

# TWELVE CAPITAL UCITS ICAV

An Irish collective asset-management vehicle with variable capital constituted as an umbrella fund established under Irish Law

## ACCOUNT OPENING AND APPLICATION FORM

Investors (the "**Applicant(s)**") willing to subscribe for shares of the **TWELVE CAPITAL UCITS ICAV** (the "**Fund**") which has been established as an open-ended Irish collective asset-management vehicle with variable capital and constituted as an umbrella fund with segregated liability between sub-funds and is authorised by the Central Bank of Ireland (the "**Central Bank**") pursuant to the provisions of the European Communities (Undertakings for Collective Investment in Transferable Securities) Regulations, 2011 (as amended) (hereinafter the "**UCITS Regulations**") for which UBS Fund Administration Services (Ireland) Limited with registered office at College Park House, South Frederick Street, Dublin 2 in Ireland serves as the central administration (the "**Administrator**"), must complete this account opening and application form ("**Application Form**"). For any questions, please contact the Administrator Shareholder Services Team (contact details below).

The completed Application Form and accompanying documentation (the "**Account Opening Documentation**") that are outlined in Sections "FATCA" and "CRS Self-Certification" and in Appendix 1 to this Application Form must be sent via post directly to the Administrator at the following address:

**UBS Fund Administration Services (Ireland) Limited**

c/o UBS Fund Administration Services Luxembourg S.A.

Investor Services Team

E-Mail: [TA-InvestorKYConboarding@ubs.com](mailto:TA-InvestorKYConboarding@ubs.com)

Office address: 5, Rue Jean Monnet, L-2180 Luxembourg

Mailing Address: P.O. Box 369, L-2013 Luxembourg

The Account Opening Documentation must be signed physically (in which case the wet-ink original hardcopies are to be forwarded by post-mail) or with qualified electronical signature ("**QES**"). However, it can be sent in advance by e-mail to the Investor Services Team, unless the Administrator requests to provide it through a different channel (e.g. uploading them to an investor web portal) instead of e-mail.

Please note that the Application Form is for the purpose of opening a registered account with the Fund (the "**Account**") and the initial subscription still needs to be instructed separately to the following address by using the Administrator's transaction form (or any other form agreed with the Administrator):

Dealing Services Team

Email (preferred): [TA-Dealingservices@ubs.com](mailto:TA-Dealingservices@ubs.com)

Telephone: +352 43 82 82

Subscription proceeds must be made available to the Administrator by cash transfer in line with the Subscription Settlement Cut-Off time (as detailed in the Prospectus of the Fund) for payment of subscription monies in the relevant currencies.

Unless the context otherwise requires, capitalised terms used without definition shall have the meaning given to them in the latest prospectus of the Fund, which includes sub-fund supplements and any addenda (together, the "**Prospectus**"). Any references to the Fund herein shall be references to the board of directors of the Fund or, where appropriate, to the Funds' management company, MultiConcept Fund Management S.A. (the "**Management Company**") or to the Administrator acting on behalf of the Fund.

The provisions of this Application Form (including the appendices) apply to all registered accounts opened by the Applicant with the Fund and **should be read in conjunction with the Prospectus of the Fund supplemented by the relevant country specific annexes (if any), the Fund's instrument of incorporation, and, if your Account is served in an EU/EEA country where the key investor information document and/or PRIIPs key information document ("KID") is a mandatory document, with the up-to-date version of the relevant KID.** These documents can be found on [White Labelling - Fund Management Company Services | UBS Luxembourg](#)

**Please note the Fund will hold and process your personal information in accordance with applicable Irish Data Protection Legislation (currently the Irish Data Protection Acts 1988 to 2018). Further information is available in**

**the data protection notice made available by the Fund or its Management Company on the following website:**  
[White Labelling - Fund Management Company Services | UBS Luxembourg](#)

**The Applicant and investor can also directly reach out to the Fund and/or the Management Company to obtain a copy of the Fund's or the Management Company's Data Protection Notice.**

As regards how the **Administrator** may handle your data in its capacity as data controller, it is set out in the **UBS Privacy Notice** which is available at [Ireland Privacy Statement | UBS Global](#).

**By signing this Application Form you confirm that you have read and acknowledge the Data Protection Notice as well as the UBS Privacy Notice.**

The validity, construction and performance of the Application Form and any contractual or non-contractual obligations arising out of or in connection with it are governed by and construed in accordance with the laws of Ireland and the requirements of the Central Bank. Any dispute including a dispute relating to non-contractual obligations arising out of the Application Form will be submitted exclusively to the courts of Ireland.

## I. How to complete the Application Form

Please select the capacity in which the Applicant (“**you**”) is acting regarding the investments in the Fund and complete the relevant sections of the Application Form mentioned under the selected capacity. The review and completion of the relevant sections is mandatory:

- Investing on own behalf as a **Natural Person** - I am subscribing for shares in the Fund in my own name and on my own behalf (and not for another person being economically or otherwise entitled to such investment):
  - Sections II. Intended nature of business relationship with the Fund
  - Sections III. Natural Person
  - Sections VI.A. FATCA & VI.B. CRS
  - Sections VII. Additional details
  - Sections VIII. Declarations & Signatures
  
- Investing on own behalf as a **Legal Entity** - We are subscribing for shares in the Fund in our own name and on our own behalf (and not for another person being economically or otherwise entitled to such investment):
  - Sections II. Intended nature of business relationship with the Fund
  - Sections IV. Legal Persons - Corporate and Legal Entity (investing on own behalf)
  - Sections VI.A. FATCA & VI.B. CRS
  - Sections VII. Additional details
  - Sections VIII. Declarations & Signatures
  
- Investing on behalf of an underlying investor as a **Financial Institution (Intermediary)** - We are subscribing for shares in the Fund in our own name but on behalf of underlying clients (“**Underlying Investors**”):
  - Sections II. Intended nature of business relationship with the Fund
  - Sections V. Financial Institutions (acting as Intermediary)
  - Sections VI.A. FATCA & VI.B. CRS
  - Sections VII. Additional details
  - Sections VIII. Declarations & Signatures

## II. Intended nature of the business relationship with the Fund

Please select as appropriate:

- To generate an investment return
- Investment Diversification
- Distributor of the Fund with a distribution agreement signed with the Management Company or the Fund
- Sub-distributor of the Fund (*please indicate name and address of the Distributor*): \_\_\_\_\_
- Custodian acting on behalf of Underlying Investors
- Other type of Intermediary, e.g. Trading Platform
- Other (please specify): \_\_\_\_\_

### III. Natural Person

#### A. Registration Details

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Surname(s) and first name(s)  
(the "Applicant" or "We") \_\_\_\_\_

Place and date of birth \_\_\_\_\_

Nationality(ies) \_\_\_\_\_

Full postal address of the persons' main residence:

Street / Number \_\_\_\_\_

Post Code / City \_\_\_\_\_

Country \_\_\_\_\_

Official national ID number \_\_\_\_\_

Telephone number \_\_\_\_\_

Email address \_\_\_\_\_

**i. As a natural person,**

- I confirm that I neither am or was a politically exposed person ("**PEP**") pursuant to the CJA (defined below), nor am or was a direct family member, nor am or was a person known to be a close associate of a PEP.
- If I am or was a PEP or a direct family member or a person known to be a close associate of a PEP, I declare my relevant position / location as follows: \_\_\_\_\_

**ii.** As a natural person, please complete either Option A **or** Option B

**Option A:**

**By ticking the box below**, the undersigned (and any person or entity on whose behalf Shares in the Fund are being acquired) confirms that they do **not** constitute any of the following:

- (i) Russian national
- (ii) Natural person residing in Russia
- (iii) Legal person, entity or body established in Russia
- (iv) Legal person, entity or body which is owned by a Russian national or a natural person residing in Russia
- (v) Belarusian national
- (vi) Natural person residing in Belarus
- (vii) Legal person, entity or body established in Belarus;
- (viii) Legal person, entity or body which is owned by a Belarusian national or a natural person residing in Belarus

**Option B:**

**By ticking the box below**, the undersigned confirms that it (or any person or entity on whose behalf Shares in the Subscribed Fund are being acquired) **do constitute** any of the following:

- (i) Russian national;
- (ii) Natural person residing in Russia;
- (iii) Legal person, entity or body established in Russia;
- (iv) Legal person, entity or body which is owned by a Russian national or a natural person residing in Russia;
- (v) Belarusian national;
- (vi) Natural person residing in Belarus;
- (vii) Legal person, entity or body established in Belarus;
- (viii) Legal person, entity or body which is owned by a Belarusian national or natural person residing in Belarus.

**By ticking the box below**, I/we confirm that **I/we are also** a Russian or Belarusian national or natural person residing in Russia or Belarus or an owner of a Russian or Belarusian legal person, entity or body which is permanently or temporarily resident in an EU Member State, the EEA or Switzerland or is a national of an EU Member State, the EEA or Switzerland.

I/We understand that this information is being gathered by the Fund in order to comply with applicable obligations imposed on it under Article 5f of Council Regulation (EU) 833/2014 as amended and Article 1(y) of Regulation (EC) No. 765/2006 as amended.

## **B. Profession and general source of wealth of the Applicant**

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### **i. Please provide details on how your overall wealth has been generated:**

Salaried employment

Name of employer: \_\_\_\_\_

Industrial Sector: \_\_\_\_\_

Job/Position: \_\_\_\_\_

Self-employed

Name of company/business: \_\_\_\_\_

Industrial Sector: \_\_\_\_\_

Retired

Last position held: \_\_\_\_\_

Return or income on/from investment(s)

Details about the investment (please provide supporting documents): \_\_\_\_\_

Other

Please specify: \_\_\_\_\_

### **ii. Please provide any additional details on how your overall wealth was generated (as appropriate):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Note: Documentary evidence of the information may be required*

### **iii. Estimated Total Net Worth**

Up to €1 million    Up to €5 million    Up to €10 million    Up to €100 million    Over €100 million

## **C. Source of the funds that are being invested in the Fund**

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**It is hereby represented that the funds made available to the Fund do not and will not have a criminal origin of whatsoever nature, and in particular do not and will not constitute the proceeds of money laundering or primary offences relating thereto; and the investments made and the profits derived from the Fund will not be used for terrorism financing and that the source of funds that were brought into the Fund (check all that apply) are deriving from:**

Employment/Payroll/Pension/Retirement Funds (make sure to also complete section III.B. accordingly): \_\_\_\_\_

Insurance Policy

Divorce/other Legal Settlement

Operating Business (specify - (make sure to also complete section III.B.): \_\_\_\_\_

- 
- Inheritance (specify): \_\_\_\_\_
- Sale of House, Business, other (specify): \_\_\_\_\_
- Return on investment in (specify - (make sure to also complete section III.B.)): \_\_\_\_\_
- Investment Income (e.g., dividends, interests) (specify - (make sure to also complete section III.B.)): \_\_\_\_\_
- 
- Other Savings (specify): \_\_\_\_\_
- Other (specify): \_\_\_\_\_

**Note: Documentary evidence of the information may be required and in alignment with section III. B**

### **D. Expected investment activity**

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Please select as appropriate:

**i. Expected total amount to be invested:**

- Up to €100,000     Up to €500,000     Up to €1,000,000     Up to €10,000,000     Over €10,000,000

**ii. Expected Period of Investment:**

- < 3 years     3 – 5 years     > 5 years

**iii. Planned Frequency of Future Investment:**

- Lump Sum     Weekly     Monthly     Quarterly     Yearly     Sporadic

## IV. Legal Persons - Corporate and Legal Entity (investing on own behalf)

### A. Registration Details

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Name (legal Denomination)  
(the "Applicant" or "We" or "Company") \_\_\_\_\_

Account designation  
(if different from Applicant name) \_\_\_\_\_

Type of Investor and legal form  
(company, partnership, trust, other entity) \_\_\_\_\_

Registration number \_\_\_\_\_

Registered address:

Street / Number \_\_\_\_\_

Post Code / City \_\_\_\_\_

Country \_\_\_\_\_

Mailing address:  
(if different from Reg. Address) \_\_\_\_\_

Contact person / Department \_\_\_\_\_

Telephone number \_\_\_\_\_

Email address \_\_\_\_\_

Please complete either Option A **or** Option B

#### Option A:

**By ticking the box below**, the undersigned (and any person or entity on whose behalf Shares in the Fund are being acquired) confirms that they do **not** constitute any of the following:

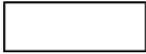
- (ix) Russian national
- (x) Natural person residing in Russia
- (xi) Legal person, entity or body established in Russia
- (xii) Legal person, entity or body which is owned by a Russian national or a natural person residing in Russia
- (xiii) Belarusian national
- (xiv) Natural person residing in Belarus
- (xv) Legal person, entity or body established in Belarus;
- (xvi) Legal person, entity or body which is owned by a Belarusian national or a natural person residing in Belarus

#### Option B:

**By ticking the box below**, the undersigned confirms that it (or any person or entity on whose behalf Shares in the Subscribed Fund are being acquired) **do constitute** any of the following:

- (ix) Russian national;
- (x) Natural person residing in Russia;
- (xi) Legal person, entity or body established in Russia;
- (xii) Legal person, entity or body which is owned by a Russian national or a natural person residing in Russia;
- (xiii) Belarusian national;
- (xiv) Natural person residing in Belarus;
- (xv) Legal person, entity or body established in Belarus;
- (xvi) Legal person, entity or body which is owned by a Belarusian national or natural person residing in Belarus.

