provide your tax identification number (TIN) or equivalent below. If you are a tax resident of more than one other country, please list all relevant countries below.

A 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 a 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.

1. Country TIN If no TIN, list reason A, B or C

2. Country TIN If no TIN, list reason A, B or C

3. Country TIN If no TIN, list reason A, B or C

If there are more countries, provide details on a separate sheet and cross this box

Reason A The country of tax residency does not issue TINs to tax residents

Reason B You have not been issued with a TIN

Reason C The country of tax residency does not require the TIN to be disclosed

¹Tax Residency rules differ by country. Whether you are a tax resident of a particular country is often (but not always) based on the amount of time you spend in a country, the location of your residence or place of work. For the US, tax residency can be as a result of citizenship or residency.



3.2. Investor 2/Trustee 2/Director 2 (if applicable)

Surname

Given name(s)

Title Mr Mrs Miss Ms Dr Date of birth / / ---

Your main country of residence if not Australia or New Zealand

Industry

Tax File Number or reason for exemption

ACN/ABN/ARBN

Please answer **both** tax residency² questions:

Are you a tax resident of Australia? Yes No

Are you a tax resident of another country? Yes No

If you are a tax resident of a country other than Australia, please provide your tax identification number (TIN) or equivalent below. If you are a tax resident of more than one other country, please list all relevant countries below.

A 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 a 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.

1. Country	<input type="text"/>	TIN	<input type="text"/>	If no TIN, list reason A, B or C	<input type="checkbox"/>
2. Country	<input type="text"/>	TIN	<input type="text"/>	If no TIN, list reason A, B or C	<input type="checkbox"/>
3. Country	<input type="text"/>	TIN	<input type="text"/>	If no TIN, list reason A, B or C	<input type="checkbox"/>

If there are more countries, provide details on a separate sheet and cross this box

- Reason A** The country of tax residency does not issue TINs to tax residents
- Reason B** You have not been issued with a TIN
- Reason C** The country of tax residency does not require the TIN to be disclosed

3.3 Organisation type (if applicable)

Organisation type Self-Managed Super Fund Trust Company Partnership Other entity

Name of company/partnership/trustee/other entity

Name of superannuation fund/trust

Principal business/trust activity

Country established, if not Australia or New Zealand

ACN/ABN/ARBN Tax File Number

3.4 Organisation's tax status classification

Note: Regulated super funds (Self-Managed Superannuation Funds, APRA regulated super funds, government super funds or pooled superannuation trusts) are not required to complete this section and can proceed to section 4.

Collection of tax information in accordance with the (1) United States Foreign Account Tax Compliance Act as amended (FATCA); and (2) laws relating to Australia's implementation of the OECD Standard for Automatic Exchange of Information in Tax Matters / Common Reporting Standards as amended Common Reporting Standard (CRS).

Cross one of the Tax Status boxes below (if the Company / Trust / Partnership is a Financial Institution, please provide all the requested information below).

²Tax Residency rules differ by country. Whether you are a tax resident of a particular country is often (but not always) based on the amount of time you spend in a country, the location of your residence or place of work. For the US, tax residency can be as a result of citizenship or residency.



3.4.1 Tax Status

A Financial Institution (A custodial or depository institution, an investment entity or a specified insurance company for FATCA / CRS purposes)

Provide the Company's / Trust's / Partnership's Global Intermediary Identification Number (GIIN), if applicable

If the Company / Trust / Partnership is a Financial Institution but does not have a GIIN, provide its FATCA status (select ONE of the following statuses)

Deemed Compliant Financial Institution

Excepted Financial Institution

Exempt Beneficial Owner

Non-reporting IGA Financial Institution (if the Trust is a Trustee-Documented Trust, provide the Trustee' GIIN)

Nonparticipating Financial Institution

US Financial Institution

Other (describe the Company's/Trust's/Partnership's FATCA status in the box provided)

Is the Financial Institution an Investment Entity located in a Non-Participating CRS Jurisdiction³ and managed by another Financial Institution?

