Latitude Investment Management

Legal Entity Application Form	
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For initial subscriptions you must complete this application form and submit together with the supporting documentation required for anti-money laundering purposes. Please ensure you complete all relevant sections as failure to do so may delay your acceptance and verification process. Should you require any assistance in completing this form or have any questions please contact the fund's administrator Northern Trust on +353 1 434 5178 or email oriel ta@ntrs.com (queries only).

Please return this form along with supporting documents via email, fax or post to Northern Trust International Fund Administration Services (Ireland) Limited, Northern Trust Registration Department, 2nd Floor, Block A, City East Plaza, Towlerton, Ballysimon, Limerick, Ireland V94 X2N9. Telephone: +353 1 434 5178 Facsimile: +353 1 553 9434 Email: OrielTAInstructions@ntrs.com (for Dealing & Application forms only). Subscriptions will not be permitted until NT receives all required documentation and your account has been verified.

Once your account has been verified you will be contacted by NT who will supply you with an account number in order to complete your investment into the Latitude Horizon Fund or the Latitude Global Fund.

If sending this form via email, please note the following:

- Instructions must be in .pdf format, signed by an authorised signatory, and attached to a blank email (i.e. no text, logos or disclaimers to be included in the body of the email) and sent to OrielTAInstructions@ntrs.com. Email instructions sent to any other mailbox will be rejected and no notification of this sent.
- Any text or logos within the body of the email **must** be removed before sending.
- Only one attachment may be sent per email. Multiple account opening forms may, however, be included within a single attachment.
- Emails containing multiple attachments will be automatically rejected by the Administrator's system.
- Auto-confirmation of receipt will be sent. If you do not receive this, please contact the Administrator by:
 - o Phone: +353 1 434 5178
 - o Email (queries only): oriel ta@ntrs.com



Part A - Section 1: Details (If a Trust or Charity please leave blank and go to Section 2) Registered Name(s) Shareholder Type¹ Account Designation (if any) **Registered Address** Postcode Country Telephone Email **Contact Name** Business or correspondence address (if different to the above registered address) Postcode Country Telephone Email Contact Name 1e.g. (i) individual, (ii) joint account, (iii) publicly-listed company, (iv) state-owned entity, (v) pension fund, (vi) regulated credit and financial institution, (vii) nominee company / intermediary company, (viii) private and unlisted companies, (ix) partnerships, (x) collective investment schemes, (xii) charities, (xiii) clubs & societies, (xiv) places of worship, (xv) other (please specify)



Intermediary Details (if applicable)
Broker ID Branch ID
Broker Name
Broker Address
Postcode
Postcode

Representative ID

Representative Name



Postcode Country Contact Name Telephone Email f your organisation has charitable aims please provide the following information: Charity registration reference (if applicable) Description of aims and activities Countries of operation	First Trustee Name			Second Trustee Name
Name of Trust/Charity Account Designation (if any) Registered Address Postcode Country Business or correspondence address (if different from the above) Postcode Country Contact Name Telephone Email f your organisation has charitable aims please provide the following information: Charity registration reference (if applicable) Description of aims and activities Countries of operation f not, please complete the following information: The type of Trust (will trust, discretionary trust etc.) The nature and purpose of the trust	Third Trustee Name		7	Fourth Trustee Name
Account Designation (if any) Registered Address Postcode Country Business or correspondence address (if different from the above) Postcode Country Contact Name Telephone Email f your organisation has charitable aims please provide the following information: Charity registration reference (if applicable) Description of aims and activities Countries of operation f not, please complete the following information: The type of Trust (will trust, discretionary trust etc.) The nature and purpose of the trust			_	
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If your organisation has charitable aims please provide the following information: Charity registration reference (if applicable) Description of aims and activities Countries of operation If not, please complete the following information: The type of Trust (will trust, discretionary trust etc.) The nature and purpose of the trust	Contact Name			
Charity registration reference (if applicable) Description of aims and activities Countries of operation If not, please complete the following information: The type of Trust (will trust, discretionary trust etc.) The nature and purpose of the trust	Telephone		Er	nail
Description of aims and activities Countries of operation If not, please complete the following information: The type of Trust (will trust, discretionary trust etc.) The nature and purpose of the trust	If your organisation has charitable aims please	e provide the following info	rma	ation:
Countries of operation If not, please complete the following information: The type of Trust (will trust, discretionary trust etc.) The nature and purpose of the trust	Charity registration reference (if applicable)			
If not, please complete the following information: The type of Trust (will trust, discretionary trust etc.) The nature and purpose of the trust	Description of aims and activities			
The type of Trust (will trust, discretionary trust etc.) The nature and purpose of the trust	Countries of operation			
The nature and purpose of the trust	If not, please complete the following informat	ion:		
	The type of Trust (will trust, discretionary tru	ust etc.)		
Country of establishment	The nature and purpose of the trust			
	Country of establishment			



Part A - Section 3: Correspondence Details - To be completed by ALL investors

Confirmation of your account number (required to place transactions) will <u>only</u> be sent via the Welcome email to the email address/addresses provided in the below table.

For all other correspondence, please complete the relevant email address/addresses and/ or SWIFT Code in column one and tick the relevant box (Contract Note, Statement)

EMAIL OR SWIFT CODE (Please ensure the appropriate document is selected to ensure receipt otherwise all options will be selected)	Welcome Email	Contract Note	Statements

Part A - Section 4: Bank Details (this section must be completed)

Important information regarding bank accounts for subscriptions and redemptions

Third party payments are not permitted for redemptions. Please confirm the details of the bank accounts from which and to which payments will be made below.

A copy of a recent bank statement (no more than 6 months old) or a banker's reference, must accompany the application to evidence that the bank account details provided for subscriptions and redemption payments, are for a bank account in the registered account name. Accounts in the name of regulated entities are exempt from this requirement

To meet our anti-money laundering and counter terrorist financing obligations under the current legislation, all joint bank account holders will be required to complete identity and verification requirements, even where those joint bank account holders will not be registered holders of shares or units in the fund.

Failure to provide all the bank account information and documentation requested as part of this application may result in a delay in setting up the account and subscribing to the fund.



Beneficiary Bank Info	ormation	
Name of Book		
Name of Bank		
A/c Name		
Address of Bank		
A/c Number		
Sort Code		
IBAN:		
Swift Code / ABA		Reference Code:
Correspondent Bank	Information	
Note: Required if Payment CCY dif	fers to bank account residency or if your	bank account does not support Multi currency payments
Correspondent Bank Name		
Correspondent BIC/SWIFT Code/S	Sort Code/ABA Code	
Correspondent A/c Name		
Correspondent Account Number	/ IBAN	
Correspondent Bank Address		
_		THE ADMINSTRATOR AND MUST BE ACCOMPANIED by a bank statement ank account details provided are for a bank account registered account
Part A – Section 5: Di	stribution / Dividend Opt	ion (this section must be completed)
I/We would like our distribut	ion	
Reinvested		
Paid by Cash		
	tion to be paid to an account other than the dividend payments will be reinvested.	the details specified above, please enter the banking details below. Please
		no more than 6 months old) or a banker's reference, must accompany the payments are for a bank account in the registered account name



Beneficiary Bank Info	rmation (For Dividend	Distribution IF DIFFERENT TO ABOVE BANK)
Name of Bank		
A/c Name		
Address of Bank		
A/c Number		
Sort Code		
IBAN:		
Swift Code / ABA		Reference Code:
Correspondent Bank	Information	
Note: Required if Payment CCY diff	ers to bank account residency or if y	our bank account does not support Multi currency payments
Correspondent Bank Name		
Correspondent BIC/SWIFT Code/S	ort Code/ABA Code	
Correspondent A/c Name		
Correspondent Account Number /	IBAN	
Correspondent Bank Address		
Poporting Currency fo	or Investor Statements	Contract Notes/Income Distribution
Reporting Currency ic	of investor statements/	Contract Notes/Income Distribution
GBP	EUR	USD



Part B – Section 1: Ben	eficial Owners Details		
Beneficial Ownership			
Please complete the relevant sec acceptance of subscription.	cion to your entity type. The Ultimate	Beneficial Owner section must be	completed. Non-completion could delay
All Entities			
	e is no person identified as beneficial o		e shares or voting rights in an entity, or old the position of senior managing
beneficial ownership 25% or mor	re entities with 25% or more ownersh e. For Trusts or similar arrangements, ıy). The beneficiaries are the individua	Ultimate Beneficial Owners include	the beneficiaries, the settlor, the
Please complete the Part B Section	on 2 on page11 regarding Ultimate Bei	neficial Owner(s):	
OR			
	es, where the beneficiaries are not yet en set up should be stated (please prov	•	ons in whose main interest the trust or mation as required):
	control of the entity (where applicable		the shares or voting rights of the entity, pplicable senior managing official(s)
Name	Address	Nationality	Date of Birth
Politically Exposed Person ("	PEP")		
If you, or any beneficial owners, are	a Politically Exposed Person. Yes	No 🗌	
	The state of the s		I owner of an investment account, who is
	ninister, member of parliament, senion		n include but not limited to: head of state ber of the supreme court).



