

- ALLAN GRAY AUSTRALIA EQUITY FUND
- ALLAN GRAY AUSTRALIA BALANCED FUND
- ALLAN GRAY AUSTRALIA STABLE FUND

CLIENT SERVICES CONTACT DETAILS

1300 604 604 (within Australia)

✓ clientservices@allangray.com.au

+61 2 8224 8604 (outside Australia)

mallangray.com.au

PLEASE COMPLETE THIS FORM IF YOU ARE A NEW INVESTOR WITH ALLAN GRAY IN AUSTRALIA OR IF YOU ARE A FINANCIAL ADVISER VERIFYING YOUR CLIENT WHO IS A NEW INVESTOR.



- 1. Complete the relevant sections of this identification form, according to the type of trust as set out below, in block letters, using a black pen.
- 2. Make copies of your ID document(s) as applicable and arrange for them to be certified. Please refer to the 'Forms & Documents' section of our website for more information on getting your documents certified.
- 3. Include this identification form and original certified copies of the ID documents with your initial application form when you send it to us.

TYPE OF TRUST	TYPE OF TRUSTEE	SECTIONS TO COMPLETE
Regulated trust	Individuals	Sections 1, 4 and 7
(Australian)	Public company	Sections 1 and 5
	Private company	Sections 1, 5 and 6
Unregulated trust	Individuals (Australian)	Sections 1, 2, 3, 4, 8.1 and 8.2
(Australian and foreign)	Individuals (Foreign)	Sections 1, 2, 3, 4, 8.1 and 8.3
,	Company (Australian)	Sections 1, 2, 3, 5, 6, 8.1, 8.2, 8.4, 8.5 and 8.6
	Company (Foreign)	Sections 1, 2, 3, 5, 6, 8.1, 8.3, 8.4, 8.5 and 8.6

Financial adviser verifying your client

- 1. Complete the relevant sections of this identification form, according to the type of trust as set out above, in block letters, using a black pen.
- 2. Either
 - a. Attach the original certified copies of the ID documents used to verify your client (and any required translation)
 - b. Complete section 9 indicating that you have collected and verified your client's identity.
- 3. Include this identification form and original certified copies of ID documents (if applicable) with the initial application form when you send it to us.

Legal notices

Equity Trustees Ltd AFSL No. 240975 (EQT) is the issuer of units in the Allan Gray Australia Equity Fund, Allan Gray Australia Balanced Fund and the Allan Gray Australia Stable Fund (together Funds).

Personal information is collected on this form by EQT and Allan Gray including their delegates, such as OneVue Fund Services Pty Ltd and Orbis, (together us), for the purposes of maintaining the register of unitholders, facilitating distribution payments and other unitholder communications required or permitted by the Corporations Act 2001 or other legislation. Your personal information may be disclosed to external service companies such as print or mail service providers, to Allan Gray, Orbis or to the Funds' custodian, or as otherwise required or permitted by law. If you would like details of your personal information held by us, or you would like to correct information that is inaccurate, incorrect or out of date, please contact Allan Gray. Our privacy policy is available on our website, www.allangray.com.au In accordance with the Corporations Act 2001, you may be sent material (including marketing material) approved by EQT, Allan Gray or Orbis in addition to general corporate communications. You may elect not to receive marketing material by contacting Allan Gray using the details on this form. Allan Gray means Allan Gray Australia Pty Ltd AFSL No. 298487 as manager for the Funds. Orbis means Orbis Investment Advisory Pty Ltd AFSL No. 237862 and its associates.



1.TRUST DETAILS							
Full name of trust							
Country where trust es	stablished						
Type of regulated trust	: (Australian)						
Please select only one o	f the following trust ty	pes and pr	ovide the in	nformatio	n requested	d.	
Self-managed sup	erannuation Fund						
Please provide the	SMSF's ABN						
Registered manag	ged investment schem	ne					
Provide the Austra Scheme Number (A	_						
Government supe	erannuation Fund						
Provide the name of establishing the full	_						
	rust (a trust that is sur such as an approved nd)	,	,	0			,
Provide the name	of the regulator						
Provide the trust's registration/licens	_						
Type of unregulated tr	ust (Australian and fo	reign)					
Please select one of the	following trust types a	and provide	e the inform	nation req	juested.		
Family trust	Charitable trust		Testame	entary tru	st		
Other	Please provide descrip	otion					
2. BENEFICIAL OWNER	/BENEFICIARY DETA	ILS					
Please complete for unr	egulated trusts (Austr	alian and f	oreign).				
Beneficial owner: Is somethat entity by way of det	•	•			•	nd/or exercise	es control over
How many beneficial ow	vners are there? (pleas	e identify t	the benefici	ial owners	on the nex	t section)	



