

Mailing Address
C/o Apex Fund Services (Ireland) Limited
Transfer Agency Department
2nd Floor, Block 5
Irish Life Centre
Abbey Street Lower
Dublin D01 P767
Ireland
Tel: + 353 1 411 2949
Email: transfer.agency@apexfs.com

Instructions

For initial subscriptions for shares you must complete the Application Form and post it to the address above, with a scanned copy also to be sent by email to the email address above.

Failure to provide the original 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 by way of a signed authorized instruction in writing or by electronic means, stating your registration details and the amount to be invested. The Additional Subscription Form will be provided separately for completion.

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 the signing mandate outlined in the authorised signatory list.

Any future changes to the original account details must be received in original format and signed in accordance with the signing mandate outlined in the authorised signatory list, in the case of a company, on corporate letterhead, and in the case of retail applicants, all account signatories must authorise every instruction.

Sephira GEM Absolute Return UCITS Fund

Currency	USD
Correspondent Bank	The Northern Trust International Banking Corporation, New Jersey, USA
SWIFT Code	CNORUS33
Beneficiary Bank	The Northern Trust International Banking Corporation, New Jersey, USA
Fedwire ABA	026001122
CHIPS ABA	0112
Beneficiary Name	Sephira GEM UCITS ICAV - Sephira GEM Absolute Return UCITS Fund 233304-20010
Beneficiary Account No	233304-20010
Reference	[Name of Fund – Applicant]

¹: 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)

Currency	EUR
Correspondent Bank	Barclays Bank PLC, Frankfurt
SWIFT Code	BARCDEFF
Beneficiary Bank	The Northern Trust International Banking Corporation, New Jersey
SWIFT Code	CNORUS33
Account Number	0210472800
Beneficiary Name	Sephira GEM UCITS ICAV - Sephira GEM Absolute Return UCITS Fund 669085-20019
Beneficiary Account No	669085-20019
Reference	add applicable reference information - e.g. Subscription and Value Date

Sephira GEM Long Only UCITS Fund

Correspondent Bank	The Northern Trust International Banking Corporation, New Jersey, USA.
SWIFT Code	CNORUS33
Beneficiary Bank	The Northern Trust International Banking Corporation, New Jersey, USA.
Fedwire ABA	026001122
CHIPS ABA	0112
Account Number	
Beneficiary Name	Sephira GEM UCITS ICAV - Sephira GEM Long Only UCITS Fund - 233619-20010
Beneficiary Account No	233619-20010
Reference	[Name of Fund – 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 relevant Settlement Day as set out in the relevant supplement for the relevant Fund (each a “Supplement”) in the currency of the relevant Shares. The Administrator may, at its discretion, accept payment in other currencies, but such payments will be converted into the currency of the relevant Share class at

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the then prevailing exchange rate and any conversion expenses shall be borne by the Shareholder. This may result in a delay in processing the application.

Note: Defined terms in this Application Form shall, unless otherwise indicated, have the same meaning as in the Prospectus for the ICAV and/or the relevant Fund Supplements.

¹: 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)

DETAILS OF EXPECTED INVESTMENT (please complete this section)*Please tick one of the following boxes to confirm whether you invest for your own account or on behalf of another person*

<u>Level of expected total investment:</u>	
Ranging between a currency equivalent to USD 0 to USD 15K	<input type="checkbox"/>
Ranging between a currency equivalent to USD 15K to USD 100K	<input type="checkbox"/>
Ranging between a currency equivalent to USD 100K to USD 1M	<input type="checkbox"/>
Ranging between a currency equivalent to USD 1M to USD 100M	<input type="checkbox"/>
Superior to a currency equivalent to USD 100M	<input type="checkbox"/>
<u>Declaration of investment:</u>	
I/We declare that investments made in the above mentioned Fund are made (please tick the box if applicable):	
<ul style="list-style-type: none"> on my/our own behalf on behalf of our client(s) 	<input type="checkbox"/> <input type="checkbox"/>
Printed name of the investor/authorised signatory	

Signature _____	

Details of Investment:

The Applicant, having received and read a copy of the Prospectus of Sephira GEM UCITS ICAV (the "ICAV") and the relevant sub-fund (each a "Fund") Supplement, hereby applies to invest in the ICAV, as indicated in the table below:

Fund Name	Share Class	Currency	Number of Shares	Value of Subscription

Should you have any questions, please contact the Administrator, Apex Fund Services (Ireland) Limited, 2nd Floor, Block 5, Irish Life Centre, Abbey Street Lower, Dublin D01 P767, Ireland. Telephone: + 353 1 411 2949, Email: transfer.agency@apexfs.com

¹: 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)

Account Registration Details	
Registered Name	
Account Designation (if any)	
Shareholder Type ¹	
Occupation (if individual) or Nature and purpose of business activity (if entity)	
Source of funds for initial investment (please tick multiple boxes if appropriate)	<div> <input type="checkbox"/> Inheritance <input type="checkbox"/> Gift <input type="checkbox"/> Sale of Business </div> <div> <input type="checkbox"/> Salary <input type="checkbox"/> Pension <input type="checkbox"/> Investment income </div> <div> <input type="checkbox"/> Sale of assets (please specify) <input type="checkbox"/> Lottery </div> <div> <input type="checkbox"/> Other (please specify) </div> <p><i>Further supporting documentation may be requested if deemed necessary to verify the above information.</i></p>
Source of wealth, ie aggregation of accumulated wealth (please tick multiple boxes if appropriate)	<div> <input type="checkbox"/> Inheritance <input type="checkbox"/> Gift <input type="checkbox"/> Sale of Business </div> <div> <input type="checkbox"/> Salary <input type="checkbox"/> Pension <input type="checkbox"/> Investment income </div> <div> <input type="checkbox"/> Sale of assets (please specify) <input type="checkbox"/> Lottery </div> <div> <input type="checkbox"/> Other (please specify) </div> <p><i>Further supporting documentation may be requested if deemed necessary to verify the above information.</i></p>
Remitting Bank Details: <p>Payment of redemption proceeds/other payments due to investors will be made to the same account from which the subscription monies are remitted</p> <p>Payments will only be made to a bank account held in the name of the registered shareholder. No Third Party Payments will be made. <u>Redemptions will not be processed on non cleared/verified accounts.</u></p> <p><u>Both</u> IBANS & SWIFT (BIC) Codes should be quoted for all banks within the EU/EEA.</p> <p>Amendments to investors' payment instructions will only be effected upon receipt of an original instruction which has been duly authorised. In the case of joint accounts, instructions will only be made upon receipt of instruction duly signed by all applicants.</p> <p>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.</p>	
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			
Registered Address <i>PO or C/O will not be accepted</i>			
Mailing Address (if different)			
Contact Name			
Contact Details	Telephone		Email
	Telephone		Email

Dividend Option (please tick if relevant)		Please Tick
Reinvest Option	automatic purchase of additional shares of the same class equivalent to monthly dividends	
Cash option	pay all dividends to the bank account listed above	

Please note the "Dividend Option" section is only applicable for Distributory Clauses in circumstances where the Prospectus and relevant Supplement allows such an option.

Should this section not be completed, dividends will be automatically reinvested in additional shares

Joint Applicant(s)

Details of up to 3 additional holders may be added to the application. Please complete details in block capitals below.

First additional applicant details				
Registered Name				
Occupation (if individual or joint account) or Nature of purpose of entity (if entity)				
Source of funds for initial investment (please tick multiple boxes if appropriate)	<div> <input type="checkbox"/> Inheritance <input type="checkbox"/> Gift <input type="checkbox"/> Sale of Business </div> <div> <input type="checkbox"/> Salary <input type="checkbox"/> Pension <input type="checkbox"/> Investment income </div> <div> <input type="checkbox"/> Sale of assets (please specify) <input type="checkbox"/> Lottery </div> <div> <input type="checkbox"/> Other (please specify) </div> <p><i>Further supporting documentation may be requested if deemed necessary to verify the above information.</i></p>			
Source of wealth, ie aggregation of accumulated wealth (please tick multiple boxes if appropriate)	<div> <input type="checkbox"/> Inheritance <input type="checkbox"/> Gift <input type="checkbox"/> Sale of Business </div> <div> <input type="checkbox"/> Salary <input type="checkbox"/> Pension <input type="checkbox"/> Investment income </div> <div> <input type="checkbox"/> Sale of assets (please specify) <input type="checkbox"/> Lottery </div> <div> <input type="checkbox"/> Other (please specify) </div> <p><i>Further supporting documentation may be requested if deemed necessary to verify the above information.</i></p>			
Registered Address <i>PO or C/O will not be accepted</i>				
Contact Name				
Contact Details	Telephone		Email	

Second additional applicant details	
Registered Name	
Occupation (if individual or joint)	

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<i>account) or Nature of purpose of entity (if entity)</i>				
Source of funds for initial investment (please tick multiple boxes if appropriate)	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"><input type="checkbox"/> Inheritance</div> <div style="width: 33%;"><input type="checkbox"/> Gift</div> <div style="width: 33%;"><input type="checkbox"/> Sale of Business</div> <div style="width: 33%;"><input type="checkbox"/> Salary</div> <div style="width: 33%;"><input type="checkbox"/> Pension</div> <div style="width: 33%;"><input type="checkbox"/> Investment income</div> <div style="width: 33%;"><input type="checkbox"/> Sale of assets (please specify)</div> <div style="width: 33%;"><input type="checkbox"/> Lottery</div> <div style="width: 33%;"><input type="checkbox"/> Other (please specify)</div> </div> <p><i>Further supporting documentation may be requested if deemed necessary to verify the above information.</i></p>			
Source of wealth, ie aggregation of accumulated wealth (please tick multiple boxes if appropriate)	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"><input type="checkbox"/> Inheritance</div> <div style="width: 33%;"><input type="checkbox"/> Gift</div> <div style="width: 33%;"><input type="checkbox"/> Sale of Business</div> <div style="width: 33%;"><input type="checkbox"/> Salary</div> <div style="width: 33%;"><input type="checkbox"/> Pension</div> <div style="width: 33%;"><input type="checkbox"/> Investment income</div> <div style="width: 33%;"><input type="checkbox"/> Sale of assets (please specify)</div> <div style="width: 33%;"><input type="checkbox"/> Lottery</div> <div style="width: 33%;"><input type="checkbox"/> Other (please specify)</div> </div> <p><i>Further supporting documentation may be requested if deemed necessary to verify the above information.</i></p>			
Registered Address <i>PO or C/O will not be accepted</i>				
Contact Name				
Contact Details	Telephone		Email	

Third additional applicant details				
Registered Name				
Occupation <i>(if individual or joint account) or Nature of purpose of entity (if entity)</i>				
Source of funds for initial investment (please tick multiple boxes if appropriate)	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"><input type="checkbox"/> Inheritance</div> <div style="width: 33%;"><input type="checkbox"/> Gift</div> <div style="width: 33%;"><input type="checkbox"/> Sale of Business</div> <div style="width: 33%;"><input type="checkbox"/> Salary</div> <div style="width: 33%;"><input type="checkbox"/> Pension</div> <div style="width: 33%;"><input type="checkbox"/> Investment income</div> <div style="width: 33%;"><input type="checkbox"/> Sale of assets (please specify)</div> <div style="width: 33%;"><input type="checkbox"/> Lottery</div> <div style="width: 33%;"><input type="checkbox"/> Other (please specify)</div> </div>			

¹: 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)

multiple boxes if appropriate)	<i>Further supporting documentation may be requested if deemed necessary to verify the above information.</i>
Source of wealth, ie aggregation of accumulated wealth (please tick multiple boxes if appropriate)	<div> <input type="checkbox"/> Inheritance <input type="checkbox"/> Gift <input type="checkbox"/> Sale of Business </div> <div> <input type="checkbox"/> Salary <input type="checkbox"/> Pension <input type="checkbox"/> Investment income </div> <div> <input type="checkbox"/> Sale of assets (please specify) <input type="checkbox"/> Lottery </div> <div> <input type="checkbox"/> Other (please specify) </div> <p><i>Further supporting documentation may be requested if deemed necessary to verify the above information.</i></p>
Registered Address <i>PO or C/O will not be accepted</i>	
Contact Name	

Contact Details	Telephone		Email	
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**** Correspondence will only be sent to the first named applicant/correspondence address. Additional applicants will be required to provide confirmation of residential address details for anti-money laundering verification purposes.**

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ULTIMATE ECONOMIC BENEFICIARY OWNER DECLARATION – TO BE COMPLETED WHERE THE INVESTOR(S) IS/ARE NOT A NATURAL PERSON

We confirm the below in regards to *[Insert Registered Investor Name]* (the “Applicant”), invested in *[Insert Fund Name]*.