Yes No

If the answer is No, Please go to section 4.

If the Financial Institution is a Company and answers 'Yes', proceed to section 3.4.2 (Foreign Beneficial Owners).

If the Financial Institution is a Trust or Partnership and answers 'Yes', proceed to section 3.4.3 (Foreign Controlling Persons).

Australian Public Listed Company, Majority Owned Subsidiary of an Australian Public Listed company or Australian Registered Charity

(Public listed companies or majority owned subsidiaries of Australian listed companies that are not Financial Institutions as described above or a company that is an Australian Registered Charity).

If you cross this box, please proceed to section 4.

A Public Listed Company, Majority Owned Subsidiary of a Public Listed Company, Governmental Entity, International Organisation or Central Bank

If you cross this box, please proceed to section 4.

Australian Registered Charity or Deceased Estate

If the Trust is an Australian Registered Charity or Deceased Estate, please proceed to section 4.

An Active Non-Financial Entity (NFE)⁴

If the Company / Partnership is an Active NFE, please proceed to section 3.4.4 (Country of Tax Residency).

A Charity or an Active Non-Financial Entity (NFE)⁵

If the Company is a Charity or any Active NFE, please proceed to section 3.4.4 (Country of Tax Residency).

A Foreign Charity or an Active Non-Financial Entity (NFE)⁶

If the Trust is a Foreign (non-Australian) Charity or an Active NFE, please proceed to section 3.4.4 (Country of Tax Residency).

Other (Organisations that are not previously listed – Passive Non-Financial Entities)

If you are a Company and cross this box please proceed to section 3.4.2 (Foreign Beneficial Owners).

If you are a Partnership or Trust and cross this box please proceed to section 3.4.3 (Foreign Controlling Persons).

³CRS Participating Jurisdictions are on the OECD website at <http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/crs-by-jurisdiction>

^{4,5,6}Active NFEs include entities where, during the previous reporting period, less than 50% of their gross income was passive income (e.g. dividends, interests and royalties) and less than 50% of assets held produced passive income. For other types of Active NFEs, refer to Section VIII in the Annexure of the OECD 'Standard for Automatic Exchange of Financial Account Information' at www.oecd.org.



3.4.2 Foreign Beneficial Owners (individuals)

Are any of the company's Beneficial Owners tax residents⁷ of countries other than Australia? Yes No

If Yes, please provide the details of these individuals below and complete a separate Individual Identification Form for each Beneficial Owner.

Full given names (s)	Surname	Role (such as Director or Senior Managing Official)
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

If there are more Beneficial Owners, provide details on a separate sheet and cross this box

Please proceed to section 3.4.4 (Country of Tax Residency)

3.4.3 Foreign Controlling Persons (Individuals)

Partnerships - Are any of the Partnership's Controlling Persons⁸ tax residents⁹ of countries other than Australia Yes No

If Yes, please provide the details of these individuals below and complete a separate Individual Identification Form for each Controlling Person.

Trusts - Are any of the Trusts Controlling Persons¹⁰ tax residents¹¹ of countries other than Australia Yes No

If the Trustee is a company, are any of this company's Controlling Persons tax residents of countries other than Australia Yes No

If Yes to either of the two questions above, please provide the details of these individuals below and complete a separate Individual Identification Form for each Controlling Person.

Full given names (s)	Surname	Role ¹²
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

If there are more controlling persons, provide details on a separate sheet and tick this box

3.4.4 Country of Tax Residency

Is the Company / Trust/Partnership¹³ / Association¹⁴ / Registered Co-operative¹⁵ a tax resident of a country other than Australia? Yes No

If Yes, please provide the Company's / Trust's / Partnership's / Association's / Registered Co-operative's country of tax residence and tax identification number (TIN) or equivalent below. If the Company / Trust / Partnership / Association / Registered Co-operative is a tax resident of more than one other country, please list all relevant countries below.