Related Person Details

Full names of all Related Persons:

- In the case of natural persons, Related Persons means any person authorised to act on behalf of the investor
- In the case of a company, Related Persons means the directors.
- In the case of a Partnership, Related Persons means the partners.
- In the case of a limited liability company (LLC), Related Persons means the managing members.
- In the case of a trust, foundation or similar legal arrangement, Related Persons means the trustees.
- In the case of a charity/government body/ university/ school/ college/ club/ society, Related Persons means the authorising officers/ board members/ officials.

Please complete the below:

Name	Address	Nationality	Date of Birth



Part B – Section 2: Beneficial Owner Details

Beneficiary Owner 1 (where applicable) Are you a Politically Exposed Person, immediate	e family member or close associate of a PEP (refer to definition in Appendix 2)
Name	
Address	
Postcode	Country
Date of Birth D D M M Y Y Y Y	Beneficial owner category and percentage ownership (if applicable)
Beneficiary Owner 2 (where applicable) Are you a Politically Exposed Person, immediate Name	e family member or close associate of a PEP (refer to definition in Appendix 2)
Address	
Postcode	Country
Date of Birth D D M M Y Y Y Y	Beneficial owner category and percentage ownership (if applicable)
Beneficiary Owner 3 (where applicable) Are you a Politically Exposed Person, immediate	e family member or close associate of a PEP (refer to definition in Appendix 2)
Name	
Address	
Postcode	Country
Date of Birth D D M M Y Y Y Y	Beneficial owner category and percentage ownership (if applicable)



Part C - FATCA and CRS Self-Certification

Entity Self-Certification for FATCA and CRS

Data Protection

Your application to invest in the Fund, and the information you disclose in this Subscription Agreement, is subject to the Standard for Automatic Exchange of Financial Account Information in Tax Matters (the Common Reporting Standard or "CRS"). Ireland is a participating jurisdiction in the CRS. Accordingly, we are required to report certain information in relation to you, in particular your tax residency status and Tax Identification Number (TIN) (which you are required to provide in the Bank Account Details for Redemption and Distribution Payments section of this form) to the Irish Revenue Commissioners. This is the case even where you are not resident in a jurisdiction that is participating in the CRS. The purpose of datasharing under the CRS is to facilitate the cross-border enforcement and collection of tax. You should note that the information reported by us to the Irish Revenue Commissioners may be shared with other tax authorities who are participants in the CRS.

For more information on the CRS, please see the relevant webpage on the Irish Revenue Commissioner's website: http://www.revenue.ie/en/business/aeoi/index.html

Foreign Account Tax Compliance Act ("FATCA") and CRS Self-Certification

We are obliged under Section 891E, Section 891E, 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.

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

Please tick one of the below and complete as appropriate. The Entity is not a Specified U.S. Person (please complete sections 1, 2 and 3) The Entity is a Specified U.S. Person (please complete sections 2 and 3) The Entity is a US person but not a Specified U.S. Person (please complete sections 2 and 3)

Section 1: Entity's FATCA Classification Financial Institutions under FATCA - If the Entity is a Financial Institution, please tick one of the below categories and provide the Entity's Global Intermediary Identification number (GIIN) | Irish Financial Institution or a Partner Jurisdiction Financial Institution | Registered Deemed Compliant Foreign Financial Institution | Participating Foreign Financial Institution



If the	Entity is a Financia	al Institution but ur	nable to provi	de a GIIN, please tick one	of the below reasons:	
	·		·	by another entity which does		e the sponsor's name and
Sp	onsors Name			Sponsors GIIN		
	Exempt Beneficial (Investment Entities		. reportable ac	o Sponsored Investment Entit counts are not required to re		The state of the s
	tick category of Exempt cial Owner)	Government Entity International organisa Foreign Central Bank	ition	Exempt Retireme	ent Fund ment Vehicle Wholly Owned by Exem	npt Beneficial Owners
	Certified Deemed C Agreement)	Compliant Foreign Fin	ancial Institutio	n (including a deemed compl	liant Financial Institution un	der Annex II of the IGA
	Non-Participating F	oreign Financial Instit	ution			
	Foreign Financial In	stitution				
	Trustee Documente	ed Trust				
	Trustee Name			Trustee GIIN		
	Non-Foreign Financ	ial Foreign Entity (If t		I, please complete Appendix	3)	
Secti	ion 2: CRS De	claration of T	ax Reside	ncy		
Please ii	ndicate your country	of tax residence (if i		e than one country please d	etail all countries of tax res	sidence and associated tax
For furth	-				rtal <u>http://www.oecd.org/</u>	tax/automatic-exchange/crs-
Note: Ur	nder the Irish legislat	ion implementing the	CRS, provision	of a Tax ID number (TIN) is r	equired unless:	
		i jurisdiction that doe y in a non-reportable				
Cou	ntry of Residence		TIN	or UTR (or equivalent)		
If a TIN i	s unavailable, please	tick the appropriate	box as follows;			
П т			. I laldania nasia	lant daga nationna TINA an TI	Ni a su ii valamba ba iba maaida m	
_				lent does not issue TINs or TI ease explain why you are un		its
			,	ease explain why you are unline domestic law of the releva	·	s not require the collection
		ich country/jurisdiction		ic domestic law of the releva	me country/jurisulction doe:	3 not require the collection



Part C – FATCA, CRS Self-Certification

section 3: Entity's CRS Classification for Financial Institutions
Financial Institutions under CRS - If the Entity is a Financial Institution, please tick one of the below categories:
Financial Institution under CRS (other than below)
An Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution (If this box is ticked, please indicate the name of any Controlling Person(s) of the Entity and complete Appendix 3)
Other Financial Institution, including a Depository Financial Institution, Custodial Institution or Specified Insurance Company
Non-Reporting Financial Institution under CRS - specify the type of Non-Reporting Financial Institution below:
Governmental Entity International Organisation Central Bank Broad Participation Retirement Fund Narrow Participation Retirement Fund Pension Fund of a Governmental Entity, International Organisation, or Central Bank Exempt Collective Investment Vehicle Trust whose trustee reports all required information with respect to all CRS Reportable Accounts Qualified Credit Card Issuer Other Entity defined under the domestic law as low risk of being used to evade tax Specify the type provided in the domestic law:
Section 3: Entity's CRS Classification for Non Financial Institutions
Non Financial Institutions ("NFE") under CRS - If the Entity is a Non-Financial Institution, please tick one of the below categories: Active Non-Financial Entity – a corporation the stock of which is regularly traded on an established securities market or a corporation which is a related entity of such a corporation
Active Non-Financial Entity – 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:
Active Non-Financial Entity – a Government Entity or Central Bank
Active Non-Financial Entity – an International Organisation
Active Non-Financial Entity – other than above (for example a start-up NFE or a non-profit NFE)
Passive Non-Financial Entity – Please complete Section 4 if ticked
• <u>Please note</u> that each Controlling Person must complete a separate Individual 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/



Section 4 - FATCA, CRS Self-Certification

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

Part ii), iii) and v) must be completed by all account holders or Controlling Persons. Section iv) 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.

Part i) – Politically Exposed Persons (PEP) only
Beneficiary Owner 1 (where applicable)
Are you a Politically Exposed Person, immediate family member or close associate of a PEP (refer to definition in Appendix 2)
Name
Address
Postcode
Town or City of Birth Country of Birth
Date of Birth D D M M Y Y Y Y



Section 4 - FATCA, CRS Self-Certification

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

Part ii): FATCA Declaration of U.S. Citizenship or U.S. Residence for Tax purposes Please tick either of the below and complete as appropriate. 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: U.S. TIN Confirm that I am not a U.S. citizen or resident in the U.S. for tax purposes.



