



Client Services contact details

Phone
+61 3 9691 6191

Email
invest@k2am.com.au

Website
www.k2am.com

Tax File Numbers, Australian Business Numbers or exemptions

Use this form if you are an existing investor and wish to update your Tax File Number, Australian Business Number or advise reason for exemption.

1. Please complete all sections in block capitals and using a black pen. If you make an error while completing this form, do not use correction fluid. Cross out your mistakes and initial your changes.

Please double check that you have completed the following:

- entered your account number and account name as it appears on your latest periodic or transaction statements
- completed the tax section relevant to you
- signed the form as per the 'Signing instructions' in section 3.

2. Send your documents to us.

You can return your form by post, fax or email according to the details below.

Send by Post: K2 Asset Management
GPO Box 804
Melbourne VIC 3001
Australia

Fax forms to: +61 3 8672 7663

Scan and email to: k2am_transactions@onevue.com.au

Please include your account number in the subject line of your email

Legal notices

K2 Asset Management Ltd AFSL No. 244393 is the issuer of units in the K2 Asian Absolute Return Fund, K2 Australian Absolute Return Fund, K2 Select International Absolute Return Fund, K2 Australian Small Cap Fund and K2 Global High Alpha Fund (together Funds).

K2 Asset Management Ltd is committed to ensuring the confidentiality and security of your Personal Information. We handle your Personal Information in accordance with the Privacy Act 1988 and Privacy Policy, which can be accessed on our website www.k2am.com

TFN, ABN or exemptions

1. Investor details

Account number

Account name

2. Tax File Numbers, Australian Business Numbers or exemptions

Individuals

Please provide your Australian Tax File Number (TFN) or reason for exemption. If you are an Australian resident and do not provide your TFN, or reason for exemption, you will be taxed at the highest marginal tax rate plus the Medicare levy.

TFN

Reason for exemption

Companies

Please provide your Australian Business Number (ABN).

ABN

Trusts or superannuation funds

Please provide the below information which is applicable to you.

ABN (applicable if you are a trust or a self-managed superannuation fund registered with the Australian Tax Office)

Australian Tax File Number (TFN)

Australian Registered Scheme Number (ARSN) (applicable if your trust is registered with ASIC)

3. Signing instructions

By completing and signing this form, you:

- authorise us to act according with the instructions on this form
- acknowledge that the instructions on this form supersede, and have priority over, all previous instructions received by us, and
- agree to indemnify us from and against all losses, costs, expenses, claims, actions or proceedings brought against us in connection with following your instructions on this form.

Who needs to sign this form

Individual — where the investment is in one name, the account holder must sign.

Joint Holding — where the investment is in more than one name, all of the account holders must sign.

Companies — where the company has a sole director who is also the sole company secretary, this form must be signed by that person. If the company (pursuant to section 204A of the Corporations Act 2001) does not have a company secretary, a sole director can also sign alone. Otherwise this form must be signed by a director jointly with either another director or a company secretary. Please indicate the capacity in which the form is signed.



TFN, ABN or exemptions

Trust — the trustee(s) must sign this form. Trustee(s) signing on behalf of the trust confirm that the trustee(s) is/are acting in accordance with such designated powers and authority under the trust deed.

Power of Attorney — if you have not already lodged the Power of Attorney with us, please attach a certified copy of the Power of Attorney. I/We attest that the Power of Attorney has not been rescinded or revoked and that the Donor is still living.

Signature of investor 1, director or authorised signatory

Please print full name

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Company officer (please indicate company capacity)

Director

Sole director and company secretary

Authorised signatory

Signature of investor 2, director/company secretary or authorised signatory

Please print full name

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Company officer (please indicate company capacity)

Director

Company secretary

Authorised signatory