Do the terms of the trust identify the beneficiaries by reference to membership of a class? Provide details of the membership class(es) (for example unit holders, family members of named person, charitable purpose) Yes No How many beneficiaries are there? (please identify the beneficiaries on the next section) Please provide details for each beneficial owner and each beneficiary. Beneficial owner/beneficiary 1 Title Full given names Surname Date of birth Please tick if this person is a beneficial owner **Residential address.** A PO Box/RMB/Locked Bag is not acceptable. Property name/ building name (if applicable) **Address** Suburb State Postcode Country Beneficial owner/beneficiary 2 Title Full given names Surname Please tick if this person is a beneficial owner Date of birth **Residential address.** A PO Box/RMB/Locked Bag is not acceptable. Property name/ building name (if applicable) **Address** Suburb State Postcode Country



Beneficial owner/bene	ficiary 3		
Title	Full given names		
Surname			
Date of birth		Please tick if this person is a ben	neficial owner
Residential address. A	PO Box/RMB/Locked Bag is not acce	ptable.	
Property name/ building name (if applicable)			
Address			
Suburb	State	Postcode	
Country			
Beneficial owner/bene	ficiary 4		
Title	Full given names		
Surname			
Date of birth		Please tick if this person is a ben	neficial owner
Residential address. A	PO Box/RMB/Locked Bag is not acce	ptable.	
Property name/ building name (if applicable)			
Address			
Suburb	State	Postcode	
Country			

If there are more beneficiaries, please provide details on a separate sheet and attach this with your form.

3. SETTLOR DETAILS

Please complete for unregulated trusts (Australian and foreign).

Please provide details for the settlor(s) of the trust.

Settlor: A person or an entity who contributed assets to the trust at the time of establishment. Do not complete this section if the person or entity no longer exists or if the initial sum at the time the trust was set up was less than AUD 10,000.



Settlor 1					
Title	Full	given names			
Surname					
Company/Trust/					
Superannuation Fund					
Settlor 2					
Title	Full	given names			
Surname					
Company/Trust/					
Superannuation Fund					
If there are more settlor	s, please provide deta	ils on a separat	e sheet and attach this	s with your for	m.
4. INDIVIDUAL TRUSTE	E DETAILS				
Please provide details fo	or each individual trus	tee.			
Trustee 1					
Title	Full	given names			
Surname					
Date of birth	D D / M M /	YYYY			
Residential address. \boldsymbol{A}	PO Box/RMB/Locked	Bag is not acce	ptable.		
Property name/					
building name (if applicable)					
Address					
Suburb		State		Postcode	
Country					
Trustee 2					
Title	Full	given names			
Surname					
Date of birth	D D / M M /	YYYY			



Residential address. $\mbox{\ensuremath{A}}$	PO Box/RMB/Locked	d Bag is not acce	ptable.		
Property name/					
building name (if applicable)					
Address					
Suburb		State		Postcode	
Country					
If there are more truste	es, please provide de	tails on a separat	te sheet and attach this	s with your f	orm.
5. COMPANY TRUSTEE Australian company det		prporated in Aust	ralia		
Full name of company ((as regulated by ASIC)				
Registration number (fo	or example ABN)				
Registered office addre	ess. A PO Box/RMB/	Locked Bag is no	t acceptable.		
Property name/ building name					
(if applicable)					
Address					
Suburb		State		Postcode	
Country					
Place of business (if diffe	erent to regulated office ac	ddress)			
Property name/ building name					
(if applicable)					
Address					
Suburb		State		Postcode	
Country					
Regulatory/listing deta	ails				
Regulator name					
Licence details					
Name of stock exchang	ge				



