

# MSF

MARKET  
STABILITY  
FUND

## APPLICATION FORM MARKET STABILITY FUND (NATURAL PERSON)



### UNITHOLDER 1

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

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

Address : \_\_\_\_\_

Postal code and City : \_\_\_\_\_

Country : \_\_\_\_\_

Nationality : \_\_\_\_\_

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

E-mail : \_\_\_\_\_

Bank account (IBAN) : \_\_\_\_\_

On behalf of : \_\_\_\_\_

Town/city : \_\_\_\_\_

Citizen service number (BSN) : \_\_\_\_\_  
(Hereinafter referred to as: **Unitholder**)

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APPLICATION FORM  
MARKET STABILITY FUND  
(NATURAL PERSON)



UNITHOLDER 2 (OPTIONAL)

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

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

Address : \_\_\_\_\_

Postal code and City : \_\_\_\_\_

Country : \_\_\_\_\_

Nationality : \_\_\_\_\_

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

E-mail : \_\_\_\_\_

Bank account (IBAN) : \_\_\_\_\_

On behalf of : \_\_\_\_\_

Town/city : \_\_\_\_\_

Citizen service number (BSN) : \_\_\_\_\_  
(Hereinafter referred to as: **Unitholder**)

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The Unitholder wishes on the conditions as described in the prospectus of the Market Stability Fund, to participate in the Market Stability Fund for an amount of EUR \_\_\_\_\_ (initially at least EUR 100,000.00 excluding costs and subsequent payments of at least EUR 100,000.00). The Unitholder shall transfer this amount to account number **NL86 ABNA 0810582228**, in the name of **Stichting Market Stability Fund**.

Depending on the outstanding capital per Unitholder, a discount is granted on the management fee.

**You wish to receive this potential discount as follows:**

- Paid into your specified bank account
- Distributed in new Units in the Market Stability Fund

**THE UNITHOLDER DECLARES TO BE FAMILIAR WITH AND TO AGREE WITH THE CONTENTS OF THE PROSPECTUS INCLUDING ANNEXES, AND MORE SPECIFICALLY WITH THE TERMS AND CONDITIONS OF THE FUND ATTACHED AS ANNEX 1 TO THE PROSPECTUS. THE UNITHOLDER DECLARES TO ACCEPT ALL THE STIPULATIONS IRREVOCABLY AND UNCONDITIONALLY IN THE TERMS AND CONDITIONS OF THE FUND AND TO ACCEPT THE RIGHTS AND OBLIGATIONS ARISING THEREFROM TOWARDS MSF ASSET MANAGEMENT B.V., THE MARKET STABILITY FUND FOUNDATION AND ALL UNITHOLDERS WHO PARTICIPATE IN THE FUND, AS WELL AS ALL THIRD-PARTY STIPULATIONS IN THE TERMS AND CONDITIONS OF THE FUND. THE UNITHOLDER ALSO DECLARES THAT ALL INFORMATION PROVIDED VIA THIS APPLICATION FORM IS CORRECT AND THAT THE FUND MANAGER WILL BE INFORMED IN WRITING WITHOUT DELAY IF THIS IS NO LONGER THE CASE.**

Thus signed on \_\_\_\_\_ (date)

in \_\_\_\_\_ (place)

Signature (1): \_\_\_\_\_

Signature (2): \_\_\_\_\_

Name (1): \_\_\_\_\_

Name (2): \_\_\_\_\_

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**The following documents should be attached to this form:**

- A legalised copy of a valid identification document of the Unitholder(s) (in case of ID card or driving license, a copy of front and back is required).
- The completed and signed annex (see below) to this Application Form.

The Application Form - duly completed and signed - and the documents as mentioned above should be sent by e-mail to [info@marketstabilityfund.com](mailto:info@marketstabilityfund.com) or by post to:

MSF Asset Management B.V.  
Amstelplein 48  
1096 BC Amsterdam

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Annex to the Application Form (natural person)

## DETERMINATION OF TAX STATUS AND ORIGIN OF ASSETS

In the case of a joint subscription, you must complete this annex separately for each Unitholder.

### UNITHOLDER 1

#### 1. DETERMINATION OF TAX STATUS

You are a tax resident of at least one country, but you can be a tax resident of several countries.

- 1a Are you a tax resident of the Netherlands?  No  
 Yes, and my BSN is: \_\_\_\_\_
- 1b Are you, exclusively or partly, a tax resident of another country than the Netherlands?  No  
 Yes, I am a tax resident of: \_\_\_\_\_

**Important:** If the country does not issue tax identification numbers, state your place of birth (not your country of birth).

Country(ies)	Tax identification number
_____	_____
_____	_____

- 1c Are you a U.S. citizen?  No  
*Continue with 2, Origin of assets.*  
 Yes, and my U.S. Tin is: \_\_\_\_\_  
*Continue with 2, Origin of assets*
- 1d Were you born in the United States?  Yes  
*Please enclose a copy of your Certificate or Loss of Nationality of the United States*  
 No

**Important:** For the purpose of answering this question, the United States includes the following: U.S. Territories: the Commonwealth of the Northern Mariana Islands if you were born there after 3 November 1986, the Commonwealth of Puerto Rico, Guam and the U.S. Virgin Islands.

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## 2. ORIGIN OF ASSETS

Please indicate the origin of your assets, complete with further details and, where possible, underlying documents.

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## 3. DECLARATION AND SIGNATURE

### I declare that I:

- have filled in this form truthfully; and
- communicate any changes to the above data within 30 days.

Date: \_\_\_\_\_ (dd-mm-yyyy )

Place: \_\_\_\_\_

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

Signature: \_\_\_\_\_

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In the case of a joint subscription, you must complete this annex separately for each Unitholder.

**Unitholder 2 (OPTIONAL)**

**1. DETERMINATION OF TAX STATUS**

You are a tax resident of at least one country, but you can be a tax resident of several countries.

- 1a Are you a tax resident of the Netherlands?  No  
 Yes, and my BSN is \_\_\_\_\_
- 1b Are you, exclusively or partly, a tax resident of another country than the Netherlands?  No  
 Yes, I am a tax resident of: \_\_\_\_\_

**Important:** If the country does not issue tax identification numbers, state your place of birth (not your country of birth)

Country(ies)	Tax identification number
_____	_____
_____	_____

- 1c Are you a U.S. citizen?  No  
 Yes, and my U.S. Tin is: \_\_\_\_\_  
*Continue with 2, Origin of assets*
- 1d Were you born in the United States?  Yes  
*Please enclose a copy of your Certificate or Loss of Nationality of the United States*  
 No

**Important:** For the purpose of answering this question, the United States also includes the following U.S. Territories: the Commonwealth of the Northern Mariana Islands if you were born there after 3 November 1986, the Commonwealth of Puerto Rico, Guam and the U.S. Virgin Islands.

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## 2. ORIGIN OF ASSETS

Please indicate the origin of your assets, complete with further details and, where possible, underlying documents.

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## 3. DECLARATION AND SIGNATURE

### I declare that I:

- have filled in this form truthfully; and
- communicate any changes to the above data within 30 days.

Date: \_\_\_\_\_ (dd-mm-yyyy)

Place: \_\_\_\_\_

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

Signature: \_\_\_\_\_

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