Section 4 - FATCA, CRS Self-Certification

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

Part iii): 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.

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 entity – control by ownership		
Controlling Person of a legal entity – control by other means		
Controlling Person of a legal entity – 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		

Part iv): Declaration and Undertaking

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.

Signature	С	Capacity of signatory
Name		
Date		



Part C - FATCA, CRS Self-Certification

Section 3: Entity's CRS Classification (cont.)

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 part B below: Indicate the name of all Controlling Person(s) of the Account Holder: i. ii. iii. iv. Note: In the 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

Part B Complete a separate "Individual (including Controlling Persons) Self-Certification for FATCA and CRS" form for each Controlling Person listed above.

Section 4: Declaration and Undertaking

the natural person who holds the position of senior managing official of the Entity.

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

	_	
Signature		Capacity of signatory
Name		
Date		



Part D - AML Risk Assessment

Section 30A(2)(b) of Irish Anti-Money Laundering legislation requires us to complete an assessment below in order to identify the risk of money laundering and terrorist financing involved. Please complete all relevant sections. Should you have any questions in relation to the completion of any section of the AML questionnaire please contact the AML team by email Ireland aml operations team@ntrs.com

In the event that any aspect of the registered investor detail or completed AML questionnaire should change in the future please ensure that this updated information is provided to the AML team promptly so that the current detail on the registered investor account can be accurately maintained.

Section 1 – Investment Detail
Does the investment consist of Bearer shares/Instruments? Yes No
Please confirm source of wealth – Please tick the appropriate box (this refers to the activities that have generated the total net worth of the customer e.g. the activities that produced the customers funds and property). Employment Income Sale of Real Estate Inheritance Other* *If this box is ticked, please provide details in the box below
Please confirm source of funds – Please tick the appropriate box (this refers to the origin and means of transfer of funds that are involved in the transaction e.g. occupation, business activities, proceeds of sales etc).
*if this box is ticked, please provide details of the following in the box below: a) Job description and location and b) The Nature/industry of the employer's business
**Sale of Real Estate *if this box is ticked, please provide details of the following in the box below: a) The amount and date that the property was sold and b) The location of the real estate



Part D – AML Risk Assessment

Section 1 – Investment Detail (cont.)

Please confirm source of funds (cont.) – Please tick the appropria involved in the transaction e.g. occupation, business activities, pro	te box (this refers to the origin and means of transfer of funds that occeds of sales etc.)	t are
Sale of Securities Investments		
*if this box is ticked, please provide details of the following in the bab a) The type of security/securities sold and		
b) The dates and the sale amount of the security/securities sold		
Inheritance		
*if this box is ticked, please provide details of the following in the baby a) The amount and date that the inheritance was received and b) The relation to the benefactor	pox below:	
Other		
*if this box is ticked, please provide details of the following in the bab The nature including jurisdiction of the source of the funds;	pox below	
b) The relevant dates associated and c) The amounts received		
- The amounts received		
Is the investment associated with any of the following industries	s? – Please tick the appropriate box	
Arms Trade and Defence	Gas or Petrol	
Arts and Precious Metals	Money Service, Cash Intensive Business or Casino	
Construction	Pharmaceutical and Healthcare	
Extractive Industries	Public Procurement	
Other*		
*If this box is ticked, please provide details in the box below		



Part D – AML Risk Assessment

Section 2 – Investment Activity
Estimate of Current Total Net Assets (please tick appropriate box)
Up to £500,000
£10,000,000 to £50,000,000 Over £50,000,000
Expected Total Amount to be Invested (please tick appropriate box)
Expected Total Amount to be invested (please tick appropriate box)
Up to £500,000
£10,000,000 to £50,000,000 Over £50,000,000
Frequency of Future Transactions (please tick appropriate box)
Daily
Annually Other*
*If this box is ticked, please provide details in the box below
Expected average amount per future transaction (please tick appropriate box)
Up to £500,000
£10,000,000 to £50,000,000 Over £50,000,000
Section 3 – Sanction Confirmation
Please tick one of the below and complete as appropriate
I/we confirm that a person in control of or a person owning beneficial interest in the investment is not subject to a sanction or embargo
or
I/we confirm that a person in control of or a person owning beneficial interest in the investment is subject to a sanction or embargo* *if this box is ticked, please provide details in the box below including:
a) Name of the person/party sanctioned;
b) Details of the sanction/embargo enforced;c) Relationship of the person/party sanctioned to the registered investor and
d) Any other relevant detail



Section E - Declaration and Signatures

By signing this Application Form, I acknowledge that I have viewed, reviewed and understood the Key Investor Information Document (KIID) applicable to the relevant Share Class(es) to which this Application Form relates in good time and prior to making an application for Shares of such Class(es).

I/We having received and considered a copy of the Prospectus and Supplement, hereby confirm that this application is based solely on the current Prospectus and Supplement, 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 undertake to observe and be bound by the provisions of the Instrument of Incorporation 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, the Investment Manager 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, the Investment Manager 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, switches, 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 in written form, by facsimile or by electronic means. I hereby agree to indemnify each of the Administrator, Investment Manager and the ICAV and any of their respective 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 my failure to remit the amount of my subscription by the due date or my failure to comply with the terms of this Subscription Agreement or them acting upon instructions given in written form by me, i.e. facsimile. 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 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 confirm that I have the capacity and am duly authorised to complete this form and to make the representations and give the indemnities referred to herein, and that I am in compliance in all material respects with all applicable laws or regulations of any competent jurisdiction.

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 made herein are continuous and all subsequent subscriptions of Shares in the Fund by me/us shall be governed by them, and I agree to notify the ICAV or the Administrator immediately if any representation or warranty are no longer accurate and to abide by any directions from the ICAV or the Administrator arising as a result.

I/We confirm that I am a person over 18 years of age.

I/We hereby certify that I am aware of the risks involved in the proposed investment as set out in the Prospectus.

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

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

I/We have consulted to the extent I have determined appropriate with my own independent advisors as to the financial, tax, legal and related matters concerning an investment in the Shares and on that basis believe that an investment in the Shares is suitable and appropriate for me.

Immediately prior to the execution of this Subscription Agreement:

- (a) I personally possess sufficient knowledge and experience in financial and business matters (including experience with investments of a similar nature to investments of the ICAV and the Fund) to be capable of evaluating the merits and risks of an investment in the Shares; and
- (b) I and any account for which I may be acting have sufficient financial risk to be able to bear the economic risk of complete loss of my/our investments in the Shares.
- (c) such forms, documentation and other information relating to its status as the ICAV may reasonably request for the purposes of the ICAV's compliance with any other law, regulation, or exchange of information regime.



Section E - Declaration and Signatures

Declaration of applicants resident outside of the Republic of Ireland

Every applicant applying for shares/units on the applicant's own behalf is hereby obliged to notify the Fund or an agent of the Fund appointed for this purpose, as the case may be, in writing if the applicant is or becomes resident or ordinarily resident in Ireland. An individual is ordinarily resident in Ireland if the individual has been resident in Ireland for each of the 3 preceding years of assessment (i.e. calendar years) and that individual continues to be ordinarily resident in Ireland until the individual has not been resident in Ireland in each of the 3 preceding years of assessment.

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/units. Terms used in this declaration are defined in the Prospectus.

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

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 resident or ordinarily resident in Ireland, and
• should I/we/the company* become resident in Ireland I/we* will so inform you, in writing, accordingly.
* (Delete as appropriate)
B - Declaration as Intermediary
I/we* declare that I am/we are* applying for Shares on behalf of other persons:
who will be beneficially entitled to the Shares; and
•to the best of my/our* knowledge and belief, none of the beneficiaries is resident or ordinarily 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 that any person, on whose behalf I/we* holds Shares, becomes resident in Ireland.
*(Delete as appropriate)

IMPORTANT NOTES FOR DECLARATION OF RESIDENCE OUTSIDE OF IRELAND

- 1. Non-resident declarations are subject to inspection by the Irish Revenue Commissioners and it is a criminal offence to make a false declaration.
- 2.To be valid, the 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.
- 3. 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.
- 4. An "Intermediary" means a person who:
- (a) carries on a business which consists of, or includes, the receipt of payments, from an investment undertaking resident in the Republic of Ireland, on behalf of other persons; or
- (b) holds units in an investment undertaking on behalf of other persons.
- 5. Irish Residents who are seeking to apply for Shares should contact the Administrator for an application form which does not include the above declaration. Exempt Investors who are entitled to payment without deduction of tax should also request the appropriate alternative declaration form from the Administrator.