**By ticking the box below**, I/we confirm that I/we are also a Russian or Belarusian national or natural person residing in Russia or Belarus or an owner of a Russian or Belarusian legal person, entity or body which is permanently or temporarily resident in an EU Member State, the EEA or Switzerland or is a national of an EU Member State, the EEA of Switzerland.



I/We understand that this information is being gathered by the Fund in order to comply with applicable obligations imposed on it under Article 5f of Council Regulation (EU) 833/2014 as amended and Article 1(y) of Regulation (EC) No. 765/2006 as amended.

## **B. Profile Form of the Legal Entity**

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- i. **We are a listed company:** \_\_\_\_\_  
 Yes, stock exchange: \_\_\_\_\_  
 No
- ii. **Industrial Sector:** \_\_\_\_\_
- iii. **Does the Company conduct any form of commercial operation (operating activity)?**       Yes       No
- iv. **Main Business Activities that generated the assets of the Company:**  
\_\_\_\_\_  
\_\_\_\_\_
- v. **Number of employees:**
- vi. **Is the Company wholly owned by a group of companies?**  
 Yes (specify name): \_\_\_\_\_  
 No
- vii. **Is the Company owned or controlled by a government / government entity?**  
 Yes (specify): \_\_\_\_\_  
 No

**C. Source of wealth of the Company**

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**i. Please provide details on how the overall wealth of the Company was generated:**

- Banking Activities
- Insurance Activities
- Profit from sale of business
- Profit from sale of property
- Operating business Income
- Investment Return
- Investment Income (e.g. dividends, interests, etc...)

Details about the sale and/or the investment return/income (please provide supporting documents):

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**ii. Please provide any additional details on how your overall wealth was created:**

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*Note: Documentary evidence of the information may be required*

**iii. Estimated Total Net Worth:**

- Up to €1 million
- Up to €5 million
- Up to €10 million
- Up to €100 million
- Over €100 million

**D. Source of the funds that are being invested in the Fund**

---

**It is hereby represented that the funds made available to the Fund do not and will not have a criminal origin of whatsoever nature, and in particular do not and will not constitute the proceeds of money laundering, primary offences relating thereto; and the investments made and the profits derived from the Fund will not be used for terrorism financing and that the source of funds that were brought into the Fund (check all that apply) are deriving from:**

- Underlying Investor/Client's money
  - Insurance Policy
  - Operating Business (specify): \_\_\_\_\_
  - Sale of Property, Business, other (specify): \_\_\_\_\_
  - Return on investment in (specify): \_\_\_\_\_
  - Investment Income (e.g., dividends, interests) (specify): \_\_\_\_\_
  - Other (specify): \_\_\_\_\_
- 
- 
- 

*Note: Documentary evidence of the information may be required and in alignment with section IV. C.*

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## E. Expected investment activity

### i. Expected total amount to be invested:

Up to €100,000    Up to €500,000    Up to €1,000,000    Up to €10,000,000    Over €10,000,000

### ii. Expected Period of Investment:

< 3 years    3 – 5 years    > 5 years

### iii. Planned Frequency of Future Investment:

Lump Sum    Weekly    Monthly    Quarterly    Yearly    Sporadic

## F. Declaration of Beneficial Ownership

### i. I/we hereby declare that I/we will submit, or have submitted already, to the Administrator, a share-/unit-/interest holder ("Shareholder") structure of the Applicant, together with Shareholder extracts on dated and signed company headed paper, showing direct and indirect ownership of the Applicant and including all the intermediate entity levels of ownership with names of entities, address, names of Beneficial Owners<sup>1</sup> and percentages of ownership.

### ii. Please select one of the below boxes:

1.  I/we confirm there is a natural person(s) who ultimately **owns** the Applicant through direct or indirect ownership of a sufficient percentage of the shares or voting rights or ownership interest in that Applicant entity, including through bearer shareholdings. A shareholding of 25 % plus one share or an ownership interest of more than 25 % held by a natural person shall be an indication of direct ownership. A shareholding of 25 % plus one share or an ownership interest of more than 25 % held by a corporate entity, which is under the control of a natural person(s), or by multiple corporate entities, which are under the control of the same natural person(s), shall be an indication of indirect ownership.  
Please complete personal details in Section iii. of this declaration.
2.  I/we confirm there is no Beneficial Owner as per Section 1 above and I/we confirm there is a natural person(s) who ultimately **controls** the Investor **by other means** (e.g. through shareholder agreements or otherwise providing power to revoke and/or select the board of directors).  
Please complete personal details in Section iii. of this declaration.
3.  I/we confirm there is no Beneficial Owner as per Section 1 or Section 2 above and therefore I/we confirm that the Senior Managing Official(s) ("SMO") should be considered as Beneficial Owner(s).  
Please complete personal details in Section iii. of this declaration
4.  I/we confirm that that the Applicant or ultimate Shareholder has the form of a trust, foundation or similar legal arrangement and I/we confirm that the Beneficial Owner mentioned in Section iii. is one of the below.  
**Please note Section iii. needs to be completed for each of the below persons as each are being considered Beneficial Owners.**
  - a.  the settlor;
  - b.  the trustee;
  - c.  the protector;
  - d.  the beneficiary;
  - e.  other natural person exercising ultimate control over the trust, foundation or legal arrangement by means of direct or indirect ownership or by other means;

<sup>1</sup> Definition of a Beneficial Owner:

Article 3 of AMLD4 defines a beneficial owner as meaning any natural person(s) who ultimately owns or controls the customer and/or the natural person(s) on whose behalf a transaction or activity is being conducted and includes at least:

(a) in the case of corporate entities:

(i) the natural person(s) who ultimately owns or controls a legal entity through direct or indirect ownership of a sufficient percentage of the shares or voting rights or ownership interest in that entity, including through bearer shareholdings, or through control via other means, other than a company listed on a regulated market that is subject to disclosure requirements consistent with Union law or subject to equivalent international standards which ensure adequate transparency of ownership information. A shareholding of 25 % plus one share or an ownership interest of more than 25 % in the customer held by a natural person shall be an indication of direct ownership. A shareholding of 25 % plus one share or an ownership interest of more than 25 % in the customer held by a corporate entity, which is under the control of a natural person(s), or by multiple corporate entities, which are under the control of the same natural person(s), shall be an indication of indirect ownership;

(ii) if, after having exhausted all possible means and provided there are no grounds for suspicion, no person under point (i) is identified, or if there is any doubt that the person(s) identified are the beneficial owner(s), the natural person(s) who hold the position of senior managing official(s), the obliged entities shall keep records of the actions taken in order to identify the beneficial ownership under point (i) and this point;

(b) in the case of trusts:

(i) the settlor; (ii) the trustee(s); (iii) the protector, if any; (iv) the beneficiaries, or where the individuals benefiting from the legal arrangement or entity have yet to be determined, the class of persons in whose main interest the legal arrangement or entity is set up or operates; (v) any other natural person exercising ultimate control over the trust by means of direct or indirect ownership or by other means;

In case of discretionary beneficiaries are unknown at the time of the 1<sup>st</sup> investment by a trust, any natural person(s) exercising control as described in (b), whereby the discretionary beneficiaries are to be identified before any payment is released;

(c) in the case of legal entities such as foundations, and legal arrangements similar to trusts, the natural person(s) holding equivalent or similar positions to those referred to in point (b);

iii. Please complete as appropriate and provide further copies of this page if more than three Beneficial Owners:

	<b>Beneficial Owner 1</b>	<b>Beneficial Owner 2</b>	<b>Beneficial Owner 3</b>
Surname:			
First name:			
Nationality:			
Date of Birth:			
Place of Birth (city):			
Position:			
Residential or professional address: Street No Postal Code City Country			
Passport/identity card no.:			
Country of tax residence:			
Type of Beneficial Owner: (Shareholder, controlling person, SMO, Settlor,...)			

**Profile Form of the Beneficial Owners**

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i. If section F iii. above has Beneficial Owners disclosed please complete the following with regards to the profession, source of wealth and source of the funds of each Beneficial Owner:

Surname(s) and first Name(s): \_\_\_\_\_

Salaried employment

Name of employer: \_\_\_\_\_

Industrial Sector: \_\_\_\_\_

Job/Position: \_\_\_\_\_

Self-employed

Name of company/business: \_\_\_\_\_

Industrial Sector: \_\_\_\_\_

Retired

Last position held: \_\_\_\_\_

Return or income on/from investment(s)

Details about the investment (please provide supporting documents):

\_\_\_\_\_  
\_\_\_\_\_

ii. Please provide additional information on how the wealth of each Beneficial Owner has been generated and describe how funds have been used to create the Company (if any):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Note: Documentary evidence of the information provided may be required*

iii. Estimated Total Net Worth (Mandatory):

Up to €1 million     Up to €5 million     Up to €10 million     Up to €100 million     Over €100 million

## V. Financial Institutions (acting as Intermediary)

### A. Registration Details

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Name (legal Denomination)  
(the "Applicant" or "We" or "Company") \_\_\_\_\_

Account designation  
(if different from Applicant name) \_\_\_\_\_

Type of Investor and legal form  
(company, partnership, trust, other entity) \_\_\_\_\_

Registration number \_\_\_\_\_

Registered address:

Street / Number \_\_\_\_\_

Post Code / City \_\_\_\_\_

Country \_\_\_\_\_

Mailing address:  
(if different from Reg. Address) \_\_\_\_\_

Contact person / Department \_\_\_\_\_

Telephone number \_\_\_\_\_

Email address \_\_\_\_\_

### B. Profile Form of the Intermediary

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- i. **Name of financial regulator to which the Intermediary is subject to:** \_\_\_\_\_
- ii. **Is the Intermediary a listed company?**
- Yes, name of the stock exchange: \_\_\_\_\_
- No
- iii. **Is the FI a subsidiary of a financial corporate group?**
- Yes, name & country of organization of the corporate: \_\_\_\_\_
- No
- iv. **Is the Company owned or controlled by a government / government entity?**
- Yes (specify): \_\_\_\_\_
- No
- v. **Source of Funds:**

**It is hereby represented by the Applicant that the funds made available to the Fund originate from Underlying Investor(s) and do not have a criminal origin of whatsoever nature, and in particular do not constitute the proceeds of money laundering, primary offences relating thereto; and the investments made, and the profits derived from the Fund will not be used for terrorism financing.**

*Note: Documentary evidence of the information provided may be required*

#### Type of Underlying Investor/s:

- Individual  Corporate  Investment fund
- Pension fund  Holding company / trust  Government agency
- Further intermediary  Other: \_\_\_\_\_

Geographical location(s) of Underlying Investor/s of the Intermediary: \_\_\_\_\_

**vi. Beneficial Owner<sup>1</sup> Form of Underlying Investors of Fls<sup>2</sup>:**

**There are one or more Underlying Investors who are a natural person owning more than 25% of the shares or units invested by us as Intermediary through this Account and whose details are provided below:**

*Please note that in some cases a threshold of 10% may apply.*

	Beneficial Owner 1	Beneficial Owner 2	Beneficial Owner 3
Surname:			
First name:			
Nationality:			
Date of Birth:			
Place of Birth (city):			
Position:			
Residential or professional address: Street No Postal Code City Country			
Passport/identity card no.:			
Country of tax residence:			
Type of Beneficial Owner: (Shareholder, controlling person, SMO, Settlor,...)			