Section 1 – Please confirm regarding ownership of Applicant

One or more Natural Person(s) (Individual) owns/controls directly or indirectly 25% or more of the investment as beneficial owner.

☐

Yes - provide details of the natural person(s) identified in the space provided below and proceed to section 3.

☐

No - proceed to section 2.

Full Name: _____

Date of Birth: _____

Place of birth:
(city, country) _____

Registered address:
(street, city, country of residence) _____

Nationality (all if several): _____

National ID number: _____

Percentage Holding (directly or indirectly 25% or more): _____

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

Section 2 - Please confirm regarding control of the Applicant

Please provide details of one or more Natural Person(s) (Individual) with significant responsibility for managing the Applicant (e.g. a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, or Treasurer) or any other individual who regularly performs similar functions.

Full Name: _____

Date of Birth: _____

Place of birth:
(city, country) _____

Registered address:
(street, city, country of residence) _____

Nationality (all if several): _____

National ID number: _____

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

Section 3

☐

Tick this box if at least one of the individuals mentioned in section 1 or 2 (i.e. the Beneficial Owner or Controlling Person) or any authorised individual for the Applicant is considered a “Politically Exposed Person” (PEP)¹.

¹ See **Politically Exposed Persons** below

Full Name: _____

Date of Birth: _____

Position / name of entity _____

Place of birth (city, country): _____

Registered address:
(street, city, country of residence) _____

Nationality (all if several): _____

National ID number: _____

If there are any subsequent changes to the ownership or control structure set out above, we shall inform Apex immediately and supply such information as Apex requires in order to establish and prove the submitted details.

We confirm that we are not aware of any activities on the part of the Applicant that lead us to suspect that the beneficial owners are or have been involved in criminal conduct of money laundering. Should we subsequently become suspicious of any such activity then, subject to any legal constraints, we shall inform Apex and/or the relevant regulatory authorities accordingly.

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

Authorised Signatory

Authorised Signatory

Return of Values (Investment Undertakings) Regulations 2013

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 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: _____

Any one of the following additional documents is required to verify the TIN or PPS Number (either an original or a copy will suffice):

- P60
- P45
- P21 Balancing Statement
- Payslip (where employer is identified by name or tax number)
- Drug Payment Scheme Card
- Tax Assessment
- Tax Return Form
- PAYE Notice of Tax Credits
- Child Benefit Award Letter / Book
- Pension book
- Social Services Card
- Public Services Card

In addition, printed documentation issued by the Irish Revenue Commissioners or the Department of Social Protection which includes your name, address and tax reference number is also acceptable.

In the case of joint account holders, the additional documentation is required for each Applicant.

Your personal information will be handled by the Administrator, the ICAV or its duly appointed delegates as Data Processor for the ICAV in accordance with the Data Protection Acts 1988 to 2018. Information provided herein will be processed for the purposes of complying with the Regulations and this may include disclosure to the Irish Revenue Commissioners.

Excepted Share Holders	
Share Holders	Taxes Consolidation Act 1997 reference
The following entities will constitute Excepted Share Holders provided the Fund has obtained a duly completed appropriate declaration:	
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)(l)
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 shareholder in respect of whom the Fund has obtained a completed non-resident declaration or where the Fund has adopted the Equivalent Measures Regime	739D(7) 739D(7B)
A shareholder who holds their shares in a recognised clearing system	739B

Politically Exposed Persons

Please complete EITHER Section A or B below, with reference to the definitions below

A Politically-Exposed Person (“PEP”) is an individual who has at any time in the preceding 12 months been, entrusted with a prominent public function. This includes the following individuals (but excluding any middle ranking or more junior official):

- a. a “specified official”*
- b. a member of the administrative, management or supervisory body of a state-owned enterprise;

*A “specified official” is (including any such officials in an institution of the European Communities or an international body):

- (a) heads of State, heads of government, ministers and deputy or assistant ministers;
- (b) members of parliament or of similar legislative bodies;
- (c) members of the governing bodies of political parties;
- (d) members of supreme courts, of constitutional courts or of other high-level judicial bodies, the decisions of which are not subject to further appeal, except in exceptional circumstances;
- (e) members of courts of auditors or of the boards of central banks;
- (f) ambassadors, chargés d'affaires and high-ranking officers in the armed forces;
- (g) members of the administrative, management or supervisory bodies of State-owned enterprises;
- (h) directors, deputy directors and members of the board or equivalent function of an international organisation.

Note: No public function referred to in points (a) to (h) shall be understood as covering middle-ranking or more junior officials.

- An immediate family member of a PEP includes any of the following persons:
 - a. any spouse of the PEP;
 - b. any person who is considered to be equivalent to a spouse of the PEP under the national or other law of the place where the person or PEP resides;
 - c. any child of the PEP;
 - d. any spouse of a child of the PEP;
 - e. any person considered to be equivalent to a spouse of a child of the PEP under the national or other law of the place where the person or child resides;
 - f. any parent of the PEP;
 - g. any other family member of the PEP who is of a class prescribed by the Minister for Justice under section 37(11) of the Criminal Justice (Money Laundering and Terrorist Financing) Act 2010 (as amended).

A close associate of a PEP includes any of the following persons

- a. any individual who has joint beneficial ownership of a legal entity or legal arrangement, or any other close business relations, with the PEP;
- b. any individual who has sole beneficial ownership of a legal entity or legal arrangement set up for the actual benefit of the PEP.

As an example, a “beneficial owner” of a body corporate is any individual who (other than a company having securities listed on a regulated market):

- a. 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 of the body; or
- b. otherwise exercises control over the management of the body.

SECTION A: TO BE COMPLETED ONLY IF THE PEP RULES APPLY WITH REFERENCE TO THE ABOVE DEFINITIONS

the application is being made by a PEP / immediate family member of a PEP / close associate of a PEP

OR

the applicant has a beneficial owner who is a PEP / immediate family member of a PEP / close associate of a PEP

OR

the application is being made for the benefit of a PEP / immediate family member of a PEP / close associate of a PEP

OR

it is intended to transfer the shares to a PEP / immediate family member of a PEP / close associate of a PEP

Name of PEP		Address of PEP	
Office of PEP		Relationship of Applicant or Applicant's Beneficial Owner to PEP	

Source of Wealth of the PEP (e.g. Income from employment, Income from company business, inheritance, etc)

- | | | |
|--|----------------------------------|--|
| <input type="checkbox"/> Inheritance | <input type="checkbox"/> Gift | <input type="checkbox"/> Sale of Business |
| <input type="checkbox"/> Salary | <input type="checkbox"/> Pension | <input type="checkbox"/> Investment income |
| <input type="checkbox"/> Sale of assets (please specify) | <input type="checkbox"/> Lottery | |
| <input type="checkbox"/> Other (please specify) | | |

Further supporting documentation may be requested if deemed necessary to verify the above information.

SECTION B: PLEASE TICK BOX BELOW IF THE PEP RULES DO NOT APPLY WITH REFERENCE TO THE DEFINITIONS ABOVE:

☐

I/we confirm that the application is NOT being made by a PEP / immediate family member of a PEP / close associate of a PEP
AND

the applicant does not have a beneficial owner who is a PEP / immediate family member of a PEP / close associate of a PEP
AND

the application is NOT being made for the benefit of a PEP / immediate family member of a PEP / close associate of a PEP
AND

it is NOT intended to transfer the shares to a PEP / immediate family member of a PEP / close associate of a PEP

US Person Confirmation

Please complete EITHER SECTION A OR SECTION B as applicable

SECTION A: PLEASE TICK BOX AND DELETE AS APPLICABLE IF THE STATEMENT BELOW IS CORRECT

☐

I/We confirm that I am/we are a US Person (as defined in the Prospectus) and am/are acquiring Shares in the Fund on behalf of, or for the benefit of, a US Person, OR I/we intend to transfer any Shares which I/we may purchase to any US Person.

PLEASE SUPPLY A COPY OF THE US INTERNAL REVENUE SERVICE FORM W-9 OR AN ORIGINAL W-8 BEN IF THE BENEFICIAL OWNER IS A NON-US PERSON.

SECTION B: PLEASE TICK BOX AND DELETE AS APPLICABLE IF THE STATEMENT BELOW IS CORRECT

☐

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

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. ☐

Please enter name(s) of PPIU _____

Delete * as appropriate

1. Ability to Purchase Shares

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

I/We confirm that this application is in compliance with all applicable laws and regulations.

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

For purposes of this representation, an “affiliate” is any person controlling, controlled by or under common control with the Fund or any of its investment adviser(s) (including the Manager, Investment Manager or the Investment Adviser), including by reason of having the power to exercise a controlling influence over the management or policies of the Fund or its investment adviser(s) (including the Manager, the Investment Manager or the Investment Adviser).

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

2. Application Form

I/We acknowledge that this application constitutes the agreement under which I/we agree to subscribe for shares on the ICAV and shall be governed by the laws of Ireland. I/we irrevocably agree that the courts of the Republic of Ireland are to have exclusive jurisdiction to settle any disputes which may arise out of or in connection with this Application Form, the Prospectus, the relevant Supplement or the acquisition of Shares and that accordingly any suit, action or proceedings arising out of or in connection with this Application Form, the Prospectus, the relevant Supplement or the acquisition of shares shall be brought in such courts. I/We hereby waive, to the extent not prohibited by applicable law, any claim that I/we am not/are not subject personally to the jurisdiction of such courts, that any such proceedings brought in such courts is improper or that this Application Form, the Prospectus, the relevant Supplement or the subject matter hereof or thereof, may not be enforced in or by such a court.

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, including either to sell or tender to the ICAV for redemption a sufficient number of Shares to allow the representations or warranties to be made.

I/we hereby authorise the ICAV and the Administrator to retain all documents provided by me/us in relation to my/our investment in the Fund for such period of time as may be required by Irish law, but not less than five years after the period of investment has ended.