Section E - Declaration and Signatures

	_			
US Person Confirmation				
Please confirm one of the statements below is correct by ticking the relevant box:				
I/We confirm that I am/we are not a US Person (as defined in the Prospectus) and am/are not acquiring Shares in the Fund on behalf of, or for the bene of, a US Person, nor do I/we intend to transfer any Shares which I/we may purchase to any US Person	efit			
OR				
I/We confirm that I am/we are a US person (as defined in the Prospectus) who is/are both (i) an "accredited investor" (as defined in Rule 501(a) of Regulation D under the 1933 Act) and a (ii) "qualified eligible person" (as defined in CFTC Regulation 4.7)				
Signature and Capacity				
Signature Capacity of signatory				
Name				
Date Is signatory a resident or citizen of the US Yes No				
Signature Capacity of signatory				
Signature Copusity of Signatury				
Name				
Date Is signatory a resident or citizen of the US Yes No				
is signater, a resident of characters are on the later of				
Signature Capacity of signatory				
Name				
Date Is signatory a resident or citizen of the US Yes No				

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Appendix 1 - Data Protection and Privacy notice

Introduction

This notice sets out details of how and why we ("the Fund", "we", "us", "our") and third parties collect and process personal information in connection with investments in the Fund or associated interactions with us. We do this in compliance with our obligations under applicable data protection law. This notice explains what personal data is collected, the purposes for which it is used, the third parties to whom it may be disclosed and how individuals can exercise their rights in relation to their personal data.

This notice applies to the collection and processing of personal information relating to any individual applicant in the Fund and personal information relating to individuals associated with institutional applicants in the Fund, such as an institutional applicant's directors, shareholders, trustees, beneficial owners, employees, representatives, agents, professional advisers and other personnel. References to "you" and "your" mean the relevant individuals who are the subjects of the personal data to which this notice relates or an institutional applicant with which an individual is associated. Institutional applicants should ensure that this notice is provided to any individual whose personal data has been provided to us as soon as practicable.

About Us

The Fund is the controller of the personal data collected via the application form in respect of the Fund (the "Application Form") and in connection with our dealings with you in relation to investments in the Fund or associated interactions with us. The Fund engages third party service providers to process such personal data on behalf of the Fund and those third parties act as processors. The Fund is not required to designate a Data Protection Officer. If you have any questions about the use of your personal data, your data protection rights or if you want to exercise those rights, please contact us at waystone.com.

Personal Data that we Process

The Fund collects personal data relating to you that is provided to it in your Application Form, in connection with our dealings with you in relation to investments in the Fund or associated interactions with us from both you and public sources, including your name, signature, postal address, email address, fax number, date and place of birth, nationality, bank account details, source of funds details, tax identification, signatures, other contact details, shareholder register account numbers (or functional equivalent) and transaction detail.

The Fund may also collect personal data in relation to you in connection with ensuring compliance with its legal obligations including your tax identification number; passport number; utility bills, photographic identification and verification such as copies of your passport number, drivers licence and address verification. For the purposes of carrying out due diligence, we may also collect information relating to your status as an ultimate beneficial owner of an entity, or as a politically exposed person.

The Fund may collect and process personal data relating to you in connection with its on-going relationship with you, such as via correspondence and calls, and in connection with our administration of you or your investment in the Fund and relating to your investment activity. Telephone calls with you may be recorded for the purposes of record keeping, security and training.

In addition, we may collect personal data relating to you from third party sources in connection with complying with legislation relating to antimoney laundering, taxation, and other legislation applicable to investment funds.

To the extent that any information contained in the Application Form or any other information that is furnished in connection with your investment in the Fund constitutes personal data in respect of another individual, you should provide a copy of this notice to such individual and acknowledge, on that individual's behalf, that such data shall be held and processed by and on behalf of the Fund in the manner outlined herein.

Purposes of Processing and Legal Basis

Personal data that you provide in your Application Form, or that we otherwise obtain in relation to you, will be processed for the following purposes:

- processing the application to become an applicant in the Fund;
- to reflect ownership of shares in the Fund and to manage and administer your holdings in the Fund. This is necessary for the performance of the contract to purchase shares in the Fund and to process redemption, conversion, transfer and additional subscription requests or the payment of distributions or redemption amounts.
- establishing your identity, and providing, servicing and administering your investment;
- complying with our legislative and regulatory obligations in connection with our dealings with you, including under applicable law regarding anti-money laundering and counter terrorist financing, taxation, the regulation of collective investment schemes, or the provision of financial services, crime-detection, prevention, investigation and prosecution, the prevention of fraud, bribery, anti-corruption, tax evasion, to prevent the provision of financial and other services to those who may be subject to economic or trade sanctions, in response to legal or court requests or requests from regulatory authorities or where it is in the public interest;
- for direct marketing purposes (that is, providing information on products and services) or for quality control, business and statistical analysis, market research or for tracking fees and costs or for customer service, training and related purposes;
- if applicable, processing the fact that you are a politically exposed person, to comply with applicable legal obligations;
- to communicate with you by way of notice pursuant to applicable legislation or the Fund's constitutional documents or circulating reports relating to the Fund;
- maintaining appropriate business records, including maintaining appropriate registers of shareholders;
- where required for global tax reporting purposes, including FATCA or CRS;
- internal training and management of personnel;



Appendix 1 - Data Protection and Privacy notice

- to respond to or evaluate any queries or complaints in relation to your investment;
- internal and external audits and, where necessary, investigations; and
- establishing, exercising or defending legal claims.

The legal grounds that we rely on to process your personal data are:

- that it is necessary to comply with our legal obligations;
- that it is necessary for the purposes of The Funds legitimate interests1or the legitimate interests of a third party to whom your personal data is provided. The Fund will not process your personal data for these purposes if our or the third party's legitimate interests should be overridden by your own interests or fundamental rights and freedoms. The legitimate interests pursued by us in this regard include:
- o Conducting our business in a responsible and commercially prudent manner and dealing with any disputes that may arise;
- o Preventing, investigating or detecting theft, fraud or other criminal activity;
- o Pursuing our corporate and social responsibility objectives.
- where you are an individual applicant, that this is necessary to take steps at your request prior to entering into our contract with you and for the performance of our contract with you;
- in certain limited circumstances, your consent.

1Legitimate Interest -as defined under GDPR.

Other Data Controllers

The Fund Administrator may use the information provided by you in order to obtain information it requires in relation to your prospective investment in another fund. The Administrator may consider itself a data controller with respect to this activity.

The Fund Administrator and MLRO may make a report to relevant authorities where it has a suspicion of money laundering or a terrorist financing offence. Where the Administrator makes such a report for itself, not with respect to you, it may consider itself a data controller with respect to this activity. The legal basis for making such disclosure is to comply with a legal requirement.

The Depositary may consider itself a data controller with respect to personal data it receives in the performance of its oversight services with respect to the Fund. The legal basis for obtaining such data is to comply with a legal requirement.

Transfers Abroad

In connection with the above purposes your personal data may be transferred outside the European Economic Area, including to a jurisdiction which is not recognised by the European Commission as providing for an equivalent level of protection for personal data as is provided for in the European Union. These jurisdictions may include the United States of America, the Cayman Islands and Asia. If and to the extent that we do so, we will ensure that appropriate measures are in place to protect the privacy and integrity of such personal data and in particular will comply with our obligations under Regulation (EU) 2016/679, the General Data Protection Regulation (GDPR) governing such transfers, which may include:

(a) entering into a contract governing the transfer which contains the "standard contractual clauses" approved for this purpose by the European

(b) in respect of transfers to the United States of America, ensuring that the transfer is covered by the EU-US Privacy Shield framework (for so long as that it meets with the requirements of GDPR as regards reliance on adequacy decisions under Article 45 of the GDPR);

(c) transferring your personal data pursuant to binding corporate rules; or

(d) a transfer where the European Commission has decided that the recipient ensures an adequate level of protection.

Further details of the measures that we have taken in this regard and the territories to which your personal data may be transferred are available by contacting us as set out above.