**C. Declaration of Beneficial Ownership of the Intermediary**

i.  **I/we hereby declare that I/we will submit, or have submitted already, to the Administrator, a share-/unit-/interest holder (“Shareholder”) structure of the Applicant, together with Shareholder extracts on dated and signed company headed paper, showing direct and indirect ownership of the Applicant and including all the intermediate entity levels of ownership with names of entities, address, names of Beneficial Owners<sup>(1)</sup> and percentages of ownership.**

ii. Please select **one of the below boxes**:

1.  I/we confirm there is a natural person(s) who ultimately **owns** the Applicant through direct or indirect ownership of a sufficient percentage of the shares or voting rights or ownership interest in that Applicant entity, including through bearer shareholdings. A shareholding of 25 % plus one share or an ownership interest of more than 25 % held by a natural person shall be an indication of direct ownership. A shareholding of 25 % plus one share or an ownership interest of more than 25 % held by a corporate entity, which is under the control of a natural person(s), or by multiple corporate entities, which are under the control of the same natural person(s), shall be an indication of indirect ownership.  
Please complete personal details in Section iii. of this declaration.

2.  I/we confirm there is no Beneficial Owner as per Section 1 above and I/we confirm there is a natural person(s) who ultimately **controls** the Investor **by other means** (e.g. through shareholder agreements or otherwise providing power to revoke and/or select the board of directors).  
Please complete personal details in Section iii. of this declaration.

3.  I/we confirm there is no Beneficial Owner as per Section 1 or Section 2 above and therefore I/we confirm that the Senior Managing Official(s) (“SMO”) should be considered as Beneficial Owner(s).  
Please complete personal details in Section iii. of this declaration

4.  I/we confirm that that the Applicant or ultimate Shareholder has the form of a trust, foundation or similar legal arrangement and I/we confirm that the Beneficial Owner mentioned in Section iii. is one of the below.  
**Please note Section iii. needs to be completed for each of the below persons as each are being considered**

<sup>2</sup> Please refer to the “Declarations and Signatures” section also for further information and expectations

**Beneficial Owners.**

- a.  the settlor;
- b.  the trustee;
- c.  the protector;
- d.  the beneficiary;
- e.  other natural person exercising ultimate control over the trust, foundation or legal arrangement by means of direct or indirect ownership or by other means;

iii. Please complete as appropriate and provide further copies of this page if more than three Beneficial Owners:

	<b>Beneficial Owner 1</b>	<b>Beneficial Owner 2</b>	<b>Beneficial Owner 3</b>
Surname:			
First name:			
Nationality:			
Date of Birth:			
Place of Birth (city):			
Position:			
Residential or professional address: Street No Postal Code City Country			
Passport/identity card no.:			
Country of tax residence:			
Type of Beneficial Owner: (Shareholder, controlling person, SMO, Settlor,...)			

## VI. Tax Declarations

### FATCA and CRS

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#### **Entity Self-Certification for FATCA and CRS**

**(Individual (including Controlling Persons) Self-Certification for FATCA and CRS proceed to page 18)**

#### **Instructions for completion and data protection notice.**

We are obliged under Section 891E, Section 891F, and Section 891G of the Taxes Consolidation Act 1997 (as amended) and regulations made pursuant to those sections to collect certain information about each account holder's tax arrangements. Please complete the sections below as directed and provide any additional information that is requested. Please note that by completing this application form you are providing personal information, which may constitute personal data within the meaning of the General Data Protection Regulation (697/2016/EU) (the "GDPR") and applicable Irish Data Protection Legislation (currently the Irish Data Protection Acts 1988 to 2018). Please note that in certain circumstances we may be legally obliged to share this information, and other financial information with respect to an account holder's interests in the Fund, with the Irish tax authorities, the Revenue Commissioners. They in turn may exchange this information, and other financial information with foreign tax authorities, including tax authorities located outside the EU.

If you have any questions about this form or defining the account holder's tax residency status, please speak to a tax adviser or local tax authority.

For further information and guidance on FATCA or CRS, please refer to the Irish Revenue or the OECD website at the following links: <http://www.revenue.ie/en/business/aeoi/index.html> or <http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/> in the case of CRS only.

*If any of the information below about the account holder's tax residence or FATCA/CRS classification changes in the future, please ensure that we are advised of these changes promptly.*

***Account holders that are Individuals or Controlling Persons should not complete this form and should complete the form entitled "Individual (including Controlling Persons) Self-Certification for FATCA and CRS".***

**(Mandatory fields are marked with an \*)**

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#### **\*Section 1: Account Holder Identification**

**\*Account Holder Name:** \_\_\_\_\_ (the "Entity")

**\*Country of Incorporation or Organisation:** \_\_\_\_\_

**\*Current (Resident or Registered) Address:**

Number: \_\_\_\_\_ Street: \_\_\_\_\_

City, town, State, Province or County: \_\_\_\_\_

Postal/ZIP Code: \_\_\_\_\_ Country: \_\_\_\_\_

**Mailing address (if different from above):**

Number: \_\_\_\_\_ Street: \_\_\_\_\_

City, town, State, Province or County: \_\_\_\_\_

Postal/ZIP Code: \_\_\_\_\_ Country: \_\_\_\_\_

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**\*Section 2: FATCA Declaration:**

Please tick either (a), (b) or (c) and complete as appropriate.

(a) The Entity is a **Specified U.S. Person** and the Entity's U.S. Federal Taxpayer Identifying number (U.S. TIN) is as follows:

U.S. TIN: \_\_\_\_\_

Or

(b) The Entity is **not a Specified U.S. Person** (Please also complete Sections 3, 4 and 5)

Or

(c) The Entity is a **US person but not a Specified U.S. Person** (Please also complete Sections 4 and 5)

Indicate exemption: \_\_\_\_\_

**\*Section 3: Entity's FATCA Classification**

**(the information provided in this section is for FATCA, please note your FATCA classification may differ from your CRS classification in Section 5):**

**3.1 Financial Institutions under FATCA:**

If the Entity is a *Financial Institution*, please tick one of the below categories and provide the Entity's GIIN at 3.2 or indicate at 3.3 the reason why you are unable to provide a GIIN.

I.	<i>Irish Financial Institution or a Partner Jurisdiction Financial Institution</i>	<input type="checkbox"/>
II.	<i>Registered Deemed Compliant Foreign Financial Institution</i>	<input type="checkbox"/>
III.	<i>Participating Foreign Financial Institution</i>	<input type="checkbox"/>

**3.2 Please provide the Entity's *Global Intermediary Identification number (GIIN)***

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**3.3 If the Entity is a *Financial Institution* but unable to provide a *GIIN*, please tick one of the below reasons:**

I.	<p>The Entity has not yet obtained a GIIN but is sponsored by another entity which does have a GIIN. Please provide the sponsor's name and sponsor's GIIN :</p> <p><b>Sponsor's Name:</b> _____</p> <p><b>Sponsor's GIIN:</b> □□□□□□.□□□□□□.□□.□□□□</p> <p><b>NOTE:</b> this option is only available to Sponsored Investment Entities in Model 1 IGA jurisdictions. Sponsored Investment Entities that do not have U.S. reportable accounts are not required to register and obtain a GIIN with the IRS unless and until U.S. reportable accounts are identified.</p>	<input type="checkbox"/>
II.	<p><b>The Entity is an Exempt Beneficial Owner</b></p> <p>Please tick and confirm the category of Exempt Beneficial Owner;</p> <p>I. <input type="checkbox"/> Government Entity</p> <p>II. <input type="checkbox"/> International Organisation</p> <p>III. <input type="checkbox"/> Foreign Central Bank</p> <p>IV. <input type="checkbox"/> Exempt Retirement Fund</p> <p>V. <input type="checkbox"/> Collective Investment Vehicle Wholly Owned by Exempt Beneficial Owners.</p>	<input type="checkbox"/>

III.	<b>The Entity is a Certified Deemed Compliant Foreign Financial Institution</b> (including a deemed compliant Financial Institution under Annex II of the IGA Agreement)  Indicate exemption: _____	<input type="checkbox"/>
IV.	<b>The Entity is a Non-Participating Foreign Financial Institution</b>	<input type="checkbox"/>
V.	<b>The Entity is an Excepted Foreign Financial Institution</b>  Indicate exemption: _____	<input type="checkbox"/>
VI.	<b>The Entity is a Trustee Documented Trust. Please provide your Trustee's name and GIIN</b>  Trustee's Name: _____ Trustee's GIIN: □□□□□□.□□□□□□.□□.□□□□	<input type="checkbox"/>

### 3.4. Non-Financial Institutions (Non-Financial Foreign Entity/NFFE) under FATCA:

If the Entity is **not** a Financial Institution, please confirm the Entity's FATCA classification below by ticking one of the below categories

I.	<b>Active Non-Financial Foreign Entity</b>	<input type="checkbox"/>
II.	<b>Passive Non-Financial Foreign Entity (NFFE)</b> (Please tick the box that applies)  <b>I. Passive Non-Financial Foreign Entity with no Controlling Persons that are specified U.S Persons.</b>  <b>II. Passive Non-Foreign Financial Entity with Controlling Persons that are specified U.S Persons.</b> (If this box is ticked, please also complete section 6.1 for each of the Controlling Person(s) of the Entity and complete an "Individual (Including Controlling Person(s) Self-certification for FATCA and CRS" form for each Controlling Person as outlined in section 6.2).	<input type="checkbox"/>
III.	<b>Excepted Non-Financial Foreign Entity</b>	<input type="checkbox"/>
IV.	<b>Direct Reporting NFFE</b>  Please provide your GIIN □□□□□□.□□□□□□.□□.□□□□	<input type="checkbox"/>

### \*Section 4: Common Reporting Standard ("CRS") Declaration of Tax Residency (Note that Entities may have more than one country of Tax Residence)

Please indicate the Entity's country of tax residence for CRS purposes, (if resident in more than one country please detail all countries of tax residence and associated tax identification numbers ("TIN")). Please refer to the OECD CRS Web Portal for AEOI for more information on Tax Residence and TIN's. <http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/#d.en.347759>.

If the Entity is not tax resident in any jurisdiction (e.g., because it is fiscally transparent), please indicate that below and provide its place of effective management or country in which its principal office is located.

**NOTE:** Under the Irish legislation implementing the CRS, provision of a Tax ID number (TIN) is required to be provided unless:

- (a) You are tax resident in a Jurisdiction that does not issue a TIN; or
- (b) You are tax resident only in a non-reportable Jurisdiction (i.e. Ireland or the USA)

Country of Tax Residency	Tax ID Number	∞If TIN unavailable Select (A, B or C) and check box below

∞If a TIN is unavailable, please tick the appropriate box as follows:

- Reason A** - The country/jurisdiction where the Account Holder is resident does not issue TINs or TIN equivalents to its residents
- Reason B** - The Account Holder is otherwise unable to obtain a TIN (*Please explain why you are unable to obtain a TIN if you selected Reason B*)
- \_\_\_\_\_
- Reason C** - No TIN is required. (Note: Only select this reason if the domestic law of the relevant country/jurisdiction does not require the collection of the TIN issued by such country/jurisdiction)
- \_\_\_\_\_

**\*Section 5: Entity's CRS Classification**

(The information provided in this section is for CRS. Please note an Entity's CRS classification may differ from its FATCA classification in Section 3 above). In addition, please note that the information that the Entity has to provide may differ depending on whether they are resident in a participating or non-participating CRS Jurisdiction. For more information, please see the OECD CRS Standard and associated commentary. <http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/>

**5.1 Financial Institutions under CRS:**

If the Entity is a *Financial Institution*, Resident in either a Participating or Non-Participating CRS Jurisdiction please review and tick one of the below categories that applies and specify the type of Financial Institution below.

