



ALLIANCEBERNSTEIN®

AB Funds

6 October 2025

Application Form—Existing Unit Holder

Please complete this Application Form—Existing Unit Holder if you are an investor in an AB Fund and you want to make an additional investment.

Please refer to the relevant AB Fund Product Disclosure Statement for information about how to apply.

Investment Details

Please enter the amount to be invested and your account number.

Fund Name	APIR Code	Fund Code (include reference with your payment)	Account Number	Investment Amount A\$
AB Dynamic Global Fixed Income Fund	ACM0001AU	DGFIDY		
AB Managed Volatility Equities Fund—MVE Class—Active ETF	ACM0006AU	ABMVOLTS		
AB Concentrated Australian Equities Fund Class A	ACM0005AU	CAEFUND		
AB Global Equities Fund	ACM0009AU	COREAU		
AB Sustainable Global Thematic Equities Fund	ACM8902AU	AUSSGT		
AB Global Strategic Core Equities Fund	ACM3679AU	AUSGSC		

Payment Method and Details

Please indicate your preferred method of payment by ticking the appropriate box below:

Direct Credit ☐ Please pay account: AllianceBernstein Investment Management Australia Limited - Application Account
BSB: 012 055 A/C no.: 838316316
Please reference the relevant AB Fund code per the table above

SWIFT ☐ Please pay SWIFT code ANZBAU3M
Please reference the relevant AB Fund code per the table above

Please contact us at (02) 9255 1299 or by email at aust_clientservice@alliancebernstein.com with any questions about payments.

In addition to making your payment, please send your completed Application Form – Existing Unit Holder to us by mail, courier or fax at:

Address: AllianceBernstein Unit Registry
C/- MUFG Corporate Markets (AU) Limited
Locked Bag 5038
Parramatta NSW 2124
Fax: (02) 9287 0372

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Existing Unit Holder

Authorised Signatures

Signing Instructions

Individuals—where an investment is in one name, the investor must sign.

Joint Holdings—where an investment is a joint holding in more than one name, all investors must sign.

Companies incl. corporate trustees—two directors or a director and a secretary must sign, unless you are a sole director.

Trusts—all the trustees or the responsible entity must sign.

Power of Attorney—Please provide a certified copy of the Power of Attorney. If signed by an attorney, the attorney certifies that the Power of Attorney has not been revoked.

Applicant(s) Signature(s)

First individual, director or authorised signatory

Signature

Date

Print Name

Office held (e.g., director/secretary/sole director/ attorney/
trustee or other (please specify))

Second individual, director/company secretary or authorised signatory

Signature

Date

Print Name

Office held (e.g., director/secretary/sole director/ attorney/
trustee or other (please specify))



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