# PanAgora Defensive Global Equity ESG Aware Fund

Sub Fund of the DMS UCITS Platform ICAV

**Subscription Agreement** 

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# SECTION 1 - DETAILS OF INVESTMENT TO BE COMPLETED BY ALL INVESTORS

#### **Mailing Address**

C/o SEI Investments – Global Fund Services Limited Styne House Upper Hatch Street Dublin 2, Ireland

Tel: (00) +353 1 6382440 E-mail: tadublin@seic.com

For initial subscriptions for units you must complete this application form and submit by e-mail to the administrator together with the supporting documentation required for anti-money laundering purposes no later than 4.00 p.m. Dublin time on the Business Day immediately preceding the Dealing (Trade) Date. Applications for shares will not be deemed to be complete until all anti-money laundering procedures have been completed. Subsequent subscriptions and redemption requests may be submitted by email or by other electronic means deemed acceptable by the administrator.

Failure to provide the application form along with the documentation required for anti-money laundering purposes may result in the deduction of tax due to the Irish Finance Act requirements outlined in the anti-money laundering section and/or a delay in the acceptance and/or payment of a transfer/redemption request.

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

Non Retail Accounts - An authorised signatory list must be provided at the time of account opening for the investing entity in whose name the account is being opened. The application form must be signed in accordance with that authorized signatory list.

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

	Euro	US Dollars
Pay	Barclays Bank plc, Frankfurt	The Northern Trust International Banking Corporation, NJ
SWIFT Code	BARCDEFF	CNORUS33
For Account	The Northern Trust International Banking Corporation, NJ	The Northern Trust International Banking Corporation, NJ
IBAN/Fedwire ABA	[•]	026-001-122
SWIFT BIC	CNORUS33	
Account Number	0210472800	
Beneficiary Name	DMS UCITS Platform ICAV – PanAgora Defensive Global Equity ESG Aware Fund EUR	DMS UCITS Platform ICAV – PanAgora Defensive Global Equity ESG Aware Fund USD
Beneficiary Number	684779-20019	239137-20010
Reference	(Name of Applicant)	(Name of Applicant)

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

Subscription monies should be received by wire transfer in cleared funds by the second business day following the relevant dealing day as set out in the relevant supplement in the currency of the relevant units.

# <u>Details of Investment – Share Classes</u>

The applicant, having received and read a copy of the DMS UCITS Platform ICAV (the "ICAV") Prospectus and the Supplement for the PanAgora Defensive Global Equity ESG Aware Fund (the "Fund") hereby applies to invest in the ICAV, as indicated in the table below:

Fund Name	Share Class	Currency	Number of Units	Value of Subscription	ISIN
PanAgora Defensive Global Equity ESG Aware Fund	F (USD)	USD			IE00BN92YK58
PanAgora Defensive Global Equity ESG Aware Fund	F (EUR)	Euro			IE00BN92YL65

(Please note that if you are an existing investor in the company, you should complete an additional subscription document. This is an initial application for new investors)

# **Account Registration Details**

Should you have any questions, please contact the Administrator:

SEI Investments – Global Fund Services Limited, Styne House, Upper Hatch Street, Dublin 2.

Telephone: +353 1 6382440 Email: tadublin@seic.com

Registered Name		
Account Designation (if any)		
Shareholder Type <sup>1</sup>		
Occupation (if individual or joint account) or Nature of purpose of entity (if entity)		
Registered Address PO or C/O will not be accepted		
Mailing Address (if different)		
Contact Name		
Contact Details		
Telephone (inc. country code)	Facsimile	
Email		
Date of Birth / Formation Date if Entity		
Nationality / Domicile		
Country of Birth	 	

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, (xi) trusts, foundations and similar entities, (xii) charities, (xiii) clubs & societies, (xiv) places of worship, (xv) other (please specify)

Joint Applicant(s)					
Details of up to 3 additional holders may be added to the application. Please complete details in block capitals below. Additional applicants will be required to provide all required documentation for anti-money laundering verification purposes.					
First additional applicant deta	First additional applicant details				
Registered Name					
Occupation (if individual or joint account) or Nature of purpose of entity (if entity)					
Source of wealth (e.g. inheritance, income from employment, income from business activities)					
Registered Address PO or C/O will not be accepted					
Contact Name					
Contact Details Telephone (inc. country code)		Facsimile		Email	
Second additional applicant d	etails				
Registered Name					
Occupation (if individual or joint account) or Nature of purpose of entity (if entity)					
Source of wealth (e.g. inheritance, income from employment, income from business activities)					
Registered Address PO or C/O will not be accepted					
Contact Name					
Contact Details					
Telephone (inc. country code)		Facsimile		Email	
Third additional applicant det	ails				
Registered Name					
Occupation (if individual or joint account) or Nature of purpose of entity (if entity)					
Source of wealth (e.g. inheritance, income from employment, income from business activities)					
Registered Address PO or C/O will not be accepted					
Contact Name					
Contact Details	Contact Details				
Telephone (inc. country code)		Facsimile		Email	

# Bank Account Details for Redemption and Distribution Payments

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

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

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

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

Correspondent Bank Name	
Correspondent Bank Address	
Correspondent Bank Sort Code/ SWIFT (BIC)/ ABA/Fedwire	
Beneficiary Bank Name	
Beneficiary Bank Address	
Beneficiary Bank Sort Code/ SWIFT (BIC)/ ABA/Fedwire	
Beneficiary Account Name	
Beneficiary Account Number	
Currency	
Reference	

# SECTION 2 - BENEFICIARY OWNERS AML FOR NOMINEES AND INTERMEDIARIES ONLY

# **Beneficiary Owner Details**

Beneficiary Owners - To be completed where the investor(s) is/are not a natural person. A beneficial owner is considered by the ICAV to be an individual or corporate entity:

Which ultimately owns or controls whether through direct or indirect ownership or control (including through bearer shareholdings) more than 25 per cent of the shares or voting rights in the investor, or otherwise exercises controls over the management of the investor.