*Note: Please check the Irish Revenue AEOI portal at the time of completion of this form to confirm whether your country of Tax Jurisdiction is considered Participating or Non-Participating for the purposes of CRS Due-Diligence in Ireland. <https://www.revenue.ie/en/companies-and-charities/documents/aeoi/participating-jurisdictions.pdf>*

I.	<b>A Reporting Financial Institution resident in a participating CRS jurisdiction</b>	<input type="checkbox"/>
II.	<p><b>A Financial Institution Resident in a Non-Participating Jurisdiction.</b> (please also tick the box that applies below)</p> <p><input type="checkbox"/> <b>An Investment Entity resident in a Non-Participating Jurisdiction and managed by another Financial Institution</b> (If this box is ticked, please indicate the name of any Controlling Person(s) of the Entity <b>in section 6 below</b> and complete a separate individual self-certification form for each of your Controlling Persons)</p> <p><input type="checkbox"/> <b>An Investment Entity resident in a Non-Participating Jurisdiction that is not managed by another Financial Institution</b></p> <p><input type="checkbox"/> <b>Other Financial Institution</b>, including a Depository Financial Institution, Custodial Institution or Specified Insurance Company</p>	<input type="checkbox"/>
III.	<b>Non-Reporting Financial Institution under CRS. Specify the type of Non-Reporting Financial Institution below:</b>	<input type="checkbox"/>

	<input type="checkbox"/> Governmental Entity <input type="checkbox"/> International Organization <input type="checkbox"/> Central Bank <input type="checkbox"/> Broad Participation Retirement Fund <input type="checkbox"/> Narrow Participation Retirement Fund <input type="checkbox"/> Pension Fund of a Governmental Entity, International Organization, or Central Bank <input type="checkbox"/> Exempt Collective Investment Vehicle <input type="checkbox"/> Trust whose trustee reports all required information with respect to all CRS Reportable Accounts <input type="checkbox"/> Qualified Credit Card Issuer <input type="checkbox"/> Other Entity defined under the domestic law as low risk of being used to evade tax. Specify the type provided in the domestic law: _____	
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## 5.2 Non Financial Institutions (“NFE”) under CRS:

If the Entity is a *not defined as a Financial Institution under CRS* then, please tick one of the below categories confirming if you are an Active or Passive NFE.

I.	<b>Active Non-Financial Entity</b> – a corporation the stock of which is regularly traded on an established securities market. Please provide the name of the established securities market on which the corporation is regularly traded: _____	<input type="checkbox"/>
II.	<b>Active Non-Financial Entity</b> – if you are a Related Entity of a regularly traded corporation. Please provide the name of the regularly traded corporation that the Entity is a Related Entity of: _____  Please provide details of the securities market on which the entity is regularly traded: _____	<input type="checkbox"/>
III.	<b>Active Non-Financial Entity</b> – a Government Entity or Central Bank	<input type="checkbox"/>
IV.	<b>Active Non-Financial Entity</b> – an International Organisation	<input type="checkbox"/>
V.	<b>Active Non-Financial Entity</b> – <i>other</i> than those listed in I, II, III or IV above. (for example a start-up NFE or a non-profit NFE)	<input type="checkbox"/>
VI.	<b>Passive Non-Financial Entity</b> (If this box is ticked, please also complete Section 6.1 for each of the Controlling Person(s) of the Entity and complete a separate individual self-certification form for each Controlling Person(s))	<input type="checkbox"/>

## Section 6: Controlling Persons

**NB: Please note that each Controlling Person must complete a separate “Individual (including Controlling Persons) Self-Certification for FATCA and CRS” form.**

**If there are no natural person(s) who exercise control of the Entity then the Controlling Person will be the natural person(s) who hold the position of senior managing official of the Entity.**

*For further information on Identification requirements under CRS for Controlling Persons, see the Commentary to Section VIII of the CRS Standard. <http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/>*

### 6.1 Controlling Person(s) of the Account Holder:

If you have ticked a Passive NFE with Controlling Persons in either the FATCA or CRS Classification sections above, then please also complete this section for each of the Controlling Person(s) of the account holder and provide a separate

"Individual (including Controlling Persons) Self-Certification for FATCA and CRS" form for each Controlling person as per 6.2 below:

**Indicate the name of all Controlling Person(s) of the Account Holder:**

I.	
II.	
III.	

**Note:** In case of a trust, Controlling Persons means the settlor(s), the trustee(s), the protector(s) (if any), the beneficiary(ies) or class(es) of beneficiary(ies), AND any other natural person(s) exercising ultimate effective control over the trust. With respect to an Entity that is a legal person, if there are no natural person(s) who exercise control over the Entity, then the Controlling Person will be the natural person who holds the position of senior managing official of the Entity.

**6.2 Complete a separate "Individual (Controlling Persons) Self-Certification for FATCA and CRS" form for each Controlling Person listed in Section 6.1.**

**\*Section 7: Declarations and Undertakings**

I/We declare (as an authorised signatory of the Entity) that the information provided in this form is, to the best of my/our knowledge and belief, accurate and complete.

**I/We acknowledge and consent** to the fact that the information contained in this form and information regarding the Account Holder may be reported to the tax authorities of the country in which this account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the Account Holder may be tax resident where those countries (or tax authorities in those countries) have entered into Agreements to exchange financial account information.

I/We on behalf of the Entity undertake to advise the recipient promptly and provide an updated Self-Certification form within 30 days where any change in circumstance (for guidance refer to Irish Revenue or OECD website) occurs which causes any of the information contained in this form to be incorrect.

**\*Authorised Signature(s):**

\_\_\_\_\_

**\*Print Name(s):**

\_\_\_\_\_

**\*Capacity in which declaration is made:**

\_\_\_\_\_

**\*Date: (dd/mm/yyyy):** \_\_\_\_\_

**Individual (including Controlling Persons) Self-Certification for FATCA and CRS**

**Instructions for completion and Data Protection Notice**

We are obliged under Section 891E, Section 891F and Section 891G of the Taxes Consolidation Act 1997 (as amended) and regulations made pursuant to those sections to collect certain information about each account holder's tax arrangements. Please complete the sections below as directed and provide any additional information that is requested. Please note that by completing this form you are providing personal information which may constitute personal data within the meaning of the General Data Protection Regulation (697/2016/EU) (the "GDPR") and applicable Irish Data Protection Legislation (currently the Irish Data Protection Acts 1988 to 2018). Please note that in certain circumstances we may be legally obliged to share this information, and other financial information with respect to an account holder's interests in the Fund, with the Irish Revenue Commissioners, the Irish tax authority. They may in turn exchange this information, and other financial information with foreign tax authorities, including tax authorities outside the EU.

If you have any questions about this form or defining the account holder's tax residency status, please speak to a tax adviser or local tax authority.

For further information and guidance on FATCA or CRS please refer to the Irish Revenue or OECD websites at: <http://www.revenue.ie/en/business/aeoil/index.html> or the following link to the OECD CRS Information Portal at: <http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/> in the case of CRS only.

*If any of the information below about the account holder's tax residence or FATCA/CRS classification changes in the future, please advise of these changes promptly.*

*Please note that where there are joint account holders each account holder is required to complete a separate Self-Certification form.*

**Section 1, 2, 3 and 5 must be completed by all Account holders or Controlling Persons.**

**Section 4 should only be completed by any individual who is a Controlling Person of an entity account holder which is a Passive Non-Financial Entity, or a Controlling Person of an Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution.**

**(Mandatory fields are marked with an \*)**

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**\*Section 1: Account Holder/Controlling Person Identification**

**\*Account Holder / Controlling Person Name:** \_\_\_\_\_

**\*Current Residential Address:**

Number: \_\_\_\_\_ Street: \_\_\_\_\_

City, Town, State, Province or County: \_\_\_\_\_

Postal/ZIP Code: \_\_\_\_\_ Country: \_\_\_\_\_

**Mailing address (if different from above):**

Number: \_\_\_\_\_ Street: \_\_\_\_\_

City, Town, State, Province or County: \_\_\_\_\_

Postal/ZIP Code: \_\_\_\_\_ Country: \_\_\_\_\_

**\*Place and Date of Birth**

\*Town or City of Birth: \_\_\_\_\_ \*Country of Birth: \_\_\_\_\_

\*Date of Birth: \_\_\_\_\_

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**\*Section 2: FATCA Declaration of U.S. Citizenship or U.S. Residence for Tax purposes:**

Please tick either (a) **or** (b) and complete as appropriate.

- (a)  I confirm that **I am** a U.S. citizen and/or resident in the U.S. for tax purposes and my U.S. federal taxpayer identifying number (U.S. TIN) is as follows:

\_\_\_\_\_

**OR**

- (b)  I confirm that **I am not** a U.S. citizen or resident in the U.S. for tax purposes.

**\*Section 3: Common Reporting Standard (CRS) Declaration of Tax Residency/Residencies (please confirm all Tax Residencies)**

Please indicate your country of tax residence (if resident in more than one country please detail all countries of tax residence and associated tax identification numbers ("TINs")). For further guidance on Tax Residence and TINs, please refer to the OECD CRS Information Portal (<http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/#d.en.347759>)

**NOTE:** Under the Irish legislation implementing the CRS, provision of a Tax ID number (TIN) is required to be provided unless:

- (a) You are tax resident in a Jurisdiction that does not issue a (TIN); or
- (b) You are tax resident only in a non-reportable Jurisdiction (i.e. Ireland or the USA)

Country of Tax Residency	Tax ID Number	∞If TIN unavailable Select (A, B or C) and check box below

∞If a TIN is unavailable, please tick the appropriate box as follows:

- Reason A** - The country/jurisdiction where the Account Holder is resident does not issue TINs or TIN equivalents to its residents
- Reason B** - No TIN is required. (Note: Only select this reason if the domestic law of the relevant country/jurisdiction does not require the collection of the TIN issued by such country/jurisdiction)
- Reason C** - The Account Holder is otherwise unable to obtain a TIN (Please explain why you are unable to obtain a TIN if you selected Reason C)

**Section 4 – Type of Controlling Person**

(**ONLY** to be completed by an individual who is a Controlling Person of an entity which is a Passive Non-Financial Entity or an Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution)

For Joint or multiple Controlling Persons please complete a separate "Individual (including Controlling Persons) Self-Certification for FATCA and CRS" form for each Controlling Person.

Please Confirm the type of Controlling Person applicable under CRS that applies to you/the Account holder by ticking the appropriate box	Please tick	Entity Name
Controlling Person of a legal person – control by ownership		
Controlling Person of a legal person – control by other means		
Controlling Person of a legal person – senior managing official		

Controlling Person of a trust – settlor		
Controlling Person of a trust – trustee		
Controlling Person of a trust – protector		
Controlling Person of a trust – beneficiary		
Controlling Person of a trust – other		
Controlling Person of a legal arrangement (non-trust) – settlor-equivalent		
Controlling Person of a legal arrangement (non-trust) – trustee-equivalent		
Controlling Person of a legal arrangement (non-trust) – protector-equivalent		
Controlling Person of a legal arrangement (non-trust) – beneficiary-equivalent		
Controlling Person of a legal arrangement (non-trust) – other-equivalent		

**\*Section 5: Declaration and Undertakings:**

I declare that the information provided in this form is, to the best of my knowledge and belief, accurate and complete.

I acknowledge and consent to the fact that the information contained in this form and information regarding the Account Holder may be reported to the tax authorities of the country in which this account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the Account Holder may be tax resident where those countries (or tax authorities in those countries) have entered into Agreements to exchange financial account information.

I undertake to advise the recipient promptly and provide an updated Self-Certification form within 30 days where any change in circumstances occurs which causes any of the information contained in this form to be incorrect.

**Data Protection - Customer Information Notice:**

The Common Reporting Standard (CRS), formally referred to as the Standard for Automatic Exchange of Financial Account Information, is an information standard for the automatic exchange of information (AEOI), developed in the context of the Organisation for Economic Co-operation and Development (OECD).

The standard requires that Financial Institutions in participating jurisdictions gather certain information from account holders (and, in particular situations, also collect information in relation to relevant Controlling Persons of such account holders).

Under CRS account holder information (and, in particular situations, information in relation to relevant Controlling Persons of such account holders) is to be reported to the relevant tax authority where the account is held, which, if a different country to that in which the account holder resides, will be shared with the relevant tax authority of the account holder's resident country, if that is a CRS-participating jurisdiction.

Information that may be reported includes name, address, date of birth, place of birth, account balance, any payments including redemption and dividend/interest payments, Tax Residency(ies) and TIN(s).

Further information is available on the OECD website: <http://oecd.org/tax/automatic-exchange/> and on the Irish Revenue website - <https://www.revenue.ie/en/companies-and-charities/international-tax/aeoi/index.aspx>

\* Authorised Signature: \_\_\_\_\_

\* Print Name: \_\_\_\_\_

\* Date: (dd/mm/yyyy): \_\_\_\_\_

\* Capacity (if Controlling Person): \_\_\_\_\_

**VII. Additional details**

**A. Electronic Reporting**

Please complete and notify the relevant email addresses for the non-encrypted electronic receipt of statements and other reports that may be issued from time to time by the Administrator. If agreed that other additional email addresses than the below-mentioned shall be used, please notify us of these additional email address(es). If you choose not to opt for the electronic receipt of statements and other reports, all these statements and other reports will be sent by SWIFT or by any other electronic means of communication that has been previously agreed with the Administrator. If the Applicant is a natural person, it may be that e-mails are not being sent at all. Statements are not being sent by post, except to natural persons.

