## **APPLICATION AND ACCOUNT OPENING FORM**

The undersigned herewith applies to open a register account for the maintenance of a participation in LFPARTNERS INVESTMENT FUNDS (hereinafter the "Fund").

Please complete all the sections of this form READABLE and in BLOCK CAPITALS and return the ORIGINAL duly signed and dated together with the relevant documentation to the Registrar of the Fund (the "Registrar"):

> **RBC Investor Services Bank S.A.** Attn. SHS Register, 14, Porte de France L-4360 Esch-sur-Alzette, G.D. Luxembourg Tel: +352 2605 9730 / Fax: +352 2460 9500

Please note that any modification, change or deletion within this form, non-delivery or non-accurate delivery of requested information may delay or even hinder the account opening process. Please contact the Registrar in case of questions and before making such changes.

1. PRIVATE INVESTOR INFORMATION						
1.1. Account Hol	1.1. Account Holder <sup>1</sup>					
1.1.1. Acco	ount Holder 1					
	se tick the right choice)					
Surname(s)		First Name				
Date of birth (DD/MM/YYYY) / /	Place & Country of birth	Occupation:	Nationality			
Passport / ID Number: (circle the right choice)	Issuing Country:	Expiration Date (DD/MM/YYYY) / /	Double Nationality:  Never Renounced Yes, which:			
Registered Address* Street Number:	Registered Address Town/Village:	Registered Address Post Code:	Registered Address Country:			
Mailing Address if different from above Street Number	Mailing Address Town/Village:	Mailing Address Post Code:	Mailing Address Country:			
Telephone:	Fax:	E-Mail:	Mobile-Phone:			
	'	<u> </u>				
1.1.2. Acco	ount Holder 2 (please refe	r to clause 3 of the General Terms	and Conditions)			
☐ Mr ☐ Mrs ☐ Ms (pleas	se tick the right choice)	☐ Joint account ☐ Common	account (please tick the right choice) <sup>2</sup>			
Surname(s)		First Name				
Date of birth (DD/MM/YYYY) / /	Place & Country of birth	Occupation:	Nationality			
Passport / ID Number: (circle the right choice)	Issuing Country:	Expiration Date (DD/MM/YYYY) / /	Double Nationality:  Never Renounced Yes, which:			
Registered Address* Street Number:	Registered Address Town/Village:	Registered Address Post Code:	Registered Address Country:			
Mailing Address if different from above Street Number	Mailing Address Town/Village:	Mailing Address Post Code:	Mailing Address Country:			
Telephone:	Fax:	E-Mail:	Mobile-Phone:			

<sup>\*</sup> P.O. Box and "in care of" addresses are not valid registered address. These are acceptable for mailing purposes.

<sup>1</sup> If further account holder declarations are required to be registered, please use the form available as appendix 2 as many times as required.
2 Please note that in the case of a joint account, all applicants will be considered as joint account holders, but each joint account holder has an individual signatory

power to engage the account on behalf of all; in the case of a common account, signatures of all account holders are required

1.2.1. Mino	r Account Holder		
☐ Mr ☐ Mrs ☐ Ms (please	e tick the right choice)		
Surname(s)		First Name	
Date of birth (DD/MM/YYYY) / /	Place & Country of birth	Occupation:	Nationality
Passport / ID Number: (circle the right choice)	Issuing Country:	Expiration Date (DD/MM/YYYY) / /	Double Nationality:  Never Renounced Yes, which:
Registered Address* Street Number:	Registered Address Town/Village:	Registered Address Post Code:	Registered Address Country:
Mailing Address if different from above Street Number	Mailing Address Town/Village:	Mailing Address Post Code:	Mailing Address Country:
Telephone:	Fax:	E-Mail:	Mobile-Phone:
	l Guardian		
	e tick the right choice)	T =	
Surname(s)		First Name	
Date of birth (DD/MM/YYYY) / /	Place & Country of birth	Occupation:	Nationality
Passport / ID Number: (circle the right choice)	Issuing Country:	Expiration Date (DD/MM/YYYY) / /	Double Nationality:  Never Renounced Yes, which:
Registered Address* Street Number:	Registered Address Town/Village:	Registered Address Post Code:	Registered Address Country:
Mailing Address if different from above Street Number	Mailing Address Town/Village:	Mailing Address Post Code:	Mailing Address Country:
Telephone:	Fax:	E-Mail: @	Mobile-Phone:

Please proceed to section 4

1.2. Minor Account Holder

(please refer to clause 5 of the General Terms and Conditions)

st P.O. Box and "in care of" addresses are not valid registered address. These are acceptable for mailing purposes.

# 2. CORPORATE INVESTOR INFORMATION (including INTERMEDIARY acting in its own name on behalf of third parties)

Other Financial Institution  Fo			☐ Investment/Mutual Fund ☐ Partnership		
Company Name:		Parent company/Head office:			
Date of Incorporation (DD/MM/YYYY)	Country of Incorporation	Company Register and number:			
Registered Address* Street Number:	Registered Address Town/Village:	Registered Address Post Code:	Registered Address Country:		
Mailing Address if different from above Street Number	Mailing Address Town/Village:	Mailing Address Post Code:	Mailing Address Country:		
Area of activity:	Stock exchange listing:  No Yes:	Regulated Entity: ☐ No	License number:		
	Listing Code:	Yes Regulator:	Regulator web-address:		
Telephone:	Fax:	E-Mail:	Mobile-Phone:		
Contact name 1:	Contact name 2:	@ Contact name 3:	Contact name 4:		
	<ul> <li>P.O. Box and "in care of" addresses are not valid registered address. These are acceptable for mailing purposes.</li> </ul> Please proceed to section 3.				
3. TYPE OF INVESTMENT					
I/we confirm that the investment into the Fund:					
$\square$ Is made on my/our own behalf a	nd is not in favour of a third party				
Please proceed to section 4.					
☐ Is made on behalf of third party and that the account will reflect: ☐ a Pooled Account (reflecting a pool of underlying clients typically with a generic designation such as "Clients account" or with a designation that makes reference to a region, product or multiple specific customers)					
☐ a Segregated Account (a specific account for a single underlying third party)					
In such case, please selec	In such case, please select either one option below:				
☐ the designation of the account will refer to the underlying client name					
	the designation of the account is coded (the designation contains an internal reference, numbers or combination of letters which do not allow an external party to identify the underlying client)				

3.1. Inte	ermediary (acting in	its own name) Mi	FID Categorisation	
Please indicate the MIFID category under which you deal with the underlying investor(s) for this account. Please note that if you fail to indicate the category, the underlying investor(s) will be classified as Retail Client. Please note that the information provided is subject to clause 6 of the General Terms and Conditions.				
☐ Reta	ail Client	☐ Professional Client	☐ Eligible Counterparty	
3.2. Inte	ermediary (acting in	its own name)Typ	pe of business	
types of transactions		two different accounts need	nly" business. Per account only one type is possible. If both I to be opened. Please note that the information provided is	
	☐ Advised business		☐ Execution-only business	
If you have sele	cated a Segregated Accouncted Pooled Account, plea	ase complete section 3	3.3 below.	
3.3. Inte	ermediary (acting in	its own name) Po	oled accounts	
			rules, etc.). Please indicate whether the account is used for rovided is subject to clause 6 of the General Terms and	
☐ UK Retail busines	ss (RDR)			
☐ Jersey Retail busi	iness (RFA)			

Please proceed to section 3.4

## 3.4. Intermediary (acting in its own name) declarations

If the intermediary (hereinafter "Intermediary") provides the below confirmations and is a financial institution regulated in an equivalent country (as per the country classification applied by the Fund, the Company, the Registrar or any other agent used by them for this purpose) or has a parent company (who owns more than 50% of its capital) that is a financial institution regulated in an equivalent country which controls the application of its home AML/KYC laws in its branches and subsidiaries, then the Intermediary may register the shares or units in its own name on behalf of its underlying clients.

The intermediary confirms that:

- 3.4.1. it has based on the regulation applicable in its country of incorporation appropriate means and internal procedures to prevent and avoid the utilization of the Fund for the purposes of money laundering (i.e. any activity involving the investment, concealment or conversion of the direct or indirect proceeds of criminal activities as listed in Luxembourg laws and regulations) or terrorism financing, and to detect and intercept money laundering channels or chains.
- it substantiates, on the basis of probative of official 3.4.2. documents, the true identity of
  - 3.4.2.1. all its clients, both regular and occasional, including investors into funds for which it acts as intermediary, and
  - where its clients are not acting on their own 3.4.2.2. behalf, of final economic beneficiaries (i.e. ultimate beneficial owners) and authorized representatives of the clients hereinafter collectively referred to as the "Client".
- 3.4.3. It retains related Client identification documentation for a period of at least 10 (ten) years during the relationship and at least (5) five years after the end of its relationship with the Client.
- 3.4.4. In case of segregated account for which the designation refers to the underlying investor name, when required by the Fund, the Company, the Registrar or any other competent body or authority, Client identification documents shall be immediately made available to the requesting entity.
- 3.4.5. Its procedures for the prevention of money laundering and terrorist financing include the monitoring of Client transactions, including, but not limited to, the monitoring of the source and destination of funds, the review of the purpose and object of the transaction, and, with a riskbased approach, applying enhanced checking procedures to transactions which it identifies as unusual in their size,
- It is aware of the terms and information contained in the prospectus, the articles of incorporation and the key