Please note below any beneficiary owner(s) of the registered investor(s):

Beneficiary Owner 1 (where app	licable)
Registered	
Name Address	
Entity Type / Individual	
Formation of entity / Date of Birth (if individual)	
Beneficiary Owner 2 (where app	licable)
Registered Name	
Address	
Entity Type / Individual	
Formation of entity / Date of Birth (if individual)	
Beneficiary Owner 3 (where app	<u>licable)</u>
Registered Name	
Address	
Entity Type / Individual	
Formation of entity / Date of Birth (if individual)	

e.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, (xi) trusts, foundations and similar entities, (xii) charities, (xiii) clubs & societies, (xiv) places of worship, (xv) other (please specify)

**Beneficiary Owner 4 (where applicable)** 

Re	egistered Name	
Ac	ddress	
En	tity Type / Individual	
Fo	rmation of entity / Date Birth (if individual)	

# Broker ID Broker Name Broker Address Representative Name Contact Details Telephone (inc. country code) Facsimile

Email

<sup>&#</sup>x27;e.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, (xi) trusts, foundations and similar entities, (xii) charities, (xiii) clubs & societies, (xiv) places of worship, (xv) other (please specify)

# ANTI-MONEY LAUNDERING – KNOW YOUR CUSTOMER REQUIREMENTS

Under Irish legislation and supplemental guidance covering anti-money laundering and the taxation of savings the ICAV and the Administrator are required to obtain the documentation set out in section 6 to verify the identity of all new applicants. This documentation should be provided with the subscription agreement. The documentation listed may not cover all applications and the ICAV and the Administrator reserve the right to request additional documentation if required.

Should documents be provided in a language other than English, an English translation may be required.

In any event, redemption and dividend payments will not be processed until full anti-money laundering documentation has been received on the account and the ICAV and the Administrator reserve the right to take further action where full anti-money laundering documentation has not been received.

Please note that the Administrator can only accept application forms from an entity that has legal capacity to enter into contracts on its own right and may require the constitutive document to legitimate legal status.

# AML CONFIRMATION FOR NOMINEES / INTERMEDIARIES

This confirmation can only be completed by designated bodies regulated for anti-money laundering purposes by the appropriate regulator in one of the following countries: Australia, Austria, Belgium, Finland, France, Germany, Guernsey, Ireland, Italy, Luxembourg, Netherlands, Norway, Portugal, Spain, Sweden, United Kingdom, United States (please note this list is subject to change).

Description of investor	Designated body investing as an intermediary $\square$ Nominee company $\square$			
Relationship of confirmation provider (regulated entity) to investor	Investor □ Parent of investor □			
Unless the following box is ticked the Administrator will apply the below confirmation to any subsequent designated accounts in the name of this investor.				
Do <u>not</u> apply the below confirmation	to subsequent designations □			
lame of Regulated Entity				
ame of Regulator				
ddress of Regulated Entity				

#### Tax - 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 Bank Account Details for Redemption and Distribution Payments section of the 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 data-sharing 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 in respect of you 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: <a href="http://www.revenue.ie/en/business/aeoi/index.html">http://www.revenue.ie/en/business/aeoi/index.html</a> unless you are tax resident in a Jurisdiction that does not issue a TIN.

#### **SECTION 3 - TAX DECLARATION FOR ENTITIES**

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

#### Instructions for completion and Data Protection notice.

We are obliged under Section 891E, Section 891F, and Section 891G of the Taxes Consolidation Act 1997 (as amended) and regulations made pursuant to those sections to collect certain information about each account holder's tax arrangements. Please complete the sections below as directed and provide any additional information that is requested. Please note that by completing this application form you are providing personal information, which may constitute personal data within the meaning of the General Data Protection Regulation (697/2016/EU) (the "GDPR") and applicable Irish data protection legislation (currently the Irish Data Protection Acts 1988 to 2003. Please note that in certain circumstances we may be legally obliged to share this information, and other financial information with respect to an account holder's interests in the Fund, with the Irish tax authorities, the Revenue Commissioners. They in turn may exchange this information, and other financial information with foreign tax authorities, including tax authorities located outside the EU.

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

For further information and guidance on FATCA or CRS please refer to the Irish Revenue or the OECD website at:

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

 $\underline{http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/} \text{ in the case of CRS only.}$ 

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

Account holders that are Individuals or Controlling Persons should not complete this part of Section 4 and should complete the section entitled "Individual (including Controlling Persons) Self-Certification for FATCA and CRS" below.

