Australian Venture Capital Fund of Funds Application Form

Reference code:

R	legistration type
	Part 7.4 of the Criminal Code creates offences for making false and misleading statements, giving false or misleading information and producing false or misleading documents under the Act.
	For further information on the program requirements:
	Email the department or phone the Hotline: 13 28 46
	Please refer to the Privacy Policy ().
	Before submitting this form, ensure you have the partnership registration certificate(s). The submission cannot be accepted by the department unless the certificate(s) are provided at the time of submission.
	Please see the guides on business.gov.au/afof ()
	Legislation in full available at https://www.legislation.gov.au (https://www.legislation.gov.au)
	Refer to the Venture Capital Act 2002 and the ITAA 1997.
	Part 7.4 of the Criminal Code creates offences for making false and misleading statements, giving false or misleading information and producing false or misleading documents under the Act.
	For further information on the program requirements:
	Email the department or phone the Hotline: 13 28 46
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Google Places

The Address search fields in this form use Google Places to help fill in the address details. By using this feature you agree to be bound by Google's Terms of Service (https://www.google.com/intt/en/policies/terms) and are subject to Google's Privacy Policy (https://www.google.com/ policies/privacy).

Type of registration

Select which is relevant to your application

Please see the guides on business.gov.au/afof ()
Legislation in full available at https://www.legislation.gov.au
Refer to the Venture Capital Act 2002 and the ITAA 1997.

Section 13-5(2) - conditional registration may be granted to a partnership that does not meet all the registration requirements. If you wish to be considered for conditional registration the partnership will need to demonstrate how it will meet the registration requirements. Conditional registration may only be considered where the delegate of Innovation and Science Australia is satisfied the partnership will meet the registration requirements of an AFOF within 24 months, after which conditional registration lapses.

Section (3-1(2)-AFOF registration is a partnership that meets the registration requirements under s9-1 of the VC Act.

O	Conditional AFOF registration
0	AFOF registration
	Is the partnership conditionally registered? * O Yes No
	Registration date *
	This is the date the delegate of Innovation and Science Australia conditionally registered the AFOF.

Contact for this application

Company name *	
Given name(s) *	
Family name *	
Position *	
Primary phone number *	
Secondary phone number	
	\neg
Email*	
Email	
40	
(V)	



General partner details

s th	e general partne	er a venture capita	al management partne	rship? *			
\bigcirc	Yes	O No					
	General partne	er's registration nu	umber *				
	\bigcirc	the following entiti			Company		



			siness Number (AB				trieve your
			Business Register	(ABR) (https://abi	business.go	ov.au/).	
Austra	alian Business Num	ber (ABN) ^		\neg			
Gener	ral partner's name	*					
regist	ration details from to	the Australian with an ACN	mpany Number (AC Business Register have an associated N Lookup if the con	(ABR) (https://abi I ABN.	business.go		etrieve your
Austra	alian Company Num	nber (ACN) *					
Sp	pecify General partr	ner's name be	low				
Gene	ral partner's name	*					
Gene	ral partner's name	*					
					_		
the gene	ral partner a reside	ent of Australia	a? *				
Yes	O No				-V		
Speci	ify state *						
Оресо	ny state						
Speci	ify which country th	e general par	tner resides *				
- 1							
Does	the country have a	double tax a	greement with Aust	ralia?*			
	the country have a	double tax a		ralia?			
0	Yes	No No	greement with Aust				
0	Yes	No No					
O · eral	Yes	_№ registe	greement with Aust				
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All forms must be submitted using the online form. Some fields in the online form may differ based on user input.