- investor information document of the Fund and shall observe them. In particular it shall not allow the purchase or holding of shares of the Fund or any of its sub-funds by persons not authorized to purchase or hold them under the provisions of the prospectus.
- 3.4.7. It will make available to its Client that are investors of the Fund all information and notice received from or issued by the Fund, the Company or any of their agents and intended to be provided to the beneficiaries.
- 3.4.8. It shall not advertise for Clients, solicit Clients, or sell any of the shares of the Fund or its sub-funds, unless it may do so in compliance with the laws and regulation applicable in Luxembourg or in other country where such advertising, solicitation, offer or sale takes place.
- 3.4.9. It is aware of the UN EU, OFAC, CSSF, Egypt Asset Freeze watch lists contained in regulations concerning identification and declaration of business relations with suspected terrorist groups, persons or entities, or country subject to embargo, and has checked and will monitor that none of Clients does appear on such list.
- 3.4.10. Its officers, employees and all agents used by it comply strictly with all related procedures and controls in place.
- 3.4.11. It hereby certifies that it
  - 3.4.11.1. is not a shell bank within the meaning given to these terms under U.S. Patriot Act: Uniting and Strengthening America by Providing Appropriate Tools Required to Intercept and Obstruct Terrorism Act) or any other similar legislation
  - 3.4.11.2. does not accept shell banks as a Client.
- 3.4.12. It is complying with FATCA regulation applicable in its country of incorporation and in particular it has appropriate means and internal procedures to identify and classify its clients according to applicable FATCA regulation.
- 3.4.13. It has taken knowledge of the applicable General Terms and Conditions and explicitly agrees to clause

Date and place of signature

Fund on behalf of its underlying clients. The Intermediary commits to inform the Fund, the Company and the Registrar if the Intermediary ceases to be regulated or if its license is altered and does not qualify the Intermediary anymore to act in its own name on behalf of third party. Signature of Intermediary representative 1 Name: Title: Signature of Intermediary representative 2 Intermediary stamp Name: Title:

This confirmations shall be deemed reiterated at the time of any order placed and shall continue throughout the period of its holdings in the

### 4. INTERMEDIARY INFORMATION

(If none, please proceed to section 5)

The intermediary is the financial company to which the investor submits his application form and who will forward this application form to the Fund, the Company, the Registrar or any other agent used by them. The intermediary will carry out the KYC on the Account Holder. Provided the regulatory criteria are met, it may be acting as third party introducer on which reliance is placed for the Customer Due Diligence and will retain the related identification documentation.

A requirement is that the intermediary is also transmitting transaction orders to the Fund, the Company, the Registrar or any other agent used by them on behalf of the Account Holder.

4.1. Intermedial	y uetalis		_	
☐ Bank ☐ No	ominee	stitution	Insurance Company	
☐ Other (please specify):				
Company Name:		Parent company/Head office	::	
Date of Incorporation (DD/MM/YYYY)	Country of Incorporation	Company Register and num	ber:	
, ,				
Registered Address* Street Number:	Registered Address Town/Village:	Registered Address Post Code:	Registered Address Country:	
Mailing Address if different from above Street Number	Mailing Address Town/Village:	Mailing Address Post Code:	Mailing Address Country:	
Area of activity:	Stock exchange listing: ☐ No	Regulated Entity:	License number:	
	□ Yes:	☐ Yes		
	Listing Code:	Regulator:	Regulator web-address:	
		5.44.11	M L II DI	
Telephone:	Fax:	E-Mail: @	Mobile-Phone:	
Contact name 1:	Contact name 2:	Contact name 3:	Contact name 4:	
* P.O. Box and "in care of" addresses are not valid registered address. These are acceptable for mailing purposes.  4.2. Intermediary MIFID Categorisation				
Please indicate the MIFID category under which you deal with the Account Holder for this account. Please note that if you fail to indicate the category, the Account Holder will be classified as Retail Client. Please note that the information provided is subject to clause 6 of the General Terms and Conditions.				
☐ Retail Client	☐ Professional (	Client	☐ Eligible Counterparty	
4.3. Intermediary Type of business				
Please indicate whether the account is used to transact "advised" or "execution-only" business. Per account only one type is possible. If both types of transactions are used, please be advised that two different accounts need to be opened. Please note that the information provided is subject to clause 6 of the General Terms and Conditions.				
	Advised business	☐ Execution-only bu	usiness	

## 4.4. Intermediary declarations

If the intermediary (hereinafter "Intermediary") provides the below confirmations <u>and</u> is a financial institution regulated in an equivalent country (as per the country classification applied by the Fund, the Company, the Registrar or any other agent used by them for this purpose) or has a parent company (who owns more than 50% of its capital) that is a financial institution regulated in an equivalent country which controls the application of its home AML/KYC laws in its branches and subsidiaries, then the Intermediary may obtain a waiver of the full and detailed identification procedure to be applied. In other cases, the Intermediary must provide the full identification documentation relating to the Account Holder and/or the Ultimate Beneficial Owner (as the case may be) as per applicable laws and regulations or defined by any other competent body or authority in the Grand Duchy of Luxembourg.

The intermediary confirms that:

- 4.4.1. it has based on the regulation applicable in its country of incorporation appropriate means and internal procedures to prevent and avoid the utilization of the Fund for the purposes of money laundering (i.e. any activity involving the investment, concealment or conversion of the direct or indirect proceeds of criminal activities as listed in Luxembourg laws and regulations) or terrorism financing, and to detect and intercept money laundering channels or chains.
- 4.4.2. it substantiates, on the basis of probative of official documents, the true identity of
  - 4.4.2.1. all its clients, both regular and occasional, including investors into funds for which it acts as intermediary, and
  - 4.4.2.2. where its clients are not acting on their own behalf, of final economic beneficiaries (i.e. ultimate beneficial owners) and authorized representatives of the clients hereinafter collectively referred to as the "Client".
- 4.4.3. It retains related Client identification documentation for a period of at least 10 (ten) years during the relationship and at least (5) five years after the end of its relationship with the Client.
- 4.4.4. When required by the Fund, the Company, the Registrar or any other competent body or authority, Client identification documents shall be <u>immediately</u> made available to the requesting entity.
- 4.4.5. Its procedures for the prevention of money laundering and terrorist financing include the monitoring of Client transactions, including, but not limited to, the monitoring of the source and destination of funds, the review of the purpose and object of the transaction, and, with a risk-based approach, applying enhanced checking procedures to transactions which it identifies as unusual in their size, conditions or nature.
- 4.4.6. It is aware of the terms and information contained in the prospectus, the articles of incorporation and the key investor information document of the Fund and shall

Title:

- observe them. In particular it shall not allow the purchase or holding of shares of the Fund or any of its sub-funds by persons not authorized to purchase or hold them under the provisions of the prospectus.
- 4.4.7. It will make available to its Client that are investors of the Fund all information and notice received from or issued by the Fund, the Company or any of their agents and intended to be provided to the beneficiaries.
- 4.4.8. It shall not advertise for Clients, solicit Clients, or sell any of the shares of the Fund or its sub-funds, unless it may do so in compliance with the laws and regulation applicable in Luxembourg or in other country where such advertising, solicitation, offer or sale takes place.
- 4.4.9. It is aware of the UN EU, OFAC, CSSF, Egypt Asset Freeze watch lists contained in regulations concerning identification and declaration of business relations with suspected terrorist groups, persons or entities, or country subject to embargo, and has checked and will monitor that none of Clients does appear on such list.
- 4.4.10. Its officers, employees and all agents used by it comply strictly with all related procedures and controls in place.
- 4.4.11. It hereby certifies that it
  - 4.4.11.1. is not a shell bank within the meaning given to these terms under U.S. Patriot Act: Uniting and Strengthening America by Providing Appropriate Tools Required to Intercept and Obstruct Terrorism Act) or any other similar legislation and
  - 4.4.11.2. does not accept shell banks as a Client.
- 4.4.12. It is complying with FATCA regulation applicable in its country of incorporation and in particular it has appropriate means and internal procedures to identify and classify its clients according to applicable FATCA regulation.
- 4.4.13. It has taken knowledge of the applicable General Terms and Conditions and explicitly agrees to clause 7.

Date and place of signature

its business relationship with the Account Holder.

Signature of Intermediary representative 1

Name:

Title:

Signature of Intermediary representative 2

Intermediary stamp

Name:

This confirmations shall be deemed reiterated at the time of any order placed and shall continue throughout the period of its Client's holdings in the Fund. The Intermediary commits to inform the Fund, the Company and the Registrar if the Intermediary ceases to be regulated or ceases

## 5. ULTIMATE ECONOMIC BENEFICIARY

An ultimate economic beneficiary is the final beneficiary of the investment and who owns – directly or indirectly – more than 25% of the value of the shares subscribed. This final beneficiary can be either a private person(s) or a publicly quoted company(ies) for which more than 75% of their capital is listed on a recognized stock exchange.

**Important:** In case of indirect ownership, please describe on a dated and signed chart all the intermediate levels of ownership with names and percentages.

Please provide the information if any of the account holder or the ultimate economic beneficiary(ies) is/are either:

	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , , , , , , , , , , , , , , , ,
	a person holding a legislative, administrative or judicial office, whether appointed or elected:	If applicable, please describe:
	a person exercising a public function, including for a public agency or public enterprise:	
	an official or agent of a public international organisation	
	a person or company manifestly close to or connected with the above persons	
*	the equivalency is determined on the country list applied by the function contact the Register for further details.  Please provide comfort letter together with this form to allow evalua	d, the company, the registrar or any agent appointed by them, please
	Trease provide connort letter together with this form to allow evalua	
	5.1. Ultimate Economic Beneficiary declar	ration
	I/we declare I/we am/are the ultimate economic beneficiary(id	es) of the shares being subscribed.
	Signature of the account holder	Signature of the joint account holder(if any)
	Please proceed to section 6.	
	I/we am/are not the ultimate economic beneficiary of the share	es being subscribed.