(Mandatory fields are marked with an *)		
*Section 1: Account Holder Identification *Account holder Name:		(the " <b>Entity</b> "
*Country of Incorporation or Organisation:		
*Current (Resident or Registered) Address:		
Number: Street:		
City, town, State, Province or County:		
Postal/ZIP Code:	_ Country:	_
Mailing address (if different from above):		
Number:Street:		
City, town, State, Province or County:		
Postal/ZIP Code:	Country:	

*Section 2: FATCA Declaration: Please tick either (a), (b) or (c) below and complete as appropriate.
a) The Entity is a <i>Specified U.S. Person</i> and the Entity's U.S. Federal Taxpayer Identifying number (U.S. TIN) is as follows:
U.S. TIN:
Or
b) The Entity is not a <i>Specified U.S. Person</i> (Please also complete Sections 3, 4 and 5)
Or
c) The Entity is a <b>US person but not</b> a <i>Specified U.S. Person</i> (Please also complete Sections 4 and 5)
Indicate exemption:
*Section 3: Entity's FATCA Classification (the information provided in this section is for FATCA, please note your FATCA classification may differ from your CRS classification in Section 5):
3.1 Financial Institutions under FATCA:
If the Entity is a <i>Financial Institution</i> , please tick one of the below categories and provide the Entity's GIIN at 3.2 or indicate at 3.3 the reason why you are unable to provide a GIIN.
I. Irish Financial Institution or a Partner Jurisdiction Financial Institution
II. Registered Deemed Compliant Foreign Financial Institution
III.   Participating Foreign Financial Institution
3.2 Please provide the Entity's Global Intermediary Identification number (GIIN)  3.3 If the Entity is a Financial Institution but unable to provide a GIIN, please tick one of the below reasons:
I. The Entity has not yet obtained a GIIN but is sponsored by another entity which does have a GIIN
Please provide the sponsor's name and sponsor's GIIN:
Sponsor's Name: Sponsor's GIIN:
<i>∞NOTE</i> : this option is only available to Sponsored Investment Entities in Model 1 IGA jurisdictions. Sponsored Investment Entities that do not have U.S. reportable accounts are not required to register and obtain a GIIN with the IRS unless and until U.S. reportable accounts are identified.

	The Entity is an Exempt Beneficial Owner,			
II.	Please tick and confirm the category of Exempt Beneficial Owner;			
	I.	Government Entity		
	II.	International Organisation		
	III.	Foreign Central Bank	⊔	
	IV.	Exempt Retirement Fund		
	V.	Collective Investment Vehicle Wholly Owned by Exempt Beneficial Owners.		

III.	The Entity is a Certified Deemed Compliant Foreign Financial Institution (including a deemed compliant Financial Institution under Annex II of the IGA Agreement)	
	Indicate exemption:	
IV.	The Entity is a Non-Participating Foreign Financial Institution	
V.	The Entity is an Excepted Foreign Financial Institution Indicate exemption:	
VI.	The Entity is a Trustee Documented Trust.	
	Please provide your Trustee's name and GIIN  Trustee's Name:  Trustee's GIIN:	
the E	n-Financial Institutions ("NFFE") under FATCA:  ntity is not a Financial Institution, please confirm the Entity's FATCA classification below by ticking one ries:	of the below
the E	ntity is <b>not a Financial Institution</b> , please confirm the Entity's FATCA classification below by ticking one ries;	
he E	ntity is <b>not a Financial Institution</b> , please confirm the Entity's FATCA classification below by ticking one ries;  Active (NFFE)  Passive (NFFE)	of the below
the E	ntity is <b>not a Financial Institution</b> , please confirm the Entity's FATCA classification below by ticking one ries;  Active (NFFE)	
the E tegoi	ntity is <b>not a Financial Institution</b> , please confirm the Entity's FATCA classification below by ticking one ries;  Active (NFFE)  Passive (NFFE)  (Please tick the box that applies)	
l.	Passive (NFFE)  I. Passive (NFFE) with no Controlling Persons that are specified U.S Persons.  II. Passive (NFFE) with Controlling Persons that are specified U.S Persons. (If this box is ticked, please also complete section 6.1 for each of the Controlling Person(s) Self-certification for FATCA	

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

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

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

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

a) You are tax resident in a Jurisdiction that does not issue a TIN

Or

b) You are tax resident only in a non-reportable Jurisdiction (i.e. Ireland or the USA)

Country of Tax Residency	Tax ID Number	or C) and check box below
If a TIN is unavailable, please tick the	l e appropriate box as follows;	

<b>f a TIN is unavailable</b> , please tick the	appropriate box as follows;	
Reason A - The country/jurisdicticquivalents to its residents	ion where the Account Holder is resident doe	es not issue TINs or TIN
Reason B - The Account Holder is	s otherwise unable to obtain a TIN <i>(Please ex</i>	rplain why you are unable to obtain a TIN)
<del>_</del> ·	(Note: This should only be selected if the o	

# \*Section 5: Entity's CRS Classification

(The information provided in this section is for CRS. Please note an Entity's CRS classification may differ from its FATCA classification in Section 3 above).

In addition please note that the information that the Entity has to provide may differ depending on whether they are resident in a participating or non-participating CRS Jurisdiction.

For more information please see the OECD CRS Standard and associated commentary.

http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/

# **5.1 Financial Institutions under CRS:**

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

**Note:** Please check the Irish Revenue AEOI portal at the time of completion of this form to confirm whether your country of Tax Jurisdiction is considered Participating or Non-Participating for the purposes of CRS Due-Diligence in Ireland.

https://www.revenue.ie/en/companies-and-charities/documents/aeoi/participating-jurisdictions.pdf

I.	A Reporting Financial Institution resident in a participating CRS jurisdiction	
II.	A Financial Institution Resident in a Non-Participating Jurisdiction	
	(Please also tick the box that applies)	Ш
	An Investment Entity resident 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 <b>in section 6 below</b> and complete a separate individual self-certification forms for	
	each of your Controlling Persons)	
	_	
	An Investment Entity resident in a Non-Participating Jurisdiction that is not managed by	
	another Financial Institution	
	Other Financial Institution, including a Depository Financial Institution, Custodial	
	Institution or Specified Insurance Company	
III.	institution of Specifica insurance company	
	Non-Reporting Financial Institution under CRS.	
	Specify the type of Non-Reporting Financial Institution below:	
	Governmental Entity	
	International Organization	
	Central Bank	
	Broad Participation Retirement Fund	
	Narrow Participation Retirement Fund	
	Pension Fund of a Governmental Entity, International Organization, 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:	
	Lype provided in the domestic law.	

