

Mailing Address  
Apex Fund Services (Ireland) Limited  
Second Floor  
Block 5  
Irish Life Centre  
Abbey Street Lower  
D01 P767  
Ireland  
Tel: + 353 1 567 9248  
E-mail: [transfer.agency@apexfs.com](mailto:transfer.agency@apexfs.com)

### Instructions

For initial subscriptions of Shares in the ICAV you must complete the Application Form and send by e-mail or any other electronic means as deemed acceptable by the Administrator together with any supporting documentation required for Anti-Money Laundering.

Failure to provide the completed Application Form along with the documentation required for Anti-Money Laundering purposes may result in the deduction of tax due to the Irish Finance Act requirements outlined in the Anti-Money Laundering section and/or a delay in the acceptance and/or payment of a transfer/redemption request.

Subsequent subscriptions may be made in writing by e-mail or any other electronic means as deemed acceptable by the Administrator, stating your registration details and the amount to be invested.

Non Retail Accounts - An authorised signatory list must be provided at the time of account opening for the investing entity in whose name the account is being opened. The Application Form must be signed by no less than two authorised signatories.

Any changes to the original account details must be received and signed by no less than two authorised signatories, in the case of a company, on corporate letterhead, and in the case of retail applicants, all account signatories must authorise every instruction.

All subscription and redemption requests and instructions in relation to Shares in a Fund must be received before 12:00pm (Irish time) on the Business Day prior to the relevant Dealing Day. Subscription and redemption requests received after that time will generally be deemed to have been received for the next Dealing Day.

### Subscription Information

Please pay subscription monies in the relevant class currency to the following account(s) referencing the name of the applicant

Sub-Fund	TAM Balanced Fund		
Currency	EURO	Sterling	US Dollars
Bank	Raiffeisen Bank International	National Westminster Bank	Raiffeisen Bank International
SWIFT Code	RZBAATWWXXX	NWBKGB2LXXX	RZBAATWWXXX
IBAN	MT05SBMT5550500000810 0070042000	MT76SBMT555050000081 00070042080	MT89SBMT5550500000810 0070042040
ABA	n/a	n/a	n/a
Beneficiary Bank Account	08100070042000	08100070042080	08100070042040

Number			
<b>Beneficiary Bank Name</b>	Sparkasse Bank Malta p.l.c.	Sparkasse Bank Malta p.l.c.	Sparkasse Bank Malta p.l.c.
<b>Beneficiary Name</b>	Platform Capital UCITS ICAV - TAM Balanced Fund - CLT	Platform Capital UCITS ICAV - TAM Balanced Fund - CLT	Platform Capital UCITS ICAV - TAM Balanced Fund - CLT
<b>Beneficiary Number</b>	0070042	0070042	0070042

Please ensure that your bank quotes the details above in the electronic funds transfer to the appropriate bank.

Subscription monies should be received by wire transfer in cleared funds within three Business Days after the Dealing Day in the currency of the relevant Shares.

#### Details of Investment:

The Applicant, having received and read a copy of the Prospectus of the ICAV hereby applies to invest in the ICAV as indicated in the table below. Please reference the Fund Name(s) and Share Class(es) from the list below and insert the value of the subscription.

Fund Name	Share Class	Total value of Subscription	Preliminary Charge (Max 3%)
TAM Balanced Fund	Class A Retail EUR Shares [ISIN [●]]	€	
TAM Balanced Fund	Class A Retail GBP Shares [ISIN [IE00BJN5JD01]]	£	
TAM Balanced Fund	Class A Retail USD Shares [ISIN [●]]	\$	
TAM Balanced Fund	Class B EUR Shares [ISIN [●]]	€	
TAM Balanced Fund	Class B GBP Shares [ISIN [IE00BJN5JF25]]	£	
TAM Balanced Fund	Class B USD Shares [ISIN [●]]	\$	
TAM Balanced Fund	Class C Institutional EUR Shares [ISIN [●]]	€	
TAM Balanced Fund	Class C Institutional GBP Shares [ISIN [IE00BJN5JG32]]	£	
TAM Balanced Fund	Class C Institutional USD Shares [ISIN [●]]	\$	

Should you have any questions, please contact the Administrator, Apex Fund Services (Ireland) Limited , Second Floor

Block 5  
Irish Life Centre  
Abbey Street Lower  
D01 P767  
Ireland

Tel: + 353 1 567 9248  
Email: [transfer.agency@apexfs.com](mailto:transfer.agency@apexfs.com)

#### Account Registration Details

Registered Name		
Account Designation (if any)		
Registered Address PO or C/O will not be accepted		
Mailing Address (if different)		
Contact Name		
Contact Details	Telephone (inc. country code)	
Email		

#### Intermediary Details (if applicable)

Broker ID		Branch ID	
Broker Name			
Broker Address			
Representative Name		Representative ID	
Contact Details	Telephone (inc. country code)		
Email			

#### Bank Account Details for Redemption and Distribution Payments

Please list the details of the account to which redemption proceeds should be paid. Payments will only be made to a bank account held in the name of the registered Shareholder. No Third Party Payments will be made. Redemptions will not be processed on non-cleared/verified accounts.

Both IBANS & SWIFT (BIC) Codes should be quoted for all banks within the EU/EEA.

Amendments to Shareholder's payment instructions will only be effected upon receipt of an original instruction which has been duly authorised. In the case of joint accounts, instructions will only be made upon receipt of instruction duly signed by all applicants.

The Administrator does not accept any responsibility for the bank account details quoted and any payments made using these details will be at your risk.

<b>Correspondent Bank Name</b>	
<b>Correspondent Bank Address</b>	
<b>Correspondent Bank Sort Code/ SWIFT (BIC)/ ABA/Fed wire</b>	
<b>Beneficiary Bank Name</b>	
<b>Beneficiary Bank Address</b>	
<b>Beneficiary Bank Sort Code/ SWIFT (BIC)/ ABA/Fedwire</b>	
<b>Beneficiary Account Name</b>	
<b>Beneficiary Account Number</b>	
<b>Reference</b>	

#### ICAV / Fund Documentation and KIIDs

By marking the box opposite, I/we hereby confirm that I/we have received and considered the Key Investor Information Documents (the **KIIDs**) applicable to the Fund and/or relevant Share Class(es) in good time and prior to making an application for Shares in such Fund and/or Share Class(es).