Foreign company detai	ls - companies incor	porated outside	e of Australia		
Full name of company					
Country of formation/incorporation/ registration					
Registration/identifica	tion number				
Name of foreign registration body (if applicable)					
Regulated office addre A PO Box/RMB/Locked			any in Australia, please pro	ovide Australian address.	
Property name/					
building name (if applicable)					
Address					
Suburb		State	Post	code	
Country					
Place of business (if diffe	rent to regulated office ad	ldress)			
Property name/					
building name (if applicable)					
Address					
Suburb		State	Post	code	
Country					
Regulatory/listing deta	nils				
Regulator name					
Licence details					
Name of stock exchang	ge				
Australian listed company name if majority owned subsidiary of an Australian listed company					

Suburb

Country



6. ADDITIONAL INFORMATION FOR PRIVATE COMPANIES Please complete if the company is a private company. Do not complete for public and listed companies. **Directors details** How many directors are there? Provide full name of each director Director 1 Title Full given names Surname Director 2 Full given names Title Surname **Director 3** Full given names Title Surname **Director 4** Title Full given names **Surname** If there are more directors, please provide details on a separate sheet and attach this with your form. Major shareholder details Please complete for private companies that are not regulated companies. Provide details of all shareholders who own, directly or indirectly, more than 20% of the company's issued capital. Major shareholder 1 Title Full given names **Surname** Residential address. A PO Box/RMB/Locked Bag is not acceptable. Property name/ building name (if applicable) **Address**

State

Postcode



Major shareho	lder 2			
Title	Full given names			
Surname				
Residential ad	dress. A PO Box/RMB/Locked Bag is not acceptable.			
Property name building name (if applicable)				
Address				
Suburb	State Postcode Postcode			
Country				
Major shareho	lder 3			
Title	Full given names			
Surname				
Residential ad	dress. A PO Box/RMB/Locked Bag is not acceptable.			
Property name building name (if applicable)				
Address				
Suburb	State Postcode			
Country				
7. VERIFICATION	ON PROCEDURE - REGULATED TRUSTS			
Verification of	ndividual trustees for Australian regulated trusts			
Please enclose	an original certified copy of ONE of the following current documents for at least one trustee. If your			
document does	not show your signature, please sign your name on the original certified copy of the document.			
TICK	SELECT ONE OPTION FROM THIS SECTION			
	Drivers licence (must show your date of birth, photo and signature).			
	Passport (must show your date of birth, photo, current date of passport and signature).			
	Any identification card issued under a state or territory in Australia or by an overseas government (must show your date of birth, photo and signature)			



8. VERIFICATION PROCEDURE - UNREGULATED TRUSTS

8.1 Verification of unregulated trusts (Australian and foreign)

Please enclose an original certified copy of ONE of the following documents.

TICK	SELECT ONE OPTION FROM THIS SECTION
	A notice issued to the trust by a regulatory authority (must not be more than 12 months old).
	A letter from a solicitor or qualified accountant that confirms the name of the trust.
	An original or certified copy or certified extract of the trust deed. The certified extract must confirm the name of the trust.

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

8.2 Verification of individual trustees and beneficial owners for Australian unregulated trusts

Please enclose an original certified copy of ONE of the following current documents for at least one trustee and all beneficial owners. If your document does not show your signature, please sign your name on the original certified copy of the document.

TICK	SELECT ONE OPTION FROM THIS SECTION
	Drivers licence (must show your date of birth, photo and signature).
	Passport (must show your date of birth, photo, current date of passport and signature).
	Any identification card issued under a state or territory in Australia or by an overseas government (must show your date of birth, photo and signature).

8.3 Verification of individual trustees and beneficial owners for foreign trusts

Please enclose original certified copies of at least TWO of the following current documents for each individual trustee and all beneficial owners. The TWO documents together must show ALL of the following:

- Your photo
- Date of birth
- Residential address
- Signature (If your documents do not show your signature, please sign your name on the original certified copy of the document.)