Recipients of Data

Your personal data may be disclosed to various recipients in connection with the above purposes, including:

- the Board of the Fund:
- Third party service providers that may be appointed in respect of the Fund;
- Money Laundering Reporting Officer;
- Company Secretary;
- Domestic and other foreign tax authorities as required by applicable law, including FATCA or CRS;
- Competent regulatory authorities and bodies as requested or required by law;
- Other third parties who we engage to provide services to us, such as professional advisers, legal advisers, auditors and IT service providers;
- To screening and other reference agencies in order to carry out money laundering and identity checks and to comply with legal obligations;
- Other members of our corporate group or the corporate groups of the entities referred to above, as well as affiliates, agents and delegates; and

Retention

We will retain your personal data for the duration of your investment in the Fund and for such a period of time after the investment ends as is necessary to comply with our obligations under applicable law and, if relevant, to deal with any claim or dispute that might arise.



Appendix 1 - Data Protection and Privacy notice

Your Rights

You have the following rights, in certain circumstances and subject to applicable exemptions, in relation to your personal data, as set out in more detail in Chapter 3 of the GDPR:

- the right to access your personal data, together with information about our processing of that personal data;
- the right to rectify any inaccuracies in your personal data;
- the right to have any incomplete personal data completed;
- the right to erase your personal data (in certain specific circumstances).
- the right to request that your personal data is no longer processed for particular purposes (in certain specific circumstances);
- where the legal basis for processing is consent, the right to withdraw your consent at any time;
- the right to object to the use of your personal data or the way in which it is processed where we have determined it to be necessary for the purposes of our legitimate interests;
- the right to data portability (in certain specific circumstances);
- the right to lodge a complaint with a supervisory authority, in particular in the Member State of your habitual residence, place of work or place of the alleged infringement if you consider that the processing of personal data relating to you infringes applicable data protection law.

Consent to Direct Marketing

From time to time the Fund or any of the entities listed above may send you information about other products and services that they offer by letter, telephone, by email or by other reasonable means of communication. You have a right not to receive such information. If you consent to receive such information, please tick () here.

You have a right to withdraw this consent at any time. However, your withdrawal of consent will not affect the lawfulness of processing based on consent before its withdrawal.



Anti-Money Laundering (AML) Due Diligence Documentary Requirements in accordance with The Criminal Justice (Money Laundering and Terrorist Financing) Acts 2010 – 2021.

Certification of Documents - Required for High Risk countries

Certified copies of personal identification documents and corporate documentation are required for certain identified investors. Documents must be a 'certified true copy of original'.

In terms of certifying a document as a true copy, certification means that there is an original signature on the document from a suitable person that can be independently verified.

- Suitable persons include:
- An authorised signatory of a Regulated Financial Institution or Credit Institution.
- An authorised signatory of a Financial Adviser.
- A Justice of the Peace.
- A Notary Public or Practicing Solicitor.
- A Practicing Chartered or Certified Public Accountant.
- A person authorised to sign on behalf of an Embassy or a Consul.
- · A practicing Barrister

Certification of each document should include:

- A signed statement confirming that this document is a true and accurate copy of the original document as seen by the person certifying the document.
- The name (in block capitals), occupation and contact details (address, telephone number and email address) of the person certifying the document, as a true copy of the original document.
- The date of certification of the document, as a true copy of the original document.
- 1. Where the document, being certified as a true copy of the original document, contains a photograph, the person certifying the document as a true copy should also confirm that this a true likeness of the person named in the document.
- 2. For multiple page documents, the certifier should sign or initial each page of the copy and confirm on the first or last page of the document the actual number of pages in the document.
- 3. Where available, the statement of certification as a true copy of the sighted original should be accompanied by the professional stamp or seal of the certifier.
- 4. When certifying documents as true copies, the certifier should not be a close family member of, or have any apparent or potential conflicts of interest with, the investor.

English Translations

• Where due diligence documents are provided in a language other than English, the prospective investor should, at the same time, provide a relevant extract translated by an independent source confirming also the adequacy of the foreign language documents.



Due Diligence Documentation – Investor Type				
Please tick investor type below (Please note, investor type indicates the documents/ confirmations required to open account):				
			_	
Private/ Unlisted Company		Charities		
Partnership				
Listed Company		Collective Investment Scheme/Fund		
Subsidiary of a Listed Company		School, college or university		
Regulated Credit or Financial Institution		Pension Schemes		
Nominee Company		Trade Unions		
Government Body or Public Authority		Church		
Individual		Other- Please specify:		
Occupation/Business Activity:				
Secupation/ Business / territy.				
If the application form is signed under power of attorney, a copy of	the	power of attorney must be furnished in support of the signature alon	g with	
due diligence in line with legal type.				
Des Bilines December to Leave A				
Due Diligence Documentation – Leverage A	cro	oss investments		
I hereby authorize the administrator to leverage the due diligence of	docu	imentation provided for the purposes of compliance with applicable		
· · · · · · · · · · · · · · · · · · ·		may hold in the future across all funds which are administered by the		
administrator. Yes No				
Due Diligence Documentation – Requireme	net	s.		
Due Diligence Documentation – Requireme	-111	5		
Outlined below is guidance on the documentation which the Fund/l	ICAV	// Manager & Northern Trust (as Administrator) will require when		
undertaking due diligence to establish the identity of an investor an	nd ve	erify same to the extent warranted by risk.		
· · · · · · · · · · · · · · · · · · ·	•	eserves the right to request such further information and/or documer	ntation	
from investors as is necessary from time to time to satisfy Irish regu	ulato	ory requirements.		
Examples of Photographic Identity Documentation (for verification	nurr	noses).		
	puit	30363).		
 Current passport. Current driving licence. 				
• Current national identity card.				
• Identity document with photographic identity issued by a government department.				
Examples of Proof of Address (for verification purposes):				
Bank statements/credit card statements.				
• Utility bill.				
 Household/motor insurance certificate and renewal notices. Correspondence from local authorities. 				
Correspondence from the revenue commissioners or equivalent.				
Correspondence from any government body.				
• Driving licence which confirms the address provided it has not als	o be	een used to satisfy the photographic		
identity requirement above.				
Payslip or salary advice dated within the previous 3 months.				
Confirmation of address from a lawyer or financial institution.				
Note: All documentation must reflect the current residential addre	Note: All documentation must reflect the current residential address and must be dated within the previous 3 months other than in the case of			
an official document known to be issued only or typically at fixed intervals of more than 3 months, in which case such document may be				
accepted during that period, to a maximum of 12 months (e.g. correspondence from local authorities).				



Letter of Assurance

Please contact Northern Trust for a Section 40/ Reliance template letter of assurance if required.

For Unregulated Nominees (of a regulated parent) or Regulated Credit or Financial Institution investors, please see templates below.

Note: Investors are required to notify the Fund/ICAV Manager & Northern Trust of any changes to the AML information which was previously provided (e.g. changes in directors/controllers or beneficial owners).

Equivalent Jurisdictions (i.e. jurisdictions where a presumption of comparability with Ireland may be made)

Australia, Austria, Argentina, Belgium, Canada, Denmark, Finland, France, Germany, Greece, Guernsey, Ireland, Isle of Man, Israel, Italy, Japan, Jersey, Luxembourg, Malaysia, Netherlands (including Aruba, Curacao and Sint Maarten), New Zealand, Norway, Portugal, Republic of Korea, Singapore, South Africa, Spain, Sweden, Switzerland, United Kingdom and United States.

Deemed High Risk Countries

Afghanistan, Albania, Azerbaijan, Bahamas, Barbados, Belarus, Benin, Bolivia, Bosnia and Herzegovina, Botswana, Burundi, Burkina Faso, Cambodia, Cayman Islands, Central African Republic, China, Comoros, Congo (Republic of the), Cyprus (Greek Cypriot administered), Cyprus (Turkish Cypriot administered), Ecuador, Egypt, Ghana, Gibraltar, Guinea, Guinea Bissau, Haiti, Iraq, Jamaica, Jordan, Laos, Latvia, Lebanon, Liberia, Libya, Mali, Mauritius, Montenegro, Morocco, Myanmar (Burma) Nicaragua, Pakistan, Palestinian Territories, Panama, Philippines, Russia, Senegal, Serbia, Somalia, South Sudan, Trinidad and Tobago, Tunisia, Turkey, Uganda, Vanuatu, Venezuela, Western Sahara, Yemen and Zimbabwe.

Note: Northern Trust reviews the risks associated with all locations on a regular basis and may change over time. Northern Trust reserves the right to apply a different risk rating than shown in this document.