☐

I/We understand that the KIIDs may be provided by way of **Electronic Delivery** and that a paper copy of the KIIDs will be provided free of charge on request.

☐

By marking the box opposite, I/we confirm that my preference is to receive the KIIDs [by way of Electronic Delivery and I/we consent to receipt thereof by Electronic Delivery] or [in paper format].  
**[Please delete as appropriate].**

☐

I/we acknowledge that updated versions of the KIIDs will be made available on the website [www.quaysidefunds.com](http://www.quaysidefunds.com).

☐

**Electronic Delivery** includes email delivery to the email address set out herein or as otherwise agreed with the Administrator from time to time and/or electronically making available such documentation or information on [www.quaysidefunds.com](http://www.quaysidefunds.com) or such other web-site address as may be notified to me/us from time to time.

## Data Protection Notice

In order to manage its business, the ICAV collects Personal Data from prospective investors and investors including their directors, officers, employees and/or beneficial owners ("**you**"). "**Personal data**" means any data relating to an identified or identifiable living individual. The ICAV is a data controller within the meaning of data protection law and will hold any Personal Data provided by or in respect of investors in accordance with data protection law.

### TYPE OF DATA COLLECTED

The ICAV holds the following types of Personal Data in relation to you: name, address, other contact details (telephone, email address), passport/drivers' licence details, ultimate beneficial owner/related party information that may be another individual noting the aforementioned types of Personal Data, date/place of birth, gender, tax/ social security number, bank details, photographic ID, proofs of address (usually utility bills), transaction instruction and detail and signature,] as furnished by you when completing an ICAV Application Form or to keep that information up to date.

The ICAV may also obtain further Personal Data on you by way of PEP (Politically Exposed Person) checks, sanctions checks, negative news checks and screening checks. PEP checks may lead to the ICAV obtaining information regarding your status as a PEP including your political beliefs and other categories of sensitive data. The ICAV is obliged to verify the Personal Data and carry out ongoing monitoring].

### WHY AND ON WHAT LEGAL BASIS IT IS PROCESSED

The ICAV and/or any of its delegates or service providers (the administrator, depositary, investment manager, distributor, money laundering reporting officer, legal counsel, auditors, company secretary, third party risk consultants) may process your Personal Data for any one or more of the following purposes and on the following legal bases:

- (1) In order to operate the ICAV including managing and administering a Shareholder's investment in the relevant ICAV on an on-going basis which enables the ICAV to satisfy its contractual duties and obligations to the Holder and any processing necessary for the performance of the contract with the Shareholder);
- (2) to comply with any applicable legal, tax or regulatory obligations on the ICAV for example, ICAV Act, anti-money laundering, counter-terrorism and tax legislation, for fraud prevention and to perform financial and/or regulatory reporting;
- (3) for any other legitimate business interests' of the ICAV or a third party to whom Personal Data is disclosed, where such interests are not overridden by the interests of the investor, including for statistical analysis, market research purposes and for the defence of legal claims; or

***Your right to object – Please note that you have a right to object to the processing of your Personal Data where that processing is carried out for the ICAV's legitimate interests. In such a case the ICAV must stop processing your personal data unless it can demonstrate compelling legitimate interests which override your interests and you have a right to request information on the balancing test it uses.***

- (4) for any other specific purposes where you have given your specific consent and where processing of Personal Data is based on consent, you will have the right to withdraw it at any time.

## **WHO YOUR PERSONAL DATA IS DISCLOSED TO**

The ICAV and/or any of its delegates or] service providers may disclose or transfer Personal Data, whether in Ireland or elsewhere (including entities situated in countries outside of the EEA), to other delegates, duly appointed agents and service providers of the ICAV (and any of their respective related, associated or affiliated companies or sub-delegates) and to third parties. At present, your information may be disclosed to: Service providers, advisers, regulatory bodies, taxation authorities, auditors, technology providers, translators, etc.

## **HOW LONG IT IS KEPT FOR**

Once you or your related investor stop availing of services from the ICAV it will generally retain your Personal Data for a minimum period of 7 years. In certain circumstances the ICAV will be obligated to retain your Personal Data longer than this because of its statutory obligations to retain information, including anti-money laundering, counter-terrorism, tax legislation. The ICAV will take all appropriate steps to destroy or erase the data from its systems when they are no longer required.

## **YOUR RIGHTS**

You have the right to request access to your Personal Data kept by the ICAV; and the right to rectification or erasure of your data; to restrict or object to processing of your data, and to data portability, subject to any restrictions imposed by data protection law and any statutory obligations to retain information including anti-money laundering, counter-terrorism and tax legislation. If you are unhappy with how the ICAV is handling your Personal Data you have a right to lodge a complaint with the Data Protection Authority in the Member State of your habitual residence, place of work or of an alleged infringement of the General Data Protection Regulation.

## **TRANSFERRING YOUR DATA OUTSIDE THE EEA**

The ICAV and/or any of its delegates and service providers will not transfer Personal Data to a country outside of the EEA unless that country ensures an adequate level of data protection or appropriate safeguards are in place. The European Commission has prepared a list of countries that are deemed to provide an adequate level of data protection which, to date, includes Switzerland, Guernsey, Argentina, the Isle of Man, Faroe Islands, Jersey, Andorra, Israel, New Zealand and Uruguay. Further countries may be added to this list by the European Commission at any time. The US is also deemed to provide an adequate level of protection where the US recipient of the data is privacy shield-certified. If a third country does not provide an adequate level of data protection, then the ICAV and/or any of its delegates and service providers will ensure it puts in place appropriate safeguards such as the model clauses (which are standardised contractual clauses, approved by the European Commission) or binding corporate rules, or relies on one of the derogations provided for in data protection law. As at the date of this Notice the ICAV transfers personal data to the Administrator's affiliates in the United States who may in turn transfer your personal data to certain IT service providers in the United States. This will always be done in accordance with standard contractual clauses approved by the European Commission in accordance with Article 46(2) of the GDPR. A copy of these standard contractual clauses can be obtained by contacting the ICAV. Any changes to where or how data is transferred will be made available via [www.quaysidefunds.com](http://www.quaysidefunds.com).

## **ENGAGING A DATA PROCESSOR**

Where processing is carried out on behalf of the ICAV, the ICAV shall engage a data processor, within the meaning of data protection law, which implements appropriate technical and organisational security measures in a manner that such processing meets the requirements of data protection law, and ensures the protection of your rights. The ICAV will enter into a written contract with the data processor which will set out the data processor's specific mandatory obligations laid down in data protection law, including to process Personal Data only in accordance with the documented instructions from the ICAV.