TICK	SELECT TWO OPTIONS FROM THIS SECTION
	Drivers licence
	Passport
	Any identification card issued under a state or territory in Australia or by an overseas government
	A document issued by a local government body or utilities provider within the preceding three months which records the provision of services to your address or to you (this document must contain your name and address as indicated on this form)



8.4 Verification procedure of company trustee for unregulated trusts (Australian and foreign)

Please enclose an original certified copy of BOTH of the following documents

TICK	ENCLOSE A CERTIFIED COPY OF THE FOLLOWING CURRENT DOCUMENTS
	Certificate of registration (or equivalent) issued by the relevant registration/regulatory body indicating:
	i. The company's identification number
	ii. The date it was incorporated or formed, and
	iii. The company's registered address.
	The company's register of members indicating each member's residential address and percentage of ownership. However if the foreign company is listed on a stock exchange, the register of members only needs to show the top 20 members, their residential addresses and percentage of ownership.

Note: If the certificate of registration does not indicate any of the above details, enclose certified copies of other documents issued by independent third parties indicating the above details in addition to enclosing the certificate of registration. Australian private companies should consider providing a 'Current company extract' sourced directly from ASIC. A small fee is levied by ASIC for this report.

8.5 Verification procedure of a company's major shareholders - individuals/beneficial owners

For each major shareholder and beneficial owner who is an Australian resident, please enclose an original certified copy of ONE of the first three documents listed below. This document must show your date of birth, photo and signature. For each major shareholder and beneficial owner who is a foreign resident, you must enclose original certified copies of at least TWO of the following current documents. The TWO documents together must show ALL of the following:

- · Your photo
- Date of birth
- Residential address
- Signature (If your documents do not show your signature, please sign your name on the original certified copy of the document.)

TICK	ENCLOSE A CERTIFIED COPY OF THE FOLLOWING CURRENT DOCUMENTS
	Drivers licence
	Passport
	Any identification card issued under a state or territory in Australia or by an overseas government
	A document issued by a local government body or utilities provider within the preceding three months which records the provision of services to your address or to you (this document must contain your name and address as indicated on this form)



8.6 Verification procedure of a company's major shareholders - companies

For each major shareholder which is a company, please enclose a certified copy of the following current documents.

TICK	ENCLOSE A CERTIFIED COPY OF THE FOLLOWING CURRENT DOCUMENTS		
	Certificate of registration (or equivalent) issued by the relevant registration/regulatory body indicating:		
	i. The company's identification/registration number		
	ii. The date it was incorporated or formed, and		
	iii. The company's registered address.		
	The major company shareholders register of members indicating each member's residential address and percentage of ownership AND:		
	i. Each member who is an individual must provide documents as outlined under the heading 'Verification of a company's major shareholders — individuals/beneficial owners', and		
	ii. Each member who is a company must provide a certified copy of the documents outlined under the heading 'Verification of a company's major shareholders – companies'.		
	If the company is listed on a stock exchange, the register of members only needs to show the top 20 members, their residential addresses and percentage of ownership		

Note: If the certificate of registration does not indicate any of the above details, enclose certified copies of other documents issued by independent third parties indicating the above details, in addition to enclosing the major shareholder's certificate of registration. Australian private companies should consider providing a 'Current company extract' sourced directly from ASIC. A small fee is levied by ASIC for this report.

Document written in a language other than English must be accompanied by an English translation prepared by an accredited Major Shareholder that are individuals.



9. VERIFICATION PROCEDURE - FINANCIAL ADVISERS

Record of verification procedure

Either:

- a. Attach the original certified copies of the ID documents (as required under sections 7 and/or 8) used to verify your client (and any required translation), or
- b. Complete the details below and do not attached copies of the ID documents. By completing this you represent that you have verified your client's trust and trustee details according to the verification procedures in sections 7 and/ or 8.

ID DOCUMENT DETAILS	DOCUMENT 1	DOCUMENT 2		
Verified from	Original Certified copy	Original Certified copy		
Document name/type				
Document issuer				
Issue date	DD/MM/YYYY	DD/MM/YYY		
Expiry date	DD/MM/YYYY	DD/MM/YYY		
Document number				
Accredited English translation	N/A Sighted	N/A Sighted		
Financial adviser details				
Date verified D D / M M / Y Y Y				
Authorised Representative Number (if any)				
Financial adviser name				
Phone number +				
Dealer group name				
AFSL number				