Entity Type	AML Documents Required* -	AML Documents Required* -
	Standard	Enhanced
Individual	 Copy of photo ID (copy of Passport, Drivers License or National ID Card) Copy of proof of residential address verification (Utility Bill, Bank or Mortgage Statement) 	 Certified copy of photo ID One certified proof of residential address verification Due Diligence Questionnaire (incl. Source Wealth and Source of Funds)
Joint Account	- As per the above for each account holder	- As per the above for each account holder
	- Proof of Regulation	
Naminas Campany	- Letter of representation from the Regulated Credit or Financial Institution (Parent Company).	
Nominee Company (wholly owned subsidiary)	- Identify any beneficial owner entitled to 25% or more (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the parent entity. Where there is no beneficial owner entitled to 25% or more, then the natural person(s) who hold the position of director(s) of the entity (investor) must be identified (along with address, date of birth and nationality).	
	- Evidence of UBO Registration on the Beneficial Ownership Register (Irish investors only).	
	-Original Authorised Signatory List ("ASL") including specimen signatures	
	- Proof of regulation.	
Regulated Credit or Financial Institution	 A letter of assurance from the Regulated Credit or Financial Institution. Identify any beneficial owner entitled to 25% or more (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the entity. Where there is no beneficial owner entitled to 25% or more, then the natural person(s) who hold the position of director(s) of the entity must be identified (along with address, date of birth and nationality). Evidence of UBO Registration on the Beneficial Ownership Register (Irish investors only). 	



Entity Type	AML Documents Required* -	AML Documents Required* -
	Standard	Enhanced
Subsidiary of a Listed Company	- Proof of listing for the listed parent company on a Regulated Market (E.g. a regulated market that subjects companies, whose securities are admitted to trading, to disclosure obligations which are consistent with the Legislation of the European Communitiessee above Equivalent Jurisdictions). - Evidence of ownership by the listed company. - Identify the natural person(s) who hold the position of senior managing official(s)/ director(s) of the entity (along with address, date of birth and nationality). - Evidence of UBO Registration on the Beneficial Ownership	
	Register (Irish investors only).	
Corporation	 Full name of the company. Registered number of the company. Registered office address & principal business address of the company. Copy of Certificate of Incorporation or equivalent constituting document Identify Directors Verify identity of two Directors or one Director and one authorised signatory Identify and verify any beneficial owner beneficially entitled to 25% or more (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the entity. Where there is no beneficial owner entitled to 25% or more, the natural person(s) who hold Original ASL including specimen signatures Evidence of UBO Registration on the Beneficial Ownership Register (Irish investors only). 	Where the applicant is domiciled in an aforementioned high risk jurisdiction, the following is also required - Identify and verify the identity of any beneficial owner beneficially entitled to more than 10% (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the entity. Where there is no beneficial owner entitled to 10% or more, the natural person(s) who hold the position of senior managing official(s)/ director(s) of the entity must be identified and verified. - Due Diligence Questionnaire (incl. Source Wealth and Source of Funds Where the applicant is domiciled in an aforementioned high risk jurisdiction, documentation should be certified as true copies of the original.



Entity Type	AML Documents Required* -	AML Documents Required* -
	Standard	Enhanced
	- Full name of trust.	Where the applicants are not Regulated Trustees
	- Country of establishment of trust	investing on behalf of a Trust, or where the applicant is domiciled in an aforementioned high
Trust	- Copy of Trust Deed	risk jurisdiction, the following is also required:
	- Identify all Trustees	- Verify the identity of the beneficiaries beneficially
	- Verify identity of two Trustees or one Trustee and one authorised signatory	entitled to trust's assets or beneficial interest. Where there is no beneficial owner entitled to 10%
	- Identify Settlor(s)/Donor and verify the settlor.	or more, the natural person(s) who hold the position of senior managing official(s)/ trustee(s) of the
	- Identify and verify the protector.	entity must be identified and verified.
	- Identify all beneficiaries or the class of beneficiary beneficially entitled to trust's assets or the beneficial interest (Note:	- Confirmation as to how the settlor was in a position to make the investment.
	Verification of the beneficiaries may be required by the administrator to the extent warranted by the risk). Where there	- Due Diligence Questionnaire (incl. SOW/SOF for investor and settlor)
	is no beneficial owner entitled to 25% or more, the natural person(s) who hold the position of senior managing official(s)/trustee(s) of the entity must be identified.	- Verify the identity of all trustees (i.e. in accordance with their legal structure or for each individual)
	- Evidence of UBO Registration on the Beneficial Ownership Register (Irish investors only).	Where the applicants are not Regulated Trustees
	- Original ASL including Specimen Signatures	investing on behalf of a Trust or where the applicant is domiciled in an aforementioned high risk jurisdiction, documentation should be certified as true copies of the original.
	- Full name of the partnership.	Where the applicant is not a Partnership Fund or
	- Registered office address & principal business address of the partnership.	located in one of the aforementioned deemed high risk jurisdictions, the following is also required:
Partnership	- Constitutional document for the Partnership (e.g. Partnership Agreement)	- Due Diligence Questionnaire (incl. SOW/SOF for investor and UBO).
	- Identify all Partners including percentage holdings	- Identify and verify the identity of any partner who own more than 10% (directly or indirectly) of the
	- Verify the identity of all partners who own 25% or more (directly or indirectly) of the partnership capital, profit or voting rights or otherwise exercise control over the management of the Partnership Fund. Where there is no partner entitled to 25% or more, the natural person(s) who hold the position of senior managing official(s) of the entity must be identified.	share capital, profit or voting rights or otherwise exercise control over the management of the partnership. Where there is no partner entitled to 10% or more, the natural person(s) who hold the position of senior managing official(s)/partner(s) must be identified and verified.
	- Verify the identity of the general partner and a second partner (or in the absence of same an authorised signatory).	Where the applicant not a Partnership Fund or is
	- Evidence of UBO Registration on the Beneficial ownership Register (Irish investors only).	domiciled in an aforementioned high risk jurisdiction, documentation should be certified as
	- Original ASL including specimen signatures	true copies of the original.



	AMI Described &	
Entity Type	AML Documents Required* -	AML Documents Required* -
	Standard - Full name of the LLC.	Enhanced Where the conficent is demission in an
Limited Liability	- Registered office address & principal business address of the LLC. - Constitutional document for the LLC (e.g. Certificate of	Where the applicant is domiciled in an aforementioned high risk jurisdiction, the following is also required: - Verify the identity of all members beneficially entitled to more than 10% (directly or indirectly) of
Company ("LLC")	Formation) - Operating agreement for the LLC - Identify Managing Members - Verify identity of two Managing Members or one Managing Member and one authorised signatory - Identify and verify any beneficial owner beneficially entitled to 25% or more (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the entity. Where there is no beneficial owner entitled to 25% or more, the natural person(s) who hold the position of senior managing official(s)/director(s) of the entity must be identified. - Original ASL including Specimen Signatures - Evidence of UBO Registration on the Beneficial Ownership Register (Irish investors only).	the share capital, profit or voting rights or otherwise exercise control over the management of the entity. Where there is no beneficial owner entitled to 10% or more, the natural person(s) who hold the position of senior managing official(s)/ managing members(s) of the entity must be identified and verified. -Due Diligence Questionnaire (incl. SOW/SOF for investor and UBO) Where the applicant is domiciled in an aforementioned high risk jurisdiction, documentation should be certified as true copies of the original.
USA Individual Retirement Account ("IRA")	- Identify individual in line with individual requirements as noted above - Proof of regulation for Custodian of the IRA - Constitutional document (or other proof of the existence of the pension) - Original ASL including specimen signatures where applicable	
Pension Plan	-Confirmation of registration of the pension scheme (as appropriate) from the relevant tax authorities or pensions board. or - Copy of the Formation document of pension plan - Identify Trustees / Directors / Governors / Board Members or equivalent - Appropriate background information. - Identify any beneficial owner beneficially entitled to 25% or more (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the entity. Where there is no beneficial owner entitled to 25% or more, the natural person(s) who hold the position of senior managing official(s)/director(s) of the entity must be identified. - Evidence of UBO Registration on the Beneficial Ownership Register (Irish investors only). - Original ASL including Specimen Signatures	Where the applicant is domiciled in an aforementioned high risk jurisdiction, the following is also required: -Identify and Verify identity of scheme administrator and entity carrying out AML/CTF controls on scheme investors (per legal form or -Written confirmation from the entity carrying out AML/CTF controls similar to that requested from a regulated third party undertaking due diligence Identify any beneficial owner beneficially entitled to 10% or more (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the entity. Where there is no beneficial owner entitled to 10% or more, the natural person(s) who hold the position of senior managing official(s)/director(s) of the entity must be identified and verifiedDue Diligence Questionnaire (incl. SOW/SOF for investor and UBO) Where the applicant is domiciled in a high risk jurisdiction, documentation should be certified as true copies of the original.