Please complete the section 5.2.

## 5.2. Ultimate Economic Beneficiary information 13

### Please complete either the Natural person or Legal entity section.

☐ Natural Person		☐ Legal entity	
☐ Mr ☐ Mrs ☐ Ms		☐ Bank ☐ Insurance Company ☐ Pension Fund ☐ Investment/Mutual Fund ☐ Nominee ☐ Government entity	☐ Other Financial Institution☐ Corporate☐ Partnership☐ Foundation/Association☐ Trust☐ Other (please specify):
Surname		Company Name	
First Name		Parent Company/ Head office:	
Date of birth (DD/MM/YYYY) / .	Place & Country of birth	Date of Incorporation (DD/MM/YYYY) / .	Country of Incorporation
Passport / ID Number (circle the right choice)	Issuing Country	Area of activity:	Stock exchange listing:  No Yes: Listing Code:
Expiration Date (DD/MM/YYYY)	Nationality	Tax residence	Company Register
Occupation (if retired your major occupation during active life):	Double Nationality ☐ Never ☐ Renounced ☐ Yes, which:	Regulated Entity:  No  Yes	License number:
		Regulator:	Regulator web-address:
Common Section			
Registered Address* Street Number:	Registered Address Town/Village:	Registered Address Post Code:	Registered Address Country:
Mailing Address if different from above Street Number	Mailing Address Town/Village:	Mailing Address Post Code:	Mailing Address Country:
Telephone:	Fax:	E-Mail:	Mobile-Phone:
* P.O. Box and "in care of" addresse	es are not valid registered address. Th	ese are acceptable for mailing purpose	es.
Signature of the ultima	te economic beneficiary	1	
Date and place	o of cianaturo		

Please proceed to section 6.

<sup>3</sup> If further Ultimate Economic Beneficial Owners Information forms are required to be registered, please use the form available as appendix 3 as many times as required.

6.	ACCOUNT	INFORMATION		
	6.1. Account designation (If the account holder name is supplemented by additional information)			
Design	ation:		ppremented by aut	antional morniation)
Design				
	6.2. Ban	k Account Details*		<u> </u>
	6.2.1. S	ubscription paymen	nts	
	are mandatory		nd accounts from whi	ich the subscription amounts will be paid. The account must be in the
Bank:				Bank SWIFT / BIC / Sort Code:
Accoun	nt holder / Name	of the account:		IBAN Number
In coor	novemente are		hank plance provide	a the following information:
Bank:	e payments are i	made through a correspondent	. Dalik, piease provide	Bank SWIFT / BIC / Sort Code:
	nt holder / Name	of the account:		IBAN Number
Accoun	it floider / Name	of the account.		IBAN Number
	note that in ord		ents, we require sub	scription payments to come from a bank account in the name of the
In orde		stitutions and Intermediari n EU Regulation 1781/2006 an		quire the following information to be included for all subscription wires
For MT	103 , Field 50a	is to be used for Ordering Cus	tomer's information (	(either option below, as appropriate)
TAG		Field Name	Information to	
	ption K) ption A)	Ordering Customer Ordering Customer		unt number, name and address unt number and the BIC
For MT	202 (Field 52)			
TAG		Field Name	Information to	
52A		Ordering Institution	The Ordering Inst	titution's identifier code (BIC)
	6.2.2. R	edemption paymen	ts	
These	are mandatory	and used for the payment of r	edemption proceeds.	. The account must be in the name(s) of the account holder(s).
Bank:				Bank SWIFT / BIC / Sort Code:
Accoun	nt holder / Name	of the account:		IBAN Number
In case	e payments mus	t be made through a correspor	ndent bank, please pr	rovide the following information:
Bank:				Bank SWIFT / BIC / Sort Code:
Account holder / Name of the account:			IBAN Number	
		at payments to, or for the accordance to the legal guardian.	ounts of third parties	are not accepted. Only where the investor is under 18 years,
	6.3. Divi	dend Instructions		
In the	case of distribut	ion shares being held, please t	ick off corresponding	box of your choice:
☐ Div				
	vidends will be p	aid directly to my bank accoun	nt as above	Dividends will be automatically reinvested in the purchase of furthe shares

<b>7.</b>	REPORTING				
Pleas	e select a periodicity and format as you wish	to receive your reporting.			
Sta	tement periodicity	Statement format			
	Monthly Quarterly Half Yearly	☐ Periodic statement ☐ Consolidated statement			
	Yearly				
Cha	nnel of communication				
☐ Fa Fax r	ux number:	☐ Swift MT535 ☐ by post ☐ Swift MT536 ☐ SWIFT XML (Format) Please provide your SWIFT code below			
Willy	you be sending orders via SWIFT:   Yes	□ No			
If yo	answered Yes above , please note you will	need to fill in an additional Swift Set Up request form available in appendix 7			
Ple	ase proceed to section 8.				
8.	TAX INFORMATION				
Comp	pany have a <b>mandatory duty</b> to collect tax	gulations applicable to the Fund, the Company and their investments, the Fund and the related information about the Account Holder and as the case may be the final beneficiary the Company may be obliged to share this information with relevant tax authorities according			
Alter and- For F Act-F	natively, please consult OECD website to hel assistance/tax-residency	sidency, please contact your tax advisor.  o determine your tax residence: <a href="https://www.oecd.org/tax/automatic-exchange/crs-implementation-">www.oecd.org/tax/automatic-exchange/crs-implementation-</a> t the IRS website: <a href="https://www.irs.gov/Businesses/Corporations/Foreign-Account-Tax-Compliance-">www.irs.gov/Businesses/Corporations/Foreign-Account-Tax-Compliance-</a> ctly to sub-section 8.2.			
	8.1. Individual Section				
Plea	se note in case of Joint Holders, each Ac	count Holder should fill in the Individual Section below			
	8.1.1. Declaration of US Account Holder 1	Citizenship or US residence for Tax Purposes (FATCA)-			
Pleas	e tick and complete as appropriate.				
I co	nfirm that:				
	am a U.S. person, citizen and/or resident in ifying number (U.S. TIN) is as follows:	the U.S. or with a U.S. dual citizenship for tax purposes and my U.S. federal taxpayer			
U.S.	TIN :				
	confirm that I was born in the U.S. (or a U.S idenced by the appropriate documents that	S territory) but I am no longer a U.S. citizen as I have voluntarily surrendered my citizenship I will join to this application form.			
_ I	am not a U.S. person, citizen and/or resider	t in the U.S. or with a U.S. dual citizenship for tax purposes.			
Pleas	e proceed with sub-section 8.1.2.				
Note	you are considered a US resident for tax pu	rposes if you meet certain tests including the substantial presence test			
	Substantial Presence Test:  To meet this test, you must be physically present in the United States for at least:  1- 31 days during the current year, and 2- 183 days during the 3-year period that includes the current year and the 2 years immediately before that, counting:  - All the days you were present in the current year, and  - 1/3 of the days you were present in the first year before the current year, and  - 1/6 of the days you were present in the second year before the current year.				

Some exceptions regarding individual's specific situations are provided on the Internal Revenue Services (IRS) website. For more details, refer to:  $\underline{\text{https://www.irs.qov/Individuals/International-Taxpayers/Substantial-Presence-Test}}$ 

## 8.1.2. Declaration of Tax Residence (CRS)- Account Holder 1

Note: Declaration of Tax residence is requested in the context of the OECD Common Reporting Standard ("CRS"), an initiative to implement automatic exchange of financial account information on a global basis.

Please indicate your place of tax residence. If resident in more than one country please detail all countries of tax residence and associated Tax ID numbers.

Country of Tax residence	Tax ID Number (TIN) or equivalent	TIN or equivalent not available	Reason if TIN or equivalent not available:

Please proceed with sub-section 8.1.5, unless there is a Joint Account Holder.

## 8.1.3. Declaration of US Citizenship or US residence for Tax Purposes (FATCA)-Account Holder 2<sup>4</sup>

Account Holder 2	
Please tick and complete as appropriate.	
I confirm that:	
☐ I am a U.S. person, citizen and/or resident in the U.S. or with a U.S. dual citizenship for tax purposes and my U.S. federal taxpayer identifying number (U.S. TIN) is as follows:	
U.C. TTN	

 $\square$  I confirm that I was born in the U.S. (or a U.S territory) but I am no longer a U.S. citizen as I have voluntarily surrendered my citizenship as evidenced by the attached documents.

☐ I am not a U.S. person, citizen and/or resident in the U.S. or with a U.S. dual citizenship for tax purposes.

Please proceed with sub-section 8.1.4.

Note: you are considered a US resident for tax purposes if you meet certain tests including the substantial presence test

Substantial Presence Test:

To meet this test, you must be physically present in the United States for at least:

- 1. 31 days during the current year, and
- 2. 183 days during the 3-year period that includes the current year and the 2 years immediately before that, counting:
  - All the days you were present in the current year, and
  - 1/3 of the days you were present in the first year before the current year, and
  - 1/6 of the days you were present in the second year before the current year.