3. Receipt and Consideration of Fund Documentation

By signing this Application Form, I/we acknowledge that *I/we have viewed, reviewed and understood the KIID/PRIIPs 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, the relevant Supplement and Instrument and where applicable the most recent annual and semi-annual accounts of the ICAV, hereby confirm that this application is based solely on the terms thereof and the material contracts therein referred to.

I/We undertake to observe and be bound by the provisions of the Prospectus, the relevant Supplement and Instrument 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 hereby certify that I am/we are aware of the risks involved in the proposed investment as set out in the Prospectus and/or the relevant Supplement and I/we am/are capable of evaluating the merits and risks of an investment in the ICAV.

I/we also acknowledge that I/we* will read further potential issuances of applicable KIID/PRIIPs before any subsequent investment that I/we* wish to make in the relevant shares of such Class(es).

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

Whenever I/we* act as an intermediary, I/we* hereby undertake that I/we* will provide the KIID/PRIIPs for the respective share classes to my/our* Clients in good time before any subscription in the relevant shares of such Class(es). I/We shall maintain records of my/our provision of the KIID/PRIIPs to my/our clients and shall provide such records to the ICAV, or its colleagues, upon request.

Delete * as appropriate

4. Payment for Shares

I/We understand that this application must be completed in its entirety and payment made and sent to the Administrator in accordance with deadlines laid down in the Prospectus and the relevant Supplement, along with any additional documentary evidence required by the Administrator.

I/We hereby agree to indemnify and keep indemnified the ICAV, Manager, Investment Manager, Administrator, Depositary and Distributor (together "**the ICAV and its Service Providers**") against any loss, liability, cost or expense (including without limitation legal fees, taxes and penalties) incurred or suffered by the ICAV or its Service Providers on reliance on representations (oral or written) that subscription payment arrangements have been put in place by me/us. I/we further agree to indemnify and to keep the ICAV and its Service Providers indemnified against any loss arising directly or indirectly in relation to my/our late and/or failed settlement arrangements.

I/We acknowledge that the ICAV reserves the right to cancel without notice any contract for which payment has not been received by the relevant settlement date and to recover any losses incurred.

5. Joint Applicants – Survivorship

(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).

6. Umbrella Cash Account

I/We acknowledge that the ICAV may operate a number of cash accounts in different currencies in its name into which (i) subscription monies received from investors who have subscribed for Shares are deposited and held until Shares are issued as of the relevant Dealing Day; and (ii) redemption monies due to investors who have redeemed Shares are deposited and held until paid to the relevant investors; and (iii) dividend payments owing to Shareholders are deposited and held until paid to such Shareholders (hereinafter referred to as "**Umbrella Cash Account(s)**"). I/We acknowledge that all subscriptions, redemptions and dividends payable to or from each Fund of the ICAV may be channelled and managed through the Umbrella Cash Account(s). For the avoidance of doubt, I/we acknowledge such monies in respect of the Fund will be treated as an asset of the Fund and will not be held in an account that is subject to the Central Bank (Supervision and Enforcement) Act 2013 (Section 48(1)) Investor Money Regulations 2015 for Fund Service Providers. Accordingly, such monies will not benefit from the application of any investor money protection rules (i.e. the monies will not be held on trust as investor monies for the Subscriber). Subscribing investors will be unsecured creditors of the Fund with respect to the subscription amount until the corresponding Shares are issued on the relevant Dealing Day.

I/We acknowledge that the following risks arise in relation to the operation of a Umbrella Cash Account:-

- (a) in the event that subscription monies received and held in an Umbrella Cash Account are lost (to include in the event of the insolvency of the bank with which such monies are held) prior to the issue of Shares to the relevant investor as of the relevant Dealing Day, the ICAV on behalf of the Fund may be obliged to make good any losses suffered by the investor (in its capacity as a general creditor of the Fund), in which case such loss will need to be discharged out of the assets of the Fund and therefore will represent a diminution in the net asset value per share for existing shareholders of the Fund;
- (b) in the event that redemption or dividend monies held in a Umbrella Cash Account are lost (to include in the event of the insolvency of the bank with which such monies are held) prior to payment to the relevant investor/Shareholder, the ICAV on behalf of the Fund may be obliged to make good any losses suffered by the investor/Shareholder (in its capacity as a general creditor of the Fund), in which case such loss will need to be discharged out of the assets of the Fund and therefore will represent a diminution in the net asset value per Share for existing shareholders of the Fund;
- (c) in the event of an insolvency of the ICAV or the Fund, there is no guarantee that the ICAV or the Fund will have sufficient funds to pay unsecured creditors in full. Investors who have forwarded subscription monies in advance of a Dealing Day and which are held in the Umbrella Cash Account and investors/Shareholders due redemption/dividend monies which are held in the Umbrella Cash Account will rank equally with all other unsecured creditors of the Fund and will be entitled to a pro-rata share of monies which are made available to all unsecured creditors by the insolvency practitioner. Therefore, in such circumstances, the investor subscribing for Shares may not recover all monies originally paid into

the Umbrella Cash Account in relation to the application for Shares and the redeeming investor entitled to redemption monies and the Shareholder entitled to a dividend payment may not recover all monies originally paid into the Umbrella Cash Account for onward transmission to that investor/Shareholder.

7. Anti-Money Laundering

I/We acknowledge that, owing to anti-money laundering requirements operating within their respective jurisdictions, the ICAV, its Directors, the Administrator, the 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. The ICAV, its Directors, the Administrator, the 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 acknowledge that redemptions will not be processed on non-cleared or non-verified accounts.

I/We understand and accept that the ICAV reserves the right to compulsorily repurchase and cancel any Shares held by me/us where I/we fail to provide the necessary documentation to allow the ICAV or its Service Providers to comply with their respective obligations under applicable anti-money laundering and counter terrorist financing regulations.

I/We acknowledge that the ICAV or its Service Providers also reserve the right to delay or refuse to make any redemption payment or distribution to a Shareholder without notice if any of the ICAV or its Service Providers suspects or is advised that the payment of any redemption or distribution moneys to such Shareholder might result in a breach or violation of any applicable anti-money laundering or other laws or regulations including financial sanctions laws or regulations by any person in any relevant jurisdiction, or such refusal is considered necessary or appropriate to ensure the compliance by the ICAV or its Service Providers with any such laws or regulations in any relevant jurisdiction. I/We hereby hold the ICAV and its Service Providers harmless and indemnify them against any loss arising as a result of a failure to process the application if such information has been required and has not been provided by me/us and from any misrepresentation or breach of any warranty, condition, covenant or agreement set forth herein or in any document delivered by me/us to the ICAV or its Service Providers. I/We shall notify the Administrator immediately if any of the representations herein made are no longer accurate and complete in all respects.

I/We will comply with such beneficial ownership notices issued by the ICAV or its Service Provider on its behalf seeking beneficial ownership information.

I/We understand that it is an offence where I/we fail to comply with such beneficial ownership notices or where I/we make a false statement in respect of same.

I/We understand that where I/we are a beneficial owner of the ICAV, I/we must notify the ICAV where the ICAV's beneficial ownership register does not contain my/our details and where I/we have not received a beneficial ownership notice from the ICAV.

Where I/We meet the definition of a beneficial owner as defined in the Beneficial Ownership Regulations I have completed the table set out in this Application Form.

8. Acting on Instructions and Limitation of Liability

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 and the ICAV and agree to keep each of them indemnified against any loss of any nature whatsoever arising to any of them as a result of either of them acting upon instructions given in written form by me/us, i.e. telephone instructions confirmed by me/us in writing or by electronic means. 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 hereby agree to indemnify and hold harmless the ICAV, the Manager the Administrator, the Investment Manager, the Investment Adviser and the Distributor and their respective directors, officers and employees against any loss, liability, cost or expense (including without limitation reasonable legal fees) which may result directly from any misrepresentation by me/us or breach by me/us of any warranty, condition, covenant or agreement set forth herein, or in any document delivered by me/us to the ICAV or the Administrator or from my/our failure to disclose any relevant details or provide all the information requested. In the case of delay or failure to provide satisfactory information, I/We acknowledge that each of the ICAV and the Administrator may take such action (including declining to accept an application) as they think fit.

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

I/We hereby represent and warrant that I/we have the legal capacity, power and authority to execute and deliver this Application Form and (i) either (a) I/We am/are neither a US Person nor purchasing the Shares on behalf of or for the account of a US Person, nor with a view to the offer, sale, delivery, directly or indirectly, of the Shares in the United States, its territories, possessions and other areas subject to its jurisdiction, or (b) I/We have duly completed and submitted the Application Form for U.S. Persons; (ii) either (a) I/We am/are neither a Benefit Plan Investor nor purchasing the Shares on behalf of or for the account of a Benefit Plan Investor, or (b) I/We am/are a Benefit Plan Investor or purchasing the Shares on behalf of or for the account of a Benefit Plan Investor and I/We have duly completed and submitted the Application Form for U.S. Persons; and (iii) I/We have not been convicted of any criminal activities and the subscription monies are not the proceeds of criminal misconduct and the funds presented to complete this transaction are from legitimate sources in connection with my/our regular and permitted business activities.

9. Return of Values

For the purposes of the Return of Values (Investment Undertakings) Regulations 2013, I/we confirm that I/we are not Irish resident or ordinarily Irish resident(as defined in the Prospectus) and should I/we become resident in Ireland I/we will so inform you, in writing, accordingly.

I/We have completed the relevant non-Irish resident declarations accordingly.

10. US Persons

I/We confirm that either: *(Please check the appropriate box.)*

☐ I/we are not U.S. Person(s) as defined in the Prospectus and I/we certify that the Shares applied for are not being acquired for the direct or indirect benefit of any U.S. Person and I/we will not, subject to the conditions set forth in the Prospectus, sell or offer to sell or transfer Shares to a U.S. Person. I/We further confirm and warrant that I/we have executed this application form outside the United States (unless I/we am/are a professional fiduciary acting in a discretionary capacity for the account of a person who is not a U.S. Person other than an estate or trust).

☐ I/we are a U.S. Person(s) as defined in the Prospectus or I/we are acquiring the Shares for the direct or indirect benefit of a U.S. Person, and I/we further certify that I/we have also duly completed and submitted the Application Form for U.S. Persons which is available from the Investment Manager.

11. Controlling Person Status

I/We confirm that I/we are ☐, or I/we are not ☐ *(Please check the appropriate box)* a person (including an entity) that has discretionary authority or control with respect to the assets of the ICAV or a person that provides investment advice for a fee (direct or indirect) with respect to the ICAV's assets, or an "affiliate" of such a person. For purposes of this representation, an "affiliate" is any person directly or indirectly, through one or more intermediaries, controlling, controlled by or under common control with the ICAV or any of their investment advisors (including the Manager and the Investment Manager), and control with respect to a person (other than an individual) means the power to exercise a controlling influence over the management or policies of the ICAV or its investment advisor(s) (including the Manager and the Investment Manager).

12. Electronic Communications

I/We consent to any notice or other document to be sent by the ICAV or the Transfer Agent 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.

13. GDPR

I/We acknowledge, agree and understand the contents of the privacy notice at the Appendix, as amended and notified to me/us from time to time (the “**Privacy Notice**”). Where I/We are not a natural person, I/We agree to provide the Privacy Notice to my/our directors, officers, employees, owners and any other related persons whose personal data may be shared with the Manager, the Investment Manager, the Distributor and any other service providers of the ICAV and its/their affiliates in relation to my/our proposed investment in the ICAV.