By ticking this box, we hereby agree to the non-encrypted electronic receipt by email or other electronic means of periodical account statements of our position in the register of the Fund and other contract notes, confirmations and transaction reports that may be issued from time to time by the Administrator. We understand and fully acknowledge that non-encrypted email, or other electronic means are not secure communication means and recognise and fully accept the associated risks pertaining to the provision of the statements and reports by email or such other electronic means including, without limitation, the risks of non-receipt or delay in the receipt and the loss of confidentiality.. We also recognise and fully accept that there are other risks inherent in communication by emails and other electronic methods through the Internet, such as the possibility of virus contamination and disruption in service.

**Statements of holdings (only email)\*:**

**Contract notes (subscriptions/redemptions):**

Email\*: \_\_\_\_\_

**Contract notes (transfers):**

Email\*: \_\_\_\_\_

**Confirmations (dividends):**

Email\*: \_\_\_\_\_

**Confirmations (corporate actions):**

Email\*: \_\_\_\_\_

**Other:**

Email\*: \_\_\_\_\_

\*Please note that reports to private persons will, in principle, not be sent by email

For any third party allowed to receive electronic communication, please see Appendix 1 and contact the Administrator for identification.

**B. Dealing Methods**

**Important Note:** The Applicant, as well as the individual(s) it has appointed to deal on its Account, and in particular to sign and provide instructions in relation to transactions on the shares in the Fund on its behalf ("Authorised Dealers"), may give instructions to the Administrator, and as applicable to the Fund, and/or its Management Company at its own risk by email or other electronic similar means. Please also read the Section " **Declarations and Signatures** of this Application Form.

**i. Orders are placed by:**

The Applicant

Or

Third party acting as representative ("Power of Attorney") (in this case please see Appendix 1 and contact the Administrator for identification)

**ii. Please tick the method(s) in which the Applicant's Authorized Dealers will be dealing on the account:**

SWIFT BIC Code/SWIFT DN: \_\_\_\_\_  Post: \_\_\_\_\_  Email: \_\_\_\_\_

Email dealing is subject to a separate email agreement. If you choose not to instruct by email, all your instructions must be sent by post or SWIFT, or as may be otherwise agreed separately with the Administrator from time to time.

**C. Dividend Policy**

Dividends will be paid out in cash to your bank account. Should you wish dividends to be re-invested, please tick the box:

Re-invested

In case of re-investment, the dividends will be re-invested into the corresponding classes of shares in the Fund at the prevailing issue price.

#### **D. Bank Account Details**

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Please complete this Section in BLOCK CAPITALS with **your bank account details from which subscription monies will be paid and to which redemption proceeds and other sale proceeds and dividends (if any) will be sent**. Payments will be made by wire transfer in your chosen currency as indicated below. If additional accounts for other currencies are used, please attach a separate list showing the same details as mentioned below. Wire transfers may be subject to usual banking fees. **Important Note:** No third party payments are accepted or made. If this section is not completed payments to the Applicant may be delayed. In addition, the bank account must be an account opened in the Applicant's name with a credit institution or a financial institution subject to the Irish Criminal Justice (Money Laundering and Terrorist Financing) Acts 2010 to 2021 as amended and as may further amended, consolidated or substituted from time to time (the "**CJA**").

Bank name \_\_\_\_\_  
Address \_\_\_\_\_  
Account name \_\_\_\_\_  
Account number \_\_\_\_\_  
Sort code / IBAN code \_\_\_\_\_  
Swift code \_\_\_\_\_  
ABA number (if applicable) \_\_\_\_\_  
Currency                    EUR         USD         CHF         GBP  Other : \_\_\_\_\_

Payment in respect of each class of shares must be made in the relevant currency of the relevant class by electronic bank transfer to the relevant account. For any subscription order received in a currency different from the currency of the relevant class, the Administrator will ask for a spot foreign exchange, subject to feasibility and in alignment with the Fund Prospectus, and on a best effort and execution basis. The costs (spread or other costs) of which are to be born entirely by the Applicant. The subscription settlement instructions will be made available by the Administrator upon request.

If timely settlement, as detailed in the Prospectus and the relevant KID(s), is not made, an application may lapse and be cancelled at the Applicant's cost. Failure to make good settlement by the settlement date may result in the Fund and/or its Management Company (as applicable) and/or the Administrator exercising any of the remedies as set out in the constitutive documents of the Fund and the Prospectus.

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## E. Subscription Details and Acknowledgements

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The Applicant, having received and read a copy of the prospectus and relevant KID(s) hereby applies to subscribe for shares in the Fund as indicated in the table below.

\*This section is **optional**, to the extent that the Application Form is used to place the initial subscription. Please use the English notation using the comma as thousand-separator when expressing figures (e.g. 1,000,000.00 for one million). You will find the full list of share class(es) of shares currently available in the Prospectus of the Fund.

Sub-Fund of the Fund and Share Class Name	ISIN	Currency	Investment Amount	or Number of shares

The Applicant acknowledges and agrees that:

- (a) Any subscription following this application is irrevocable and will be legally binding when it is signed by us and the subscription is accepted by the Fund and/or its Management Company (as applicable) and/or the Administrator;
  - (b) This subscription may be accepted or rejected by the Fund and/or its Management Company (as applicable) and/or the Administrator in consultation with the Fund and its Management Company and that if this Application Form is rejected, then it shall have no force or effect;
  - (c) We are aware of and will comply with the particular characteristics of the classes of shares in the Fund, such as but not limited to the minimum subscription amount and the minimum subsequent subscription amount for the different classes that are set out in the Prospectus *and the relevant KID(s)*;
  - (d) We are aware of and will comply with any specific restrictions or features related to the type of shareholders that are allowed to invest in any of the classes of units or shares in the Fund, as set out in the Prospectus;
  - (e) Where we are acting on behalf of (an) other person(s), we undertake (i) to subscribe, whether for initial subscription or subsequent transactions, for classes of shares in the Fund only for this/those person(s) who meet(s) any such restrictions as set out in the Prospectus for such classes of units or shares and (ii) on an annual basis, or on a more frequent basis if the Fund, the Management Company and/or the Administrator so requests, to confirm in writing to the Fund, the Management Company and/or the Administrator, as applicable, that such person(s) continue(s) to meet such restrictions.
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## F. Return of Values (Investment Undertakings) Regulations 2013

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The Return of Values (Investment Undertakings) Regulations 2013 (S.I. 245 of 2013) (the "Regulations") requires certain Irish Investment Undertakings to make annual returns to the Irish Revenue Commissioners of the value of the investments in a tax year held by certain unit holders.

In order to satisfy the Regulations, the Fund must collect the following additional information from any applicants<sup>3</sup> which

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<sup>3</sup> Where an applicant is an intermediary and that applicant is the registered unit holder, reporting obligations under the regulations may be carried out on the basis that the intermediary is the unit holder. For these purposes, intermediary has the same meaning as in Section 739B (1) TCA 1997.

are Irish Resident or Ordinarily Resident in Ireland (that are not excepted unit holders within the meaning of the Regulations):

<b>Tax Reference Number (TRN) / PPS Number<sup>4</sup></b>	
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Furthermore, the Regulation requires the Company to seek appropriate documentation from the applicant to verify the above TRN or PPS Number. Any one of the following additional documents (copy or original) is sufficient;

- Revenue Statement of Liability
- Payslip (where employer is identified by name or tax number)
- Drug Payment Scheme Card
- European Health Insurance Card
- Tax Assessment
- Tax Return Form
- PAYE Notice of Tax Credits
- Child Benefit Award Letter /Book
- Pension Book
- Social Services Card
- Public Services Card

In addition, any printed documentation issued by the Irish Revenue Commissioners or by the Department of Social Protection which contain your name, address and tax reference number will also be acceptable. In the case of joint account holders, the additional documentation is required for each applicant.

*Your personal information will be handled by the Administrator or its duly appointed delegates as Data Processor for the Fund in accordance with the Data Protection Acts 1988 to 2018 and the EU's General Data Protection Regulation 2016/679. In particular, all the relevant security measures will be taken to ensure an adequate level of protection of the personal data against unauthorised access, accidental loss or destruction. Your information provided herein will be processed for the purposes of complying with the Regulations and this may include disclosure to the Irish Revenue Commissioners.*

#### **G. Irish Residency Declaration**

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Every applicant applying for shares on the applicant's own behalf is hereby obliged to notify the Fund and/or its Management Company and/or or the Administrator, in writing if the applicant is or becomes Irish Resident or Ordinarily Resident in Ireland (as defined in the Prospectus).

Every applicant applying for shares on behalf of another person is hereby obliged to notify in writing the Fund and/or its Management Company and/or or the Administrator, if the applicant is, or becomes, aware that any person who is beneficially entitled to any of those shares may be Irish Resident or Ordinarily Resident in Ireland or may have become Irish Resident (as defined in the Prospectus).

a) Declaration of Residence outside Ireland

Applicants resident outside Ireland are required by the Irish Revenue Commissioners to make the following declaration, which is in a format authorised by them, in order to receive payment without deduction of tax. It is important to note that this declaration, if it is then still correct, shall apply in respect of any subsequent acquisitions of shares. Terms used in this declaration are defined in the Prospectus. I am/we are fully informed as to the legal and tax requirements within my/our own country (or countries) regarding the purchase of the shares. Important – please tick box (a) or (b) as appropriate.

(a) Declaration on own behalf

I/we\* declare that I am/we are\* applying for the shares on my own/our own behalf/on behalf of a company\* and that I am/we are/the company is\* entitled to the shares in respect of which this declaration is made and that:

- I am/we are/the company is\* not currently Irish Resident or Ordinary Resident in Ireland; and
- Should I/we/the company\* become Irish Resident I/we\* will so inform the Fund in writing accordingly

\*Delete as appropriate

or

(b) Declaration as Intermediary

I/we\* declare that I am/we are\* applying for the shares on behalf of persons:

- Who will be beneficially entitled to the shares; and

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<sup>4</sup> A PPS Number is required if the relevant applicant is an individual

- Who, to the best of my/our\* knowledge and belief, are neither Irish Resident nor Ordinary Resident in Ireland/

I/we\* also declare that:

- Unless I/we\* specifically notify you to the contrary at the time of application, all applications for shares made by me/us\* from the date of this application will be made on behalf of such persons; and
- I/we\* will inform you in writing if I/we\* become aware that any person on whose behalf I/we\* hold shares becomes Irish Resident.

\*Delete as appropriate

Name and address of applicant: \_\_\_\_\_

\_\_\_\_\_

Signature of applicant or authorised signatory: \_\_\_\_\_(declarant)

Capacity of authorised signatory (if applicable): \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Joint Applicants:

Names: \_\_\_\_\_Signatures: \_\_\_\_\_

\_\_\_\_\_

**Notes:**

- I. Where a natural person is making an application for shares he/she should contact the Administrator to provide further tax identification information.
- II. Non-resident declarations are subject to inspection by the Irish Revenue Commissioners and it is a criminal offence to make a false declaration.
- III. To be valid, the Application Form (incorporating the declaration required by the Irish Revenue Commissioners) must be signed by each applicant. Where there is more than one applicant, each person must sign. If the applicant is a company, the Application Form should be signed by the company secretary or a duly authorised signatory provided that a certified copy of the authority authorising the signatory and an authenticated list of signatories accompanies this form.
- IV. If this Application Form (incorporating the declaration required by the Irish Revenue Commissioners) is signed under power of attorney, such power of attorney or a duly certified copy thereof must accompany it.
- V. If the applicant is an Exempt Irish Investor (as defined in the Prospectus) it should contact the Administrator who will provide it with the appropriate declaration which must be made to confirm its status.

**VIII. Declarations & Signatures (please read carefully)**

In signing this Application Form, please ensure you are able to make the below declarations. **Important Note:** The right is reserved to the Fund and/or the Management Company (as applicable) and/or the Administrator to reject this Application Form in whole or in part.

By signing this form, we/I acknowledge that we are/I am contractually bound by the terms of this Application Form as well as by the terms of the Prospectus and the constitutive documents of the Fund (as applicable). Furthermore, we/I hereby declare, represent and warrant as follows<sup>5</sup>:

1. We/I confirm that we are/I am duly authorised and qualified to become a shareholder in, and that we/I have full power and authority and are duly authorised to undertake to subscribe and subscribe for the selected class(es) of shares in the Fund and to enter into any subsequent transaction, and that the individual or individuals signing this Application Form and giving the declarations, warranties and representations below, as the case may be,

<sup>5</sup> Please consider adapting the declarations on a case-by-case basis with the specificities of the envisaged subscription.

on our behalf have been duly authorised by us to do so and this Application Form is our legal, valid and binding obligation, enforceable against us in accordance with its terms.