Some exceptions regarding individual's specific situations are provided on the Internal Revenue Services (IRS) website. For more details, refer to:

https://www.irs.gov/Individuals/International-Taxpayers/Substantial-Presence-Test

## 8.1.4. Declaration of Tax Residence (CRS)- Account Holder 2

Note: Declaration of Tax residence is requested in the context of the OECD Common Reporting Standard ("CRS"), an initiative to implement automatic exchange of financial account information on a global basis.

Please indicate your place of tax residence. If resident in more than one country please detail all countries of tax residence and associated Tax ID numbers.

Country of Tax residence	Tax ID Number (TIN) or equivalent	TIN or equivalent not available	Reason if TIN or equivalent not available:

		_			
D	0250	procood	with	sub-section	Q 1 E
	ıcasc	DIOCEEU	WILLI	SUD-SECTION	0.1.3

 $<sup>^4</sup>$  If further Account Holder, please use the form available as appendix 2 as many times as required

## 8.1.5. Declaration and Signature

I/We declare by signing this certification form that the above information is true, complete and accurate. I/We undertake to advise the recipient (Fund, Company and Registrar) promptly and provide an updated Self- Certification form within 30 days of any change in circumstance occurring, which causes any of the information contained in this form to be inaccurate or incomplete.

I/We understand that the information supplied by me/us is covered by the full provisions of the General Terms and Conditions governing the Account Holder's relationship with the Fund/ the Company, setting out how the Fund/ the Company or the Registrar may use and share the information supplied by me/us. I/we acknowledge, in particular, that the information provided is subject to clauses 6 & 7 of the General Terms and Conditions.

Further, I/we acknowledge that the information contained in this form and information regarding the Account Holder and any Reportable Account(s) may be provided 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 pursuant to intergovernmental agreements regarding the exchange of financial account information, or otherwise where required by law.

In jurisdictions where the disclosure of the above-mentioned information is not required by law, I/we may refuse to consent. However, I/we recognize that the Fund, the Company or the Registrar may require this information in the future to comply with applicable law and will contact me/us to obtain such information.

I/We certify that I/we am/are the Account Holder(s) (or am/are authorised to sign for the Account Holder) of all the account(s) to which this form relates.

Signature Account Holder 1	Signature Account Holder 2 (if any)
Date of signature	Date of signature
Print Name:	Print Name:
Capacity ( Applicable if Power of Attorney given. Please attach a copy of POA):	Capacity ( Applicable if Power of Attorney given. Please attach a copy of POA):

If you are a legal entity, please proceed to section 8.2. Otherwise, please proceed to section 9

## 8.2. Entity Section

If you have any questions about your tax residence, please contact your tax advisor. Alternatively, please consult OECD website to help determine your tax residence: <a href="https://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-residency">www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-residency</a>

#### Please note:

- Appendices 4, 5 and 6 will provide definitions and instructions to complete FATCA and CRS sections below
- Where the Account Holder is a Passive Non-Financial Foreign Entity, or an Investment Entity located in a Non-Participating
  Jurisdiction managed by another Financial Institution—Please provide information on the natural person(s) who exercise control over
  the Account Holder (individuals referred to as "Controlling Person(s)") in section 8.2.5 of this document or by completing an
  "Individual self-certification form" for each Controlling Person.

#### 8.2.1. U.S.Person

	6.2.1. U.S.Person
If you ar	re not a U.S. Person, please proceed to sub-section 8.2.2 or 8.2.3 accordingly.
Please ti	ck and complete as appropriate.
☐ The I	Entity <b>is</b> a Specified U.S. Person and the Entity's U.S. Federal Taxpayer Identifying number (U.S. EIN) is as follows:
U.S. EIN	N:
☐ The I	Entity is a U.S.Person but <b>not</b> Specified and the Entity's U.S. Federal Taxpayer Identifying number (U.S. EIN) is as follows:
U.S. EIN	N:
	8.2.2. Financial Institutions – FATCA classification
	ck and complete as appropriate. You might refer to FATCA classification notes in Appendix 4 or to <pre>s.gov/Businesses/Corporations/Foreign-Account-Tax-Compliance-Act-FATCA</pre>
☐ If you	are not incorporated in a U.S. country / territory for tax purposes, please provide your Global Intermediary Identification number:
GIIN: _	
☐ The e	entity is an IGA Partner Jurisdiction Financial Institution and has not yet obtained a GIIN. Please provide the GIIN as soon as received.
	Entity has not yet obtained a GIIN but is sponsored by another entity which does have a GIIN. rovide your sponsor's name and sponsor's GIIN:
Sponsor'	's Name: Sponsor's GIIN:
☐ Other	·
In all cas	ses, please provide your FATCA status (please note the term "Foreign" in the below classification should be understood as non-U.S.):
	Participating Foreign Financial Institution (PFFI)
	Reporting Foreign Financial Institution under IGA Model 1
	Reporting Foreign Financial Institution under IGA Model 2
	Registered deemed-compliant Foreign Financial Institution
	Direct Reporting Non-Financial Foreign Entity
	Sponsored Direct Reporting Non-Financial Foreign Entity
	Certified Deemed Compliant Foreign Financial Institution (including a Foreign Financial deemed compliant under Annex II of an IGA)
	Restricted distributor
	Exempt beneficial owner
	Non-participating Foreign Financial Institution
	Territory Financial Institution
	Non-reporting IGA Foreign Financial Institution treated as a: (please specify)
	Other, please specify:

n-Financial Foreign Entity. n-Financial Foreign Entity (ple S. citizens or residents in the istent with the recommendation. Non-Financial Foreign Entity.  llassification  1.1. Declaration	of Tax Residence-CRS  Entity is a tax resident in more than on	Persons (whose percentage of ownership is			
n-Financial Foreign Entity (plet S. citizens or residents in the istent with the recommendation Non-Financial Foreign Entity.  Lassification  1.1. Declaration  Declaration	U.S. for tax purposes in section 8.2.5. ons of the Financial Action Task Force.  of Tax Residence-CRS				
S. citizens or residents in the istent with the recommendation.  Non-Financial Foreign Entity.  Classification  1.1. Declaration  Declaration	U.S. for tax purposes in section 8.2.5. ons of the Financial Action Task Force.  of Tax Residence-CRS				
lassification  1.1. Declaration  buntry of tax residence. If the					
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ountry of tax residence. If the					
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	Entity is a tay resident in more than on				
	Entity is a tay resident in more than on				
		ne country inlease detail all countries of to			
1D Humbers of equivalents. 3		ase provide information on a separate she			
Tax ID Number	er (TIN) or TIN or equivalent not available	t Reason if TIN or equivalent r available:			
	П				
1.2. Entity type	dentification				
7.7.					
	CKS classification flotes in Appendix 3	,			
ution (FI)					
nt Entity with tax residence in	non-participating jurisdiction and man	aged by another FI (please fill in Section			
8.2.5)  Other Investment Entity					
estment Entity					
Institution other than above I	nvestment Entity (Depositary Instritution	on, Custodial Institution, Specified			
Institution other than above Incompany)	nvestment Entity (Depositary Instritution				
a tı	.1.2. Entity type i appropriate. You might refer to tution (FI)	.1.2. Entity type identification appropriate. You might refer to CRS classification notes in Appendix 5			

If the Entity is a Passive Non-Financial Entity or Investment Entity with tax residence in non-participating jurisdiction, please provide details of any Controlling Persons. The term Controlling Persons is to be interpreted in a manner consistent with the Financial Action Task Force Recommendations.

## 8.2.5. Controlling Persons identification

This section is mandatory if Entity Type is indicated:

- In section 8.2.3 as Passive Non-Financial Foreign (Non-U.S.) Entity
- In Section 8.2.4.1.2 as Passive Non-Financial Entity
- In Section 8.2.4.1.2 as Investment Entity with tax residence in non-participating jurisdiction

Please provide details below of any Controlling Persons. Should below space not be sufficient – please provide information on a separate sheet.

Should Controlling Persons have more than one tax residence, please use the below space or provide information on a separate sheet.

 $\hfill \square$  Select if there are no Individuals that are Controlling Persons of the Entity

Full name*	Date of birth*	Place of Birth	Full residence Address*	% of ownership	Tax residence country*	TIN or equivalent*	Comments if no TIN or Equivalent*	Role number (please see below table for reference)

<sup>\*</sup> Mandatory Fields

### Controlling Persons Type - allowed Role number entries:

CP of legal person – ownership	801
CP of legal person – other means	802
CP of legal person – senior managing official	803
CP of legal arrangement – trust – settlor	804
CP of legal arrangement – trust – trustee	805
CP of legal arrangement – trust – protector	806
CP of legal arrangement – trust – beneficiary	807
CP of legal arrangement – trust – other	808
CP of legal arrangement – other – settlor-equivalent	809
CP of legal arrangement – other – trustee-equivalent	810
CP of legal arrangement – other – protector-	811
equivalent	
CP of legal arrangement – other – beneficiary-	812
equivalent	
CP of legal arrangement – other – other-equivalent	813
Unknown	UN

## 8.2.6. Declaration and signature

The account holder declares by its signature of this self certification form that the above information is true, complete and accurate and undertakes to advise the recipient ( the Fund/ the Company and the Registrar) promptly and provide an updated Self- Certification form within 30 days of any change in circumstances occurring, which causes any of the information contained in this form to be inaccurate or incomplete.

The account holder understands that the information supplied by them is covered by the full provisions of the General Terms and Conditions governing the Account Holder's relationship with the Fund/ the Company, setting out how the Fund/ the Company or the Registrar may use and share the information supplied by them. The account holder acknowledges, in particular, that the information provided is subject to clauses 6 & 7 of the General Terms and Conditions.