# **5.2 Non Financial Institution ("NFE") under CRS:**

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

l.	<b>Active NFE</b> – a corporation the stock of which is regularly traded on an established securities market.	
	Please provide the name of the established securities market on which the corporation is regularly traded:	
II.	Active NFE – 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:	
III.	Active NFE –a Government Entity or Central Bank	
IV.	Active NFE –an International Organisation	
V.	Active NFE –other than those listed in I, II, III or IV above.	
	(for example a start-up NFE or a non-profit NFE)	
VI.	Passive NFE-If this box is ticked please also complete Section 6.1 for each of the	
	Controlling Person(s) of the Entity and a separate "Individual (including Controlling Person's Self-Certification for FATCA and CRS form" as indicated in section 6.2 for each Controlling Person(s)	

#### **Section 6: Controlling Persons**

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

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

For further information on Identification requirements under CRS for Controlling Persons, see the Commentary to Section VIII of the CRS Standard.

http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/

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

If you have ticked a Passive NFE with Controlling Persons in **either the FATCA** or **CRS** Classification sections above, then please also complete this section for each of the Controlling Person(s) of the account holder and provide a separate "Individual (including Controlling Persons) FATCA and CRS Self-Certification" form for each Controlling person as per 6.2 below:

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

I.	
II.	
III.	

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

6.2 Complete a separate "Individual (including Controlling Persons) Self-Certification for FATCA and CRS" section for each Controlling Person listed in Section 6.1 of this Section 4.

\*Section 7: Declarations and Undertakings

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

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

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

*Authorised Signature(s):		
*Print Name(s):	-	
*Capacity in which declaration is made:	-	
*Date: (dd/mm/yyyy):	-	·

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

# Instructions for completion and Data Protection Notice

We are obliged under Section 891E, Section 891F and Section 891G of the Taxes Consolidation Act 1997 (as amended) and regulations made pursuant to those sections to collect certain information about each account holder's tax arrangements. Please complete the sections below as directed and provide any additional information that is requested. Please note that by completing this form you are providing personal information which may constitute personal data within the meaning of the General Data Protection Regulation (697/2016/EU) (the "GDPR") and applicable Irish data protection legislation (currently the Irish Data Protection Acts 1988 to 2003. Please note that in in certain circumstances we may be legally obliged to share this information, and other financial information with respect to an account holder's interests in the Fund, with the Irish tax authorities, the Revenue Commissioners. They may in turn exchange this information, and other financial information with foreign tax authorities, including tax authorities outside the EU.

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

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

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

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

<u>Section 1, 2, 3 and 5</u> must be completed by all Account holders or Controlling Persons.

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

(Mandatory fields are marked with an \*)

*Section 1: Account Holder/Controlling Person	n Identification
*Account Holder / Controlling Person Name: _	
*Current Residential Address:	
Number: Street:	
City, Town, State, Province or County:	Postal/ZIP Code:
Country:	
Mailing address (if different from above):	
Number: Street:	
City, Town, State, Province or County:	Postal/ZIP Code:
Country:	
*Place and Date Of Birth	
*Town or City of Rirth:	*Country of Rirth:

*Date of Birth:		

(a) •		. citizen and/or resident in the U.S. fo nber (U.S. TIN) is as follows:	r tax purposes and my U.S. federa
OR			
(b) •	I confirm that I <b>am not</b> a	U.S. citizen or resident in the U.S. for	tax purposes.
		S) Declaration of Tax Residency/Res	idencies
lease indicate	n all Tax Residencies) your country of tax residence and associated tax identification	(if resident in more than one country n numbers ("TINs")).	please detail all countries of
		Ns, please refer to the OECD CRS Info ge/crs-implementation-and-assistanc	
umbers/#d.er	n.347759		
OTE: Under t	he Irish legislation implementii	ng the CRS, provision of a Tax ID numl	per (TIN) is required to be
rovided unles	s: e tax resident in a Jurisdiction		
a) You ar b) You ar	s: e tax resident in a Jurisdiction	that does not issue a TIN, <b>Or,</b>	
a) You ar b) You ar	s: e tax resident in a Jurisdiction e tax resident only in a non-re	that does not issue a TIN, <b>Or,</b> portable Jurisdiction (i.e. Ireland or th	e USA)  If TIN unavailable Select (A, B or C) and
a) You ar b) You ar	s: e tax resident in a Jurisdiction e tax resident only in a non-re	that does not issue a TIN, <b>Or,</b> portable Jurisdiction (i.e. Ireland or th	e USA)  If TIN unavailable Select (A, B or C) and
a) You ar b) You ar Country of 1	s: e tax resident in a Jurisdiction e tax resident only in a non-re	that does not issue a TIN, <b>Or</b> , portable Jurisdiction (i.e. Ireland or th  Tax ID Number	e USA)  If TIN unavailable Select (A, B or C) and
a) You ar b) You ar Country of T	e tax resident in a Jurisdiction e tax resident only in a non-rep  Fax Residency  railable, please tick the approp	that does not issue a TIN, <b>Or</b> , portable Jurisdiction (i.e. Ireland or th  Tax ID Number	e USA)  If TIN unavailable Select (A, B or C) and check box below
a) You ar b) You ar Country of T  Fa TIN is unav Reason A INs or TIN equ	railable, please tick the approp  The country/jurisdiction whe aivalents to its residents  The Account Holder is others	that does not issue a TIN, <b>Or</b> , portable Jurisdiction (i.e. Ireland or th  Tax ID Number  riate box as follows;	e USA)  If TIN unavailable Select (A, B or C) and check box below  es not issue
a) You ar b) You ar Country of T  Fa TIN is unav Reason A INs or TIN equ Reason B o obtain a TIN Reason C-	railable, please tick the approp The country/jurisdiction whe vivalents to its residents The Account Holder is others No TIN is required. (Note: Thi	that does not issue a TIN, <b>Or</b> , cortable Jurisdiction (i.e. Ireland or the  Tax ID Number  riate box as follows; ere the Account Holder is resident do	e USA)  If TIN unavailable Select (A, B or C) and check box below  es not issue  splain why you are unable stic law of the relevant