## **AUTOMATED PROCESSING**

As part of the ICAV's business and ongoing monitoring, the ICAV may from time to time carry out automated decision-making in relation to you, including, for example, profiling of investors in the context of anti-money laundering reviews, and this may result in an investor being identified to the revenue authorities, law enforcement authorities and to other entities where required by law, and the ICAV terminating its relationship with the investor.

#### **FAILURE TO PROVIDE YOUR DATA**

You are required to provide their Personal Data for statutory and contractual purposes. Failure to provide the required Personal Data will result in the ICAV being unable to permit, process, or release your investment in the ICAVs and this may result in the ICAV terminating its relationship with you.

#### **ADMINISTRATOR AND DEPOSITARY AS DATA CONTROLLER**

The Administrator, *Apex Fund Services (Ireland) Limited* and the Depositary, *Sparkasse Bank Malta public limited company, Ireland Branch* also act as a data controller of your Personal Data in some limited in circumstances. These are:

**The Administrator:** (i) in order to use the Personal Data you have provided to the Administrator in relation to your investment in the ICAV for the purposes of completing anti-money laundering checks in connection with another fund in which you wish you to invest to which the Administrator also provides Administration services and (ii) in order to make a suspicious activity report to An Garda Síochána or Irish Revenue for itself to comply with its legal obligations, not with respect to the ICAV.

**The Depositary:** The Depositary may request the ICAV's bank statement information and information from the ICAV's share register from the Administrator in order to complete cash monitoring and other oversight services. Therefore, if a wire was completed on your behalf, the Depositary could obtain your name and bank account details. In such circumstances, the Depositary is acting as a data controller with respect to the collection of the data from the ICAV.

#### **CONTACT US**

Any questions about the operation of the ICAV's data protection policy should be referred in the first instance to [office@quayside.eu](mailto:office@quayside.eu)



## Declarations and Signatures

I/We, having received and considered a copy of the Prospectus and the relevant Supplement (the Prospectus), hereby confirm that this application is based solely on the current Prospectus and the material contracts therein referred to together (where applicable) with the most recent annual report or semi-annual report and accounts of the ICAV.

I/We agree that we have received and considered in good time prior to the application for any proposed subscription for Shares the KIID in issue for the relevant Share class or Fund.

I/We acknowledge that the ICAV is required to provide the relevant KIID or KIIDs prior to each subsequent subscription for, or exchange of, Shares in the relevant Share Class and I/we hereby agree that for each subsequent application for subscriptions and/or exchange of Shares in any Share Class, the KIID will be provided to me/us via the above website or by way of Electronic Delivery (as defined above) unless a paper copy is requested herein from the Administrator or the relevant Investment Manager.

I/We undertake to observe and be bound by the provisions of the Articles of Association of the ICAV (as amended from time to time) and apply for the Shares issued in relation to this application to be entered in the register of Shareholders in my/our name(s) (or in the name of a nominee or agent).

I/We acknowledge that, owing to anti-money laundering requirements operating within their respective jurisdictions, the ICAV, its Directors, the Administrator, and any distributor which may be appointed (as the case may be) may require further identification of the applicant(s) before the application can be processed and the ICAV, its Directors, the Administrator, and any distributor which may be appointed shall be held harmless and indemnified against any loss arising as a result of a failure to process the application if such information has been requested by the parties referred to and has not been provided by me/us.

I/We hereby authorise the Administrator to accept and execute any instructions, (including but not limited to any instructions regarding subscriptions, exchanges, transfers or redemptions of Shares or any payment in relation to same or otherwise) in respect of Shares to which this application relates, given by me/us in written form. I/We hereby agree to indemnify each of the Administrator and the ICAV and agree to keep each of them indemnified against any loss of any nature whatsoever arising to any of them as a result of either of them acting upon instructions given in written form by me/us. The Administrator and the ICAV may rely conclusively upon, and shall incur no liability in respect of, any action taken upon any notice, consent, request, instruction or other instrument believed in good faith to be genuine or to be signed by properly authorised persons.

I/We acknowledge and agree that subscription monies received in respect of a Fund in advance of shares being issued on the relevant Dealing Day will be held in a subscription and redemption account in the name of the relevant Fund and will be treated as an asset of that Fund. I/We further acknowledge and agree that I/we will be an unsecured creditor of the relevant Fund with respect to the amount held by the Company until Shares are issued on the Dealing Day and, as such, I/we will not benefit from any appreciation in the Net Asset Value of the relevant Fund or any other Shareholder rights (including dividend entitlement) until such time as Shares are issued on the relevant Dealing Day. I further acknowledge and agree that such amounts will constitute a debt due to me from the relevant Fund and will not be held on trust for me, pending the issue of shares on the relevant Dealing Day.

I/We acknowledge and agree that payment of redemption proceeds in respect of a particular Fund is subject to receipt by the Administrator of original subscription documents and compliance with all anti-money laundering procedures and that notwithstanding this, as a redeeming Shareholder, I/we will cease to be a Shareholder, with regard to the redeemed Shares, and will be an unsecured creditor of the particular Fund, from the relevant Dealing Day. I/We further acknowledge that pending redemptions, including blocked redemptions, will, pending payment to me/us, be held in a subscription and redemption account in the name



of the relevant Fund. I acknowledge and agree that such amounts will constitute a debt due to me from the relevant Fund, as and from the relevant Dealing Day, and will not be held on trust for me pending payment of the redemption proceeds.

I/We consent to any notice or other document to be sent by the ICAV or the Administrator to me/us as a Shareholder, by electronic means including but not limited to e-mail, SWIFT or posting such notice or other document on a website notified to me/us by post or by e-mail.

I/We agree that the ICAV has offered the choice of receipt of the relevant KIIDs by way of Electronic Delivery or in paper format and unless I/we have indicated herein that we wish to receive the relevant KIIDs by way of paper copy, I/we agree that the relevant KIIDs may be provided by way of Electronic Delivery and I/we consent to receipt thereof by Electronic Delivery.

I/We confirm that I/we have the capacity and am/are duly authorised to complete this form and to make the representations and give the indemnities referred to herein.