Further, the account holder acknowledges that the information contained in this form and information regarding the Account Holder/controlling person(s) and any Reportable Account(s) may be provided 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 pursuant to intergovernmental agreements regarding the exchange of financial account information, or otherwise where required by law.

The consent to the communication of the relevant information set out in the foregoing paragraph will be valid for as long as the Entity is a customer of the Fund/Company maintaining the account(s) and beyond in order to enable the Fund/Company and the Registrar maintaining the account(s) to fulfil its statutory obligations

The applicant(s) will indemnify upon first demand the Fund, the Company, the Registrar or any other agent used by them against any actions, proceedings, claims, losses, damages, costs and expenses which may be brought against, suffered or incurred by them arising either directly or indirectly out of or in connection with a breach by the applicant(s) or out of the Fund, the Company, the Registrar or any other agent used by them relying on, accepting or failing to act on any instruction or declaration or information given by or on behalf of the applicant(s) unless due to the willful default, fraud or gross negligence of the Fund, the Company, the Registrar or any other agent used by them.

Signature of the Entity representative	Signature of the second Entity representative
Date and place of signature	Date and place of signature
Name:	Name:
Title:	Title:

Please proceed to section 9

The Account Holder declares that t	he origin of the fund	ds used for subscri	ption is coming fr	rom: (please tick tl	he right ch	oice)	
☐ Inheritance (please provide s ☐ Sale of real estate (please pr ☐ Redemption from other inves ☐ Savings on salary ☐ Treasury investment (Corpor	rovide some details) stments (please pro		Details:				
Other (please describe)							
Signature of th	ne account holder			Signature of the	e account h	nolder 2	
10. EXPECTED VOLUE  Please complete the below section provided will not form any kind	MES & FREQUE	ons in terms of inv					
10.1. Expected	frequency o						
Please tick the anticipated frequen							
☐ Single ☐ Daily	cy.	☐ Monthly	Quarterly	☐ Semi- annual	☐ Annu	ıal	☐ Ad-hoc
☐ Single ☐ Daily cransaction	· _	,	Quarterly		Annu	ıal	Ad-hoc
Single Daily  Total Daily  Daily  Daily  If you are a financial nstitution acting on behalf of	☐ Weekly	,	☐ Quarterly ☐ more than EUR 1 million (or equivalent)	On annual basis:	Less EUR 100 million ( equivale	than ) or	
☐ Single ☐ Daily  Tansaction  10.2. Expected ☐ If you are a financial Institution acting on behalf of Schird parties	■ Weekly  investment  By transaction:	amount *	☐ more than	On annual basis:	Less EUR 100 million (	than ) or	over EUF
☐ Single ☐ Daily transaction	■ Weekly  investment  By transaction:	amount *  Less than EUR 1 million (or equivalent)	more than EUR 1 million (or equivalent)	On annual basis:	Less EUR 100 million ( equivale	than ) (or ent)	over EUF
Single Daily  10.2. Expected  If you are a financial nstitution acting on behalf of third parties  For investors acting on their own behalf of the control o	Weekly  investment  By transaction:	amount *  Less than EUR 1 million (or equivalent)	☐ more than EUR 1 million (or equivalent)  JR 10.000 (or  n EUR 25.000	On annual basis:	Less EUR 100 million ( equivale	than ) (or ent)  ove (or eq	over EUF 100 million (or equivalent)
□ Single □ Daily  10.2. Expected □ If you are a financial nstitution acting on behalf of third parties □ Individuals □ Financial Institutions, Insurance Companies, Pension Funds, Investment Funds, Listed	Weekly  investment  By transaction:  behalf  By transaction:	amount *  Less than EUR 1 million (or equivalent)  Up to EL equivalent)  Less than (or equivalent)	more than EUR 1 million (or equivalent)  UR 10.000 (or  n EUR 25.000 ent)	On annual basis:    Detween EUR 10 and 50.000 (or equivalent)   Detween EUR 20 and 100.000 (or equivalent)   Detween EUR 10 and 50 millions (or equivalent)	Less EUR 100 million ( equivale  0.000 uivalent)  5.000  0 millions	than (or ent)  ove (or eq ove (or eq	over EUF 100 million (or equivalent)  er EUR 50.000 uivalent)  er EUR 100.000 uivalent)  er EUR 50 os (or
Individuals    Single   Daily	investment  By transaction:  By transaction:  By transaction:  Expected Total Investment:	amount *  Less than EUR 1 million (or equivalent)  Up to EU equivalent)  Less tha (or equivalent)  Less tha millions (or	more than EUR 1 million (or equivalent)  JR 10.000 (or  n EUR 25.000 ent)  n EUR 10 equivalent)	On annual basis:    Detween EUR 11 and 50.000 (or equivalent)   Detween EUR 12 and 100.000 (or equivalent)   Detween EUR 14 and 50 millions (or equivalent)   Detween EUR 16 and 50 millions (or equivalent)	Less EUR 100 million ( equivale  0.000 uivalent)  5.000  0 millions	than or ent) ove (or eq ove million equiva	over EUF 100 million (or equivalent)  er EUR 50.000 uivalent)  er EUR 50 or ilent)  er EUR 50 or ilent)
Single Daily  10.2. Expected  If you are a financial nstitution acting on behalf of third parties  For investors acting on their own behalf of the control o	investment  By transaction:  By transaction:  Expected Total Investment:  By transaction:	amount *  Less than EUR 1 million (or equivalent)  Less than (or equivalent)  Less than (or equivalent)  Less than (or equivalent)	more than EUR 1 million (or equivalent)  JR 10.000 (or  n EUR 25.000 ent)  n EUR 10 equivalent)  n EUR 10 equivalent)  n EUR 10 equivalent)  n EUR 10 equivalent)	on annual basis:    Detween EUR 10 and 50.000 (or equivalent)   Detween EUR 10 and 50 millions (or equivalent)   Detween EUR 10 and 50	Less EUR 100 million ( equivale  0.000 uivalent)  5.000  0 millions - million	than ) (or ent)  ove (or eq  ove million equiva  ove million equiva	over EUF 100 million (or equivalent)  er EUR 50.000 vivalent)  er EUR 50 vivalent)

9.

 $^{st}$  mandatory data

**ORIGIN OF THE MONIES INVESTED** 

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### 11. DECLARATION BY THE ACCOUNT HOLDER

The following declaration is to be signed by each Account Holder:

- Joint or Common owners: The declaration must be signed by all owners individually.
- Minors: The declaration must be signed by the guardian on behalf of the Minor.
- Corporate: The declaration must be signed by a legal representative of the company, supported by documentary evidence of the authorisation to sign on behalf of the corporate.
- Intermediary: The declaration must be signed by a legal representative of the intermediary, supported by documentary evidence of the authorisation to act on behalf of the Account Holder.

#### The Account Holder

- 11.1. declares to be over 18 years old and having full capacity to subscribe, hold and deal in shares of the Fund;
- understands that its application is subject to verification for receipt and acceptance by the Fund, the Company, the Registrar or any other agent appointed by them;
- 11.3. declares and agrees that any further application for shares by it shall be (i) made or be deemed to be made in accordance with the then relevant documentation and (ii) understood as reiteration of all information made herein;
- 11.4. hereby confirms that the money or assets invested by it are neither directly nor indirectly the proceeds of any criminal act within the meaning of applicable Luxembourg law.

- 11.5. declares to have received, read, understood and agreed the applicable Key Investor Information document(s) at the time of the signature of this application form related to the share-classes or sub-funds of the Fund.
- 11.6. declares to agree to provide upon request of the Fund, The Company, the Registrar or any agent they may use, the necessary supporting identification documentation as requested by Luxembourg laws.
- 11.7. declares that the information contained in this application form is correct at the time of completion and undertakes to promptly inform the Registrar of any changes.
- 11.8. declares it has been advised about and taken knowledge of the applicable General Terms and Conditions and explicitly agrees to clause 7.

·	
Signature of the account holder or Company representative	Signature of the second account holder (if any) or company representative
Date and place of signature	Date and place of signature
Name:	Name:
Title:	Title:

## APPENDIX 1 General Terms and Conditions

#### 1.1. General

- 1.2. These Terms and Conditions relate to the opening of a register account for the purposes of subscription of shares in the Fund. The Fund if applicable the Company has appointed the Registrar as its transfer agent to maintain and keep the investors register and the applicant(s) agree(s) to be bound by these Terms and Conditions in addition to any other official documents issued by the Fund.
- 1.3. The Fund, the Company, the Registrar or any other agent used by them reserves the right to
  - ..3.1. reject any application in whole or in part which is not complete, supported by required documentation or for any other reason at their sole discretion.
  - 1.3.2. to request additional information and documentation, including, but not limited to, translations and certifications relating to such additional requests from the applicant(s) and existing investors in compliance with the legislation and regulations in force from time to time

#### 2. Prevention of Money Laundering and fight of terrorist financing

- 2.1. All applicants understand that due to the changing nature of laws and regulations and the possible extensions of applicable rules, the Fund, the Company, the Registrar or any other agent used by them may update and amend its procedures as might be required from time to time to comply with such amendments.
- 2.2. In compliance with applicable anti-money laundering laws and regulations, the Fund, the Company, the Registrar or any other agent used by them may require
  - 2.2.1. require further information to carry out the required identification of the applicants or an existing investor before the application can be processed or the redemption proceeds paid out; and
  - 2.2.2. the documentation to be renewed in accordance with applicable regulation and market practice.
- 2.3. The Fund, the Company and the Fund may agree to open accounts even if the documentation is not complete to ease the timely subscription to the Fund. In such exceptional case
  - 2.3.1. the register account will be opened for subscriptions but blocked for redemptions.
  - 2.3.2. redemption orders on blocked accounts will be executed, but the redemption proceeds will be hold pending and not be paid to the Account Holder unless the documentation is complete.
  - 2.3.3. Distribution proceeds and transfer out will be hold pending unless the documentation is complete.
  - 2.3.4. Redemption proceeds according to clause 2.3.2 will not be subject to remuneration or interest bearing.
- 2.4. The Fund, the Company and the Registrar reserve the right to charge in accordance with clause 6.1 an Account Holder additional fees, if the Account Holder generates additional costs through non-collaboration for the purposes of this clause.