14. FATCA/CRS

I/We hereby acknowledge and accept that the ICAV and/or the Administrator, for purposes of FATCA and OECD Common Reporting Standard (“**CRS**”) compliance, may be required to disclose personal and financial account data relating to Reportable Accounts and, in certain cases, their Controlling Persons and nonparticipating FFIs (as defined in FATCA) to the US Internal Revenue Service in the case of FATCA and to the Irish Revenue Commissioners in the case of the CRS (who will in turn disclose such information to the tax authorities in other CRS participating jurisdictions where I/we are resident). In addition, the ICAV and/or its delegate may be required to disclose personal data regarding individuals in CRS jurisdictions to the Irish Revenue Commissioners and/or the tax authorities of the country or countries in which the financial accounts are maintained and subsequently exchanged with tax authorities of another country or countries in which a Shareholder may be resident pursuant to the CRS. Further information can be obtained from the Automatic Exchange of Information webpage of revenue.ie (www.revenue.ie/en/business/aeoi).

15. General

I/We acknowledge that the Directors expect to dispense with the annual general meeting of the ICAV in each year, unless Shareholders are otherwise notified.

I/We acknowledge and agree that any notations, alterations, strike-outs, addenda, inserts or verbiage purporting to amend the terms of this Application Form shall not be effective unless explicitly agreed to by the ICAV or its agents. Absent explicit agreement, the issuance of a trade confirmation or contract note shall not be construed as the ICAV’s acceptance or agreement to any such purported amendments.

I/We hereby acknowledge that the Manager has delegated performance of investment management services to the Investment Manager pursuant to the Investment Management Agreement, a copy of which is available upon request. I/We acknowledge that neither the Investment Manager, or any of their respective affiliates, members, partners, officers, and employees, including persons formerly serving in such capacities (in each case, an “Indemnatee”) will be liable to any Shareholder or the Fund for any costs, losses, claims, damages, liabilities, expenses (including reasonable legal and other professional fees and disbursements), judgments, fines or settlements (collectively, “Indemnified Losses”) arising out of, related to or in connection with any act or omission of such Indemnatee taken, or omitted to be taken, in connection with the Fund, except for any Indemnified Losses arising out of, related to or in connection with any act or omission that is found by a court of competent jurisdiction upon entry of a judgment to be directly attributable to the bad faith, gross negligence, wilful misconduct or fraud of such Indemnatee.

I/We further acknowledge that in circumstances where any Shareholder or the Fund incurs Indemnified Losses arising from the negligence (and not the gross negligence) of an Indemnatee, no action or claim for such Indemnified Losses may be taken against the Manager by the Fund provided that such Indemnified Losses are not due to the negligence of the Manager in its performance of its duties under the Management Agreement.

I/We acknowledge that the assets and liabilities of the Fund are segregated from those of any other sub-fund of the ICAV (each a “**Sub-Fund**”). The Subscriber agrees that its recourse in respect of any loss, liability, cost or expense of any nature whatsoever which may be brought against, suffered or incurred by me/us in respect of its subscription for Shares shall be limited to the Sub-Fund and that:

- (i) I/We shall not seek whether in any proceedings or by any other means whatsoever or wheresoever to have recourse to any assets of any other Fund in the discharge in all or any part of the liability which was incurred on behalf of the Fund;
- (ii) If I/we succeed by any means whatsoever or wheresoever in having recourse to any assets of any other Sub-Fund in the discharge of all or any part of a liability which was incurred on behalf of the Fund, I/we shall be liable to the ICAV for the account of such Sub-Fund to a sum equal to the value of the benefit thereby obtained by me/us; and
- (iii) If I/we succeed in seizing or attaching by any means, or otherwise levying execution against, any assets of another Sub-Fund in respect of a liability which was incurred on behalf of the Fund, I/we shall hold these assets on trust for the Sub-Fund for the account of such Sub-Fund.

Declaration of Residence Outside the Republic of Ireland

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

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

A - Declaration on Own Behalf ☐

- i. I/We* declare that I am/we* are applying for the Shares on my own/our own behalf/on behalf of a company* and that I am/we are/the company* is entitled to the Shares in respect of which this declaration is made and that I am/we are/the company* is not currently an Irish Resident or Irish 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 ☐

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

*Delete as appropriate

AUTHORISATION

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

Signature (1)

Capacity of Authorised Signatory

Name Authorised Signatory (1)

Signature (2)

Capacity of Authorised Signatory

Name Authorised Signatory (2)

Signature (3)

Capacity of Authorised Signatory

Name Authorised Signatory (3)

Signature (4)

Capacity of Authorised Signatory

Name Authorised Signatory (4)

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 application form (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, A COPY OF THE POWER OF ATTORNEY MUST BE FURNISHED IN SUPPORT OF THE SIGNATURE.

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

FINRA New Issues Certifications

FINRA² rules limit participation by certain persons associated with broker/dealers and other financial-type accounts in the profits and losses from New Issues³. Accordingly, the Applicant hereby makes the appropriate disclosure below and the Applicant hereby confirms, and further agrees to furnish such information or documentation the ICAV and/or the Administrator may request to confirm, whether the beneficial owner of the Shares is a Restricted Person.

FINRA Rule 5130 Restricted Person Status

Please tick items (a), (b), and (c), as applicable, to confirm your status under FINRA Rule 5130:

- (a) ☐ **Restricted Persons.** The Applicant is a Restricted Person(s) for purposes of Rule 5130 because the Applicant is (please tick all of sub-items (1) through (6) below that apply):
- (1) ☐ A member of FINRA (a “FINRA member”) or any other broker/dealer;
- (2) ☐ An officer, director, general partner, associated person, or employee of a FINRA member or any other broker/dealer (other than a limited business broker/dealer⁴); or an immediate family member⁵ of any of the foregoing persons or an agent of a FINRA member or any other broker/dealer (other than a limited business broker/dealer) that is engaged in the investment banking or securities business or an immediate family member of such person. If this sub-item (2) is ticked solely because the Subscriber is an immediate family member of one of the persons described above and none of the following applies, please tick this box ☐: the person described above materially supports⁶, or receives material support from, the immediate family member; the person described above is employed by or associated with a FINRA member or an affiliate of a FINRA member that sells New Issues or the person described above has the ability to control the allocation of New Issues;
- (3) ☐ A finder or any person acting in a fiduciary capacity to a FINRA member or any other broker/dealer acting as a managing underwriter, including, but not limited to, attorneys, accountants, and financial consultants; or an immediate family member of any of the foregoing persons if such person materially supports, or receives material support from, the immediate family member;
- (4) ☐ A person who has authority to buy or sell securities for a bank, savings and loan institution, insurance company, investment company, investment adviser, or collective investment account⁷, or an immediate family member of such person that materially supports, or receives material support from, such person;

² The U.S. Financial Industry Regulatory Authority.

³ As defined pursuant to FINRA Rule 5130 to include any initial public offering of an equity security as defined in Section 3(a)(11) of the U.S. Securities Exchange Act of 1934 made pursuant to a registration statement or offering circular.

⁴ “Limited business broker/dealer” means any broker/dealer whose authorisation to engage in the securities business is limited solely to the purchase and sale of investment company/variable contracts securities and direct participation program securities.

⁵ “Immediate family member” means a person’s parents, mother-in-law or father-in-law, spouse, brother or sister, brother-in-law or sister-in-law, son-in-law or daughter-in-law, or child/children, and any other individual to whom the person provides material support.

⁶ “Material support” means directly or indirectly providing more than 25 per cent. of a person’s income in the prior calendar year. Members of the immediate family living in the same household are deemed to be providing each other with material support.

⁷ “Collective investment account” means any hedge fund, investment partnership, investment corporation, or any other collective investment vehicle that is engaged primarily in the purchase and/or sale of securities. “Collective investment account” does not

(5) ☐ A person that (please tick all of sub-items (i) through (vi) below that apply):

If any of the items (i) through (v) below are ticked and the Applicant is a sovereign nation⁸ or a pool of capital or an investment fund or other vehicle owned or controlled by a sovereign nation and created for the purpose of making investments on behalf, or for the benefit, of the sovereign nation, please tick this box: ☐
(Applicants ticking this box will not be considered "Restricted Persons" despite ticking any of the items (i) through (v) below.)

- (i) ☐ is listed, or required to be listed, in Schedule A of a Form BD⁹ (other than with respect to a limited business broker/dealer), except persons identified by an ownership code of less than 10 per cent,
- (ii) ☐ is listed, or required to be listed, in Schedule B of a Form BD (other than with respect to a limited business broker/dealer), except persons whose listing on Schedule B relates to an ownership interest in a person listed on Schedule A identified by an ownership code of less than 10 per cent,
- (iii) ☐ is listed, or required to be listed, in Schedule C of a Form BD, which person meets the criteria described in (i) or (ii) above,
- (iv) ☐ directly or indirectly owns 10 per cent. or more of a public reporting company listed, or required to be listed, in Schedule A of a Form BD (other than a reporting company that is listed on a national securities exchange or is traded on the Nasdaq National Market or other than with respect to a limited business broker/dealer),
- (v) ☐ directly or indirectly owns 25 per cent. or more of a public reporting company listed, or required to be listed, in Schedule B of a Form BD (other than a reporting company that is listed on a national securities exchange or is traded on the Nasdaq National Market or other than with respect to a limited business broker/dealer), or
- (vi) ☐ is an immediate family member of a person specified in any of items (i) through (v) above; or

(6) ☐ An account (including, without limitation, a corporation, trust, limited partnership, or limited liability company) (an "Account") in which one or more Restricted Persons as described in sub-items (1) through (5) above hold, directly or indirectly, a beneficial interest.

(b) ☐ **Exempt Parties.** Regardless of whether item (a) above is ticked, the Applicant is exempt from the prohibitions against purchases and sales of New Issues by Restricted Persons because the Applicant is:

(Please tick one of sub-items (1) through (12) below. A fund of funds Applicant should generally tick (4), (5) or (7). When an Applicant ticks (4) or (5) below, it may be treated as a Restricted Person.)

- (1) ☐ an investment company registered under the 1940 Act;
- (2) ☐ a common trust fund or similar fund as described in Section 3(a)(12)(A)(iii) of the U.S. Securities Exchange Act of 1934 (the "**Exchange Act**") if such fund (i) has investments from 1,000 or more accounts and (ii) does not limit beneficial interests in such fund principally to trust accounts of Restricted Persons;
- (3) ☐ an insurance company general, separate, or investment account, if (i) the account is funded by premiums from 1,000 or more policyholders or, if a general account, the insurance company has 1,000 or more policyholders; and (ii) the insurance company does not limit the policyholders whose premiums are used to

include a legal entity that is beneficially owned solely by any combination of one or more of the following persons: (i) "immediate family members" as defined under FINRA Rule 5130(i)(5); (ii) "family members" as defined under Advisers Act Rule 202(a)(11)(G)-1; or (iii) "family clients" as defined under Advisers Act Rule 202(a)(11)(G)-1 (i.e. a "family investment vehicle"). "Collective investment account" also does not include a legal entity that is beneficially owned by a group of friends, neighbours, business associates, or others that pool their money to invest in stock or other securities and are collectively responsible for making investment decisions (i.e., an "investment club").