I/We agree to provide these representations to the ICAV and its Directors at such times as either of them may request and to provide on request such certifications, documents or other evidence as the ICAV and/or its Directors may reasonably require to substantiate such representations.

I/We understand that the representations and warranties and declarations made herein are continuous and all subsequent subscriptions of Shares in the ICAV by me/us shall be governed by them, and I/we agree to notify the ICAV or the Administrator immediately, if any representation or warranty or declaration are no longer accurate and to abide by any directions from the ICAV or the Administrator arising as a result. We agree to indemnify each of the ICAV, the Administrator, the Custodian, the relevant Investment Manager, any appointed distributor and their affiliates and agree to keep each of them indemnified against any loss of any nature whatsoever arising to any of them as a result of any breach of any of the representations, warranties, declarations, acknowledgments, instructions or confirmation given by us in this Application Form.

I/We understand that the tax disclosure set forth in the Prospectus is of a general nature and may not cover the jurisdiction in which I/we are subject to taxation. I/We hereby indemnify and keep the ICAV indemnified against any loss arising to the ICAV by reason of the ICAV becoming liable to account for tax on the happening of an event giving rise to a charge to taxation arising as a result of the holding or beneficial ownership of Shares by us including any interest or penalties.

I/We acknowledge that the ICAV or the Administrator on its behalf intends to take such steps as may be required to satisfy any obligations imposed by (i) the Foreign Account Tax Compliance Act (FATCA) regulations, (ii) any applicable law relating to the OECD Common Reporting Standard (CRS) or (iii) any provisions imposed on the ICAV under Irish law arising from the inter-governmental agreement between the Government of the United States of America and the Government of Ireland (IGA), the Multilateral Competent Authority Agreement on Automatic Exchange of Financial Account Information, sections 891E, 891F or 891G of the Taxes Consolidation Act 1997 (TCA) and any applicable regulations implementing same so as to ensure compliance or deemed compliance (as the case may be) with the FATCA regulations, the IGA, CRS and any other applicable laws relating to the automatic exchange of information.

I/We agree to provide to the ICAV, the Manager, the relevant Investment Manager, the Administrator and/or the Distributor the necessary FATCA/CRS self-certification 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 the FATCA regulations, the IGA, CRS, any law arising out of sections 891E, 891F or 891G of the TCA as described above, and any other applicable laws relating to the automatic exchange of information or otherwise. Should any information furnished to any of them become inaccurate or incomplete in any way, I/we hereby agree to

notify the ICAV, the Manager, the relevant Investment Manager, the Administrator and/or the Distributor immediately of any such change and further agree to immediately take such action as the ICAV, the Manager, the relevant Investment Manager, the Administrator and/or the Distributor 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 ICAV, the Manager, the relevant Investment Manager, the Administrator and/or the Distributor (as applicable). If relevant, I/we agree to notify the ICAV and the Administrator of any change to my/our tax residency status. I/we hereby also agree to indemnify and keep indemnified the ICAV, the Manager, the relevant Investment Manager, the Administrator and/or the Distributor 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 ICAV, the relevant Investment Manager, the Sub-Investment Manager, the Administrator and/or the Distributor 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 ICAV, the Manager, the relevant Investment Manager, the Administrator and/or the Distributor. 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 ICAV, and that the ICAV and the Custodian are authorised 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 ICAV and the Custodian against any loss suffered by them or other Shareholders in the ICAV in connection with any obligation or liability to so deduct, withhold or account.

In consideration of the Administrator processing this subscription for Shares and making a provisional allotment of Shares, I/we hereby agree to indemnify and hold harmless the ICAV, the Administrator, the Directors and the relevant Investment Manager against any loss, costs or expenses incurred by it or them as a result of my/our failure to pay the required subscription monies for the application of Shares within the time frame required by the Administrator and set out in the Prospectus. I/We acknowledge that I am/we are liable for any interest, losses or other costs incurred as a result of failing to settle an order with the time frames set out in the Prospectus.

I/We hereby certify that I am/we are aware of the risks involved in the proposed investment as set out in the Prospectus including a possible loss of the principal amount involved, and that I/We have such knowledge, sophistication and experience in financial and business matters as to be capable of evaluating the merits and risks of an investment in the ICAV.

I/We confirm that I am/we are in agreement with the distribution policy as outlined in the Prospectus.

I/We hereby represent and warrant to, and agree and covenant with, the ICAV, the Fund, the Manager and the relevant Investment Manager that I am/we are a Qualified Institutional Buyer (as defined in Rule 144A under the Securities Act of 1933) and that I/we shall notify the relevant Investment Manager as soon as reasonably practicable should such status change.

I/We declare that the information contained in the declarations completed above is true and correct.

#### **Declaration of Residence Outside the Republic of Ireland**

Applicants resident outside the Republic of 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/units.

Terms used in this declaration are defined in the Prospectus. Please select **either** A or B

**A - Declaration on Own Behalf** ☐

- i. 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 an Irish Resident or Irish Ordinarily Resident, and should I/we/the company\* become an Irish Resident, I/we will so inform you, in writing, accordingly.

*\*Delete as appropriate*

**B - Declaration as Intermediary** ☐

- i. I/We\* declare that I am/we are\* applying for Shares on behalf of persons who will be beneficially entitled to the Shares, and who to the best of my/our\* knowledge and belief, are neither an Irish Resident or Irish Ordinarily Resident, and
- ii. 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 an Irish Resident.

*\*Delete as appropriate*

**AUTHORISATION**

I/We agree to be bound by the Declarations, Representations, Consents and Indemnities set out in this Application Form

Name of Applicant

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Signature of applicant or  
authorized signatory

---

Capacity of Authorised  
Signatory if applicable

---

Date

---

Name of Joint Applicant/2<sup>nd</sup>  
signer

---

Signature of joint applicant or  
authorized signatory

---

Capacity of Authorised  
Signatory if applicable

---

Date

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### Important Information

Non-resident declarations are subject to inspection by the Irish Revenue Commissioners and it is a criminal offence to make a false declaration.

To be valid, this Application Form (incorporating the declaration required by the Irish Revenue Commissioners) must be signed by the applicant. Where there is more than one applicant, each person must sign. If the applicant is a company, it must be signed by the company secretary or another authorised officer.

If the Application Form (incorporating the declaration required by the Irish Revenue Commissioners) is signed under power of attorney, a copy of the power of attorney must be furnished in support of the signature.