#### 3. Joint Applicants

- 3.1. If more than one person is named as "Account Holder" in a single Application and Account Opening Form, all applicants will be considered as joint applicants. As such, they authorize the Fund, the Company, the Registrar or any other agent used by them to act and rely on the signed or purportedly signed instructions of any one of the applicants without liability with respect to any transfer, payment or other act made or done or omitted to be done in accordance with such instructions.
- 3.2. The joint holders shall determine between them, by separate agreement, the rights of any joint account holder on the account. The Fund, the Company, the Registrar or any other agent used by them, may at any time request each joint account holder to inform it about this determination and provide evidentiary support. Under no circumstances can the knowledge that the Fund, the Company, the Registrar or any other agent used by them has about the distribution of assets between the account holders of a joint account be used against the Fund, the Company, the Registrar or any other agent used by them.
- 3.3. The applicants hereby confirm that upon the death of any of the undersigned, this individual signatory power will continue to be in force. The Fund, the Company, the Registrar or any other agent used by them may rely and act without liability on any instruction including the transfer or redemption of the Shares signed by the survivor(s) unless the Fund, the Company, the Registrar or any other agent used by them has been informed in writing of the contrary.
- 3.4. Unless otherwise advised in writing, all notices and communications shall be addressed and all payments directed to the first applicant specified in section 1.1 of the present Application and Account Opening Form (the "First Applicant").

#### 4. Power of Attorney

 Where a Power of Attorney Form is required, a certified copy must be provided.

#### 5. Application by a Minor

5.1. For the purposes of this Application and Account Opening Form, a minor ("Minor") is defined as every applicant under the age of 18 years old.

- 5.2. If the Application and Account Opening Form is submitted on behalf of, and the register account to be opened in the name of a Minor, the Application and Account Opening Form must be signed by the legal guardian(s) ("Legal Guardian"). Duly certified proof of the legal guardianship has to be submitted in writing to the Registrar or any other agent used by them. The legal guardian(s) must provide a certified copy of a valid ID card/passport of their own and the Minor.
- 5.3. The Legal Guardians, where more than one legal guardian exists, may authorize, to the extent permitted by any applicable law, one or another by notice in writing to the Registrar or any other agent used by them to represent the person under 18 years old solely. Such needs to be provided to the Registrar in original duly signed by each guardian. Sole representation will become effective two business days after receipt by the Registrar of said original.
- 5.4. Upon reaching the age of 18 years, the (former) Minor must inform the Fund, the Company, the Registrar or any other agent used by them and submit a new Application and Account Opening Form signed by itself as the Account Holder. Until the new Application and Account Opening Form duly signed by the Account Holder has been received and accepted, the Fund, the Company, the Registrar or any other agent used by them, transactions will not be processed.

#### 6. Indemnity

6.1. The applicant(s) will indemnify upon first demand the Fund, the Company, the Registrar or any other agent used by them against any actions, proceedings, claims, losses, damages, costs and expenses which may be brought against, suffered or incurred by them arising either directly or indirectly out of or in connection with a breach by the applicant(s) of these Terms and Conditions or out of the Fund, the Company, the Registrar or any other agent used by them relying on, accepting or failing to act on any instruction or declaration or information given by or on behalf of the applicant(s) unless due to the willful default, fraud or gross negligence of the Fund, the Company, the Registrar or any other agent used by them.

#### 7. Confidentiality, data processing and professional secrecy

- 7.1. The Fund, the Company, the Registrar or any other agent used by them agree to keep all information concerning the applicant(s) confidential unless required to disclose such information to third parties by applicable Law or by formal instruction of the applicant(s).
- 7.2. The applicant(s) accept(s) and agree(s) that the Fund, the Company, the Registrar or any other agent used by them may be requested to disclose personal details for the processing of cash payment instructions in accordance with the mandatory obligation provided in Article 16 of the Act of November 12, 2004 (as amended) regarding the fight against money laundering and terrorism financing.
- 7.3. The applicant(s) declare(s) that it understands that the personal data or information given in this Application and Account Opening Form or otherwise provided to or obtained by the Fund or the Company, acting as data controller, on application or at any other time, as well as details of any shareholding (the "Personal Data"), will be stored in digital form or otherwise and processed in accordance with the Luxembourg Law on the Data protection dated 2 August 2002 as amended (the "Data Law"). As per the before said, each applicant
  - 7.3.1. understands and acknowledges that the Fund, as well as, where relevant the Company and those companies to which the Fund or the Company delegate distribution or investor servicing duties, the distributors or any other service providers such as the Registrar, representatives or third-party agents will collect, retain, maintain and disclose Personal Data in accordance with applicable laws, including potentially to their group's world wide offices or affiliates (the "Data Processors")
  - 7.3.2. understands that the Personal Data supplied will enable the Fund as well as, where relevant, the Company and any of the Data Processors, to administer its account and provide appropriate services.
  - 7.3.3. does consent to the Personal Data being used by the Fund as well as, where relevant, the Company for promoting products relating to the Fund or the Company
  - 7.3.4. acknowledges that the Fund, as well as, where relevant, the Data Processors may be required by applicable laws and regulation to provide the Personal Data to tax, supervisory or other authorities in various jurisdictions, in particular those where (i) the Fund is or is seeking to be registered for public or limited offering of its shares, (ii) investors are resident, domiciled or citizens, (iii) the Fund, as well as, where relevant the Company and those companies to which the Fund or the Company delegate distribution or investor servicing duties, the distributors or any other service providers such as the Registrar, representatives or third-party agents is or is seeking to be registered, licensed or otherwise authorised to invest
  - 7.3.5. acknowledges that by signing this Application and Account Opening Form, that the Personal Data may be transferred to or stored in a country that does not have equivalent data protection laws to those of the European Union.

- 7.3.6. declares to wave in favour of the Fund, as well as, where relevant the Company and those companies to which the Fund or the Company delegate distribution or investor servicing duties, the distributors or any other service providers such as the Registrar, representatives or third-party agents the Luxembourg professional secrecy requirements relating to the financial sector.
- 7.4. The applicant(s) accept(s) that personal details may be disclosed by the Fund, the Company, the Registrar or any other agent used by them to external parties such as the Fund's sponsor, the Fund's Authorized Distributors or as deemed necessary by the Fund, the Company, the Registrar or any other agent used by them for the provision of enhanced shareholders' related services and that personal details (subject to the application of local laws and/or regulations) be used outside Luxembourg, and from time to time in countries which are not deemed as equivalent in terms of Data Protection regulation, and may therefore be potentially subject to the scrutiny of regulatory and tax authorities outside Luxembourg.
- 7.5. The applicant(s) is/are aware that, notwithstanding the foregoing, it will be able, at any time, to (i) refuse the collecting, processing and sharing, (ii) have access, (iii) require correction or (iv) deletion of such information. As such action according to (i) to (iv) may affect the existence or continuation of the provision of services by the Fund, the Company, the Registrar or any other agent used by them, the applicant(s) acknowledge(s) that neither the Fund, the Company, the Registrar nor any other agent used by them will be liable for any loss or damage incurred by the applicant(s) in the context of such action according to (i) to (iv) by the Company. The Fund, the Company, the Registrar or any other agent used by them will, however reserve the right to redeem the participation of the applicant(s) to ensure full compliance with the applicable laws and regulations and remain liable for the proper handling and fulfillment of its data protection duties.

#### 8. Document and information retention

- 8.1. The applicant(s) acknowledge(s) and agree(s) that the applicant(s)' personal details will be held by the Fund, the Company, the Registrar or any other agent used by them and may be subject to data processing.
- 8.2. The applicant(s) will have access to his/her/their personal details and will be entitled to request relevant amendments to such details.
- 8.3. The Fund, the Company, the Registrar or any other agent used by them will keep the personal details at least 10 years during the relationship and 5 years after the end of the relationship between the applicant(s) and the Fund

#### 9. Instructions

- 9.1. All notices, reports, statements, documents and communications will be sent at the risk of the applicant(s) by ordinary mail or where otherwise specified by Luxembourg legislation or the Fund's constitutional documents, by registered mail to the address of the First Applicant unless otherwise specified by the applicant(s) in writing. The applicant(s) assume(s) all risks and in particular those arising from delays in delivery including but not limited to errors in communication. The applicant(s) hold(s) harmless the Fund, the Company, the Registrar or any other agent used by them of all responsibility in this respect.
- 9.2. All notices, reports, statements, documents and communications sent to the address of the first applicant are deemed to have been effected to all the applicants on the date sent to the first applicant's address.
- 9.3. Instructions may be given by letter or facsimile and are at the risk of the applicant(s). The applicant(s) assume(s) all risks and in particular those arising from delays in delivery, errors in communication, or comprehension, including but not limited to, errors as to the information contained in the instruction. The applicant(s) hold(s) harmless the Fund, the Company, the Registrar or any other agent used by them of all responsibility in this respect.
- 9.4. The applicant(s) specifically agree(s) that for instructions sent by fax he/they hold the Fund, the Company, the Registrar or any other agent used by them fully indemnified from and against all liabilities, losses, costs, actions, proceedings, claims and demands which may be incurred by or brought or made against the Fund, the Company, the Registrar or any other agent used by them arising directly or indirectly from having acted upon such instructions.
- 9.5. In case the application form is sent by fax, the original must also be sent to the Fund, the Company, the Registrar or any other agent used by them.
- 9.6. A fax authority is not sufficient for notifications of change of name, notification of death, deed of pledges and appointment of an attorney or any other notification or instruction where original documentation is required to be sent by post to the Fund, the Company, the Registrar or any other agent used by them.
- 9.7. The applicant(s) shall check the accuracy of the details contained in the contract notes and statements of accounts sent by the Fund, the Company, the Registrar or any other agent used by them. Failure to report any inaccuracy within 30 business days of their dispatch will result in the confirmation details to be deemed accurate by the applicant(s).