⁸ "Sovereign nation" means a sovereign nation or its political subdivisions, agencies or instrumentalities.

⁹ Form BD is the form used to register with the U.S. Securities and Exchange Commission as a broker/dealer.

fund the account principally to Restricted Persons or, if a general account, the insurance company does not limit its policyholders principally to Restricted Persons;

- (4) ☐ an Account in which Restricted Persons (i) hold no more than 10 per cent. of the beneficial interests or (ii) hold more than 10 per cent. of the beneficial interests but receive, in the aggregate, no more than 10 per cent. of any profits or losses from New Issues. Please indicate, as of the date of your Application Form, what percentage of the profits and losses from New Issues are allocated to Restricted Persons: _____ per cent. If this box (4) is ticked, please contact the Administrator with respect to what portion of the investment will relate to non-Restricted Persons and thus may be eligible for New Issues;
- (5) ☐ an Account in which Restricted Persons hold beneficial interests but receive none of the profits or losses from New Issues;
- (6) ☐ a publicly traded entity (other than a broker/dealer or an affiliate of a broker/dealer where such broker/dealer is authorised to engage in the public offering of New Issues either as a selling group member or underwriter) that (i) is listed on a national securities exchange, (ii) is traded on the Nasdaq National Market, or (iii) is a non-U.S. issuer whose securities meet the quantitative designation criteria for listing on a national securities exchange or trading on the Nasdaq National Market;
- (7) ☐ an investment company (such as a fund or collective investment scheme) organised under the laws of a non-U.S. jurisdiction, if (i) the investment company is listed on a non-U.S. exchange for sale to the public or authorised for sale to the public by a non-U.S. regulatory authority, (ii) the investment company has not been formed for the specific purpose of permitting Restricted Persons to invest in New Issues, and (iii) either (a) no person owning more than five per cent. of the shares of the investment company is a Restricted Person, (b) the investment company has 100 or more direct investors, or (c) the investment company has 1,000 or more indirect investors;
- (8) ☐ an ERISA benefits plan that is qualified under Section 401(a) of the Code if such plan is not sponsored solely by a broker/dealer (Subscribers ticking box (8) must contact the Administrator);
- (9) ☐ an employee retirement benefits plan that is not described in (8) above and that is organised under, and governed by, U.S. or foreign laws, provided that such plan or family of plans: (i) has, in aggregate, at least 10,000 plan participants and beneficiaries and \$10 billion in assets; (ii) is operated in a non-discriminatory manner insofar as a wide range of employees, regardless of income or position, are eligible to participate without further amendment or action by the plan sponsor; (iii) is administered by trustees or managers that have a fiduciary obligation to administer the funds in the best interests of the participants and beneficiaries; and (iv) is not sponsored solely by a broker-dealer;
- (10) ☐ a state or municipal government benefits plan that is subject to state and/or municipal regulation;
- (11) ☐ a tax-exempt charitable organisation under Section 501(c)(3) of the Code; or
- (12) ☐ a church plan under Section 414(e) of the Code. (Applicants ticking box (12) must contact the Administrator).
- (c) ☐ **Other Non-Restricted Persons.** The Applicant has not ticked item (a) and/or item (b) above, and the Applicant hereby certifies that the prospective beneficial owner of the Shares subscribed for in this Application Form is not a Restricted Person. (N.B. If two or more persons would be joint beneficial owners of such Shares, this certification may be made only if true with respect to each joint beneficial owner.)

FINRA Rule 5131 Covered Person Status

If the Applicant is:

- (i) subscribing via an Account in which beneficial interests of (i) executive officers and directors of any particular "covered company" (which includes both "public companies" and "covered non-public companies" as defined in footnotes 11 and 12 below), and (ii) persons materially supported by such executive officers and directors, in the aggregate do not exceed 25 per cent; or
- (ii) subscribing via an Account that ticked any of the boxes next to items (b)(1)-(3) or (6)-(12) above,

the Applicant should tick this box ☐ and is not required to complete the remainder of this question.

For Applicants who do not fall within (i) or (ii) above only:

The Applicant is ☐ or is not ☐ (please tick the appropriate box) an executive officer or director¹⁰ of a public company¹¹ or a covered non-public company¹² or a person materially supported¹³ by such executive officer or director (collectively, “Covered Persons”) or an Account in which any Covered Person has a beneficial interest.

If the response is affirmative, list the names of the applicable public companies and covered non-public companies. The Applicant must also indicate the percentage of the Account beneficially owned by Covered Persons in respect of each public company or covered non-public company identified below:

ANTI-MONEY LAUNDERING (KNOW YOUR CUSTOMER REQUIREMENTS) AND ECONOMIC SANCTIONS OBLIGATIONS

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

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

Where the investor is deemed to be high risk, we may require additional documentation in addition to original certified true copies of all documents. Certification requirements are set out in the Schedule.

Section 1. Simplified Due Diligence

A Subscriber qualifies for simplified due diligence from General Identification Requirements (see Section 2 below) when one of the following conditions is met and the Subscriber’s subscription proceeds have originated from an “Approved Country”¹⁴

A. Regulated Financial Institution:

Where the Subscriber is a Regulated Financial Institution regulated by an “Approved Regulator”¹⁵ or is a 100% owned subsidiary of such an entity:

- I. Documentation requirements for entities investing on their own behalf:
 1. Own behalf declaration confirming investing on own behalf (see **DETAILS OF EXPECTED INVESTMENT** above)
 2. Proof of regulation
 3. Copy of the Commercial Register/Certificate of Good Standing
 4. Copy of the authorised signatory list with specimen signatures on company letterhead

¹⁰ For this purpose, an “executive officer or director” includes any (i) person named as an executive officer or director in a U.S. public company’s most recent proxy statement filed with the SEC or in an annual report filed with the SEC on Form 10-K or Form 20-F, (ii) executive officer or director of a non-U.S. company that is registered with the SEC under the U.S. Securities Exchange Act of 1934, as amended (the “Exchange Act”), or (iii) executive officer or director of a covered non-public company. For entities that are not formed as corporations, the term director should be interpreted to include any person who performs similar functions for such entity.

¹¹ A “public company” is any company that is registered under Section 12 of the Exchange Act or files periodic reports pursuant to Section 15(d) thereof.

¹² “Covered non-public company” means any U.S. or non-U.S. non-public company, except for an unaffiliated charitable organization (as defined in FINRA Rule 5131(e)(9)), that has: (i) income of at least \$1 million in the last fiscal year or in two of the last three fiscal years and shareholders’ equity of at least \$15 million; (ii) shareholders’ equity of at least \$30 million and a two-year operating history; or (iii) total assets and total revenue of at least \$75 million in the latest fiscal year or in two of the last three fiscal years.

¹³ “Material support” for this purpose means directly or indirectly providing more than 25 per cent. of a person’s income in the prior calendar year. Persons living in the same household are deemed to be providing each other with material support.

¹⁴ Please refer to the administrator for confirmation of approved countries

¹⁵ Please refer to the administrator for confirmation of approved regulators

5. Copy of the structure chart or shareholders chart, including the % ownership and control
6. Ultimate economic beneficiary owner declaration (see **ULTIMATE ECONOMIC BENEFICIARY OWNER DECLARATION** above) identifying individuals owning/controlling 25% or more

II. Requirements for Regulated Entities investing on behalf of a third Party in addition to point (I):

1. Declaration confirming investing on behalf of a third party (see **DETAILS OF EXPECTED INVESTMENT** above)
2. AML confirmation (see **AML CONFIRMATION FOR NOMINEES / REGULATED FINANCIAL INSTITUTIONS** below)
3. *In some instances a Wolfsberg Questionnaire may be required

B. Nominees:

Where a subscriber is a nominee account with a regulated parent entity:

I. Documentation requirements:

1. Proof of regulation in a low risk Jurisdiction
2. AML confirmation (see **AML CONFIRMATION FOR NOMINEES / REGULATED FINANCIAL INSTITUTIONS** below)
3. *In some instances a Wolfsberg Questionnaire may be required
4. Copy of the authorised signatory list with specimen signatures on company letterhead
5. Copy signatories' ID where they have signed the application form & will place the orders
6. Copy of the Structure chart or shareholders chart, including the % of ownership and controlling
7. Ultimate economic beneficiary owner declaration (see **ULTIMATE ECONOMIC BENEFICIARY OWNER DECLARATION** above) identifying individuals owning/controlling 25% or more

C. Listed Entities and Subsidiaries of Listed Entities:

Where the Subscriber is quoted or listed on an "Approved Market"¹⁶ or Stock Exchange or is a 100% owned subsidiary of such an entity;

I. Documentation Requirements:

1. Confirmation that investing on own behalf (see **DETAILS OF EXPECTED INVESTMENT** above)
2. Proof of listing in a low risk jurisdiction
3. Copy of the authorised signatory list with specimen signatures on company letterhead
4. Copy signatories' ID where they have signed the application form & will place the orders
5. Copy of commercial register/Certificate of good standing
6. Copy of the Structure chart or shareholders chart, including the % of ownership and controlling
7. Ultimate economic beneficiary owner declaration (see **ULTIMATE ECONOMIC BENEFICIARY OWNER DECLARATION** above) identifying individuals owning/controlling 25% or more

II. For subsidiaries and in addition to point (I):

1. Attach proof of listed parent ownership
2. Copy of certificate of incorporation or equivalent for subsidiary
3. Copy of memorandum and articles of association or equivalent constitutional documents for subsidiary

D. Regulated Pension Scheme:

Where the Subscriber is a Regulated Pension Scheme in a low risk Jurisdiction; or where the entity is a state pension scheme in a low risk jurisdiction.

Where information is available online from a reputable source, please provide all of the relevant links at account opening stage.

Documentation Requirements:

1. Proof of regulation in a low risk jurisdiction

¹⁶ Please refer to the Administrator for confirmation of approved stock exchanges

2. Copy of the articles of the pension scheme *where available from a reputable online source, please provide the link to same*
3. Copy of the authorised signatory list with specimen signatures on company letterhead
4. Copy of the Structure chart or shareholders chart, including the % of ownership and controlling
5. Ultimate economic beneficiary owner declaration (see **ULTIMATE ECONOMIC BENEFICIARY OWNER DECLARATION** above) identifying individuals owning/controlling 25% or more
6. Copy ID and proof of address for any person owning/controlling 25% or more of the investment

Section 2. General Identification Requirements: Standard Due Diligence

A. Entities:

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

Corporate Entities (General):

Documentation requirements:

1. Confirmation investing on own behalf
2. Copy of Certificate of Incorporation /Good Standing
3. Copy of Memorandum and Articles of Association or equivalent constitutional documents
4. Copy of the latest financial report or equivalent (If not available, copies of IDs and Proof of address for two directors may be required along with a letter confirming that the company is financially solvent)
5. Copy of the authorised signatory list with specimen signatures on company letterhead
6. Copy of the signatories' IDs who signed the application form & will place orders
7. Copy of the list of Directors/Members/Partners on letterhead paper of the Company
8. Copy ID for at least 2 controllers (where a partnership - one of these must be the GP)
9. Copy of the Structure chart or shareholders chart, including the % of ownership
10. Ultimate economic beneficiary owner declaration (see **ULTIMATE ECONOMIC BENEFICIARY OWNER DECLARATION** above)
 - i. If there is a ultimate beneficial owner with 25% or more shareholding the person must be identified as per section 2 (B)
 - ii. In the case of an Entity, where the Managing Member is not an individual, the entity must also be identified as per requirements in Section 2 (A).

