Loftus Peak Global Disruption Fund (Class A)

## Additional application form



This form is for existing investors only. If you are a new investor please use the Initial Application Form.

This form relates to a Product Disclosure Statement dated 15 September 2025 ("PDS") and issued by The Trust Company (RE Services) Limited ABN 45 003 278 831 AFSL 235150, for the offer of units in the following Funds:

Loftus Peak Global Disruption Fund (Class A) (ARSN 619 350 042)

Terms defined in the PDS have the same meaning in this Additional Application Form. The PDS contains important information about investing in the Fund, and you are advised to read the PDS before completing this Additional Application Form.

Account / Investor number							
Account / Investor name							
1. (	Consumer attributes	;					
	ase confirm what category of streets as a confirm what category of streets.	of investor you ar	re. You must select o	one option. Failure t	to com	nplete this will result in your	
	Wholesale Investor (as de	fined by section	761G of the Corpor	ations Act 2001). If y	yes, pl	ease proceed to section 2.	
	Platform Provider. If yes, p	atform Provider. If yes, please proceed to section 2.					
	must ensure your Financia	etor (as defined in the Corporations Act) who has received personal financial advice in respect to the Fund. You be your Financial Advisor details are provided in section 7. We will be unable to process your application unless is completed. Please proceed to section 2.					
	Financial Advisor Name	dvisor Name					
	<b>Retail Investor</b> (as defined in the Corporations Act) who has not received personal financial advice in respect to the Fund. Please complete the remaining part of this section before proceeding to section 2.						
in re ansv	esponse to each of the que	stions set out be	low. Please ensure a	all questions are cor	mplete	to indicate your consumer attributes ed and you must select only one d reflect your current objectives,	
WAI	VARNING: If unsure on how to complete, we recommend you seek financial advice.						
1.	What is your primary inves  Capital Growth	tment objective	?  Capital Preserva	tion		ncome Distribution	
2.	What is your investment ti	investment time horizon?					
	Up to and including 2 (short term)	years	More than 2 year than 5 years (me				
	Equal to 5 years but le 7 years (medium to lo		Equal to 7 years (long term)	or more			
3.	Vhat is your intended use of this investment in your overall investment portfolio?						
	Satellite component u  Major allocation up to		Minor allocation Standalone port	•		Core component up to 50%	

1.	Consumer attrib	outes continued						
4.	What do you anticipate your withdrawal needs?							
	Weekly	Monthly	Quarterly	Yearly	More often than one year			
5.	What is your toleran	ce for risk (able to be	ear loss)?					
	Low	Medium	High	Very high	Extremely high			
Ар	Additional inves							
Fund name Lof		Loftus Peak Global	tus Peak Global Disruption Fund (Class A)					
Application amount In A		In A\$	<b>\$</b>					
Pa	yment method (deta Direct credit / Electr							
Pa	yment details							
Account name		Boardroom P	Boardroom Pty Limited ITF Loftus Peak Global Disruption Fund (Class A) – Applications a/c					
BSB		332-027	332-027					
Account number		555 651 552	555 651 552					

## 3. Declaration

I/we declare and agree each of the following:

- I/we have read the current PDS and acknowledge this additional application request is subject to the terms and conditions set out in the current PDS.
- My/our application is true and correct.
- I am/we are bound by any terms and conditions contained in the current PDS and the provisions of the constitution of the Fund as amended from time to time.
- I/we have legal power to invest.
- If this is a joint application, each of us agrees that our investment is as joint tenants. Each of us is able to operate the account and bind the other to any transaction including investments or withdrawals by any available method.
- If investing as trustee on behalf of a super fund or trust, I/we confirm that I am/we are acting in accordance with my/our designated powers and authority under the relevant trust deed. In the case of a super fund, I/we also confirm that it is a complying fund under the Superannuation Industry (Supervision) Act 1993.
- I/we acknowledge that none of The Trust Company (RE Services) Limited ABN 45 003 278 831 or any of their related entities, officers or employees or any related company or any of the appointed service providers including the investment manager and custodian guarantee the repayment of capital or the performance of the Fund or of any particular rate of return by the Fund.
- I/we have read and understood the privacy disclosure as detailed in the current PDS. I/we consent to my/our personal information being collected, held, used and disclosed in accordance with the privacy disclosure. I/we consent to The Trust Company (RE Services) Limited disclosing this information to my/our financial adviser (named in this form) for units in the Fund. Where the financial adviser no longer acts on my/our behalf, I/we will notify The Trust Company (RE Services) Limited of the
- If I/we have appointed an authorised representative, I/we release, discharge and indemnify The Trust Company (RE Services) Limited from any loss, expense, action or other liability which may be suffered by, brought against me/us or The Trust Company (RE Services) Limited ABN for any action or omissions by the authorised representative whether authorised by me/us or not.

Who should sign							
Where the investment is in one name, the investor must sign.							
Where the investment is in more than one name, all investors must sign.							
Two directors or a director and a company secretary must sign, unless you are a sole director and sole company secretary.							
Each trustee must sign or, if a corporate trustee, then as for a company.							
Each partner.							
Each office bearer.							
Relevant principal officer/authorized signatory.							
If signed by the unit holder's attorney, the power of attorney must have been previously been provided. If not a certified copy of the power of attorney as well as a certified copy of the Power of Attorney's driver's license, passport or other photo identification which confirms the name, address and contains their signature must be attached to this form.							
Date (dd/mm/yyyy)							
Tick capacity (mandatory for companies)  Sole Director and Company Secretary Partner Secretary Investor 2 Signature							
Date (dd/mm/yyyy)							
Tick capacity (mandatory for companies)  Director  Non-Corporate Trustee  Partner							
Please send your signed form to:  Boardroom Pty Limited GPO Box 3993 Sydney NSW 2001 or Email: loftuspeak@boardroomlimited.com.au  For further information, please contact Boardroom Pty Limited (ABN 14 003 209 836) via: Phone: 1300 737 880 Email: loftuspeak@boardroomlimited.com.au Web: https://boardroomlimited.com.au							

## **Loftus Peak Pty Limited**