Applicants who are resident or ordinarily resident in the Republic of Ireland and who are not Exempt Irish resident as defined in the Prospectus; please contact the Administrator immediately.

This Application Form is governed by the laws of Ireland.

### Declaration of Irish Resident Exempt Investors

Declaration referred to in Section 739D(6), Taxes Consolidation Act, 1997. It is important to note that this declaration, if it is then still correct, shall apply in respect of any subsequent acquisitions of shares/units.

- I declare that the information contained in this declaration is true and correct.
- I also declare that I am applying for the shares/units on behalf of the applicant named below who is entitled to the shares in respect of which this declaration is made and is a person referred to in Section 739D(6) of the Taxes Consolidation Act, 1997, being a person who is: *(please tick ✓ as appropriate)*

a pension scheme;	
a company carrying on life business within the meaning of section 706 TCA 1997;	
an investment undertaking;	
an investment limited partnership;	
a special investment scheme;	
a unit trust to which section 731(5)(a) TCA 1997 applies;	
a charity being a person referred to in section 739D(6)(f)(i) TCA 1997;	
a qualifying management company;	
entitled to exemption from income tax and capital gains tax by virtue of section 784A(2) TCA, 1997 (see further requirement for Qualifying Fund Manager below);	
a PRSA Administrator;	
a credit union within the meaning of section 2 of the Credit Union Act 1997.	

### Additional requirements where the declaration is completed on behalf of a Charity

- I also declare that at the time of making this declaration, the shares in respect of which this declaration is made are held for charitable purposes only and
  - form part of the assets of a body of persons or trust treated by the Revenue Commissioners as a body or trust established for charitable purposes only, or
  - are, according to the rules or regulations established by statute, charter, decree, deed of trust or will, held for charitable purposes only and are so treated by the Revenue Commissioners.
- I undertake that, in the event that the person referred to in paragraph (7) of Schedule 2B TCA 1997

ceases to be a person referred to in Section 739D(6)(f)(i) TCA, 1997, I will, by written notice, bring this fact to the attention of the investment undertaking accordingly.

**Additional requirements where the declaration is completed by a qualifying fund manager / PRSA Administrator**

- I/we\* also declare that at the time this declaration is made, the shares in respect of which this declaration is made
  - are assets of \*an approved retirement fund/an approved minimum retirement fund or a PRSA, and
  - are managed by the Declarant for the individual named below who is beneficially entitled to the shares.
- I/we\* undertake that, if the shares cease to be assets of \*the approved retirement fund/the approved minimum retirement fund or the PRSA, including a case where the shares are transferred to another such fund or account, I/we\* will, by written notice, bring this fact to the attention of the investment undertaking accordingly.

**\*Delete as appropriate**

**Additional requirements where the declaration is completed by an Intermediary**

- I/we\* also declare that I am/we are\* applying for shares/units on behalf of persons who
  - to the best of my/our\* knowledge and belief, have beneficial entitlement to each of the shares/units in respect of which this declaration is made, and
  - is a person referred to in section 739D(6) TCA 1997.
- I/we\* further declare that
  - Unless I/we\* specifically notify you to the contrary at the time of application, all applications for shares/units made by me/us\* from the date of this application will be made on behalf of persons referred to in section 739D TCA 1997, and
  - I/we\* will inform you in writing if I/we\* become aware that any person ceases to be a person referred to in section 739D(6) TCA 1997.

**\* Delete as appropriate**

**Name of applicant:** \_\_\_\_\_

**Irish tax reference number of applicant:** \_\_\_\_\_

**Authorised signatory:** \_\_\_\_\_ **(declarant)**

**Title: (Mr/Ms. Etc.)** \_\_\_\_\_

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

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

**IMPORTANT NOTES**

1. This is a form authorised by the Revenue Commissioners which may be subject to inspection. It is an offence to make a false declaration.
2. Tax reference number in relation to a person has the meaning assigned to it by Section 885 TCA, 1997 in relation to a "specified person" within the meaning of that section. In the case of a charity, quote the Charity Exemption Number (CHY) as issued by Revenue. In the case of a qualifying fund manager, quote the tax reference number of the beneficial owner of the share/units.
3. In the case of, (i) an exempt pension scheme, the administrator must sign the declaration; (ii) a retirement annuity contract to which Section 784 or 785 applies, the person carrying on the business of granting annuities must sign the declaration; (iii) a trust scheme, the trustees must sign the

declaration. In the case of a charity, the declaration must be signed by the trustees or other authorised officer of a body of persons or trust established for charitable purposes only within the meaning of Sections 207 and 208 TCA 1997. In the case of an approved retirement fund/an approved minimum retirement fund or a PRSA, it must be signed by a qualifying fund manager or PRSA administrator. In the case of an intermediary, the declaration must be signed by the intermediary. In the case of a company, the declaration must be signed by the company secretary or other authorised officer. In the case of a unit trust it must be signed by the trustees. In any other case it must be signed by an authorised officer of the entity concerned or a person who holds a power of attorney from the entity. A copy of the power of attorney should be furnished in support of this declaration.

## **ANTI-MONEY LAUNDERING – KNOW YOUR CUSTOMER REQUIREMENTS**

### **ANTI-MONEY LAUNDERING INFORMATION**

#### **(A) CONTROLLER DETAIL**

As appropriate to this account, please insert below the details of all Directors / Trustees / Partners / Committee Members or Controlling person(s).

<b>Name</b>	<b>Residential Address</b>	<b>Date of Birth</b>	<b>Occupation</b>

#### **(B) ULTIMATE BENEFICIAL OWNER DETAIL <sup>1</sup>**

As appropriate to this account, please insert below the details of the natural person(s) who ultimately benefit from this investment regardless of how the account is registered.

<b>Name</b>	<b>Residential Address</b>	<b>Date of Birth</b>	<b>Occupation</b>

#### **<sup>1</sup> Ultimate Beneficial Owner**

Where no beneficial ownership information is provided, it will be assumed no beneficiary holds 25% or more of the assets of the entity.

#### **<sup>2</sup> Politically Exposed Person**

Is the ultimate beneficial owner a senior government, political or military official, or an immediate family member or close associate of such a person?

