ADDITIONAL BENEFICIARIES FORM

This Additional Beneficiaries Form is to accompany a Registration Form if the investing entity has more than two beneficiaries.

If you need assistance completing this form, please call GPS Investor Services on 1800 999 109

| | BENEFICIARY 3 | BENEFICIARY 4 |
|--|--|---------------|
| Title | | |
| First name | | |
| Last name | | |
| Date of birth | | |
| Residential address | | |
| Are you a US | ☐ Yes ☐ No | ☐ Yes ☐ No |
| citizen or resident for tax purposes? | If you have selected "Yes", please complete a FATCA Form found on our website or by contacting us on 1800 999 109. | |
| | BENEFICIARY 5 | BENEFICIARY 6 |
| Title | | |
| First name | | |
| Last name | | |
| Date of birth | | |
| Residential address | | |
| Are you a US citizen or resident for tax purposes? | ☐ Yes ☐ No | ☐ Yes ☐ No |
| | If you have selected "Yes", please complete a FATCA Form found on our website or by contacting us on 1800 999 109. | |