Entity Type	AML Documents Required* -	AML Documents Required* -
	Standard	Enhanced
	- Full name of the government body or public authority.	Where the applicant is domiciled in an
	- Registered office address.	aforementioned high risk jurisdiction, the following is also required:
Public Body	- Nature and status of the government body or public authority	- Identify and verify the identity of at least to directors or, where applicable, one director
	- Name of the home state authority and nature of its relationship with the public body	one authorised signatory and evidence of authorisation to act on the customer's beha
	-Evidence of ownership of the public authority.	- Certified copy of the most recent Audited
	- Identify the main public body officials and verify the identity of two officials or, where applicable, one official and one authorised signatory.	Financial Statements - Due Diligence Questionnaire (incl. SOW/SO for investor).
	- Appropriate background information on the government body or public authority.	Where the applicant is domiciled in an aforementioned high risk jurisdiction,
	- Appropriate background information on the government body or public authority.	documentation should be certified as true copies of the original.
	- Original ASL including Specimen Signatures	
	- Full name of the charity	Where the applicant is not a registered Cha
	- Registered office address & principal business address	or where the applicant is domiciled in an
Charity	- Copy of relevant charities register or confirmation of the	aforementioned high risk jurisdiction, the following is also required:
	registration of the charity with the relevant tax authorities (e.g. UK Charities Commission/ HMRC).	- Certified copy of Constitutional / Formatio document
	- Nature / purpose including nature of the funding	- Certified copy of the most recent Audited
	- Names of all trustees/directors (or equivalent) of the	Financial Statements
	charity - Identify and verify identity of Company Secretary or	- Due Diligence Questionnaire (incl. SOW/SO for investor and UBO (if applicable), and
	equivalent, or, where applicable, verify the identity of one of the trustees.	jurisdictions funds are received from and pato where not already evident).
	- (If a charitable trust), details of the settlor of the charitable trust.	- Identify and verify the identity of the beneficiaries (where ascertainable) of the
	- Names or classes of persons who stand to benefit from the objects of the charity, or identify and verify any beneficiary beneficially entitled to 25% or more of the assets. Where there is no beneficial owner entitled to 25% or more, the natural person(s) who hold the position of	charity. Where there is no beneficial owner entitled to 10% or more, the natural person who hold the position of senior managing official(s)/trustee(s) of the entity must be identified and verified.
	senior managing official(s)/trustee(s) of the entity must be identified.	- Identify and verify the settlor, where applicable.
	- Evidence of UBO Registration on the Beneficial Ownership Register (Irish investors only).	Note: Where the applicant is not a register Charity, documentation provided should b
	- Original ASL including Specimen Signatures	certified as true copies of the original documentation.



Entity Type	AML Documents Required* -	AML Documents Required* -		
	Standard	Enhanced		
	- Full name of the CIS.	Where the applicant is domiciled in an		
	- Registered address of the CIS	aforementioned high risk jurisdiction, the following is also required:		
Collective Investment Scheme ('CIS')	- Copy of the Offering Memorandum / Prospectus or equivalent	- Due Diligence Questionnaire (incl. SOW/SOF for investor and UBO)		
	 Name and Address of Fund's Promoter and Administrator Name and address of the entity carrying out due diligence on the investors in the CIS and evidence that this entity is regulated for AML purposes. Identify all investors who own 25% or more (directly or indirectly) of the shares / units of the fund. Where CIS is a corporate body and there is no beneficial owner entitled to 25% or more, the natural person(s) who hold the position of senior managing official(s)/ director(s) of the entity (investor) must be identified 	- Identify and verify the identity of any beneficial owner beneficially entitled to more than 10% (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the entity; or - Written confirmation from the entity carrying out AML/CTF controls similar to that requested from a regulated third party undertaking due diligence.		
	 Evidence of UBO Registration on the Beneficial Ownership Register (Irish investors only). Original ASL including specimen signatures 	- Where there is no beneficial owner entitled to 10% or more, the natural person(s) who hold the position of senior managing official(s)/director(s) of the entity must be identified and verified.		
		Where the applicant is domiciled in an aforementioned high risk jurisdiction, documentation should be certified as true copies of the original.		

Note: Where the beneficial owner is a corporate entity, Northern Trust requires details of ultimate beneficial owners (this can be demonstrated through an organisation chart signed by an authorised signatory or shareholder register or other company documentation etc. reflecting the ownership and control structure).

^{*} Subject to change in line with Irish regulatory requirements and relevant guidelines.



Letters of Assurance Requirements- Unregulated Nominees and Regulated Credit or Financial Institution

Unregulated Nominee Letter of Assurance

[On Letterhead of the Regulated Parent Company]

[Date]

Northern Trust International Fund Administration Services (Ireland) Limited Georges Court 54-62 Townsend Street Dublin 2 Ireland

Re: [Insert Name of Unregulated Nominee/ Intermediary Company] ('the Nominee Company')- Verification of Investor(s) Identity in accordance with applicable Anti Money Laundering and Counter Terrorist Financing ("AML/CFT") Laws and Regulations

Dear Sir/ Madam,						
We confirm that, [insert name of Regulated Paren at	nt Company] (Company") w address]	_		cated as
	•		scription)		by	the
	[inse	rt regulatory	<i>body]</i> and	that we a	are supervised	l and
monitored for compliance with AML/CFT regula	atory require	ments in		[in	sert country].	. Our
registration or licence number is	[ins	ert registrati	on or licence	number].		
We confirm that the Nominee Company is a wholly We are satisfied for Northern Trust International funds) to rely on this confirmation for all designation	Fund Admin	istration Serv	rices (Ireland)	Limited (as administrat	
The Regulated Parent Company make the followin the Nominee Company and the Parent Company:	ng representa	tions, warrar	ities and und	ertakings i	in respect to b	oth
(i) we have established AML/CFT policies, pro	cedures and	internal con	trols to ensu	ire ongoir	ng compliance	with

- applicable AML/CFT and economic sanctions laws and regulations (insert relevant law/regulation here);

 (ii) our AML/CFT policies, procedures and internal controls incorporate systems and controls to identify and verify our
- (ii) our AML/CFT policies, procedures and internal controls incorporate systems and controls to identify and verify our customers and beneficial owners, to identify source of funds, and performs (i) appropriate risk-grading procedures to differentiate between customer due diligence for high and low risk relationships (ii) ongoing customer due diligence, (iii) regular AML/CFT monitoring and sanction screening, (iv) staff AML/CFT training and (v) detect, investigate and, as required, report any suspicious activities to the relevant authorities;



(iii) we have systems and controls in place to identify Politically Exposed Persons, their relatives and close associates (collectively PEPs) and we conduct enhanced due diligence, including establishing the source of wealth and the source of funds, and enhanced ongoing monitoring on PEPs and other high risk customers.

With regard to customers who have invested via the Nominee Company in the Funds, we confirm;

- (iv) the accounts will only be operated by the Nominee and / or the Parent Company whom maintain ultimate, effective control over the account:
- (v) we have performed customer due diligence and identified and verified the beneficial owner(s) (to the extent warranted by risk of money laundering and the financing of terrorism), and have obtained the information on the purpose and the intended nature of the business relationship;
- (vi) to the best of our knowledge, we are unaware of any activities on the part of the customer(s), their beneficial owners which could lead us to suspect an involvement in criminal conduct. money laundering or terrorist activities;
- (vii) we will retain documents and information on the customer(s), including any beneficial owner, obtained as part of customer identification and verification process for at least 5 years after the termination of their relationship with us;
- (viii) we will provide the Fund and/or Northern Trust with related customer due diligence documents and information, which we may have on our files relating to the identity of the customer(s) and beneficial owner(s) upon request;
- (ix) none of the customer(s) including any beneficial owner are subject to sanctions lists administered by the European Union, the United States (including OFAC) and the United Nations, and we undertake to notify you immediately upon our identification of same should we become aware of such circumstances;
- (x) we will notify the Fund and/or Northern Trust, on request, of its identification of PEPs.

We further undertake to advise you, should at any time in the future, there be any change in information provided above.