# Section 4 – Type of Controlling Person

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

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

Please Confirm the type of Controlling Person applicable under CRS that applies to you/the Account holder by ticking the appropriate box	Please Tick	Entity Name
Controlling Person of a legal person – control by ownership		
Controlling Person of a legal person – control by other means		
Controlling Person of a legal person – senior managing official		
Controlling Person of a trust – settlor		
Controlling Person of a trust – trustee		
Controlling Person of a trust – protector		
Controlling Person of a trust – beneficiary		
Controlling Person of a trust – other		
Controlling Person of a legal arrangement (non-trust) – settlor-equivalent		
Controlling Person of a legal arrangement (non-trust) – trustee-equivalent		
Controlling Person of a legal arrangement (non-trust) – proctector- equivalent		
Controlling Person of a legal arrangement (non-trust) – beneficiary equivalent		
Controlling Person of a legal arrangement (non-trust) – other-equivalent		

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

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

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

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

#### **Data Protection - Customer Information Notice:**

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

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

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

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

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

*Authorised Signature:		
*Print Name:		
*Date: (dd/mm/yyyy):		
	*Capacity (if Controlling Person):	

#### Tax Residency

Council Directive 2003/48/EC of 3 June 2003 (the "EU Savings Directive"), which deals with the taxation of savings income in the form of interest payments, seeks to ensure that an individual who is resident in a member state of the European Union (an "EU Member State") and who receives savings income from another EU Member State<sup>1</sup>, is taxed in the EU Member State in which he/she is resident for tax purposes. In this regard the Fund is obliged to establish the identity and residence of such individuals.

#### For completion by Applicants who are tax resident outside the EU Member States:

The Applicant confirms by ticking the box that the Applicant is not resident in an EU Member State and has not verified its identity for the purposes of the Fund money laundering verification requirements by use of an EU passport/official identity E

Applicants who are tax resident in the EU Member States should complete either Section (1) or Section (2) below:

Section 1: This Section 1 is to be completed by an Applicant resident in an EU Member State who is not a natural person (i.e. not an individual, unincorporated body, unincorporated partnership, or any of the foregoing acting as trustee of a trust):

a.Is Applicant a legal person, e.g., an incorporated entity? YES  $\to$  or NO  $\to$ 

b.Are Applicant's profits taxed under general arrangements for business taxation? YES E or NO E

c. (i) Is Applicant a UCITS or (ii) has Applicant been issued a certificate by Applicant's EU Member State allowing Applicant to be treated as a UCITS for the purposes of the EU Savings Directive?

#### YES E or NO E

**Section 2:** This Section 2 is to be completed by natural person Applicants (i.e. an individual, an unincorporated body, an unincorporated partnership, or any of the foregoing acting as a trustee of a trust) residing in an EU Member State or who, in completing the Trust's money laundering verification requirements, have verified his/her identity by use of an EU Member State passport/official identity:

a. Specify the EU Member State in which Applicant is tax resident:

Please insert the Tax Identification Number ("TIN") issued to Applicant by that EU Member State:

b.Is Applicant's EU passport or official identity issued by the same EU Member State that appears in Applicant's address in section 1? YES E or NO E

- c. Applicant's date, place, and country of birth:
- If Applicant answered YES to Section 1(c)(ii) above, Applicant must provide a certified copy of the certificate.
- If Applicant answered NO to Section 2(b) above, then Applicant must provide a "certificate of residence for tax" issued by Applicant's local taxation authority, otherwise Applicant's EU residency will be decided and reported upon the basis of information contained in Applicant's passport/official identity card and/or other documentation provided for the purposes of satisfying the ICAV's money laundering verification requirements.

Also applicable to residents of Switzerland, Andorra, Liechtenstein, Monaco, San Marino, Jersey, Guernsey, Isle of Man, Anguilla, Montserrat, British Virgin Islands, Turks and Caicos Islands, Cayman Islands, Netherlands Antilles, and Aruba. Accordingly any reference to EU Member State should be deemed to include these additional countries.

# **Excepted & Non Excepted Shareholders**

Pursuant to the Return of Values (Investment Undertakings) Regulations 2013 (S.I. 245 of 2013) (the "Regulations"), the ICAV is required to collect certain information from non-Excepted Share Holders. All Applicants, whether individuals, bodies corporate or unincorporated bodies of persons, which are Irish resident or ordinarily resident should review the list of Excepted Share Holders set out below.

