STATE STREET INVESTMENT MANAGEMENT

State Street® SPDR® S&P®/ASX iBoxx Australian Government Bond ETF

The Responsible Entity:
State Street Global Advisors, Australia Services Limited
ABN 16 108 671 441 AFS Licence No. 274900

State Street Investment Management is the business name for State Street Global Advisors, Australia, Limited (AFSL 238276, ABN 42 003 914 225), the Investment Manager.

All Registry communications to:
MUFG Corporate Markets (AU) Limited
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Email: forms@cm.mpms.mufg.com
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Full Name(s) of Registered Holding

Account Designation

Registered Address

Postcode

Securityholder Reference Number (SRN)
Or Holder Identification Number (HIN)

A REINVESTMENT PLAN APPLICATION OR VARIATION

Please use a BLACK pen. Print CAPITAL letters inside the shaded areas. A B C 1 2 3

Where a choice is required, mark the box with an 'X' X

This form is to be completed where the Unitholder wishes to have their payments reinvested under the rules of the Reinvestment Plan.

I/We being the above named holder of registered units wish to participate in the Plan as indicated below.

I/We authorise the application of the payment to me/us with respect to the number of units participating in the Plan at the price and subject to the rules of the Plan.

I/We hereby agree to be bound by the rules of the Plan in subscribing for additional units.

I/We acknowledge that I/we may vary or cancel my/our participation in the Plan, in accordance with the rules of the Plan. This will cancel any earlier Plan instructions and take priority over any direct credit instructions.

Degree of Participation (cross appropriate box):

☐ **FULL PARTICIPATION** – Including any further acquisitions.

or

☐ **PARTIAL PARTICIPATION** – Please specify the number of units to participate in the Plan

B SIGNATURE(S) OF UNITHOLDER(S) – THIS MUST BE COMPLETED

Unitholder 1 (Individual)

Sole Director and Sole Company Secretary/Director (delete one)

Joint Unitholder 2 (Individual)

Director/Company Secretary (delete one)

Joint Unitholder 3 (Individual)

Date ____/____/____

Signing Instructions: This form should be signed by the Unitholder. If a joint holding, all Unitholders should sign. If signed by the Unitholder's attorney, the power of attorney must have been previously noted by the registry or a certified copy attached to this form. If executed by a company, the form must be executed in accordance with the company's constitution and the *Corporations Act 2001* (Cth) (or for New Zealand companies, the *Companies Act 1993*).

Personal Information Collection Notification Statement: MUFG Pension & Market Services ("MPMS") advises that your personal information is collected by MPMS organisations for the administration of your investment as required or permitted by the *Corporations Act 2001* (Cth) and other legislation. Some or all of your personal information may be disclosed to contracted third parties, or related MPMS companies in Australia and overseas. Your information may also be disclosed to Australian government agencies, law enforcement agencies and regulators, or as required under other Australian law, contract, and court or tribunal order. For further details about our personal information handling practices, including how you may access and correct your personal information and raise privacy concerns, visit our website at www.mpms.mufg.com for a copy of the MPMS privacy policy, or contact us by phone on +61 1300 554 474 to request a copy.