Is the	general	partners business	address the	same as the	registered	office?	*
\cap					-		

General partner's business address

Please input the address *		
Start typing full address here.		
Address Linel *		
Address Line2		
Suburb *	State *	Postcode *
Please input the address *		
Start typing full address here.		
Address Unel *		
Address Line2		0,
Suburb/ City *	State/ Province *	Postcode/ Zipcode *
Country *		
ntact name	40	
ily name *	((2)	
e *		
l address *		

Details of the AFOF Partnership name* Enter the name exactly as it appears on the partnership confidence.
Enter the name exactly as it appears on the partnership certificate
Partnership registration number*
Enter the number exactly as it appears on the partnership certificate
Specify which country the partnership was established in
Australia
Does the country have a double tax agreement with Australia? O Yes No
The partnership was established under the law of which State or Territory? *
Attach documentary evidence of the date the partnership was established such as your partnership ILP/LPcertificate
Has the partnership had a previous registration revoked under the VC Act? *
O Yes O No
Provide details on the previous registration *

Duration of the partnership

The following questions ask about details of your partnership agreement which must comply with the requirements of the Act.
Will the partnership remain in existence for at least 5 and not more than 20 years? * O Yes O No
Specify the relevant clause/s of the partnership agreement that refers to the duration of the partnership. *
Date the partnership was formed? *
Date the partnership will be terminated? *
Are there any additional clauses in the partnership agreement that can cancel or terminate the partnership? *
Yes No Specify the clause *
Clause numbers in the partnership agreement that require partners to contribute their committed capital as and when required under the agreement e.g. Clause/s xx in the partnership agreement *
0 characters of 200 used
Clause numbers in the partnership agreement that prohibit the addition of new partners to the partnership except as provided for in the agreement e.g. Clause/s xx in the partnership agreement *
O characters of 200 used
Clause numbers in the partnership agreement that prohibit increases in the partnership's committed capital except as provided for in the agreement e.g. Clause/s xx in the partnership agreement *
0 characters of 200 used
Clause numbers in the partnership agreement that confer on a general partner the right to require partners to contribute their committed capital to the partnership e.g. Clause/s xx in the partnership agreement *
Upload signed partnership deed If the partnership is applying for conditional registration and the deed is not executed, please ensure a signed interim deed is provided with the partnership deed.
The deed must be provided in the following two formats:
PDF format for the signed copy Word format
Upload signed partnership deed *
PDF format for the signed copy
Upload partnership deed *
Word format

Committed capital

The partnership has committed capital of \$XX million. Committed capital has the meaning given by sl 18-445 of the ITAA97. Evidence of committed capital in the form of signed application forms/subscription deeds may be requested by the delegate as evidence of committed capital at any time.

	Vhat is the Fund's total committed capital (AUD) at the time of application? *	
	Vhat is the amount committed to the AFOF (AUD)? *	
	What is the amount committed to the AFOF (AUD)? *	•
Jploa	d Capital raising strategy *	
000	do you plan on sourcing capital from? * Super/Pension fund Self-managed super fund Financial Institution	
000	Company	
	Partnership	
\bigcirc	Individual Significant Investor Visa Applicant	
)	Foreign Venture Capital Fund of Funds	
)	Dther (please specify)	
	other	
s the	general partner committing capital to the partnership? *	
0	es O No	
	Amount (AUD) *	
Vhat	s the partnership's target committed capital (AUD)? *	
	are the reasons the general partner has formed a view that the AFOF has sufficient funds to begin its investment program is lance with $\pm 13-1(2)(d)$ of the Venture Capital Act *	n
	0 characters o	f 1.000 us
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Partnership investments