#### **(C) PEP SECTION**

From above, where there is PEP associated with this account, please provide the following two confirmations;

(a) **Source of Wealth**

Please insert below the details of the individual PEP's Source of Wealth, being confirmation of the economic activity which has generated the net worth of the individual

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(b) **Source of Funds**

Please insert below details of the origin of the particular funds which are the subject of this investment and how they were acquired

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### Entity 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 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 2003. 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:

<http://www.revenue.ie/en/business/aeoi/index.html>

<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 \*)

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

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

Please tick either (a), (b) or (c) below 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)**

□□□□□□.□□□□□□.□□.□□□□

**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</p> <p>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>																
II.	<p><b>The Entity is an Exempt Beneficial Owner,</b></p> <p>Please tick and confirm the category of Exempt Beneficial Owner;</p> <table style="width: 100%;"> <tr> <td style="width: 5%;">I.</td> <td style="width: 85%;">Government Entity</td> <td style="width: 10%;"><input type="checkbox"/></td> </tr> <tr> <td>II.</td> <td>International Organisation</td> <td><input type="checkbox"/></td> </tr> <tr> <td>III.</td> <td>Foreign Central Bank</td> <td><input type="checkbox"/></td> </tr> <tr> <td>IV.</td> <td>Exempt Retirement Fund</td> <td><input type="checkbox"/></td> </tr> <tr> <td>V.</td> <td>Collective Investment Vehicle Wholly Owned by Exempt Beneficial Owners.</td> <td><input type="checkbox"/></td> </tr> </table>	I.	Government Entity	<input type="checkbox"/>	II.	International Organisation	<input type="checkbox"/>	III.	Foreign Central Bank	<input type="checkbox"/>	IV.	Exempt Retirement Fund	<input type="checkbox"/>	V.	Collective Investment Vehicle Wholly Owned by Exempt Beneficial Owners.	<input type="checkbox"/>	
I.	Government Entity	<input type="checkbox"/>															
II.	International Organisation	<input type="checkbox"/>															
III.	Foreign Central Bank	<input type="checkbox"/>															
IV.	Exempt Retirement Fund	<input type="checkbox"/>															
V.	Collective Investment Vehicle Wholly Owned by Exempt Beneficial Owners.	<input type="checkbox"/>															

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

### 3.4 Non-Financial Institutions ("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;

[illegible]

☐

**Direct Reporting (NFFE)**

IV.

Please provide your GIIN

□□□□□□.□□□□□□.□□.□□□□

☐

**\*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)

☐

**Reason C** - No TIN is required. (Note: This should only be selected 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.	<b>A Financial Institution Resident in a Non-Participating Jurisdiction</b> (Please also tick the box that applies) <div style="margin-top: 10px;"> <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 forms for each of your Controlling Persons) </div> <div style="margin-top: 10px;"> <input type="checkbox"/> <b>An Investment Entity resident in a Non-Participating Jurisdiction that is not managed by another Financial Institution</b> </div> <div style="margin-top: 10px;"> <input type="checkbox"/> <b>Other Financial Institution</b>, including a Depository Financial Institution, Custodial Institution or Specified Insurance Company </div>	<input type="checkbox"/>

III.	<p><b>Non-Reporting Financial Institution under CRS.</b></p> <p><b>Specify the type of Non-Reporting Financial Institution below:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Governmental Entity</li> <li><input type="checkbox"/> International Organization</li> <li><input type="checkbox"/> Central Bank</li> <li><input type="checkbox"/> Broad Participation Retirement Fund</li> <li><input type="checkbox"/> Narrow Participation Retirement Fund</li> <li><input type="checkbox"/> Pension Fund of a Governmental Entity, International Organization, or Central Bank</li> <li><input type="checkbox"/> Exempt Collective Investment Vehicle</li> <li><input type="checkbox"/> Trust whose trustee reports all required information with respect to all CRS Reportable Accounts</li> <li><input type="checkbox"/> Qualified Credit Card Issuer</li> <li><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:</li> </ul>	<input type="checkbox"/>
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## 5.2 Non Financial Institution ("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 NFE or Passive NFE.

I.	<p><b>Active NFE</b> – a corporation the stock of which is regularly traded on an established securities market.</p> <p>Please provide the name of the established securities market on which the corporation is regularly traded: _____</p>	<input type="checkbox"/>
II.	<p><b>Active NFE</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: _____</p> <p>Please provide details of the securities market on which the Entity is regularly traded:</p>	<input type="checkbox"/>
III.	<b>Active NFE</b> – a Government Entity or Central Bank	<input type="checkbox"/>
IV.	<b>Active NFE</b> – an International Organisation	<input type="checkbox"/>
V.	<b>Active NFE</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 NFE</b> -If this box is ticked please also complete <b>Section 6.1</b> for each of the Controlling Person(s) of the Entity and a separate <i>“Individual (including Controlling Person’s Self-Certification for FATCA and CRS form”</i> as indicated in section 6.2 for each Controlling Person(s)	<input style="width: 20px; height: 20px;" type="checkbox"/>
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## Section 6: Controlling Persons

**NB: Please note that each Controlling Person must complete a separate *“Individual (including Controlling Persons) FATCA and CRS Self-Certification”* 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) FATCA and CRS Self-Certification”* 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 (including 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 (Controlling Person's) 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 2003. 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 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/aeoi/index.html>  
<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 \*)

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

**\*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** - The Account Holder is otherwise unable to obtain a TIN (Please explain why you are unable to obtain a TIN)
- ☐ **Reason C** - No TIN is required. (Note: This should only be selected if the domestic law of the relevant country/jurisdiction does not required the collection of the TIN issued by such country/jurisdiction)

**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 NFE or an Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution)

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

<b>Please Confirm the type of Controlling Person applicable under CRS that applies to you/the Account holder by ticking the appropriate box</b>	<b>Please Tick</b>	<b>Entity Name</b>
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): \_\_\_\_\_

## Anti-Money Laundering Requirements

In order to comply with Anti-Money laundering legislation the Fund (or the Administrator on behalf of the Fund) is required to obtain identity verification documents from each Subscriber.

Below is a list of anti-money laundering documentation to be provided by investors and is provided as a guide outlining simplified and standard due diligence requirements. Please note that the AML reviews are carried out on a risk based approach and depending on the risk category of your investment, additional AML documentation may be required. The administrator will confirm customer due diligence documentation requirements at account opening stage.

We require original certified true copies of all AML documentation. Certification requirements are included in Appendix 3 to this supplement.