Trusts:

Documentation Requirements:

1. Copy of the latest trust deed
2. Copy Signature List on company letterhead
3. Copy of the IDs of the signatories on the application form/who will place deals on the account
4. Identification and verification of the identity of the Settlor and the Trustee according to their legal forms
5. Identification and verification of the identity of the Protector if any, according to its legal forms
6. Information on the source of wealth of the settlor
7. Copy structure chart/shareholder chart, showing the % ownership and control of all beneficial owners and controllers
8. Ultimate economic beneficiary owner declaration (see **ULTIMATE ECONOMIC BENEFICIARY OWNER DECLARATION** above) - Identifying all individuals owning or controlling any part of the trust if not available within the trust deed/structure chart
9. Copy ID and proof of address (dated within the last 6 months) for any persons owning or controlling any part of the trust

B. Individuals:

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

I. Information Requirements:

1. Full legal name

2. Date of birth
3. Place of birth
4. Residential address, (including country of residence)
5. Nationality
6. Government ID Number
7. source of wealth
8. signature

II. Documentation requirements:

1. Copy of a valid ID document (passport /driver's license or other form of Government issued photo identification) bearing clear picture, expiry date and signature
2. Copy proof of residential address dated within the last six months, in the form of household utility bill or bank statement
3. Completed source of wealth declaration.

AML CONFIRMATION FOR NOMINEES / REGULATED FINANCIAL INSTITUTIONS

_____ [Name of Entity] hereby confirms the following in accordance with the standards of a prudent professional and the applicable laws and regulations:

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

Authorized Signatory

Authorized Signatory

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 2018). 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 on FATCA or CRS please refer to the Irish Revenue or the OECD website at:

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

<http://www.oecd.org/tax/automatic-exchange/> in the case of CRS only.

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

Account holders that are Individuals or Controlling Persons should not complete this form and should complete the form entitled "Individual (including Controlling Persons) Self-Certification for FATCA and CRS".

*(Mandatory fields are marked with an *)*

Investors that are individuals should not complete this form and should complete the form entitled "Individual Self-Certification for FATCA and CRS".

***SECTION 1: ACCOUNT HOLDER IDENTIFICATION**

***Account Holder Name:** _____ (the "Entity")

Country of Incorporation or Organisation: _____

***Current 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 Specified U.S Person:**

Please tick either (a), (b) or (c) below and complete as appropriate.

(a) The Entity is a *Specified U.S. Person* and the Entity's U.S. Federal Taxpayer Identifying number (U.S. TIN) is as follows:

U.S. TIN: _____

☐

Or

(b) The Entity is **not** a *Specified U.S. Person* (please also complete Sections 3, 4 and 5)☐

Or

(c) The Entity is a US person but **not** a *Specified U.S. Person* (please also complete Sections 3, 4 and 5)☐

***Section 3: Entity's FATCA Classification** (the information provided in this section is for FATCA, please note your classification may differ from your CRS classification in Section 5):

3.1 Financial Institutions under FATCA:

If the Entity is a Financial Institution, please tick one of the below categories and provide the Entity's GIIN at 3.2 or indicate at 3.3 the reason why you are unable to provide a GIIN.

I.	Irish Financial Institution or a Partner Jurisdiction Financial Institution	<input type="checkbox"/>
II.	Registered Deemed Compliant Foreign Financial Institution	<input type="checkbox"/>
III.	Participating Foreign Financial Institution	<input type="checkbox"/>

3.2 Please provide the Entity's *Global Intermediary Identification number (GIIN)* _____

3.3 If the Entity is a *Financial Institution* but unable to provide a *GIIN*, please tick one of the below reasons:

I.	The Entity has not yet obtained a <i>GIIN</i> but is sponsored by another entity which does have a <i>GIIN</i> ∞ Please provide the sponsor's name and sponsor's <i>GIIN</i> : Sponsor's Name: _____ Sponsor's <i>GIIN</i> : _____ ∞NOTE: 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 <i>GIIN</i> with the IRS unless and until U.S. reportable accounts are identified.	<input type="checkbox"/>
II.	The Entity is an Exempt Beneficial Owner, Please tick and confirm the category of Exempt Beneficial Owner; I. <input type="checkbox"/> Government Entity II. <input type="checkbox"/> International Organisation III. <input type="checkbox"/> Foreign Central Bank IV. <input type="checkbox"/> Exempt Retirement Fund V. <input type="checkbox"/> Collective Investment Vehicle Wholly Owned by Exempt Beneficial Owners.	<input type="checkbox"/>
III.	Certified Deemed Compliant Foreign Financial Institution (including a deemed compliant Financial Institution under Annex II of the Agreement)	<input type="checkbox"/>
IV.	Non-Participating Foreign Financial Institution	<input type="checkbox"/>
V.	Excepted Foreign Financial Institution Indicate exemption: _____	<input type="checkbox"/>
VI.	The Entity is a Trustee Documented Trust. Please provide your Trustee's name and <i>GIIN</i> Trustee's Name: _____ Trustee's <i>GIIN</i> : _____	<input type="checkbox"/>

3.4 Non-Financial Institutions (Non-Financial Foreign Entity/NFFE) under FATCA:

If the Entity is not a Financial Institution, please confirm the Entity's FATCA classification below by ticking one of the below categories

I.	Active Non-Financial Foreign Entity (NFFE)	<input type="checkbox"/>
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II.	Passive Non-Financial Foreign Entity (NFFE)	<input type="checkbox"/>
I.	<input type="checkbox"/> Passive Non-Financial Foreign Entity with no Controlling Persons that are specified U.S. Persons.	
II.	<input type="checkbox"/> Passive Non-Foreign Financial Entity with Controlling Persons that are specified U.S. Persons. (If this is ticked, please include self-certification forms for each of your Controlling Persons)	
III.	Excepted Non-Financial Foreign Entity (NFFE)	<input type="checkbox"/>
IV.	Direct Reporting Non-Financial Foreign Entity (NFFE)	<input type="checkbox"/>
Please provide your GINN:		

***Section 4: Common Reporting Standard ("CRS") Declaration of Tax**
(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.

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 in a non-reportable Jurisdiction (i.e. Ireland or the USA)

Country of Tax Residency	Tax ID Number	∞If TIN unavailable Select (A, B or C) below

∞If a TIN is unavailable, please provide the appropriate reason A, B or C where indicated below:

☐ **Reason A** - The country/jurisdiction where the Account Holder is resident does not issue TINs or TIN equivalents to its residents

☐ **Reason B** - The Account Holder is otherwise unable to obtain a TIN (Please explain why you are unable to obtain a TIN if you selected Reason B)

☐ **Reason C** - No TIN is required. (Note: Only select this reason if the domestic law of the relevant country/jurisdiction does not require the collection of the TIN issued by such country/jurisdiction)

***Section 5: Entity's CRS Classification** (The information provided in this section is for CRS. Please note an Entity's CRS classification may differ from its FATCA classification in Section 3 above). In addition please note that the information that the Entity has to provide may differ depending on whether they are resident in a participating or non-participating CRS Jurisdiction. For more information please see the OECD CRS Standard and associated commentary.

<http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/common-reporting-standard-and-related-commentaries/#d.en.345314>

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.

<http://www.revenue.ie/en/business/aeoi/participating-jurisdictions.pdf>

I.	A Reporting Financial Institution resident in a participating CRS jurisdiction	<input type="checkbox"/>
II.	A Financial Institution Resident in a Non-Participating Jurisdiction <input type="checkbox"/> 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 in section 6 below and complete a separate individual self-certification forms for each of your Controlling Persons) <input type="checkbox"/> An Investment Entity resident in a Non-Participating Jurisdiction that is not managed by another Financial Institution <input type="checkbox"/> Other Financial Institution, including a Depository Financial Institution, Custodial Institution or Specified Insurance Company	<input type="checkbox"/>
III.	Non-Reporting Financial Institution under CRS. Specify the type of Non-Reporting Financial Institution below: <input type="checkbox"/> Governmental Entity <input type="checkbox"/> International Organization <input type="checkbox"/> Central Bank <input type="checkbox"/> Broad Participation Retirement Fund <input type="checkbox"/> Narrow Participation Retirement Fund <input type="checkbox"/> Pension Fund of a Governmental Entity, International Organization, or Central Bank <input type="checkbox"/> Exempt Collective Investment Vehicle <input type="checkbox"/> Trust whose trustee reports all required information with respect to all CRS Reportable Accounts <input type="checkbox"/> Qualified Credit Card Issuer <input type="checkbox"/> Other Entity defined under the domestic law as low risk of being used to evade tax. Specify the type provided in the domestic law: _____ _____	<input type="checkbox"/>

5.2 Non Financial Institutions 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 or Passive NFE.

I.	Active Non-Financial Entity (NFE) – a corporation the stock of which is regularly traded on an established securities market. Please provide the name if the established securities market on which the corporation is regularly traded: _____	<input type="checkbox"/>
II.	Active Non-Financial Entity (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 that the entity is listed on : _____	<input type="checkbox"/>
III.	Active Non-Financial Entity (NFE) – a Government Entity or Central Bank	<input type="checkbox"/>
IV.	Active Non-Financial Entity (NFE) – an International Organisation	<input type="checkbox"/>
V.	Active Non-Financial Entity (NFE) – other than those listed in I, II, III or IV above. (for example a start-up NFE or a non-profit NFE)	<input type="checkbox"/>

VI. **Passive Non-Financial Entity (NFE)**- (if this box is ticked, please also complete Section 6.1 below and indicate the name of all natural Controlling Person(s) of the Entity and complete a separate Individual Self-Certification Form for each of your Controlling Person(s)) ☐

**** Section 6: Controlling Persons**

NB: Please note that each Controlling Person must complete a Separate Individual Self-Certification form.

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

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

<http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/common-reporting-standard-and-related-commentaries/#d.en.345314>

Name of All Controlling Person(s) of the Account Holder:

If you have ticked sections 5.1 VI above, then please complete section 6.1 and 6.2 below:

6.1 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 (Controlling Person's) Self-Certification for FATCA and CRS for each Controlling Person listed in Section 6.1.

***Section 7: Declarations and Undertakings**

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

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

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

***Authorised Signature(s):**

***Print Name(s):**

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

***Date: (dd/mm/yyyy):** _____

Individual (Controlling Person's) Self-Certification for FATCA and CRS

Instructions for completion and Data Protection notice.

We are obliged under Section 891E, Section 891F and Section 891G of the Taxes Consolidation Act 1997 (as amended) and regulations made pursuant to those sections to collect certain information about each account holder's tax arrangements. Please complete the sections below as directed and provide any additional information that is requested. Please note that by completing this form you are providing personal information which may constitute personal data within the meaning of the General Data Protection Regulation (697/2016/EU) (the "GDPR") and applicable Irish data protection legislation (currently the Irish Data Protection Acts 1988 to 2018. Please note that in certain circumstances we may be legally obliged to share this information, and other financial information with respect to an account holder's interests in the Fund, with the Irish tax authorities, the Revenue Commissioners. They may in turn exchange this information, and other financial information with foreign tax authorities, including tax authorities outside the EU.