If the Applicant is an Irish resident or non-Irish resident and is not an Excepted Share Holder, please provide the following information and documentations:

Tax Identification Number (TIN) / PPS Number:

Excepted Share Holders		
Share Holders	TCA 1997 reference	
An investment undertaking	739D(6)(c)	
An investment limited partnership	739D(6)(cc)	
A pension scheme which is an exempt approved scheme	739D(6)a)	
A company carrying on a life assurance business	739D(6)(b)	
A special investment scheme	739D(6)(d)	
A unit trust to which section 731(5) applies	739D(6)(e)	
A charity	739D(6)(f)(i)	
ARFs, AMRFs	739D(6)(h)	
A qualifying fund manager	739D(6)(g)	
A qualifying savings manager	739D(6)(g)	
PRSA providers	739D(6)(i)	
The National Pensions Reserve Fund	739D(6)(I)	
The National Asset Management Agency	739D(6)(ka)	
A Section 110 Company	739D(6)m)	
A Credit Union	739D(6)(j)	
An Irish resident company but only where the Fund is a money market fund	739D(6)(k)	
A non-Irish resident unit holder in respect of whom the Fund has obtained a completed non-	739D(7)	
resident declaration or where the Fund has adopted the Equivalent Measures Regime	739D(7B)	
A unit holder who holds their units in a recognised clearing system	739B	

# **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 benefit of, a US Person, nor do I/we intend to transfer any Shares which I/we may purchase to any US Person
O R
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) □
Personal Portfolio Investment Undertaking (PPIU)
I/We* confirm that I am/we* are an Irish Resident or Irish Ordinary Resident who is a director or has a relationship with a director of the fund: <b>YES</b> □ <b>NO</b> □
Please enter name(s) of PPIU

(\*Delete as appropriate)

#### SECTION 6 - AML TO BE COMPLETED BY ALL INVESTORS

#### **AML Documentation Requirement**

#### Anti-money laundering - Know your customer requirements

Under Irish legislation and supplemental guidance covering anti-money laundering and the taxation of savings the ICAV and the Administrator are required to obtain the documentation set out at Appendix III to verify the identity of all new applicants. This documentation should be provided with the subscription agreement. The documentation listed may not cover all applications and the ICAV and the Administrator reserve the right to request additional documentation if required.

Should documents be provided in a language other than English, an English translation may be required.

In any event, redemption and dividend payments will not be processed until full anti-money laundering documentation has been received on the account and the ICAV and the Administrator reserve the right to take further action where full anti-money laundering documentation has not been received.

Please note that the Administrator can only accept application forms from an entity that has legal capacity to enter into contracts on its own right and may require the constitutive document to legitimate legal status.

The Administrator employs a risk based approach to anti money laundering ("AML"). This entails looking at various risk factors such as geographic risk, customer risk and Politically Exposed Person ("PEP") association among other factors. There are 3 different approaches that can be taken as a result of the risk assessment, these are Simplified Customer Due Diligence (SCDD), Standard Customer Due Diligence (SDD) or Enhanced Customer Due Diligence (ECDD).

#### Simplified Customer Due Diligence ("SCDD")

SCDD can be applied in instances where the jurisdiction involved and customer type is deemed lower risk from a Money Laundering and Terrorist Financing perspective. Where SCDD is applied the emphasis is more on independent verification.

Examples of where SCDD can be applied are:

- A credit or financial institution that carries out business in an EU Member State or in a
  jurisdiction, which operates comparable AML/CTF, controls
- 2. A company listed on a regulated market in a prescribed country.

# Standard Customer Due Diligence ("SDD")

SDD will be applied where the customer/entity investing is located in a jurisdiction deemed to have equivalent levels of AML/CTF controls as Ireland. Additionally the entity type, as a result of our risk assessment, is not deemed to be higher risk, however information on the beneficial owners and controllers is not publicly available and therefore information is required from the Investor.

#### Enhanced Customer Due Diligence ("ECDD")

ECDD is applied on a risk sensitive basis in any situation, which by its nature would present a higher risk of money laundering or terrorist financing. Typically ECDD will be applied to investors located in higher risk jurisdiction, with a complex legal structure or where the registered shareholder or ultimate beneficial owner of the registered shareholder has been identified as a Politically Exposed Person ("PEP").

Please note the above is a guideline and SEI reserve the right to apply ECDD to any Investor where it deems the situation warrants the approach or may request further information as it deems necessary as part of its AML verification process.

Please see the below table detailing what is typically requested for the most common entity types under standard and enhanced due diligence.

Entity Type	AML Documents Required* -	AML Documents Required* -
	Standard	Enhanced
Individual	- Copy 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  - Two certified proofs of residential address verification  - For PEP Investors a source of wealth confirmation will also be required
Joint Account	- As per the above for each account holder	- As per the above for each account holder
Designated Person (wholly owned subsidiary)	- Proof of Regulation  - Letter of representation  - Original Authorised Signatory List ("ASL") including specimen signatures  - Copy of Certificate of Incorporation or	All documents required under standard
Corporation	equivalent constituting document  - Identify Directors  - Identify ultimate beneficial owners holding 25% or more of the share, profit or voting rights  - Verify identity of two Directors or one Director and one authorised signatory  - Original ASL including specimen signatures	<ul> <li>All documents required under standard</li> <li>Constituting document to be certified</li> <li>e.g. Certificate of Incorporation</li> <li>Certified Memorandum and Arts or Association or equivalent</li> <li>Verify identity of all ultimate beneficial owners holding 25% or more of the share, profit or voting rights</li> <li>For PEP Investors a Source of Wealth</li> </ul>
Trust	- Copy of Trust Deed - Identify all Trustees - Verify identity of two Trustees or one Trustee and one authorised signatory - Identify Settlor(s)/Donor - Identify all ultimate beneficial owners holding 25% or more of the trust assets - Original ASL including Specimen Signatures	confirmation will also be required  - All documents required under standard  - Certified copy of Trust Deed  - Verify identity of Settlor(s)/Donor  - Verify identity of all beneficiaries entitled to more than 25% of the trust assets  - For PEP Investors a Source of Wealth confirmation will also be required
Partnership	- Copy Partnership Agreement  - Identify all Partners including percentage holdings  - Verify identity of general partner  - Original ASL including specimen signatures	- All documents required under standard - Certified copy of Partnership Agreement  - Verify identity of all Partners holding 25% of the capital  - For PEP Investors a Source of Wealth confirmation will also be required

<sup>\*</sup> Subject to change in line with Irish regulatory requirements and relevant guidelines.