If No, please proceed to section 4.

A 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 an Employer Identification 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.

1. Country	<input type="text"/>	TIN	<input type="text"/>	If no TIN, list reason A, B or C	<input type="checkbox"/>
2. Country	<input type="text"/>	TIN	<input type="text"/>	If no TIN, list reason A, B or C	<input type="checkbox"/>
3. Country	<input type="text"/>	TIN	<input type="text"/>	If no TIN, list reason A, B or C	<input type="checkbox"/>

If there are more countries, provide details on a separate sheet and cross this box

Reason A The country of tax residency does not issue TINs to tax residents

Reason B The organisation has not been issued with a TIN

Reason C The country of tax residency does not require the TIN to be disclosed

⁷Tax Residency rules differ by country. Whether an individual is 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.

^{8,10}A Controlling Person is any individual who directly or indirectly exercises control over the Trust or partnership. For a Trust, this includes all Trustees, Settlers, Protectors or Beneficiaries. For a Trustee company this includes any beneficial owners controlling more than 25% of the shares in the company or Senior Managing Officials. For a Partnership it is any individual who directly or indirectly owns or controls the Partnership and includes all Partners or Senior Managing Officials.

^{9,11}Tax Residency rules differ by country. Whether an individual is 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.

¹²Role could be a Director or Senior Managing Official for a Company, Trustee or Beneficiary for a Trust, Partner or Senior Managing Official for a Partnership.

¹³A Partnership created or established under the laws of a country other than Australia.

¹⁴An Association created or established under the laws of a country other than Australia.

¹⁵A Registered Co-operative created or established under the laws of a country other than Australia.



9. Annual Financial Report – See section 5 of the AIB for more details.

I/We would like to receive an Annual Financial Report for the relevant Fund each year. You may change your election at any time. The Annual Financial Reports for all abrdn funds are available on our website www.abrdn.com/au. Yes

9. Appoint a financial adviser (optional)

Complete this section if you wish to appoint a financial adviser. By completing this section you consent to give your financial adviser access to your information and authorise the financial adviser to make enquiries on your behalf for the Fund.

Adviser name	<input type="text"/>	AFSL number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>										
Dealer Group	<input type="text"/>																		
Adviser address	<input type="text"/>																		
Suburb	<input type="text"/>	State	<input type="text"/>	<input type="text"/>	<input type="text"/>														
Postcode	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Country	<input type="text"/>													
Phone numbers	(AH)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(BH)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	(Mob)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(Fax)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Email ¹⁹	<input type="text"/>																		

10. Appoint a representative (optional) – see section 1 of the AIB for more details.

Complete this section if you wish to appoint a representative (such as a relative, solicitor or financial adviser). By completing this section you consent to give your appointed representative authority to do everything with the investment that you can do, except delegate authority to another third party, change your bank account details or change your personal details (including your name or date of birth).

I/We have read, and agree to, the conditions applying to the appointment of a representative in section 1 of the AIB. In accordance with client identification requirements under the AML/CTF laws, we are required to collect certain information about each investor and any person(s) you appoint as a representative.

If you appoint any person(s) as a representative you will need to arrange for them to complete an Identification Form and provide the necessary supporting documentation to verify their identity.

By completing the relevant sections on appointed representatives on the Application Form you release, discharge and agree to indemnify abrdn or Citigroup Pty Ltd from and against any and all losses, liabilities, actions, proceedings, account, claims and demands arising from abrdn or Citigroup Pty Ltd acting on the instructions of your appointed representative.

You also agree that any instructions of your appointed representative to abrdn or Citigroup Pty Ltd, which are followed by abrdn or Citigroup Pty Ltd, shall be a complete satisfaction of abrdn's or Citigroup Pty Ltd's obligations, notwithstanding any fact or circumstances, including that the instructions were made without your knowledge or authority. You agree that if the appointed representative's instructions are followed by abrdn or Citigroup Pty Ltd you and any person claiming through or under you shall have no claim against abrdn or Citigroup Pty Ltd in relation to those instructions.