2. We/I confirm that we/I understand and accept that this application is made on the basis and subject to the latest Prospectus as supplemented by the country specific annexes (if any), the relevant KID(s), the constitutive documents and the financial reports of the Fund that we are/I am willing to subscribe in and any other documents required under applicable laws and regulations. This application and any subsequent subscriptions and transactions are based solely on and subject to the information contained in these documents and we/I undertake to invest in accordance with and subject to the terms of these documents.
3. We/I confirm having received, read and understood the Prospectus, the constitutive documents of the Fund and, if applicable in our/my jurisdiction, the relevant KID(s), and in particular, we are/I am familiar with and understand the nature and scope of our/my rights and obligations as shareholder holding the selected class(es) of shares in the Fund as region or country specific restrictions (if any),, the investment objectives and policy(ies) of the Fund, the specific risk factors of and the charges applicable to the Fund, as set forth in these documents.
4. We/I confirm that the execution of this Application Form and acceptance of our/my subscription do not and will not violate any law, regulation, ordinance, charter, by-law, article of association or rule applicable to us/me or any agreement by which we are/I am bound or by which any of our/my assets are affected.
5. We/I have such knowledge and experience in financial and business matters as to be capable of evaluating the merits of, and we are/I am able to bear the economic risk, including a complete loss of, investment in the Fund and the selected class(es) of shares and have consulted with our/my own tax and legal counsel and our other financial advisors to the extent we/I have deemed necessary.
6. We/I undertake to send the subscription monies in the correct currency to the bank details provided separately by the Administrator. Any necessary currency transactions will be effected at our/my cost.
7. We/I undertake not to engage in any activities which may adversely affect the interests of the Fund's shareholders and we/I acknowledge that if the Fund or the Management Company (as applicable) and/or the Administrator reasonably determines or suspects that we/I have engaged in such activities, it may suspend, cancel, reject or otherwise deal with our/my application and take any action or measures as appropriate or necessary to protect the Fund and its shareholders.
8. We/I confirm that we are not a Prohibited Person (as defined in the Fund's Prospectus including but not limited to any US Person, as defined in the Fund's Prospectus) ("**Prohibited Person**") and we are/I am not acquiring the Fund's units or shares on behalf of or for the benefit of such Prohibited Person. We/I further confirm that we/I will not transfer any units or shares in the Fund to a Prohibited Person. We/I understand and agree that (i) the Fund and/or its Management Company (as applicable), respectively the Administrator, may proceed to a compulsorily redemption of any shares held by any person excluded from the acquisition or ownership of such units or shares in the Fund (such as a Prohibited Person) and that (ii) any transfer or acquisition of shares in the Fund by a Prohibited Person, either alone or in conjunction with any other person, whether directly or indirectly, may lead to the potential compulsory redemption of the units or shares held by the Prohibited Person in the Fund. Furthermore we/I agree that the Fund and/or its Management Company (as applicable) and/or respectively the Administrator may require us/me to provide them with any reasonable information that they may consider necessary for the purpose of determining whether such owner of units or shares in the Fund is or will be a Prohibited Person.
9. We/I acknowledge that we are/I am aware of the remedies available to the Fund and/or its Management Company (as applicable) in case of non-compliance with the special conditions for acquiring and maintaining the Fund shares classes as well as in the event of failure to meet any part of our/my payment obligations and other obligations as set forth in the Prospectus, the constitutive documents of the Fund and this Application Form when due, and are/am prepared to accept the exercise against us/me of such rights and remedies in the event of such non-compliance or failure. In particular, we are/I a aware and undertake to submit application for subscription of any classes of shares in the Fund with the Administrator by the relevant date and cut-off time as set out in the Prospectus and acknowledge that any application received after the cut-off time on the relevant day as defined in the Prospectus will be processed as per the relevant provisions in the Prospectus.
10. We/I agree to undertake to provide a list of individuals, including signature specimens, duly authorised to deal on our/my account, and in particular to sign and provide email or other electronic instructions in relation to transactions on the Fund shares on our/my behalf ("**Authorized Dealers**") and authorise the Fund and/or its Management Company (as applicable) and/or the Administrator to act and rely upon any electronic instructions received in good faith from such Authorized Dealers without further inquiry until written notice of its termination is received and without liability in respect of any transfer, payment or other act made, done or omitted to be done in respect of our/my Account in accordance with such electronic instructions received in good faith by the Fund and/or its Management Company (as applicable) and/or the Administrator.

11. We/I acknowledge and agree that communication between the Fund and/or its Management Company (as applicable) and/or the Administrator and US-based contacts (including any of our representatives, attorneys or agents) is subject to specific restrictions and that any Authorized Dealer being domiciled in the United States or its territory and wishing to have signatory authority on our account may not be accepted. We acknowledge and agree to provide the Fund and/or its Management Company (as applicable) and/or the Administrator with a complete and accurate list of our Authorized Dealers
12. We/I agree to provide to the Fund and/or its Management Company (as applicable) and the Administrator such information as the Fund and/or its Management Company (as applicable) and the Administrator determine to be necessary or appropriate (i) to comply with the anti-money laundering laws, rules and regulations of any applicable jurisdiction and (ii) to respond to requests for information concerning the identity of investors from any governmental authority, self-regulatory organisation or financial institution in connection with its AML/CFT compliance procedures, or to update such information. Should the Applicant under law or regulation applicable to it require any prior consents, or approvals, by any local competent authority it will promptly seek to obtain such consent or approval.
13. The Applicant agrees to be liable to the Administrator, the Fund and the Management Company, as applicable, jointly and severally with his principal in respect of all obligations and liabilities arising from such subscription for shares in the Fund. The Applicant acknowledges and agrees that such liability extends to the initial subscription and any subsequent transactions (e.g., additional subscriptions, redemptions, transfers) submitted to the Fund for the Account as designated in the above-described registration details as well as for other Accounts opened by the Applicant with this Fund. The Applicant agrees to provide the Management Company and/or the Administrator and the Fund, as applicable, with written insurance that the identity of any person on whose behalf the Applicant is acting as well as the case may be, of their beneficial owners <sup>(1)</sup> (in each case a “**Beneficial Owner**”) has been obtained and recorded, and to provide the Management Company and/or the Administrator and the Fund, as applicable, with information, documentation and written confirmations in relation to such person as the Management Company and/or the Administrator and the Fund, as applicable, reasonably requires to allow it to comply with applicable rules and regulations and, in particular, with applicable AML/CFT Rules. For the avoidance of doubt, the above-mentioned rights of the Fund, the Management Company and/or the Administrator in the AML/CFT context apply notwithstanding any applicable legal or contractual non-disclosure or professional secrecy duties applicable to the Applicant. Should the Applicant under relevant laws or regulations applicable to it require any prior consents, or approvals, by any local competent authority it will promptly seek to obtain such consent or approval.
14. The Fund and the Management Company and/or the Administrator may request Applicants from time to time to provide additional or updated identification documents pursuant to on-going client due diligence requirements under the AML/CFT Rules.  
In case of a failure to provide required information, confirmation or documentation, the Fund and/or the Management Company or the Administrator are entitled to refuse the application and will not be liable for any interest, costs, or compensation in that regard. Similarly, when units or shares in the Fund have been subscribed, they may not be redeemed or converted, or further shares be subscribed until full up-to-date details of registration and AML/CFT documents of the Applicant have been completed and which may, among others, result in (i) the withholding of redemption proceeds by the Fund or (ii) the withholding of outstanding dividend payments.  
The Fund, the Management Company and/or the Administrator moreover reserve all rights and remedies available under applicable law to ensure their compliance with the AML/CFT Rules (e.g., any costs which are related to non-cooperation of such Applicant will be borne by the respective Applicant).  
In case of a regulatory request, the Applicant herewith undertakes to share data on potential Underlying Investors with the Fund and/or the Management Company or the Administrator without any delay.
15. We/I understand that the information provided herein will be relied upon by the Fund and/or its Management Company (as applicable) and the Administrator for the purpose of determining our/my eligibility to subscribe for and hold shares in the Fund. To the fullest extent permitted under applicable law, we/I agree to indemnify and hold harmless the Fund and/or its Management Company (as applicable) and the Administrator and their affiliates, the officers, directors, direct and indirect shareholders, members, agents, partners and employees of each of the foregoing, from and against any loss, damage or liability due to or arising out of a breach of any representation, warranty or agreement of us/me contained in this Application Form.
16. We also confirm that we will notify the Administrator with no undue delay should **we** or any **Underlying Investor(s)** on behalf of whom we subscribe cease to be eligible to hold the Fund or share class.
17. We/I agree that we/I will be solely responsible for complying with all the relevant legal, tax, and exchange control regulations in force in the applicable country of our/my citizenship, residence or domicile.
18. We/I will not transfer, sell, deliver or otherwise dispose of all or any part of the shares in the Fund except in accordance with the restrictions set forth in the Prospectus and the constitutive documents of the Fund.

19. We/I agree that any instructions given by e-mails, or other means (electronic or not) are at our risk.
20. We hereby acknowledge that any notice, information or document may be served by the Fund on me/us in the manner specified from time to time in the Prospectus and, for the purposes of the Electronic Commerce Act 2000 as amended, if I have provided an email address to the Fund or its delegates, we hereby agree to any such non-encrypted notice, document, statements and other reports that may be issued from time to time by the Fund or its service providers including the Administrator, being sent to me/us electronically to the email address previously identified to the Fund or its delegates which we acknowledge constitutes effective receipt by me/us of the relevant notice or document. I/We acknowledge that I am/we are not obliged to accept electronic communication and may at any time choose to revoke my/our agreement to receive communications electronically by notifying the Fund in writing at the above address provided that my/our agreement to receive communications by electronically shall remain in full force and effect pending receipt by the Fund of written notice of such revocation.
21. We/I agree to the non-encrypted electronic receipt of statements and other reports that may be issued from time to time by the Administrator and are aware that it cannot be fully ruled out that the information transmitted via emails or other similar electronic communication means may become accessible for third parties, and that the exchange of information can be delayed or interrupted due to transmission errors, technical faults, interruptions, malfunctions, illegal interventions, network overload, the malicious blocking of access by third parties, or other shortcomings on the part of the network provider.
22. The Applicant may give instructions at his own risk either by email or other electronic similar means. Any authorization of instruction method shall remain in force until notice in writing of its termination is received by the Administrator. The authority for e-mail and such other electronic means does not apply to notifications of change of name and other basic changes in the relationship where original documentation must be sent by post to the Administrator, unless the instructions are signed by means of a qualified electronic signature (see Appendix 1). The Applicant agrees that phone conversations may be recorded and that records may be used in court or other legal proceedings as evidence.
23. In accordance with the provisions of the Irish Data Protection Acts 1988 to 2018 and the EU's General Data Protection Regulation 2016/679 (the "**GDPR**") (each as may be amended or supplemented from time to time) (together the "**Data Protection Legislation**"), I/we are informed that personal data of the Applicant (where the Applicant is a natural person) or personal data of any natural person provided by the Applicant given in this application form (or otherwise provided in connection with an application to subscribe for Shares in the Fund, on application or at any other time, including without limitation the name, age, contact details, bank account details, transactions and the invested amount, and any information regarding the dealing in Shares (subscription, conversion, redemption and transfer) of the Applicant (where the Applicant is a natural person) or of any other natural person provided by the Applicant (the "**Personal Data**"), will be collected, recorded, stored, adapted, transferred and processed, by electronic means or otherwise, by the Fund as a "data controller" under the Data Protection Legislation, and as further described in the Fund's data protection notice.
24. I/We acknowledge that the Fund intends to take such steps as may be required to satisfy any obligations imposed by (i) the Foreign Account Tax Compliance Act ("**FATCA**") or (ii) any provisions imposed under Irish law arising from the inter-governmental agreement ("**IGA**") between the Government of the United States of America and the Government of Ireland so as to ensure compliance or deemed compliance (as the case may be) with FATCA or the IGA from 1 July 2014.

Furthermore, I/We hereby acknowledge that the Fund intends to take such steps as may be required to satisfy any obligations imposed by (i) the OECD's Standard for Automatic Exchange of Financial Account Information in Tax Matters ("the **Standard**"), which therein contains the Common Reporting Standard, as applied in Ireland by means of the relevant international legal framework and Irish tax legislation and (ii) EU Council Directive 2014/107/EU, amending Directive 2011/16/EU as regards mandatory automatic exchange information in the field of taxation ("**DAC2**"), as applied in Ireland by means of the relevant Irish tax legislation, so as to ensure compliance or deemed compliance (as the case may be) with the Standard/CRS and the DAC2 from 1 January 2016 (collectively referred to in this application form as "**CRS**").