Does the partnership hold any investments/permitted loans? *

Yes

No

How many investments/permitted loans has the partnership made? *
Upload investment/permitted loan documentation *
In the repeating section below, add an entry for each investment the partnership has made, including separate entries for initial and follow-on investments. If the investment has been made through a holding company structure, then report the details of the target investee not the details of intermediate holding companies.
Investment 1
Each investment held is:
 An Investment in a registered VCLP/ESVCLP; or An EVCI in a company or unit trust in which a registered VCLP/ESVCLP, of which the partnership is a partner, owns one o
more EVCis; or 3. An investment not meeting s118-425(2) and (6) or s118-427(3) and (7) in a company or unit trust in which a registered VCLP/ESVCLP, of which the partnership is a partner, owns one or more EVCis; or 4. Debt Interest - Permitted Loan
s this an investment into a registered VCLP/ESVCLP or an eligible venture capital investment or a permitted loan? * O Yes O No
Type of investment *
O Investment in a registered VCLP/ESVCLP
O An eligible venture capital investment
O A debt interest - permitted loan
The name of the partnership which received the investment *
Amount committed to VCLP or ESVCLP (AUD) *
Date that investment was made *
Date with infocurion was made
Does the Investee have an ABN or an ACN? *
ABN ACN Only Neither
Enter your ABN into the Australian Business Number (ABN) field and click the Lookup ABN button to retrieve your
registration details from the Australian Business Register (ABR) (https://abr.business.gov.au/).
Australian Business Number (ABN) *
Investee name *
Investee name
Enter your ACN into the Australian Company Number (ACN) field and click the Lookup ACN button to retrieve your registration details from the Australian Business Register (ABR) (https://abr.business.gov.au/). Not all companies with an ACN have an associated ABN.
An ACN will only appear on ABN Lookup if the company also has an ABN.
Australian Company Number (ACN) *
Australian Company Number (ACN)
Specify Investee name below
Investee name *
Investee name *
Cost Amount of Investment (AUD) *
\$
Date that investment was made *
Cost Amount of Investment (AUD) *
\$

All forms must be submitted using the online form. Some fields in the online form may differ based on user input.

A VCLP can only hold a debt interest if it is a permitted loan as defined at s9-10 of the Venture Capital Act. Generally, a VCLP can lend money to a company or unit trust once it holds an eligible venture capital investment in that entity and that investment is at least 10 per cent of the investee. A VCLP may also lend money to a business where it does not hold an investment if the loan is repaid within six months. If there are exceptional circumstances the repayment period may be extended by the delegate of Innovation and Science Australia [s9-10(1)(b), (2) and (3)].



Yes	ement for repayment of the permitted loan within six mot	nths? *
Repayme	nt date *	
Provide an explanat	on on why this investment is not an eligible venture capit	al investment or a permitted loan *
		D characters of 1, ODO u
he nartnershin disnos	ed of any of the above listed investments? *	
no partitorising dispos	of any of the above listed investments.	Dicharacters of 1,000 u
		D characters or 1,000 t
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Limited partners

Details of limited partners

)о у	ou have any Limited Partners?
\cup	Yes O No
	Instructions for filling in limited partner list:
	1. Click on the following link to open the spreadsheet: limited partners spreadsheet() 2. Enter details of ALL limited partners of the partnership into the spreadsheet 3. Save the spreadsheet to your local device
	Click on 'Upload File' to upload the spreadsheet from your local device
	The file must be an .xlsx and must be less than 20MB in size to be successfully loaded. Form may respond slowly for a large number of limited partners
	Limited Partners *
	* By checking this box I confirm all limited partners (listed above) have executed the partnership deed and the amounts committed to
	the partnership are true and correct
	KO.
	40,
	O'

Legislative requirement (Partnership deed, Investment plan, Skills and resources)

	have an investment plan? *
	O No ent plan part of the partnership deed? *
O Yes	O No
O res	O NO
Specify clause	e/schedule *
\\/;!! 4b t b:-	0 characters of 500 used
ESVCLPs? *	only carry on activities that are related to making eligible venture capital investments or investing in VCLPs or
O Yes	O No

Details of the investment plan

Please ensure the answers provided below are comprehensive and reflect what is in your investment plan (included in the partnership deed). You may copy sections of your investment plan if they answer the questions sufficiently. Will the partnership's investment plan focus on making eligible venture capital investments or investments in VCLPs or ESVCLPs? * O Yes O_{No} Type of investments O Pre-seed Percentage % O Seed Percentage O Start-up Percentage % C Early expansion Percentage O Turnaround Percentage % O LBO/MBO/MBI Percentage Expansion Percentage % O Late Stage Percentage % Other (please specify) Please describe Percentage % How many investments will the partnership make? * Amount per investment a characters of 200 used What are the stages of development of the entities in which the partnership proposes to invest? * 0 characters of 5,000 used What are the levels of cash flow of those entities? * D characters of 5, ODD used What are the levels of technology of those entities? * 0 characters of 5,000 used What are the proportions of intellectual property to total assets of those entities? *