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

For further information on FATCA or CRS please refer to Irish Revenue website at <http://www.revenue.ie/en/business/aeoi/index.html> or the following link to the OECD CRS Information Portal at: <http://www.oecd.org/tax/automatic-exchange/> in the case of CRS only.

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

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

Sections 1, 2, 3 and 5 must be completed by all investors.

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

For further guidance see.

<http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/common-reporting-standard-and-related-commentaries/#d.en.345314>

*(Mandatory fields are marked with an *)*

***SECTION 1: INVESTOR 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 Of Birth

*Town or City of Birth: _____ *Country of Birth: _____

*Date of Birth: _____

***Section 2: FATCA Declaration of U.S. Citizenship or U.S. Residence for Tax purposes:**

Please tick either (a) or (b) and complete as appropriate.

☐ I confirm that **[I am]**/[the investor is] a U.S. citizen and/or resident in the U.S. for tax purposes and [my]/[its] U.S. federal taxpayer identifying number (U.S. TIN) is as follows:
OR

☐ I confirm that **[I am not]**/[the investor is not] a U.S. citizen or resident in the U.S. for tax purposes.

***Section 3: Common Reporting Standard (CRS) Declaration of Tax Residency/Residencies**
(please confirm all Tax Residencies)

Please indicate your country of tax residence (if resident in more than one country please detail all countries of tax residence and associated tax identification numbers ("TINs")). For further guidance please refer to the OECD CRS Information Portal (<http://www.oecd.org/tax/automatic-exchange/>).

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 in a non-reportable Jurisdiction (i.e. Ireland or the USA)

Country of Tax Residency	Tax ID Number	∞If TIN unavailable Select (A, B or C) and check box below

∞If a TIN is unavailable, please provide the appropriate reason **A, B or C** where indicated below:

- ☐ **Reason A** - The country/jurisdiction where the Account Holder is resident does not issue TINs or TIN equivalents to its residents
- ☐ **Reason B** - No TIN is required. (Note: Only select this reason if the domestic law of the relevant country/jurisdiction does not require the collection of the TIN issued by such country/jurisdiction)
- ☐ **Reason C** - The Account Holder is otherwise unable to obtain a TIN (Please explain why you are unable to obtain a TIN if you selected Reason C)

Section 4 – Type of Controlling Person

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

For joint or multiple Controlling Persons please complete a separate Self-Certification form for each Controlling Person

Please Confirm what type of Controlling Person applicable under CRS that applies to you/the investor 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) – protector-equivalent		
Controlling Person of a legal arrangement (non-trust) – beneficiary-equivalent		
Controlling Person of a legal arrangement (non-trust) – other-equivalent		

***Section 5: Declaration and Undertakings:**

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

I acknowledge 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 where any change in circumstances occurs which causes any of the information contained in this form to be incorrect.

Data Protection - Customer Information Notice:

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

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

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

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

Further information is available on the OECD website: <http://oecd.org/tax/automatic-exchange/>

And on the Irish Revenue website - <http://www.revenue.ie/en/business/aeoi/>

*Authorised Signature: _____

*Print Name: _____

*Date: (dd/mm/yyyy): _____

*Capacity: _____

SCHEDULE**Certification Requirements**

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

APPENDIX

PRIVACY NOTICE

Why are you receiving this notice?

The General Data Protection Regulation (“**GDPR**”) applies to the collection, processing and storage of personal data undertaken by organisations within the European Economic Area (EEA), as well as to organisations outside the EEA that handle personal data relating to the offering of services to individuals in the EEA.

The GDPR has two key purposes: (a) to set guidelines for the collection, processing and protection of personal data and (b) to give individuals certain rights in relation to their personal data (such as to access and correct it and object to further processing).

This privacy notice (the “**Privacy Notice**”) is intended to ensure that the investor or, where the investor is not an individual, the investor’s individual directors, officers, employees and/or owners (“**you**”, or “**your**”) are aware of how the ICAV may collect personal data, what is collected, what it is used for and with whom it is shared in accordance with the GDPR. Where the investor is not an individual, please provide a copy of this Privacy Notice to those individual directors, officers, employees and/or owners whose personal data the ICAV may process.

“Personal data” means any information relating to you, but does not include data where you can no longer be identified from it such as anonymised aggregated data.

The ICAV will be the data controller of your personal data provided in connection with your investment in the Fund. Each of the Investment Manager and the Manager may be a data controller in respect of certain activities undertaken in their respective roles as investment manager and UCITS Management Company of the ICAV (e.g. where undertaking marketing activities by making suggestions to you about products or services that may be of interest to you), but they will otherwise be data processors. A data controller is responsible for deciding how to hold and use personal data about you. The ICAV may process your personal data itself or through a third party such as the Administrator, the Investment Manager, the Manager and/or others acting as data processors on the ICAV’s behalf (each a “**Processor**”).

The ICAV may provide supplemental privacy notices on specific occasions when collecting or processing personal data about you so that you are fully aware of how and why your personal data is being used. These supplemental notices should be read together with this Privacy Notice.

If you have any questions about this Privacy Notice you can contact investors@sephira-em.com.

What information does the ICAV collect about you and what is it used for?

Personal data held by the ICAV or on the ICAV’s behalf may include, but is not necessarily limited to, your name, residential address, place of business, email address, other contact details, corporate contact information, signature, nationality, country of residence, place of birth, date of birth, tax identification, tax jurisdiction, employment and job history, education details, regulatory status, credit history, correspondence records, passport number, bank account details, certain financial information contained within KYC documents, source of funds and details relating to your investment activity or preferences.

The purposes for which the ICAV or its service providers on its behalf may collect, store and use personal data about you and the ‘lawful basis’ for processing such data are set out in the table below. The law specifies certain ‘lawful bases’ for which the ICAV is allowed to use your personal data.

Purpose	Lawful basis for processing
To undertake pre-investment steps, including, but not limited to: <ul style="list-style-type: none"> — determining your eligibility to invest in the ICAV; — required due diligence; and — ascertaining your investment preferences. 	In order to take steps prior to the contract between you and the ICAV, compliance with applicable legal obligations and the ICAV’s legitimate interests in establishing your preferred investment strategies.
To undertake business development and marketing activities.	The legitimate interests of the Investment Manager and/or the Manager in promoting their products and services and growing their businesses. Individuals can opt-out of receiving such messages at any time by contacting investors@sephira-em.com

To facilitate the opening of accounts with the ICAV, the management and administration of each investment in the relevant Fund(s) of the ICAV and any related account on an on-going basis as considered necessary or appropriate for the performance of a contract with the ICAV, including without limitation the processing of subscription, redemption, conversion and transfer requests and the payment of distributions.	The performance of your contract with the ICAV as an investor.
To carry out anti-money laundering checks and related actions considered appropriate to meet any legal obligations relating to the prevention of fraud, money laundering, terrorist financing, bribery, corruption, tax evasion and the provision of financial and other services to persons who may be subject to economic or trade sanctions, on an on-going basis, in accordance with the ICAV's anti-money laundering procedures.	Compliance with applicable legal obligations and the ICAV's legitimate interests in complying with law and regulation applicable to the ICAV and its Processors.
To report tax related information to tax authorities (including, by way of example, the information provided in your CRS self-certification form).	Compliance with applicable legal obligations.
Corresponding with parties such as the Investment Manager, the Manager, the Administrator, the depositary, auditor, legal counsel and other service providers of the ICAV, the Investment Manager and/or the Manager such as regulatory authorities to comply with any legal obligation imposed on the ICAV, the Investment Manager, the Manager and/or the Administrator or in order to pursue the legitimate business interests of the ICAV, the Investment Manager, the Manager and/or the Administrator.	Compliance with applicable legal obligations. The legitimate interests of the ICAV, the Investment Manager, the Manager and the Administrator in conducting their business in a proper manner.
Monitoring and recording calls and other communications related to the processing and verification of instructions, quality and business analysis, compliance with applicable laws and regulations, maintaining the ICAV's, the Investment Manager's, the Manager's and the Administrator's rights and responsibilities directly or through third party delegates.	The legitimate interests of the ICAV, the Investment Manager, the Manager and the Administrator in maintaining relations with investors and in conducting their business in a proper manner. Compliance with applicable legal obligations.
To maintain the ICAV's records and carry out fee calculations.	The performance of your contract with the ICAV as an investor. The legitimate interests of the ICAV, the Investment Manager, the Manager and the Administrator in complying with their contractual obligations and conducting their business in a proper manner.
To provide investor relations in respect of the ICAV, including provision of periodic reporting, seeking consents for changes to the ICAV's (or the relevant sub fund's) terms and for other corporate governance purposes.	The performance of your contract with the ICAV, the Investment Manager and/or the Manager as an investor. Compliance with applicable legal obligations.

In addition to the uses above, please note that the ICAV may also process your information where required by law to do so or if it reasonably believes that it is necessary to protect its rights and/or to comply with judicial or regulatory proceedings, a court order or other legal process.

Special categories of personal data

There are more limited bases for processing special category personal data. This is personal data which reveals or contains racial or ethnic origin, political opinions, religious and philosophical beliefs, trade union membership, genetic data, biometric data, health data, sex life and sexual orientation.

The ICAV does not intend to actively collect special category data about you. Whilst the ICAV will use reasonable efforts to limit its holding of such data, please be aware that the ICAV may hold such data incidentally. For example, where:

- you volunteer special category data to the ICAV or one of its Processors, such as if you send an email containing special category data;
- documents gathered for legal / regulatory purposes containing special category data, such as a passport copy which references ethnic origin or a due diligence search from public sources which includes special category data.

What if you do not provide the personal data requested?

In some circumstances, if you do not provide the ICAV with certain information when requested, the ICAV may be limited or restricted in its ability to deal with you and may in some cases be prevented from complying with its legal obligations. Where the ICAV requires your personal information to comply with anti-money laundering or other legal requirements, failure to provide this information means the ICAV may not be able to accept you or retain you as an investor.

Change of purpose

The ICAV will only use your personal data for the purposes for which it was collected (as identified above in the 'Purpose' column above), unless it reasonably considers that such data needs to be used for another reason which is compatible with the original purpose. If the ICAV needs to use your personal data for an unrelated purpose, the ICAV will notify you and explain the legal basis relied upon.

How is this information collected?

The ICAV typically collects personal data about you when you provide information to the ICAV or others acting on the ICAV's behalf (such as the Investment Manager, the Manager, the Administrator or other service providers to the ICAV) when communicating or transacting with the ICAV in writing, electronically, or by telephone. For instance, applications, requests for ICAV documentation or other forms of literature, your transactions and account positions.

In addition, the ICAV may receive personal information about you from third parties, such as:

- public sources or information vendors;
- your bank;
- your legal, financial, tax or other professional advisers;
- introducers, distributors or other intermediaries who market or provide services to you.

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With whom will your information be shared?

The ICAV may share your personal data with a third party where this is required by law, where it is necessary to perform the contract with you, or where the ICAV has another legitimate interest in doing so.