I confirm that I have sufficient knowledge of and responsibility for AML procedures and have the appropriate authority to provide the assurances given in this letter.

Yours faithfully,

[Capacity of signatory – Money Laundering Reporting Officer / Head of Compliance / Head of Risk / Director / Other]
For and on behalf of
[Regulated Entity]



Regulated Credit or Financial Institution Letter of Assurance (as Investor)

[On Letterhead of the Regulated Parent Company]

Service George	
Re:	[Insert Name of Regulated Financial Intermediary Company]- Verification of Identity in accordance with applicable Anti Money Laundering and Counter Terrorist Financing ("AML/CFT") Laws and Regulations
Dear S	ir/ Madam,
We c	confirm that, [insert name of Regulated Financial Intermediary] with a registered office located at address] is licensed as (insert description) by the [insert regulatory body] and that we are supervised and monitored fo
	iance with AML/CFT regulatory requirements in [insert country]. Our registration or licence ris [insert registration or licence number].
	re satisfied for Northern Trust International Fund Administration Services (Ireland) Limited (as administrator to rely on this confirmation for all designations.
	ereby confirm the following in connection with all investors ("Investors") and their beneficial owners in all lations:
	we have established AML/CFT policies, procedures and internal controls to ensure ongoing compliance with applicable AML/CFT and economic sanctions laws and regulations (inservelevant law/regulation here);
	our AML/CFT policies, procedures and internal controls incorporate systems and controls to identify and verification our customers and beneficial owners, to identify source of funds, and performs (i) appropriate risk-grading procedures to differentiate between customer due diligence for high and low risk relationships (ii) ongoing customer due diligence, (iii) regular AML/CFT monitoring and sanction screening, (iv) staff AML/CFT training and (v) detect, investigate and, as required, report any suspicious activities to the relevant authorities;
(iii)	we have systems and controls in place to identify Politically Exposed Persons, their relatives and close associate (collectively PEPs) and we conduct enhanced due diligence, including establishing the source of wealth and the source of funds, and enhanced ongoing monitoring on PEPs and other high risk customers.

[Date]



With regard to each investor who has invested via the financial intermediary in the Funds, we hereby confirm;

- (iv) the accounts will only be operated by the financial intermediary whom maintain ultimate, effective control over the account;
- (v) we have performed customer due diligence and identified and verified the beneficial owner(s) (to the extent warranted by risk of money laundering and the financing of terrorism), and have obtained the information on the purpose and the intended nature of the business relationship;
- (vi) to the best of our knowledge, we are unaware of any activities on the part of the customer(s), their beneficial owners which could lead us to suspect an involvement in criminal conduct money laundering or terrorist activities;
- (vii) we will retain documents and information on the customer(s), including any beneficial owner, obtained as part of customer identification and verification process for at least 5 years after the termination of their relationship with us;
- (viii) we will provide the Fund and/or Northern Trust with related customer due diligence documents and information, which we may have on our files relating to the identity of the customer(s) and beneficial owner(s) upon request;
- (ix) none of the customer(s) including any beneficial owner are subject to sanctions lists administered by the European Union, the United States (including OFAC) and the United Nations, and we undertake to notify you immediately upon our identification of same should we become aware of such circumstances;
- (x) we will notify the Fund and/or Northern Trust, on request, of its identification of PEPs.

We further undertake to advise you, should at any time in the future there be any change in any information provided above.

I confirm that I have sufficient knowledge of and responsibility for AML procedures and have the appropriate authority to provide the assurances given in this letter.

Yours faithfully,

[Capacity of signatory – Money Laundering Reporting Officer / Head of Compliance / Head of Risk / Director / Other]
For and on behalf of
[Regulated Entity]



Beneficial Owner(s) Declaration

Please tick one of the below boxe	s and complete the relevar	nt section:	
We confirm there is a natura of this declaration); or.	al person(s) who is a benefi	icial owner of the investor (F	Please complete section 1 below
We confirm there is no natu this declaration).	ral person(s) who is a bene	eficial owner of the investor (Please complete section 2 of
Section 1: Natural person(s) who is a ber	neficial owner of the investor		
Beneficial Owner 1 (please complete in b	plock capitals):		
Full Name:	Occupations		Identification Number:
Date of Birth (DD-MM-YYYY)	Occupation: : Nationality:		Place of Birth:
Shareholding %: Registered Address (PO Box or Care of wi City, Town, State, Province or County Country:	ill not be accepted):	Postal/ZIP Code:	
Beneficial Owner 2 (please complete in b	olock capitals):		
Full Name:	Occupation:		Identification Number:
Date of Birth (DD-MM-YYYY)	: Nationality:		Place of Birth:
Shareholding %: Registered Address (PO Box or Care of wi City, Town, State, Province or County Country:	•	Postal/ZIP Code:	
Beneficial Owner 3 (please complete in b	olock capitals):		
Full Name:	Occupation:		Identification Number:
Date of Birth (DD-MM-YYYY)	: Nationality:		Place of Birth:
Shareholding %: Registered Address (PO Box or Care of wi City, Town, State, Province or County Country:	ill not be accepted):	Postal/ZIP Code:	
Beneficial Owner 4 (please complete in b	olock capitals):		
Full Name:	Occupation:		Identification Number:
Date of Birth (DD-MM-YYYY)	: Nationality:		Place of Birth:
Shareholding %: Registered Address (PO Box or Care of wi City, Town, State, Province or County Country:	•	Postal/ZIP Code:	



Section 2: No natural person(s) who is a beneficial owner of the investor.

In the event where no natural person falls under the above scenario, the senior managing official(s) of the subscribing Nominee entity will be recorded as the Beneficial Owner (not any underlying customer of the entity / designation).

In completing the below, we confirm we have read and understood the above definition and we have provided below details of a senior manager(s)

, , , , , , , , , , , , , , , , , , , ,			 ١-,
who should be recorded as the Bene	eficial Owner(s).		

Senior managing official details (please complete in block capitals):			
Full Name			
Date of Birth (DD-MM-YYYY):	Plac	ce of Birth:	
Nationality:			
Registered Address (PO Box or Care of will not be accepted):			Title:
City, Town, State, Province or County:	Postal/ZIP Code:	Country:	
If needed, please add additional senior managing officials on a seni	arate sheet		

Yours faithfully,

[Capacity of signatory – Money Laundering Reporting Officer / Head of Compliance / Head of Risk / Director / Other] For and on behalf of [Regulated Entity]



¹ Beneficial Owner: A Beneficial Owner is any individual who ultimately owns or controls an investor or on whose behalf a transaction is conducted.

A. Beneficial Owner, in relation to a body corporate which is not a company whose securities are listed on a Regulated Market (markets in financial instruments and located within the European Economic Area, or that subjects companies, whose securities are admitted to trading, to disclosure requirements consistent with EU legislation), is any individual who ultimately owns or controls, whether through direct or indirect ownership or control (including through Bearer Shareholdings), 25% or more of the shares or voting rights of the body corporate or through control via other means.

Beneficial owner, in relation to a body corporate::

- (i) A shareholding of 25% or more or an ownership interest of 25% or more in the customer held by a natural person shall be an indication of direct ownership. (ii) A shareholding of 25% or more or an ownership interest of 25% or more 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. (iii) Where there is no person identified as beneficial owner, or if there is any doubt that the person(s) identified are the beneficial owner(s), the natural person(s) who hold the po ion of senior managing official(s)/ director(s) of the investor, will be deemed the beneficial owners.
- B. Beneficial Owner, in relation to a partnership (other than a limited liability partnership), means any individual who:
 (i) ultimately is entitled to or controls, whether the entitlement or control is direct or indirect, 25% or more of the share of the capital or profits of the partnership or 25% or more of the voting rights in the partnership; or (ii) controls the partnership.
- C. Beneficial Owner, in relation to a trust, means all of the following:

 (i) the settlor; (ii) the trustees; (iii) any individual who is determined as being entitled to a vested interest in possession, remainder or reversion, whether or not the interest is defeasible, in the capital of the trust property (a beneficiary); (iv) in the case of a trust other than one that is set up or operates entirely for the benefit of individuals referred to in the paragraph relating to body corporates above, (v) the class of individuals in whose main interest the trust is set up or operates; or any individual (including the settlor, protector or trustees) who has control over the trust.
- D. Beneficial Owner, in relation to a foundation or other legal arrangement similar to a trust, means those individuals who hold equivalent or similar positions to those set out above.