#### 10. Telephone Recording

- 10.1. The applicant(s) specifically accept(s) that telephone-recording procedures may be used by the Fund, the Company, the Registrar or any other agent used by them and agree(s) that these records may be used in court or any legal proceeding, with the same value as written evidence.
- 11. Fraudulent use of signature

- 11.1. Neither the Fund, the Company, the Registrar or any other agent used by them shall be liable for the fraudulent use by a third party of the applicant's signature, whether this signature be authentic or forged ("Fraudulent Instruction").
- 11.2. Except in the event of gross negligence on the part of the Fund, the Company, the Registrar or any other agent used by them in the verification of the signatures and signatory powers on the documentation, the Fund, the Company, the Registrar or any other agent used by them shall not be liable for any damage, loss, expense or liability of any nature which the applicant(s) may suffer due to the reliance by the Fund, the Company, the Registrar or any other agent used by them on a Fraudulent Instruction which the Fund, the Company, the Registrar or any other agent used by them believe in good faith to be genuine and to have been given or signed by the applicant(s).

#### 12. Severance

12.1. If any provision or clause of these Terms and Conditions is or becomes void or unenforceable in whole or in part for any reason such enforceability or invalidity shall not affect the validity of the remaining terms and conditions. Terms and Conditions corresponding in sense must replace the invalid terms and conditions.

#### 13. Applicable law

13.1. The laws of the Grand Duchy of Luxembourg shall govern the validity and construction of these Terms and Conditions and the parties agree to be bound by the exclusive jurisdiction of the courts of Luxembourg City, Grand Duchy of Luxembourg.

#### 14. Final Provision

14.1. These Terms and Conditions form an integral part of the Application and Account Opening Form, which applicant(s) declare(s) having accepted by signing this Application and Account Opening Form.

## APPENDIX 2 Additional Account Holder Declaration

This Additional Account Holder Declaration is provided in addition to the ACCOUNT OPENING AND APPLICATION FORM.

The applicant confirms by its signature below that he has taken knowledge of and agrees to the ACCOUNT OPENING AND APPLICATION FORM, the contained declarations as well as the included General Terms and Conditions.

☐ Mr ☐ Mrs ☐ Ms (ple	ease tick the right choice)	☐ Joint account ☐ Common account (please tick the right choice) <sup>5</sup>				
Surname(s)		First Name				
Date of birth (DD/MM/YYYY)	Place & Country of birth	Occupation:	Nationality			
Passport / ID Number: (circle the right choice)	Issuing Country:	Expiration Date (DD/MM/YYYY) / /	Double Nationality:  Never Renound Yes, which:			
Registered Address* Street Number:	Registered Address Town/Village:	Registered Address Post Code:	Registered Address Country:			
Mailing Address if different from above Street Number	Mailing Address Town/Village:	Mailing Address Post Code:	Mailing Address Country:			
Telephone:	Fax:	E-Mail:	Mobile-Phone:			
	mate economic beneficiary of the					
<b>Declaration of US Cit</b>	izenship or US residenc	e for Tax Purposes (FAT	CA)			
Please tick and complete as appr	opriate.					
I confirm that:						
☐ I am a U.S. person, citizen an identifying number (U.S. TIN) is		S. dual citizenship for tax purposes and	d my U.S. federal taxpayer			
U.S. TIN :						
☐ I confirm that I was born in t as evidenced by the appropriate		no longer a U.S. citizen as I have volu	ntarily surrendered my citizenship			
☐ I am not a U.S. person, citize	n and/or resident in the U.S. or with	a U.S. dual citizenship for tax purpose	S.			
Please proceed with next section	below.					
Note: you are considered a US re	esident for tax purposes if you meet o	ertain tests including the substantial p	resence test			
Substantial Presence Test:  To meet this test, you must be physically present in the United States for at least:						

1. 31 days during the current year, and

- 2. 183 days during the 3-year period that includes the current year and the 2 years immediately before that, counting:
  - All the days you were present in the current year, and
  - 1/3 of the days you were present in the first year before the current year, and
  - 1/6 of the days you were present in the second year before the current year.

Some exceptions regarding individual's specific situations are provided on the Internal Revenue Services (IRS) website. For more details, refer to:

https://www.irs.gov/Individuals/International-Taxpayers/Substantial-Presence-Test

<sup>5</sup> Please note that in the case of a joint account, all applicants will be considered as joint account holders, but each joint account holder has an individual signatory power to engage the account on behalf of all; in the case of a common account, signatures of all account holders are required.

D	eclaration	of Tax	Residence	(CRS)

Note: Declaration of Tax residence is requested in the context of the OECD Common Reporting Standard ("CRS"), an initiative to implement automatic exchange of financial account information on a global basis.

Please indicate your place of tax residence. If resident in more than one country please detail all countries of tax residence and associated Tax ID numbers.

Country of Tax residence	Tax ID Number (TIN) or equivalent	TIN or equivalent not available	Reason if TIN or equivalent not available:

## **Declaration and Signature**

I declare by signing this certification form that the above information is true, complete and accurate. I undertake to advise the recipient (Fund, Company and Registrar) promptly and provide an updated Self- Certification form within 30 days of any change in circumstance occurring, which causes any of the information contained in this form to be inaccurate or incomplete.

I understand that the information supplied by me is covered by the full provisions of the General Terms and Conditions governing the Account Holder's relationship with the Fund/ the Company, setting out how the Fund/ the Company or the Registrar may use and share the information supplied by me. I acknowledge, in particular, that the information provided is subject to clauses 6 & 7 of the General Terms and Conditions.

Further, I acknowledge that the information contained in this form and information regarding the Account Holder and any Reportable Account(s) may be provided 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 pursuant to intergovernmental agreements regarding the exchange of financial account information, or otherwise where required by law.

In jurisdictions where the disclosure of the above-mentioned information is not required by law, I may refuse to consent. However, I recognize that the Fund, the Company or the Registrar may require this information in the future to comply with applicable law and will contact me to obtain such information.

I certify that I am the Account Holder(s) (or am authorised to sign for the Account Holder) of all the account(s) to which this form relates.

Signature of the account holder
Date and place of signature
Print Name:
Capacity ( Applicable if Power of Attorney given. Please attach a copy of POA):

# APPENDIX 3 Ultimate Economic Beneficiary information

This Ultimate Economic Beneficiary information is provided in addition to the ACCOUNT OPENING AND APPLICATION FORM.

The applicant confirms by its signature below that he has taken knowledge of and agrees to the ACCOUNT OPENING AND APPLICATION FORM, the contained declarations as well as the included General Terms and Conditions.

Please complete either the Natural person or Legal entity section.

☐ Natural Person		☐ Legal entity		
☐ Mr ☐ Mrs ☐ Ms		Bank Insurance Company Pension Fund Investment/Mutual Fund Nominee Government entity	☐ Other Financial Institution☐ Corporate☐ Partnership☐ Foundation/Association☐ Trust☐ Other (please specify):	
Surname		Company Name		
First Name		Parent Company/ Head office:		
Date of birth (DD/MM/YYYY) / / .	Place & Country of birth	Date of Incorporation (DD/MM/YYYY) / / .	Country of Incorporation	
Passport / ID Number (circle the right choice)	Issuing Country	Area of activity:	Stock exchange listing:  No Yes: Listing Code:	
Expiration Date (DD/MM/YYYY)	Nationality	Tax residence	Company Register	
Occupation (if retired your major occupation during active life):	Double Nationality ☐ Never ☐ Renounced ☐ Yes, which:	Regulated Entity:  No Yes	License number:	
		Regulator:	Regulator web-address:	
Common Section				
Registered Address* Street Number:	Registered Address Town/Village:	Registered Address Post Code:	Registered Address Country:	
Mailing Address if different from above Street Number	Mailing Address Town/Village:	Mailing Address Post Code:	Mailing Address Country:	
Telephone:	Fax:	E-Mail:	Mobile-Phone:	
* P.O. Box and "in care of" addresse	es are not valid registered address. Th	ese are acceptable for mailing purpose	es.	
Signature of the ultimat	te economic beneficiary	-		