<sup>\*\*</sup> Document must have signature, must be in date and have clear photo.

<sup>\*\*\*</sup> Document must be recent (under 6 months old), must match application form and must not be a c/o or PO Box Address.

Entity Type	AML Documents Required* -	AML Documents Required* -
7.7	Standard	Enhanced
	- Copy Certificate of Formation or	- All documents required under standard
	equivalent - Identify Managing Members - Verify identity of two Managing Members or one	- Certified copy of Certificate of Formation or equivalent
Limited Liability Company ("LLC")	Managing Member and one authorised signatory  - Identify all members holding 25% or more of the share capital  - Original ASL including Specimen Signatures	- Certified copy of Operating Agreement or equivalent  - Verify the identity of all members beneficially entitled to more than 25% of the entity's share capital  - For PEP Investors a Source of Wealth confirmation will also be required
USA Individual Retirement Account ("IRA")	- Identify individual in line with individual requirements as noted above  - Proof of regulation for Custodian of the IRA  - Original ASL including specimen signatures where applicable	
	- Copy of the Offering Memorandum / Prospectus or equivalent	- Certified copy of the Offering Memorandum / Prospectus or equivalent
Fund	<ul> <li>Name and Address of Fund's Promoter and Administrator</li> </ul>	- Certified copy of Certificate of Incorporation or equivalent
	- Proof of regulation for entity conducting AML checks on the fund investors	- Verify the identity of all investors who own more than 25% of the share capital
	- Identify all investors who own more than 25% of the shares / units of the fund	- For PEP Investors a Source of Wealth confirmation will also be required
	- Original ASL including specimen signatures	
	- Copy of the Formation document of pension plan	- All documents required under standard
	- Identify Trustees / Directors / Governors / Board Members or equivalent	- Certified copy of the Formation Document of the pension plan
	- Verify identity of two of the above noted in point 2 as applicable	- Verify identity of plan administrator <b>And / or</b>
Pension Plan	- Original ASL including Specimen Signatures	- Confirmation from plan administrator that AML checks are conducted at appropriate level And / or
		- Certified copy of the most recent Audited Financial Statements
		- For PEP Investors a Source of Wealth confirmation will also be required
	- Copy of constitutional document where feasible	- All documents required under standard
Schools sollages	- Verify identity independently	- Certified copy of constitutional document where feasible
Schools, colleges or universities	- Identify main officials - Verify the identity of two officials	- Verify identity of individuals who
	- Determine ownership of entity	own or control over 25% of the entity's share capital
	- Original ASL including Specimen Signatures	- For PEP Investors a Source of Wealth confirmation will also be required

Entity Type	AML Documents Required* -	AML Documents Required* -
	Standard	Enhanced
	- Name of the home state authority and nature of its relationship with the public body	- All documents required under standard - Verify identity of two officials <b>And / or</b>
Public Body	- Details of the ownership of the entity	- Verify identity of all persons who own control over 25% of capital
,	- Identify the main public body officials	- Certified copy of the most recent Audited
	- Identify all persons who own or control more 25% of the capital	- For PEP Investors a Source of Wealth
	- Independent research of entity	confirmation will also be required
	- Original ASL including Specimen Signatures	
Charity	- Independent verification of the charity as an approved body e.g. for US Charities confirmation of 501(c) status via Guidestar Or all points below  - Nature / purpose including nature of the funding  - Identity Trustees / Directors / Governors / Board Members or equivalent  - Verify identify two of the above noted in point 3 as applicable  - Identify beneficiaries where ascertainable  - Copy of Constitutional / Formation document  - Original ASL including Specimen Signatures	- All documents required under standard except point 1 - Certified copy of Constitutional / Formation document - Certified copy of the most recent Audited Financial Statements - For PEP Investors a Source of Wealth confirmation will also be required

<sup>\*</sup> Subject to change in line with Irish regulatory requirements and relevant guidelines.

<sup>\*\*</sup> Document must have signature, must be in date and have clear photo.

<sup>\*\*\*</sup> Document must be recent (under 6 months old), must match application form and must not be a c/o or PO Box Address.

# **Anti-Money Laundering Information**

# Controller Detail

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

Name	Residential Address	Date of Birth	Occupation

# Ultimate Beneficial Owner Detail 1

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

Name	Residential Address	Date of Birth	Occupation	PEP Y/N <sup>2</sup>

<sup>&</sup>lt;sup>1</sup> **Ultimate Beneficial Owner** - Where no beneficial ownership information is provided, it will be assumed no beneficiary holds 25% or more of the assets of the entity.

<sup>&</sup>lt;sup>2</sup> **Politically Exposed Person** - Is the ultimate beneficial owner a senior government, political or military official, or an immediate family member or close associate of such a person?