Appointed representative details - If you have completed section 9 and your financial adviser does not require transaction authority, you are not required to complete this section and can proceed to section 11.

Surname	<input type="text"/>																																					
Given name(s)	<input type="text"/>																																					
Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss	<input type="checkbox"/> Ms	<input type="checkbox"/> Dr																																	
Postal address	<input type="text"/>																																					
Suburb	<input type="text"/>	State	<input type="text"/>	<input type="text"/>	<input type="text"/>																																	
Postcode	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Country	<input type="text"/>																																
Phone numbers	(AH)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(BH)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	(Mob)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(Fax)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Email	<input type="text"/>																																					
Signature of appointed representative	<input type="text"/>										Date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																
Signature of applicant(s)	<input type="text"/>										Date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																
	<input type="text"/>										Date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>																

¹⁹By nominating this email address, you agree that we may use it to deliver to you information about your investment (such as transaction confirmations, statements and reports) and financial services disclosures (such as any new PDS for the Fund). From time to time we may still need to send you letters in the post.



11. Privacy – see section 5 of the AIB for more details.

Your personal information provided on this Application Form is required to process your investment, administer your account, and for compliance with relevant laws including AML/CTF and tax laws (including FATCA and CRS).

The collection of taxation information (including tax residency and TFN/ABN) is authorised by Australian tax laws. Failure to quote a TFN is not an offence. If not quoted, tax will be deducted from your distributions to meet ATO requirements. Collection of TFN information is authorised and its use and disclosure are strictly regulated by tax and privacy laws.

Each joint applicant must quote a TFN. We may request further information from you from time to time to satisfy our tax and other regulatory obligations.

No, I do not wish to receive education and marketing information about the Fund or other funds managed by abrdn.

12. Declaration and signatures

I/we being the investor(s):