### Section 1. Simplified Due Diligence

A Subscriber qualifies for simplified due diligence from General Identification Requirements when one of the following conditions is met **and** the Subscriber's subscription proceeds have originated from an "Approved Country" <sup>1</sup>

#### A. Regulated Financial Institution:

Where the Subscriber is a Regulated Financial Institution regulated by an "Approved Regulator" <sup>2</sup> or is a 100% owned subsidiary of such an entity;

- I. Documentation Requirements for entities investing on their own behalf:
  - Own behalf declaration confirming investing on own behalf
  - Proof of regulation
  - Copy of the Commercial Register/Certificate of Good Standing
  - Copy of the authorised signatory list with specimen signatures on company letterhead
  - Copy of the Structure chart or shareholders chart, including the % ownership and control
  - UBO Declaration identifying individuals owning/controlling 25% or more (As set out in appendix 1 of this section)
- II. Requirements for Regulated Entities investing on behalf of a third Party in addition to point (I):
  - Declaration confirming investing on behalf of a third party
  - AML Comfort Letter - please revert to Appendix 2 for the Apex template
  - \*In some instances a Wolfsberg Questionnaire may be required

#### B. Nominees:

Where a subscriber is a nominee account with a Regulated Parent:

- I. Documentation Requirements:
  - Proof of regulation in a low risk Jurisdiction
  - Certified true Copy or Original AML Comfort Letter - please revert to Appendix 2 for the

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<sup>1</sup> Please refer to the administrator for confirmation of approved countries

<sup>2</sup> Please refer to the administrator for confirmation of approved regulators

- Apex template
- \*In some instances a Wolfsberg Questionnaire may be required
- Certified true copy of the authorised signatory list with specimen signatures on company letterhead
- Certified true copy signatories' ID where they have signed the application form & will place the orders
- Certified true copy of the Structure chart or shareholders chart, including the % of ownership and controlling
- UBO Declaration identifying individuals owning/controlling 25% or more (As set out in appendix 1 of this section)

**C. Listed Entities + Subsidiaries of Listed Entities:**

Where the Subscriber is quoted or listed on an "Approved Market"<sup>3</sup> or Stock Exchange or is a 100% owned subsidiary of such an entity;

- I. Documentation Requirements:**
  - Confirmation that investing on own behalf
  - Proof of listing in a low risk jurisdiction
  - Certified true copy of the authorised signatory list with specimen signatures on company letterhead
  - Certified true copy signatories' ID where they have signed the application form & will place the orders
  - Certified true copy of commercial register/Certificate of good standing
  - Certified true copy of the Structure chart or shareholders chart, including the % of ownership and controlling
  - UBO Declaration identifying individuals owning/controlling 25% or more (As set out in appendix 1 of this section)
- II. For subsidiaries and in addition to point (I):**
  - Attach proof of listed parent ownership
  - Certified true copy of certificate of incorporation or equivalent for subsidiary
  - Certified true copy of memorandum and articles of association or equivalent constitutional documents for subsidiary

**Section 2. General Identification Requirements: Standard Due Diligence**

**A. Entities:**

Where a Subscriber is an entity that is domiciled/incorporated in an "Approved Country" **and** the Subscriber's subscription proceeds originate from an "Approved Country" **ALL** the following information and identification documentation must be forwarded with the subscription application;

**Corporate Entities (General):**

- I. Documentation Requirements:**
  - Confirmation investing on own behalf
  - Certified true copy of Certificate of Incorporation /Good Standing

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<sup>3</sup> Please refer to the administrator for confirmation of approved stock exchanges



- Certified true copy of Memorandum and Articles of Association or equivalent constitutional documents
- Certified true copy of the latest financial report or equivalent
- Certified true copy of the authorised signatory list with specimen signatures on company letterhead
- Certified true copies of the signatories' IDs who signed the application form & will place orders
- Certified true copy of the list of Directors/Members/Partners on letterhead paper of the Company
- Certified true Copy ID for at least 2 controllers (where a partnership - one of these must be the GP)
- Certified true copy of the Structure chart or shareholders chart, including the % of ownership
- Complete "UBO Declaration" on behalf of the Entity –

*\*The declaration must be completed by an authorized individual from the Entity and on Entities letterhead.*

- i. If there is a UBO with 25% or more shareholding the person must be identified as per section 2 ( B )
- ii. In the case of an Entity, where the Managing Member is not an individual, the entity must also be identified as per requirements in Section 2 (A).

## **Trusts:**

### **II. Documentation Requirements:**

- Certified true copy of the latest trust deed
- Certified true copy Signature List on company letterhead
- Certified true copy of the IDs of the signatories on the application form/who will place deals on the account
- Identification and verification of the identity of the Settlor and the Trustee according to their legal forms
- Identification and verification of the identity of the Protector if any, according to its legal forms
- Information on the Source of Wealth of the Settlor
- Certified true Copy Structure Chart/Shareholder Chart, showing the % ownership and control of all beneficial owners and controllers
- UBO Declaration - Identifying all individuals owning or controlling any part of the trust if not available within the trust deed/structure chart
- Certified true copy ID and proof of address (dated within the last 6 months) for any persons owning or controlling any part of the trust

### **B. Individuals:**

Where a Subscriber is an Individual from an "Approved Country" and where the Subscriber's subscription proceeds originate from an "Approved Country". All the following information and identification documentation must be forwarded with the subscription application;

#### **I. Information Requirements:**

- Full Legal Name
- Date of Birth
- Place of Birth
- Residential Address, (including Country of Residence)
- Nationality

- Government ID Number
- Source of Wealth
- Signature

**II.** Documentation Requirements:

- Certified true copy of a valid ID document (passport /driver's license or other form of Government issued photo identification) bearing clear picture, expiry date and signature
- Original **OR** certified true copy proof of residential address dated within the last six months, in the form of household utility bill or bank statement
- Completed source of wealth declaration (please contact Administrator for the relevant template)

## Appendix 1 - UBO Letter

"LETTERHEAD"

"DATE"

### Apex Fund Services (Ireland) Limited

2nd Floor, Block 5  
Irish Life Centre  
Abbey Street Lower  
Dublin D01 P767  
Ireland

### Ultimate Beneficial Owner Declaration (UBO Declaration)

We confirm the below in regards to the "*Name of Investor*" :

*\* Please indicate by ticking the correct answer in regards to this Investor.*

☐ **NO** Natural Person (Individual) owns/controls directly or indirectly 25% or more of the investment, as Beneficial Owner.