Date and place of signature

## **APPENDIX 4 - FATCA Notes\***

The term Active NFE means any NFE which meets any of the following criteria:  1 Less than 50 per cent of the NFE'S gross income for the preceding calendar year or other appropriate reporting period is passive income and less than 50 per cent of the sasets held by the NFTE during the preceding calendar year or other appropriate reporting period is passive income and less than 50 per cent of the NFTE is replacible for the NFTE is a feelated Entity of an Entity the stock of which is regularly traded on an established securities market or the NFTE is a felated Entity of an Entity the stock of which is regularly traded on an established securities market or the NFTE is a felated Entity of an Entity the stock of which is regularly traded on an established securities and the stock of which is regularly traded on an established securities and the stock of which is regularly traded on an established securities and the stock of which is regularly traded on an established securities and the stock of which is regularly than the control of the NFTE is a government (or the other than the U.S. Territory, and international organization, a non-U.S. certail bank of issue, or an Entity whichly comed by one or more of the foregroup of an around providing financing and services to, one or more subsidiaries that engage in trades or businesses other than the business of a Financial Institution, except that an NFTE shall not qualify for this status if the NFTE functions or fund companies and then hold interests in those companies as capital assests for investment purposes;  1 The NFTE is not yet operating a business and has no prior operating history, but is investing capital into assests with the intent to operate a business other than that of a capital security fund, venture capital fund, eleveraged buyout fund, or any investment purposes;  2 The NFTE is not yet operating a business and has no prior operating history, but is investing capital into assess with the intent to operate a business other than that of a financial Institutio
The term deemed-compliant FFI means, Under the IRS Regulations:  1
4) Collective Investment Vehicles 5 Restricted Fund  The following Entities shall be treated as Exempt Beneficial Owners:  1) Exempt Beneficial Owners other than Funds.  a. Governmental Entity. b. International Organization. c. Central Bank.  2) Funds that Qualify as Exempt Beneficial Owners a. Treaty-Qualified Retirement Fund b. Broad Participation Retirement Fund c. Narrow Participation Retirement Fund d. Pension Fund of an Exempt Beneficial Owner
a. Governmental Entity. b. International Organization. c. Central Bank.  2) Funds that Qualify as Exempt Beneficial Owners a. Treaty-Qualified Retirement Fund b. Broad Participation Retirement Fund c. Narrow Participation Retirement Fund d. Pension Fund of an Exempt Beneficial Owner
Under the Luxembourg IGA, with respect to funds:  3 SEPCAVs 4) ASSEPs, Pension funds subject to the supervision of the Commissariat aux Assurances. 6) Investment Entity Wholly Owned by Exempt Beneficial Owners
The term "Financial Institution" means a Custodial Institution, a Depository Institution, an Investment Entity, or a Specified Insurance Company.  The term FFI or foreign financial institution means, with respect to any entity that Institution (FFI) is not resident in a country that has in effect a Model 1 IGA or Model 2 IGA, any financial institution that is a foreign entity. With respect to any entity that is resident in a country that has in effect a Model 1 IGA or Model 2 IGA, an FFI is any entity that is treated as a Financial Institution pursuant to such Model 1 IGA or Model 2 IGA.
The term Investment Entity means any entity that primarily conducts as a business (or is managed by an entity that conducts as a business) one or more of the following activities or operations for or on behalf of a customer:  1 trading in money market instruments (cheques, bills, certificates of deposit, derivatives, etc.); foreign exchange; exchange, interest rate and index instruments;  2) transferable securities; or commodity futures trading;  3) individual and collective portfolio management; or  4 otherwise investing, administering, or managing funds or money on behalf of other persons.  5) This term shall be interpreted in a manner consistent with similar language set forth in the definition of "financial institution" in the Financial Action Task Force Recommendations.
The term "Non-Participating Financial Institution" means an FI, which is neither a Participating FFI, nor a Deemed Compliant FFI, nor an Exempt Beneficial Owner. The definition includes a Luxembourg Financial Institution or other Partner Jurisdiction Financial Institution treated as a Non-participating Financial Institution pursuant to subparagraph 2(b) of Article 5 of the Luxembourg IGA or the corresponding provision in an agreement between the United States and a Partner Jurisdiction. Pursuant to subparagraph 2(b) of Article 5 of the Luxembourg IGA, a Non-participating Financial Institution is a Financial Institution that has not solved its non-compliance within a period of 18 montain after notification of significant non-compliance is first provided.
The term "Non-Reporting Financial Institution" means any Financial Institution, or other Entity resident in a FATCA partner jurisdiction that is described in Annex II as a Non-Reporting Financial Institution or that otherwise qualifies as a deemed-compliant FFI or an exempt beneficial owner under relevant U.S. Treasury Regulations in effect on the date of signature of the relevant Intergovernmental Agreement.
The term Participating FFI means a Financial Institution that has agreed to comply with the requirements of an FFI agreement, including a Financial Institution described in a Model 2 IGA that has agreed to comply with the requirements of an FFI Agreement. The term Participating FFI also in includes a qualified intermediary branch of a Reporting U.S. Financial Institution, unless such branch is a Reporting Model 1 FFI.
A "Passive NFFE" means any NFFE that is not (i) an Active NFFE, or (ii) a withholding foreign partnership or withholding foreign trust pursuant to relevant U.S. Treasury Regulations.
Under the IRS Regulations, the term registered deemed-compliant FFI, means an FFI registers with the IRS to declare its status, and includes:  1) Local FFIs 2) Non-reporting members of participating FFI groups 3) Qualified collective investment vehicles 4) Restricted funds 5) Qualified credit card issuers 6) Sponsored investment entities and controlled foreign corporations. Under the Luxembourg IGA, there are not registered deemed compliant statuses, all deemed compliant status are non-reporting and therefore do not need to register with the IRS.
The term "Reporting Financial Institution" means a Reporting FATCA Partner Financial Institution or a Reporting U.S. Financial Institution, as the context requires.  In the context of the Luxembourg IGA means a Reporting Luxembourg Financial Institution ("Luxembourg FI")
The notion of Restricted Distributor is not mentioned in the IGA. A restricted distributors is a very small distributor (less than 30 customers of which at least half are related persons), which acts locally; i.e. it has not a fixed place of business outside its country of incorporation. For a full definition, please refer to the U.S. Treasury Regulations at "definition of a restricted distributor".  The term Specified U.S. Person means a U.S. Person, other than:  1) a corporation the stock of which is regularly traded on one or more established securities markets;  2) any corporation that is a member of the same expanded affiliated group as a corporation described in clause (i) above;  3) the United States or any wholly owned agency or instrumentality thereof;  4) any State of the United States, any U.S. Territory, any political subdivision of any of the foregoing, or any wholly owned agency or instrumentality of any one or more of the foregoing;  5) any organization exempt from taxation under section 501(a) of the U.S. Internal Revenue Code or an individual retirement plan as defined in section 7701(a)(37) of the U.S. Internal Revenue Code;

9) any common trust fund as defined in section 584(a) of the U.S. Internal Revenue Code;
10) any trust that is exempt from tax under section 664(c) of the U.S. Internal Revenue Code or that is described in section 4947(a)(1) of the U.S. Internal Revenue Code;
11) a dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any State; or
12) a broker as defined in section 6045(c) of the U.S. Internal Revenue Code.

\* Extract from ABBL - Guidance notes on the implementation of FATCA rules in Luxembourg. Version 1 as of 20 May 2014

## **APPENDIX 5 - CRS Notes**

## The following are the definitions for the purpose of CRS Entity classification:

## **APPENDIX 6 - General Tax Notes**

#### The term "Controlling Persons" means for CRS and IGA Jurisdiction

- (a) The Natural person(s), if any, who ultimately has a controlling ownership interest in a legal person;
- (b) to the extent that there is doubt under (a) as to whether the person(s) with the controlling ownership interest is the beneficial owner(s) or where no natural person exerts control through ownership interests, the identity of the natural person(s) (if any) exercising control of the legal person or arrangement through other means;
- (c) where no natural person is identified under (a) or (b) above, the identity of the relevant natural person who holds the position of senior managing official.
- 2- In the case of a trust, such term means the settlor(s), the trustee(s), the protector(s) (if any), the beneficiary(ies) or class(es) of beneficiaries, and any other natural person(s) exercising <u>ultimate</u> <u>effective control</u> over the trust,
- 3- In the case of a legal arrangement other than a trust, such term means persons in equivalent or similar positions.
- 4- The term "Controlling Persons" must be interpreted in a manner consistent with the Financial Action Task Force Recommendations
- 5- For FI based in a country without an IGA, a passive NFFE has to identify its US substantial Owner(s) which can be an entity, according to the definition of the Internal Revenue Code (section  $\underline{U.S.\ Code} > \underline{Title\ 26} > \underline{Subtitle\ A} > \underline{Chapter\ 4} > \S\ 1473$ )

Power of Attorney - if self-certification completed with POA - please provide a copy of the POA.

## **APPENDIX 7 - SWIFT Set Up Form**

## **Shareholder Services - Swift Set Up form**

Shareholder services information			
Contacts:	Dealer Liaison – General fax number +352 24 60 9500		

Requestor information		
Date of Demand:		
Company name:		
Contact Name:		
Phone number:	F	Fax number:
Email address:		

## Specific Requirements: [...]

Fund Promoter Name	Client Name	SWIFT ID	DN address (XML)

## Signature:

Annexes : Swift setup form Date : Thursday 2 March 2017

## **APPENDIX 8 - SHARE CLASS SELECTION**

# INVESTMENT IN LFPARTNERS INVESTMENT FUNDS – AEON CAUTIOUS FUND

	NUMBER OF SHARES	or AMOUNT	ISIN Code
Shares Class A – EUR Capitalisation of Income			LU1257750718
Shares Class B - GBP Capitalisation of Income			LU1257750809
Shares Class C - USD Capitalisation of Income			LU1257750981