In order for the Fund to comply with the above FATCA and CRS obligations, I/We agree to provide to the Fund, the Manager or their delegates the necessary declarations, confirmations and/or classifications at such times as each of them may request and furthermore provide any supporting certificates or documents as each of them may reasonably require in connection with this investment by reason of FATCA or CRS, as described above, or otherwise. Should any information furnished to any of them become inaccurate or incomplete in any way, I/we hereby agree to notify the Fund, the Manager or their delegates immediately of any such change and further agree to immediately take such action as the Fund, the Manager or their delegates may direct, including where appropriate, redemption of our Shares in respect of which such confirmations have become incomplete or inaccurate where requested to do so by the Fund, the Manager or their delegates (as applicable). If relevant, I/we agree to notify the Fund, the Manager or their delegates of any change to my/our tax residency status. I/we hereby also agree to indemnify and keep indemnified the Fund, the Manager or their delegates against any loss, liability,

cost or expense (including without limitation legal fees, taxes and penalties) which may result directly or indirectly as a result of a failure to meet our obligations pursuant to this section or failure to provide such information which has been requested by the Fund, the Manager or their delegates and has not been provided by me/us, and from any misrepresentation or breach of any warranty, condition, covenant or agreement set forth herein or in any document delivered by me/us to the Fund, the Manager or their delegates. I/We further acknowledge that a failure to comply with the foregoing obligations or failure to provide the necessary information required may result in the compulsory redemption of our entire holding in the Fund, and that the Fund, the Manager or their delegates are authorized to hold back from redemption proceeds or other distributions to me/us such amount as is sufficient after the deduction of any redemption charges to discharge any such liability and I/we shall indemnify and keep indemnified the Fund, the Manager or their delegates against any loss suffered by them or other Shareholders in the Fund in connection with any obligation or liability to so deduct, withhold or account.

I/We confirm that we have accurately and correctly completed the relevant self-certification form included in the FATCA and CRS section of this application form. I/We further confirm that if any information included in the self-certification form subsequently becomes inaccurate or incorrect we will notify the Fund, the Manager or their delegates immediately of any such change and agree to immediately take such action as the Fund, the Manager or their delegates may direct, including where appropriate, redemption of our Shares.

I/We agree to waive any provision of any privacy, banking secrecy or other law or regulation of any jurisdiction and/or the terms of any confidentiality agreement, arrangement or understanding that would, absent such a waiver, prevent the Fund's compliance with FATCA and CRS requirements.

I/We acknowledge that the Fund intends to take such steps as may be required to satisfy any obligations imposed by Council Directive (EU) 2018/822 (amending Directive 2011/16/EU), as applied in Ireland by means of the relevant Irish tax legislation ("**DAC6**"). I/We further acknowledge that this may, in specific circumstances, require the Fund or any party that falls to be considered an "intermediary" for the purposes of DAC6 to exchange certain of my/our information (including details of my/our investment in the Fund) to the Irish Revenue Commissioners and/or other relevant tax authorities. I/We hereby agree to the transmission of such data by the relevant party to the Irish Revenue Commissioners and/or other relevant tax authorities, as is required to comply with DAC6.

I/We hereby acknowledge that I/we should consult our own tax advisers about the applicability of FATCA, CRS, DAC6 and any other reporting requirements with respect to our own situation.

25. We/I confirm that the information set out above comprises our complete address as well as our banking references for the purpose of inclusion thereof in the register of shareholders of the Fund. We/I confirm that the Fund and/or its Management Company (as applicable) and/or the Administrator may treat such information as accurate and up to date until notice to the contrary shall have been received in writing by it from us/me.
26. We/I agree to inform the Fund and/or its Management Company (as applicable) and/or the Administrator promptly of any changes in our details i.e. details about the Applicant itself (especially but not limited to name, domicile address, contact, correspondence details, nationality/nationalities) as well as changes in the details of our Authorised Dealers, other authorized agents and representatives, beneficial owners, controlling owners, beneficiaries, and other persons involved in the relationship, as well as of any revocation of powers of attorney or signatory powers that we have granted. We/I understand and accept that there may be consequences including adverse consequences arising from our failure to provide prompt notification of the above as described in the Prospectus.
27. The Applicant warrants and declares to the best of its knowledge and to the extent required according to applicable global minimum standards of the Applicant or local requirements as appropriate that the funds that have been or will have been invested pursuant to this Application Form, have been or will have been properly declared monies and do not/did not represent directly or indirectly the proceeds of any criminal activity, including tax crimes, and that the investment is / was not designed to conceal such proceeds so as to avoid prosecution for an offence or otherwise. Further the Applicant confirms in the same manner that (i) funds have not been and will not be invested for purposes of evading tax obligations and (ii) that the Applicant complies with its tax obligations in its country of residence and any other country where the Applicant has reporting obligations or must pay taxes.
28. I/We acknowledge that Shares will not be issued until such time as the Administrator has received and is satisfied with all the information and documentation requested to verify the identity of the Applicant, any beneficial owner of the Applicant (and/or where relevant, any Underlying Investor's identity), address and, where applicable, source of funds and/or source of wealth.

29. I/We hereby represent that I/we and the persons I/we represent as agent or nominee or my/our beneficial owners or persons who control me/us or are controlled by me/us is/are deemed to be Politically Exposed Persons\* (PEPs)<sup>6</sup> or immediate family members<sup>7</sup>, or close associates<sup>8</sup> by ticking this box:

or

I/We hereby represent that I/we and the persons I/we represent as agent or nominee or my/our beneficial owners or persons who control me/us or are controlled by me/us is/are not deemed to be PEPs or immediate family members, or close associates by ticking this box:

30. I/We understand and agree that the Fund prohibits the investment of funds by any persons or entities that are acting, directly or indirectly: (i) in contravention of any applicable laws and regulations, including anti-money laundering regulations or conventions; (ii) on behalf of terrorists or terrorist organisations, including those persons or entities that are included on the List of Specially Designated Nationals and Blocked Persons maintained by the U.S. Treasury Department's Office of Foreign Assets Control ("OFAC"), and/or the consolidated list of persons, groups and entities subject to EU financial sanctions as such lists may be amended from time to time; (iii) for a person or entity resident in or whose subscription funds are transferred from or through a jurisdiction identified as non-cooperative by the Financial Action Task Force or (iv) for a foreign shell bank.
31. In the event that Shares are allotted / issued notwithstanding that cleared funds have not been received within the usual time limits by the Fund as set out in the Prospectus, I/We acknowledge that the Fund may cancel the allotment / issue of my/our Shares. I/We further acknowledge that where an investor fails to pay subscription proceeds within the relevant settlement period the Fund may charge the applicant for any expense incurred by it or the Fund or for any loss to the Fund arising out of such non-receipt or non-clearance.
32. In acting as a financial intermediary in relation to the investment in the Fund, we, the Intermediary as defined above, confirm to have obtained and recorded evidence of the identity of the Underlying Investors (as defined in this form) and any natural person directly or indirectly ultimately holding more than 25% (or 10 % as applicable) of the units- or shares or interests (or any such natural person who is directly or indirectly ultimately controlling more than 25% of such voting rights or ownership interests or having control via other means). We agree upon request by the Fund, the Administrator and/or the Management Company to provide, without undue delay, amongst others, additional information on the type and geographical location of the Underlying Investors as well as a copy of all identification documentation (as well as the case may be, those documents required to determine the purpose and intended nature of the business relationship including the source of wealth and funds) of those Underlying Investors as well as of any natural person, that as described above, may qualify as ultimate beneficial owner of the Fund and additional information related thereto and to take such other reasonable actions upon request as may be advisable in the reasonable judgment of the Fund, the Administrator and/or the Management Company, in particular, for their purposes of complying with any requests of the AML/CFT competent authorities or in case a higher risk scenario has been identified by these parties as well as any further of their AML/CFT obligations pursuant to the AML/CFT Rules. We acknowledge that this declaration is being relied upon by the Fund, the Administrator and/or the Management Company regarding the measures to be applied in accordance with the AML/CFT Rules, and that this declaration shall apply to all our future investments in the Fund as well as to all investments made in our name, and to all funds administered by the Administrator.

The undersigned declares that the relevant required documents as provided along with this Application Form and that the information set out above and in the attached form/s are true and undertakes to inform the Fund, the Administrator and/or the Management Company, of his own accord, immediately about any changes.

We/I further represent and warrant that:

- a) no Underlying Investor is subject to sanctions imposed by the United Nations, the European Union, His Majesty's Treasury and the Foreign and Commonwealth Office of the United Kingdom (HMT), United States

<sup>6</sup> A PEP is defined as an individual who is, or has any time in the preceding 12 months been, entrusted with a prominent public function, including any of the following individuals (but not including any middle ranking or more junior official); (a) a specified official; (b) any individual performing a prescribed function; (c) a member of the administrative, management or supervisory body of a state-owned enterprise. A "specified official" is further defined as any of the following officials (including any such officials in an institution of the European Communities or an international body): (a) a head of state, head of government, government minister or deputy or assistant government minister; (b) a member of a parliament; (c) a member of a supreme court, constitutional court or other high level judicial body whose decisions, other than in exceptional circumstances, are not subject to further appeal; (d) a member of a court of auditors or of the board of a central bank; (e) an ambassador, chargé d'affaires or high-ranking officer in the armed forces; (f) a director, deputy director or member of the board of, or person performing the equivalent function in relation to, an international organisation.

<sup>7</sup> An "immediate family member" includes any spouse, child, parent, brother or sister of a PEP, any person considered to be equivalent to a spouse under the national or other law of the place where the person or PEP resides or any spouse, any person considered to be equivalent to a spouse, of a child of the PEP.

<sup>8</sup> A "close associate" of a PEP includes any individual who has a joint beneficial ownership of a legal entity or legal arrangement, or any other close business relations with the PEP or any individual who has a sole beneficial ownership of a legal arrangement set up for the actual benefit of the PEP.

Treasury Department's Office of Foreign Assets Control (OFAC), Hong Kong Monetary Authority (HKMA), Monetary Authority of Singapore (MAS) and/or Swiss State Secretariat for Economic Affairs or the Directorate of International Law of Switzerland (SECO), in addition to any sanctions imposed by Ireland and the jurisdiction we are/ I am subject to, and that we/I will at all times be in compliance thereto;

- b) we/I have systems and controls in place to ensure compliance with the authorities listed above, including daily screening of the Underlying Investors;
- c) we/I will notify the Fund, the Management Company, and/or the Administrator, of any parties directly or indirectly making use of the Account that are subject to sanctions imposed by the authorities listed above, immediately upon becoming aware of them and shall furnish the Fund, the Management Company, and/or the Administrator with all such documentation as may be requested by the Fund, the Management Company, and/or the Administrator in relation to such parties;
- d) we/I will take all such steps as is required to block, freeze and isolate the holdings of any person identified and notified at the above c) if they are subject to an asset freeze imposed by any of the sanctions authorities listed above.

We have read and understood the content of this Application Form and confirm that the declarations, representations and the information set out in this Application Form are made in connection with our/my investment in the Fund and shall survive the execution and delivery of this Application Form, the issue of the shares in the Fund to us/me and our/my admission as shareholder of the Fund.

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Date of signature: \_\_\_\_\_

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**Authorised Signature**

**Name & title**

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**Authorised Signature**

**Name & title** \_\_\_\_\_

## APPENDIX 1

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### Prevention of Money Laundering and Terrorist Financing

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#### Identification Documents

Under Irish law requirements (the CJA) in respect to anti-money laundering and financing of terrorism, obligations have been imposed on all banks and professionals of the financial sector, including the Fund and its service providers, to prevent the use of investment vehicles for money laundering purposes. Within this context a procedure for the identification of investors, and their beneficial owners, has been imposed, which requires the Applicant to provide certain information as outlined below to facilitate the verification of their identity, permanent address and tax residency status. In addition, the Fund may also require an Intermediary that is applying for Shares on behalf of persons (which may include natural and/or legal persons) who will be beneficially entitled to these Shares to obtain such information from underlying investors (the "**Underlying Investors**").