D characters of 5 ODD use

What are the amount of tangible assets and collateral of those entities against which borrowings may be secured? *

D characters of 5.0DO used



Documents inviting investment Are there any documents issued inviting investment in the partnership? * O No Upload offer documents (information memorandum) Please provide reasons why documents are not being provided * Skills and resources to implement my investment plan Team member 1 Given name(s) Family name * Relevant qualifications and experience * Upload CV * Please ensure you upload one document that includes a CV for each key person. Time commitments of each member of the partnership management team * The table is designed to capture each team member's FTE* time commitment at each stage of the partnership lifecycle. For example if a team member was working on the partnership full-time over each stage, then their commitment level would be 100% at each stage, rather than totalling 100% over the different stages. Similarly, committing 10% of their FTE to the partnership would only allow them to commit a maximum of 10% at each stage. * FTE = estimated number of hours per week/40hrs x 100% Capital raising Investment stage Exit stage Total time spent Name (%FTE) stage Partnership (%FTE) 0.00 Total FTE Where will the partnership source investment opportunities from? * 0 characters of 1,000 used Managing an investment portfolio * 0 characters of 1,000 used Realisation of returns from investments

D characters of 1,000 used

Yes O No	vith the partnership as well as ABC Fu	nd LP that is not a pa		eneral partner for nis general partne
Other Partnership Name 1				
Partnership Name *				
Time commitment of each to	eam member for partnership group *			
commitments, Each column	nture each team member's FTE* time on In must add up to less than or equal to of hours per week/40hrs x 100%		ne partnership group	and any other
Name	Commitment to this Partnership (%FTE)	Commitment to other Partnerships (%FTE)	Commitment to other funds or business commitments (%FTE)	Total commitment cannot be greater than 100% per tea member (%FTE)
Team member 1				
				0
	. 0			

Partnership group

Published customer list

Please provide the following details as a contact for the AFOF and for publication on the customer list should your application for registration be successful.

The department provides lists of partnerships registered under the VC Act on its website at www.business.gov.au (https://business.gov.au/).

Individuals seeking finance may use these lists to contact partnerships directly.

Name of contact person

Given name(s) *		
Family name *		
•		
Partnership name *		
Partnership address		
s this an Australian or international address?	*	
O Australian O International		
Please input the address *		
Start typing full address here		
Address Line 1 *		
Address Line 2		•
City *	State*	Post Code *
Please input the address *		
Start typing full address here		
Address Line 1 *		
Address Line 2		
Suburb/ City *	State/ Province *	Postcode/ Zipcode *
Country *		
Contact number *		
Email*		
Brief description of investment focus *		
		0 characters of 300 used

Declaration

	O No
I declare the applic	ation for registration meets the requirements under s11-1 of the VC Act *
O Yes	O _{No}
Provide a stateme	ant from the general partner as to whether the partnership meets the registration requirements of an AFOF *
D	0 characters
O Yes	nt have sufficient funds to begin its investment program? * No
Does the applica	nt meet the registration requirements of an AFOF as set out in Division 9 of the Venture Capital Act (2002)? *
O Yes	O No
Do vou. as the ge	eneral partner of the applicant, understand that giving false or misleading information is a serious offence
O Yes	O No
l,	
State in relation t	x
	general partner of the applicant, have read and or taken advice on the Venture Capital Act (2002), the relevan of the Income Tax Assessment Act 1997, and regulations and legislative instruments made under these statu
	d my obligations under these laws;
	general partner of the applicant, will provide further information in support of this application if requested;
 to the best 	t of my knowledge and belief, the information provided in this form is true and correct in all material particular
) * D h l.:	this box I agree to all of the above declarations and confirm all of the above statements to be true
By checking	this box i agree to all of the above declarations and confirm all of the above statements to be true
* By including	my name in this application it is deemed to be my signature for the purpose of this application
State your name	*
Feedback	
Feedback	about us?
	about us?