PEP Section
<u>FET SCCION</u>
From above, where there is PEP associated with this account, please provide the following two confirmations:
Source of Wealth
Please insert below the details of the individual PEP's Source of Wealth, being confirmation of the economic activity which has generated the net worth of the individual
Source of Funds
Please insert below details of the origin of the particular funds which are the subject of this investment and how they were acquired

# SECTION 7 - DECLARATIONS AND SIGNATURES TO BE COMPLETED BY ALL INVESTORS

#### **DECLARATIONS AND SIGNATURES**

By signing this Application Form, I/we\* acknowledge that I/we\* 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, hereby confirm that this application is based solely on the current Prospectus and the material contracts therein referred to together (where applicable) with the most recent annual report or semi-annual report and accounts of the ICAV.

I/ We 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/us in written form or by electronic means. I/ We 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/our failure to remit the amount of my subscription by the due date or my/our failure to comply with the terms of this Subscription Agreement or them acting upon instructions given in written form by me/us. The Administrator and the ICAV may rely conclusively upon, and shall incur no liability in respect of, any action taken upon any notice, consent, request, instruction or other instrument believed in good faith to be genuine or to be signed by properly authorised persons.

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

(In respect of joint shareholdings only) We direct that on the death of one of us, the Shares for which we hereby apply be held in the name of and to the order of the survivor(s) of us or the executor or administrator of such survivor(s).

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/we 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 being a person they I am/ We are over 18 years of age.

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

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

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

I/ We have consulted to the extent I/we have determined appropriate with my/our 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/us.

Immediately prior to the execution of this Subscription Agreement:

- (a) I/ We 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/ We and any account for which I/we 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.

I/ We undertake to supply to the ICAV with;

- (a) such forms, documentation and other information relating to its status under FATCA as the ICAV may reasonably request for the purposes of the ICAV's compliance with FATCA, including the applicable FATCA self-certifications at Appendices I and II to this Subscription Agreement; and
- (b) 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.

I/ We acknowledge that, depending on my/our status under FATCA, the ICAV may report information in relation to the me/us and my/our Shares to the Irish Revenue Commissioners and that any information reported by the ICAV to the Irish Revenue Commissioners may be communicated to the US Internal Revenue Service pursuant to Ireland's intergovernmental agreement with the United States of America in relation to FATCA. I/ We also acknowledge that it is possible that the Irish Revenue Commissioners may also exchange such information with other tax authorities pursuant to the terms of any applicable double tax treaty, intergovernmental agreement or exchange of information regime.

#### Applicants resident outside of the Republic of Ireland

Applicants resident outside the Republic of Ireland are required by the Irish Revenue Commissioners to make the following declaration which is in a format authorised by them, in order to receive payment without deduction of tax. It is important to note that this declaration, if it is then still correct, shall apply in respect of any subsequent acquisitions of Shares.

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

#### A - Declaration on Own Behalf $\boldsymbol{E}$

i. I/ We\* declare that I am/we\* are applying for the Units on my own/our own behalf/on behalf of a company\* and that I am/we are/the company\* is entitled to the Units in respect of which this declaration is made and that I am/we are/the company\* is not currently an Irish Resident or Irish Ordinary Resident, and should I/we/the company\* become an Irish Resident, I/we will so inform you, in writing, accordingly.

\*Delete as appropriate

#### B - Declaration as Intermediary $\boldsymbol{\Xi}$

- i. I/ We\* declare that I am/we are\* applying for Units on behalf of persons who will be beneficially entitled to the Units, and who to the best of my/our\* knowledge and belief, are neither an Irish Resident or Irish Ordinary Resident, and
- ii. I/ We\* also declare that unless I/we\* specifically notify you to the contrary at the time of application, all applications for Units made by me/us\* from the date of this application will be made on behalf of such persons; and I/we\* will inform you in writing if I/we\* become aware that any person, on whose behalf I/we\* hold Units, becomes an Irish Resident.

\*Delete as appropriate

# **Authorisation**

I/We agree to be bound by the De	clarations, Representations, Consents and Indemnities set out in this Application Form
Signature (1)	
Capacity of Authorised Signatory	
Name Authorised Signatory (1)	
Is Signatory a resident or citizen of th	e US: Yes $\to$ / No $\to$ (select appropriate)
Signature (2)	
Capacity of Authorised Signatory	
Name Authorised Signatory (2)	
Is Signatory a resident or citizen of th	e US: <b>Yes</b> $\to$ / <b>No</b> $\to$ (select appropriate)

Signature (3)	
Capacity of Authorised Signatory	
Name Authorised Signatory (3)	
Is Signatory a resident or citizen of the	US: <b>Yes</b> □ <b>/ No</b> □ (select appropriate)
Signature (4)	
Capacity of Authorised Signatory	
Name Authorised Signatory (4)	
Is Signatory a resident or citizen of the	US: <b>Yes</b> □ / <b>No</b> □ (select appropriate)
Date	
·	

# **Important Information**

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

To be valid, this Subscription Agreement (incorporating the declaration required by the Irish Revenue Commissioners) must be signed by the applicant and in the case of joint applicants, each must sign. In the case of a corporation, the application must be signed by authorised signatories as agreed in the corporate signing mandate.

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

Applicants who are resident or ordinarily resident in the Republic of Ireland or are an Exempt Irish resident as defined in the Prospectus, please contact the Administrator immediately.

#### **SECTION 8 - 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 <a href="mailto:dmsnotices@dmsgovernance.com">dmsnotices@dmsgovernance.com</a>.

#### 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, 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 anti-money 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;
- 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 interests or 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:
  - 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;
  - $\circ$  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.

<sup>&</sup>lt;sup>1</sup> Legitimate Interest – as defined under GDPR.

#### 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

#### 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 Commission;
- (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.

#### 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.

#### 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 withdrawa