

FORM 2A

SPECIFIC TO COMPANIES AND PARTNERSHIPS



Email this form to us at registry@anzinvestments.co.nz, take it to any ANZ branch or post it to: **ANZ Investments, Freepost 324, PO Box 7149, Victoria Street West, Auckland 1142**. If you are emailing us these forms, you do not need to post them to us.

Companies and Partnerships must complete this Form 2A in addition to Form 2 – Application Form (Companies, Trusts, Partnerships and Estates) and Form 2C – Trust Account & Entity Declaration Form. Make sure any required documents as described in this form are included.

1. THIS FORM RELATES TO AN APPLICATION FOR INVESTMENT OR EXISTING INVESTMENT IN THE FOLLOWING (PLEASE TICK):

- ☐ ANZ Investment Funds
- ☐ OneAnswer Multi-Asset-Class Funds
- ☐ OneAnswer Single-Asset-Class Funds

Please provide:

- Companies – a certified copy of the certificate of incorporation
- Partnerships – a certified copy of the partnership agreement (together with amendments or supplements)

2. COMPANY OR PARTNERSHIP INFORMATION

Company or Partnership name	
Industry (specific)	The industry specified generates at least 50% of the entity's gross income
Principal place of business address (if different from registered address)	
Street/PO Box	
Suburb	City
Postcode	Country
If applicable, does the company have a constitution? <input type="checkbox"/> Yes <input type="checkbox"/> No	

3. SIGNIFICANT SHAREHOLDER INFORMATION – COMPANIES ONLY

Please list details of shareholders who own equal to or greater than 25%. If any of the significant shareholders are companies, please list the significant shareholders of that company. All shareholders listed will need to provide certified identification and proof of current residential address. Please see anz.co.nz/myid for our full list of acceptable documents.

Shareholder 1

Title	First name(s)	Surname
ANZ customer (or investor) number <input type="text"/> (if known)		
Date of birth	<input type="text"/>	Country of birth
Home address		
		Postcode
		Country

Shareholder 2

Title	First name(s)	Surname
ANZ customer (or investor) number <input type="text"/> (if known)		
Date of birth	<input type="text"/>	Country of birth
Home address		
		Postcode
		Country

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3. SIGNIFICANT SHAREHOLDER INFORMATION - COMPANIES ONLY (CONT.)

Shareholder 3

Title	First name(s)	Surname
ANZ customer (or investor) number <input type="text"/> (if known)		
Date of birth	<input type="text"/>	Country of birth
Home address		
		Postcode
		Country

4. DIRECTORS OR PARTNERS

Please list details of all directors or partners. If there are more than three, please attach additional pages to this form. All directors or partners will need to provide certified identification and proof of current residential address. Please see anz.co.nz/myid for our full list of acceptable documents. If applicable, I/we have personally affixed my/our digital signature(s) to this document.

Director/Partner 1

Title	First name(s)	Surname
ANZ customer (or investor) number <input type="text"/> (if known)		
Date of birth	<input type="text"/>	Country of birth
Home address		
		Postcode
		Country
Signature		
		Date <input type="text"/>

Director/Partner 2

Title	First name(s)	Surname
ANZ customer (or investor) number <input type="text"/> (if known)		
Date of birth	<input type="text"/>	Country of birth
Home address		
		Postcode
		Country
Signature		
		Date <input type="text"/>

Director/Partner 3

Title	First name(s)	Surname
ANZ customer (or investor) number <input type="text"/> (if known)		
Date of birth	<input type="text"/>	Country of birth
Home address		
		Postcode
		Country
Signature		
		Date <input type="text"/>

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5. NOMINEE DIRECTORS, SHAREHOLDERS, OR GENERAL PARTNERS

If a company or limited partnership are any of your directors, shareholders, or general partners acting as a nominee for another party?

☐ Yes ☐ No

If yes, then please complete the following:

A. Source of funds

Briefly describe below and provide evidence of the source of funds.

B. Nominator details

Please provide details of all nominators. If there are more than two, please attach additional pages to this form. All nominators will need to provide certified identification and proof of current residential address. Please see anz.co.nz/myid for our full list of acceptable documents.

Nominator 1

Title

First name(s)

Surname

ANZ customer (or investor) number(if known)

Date of birth

D

D

M

M

Y

Y

Y

Y

Country of birth

Home address

Postcode

Country

Nominee's name

Title

First name(s)

Surname

Role: ☐ Director ☐ Shareholder ☐ General Partner

Nominator 2

Title

First name(s)

Surname

ANZ customer (or investor) number(if known)

Date of birth

D

D

M

M

Y

Y

Y

Y

Country of birth

Home address

Postcode

Country

Nominee's name

Title

First name(s)

Surname

Role: ☐ Director ☐ Shareholder ☐ General Partner

Please notify us if at any time in the future there is a change to any of the significant shareholders, directors or partners listed on this form.