The ICAV or its Processors may need to share your personal data with:

- the Investment Manager, the Manager and members of the Capitalworks group;
- the Administrator and its affiliates;
- professional advisers including lawyers, bankers, auditors and insurers to the extent such information is relevant to their performance of their services;
- regulators;
- tax authorities;
- custodians/depositaries;
- trading counterparties;
- parties undertaking anti-money laundering checks; and
- any of the ICAV's other service providers where such information is relevant to their performance of such services.

Where your investment in the ICAV was sold, introduced, distributed or otherwise arranged by an introducer, distributor or other intermediary, the ICAV may share information on your holdings in the ICAV with that introducer, distributor or other intermediary.

•

The ICAV may also need to share your personal data with a regulator or to otherwise comply with applicable law or judicial process or if it reasonably believes that disclosure is necessary to protect its rights and/or to comply with judicial or regulatory proceedings, a court order or other legal process.

The ICAV or its Processors may transfer the personal data collected about you to certain non-EEA countries, including in particular The United States of America, where the parties listed above are based for the purposes outlined in the table above. Those countries may not have the same standard of data protection laws as the EEA.

Where this is the case, the ICAV will (or will require a Processor to) put in place appropriate safeguards such as the EEA-approved standard contractual clauses to ensure that your personal data is treated in a manner that is consistent with and respects the EEA laws on data protection. If you require further information about this you can request it from investors@sephira-em.com.

How long will your information be retained?

The ICAV will retain your personal data for as long as necessary to fulfil the purposes for which it was collected, including for the purposes of satisfying any legal, regulatory, accounting or reporting requirements and the ICAV's legitimate interests in maintaining such personal data in its records.

This will normally include any period during which the ICAV is dealing or expects to deal with you and what the ICAV considers to be a suitable period thereafter for internal record-keeping purposes. In doing this the ICAV will have regard to the amount, nature, and sensitivity of the personal data, the potential risk of harm from unauthorised use or disclosure of your personal data, the purposes for which the ICAV processes your personal data and whether those purposes can be achieved through other means, and the applicable legal requirements. Generally, the ICAV will keep information relevant to its dealings with you for seven years following full redemption (or longer if required by applicable laws and regulations).

In some circumstances your personal data may be anonymised so that it can no longer be associated with you, in which case it is no longer personal data.

Once the ICAV no longer requires your personal data for the purposes for which it was collected, it will securely destroy your personal data in accordance with applicable laws and regulations.

Accuracy of information

It is important that the personal data held about you is accurate and current. Please let the ICAV at investors@sephira-em.com know if your personal data held by the ICAV changes during your relationship with the ICAV.

Your rights in relation to your information

You have rights as an individual which you can exercise in relation to the information held about you under certain circumstances. These rights are to:

- request **access** to your personal data (commonly known as a “data subject access request”) and request certain information in relation to its processing;
- request **rectification** of your personal data;
- request the **erasure** of your personal data;
- request the **restriction** of processing of your personal data;
- **object** to the processing of your personal data; and
- request the **transfer** of your personal data to another party.

In exercising your rights above, you may be required to redeem/withdraw (as applicable) from the ICAV.

If you would like to exercise one of these rights please contact investors@sephira-em.com.

You also have the right to make a complaint at any time to a supervisory authority for data protection issues.

Fees

You will not usually have to pay a fee to access your personal data (or to exercise any of the other rights). However, the ICAV may charge a reasonable fee if you request additional copies. In addition, the ICAV may refuse to comply with your request if it is unjustified or excessive.

What the ICAV may need from you

The ICAV may need to request specific information from you to help confirm your identity and verify your right to access the information (or to exercise any of your other rights). This is another appropriate security measure to ensure that personal data is not disclosed to any person who has no right to receive it. The ICAV may also request that you specify your request within the right of access regarding specific data processing or kind of information, if we are processing a large volume of information.

Right to withdraw consent

In the limited circumstances where you may have provided your consent to the collection, processing and transfer of your personal data for a specific purpose, you have the right to withdraw your consent for that specific processing at any time. To withdraw your consent, please contact investors@sephira-em.com. Once the ICAV, the Investment or the Manager, as applicable, has received notification that you have withdrawn your consent, the ICAV will no longer process your information for the purpose(s) to which you originally consented unless the ICAV is required to retain your data for a legal or regulatory purpose.

Changes to this privacy notice

The ICAV reserves the right to update this Privacy Notice at any time, and will make an updated copy of such Privacy Notice available to you and notify you when any substantial updates are made. The ICAV may also notify you in other ways from time to time about the processing of your personal data.

Further information

This Privacy Notice was written with brevity and clarity in mind and is not an exhaustive account of all aspects of the ICAV's collection and use of personal data. If you require any further information, please do not hesitate to contact investors@sephira-em.com.

Sephira GEM UCITS ICAV (the "ICAV")
Redemption Form

Please complete this form in blue or black ink using BLOCK CAPITALS:

Mailing Address
 C/o Apex Fund Services (Ireland) Limited
 Transfer Agency Department
 2nd Floor, Block 5
 Irish Life Centre
 Abbey Street Lower
 Dublin D01 P767
 Ireland
 Tel: + 353 1 411 2949
 Email: transfer.agency@apexfs.com

Defined terms used in this Redemption Form are those used in the Application Form (unless otherwise defined in this Redemption Form or the context otherwise requires).

Shares will be redeemed on the terms and conditions set out in this Redemption Form, the Application Form, the Instrument of Incorporation and the Prospectus and the relevant Supplements.

If the Redemption Form is not completed to the satisfaction of the Administrator, the redemption may not be processed.

REGISTERED FUND INFORMATION

Registered Account Name

Account Number

Your Company contact

Name:

Phone No:

Fax No:

E-mail Address:

DEAL INSTRUCTIONS

Amount to be redeemed Amount

Shares

I. Amount in words

Name of Fund
 (i.e. sub-fund of the ICAV)

II.

Share Class

ORIGINATING BANK DETAILS

III.

IV. Bank Name

V.

VI. Bank Address

Sort Code

ABA

Swift (BIC) code

Account Name

Account Number

Payment reference

Correspondent

Name:
Swift (BIC) Code:

Bank & Swift Code

F.F.C to

Account Name

Account Number

Any redemption proceeds paid in currencies other than the Base Currency of the relevant Fund or the designated currency of the relevant Class will be converted into that currency at prevailing exchange rates. This foreign exchange transaction will be arranged by the Administrator at the cost and risk of the relevant investor.

Note:

Payment of redemption proceeds/other payments due to investors will be made to the same account from which the subscription monies are remitted.

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 original instruction which has been duly authorised. In the case of joint accounts, instructions will only be made upon receipt of instruction duly signed by all applicants.

PLEASE NOTE:

- I/We confirm that I/we have the authority to make this redemption request.
- I/We hereby agree to indemnify and hold harmless the Administrator, the Manager and the Investment Manager, on their own behalf and as agents for the ICAV and its respective directors, officers and employees against any loss, liability, cost or expense (including without limitation legal fees, taxes and penalties) which may result directly or indirectly, from any misrepresentation or breach of any warranty, condition, covenant or agreement set forth herein or in any document delivered by me/us to the ICAV or the Administrator. The Administrator will not be responsible or liable for the authenticity of instructions received from me/us or any authorised person and may rely upon any instruction from any such person representing himself to be a duly authorised person reasonably believed by the Administrator to be genuine.
- I/we confirm that I/we have the right and authority to request subscription, redemption or repurchase of Shares and confirm that I/we have complied with the subscription, redemption and repurchase procedures set out in the Prospectus and the relevant Supplement.
- I/We hereby confirm that all confirmations, representations, declarations, indemnities and warranties made or given by me/us in the Application Form continue to be accurate and complete and apply to this redemption of Shares, and all subsequent redemptions of Shares, by me/us of the ICAV.

Authorised Signatories

Print Name

Signatory 1

Signatory 2

Signatory 3

Signatory 4

Date

**Sephira GEM UCITS ICAV (the "ICAV")
Additional Subscription Form**

Please complete this form in blue or black ink using BLOCK CAPITALS:

Mailing Address
C/o Apex Fund Services (Ireland) Limited
Transfer Agency Department
2nd Floor, Block 5
Irish Life Centre
Abbey Street Lower
Dublin D01 P767
Ireland
Tel: + 353 1 411 2949
Email: transfer.agency@apexfs.com

Defined terms used in this Additional Subscription Form are those used in the Application Form (unless otherwise defined in this Additional Subscription Form or the context otherwise requires).

The undersigned holder of Shares in a Fund of the ICAV wishes to make an additional subscription for Shares in the relevant Fund.

REGISTERED INFORMATION

Registered Account Name

Account Number

Your Company Contact

Name:

Phone No:

Fax No:

E-Mail Address:

DEAL INSTRUCTIONS

Amount to be invested

Amount

Amount in words

Name of Fund

(i.e. sub-fund of the ICAV)

Share Class

ORIGINATING ACCOUNT DETAILS

Bank Name

Bank Address

Sort Code

IBAN:

Swift (BIC) Code:

Reference Code:

Account Name

Account Number

Payment Reference

Subscription monies should be received by wire transfer in cleared funds by the relevant Settlement Day as set out in the relevant Supplement in the currency of the relevant Shares. The Administrator may, at its discretion, accept payment in other currencies, but such payments will be converted into the currency of the relevant Share class at the then prevailing exchange rate and any conversion expenses shall be borne by the Shareholder. This may result in a delay in processing the application.

A request to change bank account details MUST BE MADE IN WRITING TO THE ADMINSTRATOR AND MUST BE ACCOMPANIED BY A BANK statement or banker's reference.

PLEASE NOTE:

- Monies must originate from the account of the investor.
- Failure to complete these details accurately and in accordance with the original signed Application Form and forward monies within the relevant settlement time scale may result in the loss of good value and an interest claim from the relevant Fund.
- I/We confirm that I/we have the authority to make this investment.
- I/We confirm that I/We have received and read the information contained in this form and confirm that a copy of the Key Investor Information Document has been supplied to me/us in relation to the relevant Fund or Class. I/We confirm that I/We have read the Key Investor Information Document. I/We also acknowledge and agree that the updated KIID for each Class is available from [] and that I/we will read and review the most up-to-date version of the relevant KIID prior to making any subsequent application for Shares in the Fund. I/We confirm that any future investments to any other Fund or Class can also be transacted based on this confirmation.
- I/We hereby agree to indemnify and hold harmless the Administrator, on its own behalf and as agent for the ICAV, and its directors, officers and employees against any loss, liability, cost or expense (including without limitation legal fees, taxes and penalties) which may result directly or indirectly, from any misrepresentation or breach of any warranty, condition, covenant or agreement set forth herein or in any document delivered by me/us to the ICAV or the Administrator. The Administrator will not be responsible or liable for the authenticity of instructions received from me/us or any authorised person and may rely upon any instruction from any such person representing himself to be a duly authorised person reasonably believed by the Administrator to be genuine.
- I/we confirm that I/we have the right and authority to request subscription, redemption or repurchase of Shares and confirm that I/we have complied with the subscription, redemption and repurchase procedures set out in the Prospectus and the relevant Supplement.
- I/We hereby confirm that all confirmations, representations, declarations, indemnities and warranties made or given by me/us in the Application Form continue to be accurate and complete and apply to this additional subscription for Shares.

Authorised Signatories

Print Name

Signatory 1

Signatory 2

Signatory 3

Signatory 4

Date