In addition to this Application Form, the Applicant must provide to the Fund's Administrator the documentation as specified below by sending them via postal mail to:

#### **UBS FUND ADMINISTRATION SERVICES (IRELAND) LIMITED INVESTOR SERVICES DESK**

c/o UBS Fund Administration Luxembourg S.A. – Transfer Agency Department,  
E-Mail: [TA-InvestorKYConboarding@ubs.com](mailto:TA-InvestorKYConboarding@ubs.com)  
Telephone: +352 43 61 61 1  
E-Mail: [TA-InvestorKYConboarding@ubs.com](mailto:TA-InvestorKYConboarding@ubs.com)  
Office address: 5, Rue Jean Monnet, L-2180 Luxembourg  
Mailing Address: P.O. Box 369, L-2013 Luxembourg

The Application Form and accompanying documentation may also be accepted by e-mail, provided that the originals are forwarded by post.

For any question, please contact the Administrator's Investor Services Team by phone or email (see above).

Depending on the Applicant's capacity in relation to the subscription of shares of the Fund, the following documents must be provided to the Administrator.

Please note that the lists of information and documents also provided for in the Appendix 1 may not be in all cases exhaustive and can change from time to time, including, *inter alia*, in case of any legal and regulatory changes related to AML/CFT or in case of changes of the business practices of the Fund (e.g. license extensions, change of risk-appetite, new products or types of distribution channels launched or new targeted countries or types of investors). The Applicant is informed that additional due diligence may be required depending on whether the country of location of the Applicant is deemed anti-money laundering and counter-financing terrorism ("**AML/CFT**") equivalent as AML/CFT Rules or not by the Fund, the Administrator and/or the Management Company or depending on whether the Applicant may be categorised as of higher risk. Furthermore, the Fund, the Administrator as well as the Management Company in any case reserve the right to request additional information/documents required, in particular for the purposes of complying with any requests of the AML/CFT competent authorities as well as any further AML/CFT obligations pursuant to the applicable AML/CFT laws, rules, orders, statutes, regulations, directives or guidance issued by the national competent authorities or supranational authorities in force from time to time, including but not limited to the Criminal Justice Act 2010 (as amended) as well as the set of rules formed by European Directives on the preventions of the use of the financial system for the purpose of money laundering and terrorist financing, as amended from time to time and the Financial Action Task Force (FATF) recommendations, as amended from time to time (collectively referred to as the "**AML/CFT Rules**") and to retain any redemption proceeds if, exceptionally, the identification process could not be completed before.

In case any of the information of the Applicant set out in this Application Form may change, the Applicant is obliged to inform the Fund and/or the Management Company or the Administrator thereof without any delay to ensure that the information maintained of the Applicant may always be up-to-date accordingly.

Please also refer to the "Declarations and Signatures" section in the main part of the Application Form.

Pursuant to the Irish AML/CFT law, obligations have been imposed on all banks and professionals of the financial sector to prevent the use of investment vehicles for money laundering and terrorist financing purposes. Within this context a procedure for the identification and verification of the identity of investors, their representatives, or proxies (holders of a power of attorney) and, as the case may be, any of their Beneficial Owners has been imposed, which requires the Applicant to provide certain information as outlined below (depending, amongst others, if being a natural, a legal person or an Intermediary).

Applicants agree that the specific quality of the documentation to be received and further listed below may vary upon the different ML/TF risks identified by the Fund, Administrator as well as the Management Company in relation to, amongst others, the Applicant, its geographical location, the distribution channel(s) and/or any other situation deemed as a higher risk, which may thus include either to request:

- i. wet ink signed documents/original documents or electronically signed documents (qualified electronic signatures) as validly signed documents<sup>9</sup>;
- ii. certified copies of original documents;
- iii. standard copies of original documents (received in paper format or electronically)

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<sup>9</sup> Electronic signatures are deemed to be equivalent to wet-ink signatures under Luxembourg law, if they meet the requirements for qualified electronic signatures (i.e. it is based on a qualified certificate for electronic signatures issued by a qualified trust service provider or was created by a qualified electronic signature creation device). However, in case an electronic signature does not meet the requirements for qualified electronic signatures, the Fund, Administrator and/or the Management Company may request to be provided with evidence by other means in case there is a doubt in respect of the relevant signature or in case the Fund, the Management Company or the Administrator suspects a document to be forged.

In any case, the Fund, the Management Company as well as the Administrator and their delegates reserve the right to request wet ink signed documents/original documents.

Documents provided should be dated within the past 12 months or 6 months (if enhanced due diligence is required as determined by the Fund or the Administrator)

1. If the Applicant is a **natural person**, you and, as the case may be, your proxy or other representative(s) or person(s) acting on your behalf, or authorized persons signing the Application Form on your behalf, should provide for:
  - i. a certified true copy of valid identity card or passport which bears the person's signature and photograph and
  - ii. if applicable, other documents, like a utility bill, providing evidence of the residential address and/or of the bank reference.
  
2. If the Applicant is a **(i) financial institution** within the meaning of Article 3 of the Directive (EU) 2015/849<sup>10</sup> (the "**Directive (EU) 2015/849**") (e.g. banks, life insurance companies, investment firms etc.) that are licensed and supervised for AML/CFT purposes in a member state of the EU or the EEA or another jurisdiction in a manner consistent with Chapter VI, Section 2 of the Directive (EU) 2015/849 and apply customer due diligence requirements and record-keeping requirements that are consistent with those laid down in the CJA and in the Directive (EU) 2015/849 and have their AML/CFT compliance in accordance with the requirements of the CJA, the Directive (EU) 2015/849 or equivalent rules applicable to them (the "**Financial Institution**" or the "**FI**" or the "**Intermediary**") and, as the case may be, are acting in their own name but also on behalf of one or more underlying person(s) being economically entitled to such investment ("**Underlying Investors**") or **(ii) a company listed** on a recognised stock exchange or dealt with on a regulated market that is subject to AML/CFT requirements equivalent with those in the CJA or the Directive (EU) 2015/849 (the "**Listed Entity**"), in addition to the information/documentation to be provided in the relevant applicable sections/forms of this Appendix 1, you should provide for
  - i. the latest coordinated or up-to-date articles of incorporation (or an equivalent incorporation document);
  - ii. a recent and up-to-date extract from the companies register (*registre des sociétés*) (or equivalent supporting evidence);
  - iii. certified true copy of a passport or identity card for those directors and signatories who will represent the Applicant in relation to the relevant application/subscription;
  - iv. name of the directors (*dirigeants, members of the authorised management*) and directors (*administrateurs*) or persons exercising similar positions (for the legal arrangements) and involved in the business relationship with the Fund;
  - v. provisions governing the power to bind the legal person or arrangement;
  - vi. authorisation to enter into a relationship;
  - vii. a copy of the current and dated list on company letterhead of authorized signatories, or an officially published booklet of authorized signatories, or a duly completed and signed board resolution;
  - viii. the FATCA declaration (see previous section) and relevant tax residency declarations;
  - ix. If the Financial Institution is acting as intermediary, an AML comfort letter and Wolfsberg Questionnaire of the regulated entity conducting AML on the Underlying Investors;
  - x. certified true copy of a passport or identity card for all declared ultimate beneficial owners;
  - xi. proof of public Ultimate Beneficial Owner registration.

The Administrator must require that the Applicant give evidence of its qualification as Financial Institution or Listed Entity to justify that, if deemed applicable, simplified customer due diligence measures can be undertaken.

Except for a Listed Entity, the representatives and the natural person who is/are the Beneficial Owner(s) of the corporate or legal entity must comply with the disclosure requirements as further set out below as well as in the relevant "Beneficial Owner" and "Profile forms" of this Application Form.

3. If the Applicant is a **corporate or legal entity investor acting for its own account**, please provide for
  - i. a copy of the evidence of registration (e.g., excerpt of the trade register);
  - ii. a certified true copy of the constituting documents of the corporate or legal entity (e.g., memorandum and articles of association), a certificate of good standing or similar;
  - iii. an authorised signature list (current and dated list on company letterhead or officially published booklet of authorized signatories or a duly completed and signed board resolution) and a certified true copy of the signatory's valid identity card or passport copy of the latest audited financial statements;
  - iv. the FATCA declaration (see previous section) and relevant tax residency declarations;
  - v. a list of directors including their identity data, function and residential address and a certified true copy of their valid identity card or passport.
  - vi. certified true copy of a passport or identity card for all declared ultimate beneficial owners.
  - vii. proof of public Ultimate Beneficial Owner registration
  - viii. if applicable, other documents, like a utility bill, providing evidence of the residential address and/or of the bank reference of beneficial owners and controlling persons.

The representatives and the natural person who is/are the Beneficial Owner(s) of the corporate or legal entity must comply with the disclosure requirements set out below in the relevant "Beneficial Owner" and "Profile forms" of this Application Form.

4. If the Applicant is a **trust**, please provide for
  - i. certified true copy trust deed along with any amendments and variations;
  - ii. authorised signature list (current and dated list on company letterhead or officially published booklet of authorized signatories or a duly completed and signed board resolution) and a certified true copy of the signatories identity card or passport;
  - iii. the FATCA declaration (see previous section) and relevant tax residency declarations;
  - iv. identification and verification of the Settlor, Protector and Trustee;
  - v. certified true copy of a passport or identity card for all declared ultimate beneficial owners;
  - vi. proof of public Ultimate Beneficial Owner registration;

<sup>10</sup> Directive (EU) 2015/849 of the European Parliament and of the Council of 20 May 2015 on the prevention of the use of the financial system for the purposes of money laundering or terrorist financing, amending Regulation (EU) No 648/2012 of the European Parliament and of the Council, and repealing Directive 2005/60/EC of the European Parliament and of the Council and Commission Directive 2006/70/EC.

- vii. if applicable, other documents, like a utility bill, providing evidence of the residential address and/or of the bank reference of beneficial owners and controlling persons.

The representatives and the person(s) who is/are the Beneficial Owner(s) of the trust (i.e. including the settlor, protector and trustees) must comply with the disclosure requirements set out below in the relevant "Beneficial Owner" and "Profile forms" of this Application Form.

5. If the Applicant is a **partnership**, please provide for
  - i. certified true copy of the Partnership Agreement
  - ii. certified true copy of the certificate of incorporation;
  - iii. authorised signature list (current and dated list on company letterhead or officially published booklet of authorized signatories or a duly completed and signed board resolution) and a certified true copy of the signatory's identity card or passport list of partners;
  - iv. identification and verification of the listed partners;
  - v. certified true copy of a passport or identity card for all declared ultimate beneficial owners;
  - vi. proof of public Ultimate Beneficial Owner registration;
  - vii. if applicable, other documents, like a utility bill, providing evidence of the residential address and/or of the bank reference of beneficial owners and controlling persons;
  - viii. the FATCA declaration (see previous section) and relevant tax residency declarations;
  - ix. copy of most recent audited financial statements (if available).

The representatives and the natural person who is/are the Beneficial Owner(s) of the partnership must comply with the disclosure requirements set out below in the relevant "Beneficial Owner" and "Profile forms" of this Application Form.

Where a legal representative or power of attorney holder is signing this Application Form on behalf of the Applicant ("**Proxy**"), the Proxy shall be asked to complete a separate form provided separately by the Administrator and further represents and warrants that **(i)** he has full power and authority to subscribe for units or shares in the Fund on behalf of the principal Applicant, including that he has been duly authorised to do so by a power of attorney or other written authority; and **(ii)** he has no reason to believe that the Applicant will not be able to perform any settlement obligation in relation to such subscription; and **(iii)** he has obtained and recorded evidence of the identity of the Applicant as well as the Beneficial Owners as further specified under the relevant sections/forms of the Appendix 1 and provides these information and documents to the Fund and/or the Management Company or the Administrator together with this Application Form.

In any case, and for all types of Applicants, the Fund, the Administrator as well as the Management Company reserve the right to request additional information/documents as required, in particular, for the purposes of complying with any requests of the AML/CFT competent authorities or in case a higher risk scenario has been identified by these parties as well as any of its further AML/CFT obligations pursuant to the AML/CFT Rules and reserve the right to refuse the subscription if the Applicant is not able to provide the details required or other necessary documents.

**The Administrator, the Management Company and/or the Fund reserve the right to request additional information/documents required for tax, eligible investor status and any of the above-mentioned AML/CFT compliance purposes and to retain any redemption proceeds if exceptionally the identification process could not be completed before.**

Any information provided to the Administrator, the Fund as well as the Management Company in this context is collected for AML/CFT compliance purposes only.

Note on certifications:

- Independently certified means certified by name, date and signature as a true and complete copy of the original by (i) a competent authority in accordance with the laws of your country (e.g., notary, embassy, consulate, solicitor, the competent official authority who issued the document); or (ii) a UBS bank.

Self-certified means certified by name, date and signature as a true, complete and valid copy of the original by the company itself (e.g. the company secretary)