☐ One or more Natural Person(s) (Individual) owns/controls directly or indirectly 25% or more of the investment as beneficial owner, required details listed below:

*\* If you require more space, please provide the same information as detailed below on a separate sheet.*

#### Natural Person

Full Legal Name:

Date of Birth:

Nationality:

Occupation:

Source of Wealth/Funds:

#### Natural Person

Full Legal Name:

Date of Birth:

Nationality:

Occupation:

Source of Wealth/Funds:

*\* Further information on Ultimate Beneficial Ownership information may be requested.*

☐ One Natural Person (Individual) with significant responsibility for managing the legal entity Investor (e.g. a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, or Treasurer) or any other individual who regularly performs similar functions, required details listed below:

**Natural Person**

Full Legal Name:

Date of Birth:

Nationality:

Occupation:

Source of Wealth/Funds:

☐ **NO** Beneficial Owner who owns/controls 25% or more of the investment are considered Politically Exposed Persons as defined below.

In relation to the above, should there be any subsequent changes to the ownership or control structure; the beneficial ownership will be declared voluntarily and immediately. We will supply Apex with any documentation and information in order to establish and prove the submitted details.

Furthermore, we confirm that we are not aware of any activities on the part of the investors that lead us to suspect that the Owners are or have been involved in criminal conduct of money laundering. Should we subsequently become suspicious of any such activity then, subject to any legal constraints, we shall inform the AML Officer at Apex/the relevant regulatory authorities accordingly.  
We further confirm that in the event of an enquiry, copies of the relevant customer details will be made available to Apex.

The undersigned declares that the details given are true and correct in regards to the beneficial ownership and control structure of "*Name of Investor*".

**Signed:** \_\_\_\_\_

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

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

**Position:** \_\_\_\_\_

**Contact Details:** \_\_\_\_\_

*\*\* Please note that the declaration must be completed by an authorized individual(s) from the Entity. It must be completed on company letter headed paper.*

*\*\* Further information on Ultimate Beneficial Ownership information may be requested.*

*\*\* Definition of a Politically Exposed Person - applies to persons who perform important public functions or senior political figures. Including but not limited to Heads of State, government and Cabinet Ministers, Judges, Senior Party functionaries, military leaders, ruling members of Royal Families, government officials and those directly related to them.*

## Appendix 2 - AML Letter

*Letterhead of the Regulated Entity*

**{Date}**

**Apex Fund Services (Ireland) Limited**

2nd Floor, Block 5  
Irish Life Centre  
Abbey Street Lower  
Dublin D01 P767  
Ireland

**Re: [Name of Investor]**

“Introductory section of the company, its regulated status and registration number”

“Name of the Entity” hereby confirms the following in accordance with the standards of a prudent professional and the applicable laws and regulations:

1. We maintain Anti Money Laundering & Counter Terrorist Financing (“**AML/CTF**”) **policies** applicable to all employees and an on-going training program. We have implemented **related procedures** and controls including a procedure on suspicious activity reports;
2. We perform a **risk assessment of the underlying investor, mandates and proxy holders** using a combination of relevant risk factors prior entering into a business relationship and obtain information on the purpose of the business relationship (**Risk Based Approach**);
3. We perform the **identification and verification** of the identity of the underlying investor based on the initial risk assessment. Where applicable, the identification and verification of the **identity of our clients, beneficial owners, controlling parties and proxy holders** is performed, such that the ownership and control structure of the underlying investors in particular legal persons, trusts and similar legal arrangements are understood and risks are assessed;
4. We confirm the underlying investor is \_\_\_\_\_ and the underlying beneficial owner/s is/are \_\_\_\_\_.
5. We perform **enhanced due diligence on higher risk** underlying investors and their beneficial owners, where applicable, including **politically exposed persons** and, where a relationship is established with countries or territories which do not or insufficiently apply AML-CTF measures;
6. We perform **on-going monitoring** of the business relationship to maintain KYC information current including detection of unusual transactions which are not consistent with the expected business activity, and where necessary, the origin of funds and origin of wealth;
7. We perform **sanctions screening prior the account opening and on an on-going basis** of the underlying investors, their beneficial owners, mandate and proxy holders where applicable. The sanctions lists are amongst others, the resolutions of the United Nations Security Council as well as acts adopted by the European Commission regarding CTF/EU sanction list. *[In addition where applicable, we are required to comply with OFAC sanctions programs and perform sanctions screening against the listings of the US Department of Treasury, Office of Foreign Asset Control (“OFAC”) ]*;
8. We **retain investor due diligence documentation during a period of at least five years** following the end of the business relationship and **will make it available upon written request to Apex Ireland** notwithstanding any applicable rules on confidentiality or local secrecy laws.

9. We confirm that screening is performed on all of our employees and we will provide Apex with information relating to individuals such as full name, date of birth, place of birth, if required.
10. We will inform you immediately if we become aware of any introduced investor(s) engaging in activities which lead us to believe that such introduced investor(s) is involved in money laundering or terrorist activities to the extent permitted by law;
11. We **do not enter into business relationship with shell banks** or accept shell banks as underlying investors or beneficial owners;
12. We acknowledge that Apex Fund Services (Ireland) Limited is relying on us to satisfy their investor due diligence requirements with respect to **[Name of Investor]**.

Yours sincerely,

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Authorized Signatory

Print Name:

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Authorized Signatory

Print name:



### **Appendix 3 – Certification Requirements**

- Certification must be made by independent 3rd party (self-certification is not acceptable)
- The certifying body must perform the certification in presence of the original documentation and must meet the client personally when certifying the documents
- Certification can only be made by a competent authority:
  - Notary Public
  - Embassy/Consular Staff
  - Commissioner of Oaths (which register number is available)
  - Justice of the Peace
  - A director or authorised signatory of a regulated financial institution in an approved jurisdiction
  - Lawyer or solicitor
  - Chartered & Certified Public Accountants
  - Police Officer/An Garda Síochána
- Certification must be dated within 6 months
- Certification wording should state:
  - That the document is a true copy of the original document
  - That the document has been seen and verified by the certifier
  - Where an ID document, that the photo is a true likeness of the individual
  - Date of Certification
  - Name, Title, signature, registration number and contact details of the Certifier (i.e. if is a financial institution – name of bank, person, title, phone, etc.)