- represent and warrant that I/we have the power and are duly authorised to invest in and hold units in the Fund;
- represent and warrant that I/we have read and understood the current PDS and AIB prior to completing this Application Form;
- agree to be bound by and comply with the Fund's Constitution (as amended) and of the terms, declaration, conditions and acknowledgements in the PDS, AIB and this application;
- if receiving the PDS and AIB from a website or other electronic means, declare to have received all pages of the PDS and AIB before making this application for units in the Fund;
- acknowledge that neither abrdn nor their employees or associates guarantees or has made any representation as to the future performance of the Fund, the maintenance or repayment of capital, any particular future rate of return or that the investment objective will be achieved;
- acknowledge that I/we are not in the United States or a 'US Person' (as defined in Regulation S under the US Securities Act 1933, as amended) ('US Person'), or acting for the account or benefit of a US Person. I/we understand that units in the Fund may not be offered to a US Person and agree that my/our units may not be sold or transferred to a US Person (directly or indirectly) without abrdn's prior consent. Notwithstanding the foregoing, if my/our investment becomes a US account, as reasonably determined by abrdn for the purposes of the FATCA, I/we will promptly notify abrdn and provide abrdn on request with any information which is necessary or desirable for abrdn to comply with any obligations it may have in connection with FATCA;
- agree not to make a copy of this document available to, or distribute a copy of such documents to, or for the account or benefit of, any US Person or any person in the United States or in any other place in which, or to any other person to whom, it would be unlawful to do so;
- acknowledge that I/we received and accepted the offer in the current PDS in Australia or New Zealand (except with abrdn's prior agreement, in which case I/we represent and warrant that I/we may invest in the Fund without the offer contained in the current PDS being registered with, or otherwise regulated by, the relevant regulator of that jurisdiction). I/we acknowledge and agree that if my/our country of residence changes I/we may be prevented from making further investments in the Fund.
- agree to provide further information or personal details to abrdn as requested to meet obligations under AML/CTF laws and taxation laws (including FATCA and CRS) and other regulatory requirements and acknowledge that the processing of my application may be delayed and will be processed at the unit price applicable on the Business Day on which all required information has been provided;
- acknowledge that I/we have read the privacy disclosure. I/we consent to (and agree that I/we have obtained all necessary consents and waivers from all controlling persons if any) personal information provided to abrdn being collected, used, processed, stored, transferred and disclosed to process my/our application, administer my/our investment and comply with any relevant laws (including FATCA and/or CRS) in accordance with abrdn's privacy policy. I/we acknowledge and agree that abrdn may be required to disclose my/our personal information (and personal information of any controlling person) and financial information about my/our investment to service providers of the Fund (including Citigroup Pty Ltd, BNP and their related bodies corporate) and to the relevant regulatory authorities, including for compliance with AML/CTF or associated regulation and tax related requirements (including FATCA and CRS) for reporting tax residents of other countries and/or otherwise causing the Fund to comply with FATCA and/or CRS;
- acknowledge that by providing an email address I/we agree that abrdn may use this address to provide me/us with information about my/our investment (such as investment reports, statements and other material). While abrdn will take reasonable steps to protect information that I/we provide, abrdn cannot guarantee the security of certain types of information provided by me/us (for example, information provided over the internet or by email);
- declare that all details provided in this Application Form and any relevant Identification Form and Target Market Questionnaire are true and correct in every respect and may and will be relied upon by abrdn;
- acknowledge that if I have appointed any person(s) as a representative and/or under Power of Attorney I will need to arrange for them to complete an Identification Form and provide the necessary supporting documentation to enable abrdn to verify their identity. Where a Power of Attorney is appointed, I will need to provide abrdn with an originally certified copy of the Power of Attorney for that person;
- are over 18 years of age and not commonly known by other names;
- declare that any monies used to invest in the Fund are not derived from or related to any criminal activities;
- declare that any proceeds of my/our investment will not be used in relation to any criminal activities; and
- declare that any documents or information whatsoever used for verification purposes in support of my application are complete and correct.
- agree that if there is a change to any of the information provided in this Application Form, Target Market Questionnaire or other documents submitted for AML/CTF, FATCA, CRS or other purposes, I/we will notify abrdn immediately and within 30 days will submit a new Application Form including the tax certification in section 3.4 (or equivalent), and such other documents as requested by abrdn.



12. Declaration and signatures (continued)

Please sign and date the Application Form:

All parties must sign joint applications.

Corporations may sign by one of the following methods

- By signatures of two directors or one director and the company secretary;
- For companies where a sole director is permitted, by signature of the sole director; or
- Under Power of Attorney. If signed under an attorney, the attorney confirms that no notice of revocation of that power has been received. An originally certified copy of the Power of Attorney must be lodged with this application. Persons appointed under a Power of Attorney will be required to complete an Identification Form.

Name	<input style="width: 100%;" type="text"/>		
Date	<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Signature	<input style="width: 100%;" type="text"/>
	<input type="checkbox"/> Director ²⁰		
	<input type="checkbox"/> Sole director ²¹		
Name	<input style="width: 100%;" type="text"/>		
Date	<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Signature	<input style="width: 100%;" type="text"/>
	<input type="checkbox"/> Director ²²		
	<input type="checkbox"/> Company Secretary ²³		

Important notes

- Receipt of investments: Applications for investments received and accepted by 2pm (Sydney time) (subject to the receipt of payment by 9am the following Business Day) on any Business Day will be processed at that Business Day's application price. Applications received and accepted after 2pm (Sydney time) on any Business Day will be processed using the application price applicable on the next Business Day.
- In relation to trust investors, only the trustee has rights and obligations under the Fund.
- Joint applicants will be assumed as joint tenants (unless otherwise notified) and both applicants must sign the form.
- If signed under a Power of Attorney, the attorney hereby certifies that he or she has not received notice of revocation of that power.