

WITHDRAWAL FORM

This Form relates to a Product Disclosure Statement dated 11 December 2025 ("PDS") issued by The Trust Company (RE Services) Limited ABN 45 003 278 831, AFSL 235150, for the offer of units in the Barwon Global Listed Private Equity Fund AF ("Fund"). Terms defined in the PDS have the same meaning in this Withdrawal Form.

Please note Minimum Withdrawal Amount of \$10,000.

Responsible Entity: The Trust Company (RE Services) Limited (ABN 45 003 278 831, AFSL 235150) (**we, us, our**)

Level 14, 123 Pitt Street, Sydney NSW 2000

t: +61 2 9229 9000

w: perpetual.com.au

Investment Manager and Registry Manager: Barwon Investment Partners Pty Ltd (ABN 19 116 012 009, AFSL 298445) (**Barwon, Investment Manager, Registry Manager**)

Level 7, 275 George Street, Sydney NSW 2000

t: +61 2 9216 9600

w: barwon.net.au

e: investors@barwon.net.au

f: +61 2 9221 4276

| | |
|--------------------------------|--|
| Account/Investor Number | |
| Account/Investor Name | |
| Contact Phone Number | |
| Contact Email Address | |

1. Redemptions/Withdrawal

| | |
|---|--|
| Withdrawal Date (if applicable): | |
| Withdrawal Amount: | <input type="checkbox"/> In \$: <input type="checkbox"/> In Units: |
| Payment Method: | <input type="checkbox"/> Pay to the existing bank account currently on file <input type="checkbox"/> Pay to the bank account provided below (if you select this option you may be required to provide additional information to verify the new bank account details prior to payment) |
| Your Bank Account Details: | |
| Bank: | |
| Account Name: | |

| | |
|------------------------|--|
| BSB: | |
| Account Number: | |

2. Declaration

I/we declare and agree each of the following:

- I/we have read the current PDS and acknowledge this withdrawal request is subject to the terms and conditions set out in the current PDS.
- To the maximum extent permitted by law, I/we release, discharge and indemnify The Trust Company (RE Services) Limited ABN 45 003 278 831 from and against all actions, proceedings, accounts, costs, expenses, charges, liabilities, claims and demands arising directly or indirectly as a result of instructions given in this form.
- My/our details in this form is true and correct.

3. Signatures

| Investor Type | Who should sign |
|---|---|
| Individual | where the investment is in one name, the investor must sign |
| Joint investors | where the investment is in more than one name, all investors must sign |
| Company | two directors or a director and a company secretary must sign, unless you are a sole director and sole company secretary |
| Trust | each trustee must sign or, if a corporate trustee, then as for a company |
| Partnership | each partner |
| Association or Registered co-operative | each office bearer |
| Government body | relevant principal officer/authorized signatory |
| Power of attorney | if signed by the unit holder's attorney, the power of attorney must have 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 |

Applicant 1

| Signature | Full Name | Date |
|-----------|-----------|------|
|-----------|-----------|------|

Tick capacity (mandatory for companies):

- Sole Director and Company Secretary
- Director
- Secretary
- Non-corporate trustee
- Partner

Applicant 2

| Signature | Full Name | Date |
|-----------|-----------|------|
|-----------|-----------|------|

Tick capacity (mandatory for companies):

- Director
- Secretary
- Non-corporate trustee
- Partner

Please email your signed withdrawal form to investors@barwon.net.au.

Alternatively, withdrawal forms can be sent by mail to:

Barwon Global Listed Private Equity Fund AF
Barwon Investment Partners
GPO Box 994
Sydney NSW 2001